
COVID-19 and its Effects on the Lives and Livelihoods of Congolese Female Asylum Seekers and Refugees in the City of Cape Town

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This paper explores the socio-economic effects of the COVID-19 pandemic on the lives and livelihoods of Congolese female asylum seekers and refugees living in Cape Town. It is framed around the assumption that this group of women exist at the intersection of multiple forms of vulnerability by virtue of their migrant status, gender, race, and social class. The study adopted a qualitative approach to data collection and analysis. One-on-one in-depth interviews were conducted with seven female asylum seekers and refugees from the Democratic Republic of Congo, using a semi-structured interview guide. Drawing on a feminist intersectional framework, the findings revealed that containment measures imposed by the South African government to curb the spread of COVID-19 significantly increased asylum-seeking and refugee women's care roles in homes, while rendering paid work more precarious. We argue that resilience strategies adopted by these women during the pandemic varied, depending on their demographic and socio-economic status, educational level, nature of employment or entrepreneurial activity and their residency status in South Africa. This article concludes that the COVID-19 pandemic has amplified existing inequalities experienced by female Congolese asylum seekers and refugees and created new ones, with long-term implications for their lives and livelihoods.

Keywords: intersectionality, gender, asylum seekers, refugees, vulnerabilities, resilience

INTRODUCTION

The COVID-19 pandemic has unleashed a global health crisis with significant implications for the lives and livelihoods of the world's poorest populations. In an effort to protect lives, the South African government's responses to the pandemic have inadvertently exacerbated existing vulnerabilities of poor black women, young people, undocumented migrants, asylum seekers, and refugees (Mukumbang et al., 2020; Zanker and Moyo, 2020). On 23 March 2020, South Africa embarked on a 21-day national lockdown, which restricted the movement of people and suspended all social and economic activities, except for essential services. It is important to note that what is considered an essential service varies from one context to another. At the onset of the pandemic in South Africa, essential services were categorized with a focus on paid work in the formal sector, such as: financial services, transport services, healthcare services, journalism and media services, emergency services, security, defence and safety services, etc. (Stevano et al., 2020: 2). Such a narrow focus excludes women's care roles in homes and ignores the fact that a vast majority of the working population in South Africa, particularly women and migrants, engage in multiple activities in the informal economy for their livelihoods (Tawodzera et al., 2015). The lockdown was extended in a phased-out manner between alert levels one and five. Strict regulations during alert levels three, four and five lockdown dealt a severe blow to the livelihoods of poor black women in South Africa because social distancing measures impacted mostly sectors with high rates of female employment, like informal trading, hairdressing and domestic work (Ramparsad, 2020). Also, the closure of schools and childcare centers during that period increased the burden of care on working mothers (Alon et al., 2020). While the South African government implemented a variety of short-term financial relief packages for businesses and unemployed citizens, vulnerable migrant populations, particularly female asylum seekers, irregular and undocumented migrants engaged in the informal economy were excluded from these initiatives, rendering them destitute (Mukumbang et al., 2020).

African female migrants in South Africa comprise of the following categories: women with permanent residency status, work visas, spousal visas, study visas; refugees, asylum seekers, and irregular and undocumented migrants (Ncube, 2017). A refugee is defined as "... someone who has been forced to flee his or her country because of persecution, war or violence" (Mbiyozo, 2018: 4). In order to be recognized as a refugee in South Africa, a person is expected to apply for asylum and demonstrate that his/her fear of persecution on the basis of ethnicity, religion, political opinion or membership of a particular social group is well founded (UNHCR, 2021). According to UNHCR (2018), refugees and asylum seekers from the Democratic Republic of Congo (DRC) are the third largest displaced people in the world and a minimum of 25,000 Congolese refugees have lived in South Africa for at least five or more consecutive years. Armed conflict in the eastern provinces of the DRC have forcibly displaced over 5.1 million people and women and children continue to bear the brunt

of human rights violations (Schockaert et al., 2020: 33). In this context, the paper explores the socio-economic effects of the COVID-19 pandemic on the lives and livelihoods of Congolese female asylum seekers and refugees living in Cape Town. It is framed around the assumption that this group of women exist at the intersection of multiple forms of vulnerability by virtue of their migrant status, gender, race, and social class. Drawing on a feminist intersectional framework, the research found that containment measures imposed by the South African government to curb the spread of COVID-19 significantly increased the women's care role in homes, while rendering paid work more precarious. The findings of the study indicate that the level of resilience demonstrated by these women during the pandemic varied, depending on their demographic and socio-economic status, educational level, nature of employment or entrepreneurial activity and their residency status in South Africa. Consequently, the COVID-19 pandemic has amplified existing inequalities experienced by female Congolese asylum seekers and refugees and created new ones. Given the above, the main aim of this paper is to examine the effects of the pandemic on the lives and livelihoods of Congolese female migrants through a feminist intersectional lens.

