Lived Experiences of Migrant Domestic Workers During the COVID-19 Pandemic

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Abstract

COVID-19 had a significant impact on the lives of people across the globe, but the experiences of certain populations have gone unacknowledged. One such group is migrant domestic workers, particularly in the global south. Their experiences are uniquely precarious as they had to balance the uncertainty of job insecurity during the pandemic, the lack of governmental policies protecting their rights, and their intersectional marginalised identities. Using Photovoice methodology, we seek to understand how international migrant domestic workers in South Africa conceptualise their circumstances and how they were worsened during COVID-19. The aim of the research is to encourage policymakers progress towards a more inclusive, resilient and sustainable South African society by vocalising the experiences of the disempowered.

Keywords: vulnerability; intersectionality; care work

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The COVID-19 pandemic had multiple effects on individuals globally. Among the most significantly impacted were essential workers. These individuals' work responsibilities include efforts to provide the fundamental needs required for human welfare and survival such as healthcare, domestic work, security and agricultural work (Pandey et al., 2021). Although the experiences of these labourers have been covered by a wealth of literature since the start of the pandemic, domestic workers (Domestic workers) often go unacknowledged, despite being just as important for maintaining normal functioning of the economy and broader society (Afadameh, 2013) as they serve as the backbone of many households (Jansen, 2019; Ogando et al., 2021; Pandey et al., 2021). Their responsibilities of cleaning, childcare, and other vital tasks enable individuals to contribute to economic growth and society as a whole. Despite this, theirs was one of the professions most affected by the pandemic and lockdown regulations as the International Labour Organization (2020) reported that 55 million Domestic workers around the world were negatively impacted by COVID-19.

The negative implications included loss of employment, fewer work hours, and restricted mobility, and can be accredited to how care work is undervalued, especially because of the typical historically oppressed social identities of the workers i.e., being black, women and poor (Vanyoro, 2021). South Africa (SA) serves as an ideal context for understanding the depth of experiences of Domestic workers during COVID-19, as the profession is dominated by a demographic which is largely disregarded by society (Mukumbang et al., 2020; Vanyoro, 2021). Throughout history, care work has been considered a female endeavour and is therefore taken for granted and undercompensated (Ogando et al., 2021). This is evident in SA as 95% of recorded Domestic workers are women (Statistics SA, 2020). Furthermore, the country's apartheid history is also significant as almost all Domestic workers in the country are black and women, and therefore historically and systemically disadvantaged (Jinnah, 2020; Teixeira, 2020; Vanyoro, 2021).

The steady increase of women in rural-urban migration that started in the apartheid era expanded to immigration of women from neighbouring countries (mainly Zimbabwe, Mozambique, Lesotho, and Malawi) to SA (Jinnah, 2020; Vanyoro, 2021). Migrant labour adds yet another layer of social adversity in SA, as the workers are both at risk of xenophobic discrimination and, as many of these workers are undocumented, they are not protected by SA labour laws (Afadameh, 2013; Jinnah, 2020; Vanyoro, 2021). International African migrant domestic workers make up 13% of all domestic workers in SA (Jinnah, 2020). They suffer exploitation and poor work conditions which were further exacerbated by COVID-19 (Mukumbang et al., 2020; Vanyoro, 2021), as 25% of domestic workers in SA had lost their jobs by June 2020 (BusinessTech, 2021).

Expendability

A theme described in the words of Pandey et al. (2021, p.1287) as "essential and expendable" is prevalent in most literature about domestic work (Al-Ali, 2020; Mukumbang et al., 2020; Suresh et al., 2020). This is because although domestic work is, in theory, essential work, it is perceived as inferior and therefore not recognised as being essential. Although domestic workers face the same challenges as other essential workers, they do not receive the same recognition and benefits. Their work is rendered invisible (Afadameh, 2013; May, 2021) and there is lack of institutional or legal support for them (Mukumbang et al., 2020; Rogan & Skinner, 2020; Sumalatha et al., 2021; Vilog & Piocos III, 2021) so they are seen as easily disposable. This issue is furthered by the fact that there are far more potential domestic workers than there are jobs for them – so they may be considered 'easily replaceable' (Jinnah, 2020).

Migrant domestic workers are often refugees, asylum seekers or undocumented migrants meaning that they do not have the protection of labour laws (Mukumbang et al., 2020; Suresh et al., 2020). Thus, when COVID-19 lockdowns and financial implications such

as job losses came into play, employers were able to fire migrant domestic workers without consequence and compensation. This occurred at a time when other forms of essential workers such as medical professionals and supermarket staff were being commended. Thus, migrant domestic workers, though incredibly essential, are seen as expendable.

Precarity and Vulnerability

Between March and December of 2020, 25% of recorded domestic workers lost employment (BusinessTech, 2021). The pandemic exacerbated existing job insecurity in the informal work industry (Jinnah, 2020; Johns Hopkins, 2020) as even before the onset of Covid-19, domestic workers had been struggling with poor job security and a minimum wage of R15.57 an hour (BusinessTech, 2021). The lack of protection is due to poor policymaking and enforcement of labour laws, and the large proportion of undocumented migrant workers who are unaccounted for by existing governmental framework (Afadameh, 2013; Jinnah, 2020). Worldwide immigration policies made it increasingly difficult for international migrant workers to obtain work permits especially for unskilled labour opportunities (Jinnah, 2020; Vilog & Piocos III, 2021).

The desperation of migrant domestic workers to find the means to support their families enables employers to monopolize and exploit their vulnerability by paying them less than minimum wage and subjecting them to poor working conditions (Jinnah, 2020; Vilog & Piocos III, 2021). The pandemic worsened these conditions, as employers either fired their workers and left them desolate, restricted their movements, and increased their work responsibilities without increasing their pay (Chan et al., 2020; May, 2021; Vilog & Piocos III, 2021). Migrant domestic workers were also fearful of contracting the disease from the families they worked for, especially those who were live-in workers. Additionally, the loss of adequate compensation meant that many migrant domestic workers could no longer support their families (Chan et al., 2020; BusinessTech, 2021; Ogando et al., 2021; Vilog &Piocos

III, 2021). Additionally, Domestic workers were at an increased risk of experiencing domestic abuse either in homes of employers, or their own when they were forced to go home (Chan et al., 2020; Mukumbang et al., 2020)

Supplemental Support

As women primarily bear the care worker role across societies, the question of who cares for the migrant domestic workers and their own families remains, especially as migrant domestic workers can be away from their families for months or years. Vilog and Piocos (2021, p.184) identified a "Community of care", in which migrant domestic workers facing hardships and multiple inequalities form support systems where they look out for each other and care for each other's families. These networks supplement the missing support from their own family and friends.

This community of care is built as a defence or coping mechanism against the hardships migrant domestic workers face (Vilog & Piocos III, 2021). Migrant domestic workers heavily rely on their social networks to survive in new environments (Xu & Palmer, 2011). In SA, this can be linked to the spirit of ubuntu between Domestic workers (Engster & Hamington, 2015). Ubuntu is a philosophy where every individual has the right and responsibility to promote communal and individual well-being (Louw, 2006).

In(visibility)

Another theme identified by May (2021) in research in Asia and Europe on domestic work but common across the literature is in(visibility) (Afadameh, 2013; Vilog & Piocos III, 2021; Pandey et al., 2021; Fong & Yeoh, 2020). This refers to the idea that due to the pandemic, migrant domestic workers who were living in their workplace (May, 2021) were under more judgement and scrutiny from their employers who were now working from home, hence the extra visibility.

Simultaneously, the increased visibility and COVID-19 restrictions reduced their free time and personal space which was typically available for instance, when waiting to pick up children from school and socializing with other Domestic workers, and when everyone was out of the house, so they were able to socialize and call their families (Vilog & Piocos III, 2021). Employers did not feel comfortable with workers leaving the house on their days off which forced many Domestic workers to become "socially dead" (May, 2021, p.363) or invisible, which caused them significant distress and enforced the idea of their 'lesser' value as human beings. Their roles were already isolating as there are usually no co-workers and they spend most of their time with the host family that does not regard the domestic worker as family (Fong & Yeoh, 2020).

Implications and Suggestions for Further Research

The literature has shown that care work is undervalued, inadequately remunerated, and migrant domestic workers are disproportionally affected by the pandemic. This is particularly true in the global South (Al-Ali, 2020). Additionally, there is a gap in understanding the unique experiences of migrant domestic workers during the pandemic (Fong & Yeoh, 2020). Furthermore, most of the research is from the global north. The limited research (Rogan & Skinner, 2020) is focused on the economic impact rather than the lived experiences of migrant domestic workers in Sub-Saharan Africa; it is broad and quantitative. There is a gap in qualitative research on the experiences of Domestic workers in the global South which hinders the development of effective policies and the provision of social support to migrant domestic workers.

