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### Strengthening Zimbabwean migrant families in South Africa: Insights from second-generation migrants and professionals

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#### ABSTRACT

This article explores the strengthening of Zimbabwean migrant families through a qualitative study on the integration experiences of second-generation migrants in Johannesburg and Pretoria, South Africa. Semi-structured individual interviews were conducted with 16 second-generation migrants from various socio-economic backgrounds, who were born in or migrated to South Africa before adolescence, as well as with 10 expert contributors from the fields of social work, law and education. The study finds that both first-and second-generation migrants encounter challenges in the early stages of migration, particularly related to documentation, barriers to support services, poverty and invisibility – factors that weaken migrant families, placing them at risk of separation. Furthermore, intergenerational transmission of disadvantage, as challenges of legal status and exclusion are often carried over from parents to children. However, some families receive support from South African community members, social workers, teachers and lawyers, which helps strengthen their families. Nonetheless, following the identification of structural factors that contribute to the difficulties that migrants face, we conclude that initiatives to support and strengthen Zimbabwean migrant families must adopt more structural, anti-oppressive approaches to service delivery.

**Keywords:** anti-oppressive social work; family strengthening; integration; migrant families; second-generation migrants

## INTRODUCTION

Migrant families, including asylum seekers and refugees, are a key service user group for social workers in migrant-receiving countries worldwide (Farmer, 2017; International Federation of Social Workers [IFSW], 2020; Jäppinen et al., 2024; Jolly, 2018). Major global destinations include the United States of America (USA), Germany, Saudi Arabia, the United Kingdom (UK) and France, while in Sub-Saharan Africa, South Africa ranks among the top five (United Nations Department of Economic and Social Affairs [UN DESA], 2025). South Africa hosts 2,418,197 migrants, including refugees and asylum seekers, of whom about 1,173,726 are Zimbabwean (Statistics South Africa [Stats SA], 2023). Because UN DESA (2025) does not differentiate between documented and undocumented migrants, and irregular migration largely eludes censuses, the number of undocumented migrants in South Africa is unknown. However, it is estimated that over 60,000 migrants receive social grants (Stats SA, 2023), and social work with migrants and refugees is recognised as a growing field (Mathe, 2018; Mpofu, 2024; Schenck & Triegaardt, 2018).

All families are exposed to social, cultural, economic and physical factors that can render them vulnerable (Gale et al., 2023; Republic of South Africa [RSA], 2021); however, migrant families face increased risks as a result of their subordinate status and complex migrant circumstances, often with particularly devastating impacts (Jolly, 2018). Risk factors accounting for these vulnerabilities are wide-ranging and include “ethnic/armed conflict, natural disasters, inadequate government structures and services, unemployment and absence of housing”, as well as social factors such as discrimination and stigma (Gale et al., 2023, p. 2). In combination, these factors can lead to extreme forms of marginalisation and precarity. Strengthening families within such vulnerable populations is crucial to prevent additional injustices and the flow-on effects of hardship through family separation and the placement of children in alternative care (Bosman-Sadie et al., 2010; Dutschke, 2008; Gale et al., 2023). Moreover, a doctoral study on second-generation migrants (Mpofu, 2024), whose findings are reported on in this article, found that amid considerable social, political and economic exclusions, migrant families depend on one another for survival and wellbeing. These findings further underscore the critical importance of strengthening families as a focus for social workers wishing to support the resilience and stability of migrant families.

This study explores the role of social work in strengthening migrant families in South Africa through examining the experiences of adolescent second-generation Zimbabwean migrants and the professionals supporting them. For this purpose, second-generation migrants are defined as the children of one or two foreign-born parents living in a receiving country, or those who migrate with their parents as young children (Durmalet & Swamy, 2013; Karthick Ramakrishnan, 2004; Schneider, 2016). Correspondingly, first-generation migrants are defined as “parents who migrated to the place where their children were born and/or raised” (Schneider, 2016, p. 2). While the experiences of first- and second-generation migrants in South Africa show many similarities, there are also important differences. These intergenerational similarities and differences can both strengthen and weaken migrant families; thus, social workers need to understand them to effectively support families towards successful integration. To this end, the article focuses on the difficulties experienced during the early stages of

migration, including challenges related to documentation, poverty invisibility, as well as the solidarity and support provided by South African community members and service providers.

A central premise of this article is that strengthening families requires the second generation to be given a fair opportunity and the necessary support to integrate as equals into South African society. According to the International Organisation of Migration (2019, p. 106), integration refers to:

*The two-way process of mutual adaptation between migrants and the societies in which they live, whereby migrants are incorporated into the social, economic, cultural and political life of the receiving country. It entails joint responsibilities for migrants and communities and incorporates other related notions such as inclusion and social cohesion.*

Gale et al. (2023, p. 1) define family strengthening as a process that:

*Involves identifying and providing effective support to families – especially in times of difficulty. Such support includes access to a range of individualised and tailored services that help build on and strengthen protective factors, resilience, and self-reliance within families.*

This article addresses three key questions related to family strengthening vis-à-vis the integration of second-generation migrants: How can family strengthening programmes contribute to addressing the structural social, political and economic issues that make migrants particularly vulnerable? What does family strengthening look like under conditions hostile to migrant integration? How does family strengthening occur within hidden and invisible populations?

The next section provides an overview of the South African migration context, followed by a discussion of a framework for service delivery aimed at strengthening migrant families in South Africa. The study's theoretical framework is presented after that. The methodology used for the study is then outlined, followed by the presentation of its findings. The article concludes with insights on structural solutions to strengthening migrant families within an anti-oppressive service delivery framework.