This paper is structured as follows: first it provides an overview of patterns of female migration to South Africa, with a focus on opportunities and challenges experienced by female asylum seekers and refugees. Second, it discusses intersectionality and its operationalization in migration studies. Third, it presents a brief description of the methodology used. Furthermore, it presents and discusses key findings of the study. Finally, the conclusion summarizes key findings in relation to understanding the experiences of female Congolese refugees and asylum seekers during the COVID-19 pandemic, through a feminist intersectional lens.

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

Although Africa is often depicted as a continent of mass migration to the northern hemisphere that is driven by civil wars, environmental disasters and underdevelopment, empirical research on trends, patterns and determinants of migration in Africa indicate that these perceptions are largely based on stereotypes (Flahaux and De Haas, 2016). Data from cross-country migration matrix and household surveys from several African countries indicate that Africa has one of the lowest rates of immigration when compared with other continents and the majority of Africans migrate within the continent (Shimeles, 2010). Contrary to popular interpretations of trends of African migration, empirical research shows that migration out of Africa is characterized by the movement of high-skilled individuals, motivated to improve their livelihoods in more advanced economies (Flahaux and De Haas, 2016). However, African migration is mainly characterized by intra-regional movements of highly-skilled workers, irregular migrants and refugees driven by worsening socio-economic and political conditions in countries of origin (Adepoju, 2002, 2006; Shimeles, 2010; Pineteh and Mulu, 2020). This signifies the importance

of research with a focus on South-South migration.

Moreover, Southern Africa has a history of migration dating back to the nineteenth century, with entrenched patterns of mobility focused on the movement of cheap male labor in the mining and agricultural industries (Crush et al., 2005). Consequently, studies on the dynamics of African migration to South Africa have been mostly gender neutral and this has led to the formulation of migration policies that are largely geared towards the experiences of men (Dodson and Crush, 2004; Palmary et al., 2010). Structural determinants like the end of apartheid and South Africa's integration into the global economy, civil wars, ethnic conflicts, natural disasters and economic crises across the African continent have created new patterns of human mobility (Landau, 2006; Pineteh, 2010). An important aspect of these changes has been an increase in the movement of African female migrants to South Africa (Ojong, 2012; Isike, 2017; Ncube, 2017; Ncube and Mkwanzani, 2020). This section of the paper provides a brief review of the literature on the dynamics of African female migration to South Africa and examines recent studies on the socio-economic effects of COVID-19 on female migrants globally.

Patterns of female migration to South Africa: Opportunities and challenges

In spite of its socio-economic challenges, South Africa remains the most popular destination for economic and forced migrants from across the African continent (Crush et al., 2005; Pineteh, 2010). Like their male counterparts, African women migrate to South Africa in pursuit of better economic opportunities and/or are fleeing political violence, community conflicts or natural disasters (Mbiyozo, 2018; Farley, 2019). Recent trends in migration research indicate an increasing recognition that women's experiences throughout the migration journey and in the host country are shaped by their gender, with positive and negative outcomes (Isike, 2016, 2017). Recent studies on female African migrants in South Africa have revealed that a significant number of women travelled to South Africa independently and were living in South Africa without spouses or partners (Farley, 2019; Ncube and Mkwanzani, 2020). This trend, which is referred to as the feminization of migration is expected to continue growing globally, as well as in the African context (Pillinger, 2007; Piper, 2008; Mbiyozo, 2018). It is therefore important to understand the experiences of migrants from a gendered perspective, particularly during times of crisis like the current COVID-19 pandemic that is wreaking havoc on vulnerable populations. The following section examines diversity in the experiences of African female migrants in South Africa.

§ African female migration to South Africa as positive and empowering

Migration can be a positive experience for African migrant women, enabling them to have access to further education, participate in the labor market as skilled professionals and contribute to their host communities and countries of origin

through remittances (Dodson et al., 2008). A study of African professional women from Cameroon, Zambia, Nigeria, Kenya, Malawi, Tanzania, Uganda and Congo found a positive relationship between migration to South Africa and an increase in socio-economic empowerment opportunities (Ojong and Muthuki, 2010). For independent African professional women who came to South Africa in pursuit of tertiary education and employment opportunities, migration has enabled experiences that have challenged gender norms based on patriarchy and religion (Ojong, 2012). Adepoju (2006) argues that migration has become a family survival strategy and has redefined the role of women in the family in positive ways. Outcomes of access to skilled employment as a result of education and entrepreneurial opportunities have positively influenced adaptation and coping strategies for African female migrants in South Africa (Ncube, 2017; Ncube and Mkwanzani, 2020). Therefore, increasing autonomy and independence amongst African migrant professional women enables them to forge new gender roles in relationships, which position them as agents of socio-cultural and economic change (Pillinger, 2007). These changes affect power relations in the family, creating contestations between traditional gender roles and the new identities that migrant women forge in their public and private lives.