Rationale, Aims, and Research Questions

Although there is a wealth of knowledge about care work, the literature surrounding the care industry in the context of the global South, is sparse, and research focusing on the lived experiences of the pandemic on migrant workers in SA and Domestic workers

specifically is sorely lacking despite Domestic workers constituting 36% of the informal sector labour force (Statistics SA, 2020) and effectively serving as the backbone of society through the care services they provide in homes (Jansen, 2019). These domestic workers stay in a position of constant financial pressure, responsibility to family, and vulnerability (Vanyoro, 2021).

Aim

Our research aims to visibilise the experiences of migrant domestic workers, as their contributions are undervalued in society. We employed Photovoice methodology to give individuals the opportunity to authentically express the difficulties they face in their work and home life under the COVID-19 conditions.

Main Research Question:

How do migrant domestic workers in vulnerable situations understand and express their experiences of work, life, and family during the COVID-19 pandemic?

Sub-Questions:

What are the major challenges that migrant domestic workers have encountered related to the pandemic?

What intersectional inequalities are amplified in their stories of migrant domestic work?

How can these challenges experienced be dealt with to improve work wellbeing and human sustainability?

Theoretical framework

We use intersectionality (Crenshaw, 1991) as a theoretical framework given that it is concerned with the experiences of marginalized groups and how their different, complex, identities interact. Kimberley Crenshaw coined the term to identify how identities of race,

class, and gender merge to create unique and compounded experiences of oppression (Crenshaw, 1991; Sears, 2012). According to this framework, a black woman of a particular class and political group may experience a different reality and level of privilege compared to another black woman of another class or political group. The framework assumes we cannot generalize the experience of an individual based on any one of their identities but must instead observe how each of their identities converge to shape their distinctive experience. Additionally, this framework assumes that some individuals may be at more risk of harm than others due to the compounding disadvantages that arise from each of their identities (Bernardino-Costa, 2014; Vanyoro, 2021).

This project was guided by the assumption that different domestic workers would have different experiences of care work during the pandemic based on their gender, race, class, migration status and a range of other factors. This framework emphasises how the research needs to observe each individual's context.

Method

Research Design

In addition to approaching the research through an intersectional lens, the methodological framework through which the research was conducted was participatory action research (PAR). PAR considers how knowledge is used to reinforce power held by dominant groups in society and aims to empower suppressed and marginalised voices by enabling them to reflect on their circumstances and ways to improve them (Baum et al., 2006). PAR is distinctive in that it challenges the typical power dynamic between researcher and participant in which participants are seen as objects for the extraction of data. PAR emphasizes knowledge production as a collaborative process and allows participants to actively contribute to the knowledge production process (Baum et al., 2006; Macdonald, 2012). This was achieved in our study using Photovoice methodology, a community-based

PAR method in which participants capture photographs to represent their experiences (Duijs et al., 2022; Jarldorn, 2019). This method allows participants to help others understand how their personal experiences are shaped by greater inequalities (Duijs et al., 2022). Photovoice was best suited to the aims of the study as the central part of the method was the step in which participants were given the platform to explain their photographs, and thus narrate and take ownership of their experiences in ways that they may have been prevented from doing previously (Jarldorn, 2018).

In 2012, a non-governmental organisation called the Centre for Sustainable Rural Development (SRD) in Hanoi, Vietnam launched a longitudinal study which included a photovoice study named 'Empower People with Disabilities' in its second phase (Jarldorn, 2018). The project aimed to give differently-abled people living in rural areas and their families the opportunity to empower themselves, by making decisions, sharing their narratives and raising awareness about the issues they faced (Jarldorn, 2018). The photographs were displayed in an exhibition, and later used to the support policy advocacy aim of the overall project. The responses to the exhibition were said to have contributed to positive feelings and optimism among the participants (Jarldorn, 2018). By employing this method through the lens of intersectionality, we also hoped to give a voice to a previously marginalised and silenced socioeconomic group and enable them to assert their struggles and the actions that should be taken to improve them.

This research forms part of a larger transnational project on care work, entitled "*En Route to Recovery: Diversity and Vulnerability in care work during and after the COVID-19 pandemic"*.

Participants

The study involved seven participants who are over the age of 18 and have three or more years of domestic work experience and are migrant domestic workers residing in Cape

Town, South Africa. Domestic workers with three years of experience would have had experience in the field before the outbreak of COVID-19 in South Africa in March 2020.

Pseudonym	Age	Nationality	Live-in/ live-out worker	Number of Children
Blessing	40	Zimbabwean	Live-out	2
Carolyn	56	Zimbabwean	Live-out	3
Chiedza	26	Zimbabwean	Live –out	2
Gracious	25	Malawian	Live-out	2
Lihle	49	Zimbabwean and Malawian	Live-in	1
Nakisa	41	Zimbabwean	Live-in	3
Vimbai	39	Zimbabwean	Live-out	2

Figure 1: Table of Participant demographics

Data Collection and Procedure

Cape Town was the chosen site of data collection as it is one of the most prominent cities in the country, and the Western Cape ranks 3rd nationwide in the number of people employed in private households according to the 4th Quarterly Labour Force Survey of 2021 (Statistics SA, 2021).

This study employed purposive sampling to recruit participants. This was the most appropriate approach, as the study aims to obtain detailed information about an experience that is unique to a specific group of people (Billups, 2021). To recruit participants, we collaborated with the *South African Domestic Services and Allied Workers Union (SADSAWU)*. SADSAWU was established in 2000 and educates, organises and mobilizes unionised domestic workers. We shared advertisements for distribution (Appendix A) with SADSAWU. To ensure the research was not limited to workers who are associated with

formal structures, we also relied on previous research networks and snowball sampling to diversify our sample.

The data collection process involved Photovoice methods which included a focus group, photography, and individual interviews. The process can be outlined in five phases:

Phase One: Facilitating focus group and photography training with participants

Phase Two: This is where the actual data collection occurs. Participants take photos and note down how they represent their experiences.

Phase Three: Interviews and analysis of the content explored in these interviews.

Phase Four: This phase involves the planning of the exhibition and the selection of photographs and recording material to be exhibited. Participants assist in making selections.

Phase Five: The photographs and stories will be exhibited.

We provided participants with an introductory photography course, so that they felt confident in capturing their photos. This was preceded by a focus group discussion where, after gaining consent from the entire group, the researchers recorded the session in which participants discussed their shared experiences as Domestic workers during COVID-19. Focus groups are ideal for a small group to discuss commonalities and provide a foundation of the perspective the study aims to illuminate (Billups, 2021). The researchers in this setting served as both an active listeners and facilitators, to ensure that the discussion maintained focus on the subject at hand and ensured that the group dynamic is balanced, and conversation was well distributed between participants (Billups, 2021; Kitzinger, 1995).

After two weeks each participant was asked to select the most preferable between two days for researchers to conduct semi-structured individual interviews in which each participant shared their material and discussed how it reflects their experience. We followed an interview guide (see Appendix A) which includes open-ended questions to guide participants but gave them the freedom to choose their own words, descriptions and meanings

to denote their experience (Billups, 2021). Qualitative individual interviews enable the researcher to develop a comprehensive understanding of participants view about the phenomenon in question without manipulation of any kind (Billups, 2021; Macdonald, 2012). They are especially useful in PAR because the researcher can then use this intimate understanding to interpret and report on this experience (Macdonald, 2012).

Data Analysis

Once data collection was completed, the meeting recordings were transcribed. Transcription is an essential first step in the data analysis process, and we transcribed the material orthographically to ensure that all overt and covert behaviours expressed by participants were preserved (Braun & Clarke, 2012) and assigned meaning, which is needed to understand a phenomenon in qualitative research (Billups, 2021). Transcriptions were used to code data, a technique in which researchers find patterns in data and draw out and analyse overarching themes that define the phenomenon of study (Buetow, 2010).

According to Braun and Clarke (2012), thematic analysis is popular in qualitative research, as it allows researchers to identify, categorise and analyse themes from data. It is ideal for analysis of photovoice data as it centres on the content of the narrative that participants are sharing, which furthers the goal of PAR to give participants agency in telling their own stories (MacDonald, 2012). Braun and Clarke (2012, p. 5-11) propose a six-step approach to doing thematic analysis which will be used as a guide for analysing the data in our study. These steps include: *1. Familiarising yourself with data:* rereading the transcript critically, highlighting and noting important items. *2. Generating initial codes:* noting codes and finding relevant chunks of data for each one. *3: Searching for themes:* checking codes for overlaps and identifying broader topics they encompass. *4: Reviewing potential themes:* assess how well each theme relates to the codes, and data as a whole. *5: Defining and naming themes:* stating the focus of each theme and ensuring they are cohesive before naming and

assigning relevant extracts from data to each one. *6: Producing the report:* formulate and present an argument in which themes are presented in a meaningful order.

