Single Mother, Migrant Domestic Workers:
Exploring the coping experience of low-income Zimbabwean women raising their children in South Africa

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Abstract

Zimbabweans are the largest migrant group in South Africa, and many of them are women who end up working informally as domestic workers (DWs). This study investigated the way that Zimbabwean single mother migrant domestic workers (MDWs) experience and cope with the burden of care. Specifically, it looks at women who have decided at some point in their migrancy experience to bring their children to raise in South Africa. The purpose of this research was to understand how they are managing to care for their children given their circumstances, and why they have chosen to do so as a family unit in South Africa rather than mothering from a distance - the norm as shown in international and Southern African migration literature on DWs. Due to financial troubles and social isolation associated with migrancy, single motherhood, and domestic work, their ability to cope with the burden of care is limited. This study is rooted in the theory that mothering in not a universal path, and that every woman will approach it differently based on her own familial, financial, cultural, racial, and personal circumstances that determine how she is able to practice mothering. This was a qualitative study and data was gathered via semi-structured, in-depth interviews from a purposively-snowballed population sample of 13 women. This study found that the support networks of Zimbabwean single mother MDWs are actually quite limited, contrary to the existing literature base which highlights social support in migrant coping experiences. The social support that they receive - such as emotional support and/or informally compensated reciprocal child-watching arrangements - relieves some burden, but is insufficient, thus their childcare options are insufficient. Their coping mechanisms are primarily emotion-focused, individual activities to tolerate their hardships, such as crying or listening to gospel music, because there are no practical solutions at this time. Choosing to bring their children to South Africa is a coping mechanism in itself which aims to reduce expenses associated with remittance and to alleviate the pain of family separation. Their deviation from the traditional Southern-African migrant norm of mothering from a distance indicates the possibility of evolving notions of motherhood and family in migrant and single parent contexts, as women follow their own individual paths in facing their unique circumstances of the burden of care. The findings of this study have serious implications for family and child welfare. Understanding single mother migration patterns is very important, and research in this area, like this study, may someday be able to inform policy, guide NGOs, and help to generate solutions for women facing a disproportionate burden of care.

Key Terms

Domestic Work, Domestic Worker (DW), Migrant/Migrancy, Migrant Domestic Worker (MDW), Burden of Care, Coping, Problem-based coping, Emotion-focused coping, Support Network, Practical support, Emotional support

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Chapter 1 - Introduction to the Study

1.1 Introduction

When I first arrived in Cape Town for a study abroad term in 2017, I was shocked to find that the program provided my group with a domestic worker (DW) to clean our flat three days per week. I couldn't understand how the cost of a maid was feasible within our program fees. This was how I learnt how little income DWs make in South Africa. I later moved here and chose to employ a part-time DW to allow myself more time to rest and study to help me focus on my degree. She was from Zimbabwe and a single mother to three children. I got to know her, and she told me about some of her experiences and hardships. I started noticing a pattern as I spoke with my friends about their DWs. Most of the people I know here employ migrant domestic workers (MDW), primarily Zimbabwean women. Many of them are single mothers.

Single motherhood was never a theme in my own life. I grew up with happily married parents. My father worked, and my mother was primarily a homemaker. I remember my mom often being tired from her household and familial duties. I didn't understand how much work caring for a house was until I went to college and had to cook, clean, do laundry, and manage a household for myself – this felt like a form of *work*. Getting to know my DW, I wondered how this woman could make a long commute, work all day, make the commute home again, and then start over again by beginning her own parental and household duties every single day – and without a partner to share those duties with.

I embarked on this research intending to understand how Zimbabwean migrant single mothers in South Africa who are employed as DWs are coping with the burden of care as low-income [1]precarious workers. I wanted to learn how they are supporting themselves (financially,

[1] For this study, 'low-income' is considered as making less than a 'living wage'. A living wage enables people to a "frugal but dignified standard of living" where they can afford food, water, housing, education, healthcare, transport, clothing and other needs (BusinessTech 2022). A living wage is typically higher than the minimum wage (Kagan 2022). The South African national minimum wage for 2021 was R21,69, equating to R3,470.40 per month based on a 40-hour work week (Trading Economics). A statistical analysis by the Southern African PwC estimates a living wage in South Africa for an individual is between R5,582 and R9,648 per month, while a family of four will need between R6,972 and R12,756 per month (BusinessTech 2022). As is evident, the South African minimum wage can not be considered a living wage for an individual, let alone for a family. The women who participated in this study all make an income approximate to but more often less than the South African minimum wage and are supporting multiple children. By this analysis, they are considered low-income individuals.

logistically, and emotionally). I also wanted to understand their motivations to bring their children to South Africa. Why do they choose to cope with the direct burden of care and other parental stressors when the existing literature signified that it is common practice – and preferable - to leave their children in Zimbabwe with kin (Zack et al. 2019; Gorfinkiel 2011)?

With the extensive range of meanings that the word 'mothering' carries in contemporary times, it is pertinent for this research to specify that I view mothering from the perspective of the practice of care. This study focuses on single motherhood in the sense of the immediate family and the mother's experience in raising those children while trying to earn a living.

As a result of this research, I argue that the scope of social support available within migrant communities has been overestimated in previous literature. Coping for my research population is not a social activity but a personal practice that aims at being okay with the way things are when the improvement of one's circumstances is out of reach. This is because access to typical coping mechanisms can be a matter of privilege.

In the process of this research, I felt a great urgency to share the narratives of these women and hopefully inspire further academic interest that can lead to greater forms of support for them in the future.

1.2 Background

1.2.1 Mothering and the burden of care

In the words of Kathleen Barlow and Bambi Chapin (2010), mothering is "crucial to the transmission of culture, the development of enculturated persons, the constitution of kinship, family, and household, and the reproduction of society." (p. 324). The first thing that might come to mind when one hears the term "mothering" is the physical actions of being a mother and attached expectations of character for the role, like placing one's children before oneself, being warm and nurturing, and being a homemaker (Bernard and Correll 2010, Kricheli-Katz 2012). Thus, mothering is the act of caring – or, being a caregiver. This inherently places any mother under what is known as the burden of care, defined as the physical, emotional, social, and financial costs/obligations that a caregiver faces (O'Neill and Ross 1991; Chou 2000; Walker 2018). Someone facing the burden of care generally will experience burden in all of these realms (physical, emotional, social,

and financial) at different times and/or consecutively (Chou 2000). A child's need for care and attention inherently leads to a parent experiencing stress, anxiety and fatigue (Chou 2000).

Caregivers will feel the burden of care more or less depending on personal factors like gender, migrancy status, race, socioeconomic status and marital status (Chou 2000). These same factors can influence their ability (or non-ability) to sufficiently cope with the burden of care because they can affect a caregiver's access to coping resources. Coping resources can be defined as external pillars of support one can use when they need help managing a burden (Walker 2018; Taylor and Stanton 2007). Examples of coping resources include social support from family, friends and peers, support groups, diaspora, informal credit systems, and personal creative endeavours (Broussard, Joseph & Thompson 2012). The burden that any caregiver faces will evolve over time as the needs of the care receiver change. For example, a child will require less physical care as they grow older, but likely will need more emotional support and have more expenses that need to be covered (Chou 2000; Moore 2020).

For a mother, the burden of care can present as having to provide physical care like bathing or diaper changes, providing emotional support, financing the household, dealing with family conflict, or having restrictions in the mother's social activity (Chou 2000). The burden on mothers in South Africa is felt much more strongly by African women because they are the ones completing the majority of the nation's social reproductive labour (Walker 2018; Ichou 2006, Benya 2015, Moore 2020). Rebecca Walker's 2018 writing on migrant mothers living in Johannesburg describes the migrant experience of living with unemployment and/or low wages up against the demanding needs of their children's care. In the context of South Africa, migrant mothers' burden of care is escalated by fear of raising their children in an environment with high rates of violence and crime, as well as xenophobic sentiment held by many South Africans against other Africans (Walker 2018; Chapman, Zhu & Wu 2013). This burden can create heightened mental distress, and suicidal thoughts are common for these mothers (Walker 2018). The burden of care would presumably be immensely higher on a single mother supporting her children as a single parent, and particularly one with a low/precarious income - for instance, one working as a DW. For Zimbabwean migrant mothers, the burden of care is augmented by the common

additional burden they carry as providers of remittance for family and kin living back home in Zimbabwe, where the depressed socioeconomic state of things leaves many living in poverty and lacking access to sufficient basic resources (USAID 2020; Moore 2020)[2].

1.2.2 Domestic work and the burden of care

Black women working in the informal sector - commonly known as DWs in South Africa - face a disadvantageous burden of care because they are doing more reproductive labour overall, yet have fewer resources (like money and food) to supply care for their own children and fill their own domestic needs (Moore 2020, Walker 2018, Christopher 2012). Shireen Ally's *From Servants to Workers* (2009) addresses this disparity in provision-of versus consumption-of social reproductive labour in South Africa:

> "Structured by the post-apartheid equation of state, family, and market in the responsibility and provision of care, white, urban, and middle-class women were able to secure a "private" *market* solution to their caring needs, while mainly black, rural, and poor women relied on "private" *familial* provision for their care work. In this distinctive "political economy of care," the inequalities of race, class, and the urban/rural divide were reinforced by the very efforts of the state to craft political inclusion for domestic workers."

This political economy of care which Ally mentions would refer to how the social state of the country determines how people are managing their resources to care for their families. Africa's oppressive, racial history has shaped the caring practices in black women's mothering experiences by fragmenting the family, and their burden of care is exceptionally higher than that of a white and/or wealthier woman (Christopher 2012). Based on the topics addressed in the sections above, the next assumption would be that this burden is even higher for a single mother, especially a migrant, as these women's intersectional identities appear to vastly affect their burden of care and their coping abilities for such. We know that many of these women leave their children in the home country/province with kin, decreasing their direct day-to-day burden of care (Jansen 2019; Zack et al. 2019), but what

[2] This topic is expanded on in section 1.2.4 and section 2.3.2.

about the migrant single mothers who choose to keep the family unit together and care for their children 'on their own' in their host country while also working to support themselves? This leads to the need to explore how they are coping under such an immense burden.

Thus, caregiving can mean very different things for two different women in a society such as South Africa, which continues to be a vessel for great inequality, especially considering it has its roots in slavery. During early Dutch settlement, domestic work in the Cape was reserved for servants who were initially white women from Europe (Jansen 2019). When these women eventually married settler men and became madams, their domestic task loads were shifted onto black slaves (Jansen 2019). Even after slavery was abolished, the deeply racist, sexist, dehumanising associations with domestic work have remained. That is why we see primarily black women completing domestic work for extremely low wages today (Ally 2009; Jansen 2019). Shireen Ally claims that paid domestic work is still hardly recognised as legitimate employment by many because of its "extension of [black] women's seemingly 'natural' roles" (2009, p. 3).

Despite South Africa's post-apartheid attempts at creating equality of opportunity and fair working conditions for all, minimum wage laws and labour regulations in the country have not succeeded at ridding the economy of under the table, unethical, hierarchal working arrangements (Jansen 2019). This goes especially for DWs in private homes where there is little oversight and protection for workers, particularly for migrant workers who may be undocumented, desperate and willing to working informally for lower wages. It is even more drastic for Zimbabwean migrant women who are systematically disadvantaged by Zimbabwe's continued unstable economy and political sphere from which they came, as well as facing hardships of being not only a migrant worker, but being so in a reputedly xenophobic-to-other-Africans South Africa.

1.2.3 Migrant domestic working mothers

Migrants, both intranational and cross-border, are a key part of the domestic work landscape in South Africa (Ally 2009a). There is a vast literature which displays the history of migration for labour beginning with the mining industry, and thus the fragmentation of

the family that has been occurring in South (and Southern) Africa for a long time as people have migrated seeking work (Cock 1980, Mkhize and Msomi 2016). This has created a pattern of female-headed households and patterns of mothering from a distance (Cock 1980, Ally 2009a). A female-headed household is a household structure in which there are either no adult men or the adult men present are not the primary breadwinners and decision-makers (Mbokazi 2019; Moore 2020). In these households, in the words of Elena Moore, "Women respond and are attentive to the need for financial and practical care and act as the shock absorbers for not only social reproduction but the financing of social reproduction." (2020, p. 55). Historically, female breadwinners who have had to mother from a distance in South Africa did not do so by choice. Black working women had to be permitted to enter white areas for work during apartheid - they were forced to leave their children behind and work as live-in domestics under the racist and oppressive pass-law system (Cock 1980, Ally 2009a). Even today, due to socioeconomic circumstances, many DWs feel that the best thing for their families is to mother from a distance and send remittances to support their children back home (Moore 2020, Gorfinkiel 2011). However, there are increasingly more MDWs who are making the decision to bring their children with them on their migrancy journey rather than mothering from a distance (Finos 2019). In particular, more Zimbabwean women are migrating to South Africa with their children today than previously (Finos 2019).

Literature on precarious and migrant female workers in South Africa often tends to focus on the employer-employee relationship and labour legislation tensions (Cock 1980, Ally 2009a). There is a need to uncover more about migrant domestic working women in the personal home and familial context. This includes women who choose not only to live out from their workplace but also to keep their family unit whole and migrate with their children - particularly so when these women are single mothers.

1.2.4 Zimbabwean migrant workers

Zimbabwe has had a tense socioeconomic and political climate for the last few decades due to unsuccessful post-independence nation-building by often-unreliable leadership following a dark colonial period (Moyo & Kawewe 2009; Zhou & Hardlife

2012). Though government during this time aimed for inclusivity and progress, development overlooked many marginalised groups, and later, foreign-led ESAPs (Economic Structural Adjustment Programmes) pushed Zimbabwe's government to initiate neoliberal agendas and reduce government spending (Zhou & Hardlife 2012; Duri 2016). This diminished much needed social welfare going to citizens, created massive inflation of local currency which augmented poverty (Zhou & Hardlife 2012; Duri 2016). Poorly implemented land repatriations, in addition to environmental stressors, have led to agricultural collapse, and presently, Zimbabwe is home to poverty, hunger, unemployment, governmental corruption and political violence. (Zhou & Hardlife 2012; Moyo & Kawewe 2009; Duri 2016; USAID 2020). There is a widespread and heavy feeling of lack of opportunity among Zimbabweans. This climate has led to many Zimbabweans desiring to emigrate in search of better lives and incomes. South Africa shares a land border with Zimbabwe, and being the economic powerhouse of the African continent, it becomes an obvious choice destination for many emigrating Zimbabweans.

For the reasons stated above, South Africa has faced mass flows of Zimbabwean migrants starting at the end of the 20th Century (Duri 2016). Zimbabwean migrant women make up a sizable portion of the domestic work landscape in South Africa (Vanyoro 2019a; Ally 2009a). It is reasonable to assume that many of these women are mothers – and many single mothers. In fact, it is estimated that the probability of a Zimbabwean woman becoming a single mother by the age of 45 is 68.8 per cent (Clark and Hamplová 2013).

1.3 Research Question

A qualitative research design (specifically in-depth interview) was used to understand how Zimbabwean single mother MDWs experience and cope with the burden of care. The primary research question was:

What coping methods are utilised to manage the burden of care that is present for Zimbabwean migrant live-out domestic workers who are engaging with single motherhood?

The sub-questions were:

1. What are their motivations to cope and raise their families in South Africa instead of leaving them back home with kin?
2. What coping strategies do these women rely on to raise their children?
3. What support systems are available for them to depend on for childcare?
4. How do they care for their children when they go to work?

1.4 Rationale

This study is significant because it contributes crucial information which improves and updates the existing knowledge base on Zimbabwean migrant workers and single mothers in South Africa. By drawing attention to this group of women in South Africa, I aim to contribute to a deeper understanding of the interplay of motherhood, gender roles, and the migrant economy in South Africa. I also aim to provide insight on single motherhood in the precarious Zimbabwean migrant context of South Africa.

There is a robust body of knowledge on social reproductive labour and domestic work in South Africa (du Toit 2020; Jansen 2019; Moore 2020; Ally 2009a&b; Cock 1980), but due to the historical context of South Africa and how it has shaped migrancy, care practices, and domestic work practices, less is known about newer, unique stressors and coping mechanisms that several of these women are encountering as they reshape the DW familial landscape by migrating *with* their children. Additionally, the focus has primarily been on labour legislation and the at-work context rather than on the MDWs' personal/family lives and experiences.

There is a solid understanding of family and motherhood in South(ern) Africa (Hatch and Posel 2018; Clark and Hamplová 2013;), however, single motherhood has received limited attention (Mbanefo et al. 2013). Existing research on single motherhood in South Africa has been focused on themes like poverty (Mkhize and Msomi 2016) or parental child support legislation (Hatch and Posel 2018) rather than on the lived family experience.

Literature on Zimbabwean migrant mothers in South Africa generally speaks with the understanding that the children are living in Zimbabwe with kin, not in SA with the mother (Zikhali 2016; Ally 2009a; (Moore 2020, Gorfinkiel 2011; Cock 1980). Shuvai Finos (2019) has explored the Zimbabwean migrant family experience when children live with their parents in South Africa.

It points to a growing trend but focuses primarily on nuclear families and does not explore the nuances of single motherhood. My research topic aims to address the gap in the existing literature. This study is also important beyond adding to a body of literature; it will shed some light on a community that contributes massively to the South African economy yet is highly invisible due to their migrant status and (often informal) employment in social reproductive labour. My research population is exposed to a high number of burdens based on their amalgamation of identity as black people, women, mothers, single mothers, precarious workers, migrants, and low-income earners. They deserve to have their experiences looked into so that further research and interest can someday lead to creative solutions for their woes.

1.5 Overview of Chapters

Chapter 1 introduces my study by providing background on the topic and research population. The research questions are located within a qualitative research method. The study's contribution to the existing body of knowledge is rationalized particularly by locating single motherhood within the literature on Zimbabwean, migrant, precarious/DWs in South Africa.