## **THE SOUTH AFRICAN MIGRATION CONTEXT**

As already noted, South Africa is a major migrant-receiving country, hosting migrants primarily from southern Africa and the broader African continent (Misago, 2017; Stats SA, 2023). A 2011 census reported that there were 2.1 million migrants in South Africa, from a population of 51.7 million (RSA, 2017). By 2019, the number of migrants had increased to 2.9 million, in a population of 58.78 million (Migration Data Portal, 2020). The 2022 census indicates that 2,418,197 migrants currently reside in South Africa, out of a total population of 62,027,503 (Stats SA, 2023). However, these official statistics do not capture the full number of migrants in the country because – as stated above – the population of irregular migrants remains unknown (Stats SA, 2023).

The cities of Pretoria and Johannesburg, where this study was conducted, like other urban areas in South Africa, are key destinations for international migrants. Both cities are located in

Gauteng province, which is regarded as the financial hub of the country (Gauteng Provincial Government, n.d.). According to Stats SA (2023, p. 2), “the migration landscape revolves around Gauteng as a central hub”, with Pretoria being the capital city and Johannesburg as the primary centre for financial opportunities (City of Johannesburg, 2023; City of Tshwane, 2024). However, despite Gauteng’s economic prominence, access to resources, services and opportunities are unequal (City of Johannesburg, 2023). These inequalities are particularly visible in townships and informal settlements, where many migrants reside:

*Fierce competition for scarce public services, livelihood resources and opportunities driven by these circumstances often leads to tensions and conflicts among individuals and groups. More specifically, competition for jobs, housing, public services such as health care and social grants, business space, etc. between citizens and foreign residents, results in resentment and tension between them* (Misago et al., 2021, p. 26).

As a result, there is a clear demarcation between “us”, the citizens who belong, and “them”, the migrants who do not. This division creates the perception that only “us” should have exclusive access to services, resources and opportunities. This reality emphasises the importance of the social, economic and political conditions in which second-generation migrants and their families integrate, highlighting the context in which family strengthening must take place.

## **FRAMEWORK FOR STRENGTHENING FAMILIES IN SOUTH AFRICA**

Family strengthening involves providing effective support services to families, including protection, resilience development and building their capacity to address their own challenges (Gale et al., 2023). This includes identifying risk factors that weaken families and implementing strategies to mitigate these risks while building on existing strengths. Because risk factors may exist within families, their immediate surroundings and society at large (Potter & Brotherton, 2010), strategies for strengthening families should address risks at the micro, meso and macro levels (RSA, 2021).

Social workers in the field of refugees and other migrants render services across these levels, often within migration policy contexts that undermine professional efforts (Farmer, 2017; Field et al., 2020; Jäppinen et al., 2024; Jolly, 2018; Mathe, 2018; Misje, 2022; O’Keeffe & Nipperess, 2021). Most literature on this topic emanates from the Global North. For example, O’Keeffe and Nipperess (2021), writing from Australia, explore how to support young people from refugee backgrounds in a context where boundaries are marked between “them” refugees and “us” citizens, resulting in the construction of refugee youths as the “Other”, thereby undermining their efforts to negotiate spaces of belonging. Following the theme of “othering”, Misje (2022) describes how boundaries demarcated within the Norwegian nation-state frame homeless migrants as undeserving of social work services. In the UK, Farmer (2017) and Jolly (2018) highlight the ethical dilemmas faced by social workers because of contradictions between migration control and child protection laws. These works are particularly relevant for a critique of South Africa’s context. They illustrate how state-imposed barriers prevent parents – particularly those with irregular status – from accessing employment, leading to the inability to meet basic needs such as food, shelter and clothing, which in turn creates child protection

concerns (Farmer, 2017; Jolly, 2018). Such contradictions raise questions about the position of social work in the nation-state, particularly regarding the ethical dilemma of dual loyalty, where “the essence of the conflict is the question of duty and priority: to the employing organisation and the state or the person that the social worker has professional obligations toward” (Briskman & Doe, 2016, p. 77).

In South Africa, services for migrant families are often developmental, focusing on prevention rather than inter- or postvention (Gray & Lombard, 2022; Mathe, 2018; RSA, 2016; Schenck & Triegaardt, 2018). Specialised services are supposed to be provided to documented migrants, refugees and unaccompanied minors as they integrate into their communities (Hölscher, 2016; Mathe, 2018; RSA, 2016). However, social workers are found to be struggling to render services to these groups; for example, Hölscher (2016) writes about how in cities, poor citizens, refugees and other migrants compete for limited resources. This is further aggravated by the fact that services are being rendered in a context in which, in terms of resources, social work is unable to adequately meet its responsibilities, particularly to children (Gray & Lombard, 2022). Also, similar to the Global North, it is not all migrants and refugees who have access to these services; often irregular migrants face difficulties as a result of their documentation status (Mathe, 2018; Mpofo, 2021; RSA, 2016; Schenck & Triegaardt, 2018). For instance, Mathe’s (2018, p. 6) study of unaccompanied minors reveals that upon arrival in South Africa it is especially those who are undocumented who “continue to live in constant fear of deportation, maltreatment and the deprivation of their human dignity”. According to the author, this leads to a violation of their rights provided for in the Constitution (Mathe, 2018). Mathe (2018, p. 7) concludes that though the Department of Social Development (DSD) is tasked with service provision within a developmental approach, “it seems that the rights of migrant children in South Africa are not an urgent priority, and social workers feel too overwhelmed to promote the rights of foreign-born children in the face of unsympathetic Department of Home Affairs (DHA)” (see also RSA, 2016).