Ethics

As the research is concerned with issues of social welfare, it is important that the following ethical guidelines are upheld:

Informed Consent

This research required informed consent (Mumford, 2018) in the form of a written and signed document that confirms the participant has been informed of and benefits of participation and agrees (Manti & Licari, 2018). Before partaking in the study, participants were provided with a consent form (Appendix C) that had all the information of the study, the purpose of it, researchers' details, the process, how data will be analysed, and different issues related to confidentiality. The researcher asked and confirmed that each participant understood the information and consented verbally before asking them to sign the form. Participants were free to communicate in their preferred language throughout the research process, furthermore, consent forms and other documentation were offered to be translated into their preferred language, if necessary, but all participants chose to communicate in English. The researcher also clarified to participants that they could withdraw at any point in the study if they chose to and do not have to take part in the study.

As the research was of sensitive nature, all participants were provided with information (view Appendix D) about safety and help options available through organisations or other non-governmental organisations. These support options were also available to the researchers.

During photography training, it was made clear to all participants that should they choose to include photos of other individuals in their data, they would need to receive verbal consent from the subject of the photograph, as it may be presented at the end-of-year

exhibition after consent is obtained again from participants to display and use the photographs.

Confidentiality

Participants were made aware that their identities would remain anonymous, and information will only be used for the research and not retraceable to them. Additionally, all data in the project will be managed under a data management plan that will be made in line with ethical principles and relevant legislation. This data management plan will be constructed with the principles of anonymity and integrity of the participants, secure and functional data transfer and open science where all the local legislation and university ethical boards will be consulted. All the data will be stored on an access-controlled cloud that is only accessible to the researchers. These researchers all have qualifications that provided them with the necessary training to ensure that they know not to leave the data unattended or vulnerable to protect the participants.

In the focus group meetings, group norms will be discussed and established, which includes keeping information that other participants share private so that all participants can share their stories without concern of exposure. Participants were also be discouraged from sharing the identities of their employers. When writing the final report to share with the greater community, researchers used pseudonyms to refer to participants and their employers to protect their privacy.

Risks and Benefits

We did not expect participants to come to any harm or debilitating emotional distress because of their participation, however, we debriefed each participant after their individual interviews and provided them with contact details and resources (refer to Appendix D) should they require assistance.

Participants may be reluctant to disclose negative work experiences for fear of possibly incriminating or upsetting their employers. By following all the confidentiality plans in place, we ensured to them that this would not be a risk, and the personal details of what they shared would not be shared by the researchers or other participants.

Participants learned to shape their own narratives and, through reflection, hopefully felt empowered enough to take agency over the improvement of their circumstances and possibly encourage policymaking conversations surrounding their work (Baum et al., 2006).

Reflexivity

It was important for the researchers to remain reflective throughout the study. Although the study used PAR to enable participants to reflect on their own experiences, the subjectivities of the researcher can still impact the way these experiences are communicated in the report when they transcribe/analyze the data (Braun & Clarke, 2012). We acknowledge that our position as privileged postgraduate students and researchers who were raised in households in which migrant domestic workers were employed affects our positionality in relation to the participants. This, along with the inherent power dynamic between researcher and participants, may have affected our rapport with participants throughout the data collection process, despite the fact that we are using PAR which attempts to subvert this dynamic (Baum et al., 2006; Macdonald, 2012). Language, however, was of great assistance in the data collection process as one of the researchers speaks ‘ciChewa’ and another ‘chiShona’, national languages of Malawi and Zimbabwe respectively. As these are the countries from which most international migrant domestic workers in SA come, it greatly assisted in establishing commonality in the research process. Additionally, we as the researchers are both immigrants ourselves, and therefore have an in depth understanding of the complexities of the migrant experience and being dependants of migrants.

Since our sample primarily consisted of members of domestic work-related organizations, we encountered more securely placed domestic workers. However, as the city is highly populated with domestic workers, they were possibly even more exploited and exposed to poor working conditions than those in less central areas (Vanyoro, 2021).

Significance of study

Many essential workers have been appreciated and recognized during the pandemic (Pandey et al., 2021). Domestic workers, however, are a category of essential workers that have been unacknowledged, especially in the global south. This research is significant as the experiences of domestic workers in Southern Africa need to be heard to protect them in future from exploitation. Following this, this research will empower care workers, as it will allow them to shape their own understandings by talking about their own emotional and subjective experiences which will give them a voice which is necessary, for vulnerable groups.

Proposed Timeline

Data collection took place from July 2022 to August 2022. Data transcription and analysis took place in September 2022, after which a research report will be compiled and submitted on 20 October 2022. Research findings will be presented on 28 October at the University of Cape Town.

Findings and Discussion

Precarity

The concept of precarity is central to our analysis as it underscores every aspect of the participants' experiences, especially during the COVID-19 period. Zaheerah Jinnah (2020) characterizes those living under precarious circumstances as typically being in a state of job insecurity and vulnerability, this experience is further compounded by the added sense of instability associated with an insecure citizenship status and a lack of permissible documentation. This unique set of adverse experiences are quintessential to

that of migrant domestic workers living in South Africa. One of the main contributors to job insecurity in the profession is the high number of individuals in the domestic work sector. Even prior to the pandemic, many struggled to find long-term positions and according to recent figures, over half of those who lost their jobs during the pandemic have been unable to re-enter the sector (BusinessTech, 2021). For those who were who able to retain their positions through the pandemic, wages were significantly deducted without warning as employers took advantage of the fact that the rights of undocumented workers aren't protected by labor laws in SA (Vanyoro, 2021).

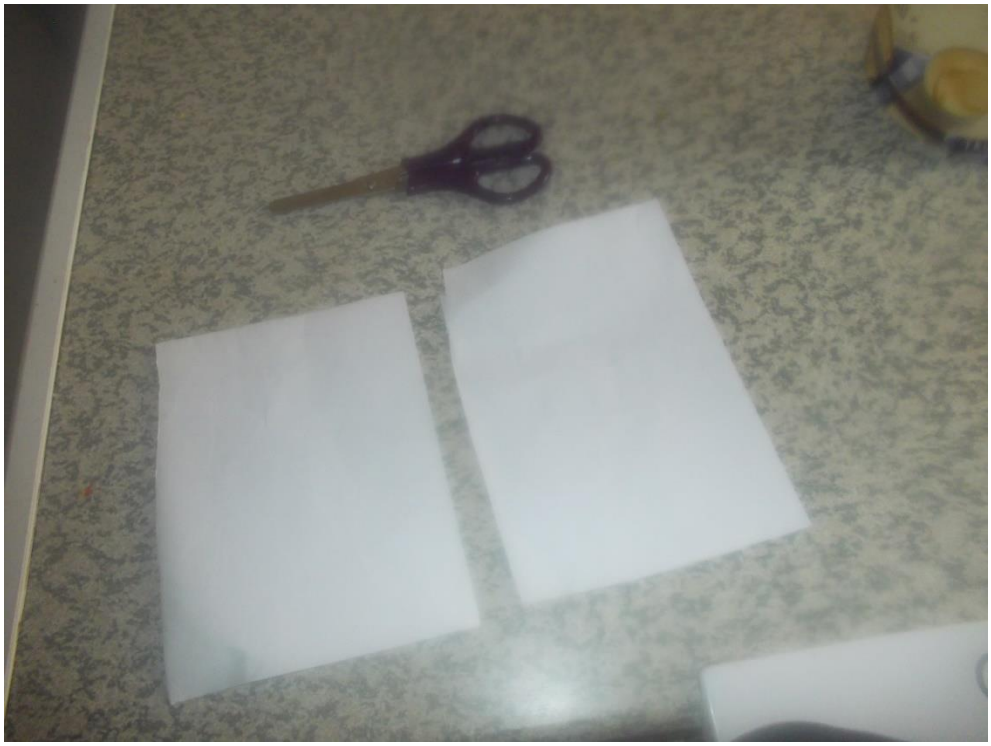

Figure 2: Cut in Half; Photo credits: Vimbai

Vimbai took a picture of a sheet of a paper she had cut in half to represent how when she returned to work during the lockdown level four period, she was informed that her pay would be reduced by 50%, as her employers claimed to no longer be able to afford her complete salary.

> *"...during the COVID time when I came back, they sat down with me, and then they said, Vimbai, we know everything that has been going on and things are tough, so there's no way we are able to pay you full salary. And by that time the creches and the schools they were closed and the kids were only going days only ... I think they were not even going to school. So, they sat down with me and they asked me, they said*

… because I was so honest with them, they said, is … is your, oh, is both of your kids going to school then I said no. Then they said okay, if we are going to pay you your full salary, it won't work out because we also have got a company so what we're going to do is we're going to cut your salary into half, we won't be able to pay you your full salary. So that is the reason why I … I cut a paper with a scissor, to show that my salary was cut into half because my two kids weren't going to school and I had no other … so the … the, basically they said you've got no other things that you needed to pay because we will be looking after you and you've got a job and stuff."