In an analysis of the coping and adaptation strategies employed by African migrant women in South Africa, Ncube et al. (2019) argue that migrant women need human, physical, social, cultural, economic and political capital in order to adapt well in a host community. Positive adjustment by female African migrants in South Africa was influenced by their educational level, language aptitude and residency status (Ncube, 2017). That is, women with higher levels of education, proficiency in English language and access to pathways for legal residency status in South Africa find it easier to adapt and cope than those with little or no formal education, inability to communicate in English and residing in the country as asylum seekers, irregular or undocumented migrants (Rugunanan and Smit, 2011; Smit and Rugunanan, 2014). Asylum-seeking and refugee women from conflict regions like the DRC are more likely to find themselves as part of the latter than the former category. Most of these women have developed survival strategies; the most significant of these is their participation in the informal economy (Nkomo, 2019). However, migrant women's experiences in the informal economy are diverse. For instance, on the one hand, Ojong (2017) contends that cultural identity increases the propensity of Ghanaian female migrants in South Africa to succeed in the beauty industry as hairdressers. On the other hand, precarious work, like domestic and sex work, constitutes an important livelihood strategy for low-skilled African female asylum seekers and refugees (Richter et al., 2014; Walker and Oliveira, 2015). In this context, domestic workers from neighboring countries like Lesotho and refugee and asylum-seeking women who sell sex in South Africa's urban areas experience multiple forms of vulnerabilities such as, violence at the hands of intimate partners, employers/clients; police harassment; as well as barriers to accessing social and healthcare services (Griffin, 2011; Walker and Oliveira, 2015). This supports findings from other

contexts indicating that marginalized entrepreneurs are likely to experience extreme precarity during COVID-19 and should be targeted by responses from the state and civil society organizations (Martinez Dy and Jayawarna, 2020). Female refugees and asylum seekers make up a significant share of participants in the informal economy of South Africa's inner cities like Cape Town and Johannesburg and experience many challenges in an effort to eke out a living for themselves and their families.

§ Challenges experienced by African refugee and asylum-seeking women in South Africa

The dynamics of displacement affect asylum-seeking and refugee women in South Africa in different ways. While migration can empower these women by improving their socio-economic potential, it can reinforce traditional gender roles and expose women to a variety of new challenges in the host community (Adepoju, 2006). Refugee and asylum-seeking women in South Africa experience gender-based violence, Afrophobia and racial discrimination in their daily lives as they navigate to integrate into host communities and participate in the labor market. South Africa's labor market is characterized by gender and racial inequalities (Ramparsad, 2020: 135-136). Landau (2006) argues that while South Africa's refugee policy enables temporary integration of asylum seekers and refugees into the community, with the legal rights to work and study, refugees and asylum seekers are unable to translate these rights into socio-economic protection. Institutional failures in determining refugee status timeously and offering social protection for asylum seekers negatively affect women more as they are less likely to have access to information in comparison to men (Mbiyozo, 2018).

Violence is a widespread challenge experienced by asylum-seeking and refugee women in South Africa. This ranges from political violence to gender-based violence such as rape (Isike, 2017). Displaced Congolese women journeying to South Africa by bus, boat and trucks across multiple countries are vulnerable to exploitation through extortion, rape and sex trafficking (Amisi, 2005; Schockaert et al., 2020). Factors such as the absence of kinship support, unemployment, a hostile environment, conflict between patriarchal gender norms and women's economic empowerment, contribute to domestic violence among asylum-seeking and refugee women in South Africa (Hiralal, 2017). This is particularly relevant in circumstances where displaced women depend on their spouses for their refugee status or asylum-seeking permits. It is extremely difficult for displaced women to escape situations of domestic abuse in this context. Female refugees and asylum seekers from war-torn regions like the Eastern region of the DRC, Burundi and Somalia have reported experiencing rape, beatings, threats, arson, killings and disappearance of family members in their countries of origin and in transit (Mbiyozo, 2018:14). These women were motivated by social networks, prospects of economic opportunities and the respect of human rights to migrate to South Africa. However, they are often confronted with gendered forms of violence throughout the migration journey, as well as at the hands of their

spouses in host communities.

Furthermore, African asylum-seeking and refugee women make up a significant number of participants in low-skilled and undervalued work in South Africa (Farley, 2019). South Africa's migration policy framework does not offer any legal pathway for low-skilled employment; so many female asylum seekers and refugees find employment in the informal economy as self-employed hairdressers, tailors, petty traders, domestic workers, sex workers and seasonal farm workers (Halkias and Anast, 2009; Griffin, 2011; Richter et al., 2014; Walker and Oliveira, 2015; Ojong, 2017). In this context, women with formal qualifications are willing to take up unskilled labor in order to provide for their livelihoods and send remittances home. Ncube (2017) refers to this as a process of deskilling. Furthermore, asylum-seeking and refugee women experience more challenges than their male counterparts in finding employment and this exposes them to precarious working conditions, unstable living conditions and little or no legal protection (Farley, 2019). This disparity can be attributed to gender inequality in accessing educational and other socio-economic opportunities in migrants' country of origin, as well as gender and racialized disparities in South Africa's immigration and labor market policies (Dodson; 2001; Dodson and Crush, 2004). Importantly, Dodson (2001) contends that gender blindness in the formulation and implementation of migration policy has negative implications for migrant women's rights, as well for a socially-just and economically-viable migration policy framework for South Africa. The following section examines the relevance of intersectionality in framing inequality among Congolese female migrants.