Chapter 2 outlines my literature review. The existing knowledge relevant to my research population is highlighted and further displays the gaps present regarding Zimbabwean single mother MDWs in South Africa. This is all contextualized in larger global patterns of precarious work and migration, which contribute to the burden of care. A theoretical framework is also formed here, which considers motherhood a non-universal practice influenced by aspects like race and social class.

Chapter 3 dissects my decision to carry out this research as a qualitative study via in-depth interviewing followed by thematic analysis and guides the reader through the steps and considerations for such.

Chapter 4 presents the findings according to the thematic categories which were found as a result of this study.

Chapter 5 discusses the findings and main takeaways within the theory and literature, which formed the basis for my research interest.

Chapter 6 concludes and summarises the study. Limitations and further research suggestions are noted.

1.6 Conclusion

This chapter has introduced the reader to single motherhood in the context of Zimbabwean MDWs living in South Africa. The significance of the study has been justified

by highlighting how this topic has not been addressed in-depth in the existing literature and identifies how this population is marginalized and deserves attention. The chapters have been summarised to prepare the reader for their structure and content. The following chapter is the literature review, which will paint a detailed and comprehensive picture of the background on the relevant topics, such as domestic work and single motherhood, and help us understand the research population before we come to the interview data.

Chapter 2 - Literature Review

2.1 Introduction

The literature review consists of six primary topics broken down into important sub-topics that support these. First, I depict my theoretical/conceptual framework which ponders Western versus non-Western mothering styles and traditional notions of ‘motherhood’, as well as looking at different ways which mothers are able to participate in mothering based on their personal circumstances. Secondly, I address the topic of migration in South Africa. Migration between Zimbabwe and South Africa is outlined, and the relationship between migration and the informal sector, gender, family, and associated challenges are addressed. Thirdly, domestic work is discussed in relation to social reproductive labour and placed in context with migrancy, labour force attachment, and types of capital. Fourthly, single motherhood is addressed. Single motherhood is discussed in relation to South Africa and Zimbabwe, and is challenged as a concept rooted in traditional notions of motherhood and family. Fifthly, the burden of care is defined, and its relationship with informal, low-wage employment is explained. Lastly, we look at coping with the burden of care. Two primary coping forms are discussed, and coping with childcare needs by low-income and Zimbabwean mothers in South Africa are unpacked. This literature review provides a base knowledge on this study’s topic and signals the gaps in the literature that this dissertation covers.

2.2 Theoretical roots

In a traditional view, Western-style mothering is generally believed to be carried out in a more isolated, private manner whereby the mother carries out the childcare and social reproductive labour while the father works to support the family financially (Moon 2003; Gorfinkiel 2011; Benya 2015). The burden of care is thus primarily on the mother alone, apart from financial duties that the father often covers (but not exclusively). On the other hand, ‘shared mothering’ has been seen as a primarily non-Western tradition where mothering duties are regularly delegated among multiple women within an extended family

(Moon 2003; Gorfinkiel 2011). The burden of care is relieved by the social support network in shared mothering arrangements.

Shared mothering can technically be achieved through paid care work for those who can afford it but is more often practised informally among family, kin, neighbours, etc. (Moon 2003; Gorfinkiel 2011). In Africa, before colonisation, the dominant mothering route was shared mothering, as familial structure resembled "constellations of extended families" which supported and depended on one another rather than an isolated nuclear family unit (Frahm-Arp 2016, p. 154; Mberengwa and Johnson 2003). The traditional African familial structure has lingered in part due to financial constraint and economic migration despite constant pressures that Southern African women face from pop culture and media, Western-rooted religious institutions, etc., to act as the Western "ideal Christian mother" who cooks, cleans, and attends to the child's every need herself (Frahm-Arp 2016). Despite these two contradicting theories of mothering, it is clear to see that motherhood is not a universal truth but is rather a symbolic role that is only a portion of a woman's intersectional identity, and each mother will engage with it differently (Lewis 2001; Walker 1995). In fact, viewing these issues as a dichotomy of Western versus non-Western mothering practices erases the universal truths of mothering, as well as the deeply personal and specific pressures that different women face which shape how they can care for their children. There are some more 'universal' pressures that mothers will face regardless of factors of race, age, religion, 'class', nationality, or migrancy status – like the parental instinct to meet their children's human needs and to be a nurturing figure who provides comfort, protection, and teaching (Bambi and Chapin 2010; Diquinzio 1993). But all mothers will have their own individual pressures which will determine how they understand mothering and how they want to/can practice mothering. Universalist and dichotomic views on mothering snub these unique factors faced by each mother (Diquinzio 1993).

Furthermore, the gendered and racialized aspects of historical society, such as slavery or the apartheid, "informs contemporary practices" (Lawson 2018, p.718). Viewing motherhood and mothering practice through a cultural or 'traditional' Western/non-Western context erases the long historical paths that we've walked to get where we are

today – including things like colonization, slavery, institutional racism, and neoliberalism/economic transformations - which deeply affect mothering practices and abilities for individuals, communities, regions, nations, and for women of different races to varying degrees.

This is why it is vital to also look at the dimensions of mothering which Francis-Connolly (2000) distinguishes: mothering as immersion and mothering as an enfolded activity. Mothering as immersion is when the children's needs are high and overwhelming to the mother, and thus she is fully immersed in her mothering role and identity (Francis-Connolly 2000). This is generally when children are younger, less able to communicate, and have far more direct needs of the mother (Francis-Connolly 2000). Mothering as an enfolded activity is how mothers must 'multi-task,' providing more than one kind of care at once - (physical care, teaching, nurturing, emotional support, etc.) (Francis-Connolly 2000). Mothering as an enfolded activity is often present throughout the duration of being a mother but changes and often decreases as the child grows older, smarter, and more capable of different kinds of self-care. Direct physical care needs may decrease with a child's age. Still, emotional needs may increase (for example, as a temperamental teenager), or financial needs may increase with a child's desire for transportation, participation in sports, etc. The changing needs of a child will thus have a significant impact on how mothers provide care to their children because this means the burden of care is shifting - increasing, decreasing or maybe changing altogether.

Some mothers can also practice mothering as an enfolded activity by playing the role of financial provider and caregiver at once, as in the case of my research population. Like previously mentioned, a woman's personal, cultural, financial, and familial situations in addition to the historically-constructed modern context impact her mothering experience. If a single mother has to work, she may especially approach mothering as an enfolded activity because she has fewer hours of the day to provide care and complete household duties when she gets home after work. If she has to work as an underpaid migrant domestic worker inn South Africa, she will be less able to provide and have less energy to provide care to her family at home. In contemporary times, as more and more women become financial providers for their households, as in the case of a single mother, she is expected to depend on her shared mothering network to immerse themselves in her

child's care on her behalf (Moore 2020, Gorfinkiel 2011). The burden of care is believed to be too great for her to cope as a mother if it weren't for her social support network (Broussard, Joseph & Thompson 2012). The variables which characterise a mother's intersectionality, the needs of children, and the size/quality of her support network are expected to play a major role in my research population's approach to mothering.

2.3 Migrancy

2.3.1 Migrants in South Africa

Migrants are a permanent key feature of South Africa's economy, particularly in low-wage industries like domestic work (Ally 2009a; Hlatshwayo 2016). South Africa's history of migrant labour erupted in the 18- and 1900s when there was a great need for a "cheap and controllable" black working class to fuel the racial capitalism that gripped the country (Trimikliniotis, Gordon and Zondo 2008, p. 1325). The end of the apartheid system led to a rise in African migrants to South Africa, the "superpower" of the African continent, seeking to get a share of the brighter future that was now perceivably within reach (Trimikliniotis, Gordon and Zondo 2008). This rise in migration helped to foster an "ecosystem of fear" in South Africa as unemployment rates increased and crime rates rose, thus anti-foreigner sentiment grew (Northcote and Dodson 2015; Trimikliniotis, Gordon and Zondo 2008, p. 1325; Dodson 2010; Hlatshwayo 2016; Amit and Kriger 2014). Migration control has become stricter in South Africa, but this has not deterred those seeking to enter (Amit and Kriger 2014; Trimikliniotis, Gordon and Zondo 2008). There is a large clandestine migrant population in South Africa in addition to those legally permitted to enter and work (Amit and Kriger 2014; Trimikliniotis, Gordon and Zondo 2008; Hlatshwayo 2016).

2.3.2 Migration between Zimbabwe and South Africa

Zimbabwean people make up a massive portion of the post-apartheid South African migrant volume increase. According to a 2009 report by the Consortium for Refugees and Migrants in South Africa (CoRMSA), "Zimbabweans are by far the largest group of

migrants, refugees, and asylum seekers in South Africa." (p. 55). There was a migration trend beginning in the early 1980s as Zimbabweans fled due to deteriorating socioeconomic and political circumstances in the country following the Second Chimurenga war which liberated Zimbabweans from white, oppressive rule (Marrow 2007; Munangagwa 2009). Drought and agricultural-economic failure worsened things in the 80s, and Western-led Structural Adjustment Programs in the 90s exposed Zimbabweans to international economic competition that they struggled to keep up with (Munangagwa 2009). The global economic crisis in 2008 then exacerbated Zimbabwe's already hyper-inflated currency problem (Munangagwa 2009). Economic hardship persists there today via extremely high unemployment rates and food shortages for millions of people (USAID 2020), thus the migrant flow is not looking to falter any time soon.

As a result of the high volume of Zimbabwean immigrants, South Africa initiated the Zimbabwean Documentation Project and offered Zimbabwean Special Dispensation Permits in an attempt to organise immigration and formalise the stays of undocumented Zimbabweans (Hlatshwayo 2015; Amit and Kriger 2014). While these initiatives have created more routes to enter and work legally in South Africa, they were somewhat inefficiently implemented, leading to unreliable numbers and the continued exclusion of many Zimbabweans' access to legal migration (Amit and Kriger 2014).

In recent years, and still today, Zimbabweans continue to face massive economic struggles and human rights abuses (Human Rights Watch 2021; UN 2020; Perryer 2019). Meanwhile, "$100bn has disappeared from the Zimbabwean economy [as a result of corruption]." (Human Rights Watch 2021). Over 2 million Zimbabweans lack access to clean drinking water and sufficient sanitation services (Human Rights Watch 2021). Another 2 million face hunger, as the country's agricultural sector has been crippled by the long-standing drought that began in 2003 (UN 2020, Perryer 2019). The World Food Programme projects these numbers to continue to grow (UN 2020). These stressors are sending Zimbabweans to other countries like South Africa in desperation to survive and support their families.

2.3.3 Migration and the informal sector in South Africa

As a result of the aforementioned capitalism-induced wave of migrant labour, the continuing massive flows of people from rural to urban areas has led to over-urbanisation and thus high - and increasing - unemployment (Gama and Willemse 2015). This is one of the primary drivers of the informal economy in South Africa and all over the world (Gama and Willemse 2015). In South Africa, the highly regulated migrant workforce has faltered as so many migrants have turned to the informal economy to survive (Bolt 2012). The informal economy grew as a result of -or better phrased as 'in opposition to'- the colonial- and apartheid-era policies that controlled black movement and employment (Bolt 2012). While this informal economy provided black Africans with the opportunity to resist oppression and take control of their own labour power, it also opened the door to massive exploitation of people working in unregulated labour markets, especially in the case of migrants (Nyamjoh 2006; Trimikliniotis et al. 2008; Himmelweit and Mohun 1977). This is augmented by the exploitation of racial capitalism and racial domination still present in South Africa (Cock 1980, Cloete 2014).

2.3.4 Obstacles in migrancy

Though they may be fleeing perceivably worse circumstances like those described in the prior section, migrants face many obstacles in their day to day lives. Rhacel Parreñas' (2017) article on MDWs highlights the primary concern that they are "legally at sea". This means that migrants are vulnerable because they are often short of eligibility for certain protections and benefits from both their home country and their host countries (Parreñas 2017). Although South Africa offers state support to South African DWs, migrant beneficiaries of welfare grants are limited to refugees/asylum seekers or those with permanent residency (Vanyoro 2019b; Mbokazi 2019; (Scalabrini 2021). Migrants can also be afraid to seek support even when they are eligible for fear of deportation (LRC 2021; Vanyoro 2019b).

Migrants are often affected by a bias that objectifies them to stereotypes and scapegoating (Fujiwara 2008; Dodson 2010; Amit and Kriger 2014). This affects their access to employment opportunities, especially when locals feel they are competing for a scarce number of jobs in an economy such as South Africa's (Northcote and Dodson 2015; Trimikliniotis, Gordon and Zondo 2008; Dodson 2010; Hlatshwayo 2016). In South Africa,

migrants are much more likely to be employed in precarious, low-paying work situations such as domestic work due to the exploitability of their uncertain level of legal protection (ACMS 2017). Zimbabweans are perhaps the most common victims of xenophobia in South Africa due to their high numbers (as described above) and their willingness to work for low wages, often undercutting South Africans (Hlatshwayo 2016) because work opportunities in Zimbabwe are still comparably worse.

2.3.5 Family and migrancy

Migration is a familial project aimed at improving socioeconomic status, education opportunities, safety, etc., and thus family dynamics are very impactful in an immigration experience (Gherghel and Saint-Jaques 2012). Migrants can struggle with finding sufficient childcare assistance due to smaller social support networks in their host countries (Hlatshwayo 2016; Fujiwara 2008). Due to precarious work situations, they often struggle with maintaining food security and accessing social and health services (Fujiwara 2008). These problems are exacerbated by language barriers and cultural conflict, as well as the aforementioned instances of xenophobic discrimination (Fujiwara 2008). Migrants often rely on generosity and support from the communities of their same nationality to cope with migration-affiliated challenges (Northcote and Dodson 2015).

Shuvai Finos (2019) has highlighted the lack of attention that has been paid to the family unit in migration literature. While there is a historical commonality of fragmented families as migrant women leave their children at home to be cared for by kin, there is an urgency to investigate the women whose children join them in their migration journey and understand how migrant women are meeting their childcare needs in this context. It can be hard for Zimbabwean families in South Africa to cope with deviation from the traditional Zimbabwean family structure, especially when they bring their children. They must reposition themselves in a new kind of social support network consisting of fellow migrants who are often strangers to them - different from the extended-family homestead structure they are used to - to help care for their families (Finos 2019; Hondagneu-Sotelo 1994).

2.3.6 Gender and migrancy

As I've explored above regarding migrants being "legally at sea," it's important to understand the role that gender and social reproductive labour play in this. According to Lonergan (2015), a welfare state only functions for people residing and working legally in a country – citizens, refugees, permanent residents, etc. Most nations' immigration policies are based on gendered notions of what a migrant worker 'should' look like (Dodson and Crush 2004). Historically in Southern Africa, migration has been male-dominated. In the 1800s, the mineral production industry boomed and workers were needed, so men migrated to work while the women stayed behind with the children at home (Dodson and Crush 2004). This gendered idea of migration has remained, and limits the work opportunities of migrant women. Because social reproductive labour is traditionally viewed as a woman's familial duty, and only more recently has it become a 'legitimate' form of wage work, they aren't always seen as valuable, skilled workers worthy of a visa and accompanying legal protections (Lonergan 2015). This is presumably why so many migrant women end up migrating clandestinely and working informally in the domestic sector.

However, these days, it is common for women to participate in the labour market, and more frequently so for women with children as well. When migrants face the lack of welfare typically available to them, in addition to the reduction of proximity to extended family noted in the section above, "... the incorporation of a new caregiver becomes necessary." (Gorfinkiel 2011). This is leading to new forms of motherhood evolving - particularly when a migrant is a single mother. This 'evolution' often occurs via shared mothering or mothering from a distance.

2.3.7 Migration and childcare

Many migrant women practice mothering from a distance where they have emigrated for work, and their children are cared for by kin back in their home country (Gorfinkiel 2011; Cock 1980; Ally 2009a). The decision of if one must, and how one is able to mother from a distance is a matter of intersectional factors like race and socioeconomic status. (Gorfinkiel 2011).

> "Domestic employees … do not have the possibility of negotiating their physical presence on a daily basis, as this cannot be achieved by a short trip or a last-minute decision. The many kilometres that separate these mothers from their children can only be reduced during concrete periods in the year-or years-distance being an unavoidable consequence of entering the labour market in a country different from the one of origin. Therefore, the idea of 'doing motherhood' from a distance is more complex in this case and is determined by the international economic conditions and the restrictions related to migration processes." (Gorfinkiel 2011, p. 744).

Thus, there is a growing trend of Zimbabwean mothers keeping the family together and utilizing shared mothering in South Africa; this enables them to avoid the uncertainty of mothering from extreme distances (Finos 2019). While shared mothering has been explored in the literature, more investigation into shared mothering in the migrant context is needed. When familial kin aren't available and neighbours may become 'family' in this sense – or a shared mothering network may not be available – what do mothers do? Understanding reciprocal child watching agreements within migrant communities will be key in making headway in this study.

2.4 Domestic work and South Africa

2.4.1 Social reproductive labour

Social reproductive labour is a range of activities that enable the replenishment of the labour force, like cooking, cleaning, and care work (Benya 2015). It is heavily female-gendered and essentially satisfies all of the non-financial needs of a family household (Benya 2015; Ally 2009a; Safuta 2016). In this sense, social reproduction is women mirroring the men's output of labour in the home so that men can come home, be fed, rest, and recharge for work again the following day (Benya 2015). Domestic work is ingrained in patterns of social reproduction. DWs are performing social reproductive labour needs on behalf of another family and household, so that the adults of which can work more and generate more income. Social reproductive labour is critical for the accumulation of capital in a neoliberal society like South Africa, as one has to have time and energy to be able to acquire jobs and move up in the economy (Marx 1976; Ally 2009a, Safuta 2016, Benya

2015). Traditionally, women completing social reproductive labour has enabled men to work. While social reproductive labour is traditionally gendered and subordinates many women, intersectionality -something I will discuss further below- would make it so that not all women are equal in this sense, and black female DWs are the most marginalized in South Africa (Safuta 2016, Crenshaw 1991).