This article draws on the developmental approach to working with migrant families in South Africa (Dutschke, 2008), currently guided by the Revised White Paper for Families (RSA, 2021), the National Child Care and Protection Policy (RSA, 2019) and the Children’s Act 38 of 2005 as amended (RSA, 2005). According to this approach, communities and families considered to be vulnerable should be supported through prevention and early intervention services (Bosman-Sadie et al., 2010; Dutschke, 2008; RSA, 2019; United Nations Children’s Emergency Fund [UNICEF], 2021). In this context, prevention “refers to any strategy or programme which strengthens and builds the capacity and self-reliance of families, children, youths, women and older women”, while early intervention “targets children, youths, families, women, older persons and communities identified as being vulnerable or at risk, and ensures, through strengths-based and therapeutic programmes, that they do not experience statutory intervention of any kind” (Bosman-Sadie et al., 2010, p. 155). Thus, prevention services utilise human and financial resources to mitigate social problems, and early intervention services are provided when social problems start to manifest (Dutschke, 2008). Both types of services seek to ensure that children remain in the care of their parents and families (RSA, 2019, 2021; UNICEF, 2021).

Section 144 (1) of the Children’s Act (RSA, 2005) and the National Child Care and Protection Policy (RSA, 2019) outline the types of support that fall under the umbrella of prevention and early intervention services, targeting parents, children and families as a whole. For example, some programmes focus on “developing parenting skills and [the] capacity of parents”; children should be afforded relevant counselling and therapeutic programmes, while families can be assisted by “promoting appropriate interpersonal relationships” (RSA, 2005; see also RSA, 2019). Section 147 of the Children’s Act lists outreach services, education, information and promotion, therapeutic programmes, diversion programmes, temporary safe care and assessment programmes as the types of services that it deems most apt to achieve South Africa’s preventive and early intervention goals. To this end, individuals, community members, civil society organisations, the private sector and the state are encouraged to collaborate in supporting families (RSA, 2021).

In its *Comprehensive Report on the Review of the White Paper for Social Welfare, 1997*, the Department of Social Development (DSD) commits itself to the principle that “children, from whatever category must be provided with protection and other services” (RSA, 2016, p. 71). In other words, prevention and early intervention services are intended to support all families. Yet, in practice, children in South Africa do not have equal access to these services (Gray & Lombard, 2022), particularly those who experience marginalisation and exclusion, such as irregular migrant children (Mathe, 2018; Mpofu, 2021). And even where services are accessible, social workers are often limited in their ability to adequately identify or address the unique circumstances and specific needs of migrant families.

## **THEORETICAL FRAMEWORK**

This article adopts anti-oppressive social work theory as its theoretical framework, as articulated by Baines and Clark (2022), Clifford (2013), Mullaly and West (2017) and Ramsundarsingh and Shier (2023). These authors’ understanding of oppression can be traced largely to Iris Marion Young’s (1990) seminal work, *Justice and the Politics of Difference*. Anti-oppressive social work theorists argue that the root causes of social problems are found in oppressive social, economic, and political structures (Baines & Clark, 2022; Goodman, 2015; Mullaly & West, 2017). Regarding the context of this article, the following points are key. Firstly, oppression occurs in two main ways. Some people may intentionally “exercise their power over” others in tyrannical ways, while structural oppression occurs when people unintentionally follow oppressive societal norms, rules, and stereotypes (Young, 1990, p. 40). Structural oppression creates the conditions that allow tyrannical oppression to thrive. Secondly, oppression operates at multiple, interconnected levels, that is, the micro, meso and macro levels of social life (Baines & Clark, 2022). Consequently, social work interventions should target all three levels (Hölscher & Chiumbu, 2020). Thirdly, anti-oppressive social work theory acknowledges the complex relationship between social workers and the state (Baines & Clark, 2022). In the context of migration, the state is responsible for creating and enforcing, at once, migration and child protection laws, thereby setting up the contradictory demands on social workers that were discussed in the preceding section.

Young’s (1990) conceptualisation of oppression through five intersecting and mutually reinforcing “faces” – exploitation, marginalisation, powerlessness, cultural imperialism, and

violence – continues to prove relevant. For example, recent social work scholars such as Mpofu (2021) and Ramsundarsingh and Shier (2023) apply this conceptualisation effectively, with Ramsundarsingh and Shier (2023) emphasising Young’s (1990) contention that the presence of even one face suffices to be able to conclude that oppression occurs, while Mpofu (2021) is able to demonstrate in the case of Zimbabwean migrants in South Africa that people can indeed be exposed to all the five faces of oppression at once. The first face of oppression, namely exploitation, occurs when the surplus labour of employees is used to generate wealth for their employers (Young, 1990), whereas “marginals are people the system of labour cannot or will not use” (Young, 1990, p. 53). People thus marginalised exist on the fringes of a society to which they do not fully belong. Powerlessness refers to individuals or groups who are excluded from the decision-making processes, for example, in policy and law; their lives are affected by rules they must follow, but in the making of which they had no say. As Young (1990, p. 56) notes, “in this sense most people lack significant power”. Cultural imperialism “involves the universalisation of a dominant group’s experience and culture, and its establishment as the norm” (Young, 1990, p. 59), with those who differ from the norm being ‘Othered’, that is, constructed as being of lesser worth than the members of the dominant group(s) to whom they are being compared. Young (1990) treats violence against oppressed groups as a lived reality where individuals experience fear of being physically, psychologically or socially attacked. This view has since been extended by Mullaly (2010) to include structural forms of violence as well – situations where no specific perpetrators can be singled out, but violence does nonetheless occur, as is the case, for example, when we treat poverty as a form of violence (see also Mullaly & West, 2017). For the purposes of this study, we conceptualise oppression, the contradictory relationship between social work and the nation-state in the context of integration and migrant family strengthening.

## **METHODOLOGY**

The study from which this article is drawn employed a qualitative interpretive research methodology (Shaw & Holland, 2014) to gain an in-depth understanding of the experiences of second-generation migrants in South Africa, as well as the perspectives of professionals supporting them. An exploratory and descriptive case study design was used, focusing on second-generation migrants from Zimbabwe in Gauteng province. The main research question explored the challenges and opportunities for the integration of second-generation Zimbabwean migrants in South Africa and considered the implications for social work practice. To date, this topic has been under-researched.