Intersectionality and migration

Studies on the gendered experiences of African migrants in South Africa have employed a variety of theoretical and analytical frames, such as: gendered geographies of power, livelihoods and capabilities approaches (Isike, 2017; Ncube, 2017, Ncube et al., 2019; Ncube and Mkwanzani, 2020). This paper explores the lived experiences of Congolese female refugees and asylum seekers using intersectionality as an analytical framework. Intersectionality as an analytical tool emerged within feminist and anti-racist scholarship in North America in the 1980s (Cho et al., 2013: 786). It interrogated and brought to the fore multiple, complex and distinct forms of oppression experienced by black women, indigenous women and other women of color in the United States (Crenshaw, 1991). Intersectionality was particularly useful in drawing attention to the interconnections and interdependence of categories of disadvantage, such as class, race and ethnicity, which were hitherto, operationalized as separate categories (Collins, 2009). In the 2000s, academic and public debates on immigration in Europe increasingly adopted notions of intersectionality as important (Yuval-Davis, 2006; Bürkner, 2012: 181). This shift was motivated by the need to respond effectively to increasing socio-cultural diversity related to the presence of

ethnic minorities and immigration.

Although the concept of intersectionality was originally conceived in Gender Studies in the global North, migration scholars have adopted its analytical approach to empirical research on Malawian migrant nurses in the United States, skilled migrant job seekers in Australia, as well as in understanding the challenges and constraints faced by female migrants in South Africa (Hiralal, 2017; Ressia et al., 2017; Semu, 2020). An intersectional approach to migration studies has the potential to address some weaknesses in migration research. By disaggregate analytical categories, intersectionality as an analytical frame is important in revealing intra-group differences. It provides a conceptual lens that uncovers the complexity in the lived experiences of this group of female refugees and asylum seekers, during a time of crisis.

The application of intersectionality as an analytical framework has been criticized for treating categories of disadvantage such as race, gender and class as additive (different forms of oppression adding onto each other), while ignoring structural factors that create inequality (Yuval-Davis, 2007). This critique misses the essence of intersectionality by assuming that discussions on oppression amalgamate problems under one umbrella, when in fact, it is a number of intersecting problems that oppress persons in the world. Intersectionality is therefore particularly important in understanding the gendered experiences of Congolese female migrants in South Africa during COVID-19 because migrant women's issues are often glossed over to the detriment of women (or womxn) in public policy and academic debates on migration in South Africa (Dodson, 2001; Dodson and Crush, 2004). The strength of an intersectional analytical approach lies in its ability to deepen our understanding of the differentiated social positions that this group of female refugees and asylum seekers occupy and how this affected their ability to cope and adapt during the pandemic.

METHODOLOGY

The study adopted a qualitative research methodology. Data was collected with the use of in-depth one-on-one interviews. Seven participants were selected with the use of purposive and snowball sampling techniques. COVID-19 protocols such as maintaining physical distance between interviewers and interviewees, sanitizing hands and wearing masks were observed throughout the data collection process. A semi-structured interview guide with a list of 10 open-ended questions was used as a data collection tool. Female asylum seekers and refugees from the DRC were purposively selected to include married and single participants, women with and without children, women from diverse age groups and longevity in South Africa. Interviews were tape-recorded and analyzed using thematic analysis. Each interview lasted approximately 60 minutes. With regards to ethical considerations, all interviews were conducted in a safe space, away from participants' homes and places of employment. All participants signed participant information forms, which

outlined the purpose of the study and consent forms stipulating their voluntary participation in the study. Prior to each interview, participants were reminded of their right to withdraw from the interview process at any stage. Participants' names were not recorded on research instruments for purposes of anonymity. Participants experiencing specific challenges were referred to civil society organizations (CSOs) and faith-based organizations (FBOs) in Cape Town that offer support to asylum seekers and refugees.