In South Africa, most DWs fulfilling other families' social reproductive needs are black women (du Toit 2020). The employers of these DWs are using those workers to fulfil their home and family care needs so that they themselves have increased time and energy to go out and access opportunities and earn higher wages/work more hours without burning out. The ability to employ domestic labour is a massive privilege and facilitates great advantage. For example, a university student who can afford to employ even just a part-time DW can spend more time resting and studying for a degree which will assist in creating economic opportunities for them in the future. Domestic work is not the 'labour of love' which patriarchal, capitalist society would like us to think, but is rather another level of women's -particularly black women's- subordination under the guise of 'paid work' (Safuta 2016, p. 32).

DWs in South Africa are regularly forced to compromise the social reproductive needs of their own families in order to make a living (Cock 1980; Jansen 2019). Due to income disparity, they lack sufficient basic resources, including food, medicine, clothing, safe homes, and school stationery (Ally 2009a; Crush and Tawodzera 2018). They also lack financial resources like emergency funds and quality social networks to find financial opportunities (Ferlander 2007; Lin 2000). This situation would be exacerbated when a DW is a single mother with no partner to share provision or care responsibilities with. Mbokazi (2019) observes how existing literature on social reproduction often neglects to focus on instances of employed mothers who are both financing and delivering social reproductive labour and how they are making this possible. My study looks into this.

2.4.2 Migrant domestic workers in South Africa

Over one million people - primarily black African women - are DWs in South Africa today, and a large portion of this population consists of migrant women (Du Toit

2020; ILO 2021). These women are frequently the sole or primary financial providers for their families (Cock 1980). In fact, in 2019, an online booking service for DWs, SweepSouth, found that 79% of DWs in South Africa were the sole or primary breadwinners for their family (BusinessTech 2019) despite their precarious, low wages. Shireen Ally (2009a) notes the limited political status and rights of MDWs and quotes Rhacel Parreñas that,

> "…transnational MDWs 'are not protected by labor laws, and [they] are left vulnerable to the exploitation of employers, including sexual harassment and abuse, excessive work hours with no overtime pay, and substandard living conditions." (p.7).

Ally (2009b) also highlights how South Africa continues its tradition of racial capitalism whereby the surrounding nations are considered cheap labour reserves to grow South Africa's economy. Because domestic work is such an undervalued industry due to its roots in slavery and social reproductive labour, and migrants are often willing to work for the lower wages, migrant women (especially Zimbabweans) often end up in the domestic sector (Hlatshwayo 2016; Nyamnjoh 2006; Ally 2009b)

Considering the prior section on social reproductive labour and how many Zimbabwean migrant women end up in the domestic work sector in South Africa, it is important to unpack the fibres of domestic work in South Africa. Literature on domestic work in SA, while generally giving great insight on domestic work as a whole in terms of gender dimensions, racial relations, economic or legislative implications, etc., is heavily focused on interactions in the workplace and labour legislation rather than placing focus on the personal lives of the workers and their families (Ally 2009a&b; Cock 1980). This can be explained by the historical context of domestic work in South Africa. Apartheid rule instilled the racist, oppressive pass laws which regulated both work and living conditions. These pass laws led to the fragmentation of the family; women working as domestics in deemed 'white' areas were primarily made to live-in with their employers and leave their children behind (Cock 1980; Ally 2009a). This made mothering from a distance a norm for DWs in South and Southern Africa and shaped their care practices, financial duties, and residential circumstances (Moore 2020). According to Kudakwashe Vanyoro (2019b),

African women who are DWs in South Africa face intersectional oppression as black people, as women, and as precarious workers. However, this goes a step further for my research population here because they are also oppressed as migrants (Vanyoro 2019b).

As noted prior, South African migration policy facilitates migration more easily for males or individuals with education and skills that are perceived to be economically valuable (Zack et al. 2019; Dodson and Crush 2002; Hlatshwayo 2016), which "leaves a majority of them susceptible to being undocumented and vulnerable to abuse by employers as a result." (Vanyoro 2019b, p. 13). Thus, there is a disproportionate number of foreign-born -namely Zimbabwean- migrants filling low-skill, low-paying work roles in the informal economy (Zack et al., 2019). Although South Africa has one of the most emphatic legislative efforts to protect DWs in the world, migrants slip through the cracks of this protection and are more vulnerable to exploitation by employers than other South African or legally working DWs (Parreñas 2017; Vanyoro 2019b; Nyamnjoh 2006; Northcote and Dodson 2015).

2.4.3 Zimbabwean domestic workers in South Africa

With such a large population of Zimbabwean migrants living in the country and many of these being women, they inevitably make up a large portion of the domestic sector in South Africa. Zimbabwean women are often perceived as more employable by South African employers because they are "more amenable to domestic work" and are cheaper to hire because they will work very hard for low wages (Ally 2009b, p. 29; Nkealah 2011). As described in the migrancy section, economic conditions are so bad in Zimbabwe that even working for exploitatively low wages in South Africa is appealing. Because many Zimbabwean DWs have entered the country irregularly, they will avoid activism or seeking labour rights even when they know they are being exploited (Zack et al. 2019; Fujiwara 2008; Vanyoro 2019b).

2.4.4 Domestic work and capital

As noted above, domestic work has not been traditionally seen as a legitimate form of wage-labour that is valued appropriately and is rooted in notions of male-dominated

familial structure and gender roles (Himmelweit and Mohun 1977). Reproductive labour has edged into the monetary economy, but remains heavily associated with women and still facilitates subordination via gendered, raced and classed power structures that undermine the work's value (Jansen 2019, Himmelweit Mohun 1977). This is because the 'products' of social reproductive labour are not produced for the market or exchanged like material goods (Himmelweit and Mohun 1977). DWs themselves are then the 'product' which is marketed and paid for, and they are expected to come cheap.

As previously mentioned, social reproductive labour is essential to capitalist accumulation because it nurtures the present workforce and the future labour force to ensure production of value can continue (Marx 1976; Ally 2009a, Safuta 2016, Benya 2015). The surplus labour performed by a housewife is "appropriated" by the husband;

> "In the form of his own consumption of the use-value she produces. This enables the capitalist to pay wages below the value of labour-power; surplus labour is thereby effectively transferred from the housewife to capital. We have here a model of unequal exchange, first, between capitalist and worker, over the purchase and sale of labour-power and second, between husband and wife, over the exchange of her labour-time for part of the commodities bought with his wage." (Himmelweit and Mohun 1977, p. 24).

Contemporarily, it is increasingly common for women to work, whether in addition to their partner's income or on their own as single parents - and evidentially, this is as a product of under-payment creating a financial incentive, enabled by the denial of the value of at-home domestic tasks (Mbokazi 2019, Cock 1980, Himmelweit and Mohun 1977). What's important to note here in the modern context of South Africa is that not only are housewives the victims of capitalism's willful ignorance of this labour-value that the literature describes, but black African women, like my research population, are ultra-burdened and unfairly compensated as members of the underclass.

2.4.5 Weak labour force attachment and domestic work

Mclanahan and Garfinkel 1989 describe the underclass as a group of people who have a weak labour force attachment and a persistence of this weak attachment. Women

often have a weak attachment to the labour force, even those who might be working for wages – like DWs. Job security for working women is often less dependable income because of the inconsistent, irregular, and unreliable nature of private and/or part-time work that they're more likely to have than men (Northcote & Dodson 2015). The private working conditions of domestic work are isolating and create less opportunity for job networking compared to working in public, team labour positions that men more often fill, like construction (Northcote and Dodson 2015). Women are often the first to be retrenched due to the socially constructed perception of subordinacy that surrounds them due to traditional gender roles (Beall, Hassim, and Todes 1989). Black African women are more likely to fill the lowest-paid work positions than other women and are the lowest-earning group in South Africa (Sapa 2013). Thus, black women's attachment to the labour force is not only weak but persists to be weak despite being active members of the labour force. In addition to their weak labour force attachment, my research population's migrancy status can decrease the quality of their social capital (Mclanahan and Garfinkel 1989; Hondagneu-Sotelo 1994).

2.4.6 Social capital and labour force attachment

Social capital can be defined as the support and resources which are gained through social networks (Ferlander 2007; Lin 2000). Relationships that hold social capital are based on trust and reciprocity and provide people access to practical help with things like childcare, emotional support and advice, or even with job opportunities and social growth (Ferlander 2007). "... social capital enhances the likelihood of instrumental returns, such as better jobs, earlier promotions, higher earnings or bonuses, and expressive returns, such as better mental health." (Lin 2000, p. 786). In terms of capital, it can be seen as how individuals are "investing" via their social efforts with hopes of value return in the form of money or services that would cost money (Ferlander 2007; Lin 2000).

Like all forms of capital, there is massive inequality in the distribution and quality of social capital (Ferlander 2007; Lin 2000). This is especially apparent when looking at differences between men and women, especially those who are parents:

> "... society's definition of child rearing as a female activity placed men and women in different structural positions with respect to flow of information and other resources in social networks. Having a child had no statistically significant effect on men's network size, but was a significant negative effect on women. In particular, women whose youngest child was age 3 or 4 displayed significantly smaller networks than do their counterparts with adult children."
>
> (Lin 2000, p. 788, referencing a study by Munch et al. 1997)

It is also apparent when looking at the rich versus the poor; people from privileged socioeconomic backgrounds have diverse social capital which is of higher economic quality, while people from impoverished backgrounds have social capital with high quality bonding and empathy, but with lower economic quality (Ferlander 2007).

2.4.7 Capital and social comparison

The above discussion on social capital raises the important theme of social comparison. This is how we evaluate ourselves based on those around us to understand how we should behave, think, and feel (Baldwin and Mussweiler 2018, p. E9067). "… how good we feel about ourselves and how happy we are with our lives are determined less by our absolute qualities and fortunes than by our standing relative to others." (Baldwin and Mussweiler 2018, p. E9067). Social comparison can also guide how we treat others and are treated *by* others. A report by Andrew Guest (2007) found that starting from around the ages of 6-8, we begin to take notice of others' abilities and access to resources and consider the perspective of how others view us. Children and teenagers are particularly sensitive to social comparison, but it is something that all people are sensitive to lifelong (Guest 2007; Aneshensel and Sucoff 1996). Socioeconomic status thus plays a massive role in the well-being of families, going beyond concern over access to material needs. It is important to explore how my participants and their children compare themselves to other families and how this affects them, their stress, and how they experience the burden of care. It is also important to consider how others may perceive them and treat them differently in effect.

Be reminded here that African domestic-worker women are oppressed as black people, as women, and as precarious workers, often building on the stress of being migrants who lack social support

and legal protection (Parreñas 2017; Vanyoro 2019b; Mbokazi 2019). By holding all of these identities, the women of my research population are incredibly isolated from economic opportunity, are often stigmatized, and are struggling against the weight of these things when trying to care for their families. It's important to emphasize again that on top of all that's been discussed, they are also *single* mothers and this needs more attention.

2.5 Single Motherhood

There are two primary pathways to single motherhood; pre-marital single motherhood, where a woman becomes a mother before or outside of wedlock and the relationship fails, and post-marital single motherhood, where there is a dissolution of marriage after having had children (Clark & Hamplová 2013).

Black African children in South Africa are more likely to live with one parent than both, with that parent almost always being a single mother (Hatch and Posel 2018). Odimegwu et al.'s (2017) quantitative study points out the need for more qualitative research on single motherhood in Sub-Saharan Africa due to high rates of it and its correlation with poverty and suffering from physical and/or mental health problems. Single motherhood is common in Sub-Saharan Africa due to high adult mortality rates as well as high pre-marital birth rates, in addition to the frequency of female-headed households as a result of migration and financial need (Clark and Hamplová 2013; Moore 2020; Cock 1980). There is a distinct and deep relationship between single motherhood and poverty (Mclanahan and Garfinkel 1989; Cohen 2018; Mkhize and Msomi 2016). A 2016 study on single mothers in KwaZulu-Natal by Mkhize and Msomi found that the majority of chronically poor households in South Africa were female-headed and/or homes led by single mothers. There seems to be a decline in marriages amongst African people in South Africa, likely attributed to apartheid's remaining historical footprint of men migrating away from their families for work (Mkhize and Msomi 2016). Yet, childbearing rates have not fallen, so more children are growing up in single parent -most commonly single mother- households (Mkhize and Msomi 2016). These families generally have lower socioeconomic status and children receive less parental supervision and care than a dual-parent household, which has direct negative effects on the children, as well as on the mothers who show to have a higher incidence of depression and mental distress (Clark and Hamplová 2013; Tran and McInnis-Dittrich 2000; Langa 2020). Being a single mother

decreases a woman's chances of gaining higher education, having a solid career path, and accumulating wealth (Berkman et al., 2015). Despite the challenges they face, motherhood is a social role whereby women often feel obligated to be the stereotypical selfless homemaker for the family, creating a lot of burden for these women (Ichou 2006).

As a single mother, a woman has to take on both parental roles as carer/homemaker as well as breadwinner, impacting her ability to care for her children (Chapman, Zhu & Wu 2013; Ahmad 2011; Cock 1980; Mkhize & Msomi 2016). Due to the burden they face, single mothers face a lack of time, money, and immediate social support - all things that are considered to be coping resources (Mclanahan and Garfinkel 1989; Cohen 2018; Broussard, Joseph & Thompson 2012; Tran and Mcinnis-Dittrich 2000). Thus, they face increased levels of social isolation, impoverishment, and stress (Gherghel and Saint-Jaques 2012). South Africa technically provides legal protection for single parents by obligating absent parents to provide financial support to the caring parent; however, it is ill enforced (Hatch and Posel 2018). Also, as discussed in section 3.1.2., migrants are not privy to the same legal protections that South African citizens receive. Thus, there is no obligation for fathers of migrant children to provide financial assistance. This is especially problematic for my research population, as many of them might be undocumented and even more vulnerable to neglectful fathers.

2.5.1 Absent fathers

My research population's burden of care is increased tenfold when the father of her children is non-supportive. After a father exits the picture, single mothers are often unable to provide adequate supervision, are unable to meet financial obligations to the children, and the impact of the separation (or death, etc.) on her own mental health will impact her ability to provide care (Levy-Shiff 1982). It was crucial to explore how my research participants are experiencing not just single motherhood, but being families with absent fathers and how this plays into their care practices.

2.5.2 Problematizing the 'single mother'

Despite the above considerations on the context of single motherhood for my research population, something that is important to call attention to is that the constructs

that delineate our understanding of 'single mothers' are not objective. The 'single mother' is a byproduct of the Western, Euro-centric form of the nuclear family with its associated gender roles and responsibilities (Oyewumi 2002). Also, in the pre-colonial African context where the nuclear family didn't exist, the idea of family and parenting was usually surrounded by male-headed notions of family and gendered duties (Oyewumi 2002). The idea of a 'single mother' is an unjust offset that marginalises and stereotypes women raising children on their own. This is something to remember when conducting a study on single mothers so as not to further box them into something that they are more than. Single motherhood is not a problematic situation to be in, rather the burden and stress that come from raising a child alone without adequate social support are what is problematic (Tran & Mcinnis-Dittrich 2000).

2.5.3 Zimbabwean single mothers

Gay Seidman (1984) depicts how Zimbabwean single mothers face unique pressures due to their culturally constructed identities. Zimbabwean women are expected to be nurturing caregivers and fulfil social reproduction, yet also are expected (and depended upon) to help meet the family's financial needs. Zimbabwean single mothers often become solely responsible for working in the wage economy to provide for their children as well as for meeting the direct care needs of their children – despite typical gender roles and conceptualizations of family. Single mothers by divorce/non-marriage in Zimbabwe experience the "burden of poverty, gender discrimination, unemployment, stigmatization, and poor living conditions compared to women living with their husbands." (Mbanefo et al. 2013, p. 6). Even widowed women can be stigmatised for their positions as single mothers (Mbafeno et al., 2013). The cultural constructions of gender and motherhood impact these women heavily.

However, as noted previously, Walker (1995) points out that there has been somewhat of an uncoupling of marriage and motherhood in Africa during the 20th Century. There may be differences in the way single motherhood is viewed today compared to a few years or decades ago, but many women still feel outcast for being one. This leaves us with many questions around single motherhood in Southern Africa that the literature has not yet

answered. What caregiving disadvantages do they face as single mothers? Advantages? Do they wish to have a partner or not? Why?

2.6 Coping

Coping is defined as the efforts that one makes to be able to tolerate and/or overcome difficult circumstances in their life (Taylor and Stanton 2007). Coping is described under "stress theory" by Meyer et al. (2008), who note that stress and coping are socially constructed phenomena. According to them, like the burden of care, not only do social conditions (such as wealth, class, gender, race, etc.) determine which stressors one encounters and which coping resources they have access to, but these social conditions also often are then the cause of further stress for members of disadvantaged social groups (Meyer et al. 2008). Extreme inequality in a society like South Africa will augment the issue of certain people not having access to coping resources, especially in single parent families (van Deurzen, van Ingen & van Oorschot 2015).

The ability to cope is heavily affected by one's access to what are called 'coping resources' (Taylor and Stanton 2007; Broussard, Joseph & Thompson 2012). Coping resources are things like social support from friends, family, or groups; financial aid or credit systems; even changing behaviours to try to adapt (Broussard, Joseph & Thompson 2012). Chou (2000) has pointed out that "higher levels of interaction with family members, social and spiritual support-seeking behaviours, and receiving help from family members decrease caregiver burden." (p. 403). People often combine different coping resources to find ways to practically cope by problem-solving and emotionally coping.