During her recounting of the conversation, Vimbai made it clear that she felt that the use of her children not attending school at the time as a justification for the sudden pay cut was a manipulation of her trust in her employers, after she had confided in them about her children no longer attending school during the hard lockdown. Regardless, Vimbai was forced to accept the lower pay as, in her own words,

"My family needed my support the most, and I needed the money. My husband wasn't working. I was the only one who was…who was providing."

These circumstances of financial desperation were common across the participants, and several described the idea of feeling entrapped by their vulnerability. During lockdown they could not abandon their positions as it would be difficult to secure another one, and there would likely be another to fulfil the position they had left behind. This vulnerability is further exacerbated by the lack of social welfare made available to undocumented migrant workers, as they are not eligible for governmental grants (Chen, 2011). Although the democratic government attempted to institute more inclusive and protective policy reforms in the informal sector by referencing "residents" in the Constitution instead of "citizens" but a failure to implement these policies made them ineffective (Jinnah, 2020).

This means that migrant workers do not have any other means of income to rely on should they be unable to sustain their own livelihood (Chen, 2011). This worsens the already precarious nature of domestic work which is largely unregulated, and employees rarely receive the benefits afforded to more formalised positions such as paid maternity leave or bonuses. The desperation to secure a steady position often results in domestic workers remaining in positions despite poor conditions and mistreatment as they are

without options. Another participant, Blessing describes the feeling of disposability as she says:

> *"They* [employers] *don't have respect to us they don't care about us because now they know if I die tomorrow there will be someone."*

Despite the lack of protections provided for migrant domestic workers in SA, many of the participants were forced to look for work in the industry as they did not meet the educational requirements for opportunities in the formal sector. Nakisa, a single mother of two from Zimbabwe, who moved to Cape Town 12 years ago in search of a job opportunity highlighted the persistent position of disadvantage she had maintain since failing to complete her grade seven year, despite multiple efforts from her parents to keep her in school.

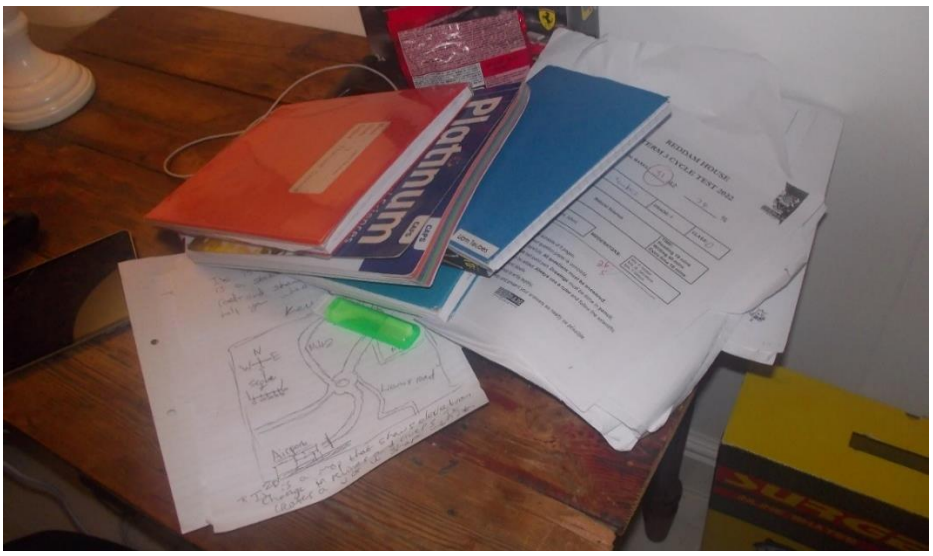

Figure 3: There's more to a book...; Photography credits: Nakisa

She reflects on this most often when she's tidying her employer's children's' schoolbooks. She shares that she loves books, however she is often unable to engage with the material after the cover as "[her] education is too poor". Despite this limitation, she recognises that "…in these books, there is life", and expresses her strong desire to learn to read and write fluently. Despite her obvious intelligence, the internal insecurity associated with her not finishing her schooling was evident as she timidly read through her written notes for each photograph.

The domestic workers' tolerance and resilience against all these dimensions of precarity is centred around their desire to make an income and provide for their families.

Nakisa reveals that she feels ‘trapped’ by her desperation for money and describes her feelings towards it as persistently shifting between two poles represented by love and complete detest.

Figure 4: A Love/ Hate relationship; Photo credits: Nakisa

By centering the R100 note in the photograph, she recognizes how money symbolizes her mobility as a consumer in a neoliberal society as it motivates her productivity. She views it as both the instrument through which her greatest ambitions can be actualized, and also the obstacle that continues to hinder her progression, as she is unable to participate in most social activities without it. Money as the motivation for commitment to their work was found to be universally experienced by the experienced as Blessing also said

“I need something on the table my kids to feed to eat and then the rent and you see all those things.”

‘COVID’ Complex

The pandemic compounded the existing precariousness of migrant domestic workers’ circumstances in multiple ways. Employers, like many others at the time of the initial lockdown period, exhibited an intense fear of contracting the disease and implemented many strict and excessive precautions in their households which affected domestic workers’ working conditions significantly. Live-out workers had trouble with regards to their travel to and from work daily. Some employers requested that their domestic workers stop using

public transport to prevent contraction and transmission of the disease in their households. During level four of the lockdown period Vimbai's employers no longer allowed her to use minibus taxis, as they feared that being in such close contact with others would expose her to COVID-19 and put them at an increased risk of falling sick. Instead, she was forced to use Uber to travel to and from work daily. Her employers would only order her ride to work in the morning, but the ride home at the end of the day was her responsibility, and at her cost.

Figure 2 5: Only R20 a day to use the taxi; Photo credits: Vimbai

She says,

> *"…this photo, it reminded me during the COVID time … during the COVID time my bosses … If you want to come to work you will get your Uber in the morning, in the evening you will get your Uber … they will stand in the gate until I leave with that Uber. That's how it was and we are talking about R300 and something per … per day."*

With the fact that Vimbai's salary had already been reduced by 50%, travelling from work every day became very expensive.

Figure 3 6: The bucket; Photo credits: Vimbai

Vimbai not only expressed issues with travelling to the employers' households during the lockdown period, but also the numerous difficulties associated with precautions against COVID-19 which had been prescribed by her employers. Upon her arrival every morning, she described having to washing her hands in a bucket of freezing cold water:

> *"...by that time when I go there, there will be leaves in, there will be a whatever in their ... with in ... from the last night, because probably they would leave the ... the bucket outside when the ... that time when I leave, when they say goodbye to me, on that Uber there, then they will put the bucket outside with a dish cloth outside also. It will be waiting for me the following morning and it would be freezing cold with a little bit of ... of hand wash inside."*

Following this, she would have to wear surgical gloves before opening the front doorknob. Several participants described their frustration with having to wear the gloves, regardless of how difficult they made it to do their work. Carolyn says,

> *"...when she you are wiping her couch. You must wear gloves. When you are spreading her bed, you put the gloves, but when you're going to clean her bathroom, you must not go with the gloves."*

Vimbai also notes that the gloves caused her physical discomfort as it often resulted in her fingers pruning and left a white residue that dried her hands out from daily use. As the

country's lockdown regulations eased, she negotiated with her employers to use sanitiser instead of wearing the gloves throughout the day and even this lesser precaution came with strict instructions that also had ramifications on her physical comfort as her hands became severely dry,

"So, each time is then when I will go to enter in a room, I will spray on the knob there, and when I'm about to touch a bucket or anything I must spray on my hands and rub it with my hands… Even before … even before I eat or after I eat, I must do that with the hand sanitizer and I must spray on each surface that I touched, especially the … the baby's room"

Another widespread precaution that several participants were made to abide throughout the work day was wearing surgical masks. Due to the physical nature of domestic work, this was incredibly inconvenient for participants and made it difficult for them to breathe with Vimbai even having to take breaks. She shares,

Figure 7: Face Masks; Photo credits; Vimbai

"So, what I did was that it becomes so difficult for me sometimes for me to breathe, so whenever I take a toilet break, that's when I just take it off, man. I'm in the toilet just for a bit to get some air."