Sixteen second-generation Zimbabwean migrants (Z1-Z16) and ten professionals (expert contributors, E1-10) were purposely selected and recruited through snowball and convenience sampling strategies. The migrant participants included individuals with both regular and irregular residence status. Additional inclusion criteria were (i) having at least one Zimbabwean parent; (ii) either being born and raised in South Africa or having been brought to South Africa before enrolling in primary school; and (iii) having Shona and/or Ndebele-speaking parents. Of the sixteen second-generation migrants, nine identified as male and seven as female. Their ages ranged from 14 to 21, with 13 being under 18 years old and three being 18 or older. The ten expert contributors were selected based on their professional engagement with second-

generation migrants. This sample included four teachers, one student teacher who also served as a soccer coach; two social workers; a social auxiliary worker, and two lawyers.

Data from both participant groups were collected through individual semi-structured interviews, guided by “key topics and subtopics” (Kelly, 2006, p. 298; see also Patten & Newhart, 2018). The transcribed interviews were analysed using thematic content analysis, following the five stages outlined by Terre Blanche et al. (2006) and supported by Creswell and Creswell (2023), namely, familiarisation and immersion, theme induction, coding, elaboration, and interpretation and verification. Familiarisation and immersion took place during transcription and reading of the transcripts. Theme induction involved classifying data in participants’ own words, while also taking into account the study’s theoretical framework. After that, coding was done according to similarities in participants’ experiences and expressions. In the elaboration phase, themes and subthemes were refined by checking for coherence and ensuring that divergent and disconfirming views were also incorporated. Finally, interpreting and verification were embedded in the writing up of the analysis, where the identified themes and subthemes were presented systematically.

The study’s credibility, dependability, transferability and confirmability were ensured using thick descriptions, purposive sampling, member checks, peer debriefing and the acknowledgement of possible researcher biases (Babbie, 2021; Korstjens & Moser, 2018). The study also adhered to four core ethical principles: autonomy and respect for the dignity of persons, non-maleficence, beneficence and justice (Wassenaar, 2006; cf. Babbie, 2021; Creswell & Creswell, 2023; Creswell & Poth, 2018). Fair selection of participants was assured through purposive sampling. Voluntary informed consent was obtained from all participants, as well as from the parents/caregivers of all second-generation migrants. Counselling arrangements were made in anticipation of possible emotional harm occurring. However, none of the participants took up this offer; instead, several shared that talking about their experiences felt therapeutic. Thus, beneficence was reflected in participants’ opportunity to share and validate their experiences. Confidentiality was maintained by deidentifying all data during transcription, securely storing transcripts and audio files with a password-protected access code. Ethical approval for the study was granted by the University of Pretoria (protocol number: HUM017/0622).

The study had two interrelated limitations. Firstly, some authors describe the convenience and snowball sampling strategies employed in this study as a limitation (Patten & Newhart, 2018). However, with hard-to-recruit participants, such as undocumented and stigmatised migrants, this methodology is generally accepted (Babbie, 2021). Secondly, the sample consisted of second-generation migrants from middle-income areas, townships and inner-city communities, but none from backrooms and informal settlements. Mpofo tried to access participants from those areas; however, they were fearful of a stranger interviewing them, suspecting that she might be an immigration official. This further underscores both the limitations of convenience and snowball sampling and the fact that these strategies constituted the only choice as far as this group of participants was concerned.

## RESEARCH FINDINGS AND DISCUSSIONS

The data analysis revealed six themes of relevance to the topic of strengthening migrant families, namely the initial stages of migration; documentation status; hypervisibility and accessing services; poverty; invisibility; and solidarity and support. These themes highlight both the similarities and differences between the experiences of first- and second-generation migrants and the impacts of this on family life.

### Theme 1: The initial stages of migration

Especially when speaking about the early stages of their migration to South Africa, second-generation migrants identified distinct differences between their own experiences and those of their parents. Many expressed an appreciation for the fact that, compared to their parents, they encountered fewer challenges when initially settling and when born in the country. For example, Z16, who was brought to South Africa at the age of 14, shared that:

*When [my mother] ... first came to South Africa, things were not easy. She always tells me that, 'I left you when you were young ... with the paternal grandmother'. So, when she came to South Africa, she had qualifications to teach but ... no place to stay ... [When] she was pregnant with my little brother; it was very difficult because both [she and the father of my young brother] were not working. So, everything was hard that time, she did not know where to go. Her parents didn't know, and she had to keep this a secret.*

This, Z16 said, contrasted with his own experiences:

*I feel for my mum ... Because for me, I am encountering those challenges under her, while she had no one. She was standing up for herself, she had no one to talk to and go to. So, everything she did by herself. But for me, let's say I have a challenge, I can say, 'Mum, there is this and that'.*

Z7, who was born in South Africa, compared the difficulties her parents encountered settling into South Africa with her own, saying:

*They talk about how ... [hard] it was to ... [become] accustomed to a new country, from having everyone the same as you, to having people who are different, who don't understand the difficulties that you had ... I think I have more of an advantage ... because I was born in South Africa. They were born in Zimbabwe and then moved to South Africa, but I can be a citizen in South Africa, which could also be an advantage.*

Shifting the focus from the question of adaptation to how migrants and their children are treated by others, Z12 compared his own and his parents' experiences as follows:

*I have it easier ... I grew up here, so I know these people. ... I think the way people treated them was different from the way they treat me. I don't have much problems with people from South Africa or even problems with the police. I think my parents have had problems here and there with the police or even employers ...*

