

Winter School Day 2 - research pitches

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SPEAKERS

Bothwell Vumai, Becky Walker, Stanley Muravhastha, Tiffah Zauya, Speaker 3, Speaker 4, Jo Vearey, Lorena Nunez, Speaker 1, Lydia Moyo, Speaker 2, Blessing Mukuruva



Becky Walker 00:00

Okay, guys, are we ready to get going? So this afternoon, we're going to be hearing from early career perspectives and the PhD projects. Welcome to Lorena, who is back and is going to be our respondents for this afternoon. So we'll we'll see how it goes. We may have two of the presentations and then have a chance for input and discussion, and then the other three, or we'll go through all of them, depending on sort of how we go. We're going to be quite strict with time. So you have 15 minutes. I will give you a heads up when 10 minutes is gone, and then when the next three minutes have gone. Okay, yeah, so we're starting with blessing, and over to you.



Blessing Mukuruva 00:52

Thank you so much. Good afternoon, everybody. I'm blessing, and the project that I'm going to be presenting on is on cross border mobility and pandemic preparedness, a case study of cross border truck drivers at the Zimbabwe, South Africa border. And my supervisors are prof Jo and Prof Julia. So the study came from the fact that pandemics come and pandemics go, and probably okay, and probably these pandemics are going to come back again. So there's needy for us to be prepared or to for us to be aware of the things that might be coming in future. So when pandemics come, usually they trigger public health responses. And these public health responses are intended to protect life or to minimize the spread of the infections or to minimize possible deaths that can come from the the pandemic. And this is what happened during the COVID 19 pandemic when it came many countries, including Zimbabwe and South Africa, responded by introducing state of emergencies, which meant that a lot of restrictions were put in terms of the freedoms of the people. And amongst the things that were curtailed during this period was the freedom to move from one place to another, be it locally in South Africa, where

people were not allowed to move from one province to another or from their area to the next area. And it also led to the closure of many ports of entry, be the airports borders. And the intention was really to stop the movement of the disease from one place to another, but during this same time, the like, my apologies that the the poster is quite cramped, so you might not see Some of the things, but it uses the biopolitics framework trying to understand the responses that were put in place by different or various governments. And in this context, would take it to understand that the biopolitics had good or the intention was to protect public life, was to protect the lives of people, was to minimize the spread of this disease. But for it to work, it had two conflicting logics where some people were allowed to move and some people were not allowed to move. For an example, when the COVID came, everyone else was told we must stay at home to protect ourselves. We must close our borders. We must close all our port of entries. But then to sustain life, there were some people who were supposed to be moving or who are supposed to be working. And this comes into this is where the truck drivers, or the cross border truck drivers, are invited into the study, as they were amongst the few people that were allowed to move during this COVID. They were given a title, like they were designated as essential workers. And it is from this perspective that this study seeks now to understand what really came with this designation of being called Essential workers. How did it impact or how did it inform their lived experiences as they move from one space to another, from one epidemiological origin to another we can agree maybe that during the pandemic, it is only those people who are moving in these spaces who can attest that all the public health responses that were putting put in place were really working or were not working, because These are the people who were in the space. So like I said earlier on, this study uses a theoretical formula which combines the biopolitics as well as the necropolitics. So my understanding of how I wanted to put it across is like a spectrum where on one end we have biopolitics. Which is seeking to sustain, to maintain or to protect life. And on the other end, we had unintended consequences of the responses that were put in place with the idea of trying to protect life or with the idea of sustaining life, but they might be in a inadvertently end up exposing certain populations to a nickel exposure to disease or to for them to contract disease, in this case, focusing on the cross border truck drivers as they were moving or as the public health was trying really to maintain or protect life. How were these people exposed to disease? How were these people were exposed to near death experiences? So this is how this, how I view these theories at a spectrum, and trying to understand that the pressing, the initial intention was to protect life, but sometimes because of maybe limited resources or different ways of of because of context, they might have exposed certain populations to different near death or death experiences. So the main question this study is trying to ask or to understand is, how did the interplay of between biopolitical pandemic responses and mobility governance frameworks at the South Africa's noble border escape during COVID 19 shape the living experiences of the cross border truck drivers. So to try to understand this now, I sure today, now, since 2019 until now, it seems to be quite a long time now that some of the things might have been lost in time. In this study, I try to understand the pandemic period as from 2019 to 2022 so this is the period when the COVID happened, and you can attest this time is long gone. So in the methodology that I tried to use, or try to find out, or to explore these experiences of the cross border truck drivers, I tried to introduce, or to use some retrospective elements. In this case, these retrospective elements, they try to their main responsibility or duty is to try to solicit, elicit some memories, or to make sure that it at least makes the drivers to remember some of their experiences and as they experience them during the the the pandemic. So the study in itself used in depth interviews and as well as key informant interviews, as well as some retrospective kind of observations, where I went on to look at the routines of these drivers, what they do every day, and then ask them what was different during COVID And what was different before COVID And what is now. And those questions or those observations that would make would make them remember, or would make them, give us, give me at least an

experience of what was really happening during that those times. And we with the interviews, I tried to use memory eliciting devices such as photos such as newspaper articles and some videos from the COVID period. What does this remember? Remind you, like most people who in South Africa would remember when the President started addressing people, they said, fellow South Africans, and what memories does it bring to the people? Does it bring to the truck drivers and all what was happening. And I think in one of the journeys that I had with the truck drivers, moment you saw the police, they stopped them, and you see the police coming into the truck. You know what the police do? They want to try and check, they want to get the the license and etc. And the truck driver was asking now if the police was still doing the same thing during the COVID, still taking my license, still getting in the truck, were they not also afraid of the disease? Or was it meant that the disease is only coming from the drivers, so it is only for this information to come it was because as we were traveling, or as we were moving in that space, we saw the police, and it became a familiar experience. And from that familiar experience, it become a contact point for me to ask, what was your experience, and how is it now, and how different is it from that space? And as we move on this study, I think, since it's a qualitative study and stuff I'm going to use, I'm going to use thematic content analysis, and I'm going to be assisted



Blessing Mukuruva 09:45

using the Atlas TI. So I'm not going to dwell much on that, because it's a field that is yet to come. But as I was in the field, there are quite a number of ethical experiences that I had proposed that I'm going to use during the study, and amongst those that I've encountered those I experienced that to have a bit of challenge was to access these drivers during their work time. Sometimes it felt intrusive getting to a truck driver who is having their own lunch in their own space, in a space which I'm not paying for their time. In most cases, they are rushing because they have targets to go and cross to Zim. So in most cases, others would come to ask you, what am I going to benefit from this? Not because these people really need money, but because sometimes I'm being intrusive in their own space and time, and sometimes they would feel I'm working for someone, or sometimes they feel that I must be in really taking lunch in this space, and the other ethical issue that I think it was still an issue was coming from the idea that when you get to these people, after working with the project, James project, at the same time, where at least we were having a little bit of remuneration, not reimbursement for their time and space, and Now coming back as blessing, doing my own project, but now this time around, I'm telling them, Hey, I don't have water, I don't have a 50 Rand. And at some point, you know that dilemma with the people, but you are the same person. This is coming from the context that some of the key informants that I interviewed who were also used during the gems project then. So those are some of the highlights that I think I would highlight on that. Then I've managed to go through about 30 interviews and still have some outstanding, five key informants interviews, and was some some observation visas to try and see what was happening. But before I conclude, I would want to share at least a few of the observations that I've really observed from them, from the field. That the challenge was the initially I intended to have a this study across the border, like moving both to Zimbabwe and South Africa, but it was quite difficult for me now to execute it on the ground, so I had to suggest and propose some changes in that. And then in this study, there are also some of the issues which are emerging already. As I'm I'm collecting data and trying to see what, what are the people talking about, and most of the things that some of them, these people are talking the participants are talking about the inherent discord which exists in the coordination of mobility health or mobility governance in southern Africa, which has been also been talked about by other scholars like Jo Mapple and stuff they've already but this is so much coming out, if, if you notice, like a country