2.6.1 Problem-based versus Emotion-focused coping

Two forms of coping, problem-based coping and emotion-focused coping, have been identified and outlined by Taylor and Stanton (2007) and Broussard, Joseph & Thompson (2012). Problem-based coping is when a person facing a burden tries to identify stressors and come up with solutions to minimize or eliminate the stressor (Taylor and Stanton 2007; Broussard, Joseph & Thompson 2012). For example, someone subletting a room in their home to decrease rent expenses. In the case of domestic work, many women often rely on their employers as a form of social support, hoping for things like hand-me

downs, leftovers or loans to help them cope (Cock 1980; Ally 2009a; Miles 1996). Emotion-focused coping is when one knows that a burden will persist so they find ways endure the problem as is, like going to a support -group to receive advice and empathy from similar individuals (Taylor and Stanton 2007, Broussard, Joseph & Thompson 2012). The kind(s) of coping utilized by my research population will depend on the type and extremity of the burdens they are facing. Based on their well-established intersectionality as single mothers who are low-income migrants, they face a large burden of care and will need to prioritize coping strategies that help them meet their family's care-needs.

2.6.2 Coping with childcare needs

A PhD dissertation study by Nonzuzo Mbokazi (2019) examined childcare strategies used by varying low-income mothers in South Africa. She argued that "… the type of childcare low-income employed mothers can provide their child(ren) is an outcome of the state, family and market, and of what they can afford and have access to." (p. 63). As I've previously established, most Zimbabwean migrant women will not have access to South African state support for their children. They likely have disrupted kinship networks surrounding them due to their migration, and they have little money with which to access quality paid childcare options, if at all. Most research participants in Mbokazi's study reported dependence on a predictable combination of paid childcare and informal help from kin/neighbours. Women depending on help from kin were often reciprocal action where women took turns watching each other's children when needed, and paid childcare options were generally informal arrangements with fellow community members rather than through formal childcare institutions.

Mbokazi's study provides valuable information about how low-income working mothers in South Africa find ways to practically care for children while they are at work. However, it focuses on mothers in general and does not extensively cover migrant mothers or single motherhood. It is important to explore these themes in low-income childcare contexts because even in Mbokazi's study, many women relied on their own mothers and/or paternal female kin for help. We know that single mothers may not have support from paternal kin, and migrants may not have proximity to kin who can provide sufficient care at low-to-no

cost. But just because a mother has a low income, she still understands the importance of providing thorough childcare, education, and giving their children a quality life. In fact, Zimbabwean migrant women raising their children in South Africa see education as part of filling their children's needs. According to Finos (2019), these women take particular priority in trying to attain quality education for their children. Thus, it is important to further explore my research populations more recently constructed shared-mothering networks in order to understand how and if they can cope with their childcare needs.

2.7 Conclusion

This chapter has located my research population within wider understandings of family, migration, precarity, and the burden of care in frame with the South Africa-Zimbabwe context. It has also shown that our knowledge base on single motherhood in relation to these has not been investigated in-depth, and there is a gap to be filled here. I have explored how varying identity markers like residency status and socioeconomic status accumulate and augment the burden of care and how these same factors can affect one's ability to cope with the burden. This literature review clarifies that single motherhood is an isolating role correlated with poverty and that there is a great burden of care placed on my research population's shoulders in their jobs as DWs and at home. This is especially the case as they work in the domestic sector for low wages. This base knowledge has informed what kinds of pressures Zimbabwean MDWs can face but does not cover how they cope daily at the family level. The next chapter covers the research design and methodology that I used to answer my questions about this gap.

Chapter 3 - Research Design

3.1 Introduction

This chapter outlines how I have planned and completed this research. I specify the research population's characteristics and justify my use of a qualitative method of study and how I have gathered and analyzed my data. I describe important considerations that were made to ensure my study is ethical and that I can make legitimate interpretations from it despite my personal limitations due to differing positionalities between myself and my research population.

For this study, I chose to take a qualitative approach through in-depth interviews, supplemented by the preceding literature analysis. In-depth interviews helped me to thoroughly uncover my research population's experiences with the burden of care and finding ways of coping within their unique context, as is the objective of this research. John Locke's idea of Empiricism inspired part of my decision to use in-depth interviews as my data collection method. This is the idea that knowledge is gained by experience and that we need these experiences to be able to form ideas about the world and to affirm our beliefs (Stanford Encyclopedia of Philosophy 2017). I may not have had these experiences myself; however, I gained knowledge through my research population sharing their experiences with me. Using their own words to understand their experiences provided me with rich data that enabled me to make valid interpretations of how their lives are being affected by their circumstances and how this fits into a larger societal context.

3.2 Research sample

As discussed in prior sections, I sampled Zimbabwean MDW women in South Africa[3]. They are live-out DWs who are single mothers and have chosen to keep their family unit together, bringing their children to South Africa rather than leaving them with family/kin in Zimbabwe. They all earn approximate to, or less than South Africa's minimum wage which equated to R3,470.40 per month based on a 40-hour work week in 2021(Trading Economics). This is not enough to be considered

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[3] I have chosen not to clarify whether the participants in this study are documented or undocumented migrants. This is primarily an ethical consideration to protect them from undue harm and is discussed under ethics in section 3.7.2. It is also because the pressures they face can exist regardless of documentation status, and legal status is often fluctuating or varying among individuals within a community. Specifying this does not affect the outcome of the study and would simply be a violation of my participants' privacy.

a living wage in South Africa, especially for a family, thus they are all low-income individuals (BusinessTech 2022). My sample population was 13 women. Ideally, I would have had the time and resources for a larger sample size, but I am an individual, non-funded student researcher and had to ensure that my sample size would be feasible to complete within my timeframe. Also, large sample sizes are less pertinent to qualitative research because the strength of data is not just influenced by sample size but by the richness of the data. Fusch and Ness (2015) describe the distinction between rich and thick data to display this, where rich data can be thought of as quality, and thick data can be thought of as quantity. One can have a large amount of data, for instance, hundreds of interviews ('thick'), but that data is not useful unless it is high *quality* data where the interviews are long and detailed enough to pull meaning ('rich'). In-depth interviews provide me with a high number of rich data indicators from each participant and improve the strength of association between the data indicators because I have had a thorough conversation with each woman as well as plenty of time to analyze each transcript (Jackson 2003). I continued interviewing until I felt I had plenty of accurate, replicable data with no new findings arising – also known as data saturation (Fusch and Ness 2015).

3.3 Sampling strategy

I utilised a purposive snowball sampling method. This is where the researcher recruits initial participants who then recruit other participants through their personal connections (Etikan, et al., 2015). It is ideal in circumstances when the population of interest may be difficult to reach; however, it can be discriminating and is a non-random process which poses the possibility of sampling bias (Jackson 2003). Zimbabwean MDWs are sensitive due to their migrant status and are hard to contact, especially for myself, a foreign student who is newer to South Africa. I contacted potential participants through my personal and university contacts and asked them to refer women in their own community who might also be a match.

My sampling was purposive in that I selected "information-rich cases for in-depth study," (Gentles et al. 2015, p. 1778) who met my research population criteria. This means I chose not to interview some women who might have offered lower-quality data due to individual circumstances. For instance, a woman who has only been a single mother for a few months would not provide an interview as information-rich as a woman who has been a single mother for multiple

years. To mitigate sampling bias and make my interview pool was as natural/diverse as possible for this study, I simply ensured that referred participants met the general criteria for my research population and chose data-rich cases over less rich cases (i.e., selecting a Zimbabwean MDW who had been a single mother for more years than another woman).

3.3.1 Sampling in practice

I gained an initial participant population through a DW who matched my research population criteria that I had met before. She was able to connect me with friends from her community. Women were contacted and given a lay summary and informed consent form via the WhatsApp messaging app[4]. Once in touch with these women, and after giving them time to read the material, ask questions and consent, I scheduled and carried out interviews. At the end of my interviews, I asked the interviewees to connect me with other women they knew who would be willing to participate.

3.4 Data collection

I used in-depth interviews for data collection. It is one of the primary methods used in qualitative research, and it can "…'provide access to the meanings people attribute to their experiences and social worlds.'" (Legard, Keegan & Ward 2003: Quoting Miller and Glassner 1997). 'Traditional' quantitative research aims to draw a distinct line between the researcher and the research participants in order to discover an objective 'truth' which creates an unequal power structure (Dupont 2008). Choosing qualitative interviewing helps to balance the power, and perspectives are given in a conversational format without artificiality and pressure that can permeate traditional scientific research settings (Dick 2018). In-depth interview also allows participants to provide data on themselves in their own words and emphasize what they feel is important rather than responding to standard questions, which is important considering my research inquiry is based on my research population's perceptions of their own lived experiences:

[4] Refer to Appendices A and B on page __ to view the Lay Summary and Informed Consent form

"The strength of the in-depth interview lies in its ability to create a research space in which the interviewee is able to tell their story and give the researcher a range of insights and thoughts about a particular topic. Through in-depth interviews, the researcher is able to obtain an understanding of the social reality under consideration and, depending on the circumstances, collect rich data fairly rapidly." (Morris 2015, p. 5).

3.4.1 Interview schedule

Although in-depth interviewing aims for authenticity and natural dialogue, it should be "largely a one-way conversation" where the informant speaks the most (Ervin 2005: p. 171). For this reason, and to ensure that I can answer my research questions, I deployed semi-structured interviews. This is where core questions are formulated in advance, but the interview can digress as participants elaborate (Alsaawi 2017). The researcher then probes based on the cues in the interviewee's narrative to gain rich information (Legard, Keegan & Ward 2003). I prepared an interview 'script' with questions that I felt needed to be answered, as well as questions intended to encourage them to branch out the conversation. I often went fully off-script and followed the natural conversation when they brought up extra-script topics[5].

I first conducted a pilot interview. Pilots are important because they allow a researcher to "'test' appropriate research tools" and ensure that the data collection plan will actually answer the research questions or not (Sampson 2004, p. 392). This protects a researcher from putting lots of time and energy into data collection only to discover during analysis that the data does not match up with the research objective (Sampson 2004). My pilot interview covered the topics I aimed for, and I did not have to change the interview's loose-structure in subsequent interviews. I was able to include the pilot interview data in my main sample.

[5] Refer to Appendix A to view the Interview 'Script'

3.5 The Interviews

I conducted in-depth qualitative interviews with members of my research population, which I audio-recorded and then transcribed. It would have been ideal to have face-to-face interviews rather than remotely to facilitate trust and a more natural conversational flow. However, I could not do this due to the Covid-19 pandemic. It would have been unethical to risk the health and safety of both the research participants and myself. I utilised WhatsApp - a popular smartphone app - to conduct my interviews. I asked the participants to arrange a time with me to have a voice call. In some instances, connectivity was poor and we switched to regular cellular calls or closed-up with voice notes[6].

WhatsApp is a good platform to use for research because it is reliable, costs no money to use, and accessible on a wide range of personal devices (Kaufmann & Peil 2020). Over 58 per cent of South Africans use it (Statista 2020). Although I couldn't pick up on desirable non-verbal signals like body language or facial expression (Legard, Keegan & Ward 2003), remote interviews were sufficient. I studied Kaufmann and Peil's (2020) research on mobile instant-messaging interviews via WhatsApp, and it appears to be the best mobile service on which to facilitate remote qualitative interviews due to its high-quality feedback features, like receipt tracking and being easily accessible to many people. Many people choose to upload a profile image that provides a face to familiarize themselves with, making an interview over the phone with a stranger more comfortable. While video calls would have augmented this effect, I chose to stick to regular voice calls to minimize data usage and avoid connectivity disruptions.

I 'met' with interviewees via WhatsApp at our scheduled times. Once connected with participants, I summarised the informed consent information and asked for consent verbally before beginning. I had to do this because I was conducting this study remotely due to Covid-19.

[6] Voice notes are a novel form a data collection that are useful for interviewing from a distance. I observed that a 60 second voice note uses about 116kB (0.116 MB) to send. This is compared to a voice call which uses about 340 kB (0.340 MB) per 60 seconds, and video calls which use about 5 MB (5120 kB) per 60 seconds. In research where interviews cannot be conducted in person, and connectivity or data usage is a concern, voice notes are a great way to facilitate voice-to-voice 'conversations' for interviews. While it does interrupt natural flow of conversation due to delays between recording, listening, and responding, it feels more personal than text-messaging and is considerate of research participants' data usage. Another benefit is that questions and answers are recorded for transcription, without an external recording device. In our modernizing world, voice notes are a great way to conduct interviews when physical presence is impossible, inconvenient or complicated.

3.6 Limitations to in-depth interview

Despite strengths held by in-depth interviews as a data collection method which I referred to previously, it is also important to note their weaknesses. Firstly, "There is no doubt that in every study based on in-depth interviews there will be interviewees who will hold back and not give a comprehensive and/or accurate account of events." (Morris 2015, p. 7). Also, in-depth interview data is not generalizable to the larger population and is rather only indicative of the existence of a pattern (Morris 2015). The only way to hedge with these limitations is to acknowledge them and account for them. Contrarily, I was privy to public WhatsApp 'stories' that my interviewees sometimes posted. These sometimes aligned with their testimony; for example, if one posted a Christian motivational quote in companion with a caption about her struggles. They also sometimes contradicted the given testimony. For example, one claimed to have her children here with her in South Africa, but later posted content that revealed that they were actually in Zimbabwe with her mother. By viewing her story, I was able to avoid invalid data in my study by not including her interview data. While I was careful how much weight I gave to these 'stories,' they helped mitigate limitations[7].

3.7 Ethical considerations[8]

3.7.1 Informed consent

Informed consent requires that I share the research goals, my chosen methods, the funding source/sponsors, my expected research outcomes, and any anticipated risks, benefits, or impacts of the research with the participants before the research begins (American Sociological Association 2018). I also need to provide them with a comprehensive brief of their rights as research participants as well as any responsibilities that they will be required to fulfil (American Sociological Association 2018; American Anthropology Association 2012). For this study, informed consent was achieved by sending participants the information to review and receiving

[7] More research is needed, but having access to 'stories' appear to be a pro-argument for conducing in-depth interviews over social media.

[8] One further ethical consideration is made in the discussion section, which unpacks my reaction to one of my findings on children being left unsupervised

consent verbally before the interview began. Verbal consent was necessary and sufficient because the study was conducted remotely due to Covid-19.

3.7.2 Confidentiality

I did not want to share any personal or identifying information about my participants. This is especially pertinent as I am conducting research on a migrant population. Dick (2018) notes that migrants may be in the country without proper documentation and exposing their legal status may bring them, their children, and their communities undue harm. My interviewees agreed for me to use just their first names in this dissertation.

3.7.3 Positionality

According to Madison (2005), reflecting on our positionality holds us morally responsible as representatives of the phenomena we are studying. I am in a position of power as a white, American, educated student with the privilege to live in another country and conduct high-level academic research. My research population is considered a marginalised group as low-income, female, migrant workers who face race, gender, class, and cultural/xenophobic discrimination that is rooted in the colonial and racial history of Southern Africa. It is important to remember that while I am trying to use this research to share the voices of my research population, the act of studying people and getting to have my name on the paper that represents them is an unequal power structure in itself (Madison 2005). Also, there is a cross-cultural boundary between myself and my interviewees. I have tried to understand the perspective of another cultural group through my own lens, which can be very difficult (Troman and Jeffrey 2007). Attention to cultural context and the boundary between myself and my research population was constantly considered to be as accurate in my interpretation as possible.

However, I was at a disadvantage because my research participants are the experts on this topic (Dupont 2008; Ervin 2005). A participant holds the information being sought, and they choose what they share, so I can't be sure what parts of their life were not visible to me (Duneier 2000).

3.7.4 Trauma & sensitivity

It is possible that some of my participants have experienced trauma or sensitive things that came up during the interview. I did my best to gauge when topics were sensitive so as not to probe further and cause distress or embarrassment.

3.7.5 Compensation

Because I asked my research participants for their time and experiences/information, I compensated them. In research contexts, financial compensation can pose the risk of people opening themselves up to exploitation by feeling compelled to 'sell' their stories for extra money (Colvin 2014). The women were informed that they would be compensated for the time taken to do the interview in advance. Still, the compensation amount was not disclosed until after to ensure that they participated by choice and not for a monetary incentive. I offered each woman R300 for the interview; R200 as compensation plus R100 to cover any data costs incurred for their use of WhatsApp while being interviewed.

3.7.6 University ethical clearance for research

I thoroughly considered the ethics of this research, and I was granted ethical clearance from UCT before commencing any fieldwork.

3.8 Data Analysis

I used thematic analysis for this research. It is a widely used data analysis technique in qualitative research that will help me draw meaning from the testimony and link commonalities and/or deviances between them (Spencer et al., 2014). Thematic analysis takes place when "the researcher identifies topics that are progressively integrated into higher-order key themes, the importance of which lies in their ability to address the overall research question." (Spencer et al. 2014, p. 271). It is fitting for qualitative research, whereby I am attempting to draw meaning from the words of others. I have done the coding for this analysis manually, not using statistical software. I decided to do so because I am using a small sample population so the data will be

manageable. I am looking for themes in rich, qualitative data rather than statistics drawn from large quantitative samples.

3.8.1 Steps in data analysis

After completing the interviews, I first read through all the data to familiarize myself and begin to conceptualize what information lay in the data (Spencer et al., 2014). Then, I began the categorization process. Thematic data analysis requires multiple stages of codification; firstly, the construction of an initial framework where overarching topics are identified without interpretation, and secondly, indexing, where I funnel the data into themes (Spencer et al., 2014). After establishing themes, I went back and reread the transcripts to confirm and refine my understanding with those in mind. I summarised the themes to gather my ideas and link frequently quoted topics to interpreted meaning (Spencer et al., 2014). Using these summaries in partner with my initial themes, I streamlined my data into fewer but more comprehensive categories and began to find implications of these themes (Spencer et al. 2014). It was important here to look for overlap or contradiction of these implications to establish patterns. Finally, I accounted for these patterns by explaining what it shows to mean, how, and why (Spencer et al. 2014). I then pulled direct evidence, like quotes and information from my literature review, to justify and locate my conclusions within the existing knowledge base.