Figure 8: Don't go to the clinic ; Photo credits: Vimbai

Although employers required domestic workers to follow strict and oftentimes, excessive precautions to prevent the transmission of COVID-19 to their households, they often did not show the same consideration towards the workers and the risk of live-out workers contracting the disease and taking it home to their families. In fact, many employers often did not inform the domestic workers when they had been exposed or even when they had been diagnosed with the disease, until the domestic worker was already in close contact with them and their family members. Most of the participants reported suspicions of having contracted COVID-19 while at work. Vimbai reports experiencing cold symptoms and an intense overall heaviness that was preventing her from being able to work,

"I can't even do anything, please, can I just go home and stuff. Then they said no, you can't go home because we will buy you medicine. There's no need for you to go home."

After taking the medicine her employers bought her (pictured above), her employers informed her that she could nap for two hours then was expected to complete her work responsibilities for the day.

The most unexpected finding which was also reportedly common amongst those who were formally employed during the pandemic, was the increase in the work responsibilities for the domestic workers. Only one of the participants did not experience a change in the

amount of work she was required to do, and she accredits this to the small size of her employers' apartment. Others noted longer days and shorter breaks. Vimbai experienced the most drastic change, as her return to work after the hard lockdown was met with a three-page long list of her daily work responsibilities that had not been there prior to the pandemic. The list included new responsibilities that had to do with sanitising all surfaces every day, and each duty had times allocated to it. Her lunch break was shortened from an hour to just 15 minutes, and she was interrogated whenever she finished a task faster than the time that had been allotted in the list. This speaks to a related effect of the lockdown that was experienced by all the workers – increased surveillance of domestic workers by their employers. Domestic workers had to be seen to be hard at work for most of the day, as they were under close observation by their employers who were now working from home. Vimbai states,

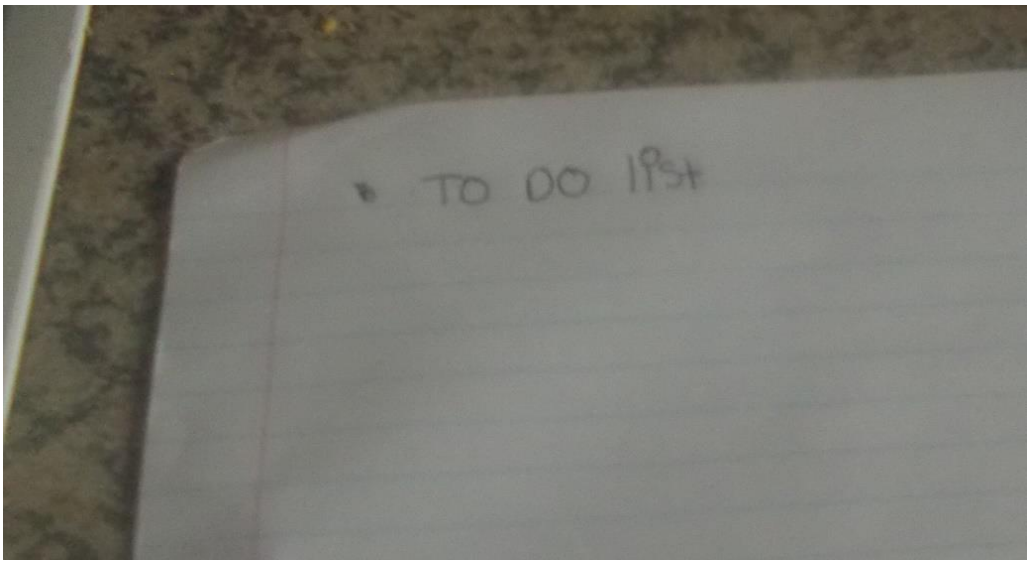

Figure 9 9: To do list; Photo credit: Vimbai

"… each time when I'm done doing something, they would come and say, are you done with this, then she ticks I'm done doing this, and then she ticks … cleaning the windows became a lot, that list became endless."

Broken and Dehumanized

Migrant workers have been mistreated, exploited and made to feel like lesser humans (May, 2021, p.363) especially during the pandemic. However, is significant how normalized this has become and how many different ways this is done in. Carolyn, a participant demonstrates how she feels about the domestic work industry with the following images

Figure 11 10: Broken; Photo credit: Carolyn

Figure 12 11: Broken 2; Photo credit: Carolyn

"It's broken everywhere and the disadvantage of our domestic worker industry. Most of us, we are broken especially due to this pandemic." [Carolyn]

The dehumanization of migrant domestic workers involves dehumanization in many different ways firstly it is through the inhuman demands and expectations of the job. The quotes from two different participants demonstrate how they felt that their employers did not view them as equal humans.

"She wanted me to be like a machine to work to twenty-four seven no rest" "So, I felt like it is an abuse how can I work even at the night." [Chiedza]

"She thinks I'm a very big slave. We work the whole day, standing, with your lunch, with your teatime and you don't even appreciate it." [Gracious]

Another significant identity that migrant domestic workers are discriminated for is their migrant status, multiple participants recount how they were told that they would be paid less due to their nationality/lack of legal status in South Africa.

"Especially us we are foreign some they just say you don't even have a passport that's why I'm giving you two hundred Rands is it the passport that is going to work. We do the work in the house, it's not the passport" [Carolyn]

Additionally, Lihle says that the employers forget that they are humans who hold power and fulfil important roles in other areas of their lives. This is tied to the above theme of apart of the family. She states this by the following quote.

"You are the boss of your house. I'm the boss even in my house, in my house I'm the boss." [Lihle]

Another significant subtheme that was a part of dehumanization is how dogs and pets are valued more and treated better than the domestic workers. This is evidenced by the photo taken by Lihle below -

Figure 13 12: Dogs earning more than me; Photo credit: Lihle

"There was a medical aid, for those dogs and everything. But if I'm sick, they said, I must come to work. No, work no money. If I am sick, even if I bring a certificate that I went to, I went to the doctor. if you see those dogs, they earning more money than me. They earn more money because I saw that when that dog is sick. I still remember when I called the vet to come because they were out and it's around 15 000" [Lihle]

Lihle feels like the dogs are valued more than her as a human as they receive more care and better treatment, when she is sick she cannot get leave, however when the dogs are unwell, the dogs receive visits from a vet that cost more than her monthly salary which she uses to support herself, her son and send money back home. This is a very dehumanizing experience as whenever she asks for a raise or even to borrow money she gets informed that her employers don't have money

"There I've got a question. Maybe you can help me. Right, if you are, let's say I'm working for a company, But if I want to borrow money, because I am working at a company I can. but the difference is that, when I'm working inside there in the house, and I don't have money, but where can I go, because this is the company (the house) Where can I borrow money, If I need some, if it's an emergency? Can you help me with this? What can we do?" [Lihle]

This again shows the nature of how dehumanizing the role is as the migrant domestic workers don't even feel fully a part of society as a whole as they do not even have the ability to seek financial liability if needed in a difficult situation.

Racial discrimination is one more way through which migrant domestic workers were dehumanised through. This was made evident through several anecdotes, and among the most significant was Vimbai's recounting of an instance in which a white nanny came to mind her employer's child. Upon exiting her vehicle and entering the house (without being made to douse her hands in freezing, dirty water),

Figure 13: The Sanitising Bottle; Photo credits: Gracious

"…she only sanitized her hands, she only put off her face masks and she … she went straight to the baby's room. And I was the one … the Black lady that is always there to stay with a face mask the whole day, man"

She highlights her awareness of the fact that it was clear to her that the basis of their differential treatment by the employers with regards to COVID-19 precautions was racial difference, and class as she emphasizes how the childminder drove in her own vehicle and was generally treated with more respect in her position than Vimbai was as a domestic worker.

Figure 14 14: Ex; Photo credit: Gracious

"Those people they were like they didn't appreciate because even if you worked like what when you take your lunch they will be like looking at you like as if you are enjoying sitting just" [Blessing]

Figure 15 15: Expired bread; Photo credit: Carolyn

Most migrant domestic workers have specific stories and foods that they can no longer tolerate as a result of their employers, from being given expired bread, meat and other food that was not good enough for the employers family or even the employers pets. The domestic workers were expected to accept this gratefully, despite knowing that these foods would make them sick. Gracious even recounts getting negative comments on the taxi back home as should have to take plastic bags full of the food given to her by her employer to eat. She would throw the food away as soon as she got home but had to pretend to be grateful for fear of offending her employer. All the participants were furious at this aspect of the job and stated how it made them feel like lesser humans.

Figure 1616: Inhumane toilet; Photo credit: Gracious

One more way migrant domestic workers were dehumanized through separate toilets that are broken and outside. Gracious expresses her frustration as there were multiple guest bathrooms in the house that were unused, however, despite the fact that she cleaned all the bathrooms in the house, she was made to use a broken toilet outside the main house. This photograph is also a representation of other participants stories of having to complain to

employers how the employers adult children were not flushing the toilets when in a fight with their parents, meaning that the migrant domestic workers would have to flush toilets for adults in fear of getting in trouble with their employers for not cleaning properly.