like Botswana, which has been like that, it's so difficult for these people who are moving these spaces to get health in the DRC. So this is some of the things that is coming out. And also, you look at the the idea of biopolitics and necropolitics, where sometimes there was in adequate application of this pandemic responses, and because of these inadequate, because of me that, because of lack of resources or support, bodies became the site of regulations the bodies of these truck drivers in in themselves, and some of it it, some of the themes that are coming out has to do with occupational distress, which is coming with this. Drivers being isolated from families, working for long hours, waiting at the borders and sometimes bereavement themselves, bereavement itself, as COVID was happening. They had also their relatives dying, but they had no stop. They'll be driving because they are needed to sustain or to promote life. I think I can end here. Thank you so much.

B

Becky Walker 13:52

Thanks so much. That was perfectly in time, but you have two minutes left. If you've got questions, please make sure you write them down, or just make sure you've got them ready, we will have the next presentation, and then We'll perhaps do questions. Then, hey, over to Lydia. You

L

Lydia Moyo 14:28

Good afternoon, everyone.

L

Lydia Moyo 14:39

My name is Lydia. I'm a postdoc at a CMS, so I'm going to present a paper, but it's not yet a paper. It's still an idea from our gems project. So before I could tell you about the this idea that I. Have, I want to share a brief story, but it's related to the paper. So during my third year, that is two years back of my PhD, I we were asked to do a photo voice, which we did again during the was last week or this week? Last week? Yes. So he did a similar exercise. So I looked at migrant women and how they access health services. We we use the same pictures, and then you just post the pictures and then ask other people what the pictures meant for me, the pictures that I took, it was related to how we access the healthcare services and the restrictions around it, to say, if you are a migrant woman, they don't even this healthcare service providers, they don't even care about what's the problem with you. Even if you go there in full labor, they will be asking you about your status in the country. What are you using? Is it a passport where you are in full labor? What do you need is for them to take care of you? So that is what I looked at. And then I also took part in the in one of our PhD students project. She was also looking at how how migrant women access maternal health care, and then, when she finalized everything, there were some I could term them, shocking findings to find that some of the decisions that these migrants take which pertains their life, it's to do with health care access, because somebody will tell you, I wanted to have two kids, but the way I was treated in the hospital, I'm never going there back again. This is my only child, the treatment that I received. And I can resonate to some extent to say, as a migrant woman who have used the public hospitals, I really understand what they are talking about, because some of these fronts, they're called front watch. Yes, they are so difficult to deal with, even on simple issues. So some of these decisions that these migrant women take about their lives, it's not to do with money, it's not to

do with where they are, it's not to do with anything, but it's to do with the treatment that they received from these frontline services. Okay, going to the paper that I'm working on, I've got two topics. I'll just read them out and what I've prepared the first one, but I'm still trying to refine which one would I work with, because this is a paper that I'm preparing to present at the webinar that prof Nunez is organizing, so I'm still, I'm still trying to make it work. The first one is reproductive reproductive rights in limbo and exploration of migrant women access to health care and reproductive services in Mozambique, South Africa. And then the other one is health care as a human right, the reproductive rights imperatives. It explores the intrinsic relationship between healthcare, human rights and reproductive rights. And this topic, it emphasized that healthcare is a fundamental human right. Every individual is entitled to access quality healthcare regardless of their race, age, income and social statuses. I just to refer back to last week I was when we were in the Senate room. I forgot his name when he was presenting on health he did mention quite a number of things which caught my eye about the Constitution, that doing just the court things, but refer to the data when it comes to these issues of health care. When he said the Constitution guarantees health rights for all, including migrants and all those things, I'm sure those were they in the Senate room. They had what he said, and then reproductive rights and essential component of healthcare. This includes maybe family planning, maternal health care, abortion services, which are critical for individuals to make informed choices about their bodies, their health and their well being, and then the key issues that I'm looking forward to explore access to reproductive health services, looking at availability, affordability, accessibility, including these that I've mentioned, your family planning and others. And then maybe I'll also look at barriers to reproductive health, looking at your socio economic, cultural, systematic barriers that limit access to reproductive health care, including maybe issues such as poverty, stigma, where these people come from, and discriminatory laws. Five minutes, okay, let me try to wrap it up, and then my research questions. I'll be looking at the primary challenges of which just to. I refer to the data that we already have that we were collecting. We found out that many women couldn't access the basic health care that they are denied access to these hospitals. So talking about reproductive health care, it becomes another issue if you cannot access the actual health the first one for you to go further to say, I'm looking for, I'm looking for maybe family planning, while at least you couldn't even get inside the hospital. It's, it's kind of far fetched. Then those who had access to healthcare, majority of them experienced inhumane treatment from the nurses, and most of them chose not to report because of fear of further bad treatment, bad treatment, and because of their status in the country. While the other internal migrants reported similar experiences, they were also able these internal migrants, I mean, people from South Africa were who were also found in Musina, they were able to report or to stand their ground against these abusivenesses, if I may say, we also found that without proper documentation, these women continue to suffer, and these are not only affected them, but it affect also their decisions to reproductive rights. Some of these women, they've acquired, some the ones that we interviewed, a bit of some primary education and some secondary which further makes them vulnerable. Majority of them could not make informed decision with regarding their reproductive right. This limited access to health is further alienating them and rendering them more vulnerable. Yeah, I think just to add a few things before my time could end. Okay, the other question that I'm going to look at is, how does these are sub questions from the main question, how does limited access to health care impact the reproductive health and rights of these migrant women in Musina? What I put down was we cannot speak about reproductive rights if they cannot access basic health care, because we found out that due to these hindrances, there were unplanned pregnancies which were reported due to lack of health care facilities, further exposure to Maybe chronic diseases such as HIV and others. The other sub questions that I'm going to look at as I develop this paper, what reproductive health services are available for migrant women in Musina, and how accessible are they? We found that some

women reported that access to health care was very limited, which in turn limit their choices, even if there were some NGOs which were very helpful in giving referrals to these migrant women to healthcare, but due to ongoing funding cuts and everything this also affected them. It we also found that it was a very cumbersome process for these NGO health providers, because it was reported that some nurses, or whoever in this healthcare services providers will turn away these people, even if they've got referral letters. We even had the people that were presenting last week on health, they highlighted the same issues. Even Tifa highlighted the same issues. They were also the facing the same issues to say, well, they have to accompany them. How many people are going are you going to accompany? It seems like you do not have the job, even a service, provided you will be having a full time job now to accompany people to the hospitals. Also the issue of affordability. How many of these migrants are able to purchase whatever that they want in the pharmacies or private doctors, only a few of them, given their very precarious jobs that they are doing, I think I'll end here. Thank you so much. You