Phase 1

My analysis began during the interviews, where I started taking note of recurring topics or things I wanted to probe on. I incorporated questions about these things into subsequent interviews to see if they were really recurring or not. Once an interview was completed, I transcribed the recordings. I reread through each transcript and wrote a summary of the interview for my own quick referencing.

After completing the interviews, I sent five follow-up questions via WhatsApp messaging to each participant[9]. These five questions were to delve into gaps in my

[9] Refer to Appendix B to view the Interview Follow-up Questions

data/understanding of the data or verify common themes. I pulled some important topics and apparent commonalities between participants to create an initial index[10].

Phase 2

A second read-through of each transcript pulled more details and direct quotes on the topics identified in phase 1. The aim was to ensure that the topics had enough frequency and rich data to be supported. I also looked for more themes that may not have been as apparent on the initial read-through but were equally important[11].

Phase 3

After compiling the initial list of topics, I spent time condensing all found topics into thematic categories.[12] I then reallocated and condensed the data into the following themes, which I feel satisfactorily depict the experiences and feelings that my participants communicated to me:[13]

1. **Greener pastures**
2. **Feeling alone**
3. **Keeping the family together**
4. **Education**
5. **Dreaming of a 'normal' life for the children**
6. **Cyclic Struggle and Deprivation**
7. **Minimal ability to provide sufficient childcare**
8. **Coping**
9. **Support**
10. **Priorities**
11. **Covid-19**
12. **I don't want to be married**

[10] Refer to Appendix C to view Indexing Phase 1
[11] Refer to Appendix D to view Indexing Phase 2
[12] Refer to Appendix E to view Indexing Phase 3
[13] Refer to Appendix F to view the Final Thematic Index

3.8.2 Triangulation with literature

Triangulation is "the observation of the research issue from (at least) two different points." (Flick, von Kardoff & Steinke 2004). Most commonly, it is looking at verbal data like interview themes in addition to other data like literature/theory to compare and contrast the perspectives gained from each (Flick, von Kardoff & Steinke 2004). While I did not conduct a comprehensive literature review as a formal data collection method, but rather as a supplementary base of knowledge from which to build this inquiry, my analysis of literature discussed in relation to my research population's indicators strengthened my interview findings. Triangulating data also reduces the potential for bias in a study (Bowen 2009).

3.9 Conclusion

This chapter specified my research population and explained my use of qualitative in-depth interviewing from a semi-structured 'script' as a data collection method. I also justified using a purposive snowball sampling method to secure a small but sufficient pool of interviewees. I guided the reader through my data gathering and subsequent analysis process in detail while making important considerations regarding ethics, positionality, and limitations throughout. The following chapter outlines my findings, breaking down and providing direct evidence to support the above finalized thematic categorization.

Chapter 4 - Findings: “Sometimes I cry…”

4.1 Introduction

This chapter outlines the key findings of the study. I set out to uncover how Zimbabwean MDW single mothers are experiencing and coping with the burden of care in South Africa. I did this by investigating: their motivations to bring and care for their children to South Africa instead of leaving them with kin in Zimbabwe, their coping strategies which they rely on to raise their children, the support systems available for them to depend on for childcare help, and how they care for their children when they go to work. This chapter begins by looking at reasons for keeping the family together, including hopes for ‘greener pastures,’ education, and ultimately the financial considerations they make to be able to provide and survive. It then examines their experiences with feelings of isolation and deprivation, which determine how they cope individually and emotionally, as well as their perspectives on their access to support and social support.

4.2 Keeping the family together

4.2.1 Greener pastures

The women are all between 33 and 43 years old, with an average of three children. All reported that they came to South Africa for work. All arrived between 2007 to 2017, which shows a likely relationship between their migration and the 2007/2008 global financial crisis and its aftermath. About half came after they were already single, and others became single in South Africa, with separations occurring for many different reasons. Some brought their children initially, while others came to settle in and find work before their children joined them. The most commonly cited reason for bringing their children to South Africa included a financial consideration, often involving the affordability of education in South Africa as compared to Zimbabwe. All but one of the women report receiving absolutely *no help* from the fathers of their children. The women generally had at least one child ‘old enough’ to help care for younger children. As DWs, the women reported not having regular and/or full-time jobs. They often have only one or two days per week of regular work - if even that - and take odd jobs. Most of them reported

exploitation by employers who deliberately underpay them, trick them, and/or treat them as disposable. They are more vulnerable to this because they are informal MDWs. All of them expressed wishes to find better jobs and working conditions.[14]

When asked why they chose to migrate to South Africa, every interviewee claimed that they had come searching for a better life and work opportunities. Lee, a 40-year-old with four children, put it as such, "We came to South Africa to look for greener pastures. As you know, Zimbabwe is very difficult." The phrase 'greener pastures' was used by multiple women when describing why they moved to SA - in search of the ability to better provide for their children. The overall feeling expressed was that having jobs and being able to support their families were things they could not access in Zimbabwe due to the ongoing political and economic crises there.

> "Things are very hard in Zimbabwe. There's no work. There's no money. Here you can work. At least you can get something, but not in Zimbabwe … It's because of politics and stuff." - Yvonne, 35, two children.

> "We lost our jobs, so we came to South Africa because of the economic hardship in Zim. We could not find any jobs since there weren't any. We came 2008." - Busisiwe, 43, four children.

All women with family members back in Zimbabwe are financially responsible for their own children and a number of family members there via remittance. Memory, a 34-year-old with three children said, "I do send money home to my mother because she depends on us here because there's nothing there." This is a heavy burden for an individual to carry alone, and becoming a single mother impacts things greatly. Julia, 37, with three children, expressed with sadness how, "Since my husband left me, I can't even send my parents money."

[14] Refer to Appendix G to view a Participant Profile Summary Table

Despite their need to remain in South Africa, there is also a shared longing to return home if things were 'better.' The women expressed discomfort and fear living in South Africa as foreigners and the general dangers present here. Thus, they are very aware that 'the grass is always greener on the other side.'

4.2.2 Why we migrated together

When asked why they decided to bring their children to South Africa rather than participating in the common practice of leaving them behind in Zimbabwe with family, there were two primary reasons: 1) to save money, 2) to be a family. However, finances take precedent, as money is the most important resource for them to care for their children. The decision to bring their children here is not taken lightly:

> "I think to leave them in Zimbabwe it's better because in Zimbabwe it's safer than here. But I didn't have a choice. I have to bring them here so that I'll cut expenses." - Yvonne.

Many noted the affordability of education in South Africa as a significant factor in this decision. According to Memory,

> "If I send them there [Zimbabwe], then it's going to be a disaster again. The school fees there is very high."

Alongside the monetary concern, another big reason is for the sake of being a family. Previous, a 33-year-old with three children, mentioned a financial consideration but ultimately decided to bring them with her because of her love for her children:

> "I better to have them with me because it's too far. I need to give them mother's love. I better to struggle with them. Because there in Zimbabwe they are going to [say], 'Please send me money for your kids.' I don't have money. If I have a little, I'm going to manage with my kids here."

Amanda says that she prefers to have her children here because:

> "My kids are my life. At least I know that if we have this, we have this together. If we are happy, we are happy together, and they grow up knowing you."

There is a strong sense of the importance of familial togetherness through the good and the bad. These women do not want their children to feel left behind or forgotten, and they want to be able to give their children the best life they can. In their eyes, the best way to do this is to migrate as a unit and stick together.

4.2.3 Educating the children

As pointed out in the previous section, affordability/access to education is a large theme in the decision to migrate as a family unit. Multiple women noted South Africa's more affordable school fees. School fees in Zimbabwe are reportedly higher and must be paid in the more-valuable US dollar. Yvonne also claimed that schools are more understanding in South Africa, and she can sometimes pay late if needed, unlike in Zimbabwe.

School fees are considered one of the top expenses to be prioritized by these women. Something that surprised me, though, was that some women, like Julia, will prioritize school fees above all other expenses - including paying rent or buying groceries;

> "I pay school fees first. I want my kids to have life I didn't have when I was growing up. I was even sent home because my parents didn't pay school fees, so I know the pain. And because I didn't go far with my education, I think my kids need that education which I didn't have."

Julia is just one example of the extremes that these women will go to in order to keep their children in school, which displays their outlook that to have education is to have

opportunities, a better chance of improving finances, and a better future. Julia also notes how even though her eldest daughter is willing to work to help with expenses, she refuses to let her:

> "I try not to do that so that she'll focus in school. I feel sorry for her to carry my burdens at that age. I think she's helping me enough. Yeah, it's not easy, but as a mom, I have to do whatever it takes."

When asked if their older children help financially, most women said 'no' - because they are in school. Providing education to their children is not only a motivator for migration but is also a tough decision that they make every day for their children. Even if the women's own burdens could be much reduced by letting their children find jobs, they still prioritize education.

4.3 Their experience of the burden of care

4.3.1 Dreaming of a 'normal' life

A large burden that my research population faces is something that we might not typically consider to be a part of the burden of care but *is*. The women all displayed feeling deep stress and pain over being unable to provide their children with the 'normal life' that other children appear to have. Sandra, a 35-year-old with three children, wants to find more work for this reason:

> "I wish I could work there in a job, even to work every week, you know? At least if I can manage to get three or four days or a week, at least I can survive, and I can also manage to give them [pocket money] also.… You know, when kids go to school and they see other kids - they are buying chips, drinks, there, but then [my kids] don't have, you see?"

Knowing that their children may feel distressed because they see other children with things that they don't have is deeply upsetting to these women and is a large motivator for them to try to find more work.

> "It's difficult for all of them because I can't meet their needs. If the kids going to school, they meet other kids that have everything now - and the kids they don't understand your situation. So it's very hard for me to meet their needs like other kids, like brand name clothes like other kids. So I can't afford that because the money that we... our salaries as a DW. I'm not even working every day." – Amanda

> "My kids, they need to go to school. You have to pack their lunch boxes in the morning and you see what - you know what other people pack for their kids. And you know you can't afford to pack good enough for your kids. Those are the things which makes me cry." -Julia

Although they know that wearing brand name clothes and buying snacks at school are not necessities for sustenance and health, they emphasize the pain their children feel by seeing other children with those things. Just knowing that their children feel deprived of anything considered 'normal' to have by general social convention is upsetting to them - and is a hidden burden of care. However, they know that they can provide more for their children here in South Africa than if they were to remain in Zimbabwe.

4.3.2 Feeling alone

There are multiple stressors that create a feeling of isolation and Zimbabwean MDW single mothers for these women - despite having empathetic friends and communities. These primary stressors include single motherhood, absent fathers, and being foreigners.

1) Being a single mother

All of the women expressed that they feel alone and overwhelmed as single mothers.

> "Being a single mother is hard, very hard, because everything is on you, and you don't have someone to help you out. And sometimes kids don't understand you, they don't understand the situation…" – Amanda, 33, three children

> "A single mother is more stressful; I don't want to lie to you. Because you have to do everything. You have to take care of it. Everything. Food, school - everything, just do it yourself." - Talent, 36, three children.

2) Filling the shoes of absent fathers

In all but one interview, it was reported that the father(s) did not help financially at all, and most were not involved in the children's lives at all. Pretty, a 40-year-old with 2 children, said:

> "[My ex-husband] used to help, but now he's no longer interested … He changed his number."

Julia expanded on the lack of financial help:

> "Not at all. He always complained that he can't even manage his life so he can't manage to support us … His only brother who was in Joburg used to send me money for food when things were hectic. He passed away last year."

Julia receiving help from her ex-husband's brother was abnormal, as most women report not receiving any help from their children's paternal relatives.

Absent fathers impact the children directly as well. Many children are left to try to fill the fathers' shoes. Every woman who had a reasonably older child reported that their older children contribute in some way. Some have children who are occasionally completing housework and childcare while they are at work, like Pretty's:

> "[My older daughter] has to help because she's all I have now. She has to help me. Weekends, I do part-time job. I leave her with the child."

Others are forced to work to help financially, like Lee's young boys:

> "Saturday and Sunday, me and my other 12-year-old boy - sometimes the 10-year-old - would chip in to help. It depends what we are doing … like washing clothes in the township where we live."

3) Being a Foreigner

Being a migrant living in a foreign country is another large stressor that was reported. These women feel alone at the microscale because they do not have family here. They are also isolated as a cultural group against a larger South African population that is not always welcoming. Linda, a 36-year-old with three children says:

> "It's not nice at all… You are not safe. You are alone. A lot of things happen here in South Africa, and you are alone with your kids. People, they take advantage … They can do anything to foreigners and you are alone; there's nowhere to run to."

Though a couple of my participants reported having a friend or family member somewhere in South Africa, most of them reported having no familiar kin to lean on in SA. They also lack government support. The lack of any safety net is very isolating for them. According to Fortunate:

> "… if you are a foreigner here, you must make sure you are making work. If you don't have work, things will be tough here.… Because there's no help. Being a foreigner you must work."

What she means is not that she wishes to free-ride on government support, but that if she is unable to find work, she is not eligible for social grants in South Africa. In this way, most of these women truly are alone when it comes to providing financially.

4.3.3 Cyclic struggle and deprivation

The cycle of deprivation that affects my research population recurs monthly. All but one woman reported having a food shortage every month. Those with regular salaries struggle while waiting for their pay at the end of the month. Those without regular work struggle more frequently throughout the month.

> "From the 25th till 30th when I'm not yet paid my salary, things would be bad… I try by all means to have something for the kids to eat." - Amanda

Amanda specified that she goes maybe five days each month without eating so that she can feed her children. In fact, all but one reported that they go without eating regularly to try to have enough to feed their children.

Many women also reported living more extremely than just paycheck to paycheck, living on small money obtained 'here-and-there.' One of these women, Previous, feels that she never has what she needs:

> "We don't have enough food. If I find money, maybe R10, we going to buy for that child and eat. If it is finish, I'm going to find another one and eat it like that … Half of the month we are going to struggle. First of the month it be better, but starting from 15 till end of the month, we are struggling."

A few even reported having days where they had no food at all. Lee and her older children will go to bed without eating anything, and she will plead with neighbours for a piece of bread so that her youngest child will be able to eat because he is not yet able to understand their situation and can't go to sleep if he feels hungry. This struggle is difficult for all of the women, but is more extreme for those who report not having regular jobs or are being exploitatively underpaid by their employers. Through this struggle, a trend appears where women are forced to sacrifice more nutritionally diverse foods like greens, tomatoes, beans, etc., and only buy some staples like millie (corn) meal, rice, and cooking oil. This leaves them and their children to consume less nutritious meals and sometimes go without food altogether.

4.4 Support and childcare

4.4.1 Overall lack of support

I found that when these women have social support, it is primarily informal support rather than things like women's group or church support. They frequently reported having an understanding friend or neighbour to help them with things like food and child supervision when things get difficult and vice versa. Memory, who finds some support from friends who live in her community, says:

> "But now, we are like sisters because we stay together. We just help each other. If I don't have this, then they will help me with that. Tomorrow if they also don't have, we just help each other. That's how we survive."

However, despite some informal, reciprocal arrangements occurring in their communities, nearly every interviewee reported that they *do not feel that they have a sufficient support system here in South Africa*. A notable reason why they don't feel supported enough is because they are foreigners:

> “Being a Zimbabwean in a foreign country is the problem. Maybe if I was in my country, it was going to be better. But in a foreign country, it's difficult… because if you go to another Zimbabwean, they'll tell you, ‘No, we came here to work. I can't help you, also I need to look after my kids and my family back home.’” - Busisiwe

When money is so tight for so many members of the Zimbabwean migrant community, it is difficult for them to help each other beyond small favours like checking in on children or providing a bit of food to someone who is struggling *if* they have any to spare. It was emphasized that they do not receive government grants as foreigners, which makes their struggle more intense.

Another way that these women report not feeling that they have a sufficient support system is that they do not have family nearby, nor those that can often help them. They also noted how their family members have their own financial problems:

> “To keep on saying, ‘Can you help me? … it's difficult. My sister's also struggling there in Joburg.… She's getting more money than I do, so sometimes, if I ask for help, she'll help me. She'll just send money. Not that much, because she also has got her burden.” - Lee

The women’s family members who are living back in Zimbabwe are worse off than they are:

> “The situation in Zimbabwe is - maybe you have heard about the economy in Zimbabwe. So I can't expect [my family] to help me because in Zimbabwe, things are bad as well. So I have to try by all means to survive by myself.” - Amanda

These women are often some of the highest earners in their families, despite earning so little. Apart from emotional support – which will be discussed in section 4.4.3 - the research population feels very unsupported by any person or institution.

4.4.2 Insufficient childcare

The most commonly reported form of childcare for young children that these women utilise is informal agreements with neighbours/friends. These agreements are often reciprocal, where one woman will leave her children to be watched by another while she is at work, and vice versa. Some women have compensated arrangements, but this is usually informal compensation. For example, when Memory cannot afford to pay for crèche, she will give a neighbour some food in exchange for watching her children. If she does not have anything, she will 'pay' later:

> "I have to. Sometimes I cannot have it there and then, but when I have it, I will give that to them."

Lee was the respondent with the biggest trouble finding sufficient childcare:

> "If I didn't pay school fees for the [youngest] one, his brother who is thirteen will take a day off at school and look after his brother. I have got one neighbour who will check them here and there."

This ties back into the burden of care extending onto the older children, as Lee's oldest child is forced to compromise his education to help his mother care for his younger brother. As I prodded into this topic with Lee, I had one of my most shocking findings of this study appear:

> "When [my older kids] are in school, I will make sure that he's in school. If he's not, I'll just lock him inside. He will be sitting, playing with some toys. I worry very much because anything might happen. It's so stressful, I can't keep him like that… I don't have an option. I know it's not safe, but I don't have an option."