The main point made by these three participants – that their parents experienced the early stages of migration as more challenging than their children – is one that writers on migration have

observed across a range of contexts (cf. Hamari et al., 2022; Renzaho et al., 2017). Moreover, Z16 offers the important insight that although he did not consider himself to be directly affected by his mother's difficulties, his sibling was *born into* circumstances where, from the onset, the parent was finding herself incapacitated, struggling to meet even basic needs, while being cut off from her original family supports and, thus, from an important source of resilience. All study participants spoke of discrimination based on their families' Zimbabwean origins, including in the spheres of employment, housing and law enforcement. These concerns are discussed further below (see Theme 4). However, it becomes apparent in this theme already that marginalisation (Young, 1990) begins in parents' initial days of migration. In terms of the framework for family strengthening, therefore, prevention would require parents to receive support in securing employment, housing and adapting to their new environment more generally (Bosman-Sadie et al., 2010; Gale et al., 2023; Willi, 2023). Such services should be available immediately at arrival and focus on supporting migrant parents as they seek to use their existing skills to survive. Alas, as the following sections will illustrate, migration policy and legislation-related barriers render such support difficult to implement.

## **Theme 2: Documentation status**

The documentation status of both parents and children is one of the key factors that weaken migrant families. All the professionals interviewed for this study discussed how the statuses of parents and their children were interconnected, risking both immediate and longer-term harm, including the intergenerational entrenchment of such harm. As E6, a lawyer, explained:

*Documentation passes on from [the] parent. So, if the parents are around, and their documentation is wrong, it's hard for [the Department of] Home Affairs to ignore that part and focus on the child.*

The consequences can be dire, as narrated by E10, a social worker:

*If there was a child that was raped ..., our migrants, they have that way [of saying], 'If I go to police, [it is about] my documents, my documents'. So ... clients are ... afraid to go [to the] police station to report ... if their child is going through something.*

However, the issue at stake need not be a matter of violence and crime for a lack of documentation to potentially affect the entire future life course of the children concerned. E1, a teacher, recalled one student who had completed her matric exam with seven distinctions, ranking her as one of South Africa's top students. E1 reflected:

*[You] find out that a child wrote [the matric exam] ... without any ... documentation ... meaning that, [while] parents have been experiencing this problem of getting documents for them to be able to be legal, ... the child was pushed until ... matric without documents because the child [has] got the right to education.*

Yet even though undocumented migrants can successfully obtain a matriculation certificate, their subsequent integration as a productive member of society does not follow as a matter of course. For example, E10 shared the following plight of a young Zimbabwean mother and her 8-year-old son, whose father was said to be a South African citizen:

*The lady [said], 'I came here when I was young ... I never had any documents. Then I completed matric, I have a statement, but now I cannot even get a job ... With this kind of a lifestyle that I am living, I fear that it will go back to my son.' So ... I said, 'Did you [ask]... the father of your child to assist? She said, 'Yes, I tried but we are requested to do the DNA ... We have to pay, I don't know [R] 7,000 and ... [we do] not have that money.'*

E10's account raises an additional complexity. The South African Citizenship Act 88 of 1995 (RSA, 1995) stipulates that a migrants' undocumented status is passed on to their children – unless one of the parents is a South African citizen. The latter exception may need to be proven through DNA testing (RSA, 1992), a requirement which becomes a barrier for people trying to survive in South Africa's subsistence economy. In other words, at the intersection of migration and poverty, documentation emerges as an intergenerational risk factor even where a legal entitlement to citizenship exists. Importantly, however, this form of social exclusion is not unique to cross-border migrants, constituting instead an important point of overlap with the experiences of undocumented South Africans. As E9, another lawyer, observed,

*... children who are undocumented are treated like foreign nationals until they are documented ... Unless we really know a lot about their parents ... they have [the] same issues. Wherever [they] need an ID or birth certificate to go to school, to go to creche, to go to hospital, [they] will face the same problem as the Zimbabwean child.*

“Marginalisation”, according to Young (1990, p. 53), “is perhaps the most dangerous form of oppression. A whole category of people is expelled from useful participation in social life ... The material deprivation marginalisation often causes is certainly unjust”. Whether intentional or unintentional, the effect of South Africa's current legislative and administrative requirements around documentation is to create a population of undocumented “marginals”, who are powerless precisely in the way Young (1990) originally framed it: as lacking in status or authority. *Undocumented* South Africans may be experiencing marginalisation and powerlessness in much the same way, yet being an undocumented *migrant* entails an additional layer of exclusion, which is *misframing* (Fraser, 2009). Framing decisions pertain to the “admission criteria and procedures concerning the award or denial of membership”. When membership is wrongfully denied, entire categories of people are unfairly prevented from pressing justice claims in matters that are due to them (Hölscher et al., 2020). Such matters include the question of access to services, which is addressed in the following theme.

In the meantime, we may conclude that a migrant's documentation status is pivotal to perhaps the most foundational type of integration: a pathway towards full membership, that is, citizenship in one's country of residence. Its denial risks derailing the wellbeing of families for generations. Therefore, a key entry point in supporting migrant families is addressing the challenges associated with the documentation status being passed from a parent to their child.