PRESENTATION AND DISCUSSION OF FINDINGS

Cape Town is home to many Congolese asylum seekers and refugees. These include individuals with refugee status (Section 24), asylum-seeker permits (Section 22) and permanent residents (Section 27 (D)). In addition, there are Congolese in Cape Town who are awaiting appeal hearings and others waiting to be deported back to the DRC. There is no specific figure for Congolese migrants living in Cape Town because the majority of asylum seekers and refugees received asylum permits from different Refugee Reception Offices (RROs) in the country. Although most Congolese migrants in Cape Town are engaged in casual labor or are self-employed in the informal economy, there are also Congolese women who were engaged in formal employment as essential service and frontline workers during the COVID-19 pandemic. Prior to the outbreak of COVID-19, Congolese refugees and asylum seekers were confronted with issues of subsistence like shelter, food, protection from eviction and xenophobia (Rugunanan and Smit, 2011). The following section discusses findings related to how COVID-19 has affected the lives and livelihoods of female refugees and asylum seekers from the DRC through a feminist intersectional lens.

Health and psycho-social effects of COVID-19 on female Congolese refugees and asylum seekers

During COVID-19, service and healthcare workers have been particularly at risk of infection by continuing to provide care for the sick and rendering services to the public. In South Africa like elsewhere, data on COVID-19 infections among healthcare workers does not account for intersecting issues like occupation, nationality and race (Lokot and Bhatia, 2020). Taking into consideration the psychosocial effects and health risks involved in working at the front-line during the pandemic, the experiences of Congolese female essential workers were further exacerbated by increased childcare needs as a result of school closures and the absence of additional compensation for childcare and services rendered during a time of crisis.

For instance, a 41-year-old mother of two from the DRC who has been living in South Africa for 23 years and was working at a popular chain supermarket in Cape Town, described her experiences as follows:

This thing of social distancing, how to protect yourself and your kids, it was

not easy for me. I tried to protect myself and my kids from COVID because I used to go to work, since the place where I work was not closed. They said it was essential service. I used to wear my masks and gloves at work and removed all my clothes when I got home before greeting my kids. I sanitize my hands first before going to the bathroom. After having a bath, I had to wash the clothes that I was wearing at work. Then, from there I had to change again. Each and every day it used to take a lot of energy. At work, all the time I had to sanitize for not getting infected with COVID from the customers. Also, all the time, we were exchanging products that we sell by giving items to customers, all those kinds of movements. Now, I had to deal with it, it was not easy for me. I had to protect myself by wearing a mask and gloves, sanitizing and social distancing. And even my kids at home had to wear their masks as well, and each one of us had three masks to change when one is dirty. After wearing a mask for a particular period, you have to remove and wash it, you cannot rely on one mask. My kids were not going outside but I was telling them to wear a mask in the house in case of unknown [effects of the] pandemic (Participant 6, refugee).

This excerpt indicates that the participant experienced significant psycho-social effects as a result of working at a busy supermarket and caring for her children during the peak of the pandemic. This supports the contention by Foley and Piper (2020) that the outbreak of COVID-19 has exposed the front-line nature of much of the work carried out by asylum-seeking and refugee women, as well as the socio-economic and structural inequalities in the labor market that render them vulnerable to infection during pandemics. The participant's anxieties around trying to prevent infection with the virus were compounded by anxieties around simultaneously infecting her children because of the nature of her job. Although her children were not allowed to play outdoors, they still wore masks in order to prevent infection from their mother. This must have been very emotionally taxing on them. The term 'emotional geographies of COVID' has been used to describe multiple factors that intersect to render vulnerable women more anxious about getting infected with COVID-19 as a result of their socio-economic circumstances (Azeez et al., 2021). Fears about getting infected at work and infecting one's family also had a positive effect as the participant was diligent in observing COVID-19 protocols. However, the psycho-social effects of COVID-19 experienced by the participant were exacerbated by her increased burden of care at home as a mother and her socio-economic status, as depicted by the front-line nature of her work. These factors intersect, thereby facilitating emotional geographies of COVID that are often overlooked among Congolese asylum-seeking and refugee women.

Congolese refugees and asylum seekers in the healthcare sector were particularly vulnerable during COVID-19 by virtue of their precarious working conditions while caring for the sick. A 48-year-old nurse who has been living in

South Africa for the last 20 years described her experience of getting infected with COVID-19 as follows:

I am a nurse but I can't find a permanent job at the hospital or clinic because of my refugee papers, so I work for an agency that finds work for me at different hospitals. I dealt with a lot of people at the hospitals; that is how I got infected. Due to my age, I had all the signs of COVID-19, like the fever, body tiredness, loss of smell and appetite. I was really sick, but they told me to self-isolate because that time the hospitals were full and there was a shortage of ventilator machines. How can I self-isolate when I live in a small flat? What pains me the most is that I infected my 2 children. I thank God because their symptoms were not too serious. My husband died in 2005, so I am just grateful that I can still work and support my children (Participant 5, refugee).