Lee is forced to leave her youngest child alone for entire workdays sometimes when she cannot afford his school or find informal childcare help. She cannot ask neighbours because she cannot always compensate them:

> "They need money. That's why I don't ask them. Because you can't just ask a person every time, 'Can you do this for me?', without getting him or her something."

This sparked interest, and upon secondary contact, I was able to clarify what many women *really* meant when they stated that they 'leave their children with a neighbour' while they are at work: their children are being left home alone, and a neighbour occasionally checks in on them. Sometimes the children are left completely alone with no one to check on them. When asked if they ever have to leave their children completely alone, all but one woman said 'yes.'

> "I do sometimes. I don't have a choice. I disconnect the stove and hide it on top of the cupboards, hide all the sharp things, then I tell them not to go out until I come back." - Memory

The interviews revealed that these women are often left without sufficient childcare options. Many children are being left unsupervised at times. However, the women have no choice because they must go to work if they want to feed their children and keep a roof over their heads. When these mothers *can* afford care, it is often an informal agreement with a neighbour where supervision is sparse. Young children frequently miss out on the early years of school/creche due to costs.

4.5 Coping

In order to unpack how these women cope, I will partition this section on coping into coping with finances versus coping with personal stress.

4.5.1 Coping financially

Every woman I interviewed communicated that they found finances to be a *massive* source of stress. They simply don't have enough money. They cannot pay for sufficient resources like food, warm clothes, stationery, childcare, etc. This is due to their employment as MDWs. To cope with finances, they simply just have to accept the way that things are and make do as best as they can with what they have:

> "There's nothing that I can do. I have to do it too, for my kids to survive."
> - Busisiwe

The women described sometimes participating in micro-entrepreneurial endeavours on the side when they have large expenses that they will not be able to cover. Pretty, for example:

> "Weekends, like tomorrow, I'm going to sell some small stuff that I get from the other China shop. So I just try to pay something big, selling those things."

Multiple women described this method of investing in items from cheap Chinese goods shops and trying to resell them. Memory explains that, although it's not much, it helps:

> "I sell small stuff because I have to. I go and look for small, small stuff to buy. Then I resell with just a little money on top."

Other women, like Lee, seek small jobs from people in their community rather than risking their money on investment for resale:

> "I would rather ask someone for a job to do. There is another lady who has got a takeaway… if things are very hard, I'd go to her and ask also for work

> … I will do the laundry for people, washing with my hands.… Some people will make doughnuts and they need someone to sell them, then I will do that - or my kids will do that."

Although these women try to earn more actual income to cope, extra earning activities are uncertain and sparse in opportunity. They more heavily rely on previously described informal exchange of value.

4.5.2 Coping emotionally

The isolation and intensive burden of care take a large toll on these women's wellbeing. These women describe a lack of time to take care of themselves.

> "I don't have time for myself. When I'm working, I'll be working at my workplace. When I come back, I have to look after my children and I don't have [time] to feel tired to do for my kids. And I also don't have [time] to be tired when I'm working. And it pains me a lot. And when I try to sleep, I don't sleep, I'll be thinking of the next move, the next day." - Busisiwe

By this account, even when Busisiwe tries to rest, she still feels burdened by her situation. This was something described by many women:

> "When we go to bed hungry… then I'd be thinking if my husband was still alive, we'll be getting whatever they want to have. Then I just let them sleep, then I cry myself to sleep." - Lee

> "If you don't have enough in house, you can't even sleep, thinking too much. I was fat that time, but now I'm skinny because of the stress." - Previous.

With all of this emotional turmoil, the women reported many ways of coping, with three primary methods emerging - crying, listening to music, and speaking with friends. However, speaking with friends appears to be a touchy area for these women, as many of them also fear being judged or gossiped about. Julia reports dealing with her stress privately so that she is not misunderstood:

> "Sometimes I cry…. Sometimes I write down what bothers me, instead of telling people, because if you tell people - if you are next to married ones, they end up thinking that you are in need of something else rather than help only. They look down upon you, thinking that you are not a hundred per cent straight. Once they're married and you are single, life will change."

This is also the case for others, like Fortunate, who chooses music over friends:

> "I appreciate listening to music because sometimes you can go and talk to the friends and those friends they can gossip about it. So sometimes I just feel like listening to music, that's all."

Many women expressed a preference for dealing with their stress privately to avoid social stigma. They try to soothe themselves by the emotional release of crying and by listening to music.

> "I'll put music in some earphones in my ears. I'll listen to gospel music sometimes. When I listen to that deep gospel music, I'll end up crying and I'll cry myself out. When I get quiet, I'll be feeling better." - Amanda

Every woman who reported listening to music specified that gospel/church music helped them destress.

Memory reports crying as her primary release, but also emphasized the importance of venting her feelings to her friends:

> “I usually cry because when I cry I'll feel better, then I'll talk to my friends. But if I don't cry, then my chest is going to be full. So usually I cry, then after crying, you talk to someone… I cannot just keep it to myself; otherwise, it will kill me.”

All women reported slightly different ways of dealing with stress, but every single one of them described some combination of crying, music, and/or social support. Formal support groups did not arise as a dominant coping mechanism. Faith appeared to be a strong factor in these women’s coping, as we can see in their choice of listening to gospel music. A few women reported going to church and finding joy in that, but it was also pointed out that transportation to church is too costly, so going to church is something not everyone can afford to do. Coping for these women is very personal and individual in most cases.

4.5.3 Prioritizing

The women also cope by prioritizing expenses to meet the most urgent needs first. With some slight variation on a case by case basis, the average order of financial priorities is to first pay the rent, then buy food, then pay for their children’s school and/or childcare fees if they can. The rent is a priority because they see shelter as absolutely necessary for their children:

> “For my kids, if I didn't pay rent, they can kick us out. So the first thing I must know that I'm paying my rent.” – Fortunate

> “ … the most thing I always force is for the rent because if you don’t have shelter… it’s not good.” – Sandra

> “The first thing I pay rent, maybe that lady I don't pay rent they are going to chase you out. So first I pay rent, and the other money I left, I'm going to find food.” - Previous.

Something that wasn't initially listed by the women when asked to order their financial priorities, but would later be specified as crucial, was saving money for transportation.

> "I pay my rent first … and I'll go and buy basics like cooking oil, salt, millie-meal... the basic things, no luxury things. I start to buy the basics first.… But I keep my transport money for work." - Amanda

This expense is technically the highest priority because, without money to pay for transportation to get to work, women will not be *able* to work and will not make an income to pay for the rent, food, or school. DWs generally work in wealthier neighbourhoods than their own and have long commutes to get to these. Transportation money is very important and is not something they can skip out on like they can skip meals.

4.5.4 Coping as a matter of privilege

As I noted in section 4.5.2 regarding the expense of attending church, many aspects of coping are actually a thing of privilege for these women. Lee misses out on the healing that could be had from attending church:

> "Nowadays, I'm not going to a church because it's expensive also to go to church. My church is in town, so I need transport to manage to go to church, so I just sit by myself."

Some women also reported lacking having enough free time to go to church or support groups, like Pretty:

> "If I have a chance, I go, but not always because I go to work and come back late, and the other days I have to go around and sell. So, it depends with the time, but most of the time, I don't go."

Costs of financial coping can be too much as well. For example, when asked if she bought and resold any goods for extra money, Fortunate describes:

> "I used to, yes, but now since the start of this Covid thing, things were low, and then I just thought I would just go to work only. So I was thinking, even when I get capital, I would start again."

Due to her increased financial strain since the start of the pandemic, she cannot afford to purchase items to sell. This is also the case for Busisiwe:

> "I don't have permanent job, so it's very hard for me to buy food for my family, pay rent, then send some money to my sister with my [older] kids in Pretoria. So I can't even have money to buy fruits and vegetables that I used to sell."

This also occurs for a practice called money pooling, where people contribute a small monthly fee and rotate who receives the combined pool each month as a cooperative saving technique – known as a stokvel in South Africa. Many women reported that they used to participate in money pools but no longer can:

> "Nope, because I don't have extra money to do all those things. My money is not even enough for me to buy groceries so that I can feed my kids, so I don't participate." – Lee

This uncovered a theme where being able to find ways to make extra money and help oneself cope financially is a form of privilege in and of itself. It costs money to buy stock to sell items. It costs money to join rotating money pools. If you borrow money, you have to pay it back - plus interest. The women all reported preferring not to borrow money due to inability to repay. Also, it costs time and energy to do extra work or go to social support groups. They don't have time or energy after long days of work and continued care work for their families upon getting home. As noted earlier, transportation is expensive, so

they aren't able to go to church or support groups as much as they may like to due to the cost of travel to get there.

This is the case for their jobs as well. Fortunate reports having to spend R50 per day to get to her work, creating a large dent in her income. Busisiwe often walks very long distances to try and save money on transportation. When it becomes even more of a problem in terms of coping, surprisingly, sometimes these women cannot afford to take new jobs when the cost of transportation is too much, and the amount of income they would make on top of that expense is not justifiable.

4.5.5 I don't want to be married

Remaining single can be seen as a coping mechanism for these women as well. Though many women reported feeling some nostalgia for the higher level of financial comfort and co-parenting that came with their marriages/relationships, all mention of it ended with an assertion that they, in fact, do *not* wish to be married at this time. Yvonne misses the partnership aspect of marriage:

> "I wish I was married sometimes. Sometimes things get tough, you need someone. To be a single mom sometimes it's very tough. You need to be loved. Something like that."

However, the women prefer single motherhood in other respects, as it was mentioned that they did not want the burden of caring for a grown man in addition to their children. It was also noted that men are not necessarily financial providers. They may be out of a job, or -

> "If he gets paid, he doesn't come home." - Sandra

When asked if she wishes she was married, Sandra continued emotionally on how her ex-husband does not provide:

> "I don't think so. I don't wish to be like that again… I just think that men are all the same, you know? If you don't take care of your kids - imagine now, I'm a single mother, you don't even prefer to give them a cent…."

There is also worry that if they remarried, their new partners would not properly care for their children:

> "I want to look after my kids. I know once I'm married, black men - especially black men - they will never take my kids just as theirs. So I want my kids to grow up." - Julia.

These women see better jobs as the way to improve their circumstances, not marriage or partnership. When asked if she thought a husband would make her better off financially, Yvonne carried on to state the following:

> "I think if I have a better job, not a husband… because there are some men, they don't even go to work.… They don't even care about you. Sometimes you have a man in the house, but they don't do anything."

This was a surprising finding to me, that even though they carry such a heavy burden on their shoulders to care for and financially support their children on their own, with low-paying jobs, they would still prefer to be single at this time. They see that traditional family structures with a male-breadwinner are not the only nor the best path.

4.5 Conclusion[15]

This chapter has described the findings that arose out of my thematic analysis. The findings reveal that Zimbabwean MDWs face a large burden of care. They face hardships making ends meet financially and regarding time and energy as invisible, precarious workers. Their decisions are all made with finances in mind, ultimately in the interest of ensuring their children's well-being and futures. This is the motivation to bring their children to South Africa. Their coping is primarily personal and emotional because practical coping is often expensive in terms of time and money, and social support is not sufficient. This leaves them with insufficient childcare when they work. The next chapter discusses these findings in relation to the literature and theory which have informed this study and presents four primary takeaways.

[15] Though not a dominant finding, Covid-19 was frequently mentioned. Despite existing for a small portion of their larger journeys, it is augmenting their burdens via job loss, exploitation, and reduced aid from employers.

Chapter 5 – Discussion: Learning to dance in the rain

5.1 Introduction

This study set out to uncover the coping mechanisms and systems of support utilised to manage the burden of care by Zimbabwean MDW women experiencing single motherhood in South Africa and understand why these women are bringing their children to South Africa with them. It is important to understand this population's experience of motherhood and the burden of care because they make up a significant portion of the domestic work landscape in South Africa. DWs, along with so many other low-skilled, low-paid labourers, contribute a disproportionate amount of the social reproductive labour crucial for the economy to keep functioning, yet they and their struggles are often invisible to us, and their needs are marginalised (Benya 2015). There are over a million DWs in South Africa (Du Toit 2020; ILO 2021) who are mostly female, many are migrants, and many are single mothers (Moore 2020). The private nature of social reproductive labour hides the extent of the burden that women and DWs are shouldering (Moore 2020; Benya 2015). The lack of professional oversight for DWs - and especially for MDWs - in a private home exposes them to exploitation, underpay, harassment, abuse, and unfair dismissal by employers (Ally 2009a&b; Cock 1980; Nyamnjoh 2006).

A 2009 report by the South African Institute of Race Relations found that 54% of all African parents in urban South Africa were single parents – 79% of whom are single mothers. Single parents, DWs and migrants -especially when they are female- all share a correlation with higher rates of economic impoverishment (Ally 2009b; Mkhize and Msomi 2016; Fujiwara 2008; Cohen 2018; Worby 2010; Walker 2018). Single mothers working in the domestic sector are incredibly vulnerable to exploitation, and they lack a safety net. This negatively impacts their and also their children's wellbeing, opportunities, quality of life, health, and growth.

This research identifies the experiences unique to Zimbabwean MDW single mothers' particular intersectionality, but it also illuminates the burdens of childcare that similar populations can also face. These findings certainly can't be generalized across all MDWs, all migrant workers, all single mothers, etcetera, but the implications of the burden of care on precarious/migrant single parents can and should be considered more widely. For example, a South African intra-national

migrant domestic-working single mother from the Eastern Cape living in Cape Town can still face many of the same stressors as Zimbabwean MDWs, despite not fitting my specific research population requirements. Lacking the ability to cope with the burden of care -and thus having insufficient childcare options- is not a phenomenon isolated to this group.

The research question(s) asked what coping mechanisms are available to and utilised by these women, what their support networks look like, and how they are coping with their childcare needs as domestic working single mothers. In the following paragraphs, I will dissect how the interview data, the literature, and my theoretical standpoint have come together to lead me to my argument that the coping resources available to Zimbabwean MDW single mothers are *insufficient*, particularly in terms of having minimal social support networks and unattainable practical solutions. Coping for them was primarily an internal, individual practice of finding emotional strength. This is contrary to the beliefs present in the existing literature, which displayed coping in precarious migrant communities as a predominantly social activity made up of intricate social webs that are sufficient.

5.2 Why bring their children?

The decision to migrate with their children to South Africa rather than leaving them in Zimbabwe is primarily a financial decision. Still, it would be inaccurate to deny the fact that concern and love for their children are at the heart of every aspect of the decision. Finos' (2019) research on the parenting experiences of Zimbabwean migrants in South Africa signaled to a growing stigma in Zimbabwe surrounding children that are left behind by emigrant parents. She also notes how these children experience trauma from this familial separation, which has a negative effect on the parent-child relationship and the child's behaviour. My research findings support this. As I've stated, the women interviewed for this study reported multiple reasons for bringing their children to South Africa. These reasons include a desire to remain as a nuclear family unit, maintaining the family bond, and avoiding children feeling abandoned. Leaving children with kin and mothering from a distance has been the standard familial structure in the Zimbabwean migration context. Yet, the women interviewed in this study differentiate from this by emphasizing togetherness. This may be due to changing notions of family, but also likely has to do with more opportunity to do so as the migrant landscape has evolved post-apartheid.

As I noted, though, my interviewees revealed that finances play a key role in the choice to keep the family unit together. Migration literature tends to focus on mothering at a distance and carries the sentiment that migrant women pursuing domestic work would prefer to leave their children in the care of relatives in order to reduce the financial burden and direct care burden. (i.e., Parreñas 2017; Cohen 2018; Moore 2020; Ally 2009a; Gorfinkiel 2011; Crush and Tawodzera 2011). However, my interviews have contradicted the literature. The majority of interviewees cited a financial reason (like lower school fees or the higher USD cost of living in Zimbabwe) as to why they moved their children to South Africa. Amanda noted that if her children lived with her sister in Zimbabwe, she would also have to send money for her sister's children to be 'fair.' They implied that for these kinds of reasons, they actually find it easier to bring their children to South Africa. They indeed have less day-to-day flexibility as individuals, which can be considered a difficulty. But this is not a difficulty unique to these women – it is something that almost every person to become a parent anywhere is faced with. The largest difficulty in their lives is making financial ends meet. Even though it may mean larger gaps in childcare and supervision, they know that paying the rent to keep a roof over their children's heads, buying food to feed their children, and providing their chilren with education is the priority. They find that the best way to provide is to save money on remittance expenses and high education costs in Zimbabwe. They want to just be together with what they *do have* in South Africa.

Migration is typically done in order to improve a family's socioeconomic status and access to opportunities (Gherghel and Saint-Jaques 2012). The women in this study primarily arrived in South Africa to find work concurrently with or in the aftermath following the 2007/2008 global economic crisis. Several scholars have noted the wave of Zimbabweans moving to South Africa looking to support their families as social, political, and economic conditions have declined in Zimbabwe post-recession (Duri 2016; UN 2020; Crush and Tawodzera 2016; HRW 2021). Having experienced this struggle in Zimbabwe as well as their struggles in South Africa, the women still believe that South Africa is the best place to have their children at this time. They know that even when they send money to Zimbabwe, their children's needs still may not be met there.

My theoretical framework for this study stressed the importance of how a woman is only able to approach her mothering duties with respect to her personal and financial situation. More specifically, I found that motherhood is not a universal notion, and each woman will engage with it differently (Lewis 2001; Walker 1995). Based on the interviews, I can conclude that these

women's experiences of mothering, coping, and the burden of care are absolutely impacted by their unique circumstances. These women keeping the family together is an example of motherhood evolving to unique circumstances, rejecting what it is traditionally believed 'should' or 'must' be in order to cope. Bringing their children to South Africa is a coping mechanism in itself, alleviating the pain of family separation and reducing expenses associated with remittance.