L

Lorena Nunez 24:07

okay, thank you for this exciting project. So for blessing. Yes, I can see you have already interviewed Zimbabwean, South African, Malawian, South African, Malawian with blessing. Yes, yes. So the the interviews are conducted. Sorry, you have conducted the interviews already. Yes, yes, okay, that's fine, yeah, I thought you were preparing to No. I think it's an excellent, interesting paper. I was just thinking, obviously, these are men, right? Men, truck drivers and to think about issues of masculinity and truck. Drivers culture, which is a quite Yeah, distinct with distinguishable set of ways in which men navigate this, this, this profession, or this, this activity. I blessing I can. I need to see you otherwise. So otherwise I feel like you can. Yeah, yeah, thank you. Thank you. Thank

L

Lorena Nunez 25:46

you. Thank you so so in that sense, I would, I would also reflect on that main masculinity truck drivers culture, but also this, this label, category of essential workers. How do they have they? Do they feel? How that how they they they kind of inhabit this category of, do they perceive themselves as essential workers throughout or COVID put that label on them and how, in terms of identity, how they construct themselves an identity, or felt themselves in a particular way in the context of this pandemic, right questions that I was asking myself as you were going through, because they don't stop being essential workers post pandemic. It's just that during pandemic, they were granted certain rights or certain abilities to move around and also visa v you know, on the one hand, you have those legally decide designated essential workers in the context of pandemic, Visa V the the informal workers which for which, for whom work was essential, but didn't Have that entitlement, and they didn't have any protection. So I will play a little bit with the essentiality of what the label of essential right in kind of like at the same time denying that work is essential for people, particularly those who are self sustained in the informal sector. So that paradox, then, then necropolitics. You didn't explain very well. You mentioned it, but I like to know more about it. What else there was something else, I think that pretty much is Yeah, yeah, that that's my my comments to you. Thank you. You can go Yeah, and then more comments and before we move, yeah, yeah. I think genius, yeah.

L

Lorena Nunez 28:34

In relation to my areas of questions, right the mask, the issue of masculinity, the issue of truck truck drivers culture, the issue of being essential workers as a label that comes into place during pandemic, but they are essential workers throughout necropolitics And no on the essential worker category, Visa V those who who were not considered to be, who, for who, you know, who were were less part of the official response. Were actually left aside, marginalized. Oh, thank



Blessing Mukuruva 29:13

you so much. I'm sure, moving forward, your feedback is going to be useful, and some of these categories or or how you framing it, are already coming out as I'm collecting the data, and fortunately, now have helped me a lot to try out to meaningfully report back to what really was that, especially on the issue of essential work, when if you find out most of them as they're responding to some of the questions they thought it was just any temporal title that were given without necessarily being essential in any case, because most of them, they report that during this time, this is when they even lost their salaries were cut half. And they didn't get really enough support, like in terms of that, distinguish that they were essential, but they were out on their own fighting. This is how they they feel. So I think it is very important to query and quiz this term essential work, and especially bringing other informal essential workers that were not really protected by law, and really versus V those who were assumed to be protected by by the law. Then coming to the issue of necropolitics, how I wanted to frame it, how I want to put it across is, and this is where, where certain governmentality rules expose certain populations to death or near death experiences or exposure. That is the concept not really taking it far, to the ndembe kind of necropolitics, but this is where I'm coming from, where I think some rules or some regulations which were intended for the good of public health, but then unintentionally, inadvertently exposed these so called Essential workers maybe to the disease which would eventually expose them to death.



31:27

Yeah, thank you.



Lorena Nunez 31:36

Livia, I'm super happy with your with your proposed papers, and I think maybe at this point, since you have collected all that information, and at the same time, you have an idea of what are the bodies of regulations that are not observed, transgressed or not respected, not attended, Maybe a sort of a counterpoint between what are the rights that are there and that are not observed, and the practices and almost like situations in which women find themselves navigating these barriers. And what I think is important is not just to show that rights are not respected, but the cost on on health itself, of these barriers and these forms of exclusion, how does it impact, you know, In terms of prevention? On the one hand, you know from a perspective that actually you end up investing more in provided care that comes late and comes a Yeah, that does not prevent or protect health. That's one line and another one will be what women do, and where is the agency of women in term in navigating these barriers? So I will put a frame on terms of, you know, the policies, regulations, just to then delve into your kind of almost cases. And it's after each case, you kind of take issues there that go along rides

go along the costs of health care, when there's so many barriers that people don't get what they need and what women do to to still keep themselves a Yeah. I mean, yeah. How do they survive? And what are the the the negotiations, their adaptations, the agency of women. But I would focus more on on your empirical cases to show that. And the other thing that I wanted to ask you, what is it that makes a border city different from other places? What can you can you talk about particularities of this place as a border town in and that differentiated, I mean the whole species that people that we have seen in South Africa, that people cross just to get or come just to get care, and then they go back. Is that the case in in Musina, are people coming to be careful a on in South Africa, and if so, is it, you know What? What? What a body of regulations does it in transgress? But on the other hand, what other bodies of regulation can one appeal to? If you look. Looking at protection of life, independently of borders and frontiers, the life human life, is more important. So bodies of legislation that give value to life and protecting life beyond the fact that you may have not acquired the rights to cross or that you belong to another country. Is it fine? Or am I complicating things more?

 Lydia Moyo 35:34

Thank you for that, Prof. Since it's still a work in progress, I will try to incorporate everything that we have said to see how far it takes me, because this is actually a very new, new topic that I'm trying to work on.

 Becky Walker 35:55

Okay, thanks, Lorna, so we have three more presentations. Are we both well? Are you ready to get started? Is your presentation loaded?

 36:08

Yes, yeah. He's at the back for some reason.

 Becky Walker 36:14

So we've got Bothwell, followed by Tola, followed by Stanley. I

 36:32

Where's once More on The screen? I

 Bothwell Vumai 37:51

Oh, good afternoon, everyone. My name is Boto vumay. I'm a doctoral candidate at African center for migration society, and today I'm going to be presenting my research project entitled cross border sex work on the urban margins the politics of prep access in gauteng region. And my supervisors are prof Jo Veere and Dr obvious katsaura So just try to establish a link with

yesterday's presentations. You remember we learned about how interdisciplinarity forms part of an important component of research, especially within the migration and health field. And because of that, I had to share a little bit of my background, my research background. So from my undergrad, I'm coming I'm somebody who is coming from a political and administrative studies background, and I was so much into issues that revolve around public policy and governance. And when I joined the ACM as an honor student, my research project was on, it was a policy analysis on the South African National Strategic Plan, on TB, HIV and AIDS, on how it was engaging with migration and sex work. Then on my Masters by Research as well. I actually did an explorative study on migraines interface with missions and state run hospitals on maternal health care provision within a Zimbabwean borderland. I just thought it was important for me just to share this, to show that you know how the interdisciplinary component of it is important, especially in the standard of migration and Health Studies. So from there, I moved to my PhD project, which is entitled cross border sex work on the urban margins. And on this one I'm gonna just gonna share a little bit. It of the background of the study, this project, the proposal has been accepted by the faculty, and I'm just going to share some details. Like, I'm not going to go into detail, like I'm presenting the proposal, the project, proposal itself, but I'm just going to share what I feel these are the important background information that you need to know. So my research project actually it acknowledges the conventional strands of scholarship that for grounded and appreciated the relationships, or the intricate relationships between migration and health. And I'm glad that in the room we have Dr Becky and Professor Jo veare, who have actually done tremendous work around migration and sex work as well. So you'd find out that in much of the work that I did, I acknowledged them a lot, because they are the people whom I can call the gurus in the field. So there's no way I'm going to lie in their front because they are the gurus or the intellectuals in this particular field. So yeah, so it's, it's, I'm I'm kind in a dilemma, because whatever I say, if I say something that is inconsistent with that what they've written, they're going to point me straight into the eye and say, like, Hey, you are lying there. Yeah. So, so my project also acknowledges migration is a vitally important social determinant of health, and it's increased association with poor health outcomes. It also acknowledges the research on migration, on immigrant sex workers access to prep that has shown global disparities that exist between citizens and non citizens in terms of access to health care services such as prep. So migrant sex workers often face higher risks and lower health outcomes compared to their counterparts. This is according to global literature on sex workers access to prep. I also acknowledge how the complex links link between cross border, migration, female sex workers and access to sexual health, education and services, how the complex relationship can be understood in terms of how cross border migration can exacerbate the feminization of poverty. You'd find out that, owing to limited economic opportunities, migrant women who normally comes to South Africa, they end up, you know, because of limited opportunities, they end up residing in marginal spaces like townships, informal settlements and hostels, and they also end up taking precarious jobs such as sex work to earn a living inside circumstances. Cross border, my cross border, female migrants are exposed to higher risks of HIV infections. So