Figure 17 17: on my feet 24/7; Photo credit: Chiedza

Figure 18 18: Broken Knees ; Photo credit: Blessing

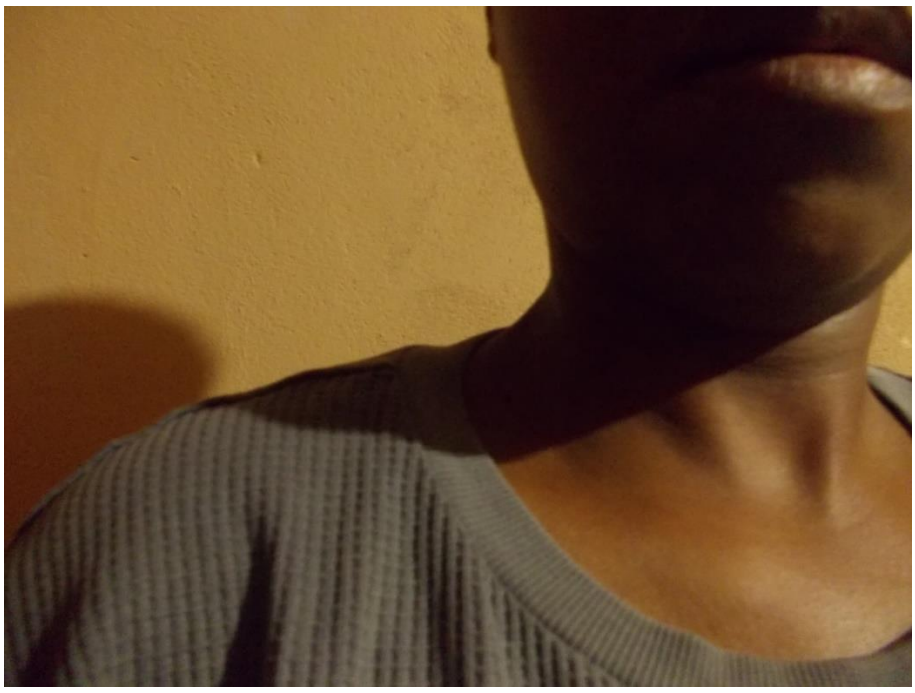

Figure 19 19: Scratched neck ; Photo credit: Blessing

The above three photographs represent dehumanization through the lack of care for the migrant domestic workers health and safety. These all represent injuries that these migrant domestic workers suffered whilst on the job. Firstly, Chiedza took a photo of her feet

to show how they are constantly hurting as a result of being on her feet all day, and some employers have rules on which slippers to wear in the house and these ones always made her feet hurt. the following photo by blessing is to show how she had to climb up and down multiple flights of stairs which

Another crucial theme is the

'A-part' of the family

A common experience among domestic workers, especially those that are live-in is the daedalian reality of them being a-part of the family system. Many migrant domestic workers are expected to or end up fulfilling familial roles or conflict manager roles. This is supported by multiple participants.

"that, man wanted me to fill the gap to fill the gap for the wife and mother, and could not do it because I also have my family" [Chiedza]

Chiedza was expected to attend school parent teacher meetings, teach the children manners, even left alone with the children when the father of the children was angry at them at a restaurant. This made Chiedza feel like she was filling in the gap of the mother in the family, hence the photo of a gap in the window. In this sense she was expected to be a part of this man's family. However, simultaneously, Chiedza was apart from her own family as her children, who she has not seen in years are in Zimbabwe, and she often misses calls with them due to timings.

Figure 20 20: A gap to fulfil ; Photo credit: Chiedza

Carolyn, another migrant domestic worker, recounts how she recently felt hurt that her own children who she lives with, did not put her down as an emergency contact at school, she then says,

" they gave their daddy's number. Then I ask them, what about mine? They say your number is not emergency. Then I ask why? Then they said, because you don't answer your phone. In that work she said, when you get in you put your phone in the garage. There was no teatime, there was no lunchtime'' [Carolyn]

This shows how the nature of the job where Carolyn's own children do not feel that they can rely on their mother, making her apart from her family. This is contrasted to how she has to put her phone in the garage when she arrives at work to take care of her employers' children and gives them her full attention. Another instance that shows how the current nature of the industry impacts the family is when Carolyn's husband visited her employers house and asked who cleans the floors, when she mentioned that it was her, he joked with her and said that they must invite her employer to their home so that Carolyn would clean the floors better.

"When it come you come home you clean? But it might not be perfect as you did at work'' [Carolyn]

This shows how Carolyn pours most of her energy at work however does not have the time and energy to do the same at her own house, and constantly choosing to give all her best energy to her employer's house and family again separates her from her own family. However migrant domestic workers felt that they are not truly a part of the employer's family either, as Lihle mentions,

"they don't want to interfere. They want you to be in their problem but if you have a problem" [Lihle]

This meant that whenever the employer's family had a problem, Lihle was expected to help and intervene and play various different roles to solve the conflict or issue, whereas the employers did not even know anything about Lihle's life unless it was out of fear of her leaving the job. She was only hired to clean on paper, but ended up having to do much more, a common experience amongst migrant domestic workers

"They don't think that I've got a life that is why I said another day after work I've got life but they don't think I've got life that is what those people do. I'm the mum to my children then they don't consider those things they consider their kids" [Lihle]

"I'm a second mother to your kids you are the biological mother but I am a second mother then we have to sit down and discuss because I don't want to work here like I am very cross" [Lihle]

Lihle had to mediate between family conflicts and exploitation and had to explain to her employer that she takes care of the children of the employer and was trying to solve the conflict between them (the employer and herself) because she did not way to be frustrated and take it out on the employers' children. This shows how she was a part of the family and putting the children's needs above her own like a mother would, despite being exploited by the children's actual mother (her employer)

A subtheme that ties all of this together is the subtheme of lack of reciprocity from the employer's behalf. Carolyn expresses her desire for reciprocity through the following quote:

"Like before if we just take it and you take a charger you put there but you don't connect you, it doesn't charge. But if you connect with the socket and you connect here it starts charging. So that is life the employer, must be on his position where they position me. I must also receive" [Carolyn]

Figure 21 21: Bread ; Photo credit: Vimbai

This loaf of bread was significant as it shows another way in which migrant domestic workers have to juggle various family roles and relationships. Vimbai recounts how her employer would get unhappy that the loaf of bread meant for the participant would finish so quickly, however it was the employers daughter that also ate the bread. When Vimbai started bringing her own bread from home to avoid this conflict, the employer was frustrated that the bread was going off before it was finished. This demonstates how although the participant was a part of the employers familiy in taking care of the children, she had to fill in the gap and mediate conflicts quietly as she could not tell the employer that it was her child eating the bread as well, in other words, apart from the family.

The Resilience of Hope

Despite the unfavourable working conditions and harsh environments that migrant domestic workers find themselves in, most of them are hopeful for the future and are using this as a stepping stone towards a better future for themselves and their families. There is a sense of resilience that stems from hope, and this hope itself is resilient.

"I see myself somewhere because being a domestic worker. It's just a step ladder that I have to climb to do something'' [Carolyn]

A participant, Carolyn encourages domestic workers to not lose hope and to stay hopeful and keep working on their skills towards a better future. She took this photo of some flowers in her employer's garden to represent her hope for the future.

Figure 23 22: Flowers of Hope; Photo credit: Carolyn

"It was a flower that blooms I was just saying in every season you must experience every change in your life. That flower was a green before. Now it have some flowers." [Carolyn]

Carolyn uses these flowers to signify and talk about how although she is going through a tough time right now, she hopes that her time to bloom will come, she also encourages all the domestic workers to stay hopeful and that things will get better.

Another participant, Nakisa represents her resilience of hope through the image above of the broken egg shells, although these eggs were cracked, she could repurpose the eggshells as compost or paint them. This represents how although she and other migrant domestic workers are in circumstances that are not ideal, they can turn them around and make the best of the situation. She also expresses how skills training, education and employment opportunities can heal the brokenness of the situation, and her broken heart as they would help her gain better financial stability.