### Theme 3: Hypervisibility and the denial of access to services

All the expert contributors noted that in South Africa, second-generation migrants and their parents encounter significant barriers when trying to access public services, such as healthcare, law enforcement and education. The challenges around access to the police and education have already been touched upon in Theme 2. In this theme, therefore, the focus is on health care services. Referencing the case *Section 27 vs the MEC of Health* (RSA, 2023), lawyer E9 highlighted how migrant children and families may be denied access to services even when they have legitimate claims:

*Now ... all children under the age of 6, and lactating and pregnant mothers must get free health care ... In that [specific] case, a child died because ... he ingested rat poison, and the hospital said, 'You must first pay'. I don't know how much money, but [it was] way too much for the parent, and then the child died.*

An important dynamic through which services may be denied involves rendering a prospective service user hypervisible. Here, visual cues and other surface markers, such as complexion, vaccination marks, accent, or dress, are used to mark them as an “Other” and frame them as undeserving of access to rights, opportunities, resources or services. This hypervisibility often operates alongside processes that render the “Other” inaudible. Inaudibility arises when people, who have been marked in this way, are denied the opportunity to speak for themselves, articulate their own needs, or challenge the terms imposed on them, for example, on the grounds that “They should not even be here”. In conjunction, hypervisibility and inaudibility create conditions under which the “Other” cannot contest being treated as “worth less than Us”. An exploration of this dynamic is consistent with postcolonial analyses, for example, Spivak’s (2010) account of how marginalised subjects are structurally prevented from being heard, even when they appear within dominant representational frameworks. It also continues an important anti-oppressive tradition, that is, the interrogation of how structural processes work to routinely single out members of marginalised groups and subject them to heightened scrutiny, problematisation, and differential treatment (Dominelli, 2002). It is well-illuminated by a further case study provided by the social worker in respect of a client with a refugee (‘Section 24’) permit, which affords its holder the same right of access as a South African citizen. The client’s 12-year-old son required an urgent operation, yet E10 alleged that when the father approached the hospital,

*They said, 'No, we cannot assist' ... So, the client approached us [saying], '...[For] the hospital ... to assist ..., I have to pay. I am unemployed. I don't know what to do.*

E10 explained that to better understand the problem, she accompanied her client to the hospital, where, indeed, the staff insisted that they could not treat his child. Following the advice from a legal colleague, E10 then accompanied the client to the DHA but noticed that he remained quiet throughout. Assessing that he did not take sufficient responsibility, she opted to challenge him:

*'Remember, as social workers, we are here to support, not to do the work for you'. You know what that man said? '... My sister, you see, the way those people explained to you;*

*they didn't say that to me. How they treated me, it was like this document, it's fraudulent, it's not valid. But with you, they were able to explain'.*

E10 concluded that,

*People are voiceless ... [They] are not listened to ... and as a social worker, you become their voice ..." [Yet] when I ... speak on behalf of migrants, [I may be told by the civil servant concerned that], 'We are here to protect our systems, and you come here to break them ...' But the Constitution of South Africa is based on human rights!*

Not only do these expert contributors' accounts raise the spectre of cultural imperialism, marginalisation and powerlessness; oppression's violent face was implicit in the preceding theme already, but its insidiousness has been further emphasised here. "Violence", says Mullaly (2010, p. 60), "is structural when it is tolerated, accepted, or found unsurprising by the dominant group, when perpetrators receive little or no punishment, or when structural inequalities lead to morbidity and mortality". In the words of Young (1990, p. 61), it causes "damage, humiliate[s], and destroy[s]". These intersecting forms of oppression must be addressed in processes of supporting migrant families.

In both the social workers' and lawyers' narratives, one key requirement for strengthening families clearly emerges: children's rights, as outlined in the United Nations Convention on the Rights of a Child (UN, 1989), Article 2, and the African Charter on the Rights and Welfare of a Child (ACRWC) (African Union [AU], 1990), apply regardless of documentation and migrant statuses. Thus, Article 3. Section 28 (1) of the *Constitution of the Republic of South Africa* (1996) states that "[e]very child" has a right to ... basic nutrition, shelter, basic healthcare services and social services; protection from maltreatment, neglect, abuse, and degradation...". This study's findings suggest that this legal framework does not always reflect the reality on the ground. As such, it contributes further to the existing evidence that this is indeed a long-standing, structural concern (see, for example, Gray & Lombard, 2022; RSA, 2016). Willi (2023, p. 3) is therefore correct in highlighting the importance of addressing stigma and discrimination as forms of misrecognition that undermine families and weaken the effectiveness of support services.

E10, a social worker, spoke of her complex role, at times being torn between the need to, and frustration of, having to advocate on behalf of service users, who by her own account were rendered voiceless. Baines and Clark (2022) problematise the often-contradictory relationship between social work and the state. In this context, social workers mediate between migrant parents and state institutions, advocate for children's access to services, and educate parents about their children's rights. Such efforts are central to strengthening migrant families. However, when the state and its service providers exclude migrant families – whether intentionally or as a consequence of structural barriers – this directly contradicts the principles of family strengthening – and further exacerbates family vulnerability. Addressing these structural exclusions is therefore essential for social work interventions with migrant families.

#### Theme 4: Poverty

Poverty is a multi-dimensional phenomenon, defined by Stats SA (2020) as deprivation across at least seven key areas: inadequate housing; insufficient nutrition; limited access to healthcare; lack of quality education and child development opportunities; exposure to violence or lack of protection; poor water, sanitation and hygiene (WASH); and restricted access to information. In South Africa, on average, children experience four of these deprivations simultaneously, with the most prevalent being deficits in education and child development, followed by housing, health, WASH, nutrition, protection and access to information (Stats SA, 2020). While it is a form of structural violence that deeply and adversely affects anyone whom it afflicts, the conditions described so far render the families concerned in this study especially vulnerable to entering vicious cycles of pervasive and prolonged – intergenerational – poverty.