B

Bothwell Vumai 43:04

okay, so I also acknowledge that the subject of pre exposure prophylaxis or PrEP is an in its intersection with sex work, and it's intersection with sex work and migration has garnered significant attention in the in both high income countries and low income countries, it's efficacy in preventing new transmissions globally is quite remarkable, as you can see from the statistics from the UN progress report that reported an estimate of 1.3 million new infections in 2015 indicating a 27% and 38% reduction from the 2010 and 2011 statistics respectively. So against

that backdrop, we know, like I've mentioned, that doctor Becky and Doctor prof Jo have actually done a lot of work regarding around migration and sex work. My point of departure is I would also noted that with other scholars that have that have done work on migration and sex work, much of their research is actually inordinately focused on local citizens themselves, without focusing much on undocumented migrants. So in this my point of departure, home, point of deviation, I extend and complicated this scholarship, first by a deliberate by a deliberate empirical focus on undocumented cross border female sex workers is the main unit of analysis. So the reason why I'm focusing much on the undocumented female sex workers is because they have certain identities that are attached to them, as you can see how I have highlighted in board. Six, you'd actually see that an undocumented female sex worker is actually a stigmatized foreigner in the sex worker, a sex worker ident identities in general, and any legalized undocumented status in particular, which largely constrain or inhibit sex workers access to sexual health services. The female identity fed that this predisposes them to gender based violence and unsafe sex practices. This situation is always fed the Western When coupled to sex workers illegalized undocumented status, which increasingly compromised their beginning power for sex, safe sex and non violent sex, making them more susceptible to risk of GBV and HIV. So you'd actually find that undocumented female sex workers, they actually have do have multiple layers of vulnerability. Unlike any other female sex sex worker, for instance, you'd see like, let's say, for instance, we do have sex workers, like local sex sex workers, and also those who are documented, but to those who are undocumented themselves, they do have an additional or there's a multiplicity of layers of vulnerability that others are not also facing. Then also noted that the relationship between cross border, migration, sex work and prep intervention is yet to be closely researched and understood in the context of undocumented immigration sex immigrant sex workers residing in Housing Urban margins or low income residential areas. The death of knowledge regarding undocumented female sex workers, perceptions of prep, the power relations that influences their access since its novel roll out in South Africa in 2015 considering this scholarly puzzle, this study proposes to explore undocumented immigration, immigrant sick, female sex workers, perceptions, experiences of access to uptake and adherence to prep in how Tanks urban margins or low income settlements of deep salute and tembisa. So generally, the scholarly contribution of my study is going to come out through a robust theoretical engagement with world views on an under researched phenomena in low income settlement of an HIV endemic country, this research project shall interrogate and extend research field work and debate on complex relationships between cross border migration, sex work and HIV prevention interventions. It will also recognizes the empirical importance of understanding the unique challenges that are faced by undocumented immigrant sex workers residing in these marginal spaces and their access to prep, as well as accessing the importance of prep as a highly effective measure against HIV transmission and its potential and its potential to contribute to the overall health and well being of sex workers and those who depend on them. Ultimately, the research shall also significantly, that is intellectual and empirically contribute to global, global debates on human mobility, sexual health, health equities and subjectivities. It is also it. It also bears the potential to contribute to policy improvement by bringing up the subjective and image views to complement the biomedical constitution and administration of prep interventions.

B

Bothwell Vumai 48:59

Okay, so this is my main research questions. How do undocumented immigrant female sexual navigate and negotiate access to prep on the urban margins of an HIV endemic country? And the sub questions are as follows. I just want to quickly go to the theoretical framework so my study is actually underpinned by me. It's guided by the species of vulnerability, theoretical

framework that was developed by Dylan, 2008 2021, as well. It's also augmented by scholars like scholars like Watson, Bucha Hey with 1997 Washington and Downing 1999 so although this theory is purely from a geographical background, it's explanatory schema of why some social actors are more successful. Social and special adversities than others, make it adaptable to my study and other disciplinary fields. So this theory is actually key for the understanding of how multiple social, political and economic inequalities and all factors that shape the sustainability of various groups to harm, as well as governing the ability to cope and develop develop resilience. So this is ours. I was I conceptualized the concept of vulnerability. It helps us to understand how space and place influence vulnerability and resilience. It illuminates the social, spatial nature and dynamics of vulnerability. Thus, vulnerability is a central notion and experience in in this study, as it is integral part of immigrant female sex work, female sex work, experience with sex work and access to prep intervention in South African marginal spaces. So in terms of its relevance, the species of vulnerability theoretical framework is quite vital, as it is key in the mapping of social groups, in the social groups that are part of my my my unit of analysis, which is undocumented immigrant sex workers. You it also, it is also key in the mapping of the marginal spaces themselves. Like I mentioned that my research, my research side, deep salute and thembisa, because of of the of their locality at the Urban margins of the Jo ansberg Metropolitan so in terms of my methodology, my studies more of an exploratory more. It assumes a qualitative and exploratory design which places a characteristic trust on the nons, the contextualized meanings, behaviors, practices, experiences and interactions of individuals and collectives. So basically, it's a qualitative type of research where I will be doing interviews with undocumented female sex workers who are residing in those spaces, such as deep salute and thembisa. And in terms of simply, okay, in terms of sampling, I'm using two nano probability sampling techniques, namely purposive and snowball snowball, to select representatives cases of both social spatial sites and research participants. So the main justification for for me to choose deep salute and and thembisa is because it stems from the demographic. Sorry, I need to Okay. It stems from the demographic reality that most international migrants are concentrated in these typically social, economically marginalized enclaves which provide alternative, alternative, cheaper lifestyles and livelihoods deep suit in thembisa and other township also service convenience injuries for newly arrived immigrants from across Africa and those who live in the core and those who leave the core or the Inner centers of the city in search of more and affordable accommodation, My okay,

B

Bothwell Vumai 53:58

my last words, I'm currently waiting for the ethics clearance certificate. Once I get it, I'm going to go and hit the ground running in data collection. And that's, that's, that's the main and I'm also, they also discussions that I would want to do with Doctor Becky and Prof Jo with regards to reframe my research questions to actually include issues that is to do with the recent withdrawal of the USAID since much of these prep interventions were funded by USAID. So I would just want to find a way in which I would include questions that also caters for such kind of usage with the draw to see how those things affect prep, access and and adherence among immigrant sex workers. Thank you.