5.3 What support systems help to alleviate the burden of care?

The women predominantly do not feel that they have a sufficient support system here in South Africa.

The concept of support was encountered in three primary forms in this study; practical kin support, emotional kin support, and government support. I previously discussed problem-based versus emotion-focused coping as established by Taylor and Stanton (2007). Practical support comes from problem-based coping, where people lean on their kin/community to meet their needs. In this instance, it would look like solving the inability to pay for crèche by asking a friend to babysit. Emotional support comes from empathy from kin/community, such as seeking reassurance or advice from friends, church, or a support group to reduce feelings of isolation. Government support is financial support in the form of things like welfare grants or subsidized housing.

Parreñas (2017) establishes that one of the most blatant ways migrants lack support is by being "legally at sea." This is where they have insufficient or nonexistent government protection from both their home country and the host country in which they reside. Zimbabwe's Constitution claims to "take all practical measures, within the limits of the resources available to it, to provide social security and social care to those who are in need." (Constitute 2021). However, UNICEF has found that Zimbabwe's national budget allocation towards social welfare programs is insufficient (2020), and my interviewees indicated not receiving anything despite their needs. This is due to the overall lack of money available, declining donations from development partners, and poor functioning within the government institutions responsible for processing grants (UNICEF 2020). The South African Social Security Agency, on the other hand, has better infrastructure and funding for social welfare – but grants and/or services (like government-subsidized affordable housing) are reserved for SA citizens, people with refugee status, and people with permanent residency status (Scalabrini 2021; Nyamnjoh 2006). Many migrants do not qualify. Migrants also

sometimes neglect to seek welfare assistance from government and NGOs due to looming fear of deportation (LRC 2021).

Without formal alleys of financial support, Northcote and Dodson (2015) stated that migrants heavily rely on the support that they receive from their communities to be able to care for their children, and my interviews revealed that these women sometimes indeed do this. It was reported that they often give/receive childcare help from friends and neighbours who are going through similar struggles in caring for their families. Most of the women interviewed do not have any family in South Africa, highlighting the importance of these extra-familial actors who enter caregiver roles in a migration context, as noted by Magdalena Gorfinkiel (2011). She claims that migration thus leads to new forms of mothering evolving as people adapt to new cultures and surroundings. My theoretical grounding is framed by the different cultural understandings of mothering and how women engage with mothering differently. Traditional African familial structures rely on constantly shared mothering among lifelong kin as opposed to the 'Western' norm of isolated mothering in a nuclear family. While my participants are engaging with shared-mothering in their communities, they are being untraditional in that they are forced to expand to form *new* networks with less-invested individuals. However, the interviews also showed that social support is limited and cannot be relied on as a consistent coping mechanism.

Based on Nonzuzo Mbokazi's (2019) study on low-income motherhood and childcare in South Africa, I anticipated that my interviewees would report depending on a combination of paid childcare (when they can afford it) and reciprocally provided help from members of their communities. However, my study uncovered a shortcoming in the informal childcare agreements where many children are receiving minimal care at times when their mothers must work and help just isn't available. Unlike mothers with higher-paying jobs or a second income from the other parent, my interviewees often cannot afford to pay for consistent formal care arrangements. They absolutely have a support network, but the findings showed that this is primarily emotion-focused support from women facing similar situations. Practical support in the form of childcare is not always possible because the other women involved are not always available or willing. This is contrary to the theory mentioned above on shared mothering arrangements where other women involved would actually be immersing themselves in the care of another woman's child (Francis-Connolly 2000). The women in my study reported that their children are not often being watched all day by neighbours and are staying home alone to be checked on occasionally throughout the

day. This is because people in these women's communities have their own struggles and childcare needs to deal with as well and can only dedicate so much time/energy to other families' needs.

The case is that, due to their circumstances, they lack access to the resources (like affordable crèche, a social safety net, money) to be able to fill their childcare needs. They are left to make the gut-wrenching decision to sometimes leave their children home alone while they go to work. They do this knowing the risks, but if they do not go to work, they won't be able to keep the roof over their children's heads or put food in their children's bellies. This is a morbid compromise on basic needs that these women have to make regularly due to the massive burden of care that rests on their shoulders, and their shoulders alone. This continues to show that motherhood is individual, not universal.

5.3.1 Reflection on children being left alone

The finding that children are sometimes left unsupervised during the day leaves an important ethical consideration for me to make after the fact. South Africa does not have a legal minimum age requirement for a child to be left alone. However, the South African Constitution does specify that children are entitled to protection from neglect (Mokoena 2021). Neglect can be defined as, "failure of a parent or other person with responsibility for the child to provide needed food, clothing, shelter, medical care, or supervision to the degree that the child's health, safety, and well-being are threatened with harm." (CWIG 2018, p. 2). However, there is uncertainty over when to label a scenario as 'neglect.' Firstly, different children have different needs and maturity levels to be considered. Secondly, there is a difference between intentional neglect when a caregiver has the resources to meet the child's needs versus unintentional neglect where a caregiver lacks such resources but would provide them if they could (CWIG 2018; SALC 2002). One also has to consider whether harm that may result from 'neglect' is actually occurring or just has the potential to occur (CWIG 2018).

After research and much pondering, I feel that the children sometimes being left alone by my research population does not constitute neglect. Firstly, there is no intention of neglect. They are not choosing to leave their children unsupervised out of carelessness, but rather out of lack of another option. They know that to provide more urgent needs such

as food, shelter, clothing, medical care, etcetera, they have to go to work regardless of the level supervision available for their children. Labelling a lack of ability to afford childcare as ‘neglect’ is classist and discriminatory, especially when there is no free option available or known to the caregiver. Secondly, the children are not being directly harmed; rather, there is just the possibility of an accident occurring as a side effect of their circumstances. It was explained to me by a few women that they do everything in their power to make sure their children will be safe while home alone. They disconnect electrical appliances, hide stoves and sharp objects, leave toys for entertainment, and there is frequently a somewhat older child present who they trust to find help in case of an emergency. Also, due to their financial circumstances, their children sometimes have unusual responsibilities for their ages and can be considered more mature.

While there is a valid concern over children spending long periods of a day without adult supervision, we cannot blame these women for doing the best they can. I have a duty to protect the vulnerable as a researcher, which includes both my duty to my interviewees and to their children. I do not feel that reporting this is necessary or warranted. I believe it would be damaging to the families’ well-being, not beneficial, and would likely cause more distress to children than their family's current routines. To mitigate, I reached out to local NGOs and migrant organizations such as Scalabrini, SA’s migrant LRC, CoRMSA, AMP, and IOM to seek out any assistance that may be available. I have so far only heard back from one, but was able to refer the women to a no-fee crèche for foreign nationals in Wynberg, as well as inform them of the existence of a few low-cost/pay-when-you-can informal crèches involved in the Scalbrini Women’s Platform programme.

5.4 Coping unexpectedly – alone

The migration literature pool commonly views coping as focused on practical solutions and heavily rooted in the social context. To re-centre, I’ll remind you that coping is defined as the efforts that one makes to be able to tolerate and/or overcome difficult circumstances in their life (Taylor and Stanton 2007). Meyer et al. 2008 consider coping and access to coping resources to be socially rooted where factors like race or gender determine what coping resources we have access to. While this is broken up somewhat by Broussard et al. (2012) and Taylor and Stanton’s

inclusion of emotion-focused coping, even their conception of emotional coping centres on social support. My study finds that individual emotional coping may not have physical outcomes but is still helpful *and* is not dependent on social networks.

Due to the lack of sufficient practical support available to my participants, they are left to emotionally cope with things as they are. Being a single mother limits time and energy that one can put towards their children (Mkhize and Msomi 2016), but also what time she can dedicate to trying to better her circumstances. Working, single mothers often cannot get extra work because they simply don't have enough time in the day to do so. This is especially for DWs who have long commutes and are often overworked without overtime pay (Ally 2009a; Cock 1980). With the high rate of unemployment in South Africa, finding more jobs is not always possible anyways. People may turn to micro-entrepreneurship in this case, but the women often cannot invest in capital to sell goods even if they have the time and energy because they would need extra money to do so - extra money which they do not have. This relates to the article by van Deurzen, van Ingen & van Oorschot (2015) that describes how the extreme inequality of a society like South Africa's allows for much disparity in peoples' access to certain coping resources and especially so for single parents. While this article was speaking more in terms of social and/or psychological support from fellows for dealing with stress - which is relevant also, as I will describe in subsequent paragraphs - I would argue that their theory can also be applied to financial and practical circumstances of access to coping resources as well. If one is out of time and energy, they won't be able to get another job. If one can't afford to buy stock, they can't sell goods. In my interviews, I even asked the women about borrowing money they might use for this, but they expressed resistance to doing so due to the consequences when they are 'inevitably' unable to pay the money back to the 'loan sharks.' These are problems of the lower classes, not the privileged.

Moving past financial attempts to improve their circumstances, many of the women report trying to cope practically by delegating care and domestic responsibilities to older children. As described in the prior subsection, they don't have access to enough kin/community members who are willing or able to care for their children all day while they work. While it is normal for older children to help their parents out with the younger children across different cultures and classes, the children of my research population face a far higher level of responsibility. This is a way of coping for the women, but it's really just shifting the burden of care elsewhere within the family and doesn't solve the problem. As noted in the findings section, a large stressor faced by my

research population is the desire, and inability, to provide a 'normal' life for their children. This relates to research covered in the literature review by Andrew Guest (2007) and Aneshensel and Sucoff (1996). They describe how the socioeconomic status of a family, among others, plays a large role in well-being. My findings suggest that this is a large chunk of the distress they are coping with. They described feeling pained over their own children seeing but not having what other children have. They expressed wishes for their children to be able to go to school - not to have to feel the shame of not being able to attend school due to their financial positions. They want to be able to provide things as simple as a proper packed lunch for their children to take to school. Due to their circumstances, however, there is little they can do to improve what they can provide their children and feel 'equal.'

A well-known phrase by author/speaker Vivian Greene states that, "Life isn't about waiting for the storm to pass, it's about learning to dance in the rain." This quote captures the essence of how these women are getting by despite the distress that their overwhelming burden of care faces them with. The dominant coping mechanisms reported in the interviews were crying and surrendering to their faith, often through gospel music. This reported action of crying to cope can be unpacked in relation to a study from the journal of Frontiers in Psychology by Gračanin, Bylsma & Vingerhoets (2014). They argue that crying generally occurs in the context of situations where one feels strong emotion over separation, loss, or helplessness. While crying can have a social function to create a visual appeal for support or attention from a caregiver, it also has an internal effect that causes the body to release endorphins and oxytocin (Gračanin, Bylsma & Vingerhoets 2014). "These natural chemical messengers help relieve emotional distress along with physical pain. In other words, crying is a self-soothing behaviour." (Raypole 2020). The interviewees in my study implied that their crying was done in private, thus not to serve a social function. The crying was described as the release of an overwhelming feeling or as a way of literally releasing the stress that they feel in their chests. Crying is an independent way for these women to shake off their accumulation of anxiety and stress to get up and carry on. Crying is personal. It is something that they always have access to when they feel the need to do so, unlike social support, and is something that makes them feel better even when they are powerless to change their circumstances.

The women also frequently mentioned listening to music as a way to cope with the stress of their burdens. This is yet another coping mechanism that they use to feel okay, and they don't need any other person or institution for it. They were quite specific in that they listened to gospel

music or their church music, especially because some of them could not actually go to church due to high transportation costs. In her 2000 article on the caregiver burden, Kuei-Ru Chou found that utilizing spiritual support-seeking behaviours can decrease a person's burden of care. The women's use of gospel music and prayer to overcome stress is very comforting for them, as it is individually achieved, yet reduces feelings of isolation when they feel that a higher being is looking after them. This is a common phenomenon as shown in Dr. Tom Rees' (2009) study on personal security and religious belief. He found that people who are low-income and lack sufficient 'social safety nets' are more likely to lean on religion for personal comfort than other class groups. This supports my findings of my interviewees using gospel music as an individual emotional coping mechanism.

Coping with the burden of care is very personal and isolated for these women, and did not look how I expected it would look when I was going into the study based on the literature. My theoretical framework assumed the idea that the burden of care may be too great for a woman to cope with if not for social support from her network of shared mothering (Moore 2020; Gorfinkiel 2011; Broussard, Joseph & Thompson 2012), but this was not the case. A significant factor in these women's coping strategies is that they are *not* rooted in the social realm; rather, they are individual. Once again, we are reminded of motherhood's -and thus caregiving's- various forms that shift based on individual circumstances. Every mother faces a burden of care, but not every mother is privileged to cope with it via normative systems of social or government support. Personal, emotional coping is at the heart of how these women are getting by.

5.5 A new 'normal'

Our final important item to discuss for this study is that my research population has expressed that they don't want to be married at this time. While we may expect them to feel the opposite, they do not feel that finding a man would solve their problems. This is despite the fact that there is a correlation between poverty and single motherhood (Mclanahan and Garfinkel 1989; Cohen 2018; Mkhize and Msomi 2016). This is despite traditional notions of the father as breadwinner and provider. This is despite feeling they might be judged (again, a big reason they prefer to cope privately rather than talk with friends about their problems). Although there has been a recent uncoupling of marriage and motherhood in Africa as described by Walker (1995),

the literature still displays clear disadvantages and stigmatization still faced by single mothers. Single motherhood is, in fact, just another layer of intersectionality that affects these low-income, black, Zimbabwean migrant women.

As unpacked previously, the 'single mother' is stereotypically associated in opposition to 'family.' It is contrary to the Western, Euro-centric notion of the nuclear family with a working father and a stay-at-home mother, as well as to the traditional African extended-family lattice. It's even contrary to historical trends in the African economic migration context where the male head of the family leaves to work and sends money home to the domestic wife and children. My research population certainly expressed some nostalgic thoughts around marriage and/or partnership. The thought of having a human connection with someone to love and care for them is tempting, and they fondly reflect on how their finances might have been better when they had two incomes in the family. But it was clearly communicated in the interviews that finding a man or being married would not improve their lives in the ways they need. They saw men as potentially just adding to their burden, becoming another person they have to care for; another mouth to feed and another pile of laundry to wash. They also perceive men to be a risk; they may spend their salaries on booze, they may not actually work, or they may create conflict. One woman even pondered the dangers of HIV/AIDS and dating. When asked how they could improve their circumstances, these women said that they need better jobs, not husbands

This resistance to finding a husband displays yet again the non-linearity of motherhood. These women are not here to mother 'normally.' They are often in survival mode, so even when they feel burnt out by the burden of care, or when they feel judged by their friends, they still don't want to be married because it threatens their families' survival. They want jobs, not husbands. They want to feed their children, not received social acceptance from those around them. They have created a new normal for their families.

Chapter 6 - Conclusion

This study set out to understand how Zimbabwean single mother MDWs experience and cope with the burden of care. It was conducted as a qualitative research approach using in-depth interviews conducted remotely, and was analyzed thematically. It has found that the women concentrate on different coping methods than anticipated. Without DWs, millions of families would struggle to meet their needs and cope with the burden of care. Yet, the DWs in this study are not able to cope with their circumstances practically. The evidence suggests that these women lack support systems to depend on to meet their childcare needs. They lack regular employment, sustainable pay, and fair, regulated working conditions. They bring their children to SA to save money but still have few options for childcare when they go to work - and these aren't often ideal (like when children are left alone). Society's conception of motherhood, childcare – and thus coping in this context - is tainted by privileged perspectives of what is available to do so. Coping is not just how one overcomes difficult circumstances, it is also how one manages to *tolerate* those circumstances (Taylor and Stanton 2000). The Zimbabwean migrant domestic working single mothers of this study lack the resources and social conditions to cope by overcoming, so they cope by tolerating. They cope individually by crying and listening to music. They cope emotionally, not by venting to their friends, but by doing everything they can to provide as much as they can for their children. Doing this brings them enough 'success' to feel that they can cope with their situations.

Barlow and Chapin (2010) have said that mothering is something to be 'practised,' not followed. It is contextual and constantly evolving.. Each mother feels the burden of care differently and copes differently as such. This study has shown that these women cannot cope well enough by relying on their friends, neighbours, and communities; thus coping is not nearly as much a social activity for migrant, precarious-working single mothers as thought. They manage the burden of care by tolerating hardship, giving their children the best quality of life that they can manage, and finding ways to be okay with the shortcomings.

6.1 Limitations

This study was a small-scale qualitative study by a single student. A small sample size and geographical concentration limit the generalisability of the findings. Ideally, I would spend more time and interview more of the population of interest throughout South Africa, but it was just not in the scope of this study. I believe some common themes can be asserted, but I cannot generalise my findings to all Zimbabwean domestic-working single mothers in South Africa.

While qualitative research provides rich, insightful accounts, it doesn't give us a quantifiable idea of the scale of the phenomenon. If I had more time and resources, getting numeric data on the scale of insufficient childcare and perceptions of social support among migrants could broaden the generalisability of findings.

The sample was also found by purposive snowballing. While it provided rich findings and was appropriate given my limited access to contacting the research population, it would be valuable to take a mixed-method approach to this topic. Adding a randomly sampled quantitative data collection would help us to understand the extent of this phenomenon.

Lastly, the research was done remotely. Having in-person interviews might have added value to the data by allowing better trust to be built between myself and the interviewees, a more natural conversational flow, and providing information from non-verbal cues.

6.2 Further Research Suggestions

There is much left to be discovered surrounding this topic. My research population, along with many other migrants and/or low-income and/or single parent populations, likely face similar dilemmas around the provision of childcare during the workday. Urgent further research on lack of or insufficient childcare during the workday is needed in South Africa to find solutions and ensure child well-being. Also, more research on the individual, emotional coping practised by my research population would be beneficial. Coping via social support has been previously overestimated. This study has shown that other forms of practical coping options like finding more work can be limited and/or too costly for

precarious workers/single mothers to access. Lastly, further research is warranted on why these women hesitate to search for partners in deliberate deviation from normal familial conventions. This challenges our current notions of family and could provide great insight into how understandings of family in migrant communities, single parent homes, and society at large are evolving.