Both the second-generation migrants and the professionals supporting them identified this as a pervasive theme in the families concerned in this study. For instance, in Theme 1, it has already been discussed how participant Z16 described his mother's experience of homelessness and unemployment. Meanwhile, Z5 recounted leaving school to earn pocket money, knowing that her mother could not provide for her needs:

*I would get part-time jobs ... [rather than] than ... saying, "Mom I want this" when I know that at that time she doesn't have, she is struggling to get money. ... I [even] asked my dad to give me money to start selling socks and stuff. So, yah, I have been selling socks.*

Professionals confirmed the pervasiveness of poverty in the daily lives of Zimbabwean second-generation migrants in South Africa. E10 spoke of school students' hunger, poorly presented uniforms and inadequate stationery, while E8, a school social worker, described how poverty limited these learners' participation:

*They were ... [the ones who were] not financially able to attend the fun activities at school. They were in the feeding scheme ... They walked quite far to school if there was no transport money ... If it's raining, they didn't come to school [because] they have to wash their [only set of] school clothes and ... it's not dry ... They didn't ... attend aftercare because there was no finances ...*

The interrelated adversities of poverty shape both individual and collective wellbeing in migrant families. A teacher (E3) noted parents' efforts in the pursuit of survival to try find "any work possible just to make a living". The consequences for family relationships were, in the words of E3, that "Most parents work long hours, and they don't have time for their kids."

Poverty is recognised as a primary risk factor for child neglect and family vulnerability (Bosman-Sadie et al., 2010; Dutschke, 2008; Gale et al., 2023; Jolly, 2018; RSA, 2021), and this holds irrespective of migrant status. However, this study supports the existing body of literature that confirms the pervasiveness of unemployment among, and the precariousness of jobs held by, Zimbabwean migrants in South Africa (Crush et al., 2017; Hungwe, 2020; Machinery, 2022). This is the result of, among other factors, restrictive labour policies. For example, Section 19(4) of the Immigration Act 13 of 2002 (RSA, 2002), which stipulates the conditions of employment for migrants, permits the employment of migrants only in

exceptional skills positions – professions such as teaching are typically excluded. The resultant pressures may push young people out of school, as with P5. As Jolly (2018) observes, when parents are unemployed, they cannot provide for their children's most basic needs, weakening families across the board. Similar to barriers in documenting children of migrants (see Theme 2), the state plays a role in creating marginality by limiting access to sustainable livelihoods. Gale et al. (2023) therefore recommend family strengthening approaches that confront the structural exclusions that perpetuate poverty.

### **Theme 5: Invisibility**

Theme 3 discussed the phenomenon of Zimbabwean migrants and their children being rendered hypervisible and inaudible at once, particularly those with questionable documentation and especially when trying to access public services. This theme focuses on a distinct, but related phenomenon, that is, *hiding as a strategy* for remaining safe in an environment experienced as hostile and characterised by a constant risk of exposure. According to the participants in this study, second-generation migrants and their families often lead hidden lives, invisible to many members of their surrounding South African communities. The professionals, too, spoke about this tendency towards rendering oneself unseen: Invisibility was described as a strategy of deliberately avoiding a focus on the Zimbabwean part of people's identities – avoiding any open acknowledgement of their heritage for fear of discrimination and stereotyping. Akin to Mullaly and West's (2017) notion of internalised oppression, such concealment was described not merely as an individual but a collective strategy, shaping entire families' everyday interactions and behaviour. As Z11 noted:

*We don't really talk about being Zimbabweans that much; we acknowledge that we are Zimbabweans, but we don't really bring it up.*

Z10 echoed:

*I feel like, if you know you are from Zimbabwe, calm down a little bit because they are going to tell you to go back to your country. So, don't be, like, too aggressive or too loud.*

Yet experiences were not uniform. Born to both Zimbabwean and South African parents, Z15 describing the following internal struggle in this conversation with Mpofu (A1):

*A1: You said your other parent is a Zimbabwean. In your experience, has being a child of a Zimbabwean mattered ...?*

*Z15: I have never seen it as a barrier externally but internally because in some instances, I feel the need to not admit being partly Zimbabwean. So, I feel like it's an internal struggle.*

*A1: When you speak about an internal struggle, what do you mean?*

*Z15: When I am chatting with my friends, when we speak about nationality, I have a problem of not being Zimbabwean openly due to fear of being viewed differently – stereotypes and things like that.*

Others emphasised invisibility as a family strategy. As participant Z14 explained:

*My family prefers not to speak too much about being Zimbabwean coz they are aware of the consequences of being exposed as a Zimbabwean ... The biggest factor is discrimination ...*

The professionals confirmed the deliberateness of Zimbabwean and other migrants' behaviours. Teacher E4, for example, observed how parents tell their children to conceal their identity in public:

*Children have been told ... [that] 'When we are in public, don't talk, maybe you will expose us. We will get arrested', things like that. So, when they are in public, children won't freely relate to their parents because of the so-called fear of exposing each other.*

E6, one of the lawyers, expressed concern that the strategy of 'hiding', or seeking to render themselves invisible, can be self-defeating in that it prevents families, especially those with precarious residence status, from accessing information about actually available services. For who would tell them if their need for such services is not known? While NGOs were perceived as lenient, government departments demanded paperwork:

*Accessing social workers [in our NGO] is not difficult ... the only issue is awareness ... [For example,] you ... [might] find out that there is a family living three blocks away from our office ... [who] don't know what services we offer, ... going to DSD [Department of Social Development] instead – that is literally government! ... You can't go to DSD and say that 'I need help with this and this' [because] they would say, 'Documents!'.*

Beyond raising concerns about families missing out on vital information, however, E4's account also illustrates the vicious interplay between hypervisibility (discussed in Theme 3) and invisibility. Trying to counteract their hypervisibility by trying to divert public attention from their migrant identities bears the risk of migrant families turning to the very legal and social work service providers they might have sought to avoid. Moreover, the strategy creates emotional and affective burdens for migrant families, well articulated by Kallio and Häkli (2023, p. 12), who observe that “the fear of being too visible under the public eye is interlaced with the painful sense of becoming invisible as a human being”.