B

Becky Walker 54:57

Once more, not once more. Do. Both well. Thank you both well, and now on to Tola. So if you've got questions for Bothwell, please just note them down or hang them somewhere in your brain. And now we'll move on to Tola and Stan. Do

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Speaker 1 55:44

Good afternoon, everyone. Yeah, my name is Aditola Oyenubi, and before I begin, I would like to acknowledge two wonderful people in the room, the director of ACMs, Jo and my wonderful supervisor, Becky, because I believe without their support, after a series of very unfortunate events, I won't be standing here presenting this topic. So thank you guys very much. So my topic is on exploring the impact of forced displacement and caregiving roles. Sorry. Exploring the impact of forced displacement on caregiving roles and experiences of well-being among internally displaced persons in Plateau State, Nigeria, and earlier today, I asked three of my colleagues what comes to mind when they hear the word Nigeria. Sorry, I'm putting you on the spot. And then Melissa said, Jollof rice and pepper soup and persuade said African movies and charity said ethnic diversity. So while I was preparing my slides yesterday, I asked co-pilot the same question. I sent that prompt, and it said, Well, when people hear the word Nigeria, they think about cultural richness. Nigerian is known, of course, for Afrobeats. We know Bona Boy Grammy Award winner. We know, of course, our Nollywood movies about the wicked mother in laws and the witches and all that. And then, of course, vibrant fashion, opulent and colorful weddings and literature we all, at least most of us will know, Chimamanda Ngozi Adichie. And then it went ahead to tell me that people think about entrepreneurship and Nigeria as the African capital of hustle. I don't know. Maybe that's debatable. And then also, yeah, this is fact. Now Nigeria is the most populous African country on the continent, and it is. It has a population of over 250 million people. And so after seeing all these nice things and buttering me up, co-pilot says, unfortunately some might also think of corruption in terms of like cyber crimes, four, nine, corruption and economic instability, which are all true. So after all this, it was, it just proved my point, and which goes to forced displacement in Nigeria, which is a huge humanitarian crisis, it's been ongoing for over two decades now, and yet it has been under-acknowledged, under-researched and under-studied and the migration of health, migration and what's it called migration data portal, I think of 2024. Says that currently, over 3 million people are displaced in Nigeria, internally displaced in Nigeria. This number might look small compared to the total population of two 50 million persons, but 3 million is quite significant. It's actually a big number, because about 67 countries in the world have a population of under 3 million persons. And yeah, so this map is the map of Nigeria, and the circles here depicts spots, hot spots, where internal displacement is quite prevalent. And to my right, especially Miduguri, is one of the states in Nigeria where, by the way, there are 36 states in Nigeria. So Miduguri, Yobe state, Gombe states, some of the states where we have the epicenter of Boko Haram insurgencies. Boko Haram means Western education is a sin. So which means that everyone sitting here is a sinner, according to Boko Haram. So one of the, I mean, their high profile insurgency cases was the kidnap of 256 school girls between the ages of 16 and 18, in 2014 these girls were abducted from their boarding school, government Girls College in Chibok and on the way to their abduction site that Sam Siba forest. Fortunately, 16 of them jumped off the moving truck and they were able to escape. A few years later, after some negotiations with the government and humanitarian organization, some of these girls were released, and 10 years later, reports still have it that 82 of these girls are still missing. So apart from these kidnappings, they have also killed people and rendered many of them internally displaced. And to the right, those dots at the right indicates spots for another form of internal displacement, known as armed banditry. So these people we all assumed were like Boko Haram Boko Haramist, but yeah, they distance themselves from the armed banditry. So we call them unknown gunmen. So they attack villages. They attacked farmers and so many people, killing people, touching homes and rendering people displaced and homeless. And then around the bottom, we have the middle belt region of Nigeria, which is also my study site for my research,

and it consists of places like Benue state, Plateau State and the Federal Capital Territory, Abuja. So in Benue state, we had the recent killings, like two weeks ago, where over 6500 people were displaced and over 200 people persons were killed. So coming to my study side with sites, which is plateau states, somewhere in the middle I grew up there, and unfortunately, I experienced the very first insurgency there. And the kind of insurgency there is known as ethno religious conflict. So there are two main religions in Nigeria, that's Christianity and Islam, and there are also conflicts between so we have clashes sometimes, and they're also conflicts between pastoral farmers, and we call them Fulani herdsmen. So they are like nomadic cattle rearers that graze around the around the area, but then because of the issue of deforestation, so there are hardly places to graze. So they take their cattles to the farms. Of you know, people have toiled for so long, and then they feed on those cattles. And when the farmers complain, they kill them. They rape women, and then the farmers have to retaliate. So that has been ongoing. So in 2001 I you know, was there to experience the first religious conflict. And I will just read my experience as I reflect on what happened on that fateful day. So on the seventh of September, in 2001

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Speaker 1 1:03:59

the city of Jos once celebrated for his cultural diversity and religious harmony, descended into chaos. What's begun as an ordinary Friday ended in fire, blood and the collapse of the world we knew. I was a teenager then, and growing up in a Christian household, my family lived peacefully alongside our neighbors. I'll call them the salisu. They were a large Muslim family household headed by a kind man and his two wives and 14 children. And on that fateful day, just after jumat prayers, at noon, a wave of terror swept through the city. We heard the first echoes of gunfire so plumes of smoke rising in the distance and watched neighbors run to their homes in panic from the window of our apartment, I watched as terror closed in on us, people screaming, chased with machetes, stones, sticks and other weapons, what we had only ever heard of in far away places like COVID. Kaduna, Kano and Borno State had arrived our doorsteps. It was violence as it tore through our neighborhood, shattering everything familiar. The salisu family will never be the same again. That day, both wives left to buy school uniforms for their children, and they never returned. Their absence became a haunting silence, no funerals, no bodies to bury, and no closure. These women were not just mothers. They were domestic backbone of their home, their disappearance trust the entire burden of care and survival onto the father and the older children of the home, the older children who were once carefree became caregivers, overnight, cooking, cleaning, working odd jobs and raising their young siblings while trying to stay in school. And the aftermath of this was that, I mean, due to so much economic pressure, they had to return back, sorry, to their village, you know, which was a form of displacement. This is a single story, and many families were impacted by this very ehm conflicts. So many were displaced, ended up in IDP camps. And I guess, reflecting on this experience made me extremely aware on how displacement fractures families, creates new rules and reconfigures relationships in ways that might not necessarily fit into traditional family models. Displacement also has as as as as well as disrupting this family dynamics, it also has a way of impacting on well being. And as Langa put it today in the definition of health and well being, which is like the World Health Organization of definition description of well being and health is simply not the absence of disability, of diseases, but it encompasses of social, physical and mental well being. So, I guess, reflecting on this, I believe, makes my study significant and quite important in the area of migration and health. Most dominant studies or literature discusses around forced migration, focuses on migration from either a survivalist lens or a maternal centric lens, whereby you see most studies around family dynamics talking around the experiences of single mothers In the instances of displacement. But what about

older siblings, like the Solis children? What about aunts, uncles, fathers, grandparents, who have to take upon themselves these caregiving roles when the primary caregiver disappears or gets killed in an instance of conflict and displacement, and how do they interpret their well being? Does well being mean a sense of safety? In this context? Does well being mean being able to, you know, provide for their families and even income settings where resources and food are allocated and distributed by humanitarian organizations and benevolent donors. Doesn't mean having to get their share of these resources. So these are the pertinent questions I believe my study seeks to understand. And so this background and story has set the parameters for my inquiry. And so I ask, How does Internal Displacement impact on caregiving roles among IDPs, and how do caregivers experience well being in these new roles? Thank you.