This excerpt captures the health and psycho-social effects of COVID-19 on the participant. The precarious nature of her work in the healthcare sector intersects with her refugee status to render her vulnerable to exploitation by labor brokers in the healthcare industry. Nursing agencies act as labor brokers between employees and employers in the sector, leading to the casualization of skilled labor in a sector that is considered as an essential service during COVID-19 (Van Eck, 2010; Olojede and Rispe, 2015; Stevano et al., 2020: 2). In this context, the participant was vulnerable to exploitation as employers do not have any legal obligation and offered no social protection to her during her illness. This reveals how intersections of refugee status, race and gender collide in South Africa's healthcare sector, exacerbating the vulnerabilities experienced by Congolese female refugees. To put this into context, since 1994 globalization has created opportunities for white nurses in South Africa to emigrate to the UK, Australia or the US as a form of upward social mobility, while leading to the casualization of refugee and asylum-seeking women's roles in the sector through the use of labor brokers (Hull, 2010; Olojede and Rispe, 2015).

The excerpt above also raises important questions around the implementation of non-pharmaceutical measures such as self-isolation as an effective strategy to prevent the spread of COVID-19 among asylum seekers and refugees. Female Congolese asylum seekers and refugees live in cramped spaces, with several families sharing the same apartment in the inner-city. This is an adaptation strategy to cope with the rising cost of rentals in South Africa's urban areas (Amisi, 2005; Rugunanan and Smit, 2011). This excerpt reveals the contradiction of being an essential worker and being engaged in labor that is undervalued, as depicted by low wages, that are not sufficient to provide for decent housing in the city of Cape Town. Therefore, the findings indicate that gender, age, refugee status, healthcare role, casual working conditions and cramped living conditions intersect to render female Congolese asylum seekers in the health- and social care sectors vulnerable in unique ways during the COVID-19 pandemic.

Socio-economic effects of COVID-19 on female Congolese asylum seekers and refugees

Several authors have argued that Congolese asylum seekers and refugees experience a myriad of challenges in an effort to eke out a living in South Africa (Amisi, 2005; Smit and Rugunan, 2014; Schockaert et al., 2020). As a result of protracted asylum processes, lack of aptitude in the English language and the necessity to earn a living while taking care of children, female Congolese asylum seekers often set up survivalist businesses. These include both legal and illegal economic activities, such as hairdressing, sewing clothes, petty trading and sex work (Mitchell, 2004). The outbreak of COVID-19 has exposed fault-lines in the survivalist nature of entrepreneurship amongst female Congolese asylum seekers and refugees. Factors such as lack of start-up capital, the burden of childcare and low levels of education and training have limited their ventures into entrepreneurship to survivalist businesses that could not withstand the socio-economic challenges imposed by COVID-19.

For instance, a 28-year-old self-employed asylum seeker described the impact of COVID-19 on her source of livelihood as follows:

I am a beauty therapist and I sell my homemade organic products. Lockdown affected my business a lot because the sales became very low. People who were buying from me were working on a budget due to COVID-19. Also, the courier company that was assisting to send my products to the customers in Johannesburg, was closed; even my products were closed inside their stores for many days (Participant 7, asylum seeker).

Prior to the outbreak of COVID-19, the beauty industry in general and hairdressing in particular were considered as lucrative sectors for the establishment of survivalist businesses amongst female refugees and asylum seekers from the DRC. Ojong (2017) posits that with the fall of apartheid, hair has become an important indicator of modernity among black South African women. Congolese refugees and asylum seekers are major role players in this sector as it offers them flexibility to earn an income, while caring for their children and engaging in other clandestine economic activities like sex work (Walker and Oliveira, 2015). However, the beauty industry is one of the sectors of the South African economy that was hardest hit by COVID-19 regulations around social distancing (Ramparsad, 2020). This is a sector of migrant entrepreneurship that has traditionally provided a source livelihood to a large share of female refugees and asylum seekers from the DRC. Unlike spaza shops, beauty salons were shut down and the purchase of luxury beauty items was no longer a priority, as households battled to cope with the economic effects of COVID-19.

Furthermore, two self-employed participants involved in the sale of indigenous foodstuff imported from the DRC to the Congolese community in Cape Town experienced disruptions to their survivalist businesses during lockdown. Both participants were married and they became completely dependent on their husbands for survival. They related their experiences thus:

I was running a small business before the lockdown; now I am unable to do it because all borders are closed. We are trying to cut down our cost of living. We have to manage the little food we can afford for the family. I would be very happy if the government assisted everybody with low income in this chaos, but personally I didn't receive anything from them, things are tough (Participant 1, refugee).

I was affected by the lockdown because I could not buy the food from outside the country since the borders are closed. COVID-19 has affected my income because I had to stop selling food and there is no income. I am not getting any support from the government except from that child grant support which I receive from the South African government (Participant 2, permanent resident).