Addressing the issues of hiding and invisibility is therefore essential to strengthening migrant families. Beyond the emotional harm, invisibility carries practical risks: families may remain cut off from services, and children may be placed in more vulnerable situations. As the lawyer highlighted, awareness of accessible services is often lacking, particularly among those with precarious documentation. Social work must therefore move beyond a narrow focus on preventing statutory care placements to actively supporting migrant families in surviving and thriving – even if they remain invisible within formal systems.

### **Theme 6: Solidarity and support**

Despite the often-difficult circumstances described by the second-generation migrants and professionals, they were of the opinion that migrants and their families also receive valuable support from South African community members and service providers. This support plays a crucial role in strengthening these families. One professional, lawyer E9, reflected on the

contradictions around xenophobia in South Africa, stating that while state institutions such as DHA often displayed exclusionary practices, in the thickness of everyday life where personal relationships are formed, many South Africans cared deeply for migrants and their children. She explained how this tension plays out:

*I find that ... most South African people in her [the specific child's] life are ... doing everything to help her ... That is what I find interesting ...: You hear a lot about xenophobia and people being xenophobic, but if [you] look at the lives of each ... you know, everyone has a Zimbabwean in their life whom they love and don't want to leave ... So, all of us, on a practical, personal level, we want good things for Zimbabweans in our lives, but at the same time, we have this xenophobic thing because we are stressed about resources, and we don't know whom to blame.*

Second-generation migrants also shared positive experiences of peer support. For example, Z6 recalled how his South African friends encouraged him to participate in a car-wash initiative, even though he initially hesitated because of language barriers:

*The time when we wanted to do the car wash, I didn't want to join because obviously, when a person comes with their car, and they will say, 'Please wash my car' or 'Wash the inside only', and I will not understand. But my friends encouraged me to join so that I can be able to learn other languages.*

Similarly, Z2 described experiencing not just discrimination but also genuine friendships:

*I mean, when you are foreigner (pause), you usually, from what I have seen, get treated differently, especially by the locals. [But] it hasn't been bad for me; I don't even know why ... Most of [my peers], even [though] they are South Africans, and even my best friend, [who] is a South African ... is good to me.*

For others, solidarity extended to their families. Z9 highlighted how support for her father also benefited her own life:

*Some people go the extra mile to help. Even when I was in primary [school], ... at a certain point, they [would come to] know my father. So, they always help my dad in a lot of things, be it in registering for maybe a permit ... It's a good feeling to know that there are still people out there, who are ready to help...*

These findings align with Hlatshwayo and Vally's (2014) study, which highlights the role of South African community members, fellow migrants and civil society organisations in providing support. As E9 noted, many South Africans are willing to help but are often overwhelmed by a lack of resources and uncertainty about where to lay the blame. Indeed, Misago et al. (2021) emphasise that competition for resources between poor citizens and migrants can fuel discrimination, as both groups are vulnerable because of poverty. Nonetheless, the examples of solidarity suggest the possibility of bridging divides.

On the interpersonal and community level of practice, then, anti-oppressive social workers will be well advised to remember that when Young (1990, p. 40) suggests that "oppression ... refers to the vast and deep injustices some folks suffer ... as a consequence of the often unconscious

assumptions and reactions of well-meaning people in ordinary interactions”, the inverse is also true: overcoming injustice relies on cultivating the good sense, solidarity and support of well-meaning people in ordinary interactions. On a policy level, an intersectoral approach, as recommended by Dutschke (2008) and the National Child Care Protection Policy (RSA, 2019), is crucial for strengthening migrant families and enhancing the quality of their lives.

## CONCLUSIONS

This study’s findings highlighted the perspectives of both second-generation migrants and professionals on the risk factors that weaken migrant families, as well as strategies to mitigate these risks. These insights provide guidance for developing social work services that strengthen migrant families within an anti-oppressive framework. Both first- and second-generation migrants face significant challenges from the outset of migration, though the nature and intensity of these challenges may differ. Importantly, the second-generation Zimbabwean migrants in this study shed light on the intergenerational transmission of disadvantage – such as inherited challenges related to documentation, status and exclusion, compounded by barriers to accessing essential services. Moreover, while limited employment opportunities contribute to poverty irrespective of citizenship, the interplay between hypervisibility, inaudibility, and invisibility of migrants, including Zimbabwean migrants, exacerbates their vulnerability. These factors are significant risk factors in the lives of migrant families. Despite these risks, migrant families often receive support from South African community members and service providers, a key factor in strengthening families’ resilience. Support for migrant families is an ongoing process that begins during initial integration and continues throughout daily life in a receiving country.

This article also highlighted the structural sources of the vulnerability of migrant families. While all families can be affected by societal structures, Zimbabwean migrant families are particularly at risk, as state policies and service delivery practices – whether intentional or unintentional – often perpetuate marginalisation. The resultant vulnerabilities manifest in multiple ways. Firstly, some parents are incapacitated and unable to meet their children’s basic needs as a result of restricted access to employment. Secondly, there are parents and children who find themselves voiceless as they continuously face barriers and exclusion when attempting to access services. Thirdly, some families, seeking to protect themselves from discrimination, consequently decide to remain invisible, living on the margins of society and unaware of available support services. Thus, as a result of interlocking factors, these families are consistently denied access to the resources and opportunities necessary for thriving, while being denied a fair chance of becoming valued and productive members of the society within which they live – increasingly for generations. Finally, while some families do receive support, this assistance remains uneven and uncertain.

While this study concludes that it is important to build family capacities, foster resilience and promote self-reliance to mitigate identified risk factors, it also recommends that supporting Zimbabwean migrant families – and other similarly marginalised groups – requires social work to adopt more structural anti-oppressive approaches. As noted by E10, a social worker, effective support services involve: (1) amplifying the voices of families when they cannot speak for themselves, (2) advocating on their behalf when they are excluded from services, (3)

educating them about their children's rights, and (4) raising awareness of accessible services, even when documentation challenges exist.

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