B

Becky Walker 1:09:26

Was perfectly timed, Thanks Todd. And then we finally have Stanley, Stanley online, or Oh, Stanley's here. Sorry, I didn't see you there. I

S

Stanley Muravhasta 1:10:38

Good afternoon. Good afternoon. Good afternoon. Okay, by the way, Stanley Morava star, so this one is just a proposed research topic which is open for your feedbacks, because it's still a foundation, something that has nothing yet. You know, I have just done some few readings, but ja, that's the topic. Maybe you can just take a look at it. So, you know, and seek to explore the methodological challenges faced by academics or researchers and strategies they apply when studying the life experiences of human migration in South Africa. And the reason I come up with this topic since I was in Musina, you know, studying migrants, and they were some situation where we are trying to recruit, and then other way reluctant to be part of the study, because they claim they are not migrant, you know, And then you find out, maybe one of my colleague recruited them, and then they agree, you know. So these are some of the things that I want to explore, you know, and also the strategy that can be applied to mitigate those challenges. Of, you know that's not important, and those are, will be the research questions. What are the key methodological challenges faced by academics researching human migration in South Africa, and What strategy do researchers employ to mitigate these challenges. How do these challenges and strategy impacts research outcomes, or,



1:12:48

you know,

S

Stanley Muravhasta 1:12:51

and those would be the objective, to identify the methodological challenges faced by academics studying human migration, to explore the strategies that researcher use to address these challenges, to assess how these strategies impact the quality and reliability of research finding. The methodological approach will be qualitative research to explore experiences and strategies and the participants will be researchers and scholars specializing in human migration

within South Africa. And participant selection criteria will be based on experience, publication, record, involvement in migration research. Yeah, this one data analysis, interpreting semantic analysis. Data collection will be semi structured interview with open ended question,

S Stanley Muravhasta 1:13:56

just a little sample of question that might be included on the interview guide something like, what challenges have you faced in studying migration? What strategy Have you found effective? How do this strategy influence your finding? This will be question that will be asked to scholars or micro something like that. And, yeah, we all know some of ethical considerations, such as, you know, I won't go through, you know, the most important things is feedback from you guys, you know. And I think that's all for me.

B Becky Walker 1:14:41

Thank you so much, short and sweet, that was great. Thank you to all three, or all five presenters. In fact, if you would like to give some feedback on the three and then are we going to open up for questions or feedback from from the room and online?

L Lorena Nunez 1:14:59

Am, alright, okay, okay, one small, not both. Well please also, if I if you could put yourself on the other being, once more

 1:15:16
some.

L Lorena Nunez 1:15:20

Thank you. Thank you, thank you so I can see you. Okay, I like to start asking by asking you, what would you consider would be health equality, equity or health inequity in your research, what is it? It's a question for you now so that I can engage with that. So I

 1:16:14
so

L Lorena Nunez 1:16:21

and apply to your particular case, how you are, what is the situation of health equity and what is the situation of health ini, iniquity, in your research, not not, not really definitions, but just what would you consider equity?

B**Bothwell Vumai 1:16:49**

Okay, so equity, I will consider it as in as a as a way of ensuring that noone is left behind in terms of accessing the sexual, for instance, sexual and sexual reproductive health, or health and HIV and AIDS health programs or interventions. So I would, I would frame it in a way that noone should be left behind. Because in as much as we think of migration and communicable diseases, these diseases, they do not have boundaries. So in as much as some are left behind, let's say, for instance, the undocumented immigrant sex workers are left behind. It means the effects of it are going to filled across the divide, irrespective that one is documented or undocumented. So whatever interventions that needs to be come up, to be to be brought up or to be designed, they should be interventions that are aimed at ensuring that these services are accessible to all. And yeah, I think that's what I would say.

L**Lorena Nunez 1:18:05**

And this relates a bit to what I was talking yesterday in terms of how we study this kind of situations, and what are the claims that we are or the advocacy around this. Because, in a way, you are talking about health equity at the very last end of a whole change of inequities. And that, I worry a bit because we end up asking for equal right to health when there's been so many conditions that make the the increase the vulnerability, vulnerability of these communities, that maybe one should start by questioning something like I would imagine that you you will talk about, Maybe one can even say a life history, where you you identify different moments of compound inequity. Because otherwise it's like, it's like, if we are in front of a wall and the people dying, and we ask for equity so that the the wounds can be healed, you know, but there is a war. Can we not say anything about the war? So in I'm maybe putting a very extreme example, but I want to say that these forms of inequity are socially produce and they is not a static picture that you need to account for, but it processes, and in that sense, communities. I will call more communities, rather than again calling on what I was saying yesterday, places as a. External to social relations. Those places become places of threat because they are social relations that perpetuate, that increase the threat. And those are the things that I invite you to consider so that we don't produce a static picture and a demand of increasing, of being, you know, more timely with the preps. But really is that only what we can say. I think you can say much more. And my invitation is to open that and again, these policies prep also to interrogate them from the size of policy makers, what is the intention? How are they considering mobile populations and documented and so I think it's important to document that. My fundamental question to you is just, let's not talk about the end, the end of the continuum of inequity that you think, I think one should, yeah, Paula, oh, I mean, I think you can write a book about a about what your what You Your displace community and care, and it's almost like, I'm glad that you, you finally put the question on care and the brief kind of a some assembly, assemblage of families and everyone taking other roles of care, in absence of those who were supposed to care because they were dead or gone. And I think, if it's just telling the story, I think is absolutely necessary, how life, social life, is made and remake in conditions of displacement is like, I can't say more than Please, just tell us a story. Is you have so much and there's so much there that we don't even need to put, you know, a proper objective. So it's just the telling of the story, which I think is really important and necessary. Um, uh, Stanley, oh, I also need to see Stanley. Nice, nice PowerPoint. I like the flowers. Is this a Master? Yeah, I think Stanley, I think you have potentially a very interesting topic. And one of the things that

immediately, you know resonate on me is that you'll be dealing with researchers that may the issue of mobility and and immobility or self servantarism, researchers, we tend to be, not migrants. You know, we're not. Often we are, you know, sedentary people that work in centers and stay and and the the research tools that we use the research methodology is also not give for mobile population. So they say, they say, yeah, they say discrepancy between who you are as a researcher and who you want to research. So I will post, I will put the issue of mobility and immobility as a core of your questions in terms of what are the challenges right? Because the challenges that have to do with tools that are not designed to study those who you want to study, you're not taught unless you take write a specific methodology, research methodology on mobile population. This is a sort of a second adaptation to a series of methodologies that we in the social sciences we use, which are not dealing with people who move Yeah, that's in in itself is interesting, and researchers ask them themselves being kind of sedentary, but there are ethics issues as well. So in a way, it will be like, you know this, yeah, I mean, to map out a collection of problems that that you encounter when you do research with mobile population, as often researchers are not them themselves, mobile themselves or tools. And also the other issue that you bring here is South Africa. So. South Africa, or you also need to unpack what is it particular in South Africa that makes this research even more challenging or easier, the issue of, as we know, xenophobia, the issue of illegality, the issue of or not illegality, but undocumentedation, and how then these the subjects of your study, are subjects, participants that are scared, that see your research as a threat, And they may then, kind of disguise their condition, because the fear the consequences that I mean, these are all things that when start imagining that image, when you think about what are the challenges, and how they navigated, and what are they so I think there is a lot of potential there. And I think you need to kind of anchor your questions in terms of, yeah, mobility or immobility, being in South Africa to try and sort of otherwise it could go, you know, yeah, I think that that's very important, necessary. And yeah, I'll, I like to see what comes out. Yeah,