Figure 24 23: Cracked but not broken; Photo credit: Nakisa

"it represents that if my heart is broken, it doesn't mean that it's the end of my life. No, I must just sit down and find one person that is suitable for me, to share my story of ... from her or from him, whoever he is, whoever I'm going to tell the story, she or he can give me a good advice. If it is a good advice, I will see maybe the person will tell me that, oh, there is a free course online, can we please do that, or maybe he can say, or maybe she can say to me, oh, there's this business that I'm doing, I like ... I would like to introduce you to it so that you can spend your more time doing that business. So, I will ... if I'm doing that business, that heartbroken, it will go because I'll be excited that, oh, okay, here I can see different people, different characters, even I'm making more money" [Nakisa]

Limitations

The first limitation identified was the lack of focus on the impact of Covid-19 Lockdowns on domestic violence. This is a significant area of research as gender-based violence is such a pervasive problem in the country and overwhelmingly affects black women (Gqola, 2015). The next limitation of the study is the lack of information about how the migrant domestic workers being away from their families either physically or emotionally had an impact on their family dynamics. Thirdly, the implications of long-covid on migrant domestic workers and their jobs were largely overlooked. The content covered in these

limitations was largely neglected due to the small scope of the study which remained on the domestic workers in the context of their employer's households and yielded an overwhelming amount of qualitative data. These issues will be proposed for discussion in the larger project.

Suggestions for future research

In addition to the issues outlined in the limitations, we recommend that further research on the experiences of domestic workers investigates the psychological impact of the exploitation and persistent vulnerability faced by domestic workers. In addition, it is important to further analyse how the domestic worker's own familial structures and dynamics are impacted by the surrogate and migrant nature of their work. Lastly, further investigation could be conducted into possible informal social welfare networks created between domestic workers to supplement the lack of formalized governmental ones.

Conclusion

In the final analysis, domestic work is of a precarious nature, which was amplified further the Covid-19 pandemic. However, there is still resilience of hope despite migrant being broken, dehumanized and apart (separated) from their families and largely excluded from the employers' families.

From our findings we surmise that migrant domestic worders understand their positions and their industry to be in a state of brokenness which was worsened due to the covid-19 pandemic. The major adversities domestic workers had faced during the pandemic included increased vulnerability associated with competition, financial instability, health risks, silencing, and exploitation. Their identities of womanhood, low socioeconomic status, undocumented migrants and blackness made them targets from mistreatment and abuse at the hands of their employers, and they are victims of a failing system. To begin improving these challenges faced by migrant domestic workers, we can provide more skills improvement opportunities, better laws to protect them, and better support structures to empower them.

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Appendices

Appendix A
English Study Advert/ information sheet for domestic workers

UNIVERSITY OF CAPE TOWN

Department of Psychology

Collecting Stories on the impact of COVID-19 on domestic work

Are you 18 years or older? Have you been involved in domestic work for 5 years or more?

If you answered yes to both questions above, we would like you to take part in a research study about your experiences of domestic work before and during the COVID-19 pandemic.

This is what you can expect if you decide to take part in the research:

 A small, informal group discussion with other people with similar experiences to your own, where we discuss the work that you do and your experiences of it

 A one-on-one interview about your stories of working as a domestic worker during COVID-19.

 Attend a basic photography training session

 Capture some photos that represent your experience as a domestic worker during COVID-19 and your thoughts about the work that you do

 Record voice notes about your work day and share them on WhatsApp

This research will give you an opportunity to share your stories to improve our understanding of domestic work before and during COVID-19.

If you are interested in taking part in this research please contact us at [research specific cell phone number will be inserted here]

Any questions, concerns or complaints about the study?

Please contact: Researchers: Floretta Boonzaier on 0216503429 or email at Floretta.Boonzaier@uct.ac.za OR Carmine Rustin at crustin@uwc.ac.za OR Mandisa Malinga at Mandisa.Malinga@uct.ac.za

Contact for the Ethics Committee at UCT: Rosalind Adams on 021 650 3417 or email at Rosalind.Adams@uct.ac.za

Appendix B

Interview Guides - SA

En Route to Recovery: Diversity and vulnerability in care work during and after the COVID-19 pandemic

Focus Group Guide

The focus group discussion serves as a prompt for the Photovoice aspect of the work where participants will be prompted to draw on their experiences and think about the stories they would like to tell using photography.

1. **Domestic work in general**
    0. Tell us about your work in general; what is it like to do domestic work, what does your work entail
    1. Tell us about your daily routines (Probe: live in / daily commute; Travel to work distance/cost/time; travel as part of work distance/cost/time; Where do you do your paid care work? Difficulties in scheduling work/ nonwork activities. Number of hours worked per day.)
    2. Tell us about your relationship with your employers (Probe: if good, why?; if negative why?; gender, ethnicity, class, sexuality, lifestyle, religion, beliefs, other; experiences of (non)-acceptance; Examples/stories of relationships?)
    3. Tell us about your lives in general – what other responsibilities do you have [probe- family responsibilities or social/community responsibilities]? How does your work affect your personal life, relationships and responsibilities?
    4. What are some of the challenges you experience in your work?
    5. What are some of the things you find rewarding in your job?
    6. Some further areas to explore …. cleanliness of client's homes, access to heat, water, equipment for care. Ability to take a rest, eat, use a toilet during working hours; shift patterns/choices

1. **Experiences during the Covid-19 pandemic**
    0. Tell us what changed for you with regard to your work during the Covid-19 pandemic. Did anything change? [Probe: what were the pressures, if any, related to work during Covid]
    1. Tell us about some of the pressures you faced as a result of the pandemic
        0. Financial/economic
        1. Family stressors – including care-giving
        2. Mental or physical health stressors
    2. Is there anything else about your experiences during the peak of the Covid-19 pandemic that you'd like to talk about?

1. **Possibilities for the future – Post-pandemic futures**
    0. Tell us about how you managed to cope with all the work and other difficulties you experienced during the pandemic

1. Where have you found support to cope with all the difficulties you experienced? Family, friends, community, church etc?
2. As we have reached a new phase in the pandemic what do you hope for for your future (Probe: better working conditions; other job opportunities; recognition and acknowledgement?)
3. What do you think needs to change in the field of domestic work in South Africa? What would you like to see that's different for Domestic workersas a group?

Photography Training and Prompts

Where possible we will use professional photographers to conduct a short basic photography skills workshop with participants. Where the use of a professional photographer is not possible the researchers will provide input in basic photography skills.

Participants will be asked to take two weeks to take photographs depicting the stories they want to tell about their lives and work during and after COVID. They will also be asked to make notes about the photos they had taken (and be given notebooks and pens for this purpose).

Participants will also be asked to send voice notes to the researchers over the course of the two weeks of things that come to mind in the course of their days – working or at home – related to the research topic.

Interview Guide

Interviews will be conducted after participants had taken two weeks to produce their photo stories and this will primarily be used to explore the stories people had chosen to foreground regarding their work during and after the pandemic.

Background questions:

Age
Nationality
If not South African – when did you come to SA and why?
Gender
Marital Status: (if married, for how long)
Children? Number of children?
Education?
Living situation - [who do you live with? do you live in a formal/informal structure - how many rooms?, do you own or rent the place you live in?]
How long have you been living in your current residence?
Are you employed full time? If not, how many days per week do you work? Do you work for the same client everyday?
How much do you earn? Do you work for a daily rate (and if so, what is it?)

Photo-Story Explorations:

Tell me about the photos you had taken and why they were important for you.

- What story/stories are you telling with these images?
- Why is it important for you to tell this/these stories?
- Who do you think should bear witness to the story/stories you are telling?

Picking up Focus Group themes

Was there anything else that came to mind after our group discussion a few weeks ago? Prompt themes from focus group discussion – (1) domestic work in general; (2) experiences during the COVID-19 pandemic and (3) thinking about possibilities for the future

Appendix C
Consent forms for interviews and focus groups for domestic workers

UNIVERSITY OF CAPE TOWN

Department of Psychology

Collecting narratives of the impact of COVID-19 on domestic work

1. Invitation and purpose

You are invited to take part in a research study about your experiences of domestic care work during the COVID-19 pandemic. I am a researcher from the Department of Psychology at University of Cape Town.

2. Procedures

If you decide to take part in this study, I will ask you to do a face-to-face group interview with me and other people involved in domestic work. The interview will be focused on your stories about your experiences of domestic work during the Covid-19 pandemic and should take no longer than 60 minutes. On this day you will also be given some basic photography training, then you will be provided with a camera and WhatsApp data to take a few photos and record a few voice notes on WhatsApp of your experiences over the span of two weeks. You will also be asked to take part in a face-to-face, individual interview with me, to discuss your experiences and media and this should take around 60 minutes. Finally, you will be asked to take part in an exhibition, where your photographs will be shown to others.

3. Inconveniences

If at any point of the interview or group discussion you feel anxious or distressed, you can choose to stop at any point without any negative consequences. The interviews and group discussions will be conducted at the organisation you attend or at a convenient meeting place. The most convenient time for you and the researcher will be arranged.

4. Benefits

You are given an opportunity to share your views and experiences and your information will contribute to the larger purpose of bringing to light the experiences of domestic care work during the pandemic.