These participants relied on the cross-border movement of goods and people to run their businesses successfully and provide for the needs of their families such as paying for rent, food and healthcare. The informal economy in Southern Africa is dominated by transnational networks of small businesses engaged in economic exchanges (Nshimbi and Moyo, 2017). Within this network of exporters, importers and truck drivers, Congolese female asylum seekers and refugees are among the most vulnerable groups because they are involved in petty trading. With limited capital, they can purchase only small quantities of indigenous foodstuff for retail. COVID-19 disrupted the flow of goods through informal networks, thereby disrupting their businesses, with negative implications for their livelihoods. The effects of these disruptions on their livelihoods compelled the participants to make compromises in different areas of their lives to make ends meet.

Although both women experienced economic distress as a result of loss of livelihood, by virtue of her permanent residency status, Participant 2 received the child support grant from the South African Department of Social Development. This safety net was important in subsidizing her livelihood. Without any social protection, Participant 1, who is a refugee, reported that she made adjustments to the quality and quantity of food in her household in response to the limited resources at her disposal. Although both women experienced disruptions to their petty trading businesses, Participant 1's compromise bears evidence of the added vulnerability of the lack of a safety net. This corresponds with findings from a recent study that highlights food security among black African asylum seekers and refugees as a serious problem in South Africa (Napier et al., 2018). In our study, gender, refugee status, social class and race intersected to create conditions of vulnerability that negatively impacted the nutritional status of Participant 1's family during the pandemic. It is evident that food insecurity could have negative implications for the health status of her family during and after the pandemic.

Coping and adaptation strategies adopted by female Congolese asylum seekers and refugees during the COVID-19 pandemic

Apart from the health, psychological and economic constraints that were exacerbated by COVID-19 protocols and lockdown regulations, anxieties related to the possibility of getting infected with COVID-19 was a common theme that emerged from findings of this study. This section discusses how intersections of migrant status, social class, gender, ethnicity, and religion enabled this group of women to survive during the lockdown. All participants were concerned about the risk of getting infected with COVID-19 and demonstrated sufficient knowledge of COVID-19 prevention protocols. How they dealt with actually getting infected with COVID-19, revealed intersections of refugee status, gender, ethnicity and religion. Previous research highlighting inequities in access to healthcare indicates that there are political, legal and economic determinants of vulnerabilities experienced by asylum-seeking and refugee women in South Africa (Freedman et al., 2020). However, a focus on structural factors that drive inequalities in access to healthcare fails to take into consideration the agency of Congolese asylum seekers and refugees in choosing alternative forms of treatment over hospitalization, based on intersections of refugee status, ethnicity, gender and religion.

Participant 6 described her anxieties with accessing healthcare during the pandemic as follows:

There was a time when I lost my appetite and smell and I was very weak. I came to notice that I had COVID-19. I thought if I go to the clinic or the hospital, I will die and leave my kids. I used to hear that when people go to hospital, they were not coming back home again. That fear was in me by refusing to die. For me to protect my kids, I used to prepare for them ginger, lemon, and garlic. I mixed them, and cooked them by boiling them. Also, I can give it to my kids to drink or we can use its steam by covering ourselves with a blanket, and when you sweat you can definitely feel all right (Participant 6, refugee).

This participant demonstrated a high level of awareness about the transmission and prevention of COVID-19. However, this knowledge fueled her anxieties of potentially dying from the infection and leaving her children motherless. Consequently, she did not test when she suspected that she had contracted the virus and rather resorted to using traditional home remedies that have been used by Congolese women for decades to treat common ailments. This demonstrates intersections of motherhood and ethnicity as important factors in coping with the health challenges unleashed by COVID-19.

Another participant, who was able to confirm through a test that she was in fact infected with COVID-19, also adopted the same cultural practice of steaming to ameliorate symptoms associated with the virus. In response to a question about how she recovered, she elaborated:

How we recovered? [Laughs]. In Congo as a mother, you have to know how to use [natural remedies] and treat certain diseases by using natural herbs. For us to get cured, my mother prepared or boiled particular herbs. Then, one at the time, we had to cover ourselves with the blanket; then the vapor or steam from the cooked herbs comes up to your nose and eyes while covered with the blanket. After a certain period of going through this specific experience, we all recovered from COVID-19 and here I am as a living testimony (Participant 4, asylum seeker).

The excerpt above indicates that intersections of motherhood and ethnicity are important in understanding health-seeking behaviors among asylum-seeking and refugee women from the DRC. While previous research has argued that there are structural inequalities in access to healthcare, it is also important to highlight gendered and cultural factors that have shaped this group of women's health-seeking behaviour during the COVID-19 pandemic in South Africa.

Findings from this study also revealed that civil society organizations with a focus on refugees, social networks and religion were important in helping this group of female asylum-seeking and refugee women cope during the COVID-19 pandemic. These experiences are captured in the following quotes:

I got support from an NGO called Adonis Mossati and they supported me for a period of three months. They gave me food and R700 (Participant 7, asylum seeker).

Sometimes we used to share things that we had. For example, if you see that a particular person does not have [essentials], we used to assist her. On my side, when I was going to Pick 'n Pay to work, on my way back, I used to buy bread and veggies to give to my neighbors who were struggling because I knew they were not going to work because of the pandemic (Participant 6, refugee).