B

Becky Walker 1:26:24

thank you so much. Yeah. It's great to be able to have feedback sort of that really from somebody who really both, both knows, you know where the research topic is coming from, but also brings an external perspective as well, because I think often we are surrounded by people working on very similar topics, or people who have known our topics from the beginning. So I think to have that that feedback and and questions that really make us think more about what we're looking at is is critical. So thank you so much for that. We have time, I think, to open up for questions or responses. Oh, the responses from the students. So what we will we'll do that, and then we'll go straight on to questions as well. So if, if both world, Tola and Stanley, if you would like to respond to the questions. I know. Both Well, you've already responded to a specific question, and then we will open up to any questions or comments that are in the room or from anybody online as well. So both, well, I don't know if there's anything else you wanted to add, or if you want to sort of stick with the question that you were asked. And we'll move on to Tola.

B

Bothwell Vumai 1:27:56

I think I'm more comfortable with answering questions that are that would be coming from the floor.

B

Becky Walker 1:28:04

Paula, do you want to add anything or respond?

S

Speaker 1 1:28:07

Okay, thank you so much. Lauren, yeah, I think yeah. I'm trying to find my voice in my research. So, yeah, I'll keep working on this. Thank you,

B

Becky Walker 1:28:25

Stanley, did you want to respond to any of the the ideas or encouragement that you you received?

S

Stanley Muravhasta 1:28:37

No. Thank you very much for the comments. I noted them and I've turned them down, so, yeah, I will work on them. Thank you very much.

B

Becky Walker 1:28:47

Okay, great. Thank you so much. Um, so can we open up to general comments or questions? Tifa wants to kick us off then.

T

Tiffah Zauya 1:29:00

Sorry, old age. I was forget. I was about to forget one comment for blessing and one for worthy for blessing. I think he's got a very interesting topic, but it's more focused on who labeled a particular group essential workers. So I interested in seeing the chain of, I think the processes of a truck driver crossing the border requires what we call a clearing agent and a runner. A runner is now the human internet who passes the clearance papers from the clearing agent to SARS to immigration. It cuts the waiting time at the border, and also it maintains the original form of the clearing papers so that it doesn't have to be printed, scanned, sent back signed, printed, scanned. So if a truck driver was regarded an essential worker and a runner was not, how did that also affect. To them, or was that automatic? Meaning that if truck drivers are essential workers, so is the clearing agent and the runner and to both? Well, I had a particular interest in the the concept of leave no one behind, and I'll give an example sex work is only sex work if there's somebody buying and with with our h i They had a key area of interest, which was the index. The index is the person who buys and whatever affects the sex worker should obviously affect the index. And services was given to indexes without any questions asked. But when it comes to primary health care or the government services, if an index goes by themselves, they're sent back and they're told, come back with your partner, because we cannot treat an STI to just one of you. But when it comes to visa, hi, activity, so I'm glad that he says he wants to incorporate that and in leaving no one behind, how then does it change? The entire spec of the research city says it's focusing on migrant women and the index mostly are

also men. So I would want maybe just also an interest, maybe as a side note, just to see, Okay, who else is affected by the lack of service towards sex workers, in particular the index. Thank you.

B

Becky Walker 1:31:24

Thanks so much. Is there any is there another question before we go to a response? Or, yeah, sure,

S

Speaker 2 1:31:34

thank you. I've got a question for as well as all blessing from my experience working with HIV prevention interventions as well as sex workers, most of the prep was provided by US aid funded programs, and now that this has been withdrawn. How do you think that will affect your your interviews, cos the sex workers were more comfortable going to these sex work clinics, which were under dreams, under US aid, and after the funding was withdrawn. We have seen them going back underground as well and then going to blessing. You have already interviewed about 30 truck drivers. Do you have a sample? And I was wondering, haven't you reached maybe saturation from that 30 that we've interviewed? Thank you,

B

Becky Walker 1:32:53

blessing and Bothwell, would you like to respond?



Blessing Mukuruva 1:32:59

Alright? Thank you so much. Thank you, Tifa, for the feedback. This was useful, and I think your reflections on the runners could be one of the things that explains why these queues were very long. Because most of the times they were not visible. Should they be there? They were illegal. And this would also be seen with this informal food traders or those support services that usually accompanied with the truck drivers. You know, if you go to the border, to those, especially if you go to Limpopo truck stop, you'd see there's these women who cook food, who provide shelter and as well, some sex workers who are always there, giving these truck driver services. But during COVID Now, it was very difficult for them to be there because they were not allowed. So you would see some of these informal or hidden services. Would see they would say what one woman said, like, like they cook this fresh food. So they said the truck driver, once he moves from the truck to wherever they were cooking, they would close the door till the next morning, so that this, PD, they are not allowed to go back. So you would see now, this is how they were getting these various services. So it was not like as open, or it was not automatic that these runners were becoming official, and then yes, busisu, I've really started to see some of the things that have been said repeating themselves. So I think I can confirm that we are nearing, or we have almost reached the the saturation. And initially the target was actually the 30 interviews, but throughout as I was conducting these interviews, some issues became recurring and no more. Kind of like new things were coming out, but you. Different expressions of the same things. Thank you.

B**Bothwell Vumai 1:35:12**

Thank you, Tiff and BUCY so for your questions, responding to Chief us questions on the aspect of leaving no one behind. The reason why I specifically mentioned immigrant female sex workers as my unit of analysis, it was mainly because of the theoretical framework that I'm using. So to some extent, it had more to do with, you know, them being the ones that are experiencing multiple layers of vulnerability compared to their male counterparts, who are some, in some instances, that the perpetrators of some of those things that are actually adding on the multiplicity of layers of vulnerabilities among female immigrant female sex workers. But, yeah, I will consider it as well. But within the confines of my research itself, I had specifically or purposed to look at, you know, the experiences as well as the politics that influences immigrant female sex workers access to prep and stuff like but it's a good point that requires attention as well. Then to brothers busi, so yes, USAID with the draw, it somehow changed the complexion of the game plan, because that's why, if you remember, well, when I was still in the front, I mentioned that I'm also in a process of trying to rephrase my questions to include, you know, issues that are centered around USAID withdrawal to see how it is going to affect or influence prep, Access and utilization among immigrant female sex workers, but

**1:37:04**

there will always be a way

B**Bothwell Vumai 1:37:07**

of finding them. The reason, probably I couldn't have much time to explain in detail, especially when it comes to my choice of size. They study size themselves. I actually do have people whom I'm actually going to use as gatekeepers. And on my snowballing, sambling technique, those people that I'm going to use as gatekeepers are the ones that are going to refer me to potential participants. And these people I'm talking about that these people that I do have some form of, I'm afraid to say personal kind of relationship, because it might imply that, you know, but, no, but, but. But all I want to say is like, these are people whom I've known for some time, and we actually some of them might do, come from same village of origin, and these are people who are open to discuss their challenges, whatever they go through on their daily lives. So and the reason why I'm also going to deep salute is basically because of those people that I already know. I also once worked the day as a research assistant on an IOM Commission, the research project where we were looking at the social economic contributions of migrants in informal settlements. And during that time I need, I'm I managed to make relations with people and going there to be just a matter of one call to say, Guys, this is the reason I'm coming there. I want to talk to this specific type of group of people. And, you know, through snowballing, I I'm sure that I'll get the the number of the participants that I do need.