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Appendices

Appendix A - Interview guide/'script'
BOLD are must-asks

I am investigating the "burden of care" and how you experience your childcare duties as a migrant single mother who works in the domestic work sector.

You are being asked to participate in this study because you meet the requirements outlined in the lay summary and informed consent form that I sent you. Did you have a chance to look over that information? Did you have any questions about anything?

Before we begin, I need to verify that I have your consent. I cannot have all of you sign a form in person, so verbal consent here will suffice.
Do you agree to be interviewed for my study?

Age?
Where in Zimbabwe are you from?
What was your childhood like?
When did you migrate to South Africa?
Did you know anyone who was already here? Who?
Why did you migrate to South Africa?
Do you send remittances home to family in Zimbabwe?
How did you become a single mother? (divorce, death, never married, etc.) and Why?
Does the father help you financially?
Does the father's family help you in any way?
Do you receive any grants or financial aid?
Do you receive informal loans from friends, family, or neighbors?
How many children do you have?
How old are they?
Do the older children help care for younger siblings? How?
Do your older children make it easier or harder for you? How?
Do the older children contribute financially? Why or Why not?
Are you more stressed out by caring for younger children or older children?
When did your children come to South Africa? (with you, later, etc.)
Why did you decide to bring them here instead of leaving them behind with family in Zimbabwe?
Do you have any plans to send your children back to Zimbabwe?
Is it easier to have them here or easier to leave them in Zimbabwe with family? Why?
Do you have any family here? Do they help you care for your children?
Do you go to support groups?
Does your church support you?
Do you have friends and neighbors who help you care for your children?
If you have/ when you had young children, who watches/d them while you are/were at work? Does this cost you anything? How did you pay for it?
Do you ever leave your young children home alone?

How much does daycare cost you?

How much money do you make approximately per month?

Do you work informally?

When money is tight, what things do you prioritise and pay for first?

What strategies do you use to cope when money is tight?

Do you ever get overwhelmed being a single parent? **How do you deal with your personal stress and emotions?**

How do you raise your children when you have to work?

Are you ever food insecure? How often?

How big is your house? Does anyone live there with you besides your children? Do they pay you rent? Do relatives live with you?

Do roommates help care for your children?

Do you think that being a migrant makes things harder for you as a mother?

Does your employer help you out beyond paying your salary? If so, how?

How many other women like you do you know?

Do you have plans to return to Zimbabwe someday?

What part of your experience/identity (as a black woman, as a migrant, as a single mother, etc.) plays the biggest role in your childcare practices?

Does she feel a burden of care? What burdens does she feel? ”cost you anything? How did you pay for it?

Do you ever leave your young children home alone?

How much does daycare cost you?

How much money do you make approximately per month?

Do you work informally?

When money is tight, what things do you prioritise and pay for first?

What strategies do you use to cope when money is tight?

Do you ever get overwhelmed being a single parent?

How do you deal with your personal stress and emotions?

How do you raise your children when you have to work?

Are you ever food insecure? How often?

How big is your house? Does anyone live there with you besides your children? Do they pay you rent? Do relatives live with you?

Do roommates help care for your children?

Do you think that being a migrant makes things harder for you as a mother?

Does your employer help you out beyond paying your salary? If so, how?

How many other women like you do you know?

Do you have plans to return to Zimbabwe someday?

What part of your experience/identity (as a black woman, as a migrant, as a single mother, etc.) plays the biggest role in your childcare practices?

Is there one stressor (race, migrancy, single parenthood) that impacts your life the most?

Does she feel a burden of care? What burdens does she feel?

Appendix B – Interview follow-up question list

"Hello! I just have a couple of follow-up questions from our interview:

1. When you leave to go to work and your children are being watched by a neighbor, are they going to the neighbor's house for the day, or are they staying home alone and the neighbor just checks in on them?
2. Do you ever leave your children completely alone when you go to work?
3. Do you ever participate in a money pool? This is where everybody puts some money into a saving pool monthly, and a different person in the pool gets paid a certain amount sum each month on rotation? (you may know this as a "round-table" or a "chit fund").
4. Do you go to formal support groups?
5. Do you feel like you have a good support system here in South Africa? (friends, family, community who help you out, etc.).

You can type your responses to me. Thank you for your time!

Best,
Madeline"

Appendix C – Data indexing Phase 1, Initial themes

- Greener pastures
- Seeking better opportunities
- Seeking better life
- Seeking Work
- Older children filling parental roles in father's absence
- None/minimal support from children's father
- None/minimal support from children's father's family
- Family in Zimbabwe; inability to help due to own poor circumstances
- Keeping the family unit together for financial reasons
- Keeping the family together for love and familial bond
- Keeping the family together so kids don't feel left behind
- Keeping the family together because it's better to struggle together than apart
- School fees too high in Zimbabwe
- Liking low/no school fees in South Africa
- Fear of kids being kidnapped in SA
- Fear of kids (daughters) being raped in SA
- Missing Zimbabwe, would return if things were better because of fear in SA
- Waiting to be paid at the end of the month; struggle
- Monthly time of food shortage
- Mothers going without food so kids can eat
- Having fewer, and less nutritiously diverse meals
- Wishing kids would have what other kids have
- Wanting to give kids a 'normal' life
- Crying; coping
- Listening to music, Gospel music; coping
- Confiding in friends; coping
- Fear of being judged by friends; affecting coping
- Rent, food, school fees.
- Covid exacerbating deprivation/struggle
- Covid job loss
- Covid food shortage
- Covid exploitation
- Employers not paying enough
- Living in room in a shared flat
- Living in a shack
- Living in a Wendy house
- Reciprocal childcare
- Childcare paid for with grocery/material rather than money
- Childcare paid for with labor rather than money
- Informal daycare
- Kids "left with neighbor" (alone, neighbor checking on them occasionally)
- Not borrowing money to avoid debt
- Not borrowing money for fear if they cannot repay
- Rather struggle than borrow money

- Community supports each other because of similar situations
- Community supports each other out of empathy
- Most people cannot help much because of their own struggles
- Feeling much stress for being a migrant
- Feeling much stress for being a single mother
- Support from friends
- Support from church
- Participating in work on the side; coping
- Participating in entrepreneurship on the side; coping
- Having no work permit, being illegal migrant
  Not receiving any kids of formal financial aid or grants

Appendix D – Data indexing Phase 2, additions

- Money pool participation
    - Privilege of being able to participate in money pools
- Privilege of being able to do side work/entrepreneurship
- Lacking permanent/regular jobs
- Transportation as a large expense and consideration
    - Not taking jobs because of transport cost
- Kids not being literally left with neighbors (as I previously understood)
    - Kids left alone to be checked in on by neighbors occasionally
    - Kids sometimes left completely alone
- Cannot depend on extra employer support, but occasionally benefiting from it

Appendix E – Data indexing Phase 3, consolidation

- “Greener Pastures”
- “If things were better...” - missing Zimbabwe
- A cycle of struggle and deprivation
- Absent Fathers
- Keeping the family together because … family
- Keeping the family together saves money
- Dreaming of a “normal” life for the kids
- Crying
- Music
- Friends - to share with or not to share with
- Rent, food, school fees … transportation
- Three household structures
- Minimal ability to provide childcare
- Making money on the side is a luxury few can afford
- A community that understands
- Being a foreigner
- Being a single mother
- Being responsible for everything
- Informal compensation
- Informal childcare
- Covid

Appendix F – Data indexing Phase 4: Final Thematic Index

1. **‘Greener pastures’**
2. **Feeling alone**
3. **Keeping the family together**
4. **Education**
5. **Dreaming of a ‘normal’ life for the children**
6. **Cyclic Struggle and Deprivation**
7. **Minimal ability to provide sufficient childcare**
8. **Coping**
9. **Support**
10. **Priorities**
11. **Covid-19**
12. **‘I don’t want to be married’**

Appendix G – Figure 1. Participant profile summary table

articipant	ge	ids	ear ame to A	eason ame to A	rrived ingle or arried	oute to ingle otherhood	eason(s) brought ids to SA	rimary hildcare when an't pay for chool	ids ever eft alone?	eels she as a good upport ystem?	rimary oping echanism	amily in A?	elp rom ather n-laws?
retty	0	wo – 11 nd 4	009	ooking or work	ingle	ivorced, ighting	er stepfather was not ind to her kids when hey were with her nother	lone w/ eighbor hecking	es	o	**rying**	o	o
alent	6	hree – 2, 9 and	016	ooking or work	ingle	idowed	xpensive to send noney, & no one there s able to care for her hildren	lder children r Alone w/ eighbor hecking	es	ometimes	**rying**	o	o
ee	0	our - 6, 12, 0 and 6	007	ooking or work	arried	idowed	ore affordable school ees, but eldest still in im	lder children	es	o	**rying**	ister in HB	o
andra	5	hree – 6, 14 nd 9	014	ooking or work	ingle	ivorced, busive usband	idn't want kids to feel bandoned	lone w/ eighbor hecking or lder children	es	o	**rying**, alking with ther mothers	o	o
ulia	7	hree – 6, 8 and	007	ooking or work	arried	ivorce, usband heating	oo expensive to send noney, & grandmother s sick	ldest daughter, r at neighbor's ouse	es	o	**rying**	o	o
manda	3	hree – 5, 13 nd 8	008	ooking or work	arried	ivorce, usband heating	oo expensive to send noney	lder children	es	o	**rying, ospel Music**, riends	o	o
inda	6	– 16, 2 and 8	014	ooking or work	arried	ivorced, usband heating	chool in SA is more ffordable, & to remain s a family	lder childre r Alone w eighbor hecking	es	ometimes	**raying hurch**, peaking with er kids	o	o
ortunate	9	hree – 7, 15 nd 8	009	ooking or work	ingle	ever narried, artners heating	o one there is able to are for her children, & chool more affordable	lone w/ eighbor hecking	es	o	**rying**, istening to nusic	o	) No) No
race	8	hree – 5, 12 nd 9	017	ooking or work	ingle	ivorced, busive usband	ear of abusive ex, vants to keep her kids afe with her, & school nore affordable	lder children r at the eighbor's ouse	o	o	**raying hurch**, peaking with ids	o	o
emory	4	hree – 5, 9 and	008	ooking or work	arried	ivorced, usband heating	ore affordable school ees	ldest child or lone w/ eighbor hecking	es	ometimes	**rying**, peaking with er friends	o	o
revious	3	hree – 0, 9 and	016	ooking or work	arried	ivorced, usband heating	o one there is able to are for her children, & o remain as a family	lone w/ eighbor hecking	es	o	**rying**, peaking with er sister	o	o

Yvonne	35	Two – ages 16 and 7	2010	Looking for work	Single	Never married, fighting	Expensive to send money, school more affordable	Alone w/ Neighbor checking or Older child	Yes	Sometimes	**Speaking with friends**	Aunt	1) No 2) Nov and the food
Busisiwe	43	Four – 15x2, 10 and 8	2008	Looking for work	Married	Husband left, cheating	To remain as a family, older twins with sister in PTA	Alone w/ neighbor checking	Yes	No	**Gospel Music**	Sister in PTA	No

Appendix H – Ethical clearance from UCT

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Leslie Social Sciences Building
Private Bag • Rondebosch 7701
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29 March 2021

Confirmation of Research Ethics Approval Madeline Johnson [SOC2021/08]

This is to confirm that Madeline Johnson research proposal, "Single Mother, Migrant Domestic Workers: Exploring the coping strategies and experiences of Zimbabwean migrant domestic workers raising children in South Africa", under the supervision of Ms Bianca Tame, has been reviewed by the Sociology Department.

The Department and supervisor is satisfied that the research carries no significant risk or harm to human subjects. We are further satisfied that appropriate informed consent and confidentiality/anonymity/data protection mechanisms are in place.

It is a condition for the acceptance of Ms Johnson's proposal that she complies consistently with strict ethical standards. This will entail proceeding only on the basis of the consistently informed consent of interviewees and will require regular monitoring of ethical issues which may emerge as the project develops.

Please contact the Department should you have any questions or concerns.

Kind regards,

Zintle Mlindi

"OUR MISSION is to be an outstanding teaching and research university, educating for life and addressing the challenges facing our society"

Appendix I – Informed consent form

Informed Consent Form

For a study conducted by Madeline Johnson
Candidate for MA/MsocSc specialising in Industrial Sociology
University of Cape Town
2020

Purpose of the Research

To answer this question:

> ***What coping methods are utilized to manage the burden of care that is present for Zimbabwean migrant live-out domestic workers who are engaging with single motherhood?***

The study aims to understand how you experience your childcare duties as a migrant single mother who works in the domestic work sector.

You are being asked to participate in this study because you meet these requirements:

You are Zimbabwean

You have migrated to and live in South Africa

Your children live here in South Africa with you

You are a Single Mother

You work as a Domestic Worker

You live outside of your employer's home

How you will Participate

Your role in this research is to be interviewed by Madeline Johnson, a student researcher from the University of Cape Town. You will be one of approximately 10 women being interviewed for this research. You will be interviewed on a voice call over WhatsApp.

You will be reimbursed for data used for the interview, and compensated for your time.

The interview is estimated to take between 40 and 60 minutes of your time.
You will need to arrange a time with Madeline during which you can be interviewed.

Madeline may contact you at a later date after your interview to briefly follow-up on a few things that she needs clarification for. This should take no longer than 10 minutes. You will be provided with a sufficient amount more cellular data for the follow-up if this is the case.

Privacy and Confidentiality

Your privacy is very important to Madeline. She will not disclose any information that can trace back to you.

Your personal information will be known only to Madeline, and it will be stored in a secure location under password protection.

Your full name will *not* be disclosed in any writing that comes as a result of this study.

The interview will be audio recorded so that Madeline may go back and listen to it later and have it transcribed into written format. These recordings will not be shared with anyone else. If you wish for Madeline to turn off the recording device for any portion during the interview, you have the right to order her to do so.

Anything discussed in the interview can be used in the writing that comes as a result of this study unless you have advised Madeline that something is being told to her in confidence.

Again, any information used from your interview will not be linked to your full name and you will remain anonymous.

Potential Risk

Topics discussed in your interview may potentially be sensitive and bring up emotions.

Potential Benefit

By participating in this study, you will have an opportunity to speak about your life experiences and share your story with someone who wants to listen. You will be able to represent yourself in your own words.

The information that will be gained from your interview is very important and can help the world to better understand how Zimbabwean single mothers living in South Africa are caring for their children despite challenges you may face. You will get to be a part of that discovery.

Your Rights

Your participation in this study is completely voluntary.

If you agree to participate in the study, but change your mind later on, you are free to withdraw from the study completely and your answers will not be used.

You only have to speak about things that you are comfortable with. If you feel uncomfortable you may tell Madeline that you wish to move on to another topic.

You are free to end the interview at any time if you feel uncomfortable.

If you feel you would like to talk about how you are feeling after the interview, Madeline will refer you for counselling.

Contact Information

Madeline can be contacted anytime via e-mail at:
jhnmad002@myuct.ac.za
Or by phone call at:
+27 081 450 0588
Or on WhatsApp at:
+1 970 708 1104

She will respond to you in a timely manner.

Supervisor Contact Information

Madeline is being supervised for this research by Bianca Tame, a lecturer for the Department of Humanities at UCT. If you have any concerns about Madeline or concerns about this research that you do not wish to discuss with Madeline, you are encouraged to contact Bianca.
Bianca can be contacted via e-mail at:
bianca.tame@uct.ac.za
Or you can call the UCT Department of Humanities at:
+27 021 650 5079

Consent

I have read this consent form thoroughly

I understand what is being asked of me

I have been given the opportunity to ask questions about the contents of this form

I understand that this research is voluntary and I am not obligated to participate

I understand that I may withdraw my participation at any time

I understand that this research will be written into a dissertation and possibly other writing as a result of this study.

I understand that the writing resulting from this study will be available to readers through the UCT library.

I agree to be interviewed for this study

Name of Participant____

Signature of Participant____ Date___________

Name of Researcher____

Signature of Researcher____ Date___________

Consent may be given verbally over WhatsApp and recorded because interviews will be held remotely due to COVID-19

Appendix J – Lay summary

You are being asked to participate in a study by a Master's student at the University of Cape Town.

This study is being conducted to investigate the "burden of care" and how you experience your childcare duties as a migrant single mother who works in the domestic work sector. The burden of care is the difficulty and/or stress that you experience when you are providing care to someone else. Because you are a mother, you are a caregiver for your children. To provide this care for your children, you are spending your money, using your time, and using your energy.

The burden of care will be different for every mother because each woman will have a better or worse ability to manage the burdens that she faces based on her identity and life experiences. For example, if you are a single mother, you may have a higher burden than a mother who has a partner to help care for the children. As another example, a mother who is an immigrant from another country may have a higher burden because she is not near her immediate family members, she may face discrimination by locals, or she may only be able to find work for a lower pay.

The reason you are being asked to participate is because:

- ❑ You are Zimbabwean
- ❑ You have migrated to and live in South Africa
- ❑ Your children live here in South Africa with you
- ❑ You are a Single Mother
- ❑ You work as a Domestic Worker
- ❑ You live outside of your employer's home

If you would like to participate, you will be interviewed by a Master's student named Madeline Johnson. She will ask you some questions about yourself and ask you to speak about your experiences that relate to your childcare and how you manage the burden of care.

If you participate, your name will be kept private and confidential. Nothing that you say will ever be traced back to you. Your privacy is very important to Madeline.

If you are interested, you will be provided with an informed consent form to give you some more information about how you will participate and to get your permission to interview you.

Please contact Madeline Johnson over WhatsApp at +1 970 708 1104 or by email at jhnmad002@myuct.ac.za