5. Privacy and confidentiality

The interviews and group discussions will be tape-recorded, and your photos will be saved. The researcher will take strict precautions to safeguard your personal information throughout the study. Your information will be kept in a locked file cabinet without your name and other personal identifiers. Once the study is complete, your tape-recorded information will be stored for a further 5 years and after this period it will be destroyed. While this research will be used for educational purposes, there is a chance that this work might be published in an academic journal. In this case, your identity will still be kept confidential. Interviews will be conducted in a private room to ensure confidentiality. Although confidentiality cannot be guaranteed in focus groups, I will make all efforts to encourage an environment of mutual respect and solidarity to minimize this risk. We have also indicated that your photographs will be exhibited. To ensure confidentiality, we will not attach your name to the photograph. Furthermore, if pictures of persons are taken, we will ensure that they are not identifiable and we will blur out the faces of persons.

6. Money matters

You will be reimbursed for any transportation costs and WhatsApp data costs incurred to and from the research venue. Additionally, you will be provided with a grocery voucher as a thank you for your time and participation, at the end of the study.

7. Contact details

If you have questions, concerns or complaints about the study, please contact the **Researchers:** Floretta Boonzaier on 0216503429 or email at Floretta.Boonzaier@uct.ac.za.

Carmine Rustin at crustin@uwc.ac.za, Mandisa Malinga at mandisa.malinga@uct.ac.za

OR Contact for the Ethics Committee: Rosalind Adams on 021 650 3417 or email at Rosalind.Adams@uct.ac.za

8. Signatures

The participant has been informed of the nature and purpose of the procedures described above including any risks involved in its performance. He/she has been given time to ask any questions and these questions have been answered to the best of the researcher's ability.

_____ _____

Researcher's Signature Date

I (participant) have been informed about this research study and understand its purpose, possible benefits, risks, and inconveniences. I agree to take part in this research as a participant. I know that I am free to withdraw this consent and quit this project at any time, and that doing so will not cause me any penalty.

_____ _____

Participant's Signature Date

PERMISSION TO TAPE-RECORD AND PHOTOGRAPHS TO BE USED IN AN EXHIBITION

I consent to the interview/focus group being audio-recorded. I understand that the interview and group discussion will be tape-recorded and that the researcher will take strict precautions to safeguard my personal information throughout the study. I further consent to my photographs being used in an exhibition.

_____

Participant's Signature

Appendix D
Referral/Resource List to be given to all participants

Thank you for your participation in this research. We have compiled a list of resources which you might find useful after the research. These resources are meant to assist you if and when you need someone to talk to for purposes of counselling, legal advice, or other kinds of assistance.

1. Adonis Musati Project
   For Peer Support Programmes for cross-border migrants in Cape Town, counselling, health checks, workshops, trainings and more
   Contact: +27 (0) 21 762 4886
   admin@adonismusatiproject.org
   21 Church Street, Cape Town 7824
   Western Cape Province, South Africa

1. Scalabrini Center of Cape Town
   Paralegal work, welfare, employment, women's platform and child care
   Contact: +27 21 465 6433
   47 Commercial Street, Cape Town
   info@scalabrini.org.za

1. PASSOP
   PASSOP is a community-based, grassroots non-profit organization devoted to protecting and lobbying for the rights of asylum seekers, refugees and immigrants in South Africa.
   Contact: 3 Hans Strijdom Avenue Lane
   Tulbagh Centre Building (Room 413)
   Cape Town 8001
   Office Telephone: 0214182838
   Office E-mail: office@passop.co.za

1. Center for the Study of Violence and Reconciliation
   The Centre for the Study of Violence and Reconciliation (CSVR) is an independent, non-governmental, organisation established in South Africa in 1989. They seek to understand and prevent violence, heal its effects and build sustainable peace at community, national and regional levels. They do this through collaborating with, and learning from, the lived and diverse experiences of communities affected by violence and conflict. Through research, intervention and advocacy, they seek to enhance state accountability, promote gender equality, and build social cohesion, integration and active citizenship.

   Contact: Johannesburg Office:
   33 Hoofd Street, Braampark Forum 5, 3rd Floor
   Johannesburg, 2001, South Africa

P O Box 30778, Braamfontein, Johannesburg, 2017, South Africa
Tel: +27 (11) 403-5650
Fax: +27 (11) 339-6785
e-mail: info@csvr.org.za

Cape Town Office:
501 Premier Centre, 451 Main Road,
Observatory, 7925
Tel: +27 (21) 447-2470
e-mail: ctadmin@csvr.org.za

1. The Counselling Hub
   The Counselling Hub provides short term individual counselling and group workshops. They charge R50 a session and offer affordable rates because they work with student and professional volunteers.
   Contact: +27 21 462 3902
   52/54 Francis St
   Woodstock
   Cape Town
   South Africa

1. Women's Legal Centre
   For legal assistance – they offer a weekly helpdesk at the Cape Town Family Court and in Khayelitsha
   Contact: 021 424 5660
   2nd Floor, 5 St Georges
   St Georges Mall
   Cape Town
   info@wlce.co.za
   https://wlce.co.za/

1. The Trauma Centre
   The Trauma Centre deals with individuals affected by violence, crime and trauma and offers trauma counselling.
   Contact: 021 465 7373
   126 Chapel Street
   Woodstock
   info@trauma.org.za
   https://traumacentre.org.za/trauma-counselling-clinics/

   LifeLine Johannesburg
   2 The Avenue & Henrietta Street
   Norwood
   Johannesburg
   011 728 1331

Johannesburg Parent and Counselling Centre (JPCCC)
2nd Floor CMI Building
Cnr Empire & Hillside
Parktown
Johannesburg
Telephone: 011 484 1734
WhatsApp Line: 071 608 9361

ORGANISATIONS DEALING WITH GENDERED AND SEXUAL VIOLENCE

1. The National Institute for Crime Prevention and Reintegration of Offenders (NICRO):
Mitchell's Plain: 021-397 3782
Cape Town: 021-422 1690
Bellville: 021-944 3980 or visit their website on: www.nicro.org.za

2. Family and Marriage Society of South Africa (FAMSA):
Observatory: 021 447 7951 or visit their website on: www.famsa.org.za

FAMSA Johannesburg
1 Cardigan Road
Parkwood
Johannesburg
Telephone: 011 788 4784

3. Mosaic Training, Service and Healing Centre for Women:
www.mosaic.org.za
MOSAIC (Head Office)
66 Ottery Rd, Wynberg
Cape Town, 7800
+27 (0)21 761 7585
admin@mosaic.org.za
Mitchell's Plain Office
C/O Pryrennes & Kilimanjaro
Tafelsig
Mitchell's Plain
7785
email: adminmpcc@mosaic.org.za
Tel: 021 397 3291
Philippi Office
Khanyisa Centre
Philippi
7785
Walk-In Centre
Paarl East Office
Thusong Centre
Charleston Hill, Paarl

7646
Walk-in Centre
Thusong Centre

4. Saartjie Baartman Centre for Women and Children:
Manenberg: 27 21 633 5287
or visit their website on: http://www.saartjiebaartmancentre.org.za/

5. Rape Crisis
Observatory (Head office)
23 Trill Road, Observatory, 7925, Cape Town
P O Box 46 Observatory 7935
Email: communications@rapecrisis.org.za
Complaints: complaints@rapecrisis.org.za
Telephone: 021 447 1467
Athlone
335a Klipfontein Road, Athlone
Telephone: 021 684 1180
Khayelitsha
89 Msobomvu Drive, Khayelitsha
Telephone: 021 361 9228

6. TEARS Foundation
85 Protea Road
Kingsley Office Park
Block C
Chislehurston
Sandton
Johannesburg
HelpLine: 101 590 5920 and *134*7355#
Email: info@tears.co.za

7. RISE Against Domestic Violence
Email: info@riseagainstdomesticviolence.co.za
Mobile: 081 589 4308

1. **POWA – People Opposing Women Abuse**

Head Office: Berea
Postal Address:
PO Box 93416, Yeoville 2143
Johannesburg
Telephone: 011 591 6803
Fax: 011 484 3195
Web address: www.powa.co.za
Email: info@powa.co.za

POWA Legal Advice
Email: legal@powa.co.za | info@powa.co.za
Counselling
Email: counselling@powa.co.za
POWA Evaton
Telephone: 081 383 7698
POWA Soweto
Room 10 Nthabiseng Centre, Chris Hani Hospital
Telephone: 011 933 2333/2310
POWA Katlehong
667 Monise Section, Katlehong 1431
Telephone: 011 860 2858
Fax: 011 905 211
POWA Tembisa
43 Ethafeni Multi-Skills
Centre Ethafeni Tembisa
Telephone: 065 868 3309
POWA Vosloorus
1620 Ditshego Street,
Vosloorus Rehabilitation Centre
Telephone: 011 906 4259 / 1792