B**Becky Walker 1:39:02**

Ah, um, I actually have a question as well to add on for both well, but I don't want to take up all the time. So is there any other people who would like to ask a question? Sure, is it, is it to Bothwell, or is it to Okay? So can I ask both well, and then you ask, best thing so that we finish that, is that okay? And once more, online as well. Okay, so it's, it's a bob, well, it's, I guess it's

quite interesting. When you said, you know, you didn't want to say you have a personal relationship, because it once it implies, I mean, as much as it's funny, I also think it's actually a critical point, because when you talk about sex workers, they're not just sex workers, right? They're people, and sex work is their job or is something they do to make money. So it's perfectly fine to have a personal relationship with somebody just because they sell sex. I mean, it shows how we kind of, you know. Immediately allow that identity or that thing strategy to take over someone's identity in a way we wouldn't with others. So that's one thing. The other thing is, and it links to this, I feel that at the moment, you're, you're, you're making a lot of assumptions, not less, not in a bad way, but I think you need to be more curious or more or unpack things a lot more so this distinction you're making between migrant or non migrant, documented, undocumented, there may be literature that points to distinctions, but I mean, I also think there's a lot that points to there not being distinctions or other issues being the the key vulnerabilities or risks that are there. So I think, you know, just don't just be sort of read a bit more broadly around that, and also look at, you know, particularly the reports and the work that has come from sex worker organizations themselves, like the song kid. Because, I mean, Jo and I have written on this, but we're definitely not the gurus, and there's a lot more that we need to we would love to learn about and know and that you can ask about, and hopefully we will learn from you as well. And just link to that again. One last point is around vulnerabilities to to gender based violence. So I, when I was worked with song Ketu on a report around police violence against sex workers, what came out it there was, there wasn't a distinction in the vulnerabilities to violence. There was a distinction in the vulnerabilities to the response to that violence and the recourse, right? So somebody who is undocumented is more I mean, it's generally very hard for a sex worker to report violence, let alone by the police, but when you're undocumented or a cross border migrant, obviously, then it becomes a lot riskier, and you're pretty much not going and the police know that, so they that's that they use that, right? So it's not that they, um, you mean sex workers generally are pre, you know, there's a risk there, but it's, it's what comes afterwards that actually pose vulnerability. So maybe sort of think a bit more around how we perceive vulnerability and how we think about violence as well, in, in, in that way. Okay, that's That's all from me for both well, and you don't need to respond right now, because I know we're going to have a chance to talk who had their hand up on this side, and then we'll go to once more after that. Do you want to

S

Speaker 3 1:42:40

ask? So my question is to blessing you talked about preparedness, preparedness? Yes, for my background, I'm from development studies, so we do a lot of so my honors research. It was about flood disaster preparedness. So we talk about contingents, plans. I've I did not hear you like I did not hear you mentioning that the contingency plans and stuff like that. I also use the vulnerability framework. There is a healthcare vulnerability framework you can go and check around that, also to include in your in your research here.



Blessing Mukuruva 1:43:18

Thank you so much, kundai, I think I'll explore that. I will have a chat with you. Thank you.

B

Becky Walker 1:43:26

Okay, so we just got a question from once more, and then we'll go, okay, um, is it written or



1:43:33

Okay? Over to you.



Speaker 4 1:43:36

Okay, yeah, I had just posted on the group checking very briefly with blessing to poets. Explain more, not much about introspective observations. It's an interesting methodology for me. So a brief you know, few sentences would be great to hear.



Becky Walker 1:43:59

Did you? Did you get that? Okay?



Blessing Mukuruva 1:44:01

Thank you so much. Once more. I also did not get much literature on it, but I was with the exploring it. So this is what happens with that we observe the daily routine that is done or carried out by people with the the idea of understanding their past experiences and what is that those routines remind them of the things that has happened before? Thank you.



Becky Walker 1:44:36

Thanks so much. And then would you like to ask a question?



Speaker 1 1:44:41

Okay, thanks, blessing. I wanted to ask if you perhaps came across truck drivers who did not want to, you know, reflect on their experiences during COVID 19, maybe because they were traumatic, or because they had, at some point, tried to. To repress them. And also, from your interviews, did you maybe come across anything to do with mental health, how that affected their mental health and how they currently



1:45:12

dealing with it? Thanks.



Blessing Mukuruva 1:45:18

Thank you so much. Melissa, the field work is a mixed is a mixed bag. Definitely, there are quite a number of people who refuse for different reasons including those of that that take COVID 19

a number of people who refuse for different reasons, including those of that that take COVID-19 would remind of them of us instances that they wouldn't want to remember. And just generally, some would just don't want to participate and even chase you away, because you remember I said this was their own time, and really getting to access to a truck, and someone said, I'm sleeping when come back later. And actually, I've experienced that several times, and some really accepted. And during the interviews I have, I think, one interview when the truck driver himself never believed that there was COVID, and he was never really interested in testing and all those COVID measures that were put in place. And unfortunately, one day, he decided to go home without knowing whether he was he had tested positive for what he just went there, and when he left, he lost his parents, and he says he doesn't forget that. And until today, as he was saying, he hasn't forgiven himself, because he doesn't know whether he really was he had COVID. He passed them to his parents or what. So it's something that he still has in his mind, and indeed, there are quite a lot of mental health experiences that were there. Thank you.

B

Becky Walker 1:46:56

Okay, one more from Tifa, and then I think we can wrap up.

T

Tiffah Zauya 1:47:02

Thank you. Mine is directed to my dear Mr. Stanley muraba. It's basically something that I experienced personally in the field, working with James. Thank you on other challenging elements of ethics versus cultural norms or expectations. I'll give an example when one of the participants was a church elder and would not respond to anything without two other church deacons or elders, and when it came to reimbursements, who would be the 50 and for one, was it appropriate also to somebody with a higher status and other elements of interviewing a traditional healer? What are the rules? Are we well prepared to go to a house wearing boots, and they say, No, I want the interview in my space. Remove your shoes at the door. Maybe how people navigated certain challenges like that. You know, cultural norms, religions, does the enumerator also, is they? Are they comfortable to enter those spaces, and also the taboos of money as you experience to say, how then can you better prepare enumerators when they go in the field, if that's what you want to come out with at the end of the day, better prepare them. Better also improve issues on ethics, because I know some of them are Eurocentric. Are they appropriate? Are they correct in our different spaces as well. I think that will be something of interest. So I just want to know if you have considered that. Thank you.

S

Stanley Muravhastha 1:48:49

Thank you very much, Tifa, that's an interesting one, and I think this is exactly what I am looking forward to, to find out, you know, or to explore from the expert. By the way, great.

B

Becky Walker 1:49:09

I think we can. We can close there with a round of applause for all of our presenters this afternoon. And just to say, thank you so much. I'm just I'm going to pass over to Jo, who is going to have a last word, and then we can all head home in search of water.



Jo Vearey 1:49:30

Thanks Becky. Thanks everyone. Huge. Thanks to Lorena, who I know had to leave. Congratulations to our earlier career colleagues for some really great research pitches. And it's, it's very nice to see the kind of thinking of the PhD right through to the postdoc, and really lovely to see on the one panel. So huge congrats. And it's exciting to see where everybody is at and.