Oh yes, I was praying and God was listening to me in that difficult time. Praying was making my mind relax and comfortable because I knew that God was on my side. Churches were closed but I knew if I communicate with God through prayer, he will listen to me (Participant 4, asylum seeker).

The excerpts above highlight the fact that non-governmental organizations (NGOs) play an important role in providing social protection to vulnerable refugees and asylum seekers in Cape Town, particularly in times of crisis. Family and friendship ties were important in providing social support during the COVID-19 pandemic. Despite her low wages, Participant 6 provided basic food items to other women within her social network who were destitute as a result of the pandemic. The findings of this study corroborate evidence from prior research that there is a strong sense of

solidarity amongst Congolese migrants in South Africa (Amisi, 2005; Rugunanan and Smit, 2011). Social networks of friends, family, religious groups, ethnic groups, and NGOs provided social protection for vulnerable female Congolese refugees and asylum seekers during the first three months of lockdown. Religion was also a commonly-utilized source of coping among this group of women. Participant 4 described how she placed her faith in God as a way of dealing with the socio-economic and psychological challenges that come with living as an unemployed black woman and asylum seeker during a pandemic.

Although there are similarities in the experiences of vulnerability and resilience among this group of Congolese asylum seekers and refugees, it is important to note that these experiences are not universal. Two female Congolese asylum seekers in their twenties who were both single and had no children described their experiences of living and working in Cape Town during the pandemic, as follows:

I am lucky that I was able to work from home but we had salary cuts because there was not enough demand in the industry and some investors pulled out of the market. I tried to stay motivated by up-skilling myself with online learning but it was very challenging financially. I hope things will get better soon (Participant 3, asylum seeker).

In the period of lockdown, I developed other skills, for instance, learning how to sell online rather than meeting clients face-to-face. For real, I tried to improvise that way (Participant 7, asylum seeker).

In spite of the economic and psycho-social effects of living during a pandemic, Participant 3's experiences as an educated and skilled professional in the IT industry meant that she was able to work from the safety of her home with minimal risk of infection. She was able to continue earning a living while up-skilling herself through online learning. Participant 7 also adapted by using online platforms such as social media to run her business during the pandemic. In this instance, intersections of Participant 3's professional identity as a Junior Software Developer, her age, gendered identity as a single woman, unencumbered by the burden of childcare and her socio-economic status which allowed her to work from home during the pandemic, were important factors that explain her resilience.

CONCLUSION AND RECOMMENDATIONS

While there has been considerable interest in the feminization of migration in scholarly literature in the field of migration and development, there is still limited application of intersectionality in the analysis of social inequalities among female asylum seekers and refugees in the South African context (Palmary et al., 2010; Isike, 2017; Mbiyozo, 2018; Farley, 2019). Consequently, research on gender and migration often presents experiences of vulnerability or resilience amongst asylum-seeking and refugee women as homogenous. The aim of this paper was to explore the impact of COVID-19 on the lives and livelihoods of female Congolese asylum seekers and refugees through an intersectional framework. The findings indicate that complex intersections of gender, refugee status, social class, ethnicity and religion interact to produce different experiences of vulnerability and resilience within this small group of women during the COVID-19 pandemic.

Congolese female refugees and asylum seekers in South Africa often reside in urban areas and have developed survivalist approaches to entrepreneurship in order to provide for their needs. By exploring the intersections between gender and socio-economic status during COVID-19, the study found that refugee and asylum-seeking women who were engaged in survivalist businesses were more vulnerable to extreme poverty and malnutrition, irrespective of their marital status, when compared to women who were employed in the formal economy. The outbreak of the COVID-19 pandemic has exposed fault-lines in the survivalist nature of entrepreneurship amongst female Congolese asylum seekers and refugees.

In addition, social protection from NGOs, churches, social networks and the South African Department of Social Development in the form of the child support grant provided a safety net for some Congolese women, depending on their refugee status, gender and social class. With regards to access to healthcare as a coping strategy, the data revealed that an overwhelming focus on structural factors that drive inequalities in access to healthcare for female African asylum seekers and refugees in South Africa fails to take into consideration their agency in choosing alternative forms of treatment based on intersections of ethnicity, gender and religion.

In terms of recommendations, it is important that the Department of Health prioritizes refugees and asylum seekers in its efforts to effectively combat the COVID-19 pandemic in South Africa. This is because intersections of gender, social class, religion, refugee status and ethnicity render refugees and asylum seekers vulnerable to infection and the findings of this study indicate that they are less likely to seek medical attention in case of infection. Failure by the state to target this vulnerable group in its COVID-19 vaccination information campaigns now, will undermine government efforts later to effectively combat the pandemic by implementing an inclusive and socially-just vaccination plan for all.

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