THE AUSTRALASIAN REVIEW
OF AFRICAN STUDIES

VOLUME 44 NUMBER 1 JUNE 2023

Contents

`

Book Review

Editorial

The papers in this edition of *ARAS* span the African continent and the diaspora beyond, most obviously in a geographical sense. Papers on Morocco, on Ghana, on South Africa, and on refugee students from Africa in Australia, offer this broad sweep. But it is the issues that the papers confront, and the directions in response that they propose, that give meaning to the African experience as a whole, and to the South beyond. An observer as informed as Branco Milanovic gloomily predicts that "Africa's abundance of natural resources combined with its persistent poverty and weak governments will lead dominant global powers to vie over the continent" (*Foreign Affairs*, July 1, 2023). The intentions of the neocolonialists of the North are clear enough indeed, but the agency of the peoples of Africa is the dynamic factor that receives insufficient attention from such commentators.

The authors in this edition thus exercise their agency. The first papers plumb two critical issues facing South Africa. Deane's paper on suicide addresses human fates that are unaddressed by considered government policy; and Munyoka documents the torment wrought by refugee policies that actively bar so many from productive work. Adu-Gyamfi, Adjaottor and Owusu similarly move from an historical examination of the treatment of cholera in Ghana to issues of current urgency. Two very different papers from Morocco that yet share a sociological perspective offer, first, from Boualam and El Houari, an account of sporting behaviour reflecting deep social discontents; and then, from El Idrissi, an historical treatment of the course of educational sociology that challenges intellectual practice in contemporary society. Finally, Boamah's paper on the experience of African refugee students in Australia continues the journal's tradition of encouraging studies of the diaspora, in this case offering a meta-analyis of a subject of growing importance in a nation claiming multicultural merit.

The reader will see that the papers in this edition come from both scholars of seniority and from postgraduate and emerging researchers. Though his admixture must vary from issue to issue, the present case is representative of the aims of the Association that supports *ARAS*: to express the established and the emerging wisdom of Africa however the world may be geographically defined, for a time, in a post-colonial era.

A Proposed National Strategy for Suicide Prevention in South Africa

Tameshnie Deane
Department of Criminal and Procedural Law
College of Law, UNISA
deanet@unisa.ac.za

Suicide is a significant social and public health problem (World Health Organization [WHO], 2021a). It is defined as self-directed injurious behaviour with an intent to die because of the behaviour (Centers for Disease Control and Prevention, 2022; Crosby *et al.,* 2011). Suicidal behaviour ranges from suicidal ideation which refers to thoughts and cognitions about suicide, to the intent or planning of suicide, to non-fatal suicide attempts, and to a fatal suicide attempt and actual suicide (Van Orden *et al.,* 2011). The proportion and the rank of suicide as a cause of death varies greatly by age and has been identified as the leading cause of death among young people in South Africa (Kootbodein *et al.,* 2020). Suicide and suicide attempts cause serious emotional, physical, and economic impacts (Centers for Disease Control and Prevention, 2022b). South Africa urgently requires a strategy to set suicide prevention targets and reduce suicide rates. This paper identifies strategies to reduce suicidal behaviour in South Africa and proposes a framework for a national prevention program.

Epidemiology

Worldwide, between 700,000 and 800,000 people (10.6 per 100,000 people) die by suicide annually (WHO, 2020),[1] with one person dying every

---

[1] Estimates were calculated using mortality data reported by countries to the WHO Mortality Database as key input data, https://www.who.int/data/data-collection-tools/who-mortality-database. For countries without comprehensive death registration data or other nationally representative sources of information on suicide, WHO has drawn on the Global Burden of Disease 2019 study model by the Institute of Health Metrics and Evaluation.

forty seconds (WHO, 2019a). For every death by suicide, there are more than twenty non-fatal suicide attempts (WHO, 2021b). Globally, suicide is the fourth leading cause of deaths among 15-44-year-olds (WHO, 2021b) and the second leading cause of death in the 15-19 years age group (Centers for Disease Control and Prevention, 2022a; Hilda *et al.,* 2015). Whilst some countries have reported a decrease in suicide (Kootbodein *et al.,* 2020) others have reported an overall increase (Australian Bureau of Statistics, 2020). Amongst low-to-middle-income countries (LMICs) suicide is considerably higher and approximately 77 percent of global suicides occur therein (WHO, 2021b). The severe lack of resources in LMICs mean that there are very few or sustained efforts that specifically focus on prevention on a scale necessary to reduce the number of lives lost (WHO, 2012). Within the African continent, suicidal behaviour remains particularly alarming as governments are often ill-equipped to meet the general and mental health needs of their populations (Kirigia *et al.,* 2020). This contributes to higher rates of premature deaths, morbidity, lost productivity, and health care costs (US Department of Health and Human Services, 2013).

South Africa has the third-highest suicide rate in Africa, with a recorded 13,774 suicides occurring in 2019 alone. Of these, 10,861 were men and 2,913 were women (WHO, 2021c), a rate per 100,000 of 37.6 for men and 9.8 for women; that is, men are nearly four times more likely than women to die by suicide. The difference has long been recorded, despite more women being diagnosed with depression (Kootbodein *et al.,* 2020), one of the leading causes of suicide in the country (TimesLive, 2022). Further reports indicate that there are 23 known cases of suicide in South Africa every day (South African Depression and Anxiety Group, 2017), and for every person that dies by suicide, twenty have attempted it (Heywood, 2021). Whilst South Africa has always had a problem with suicide, the recent spate of high profile and celebrity deaths has put this issue under the spotlight (News24, 2022; Independent OnLine News, 2022). Gender stereotypes, stigmas and the lack of support and facilities to deal with mental health issues have played a major role in these suicides.

South African high school teenagers (16-18 years-of-age) are among the most at-risk group; twenty percent have attempted it (de Freitas, 2022) and nine percent of all deaths within this age group are suicide-related (Western Cape Government, 2022). Young adults aged between 19-24 years-of-age are considered the most at-risk group for depression, suicidal thinking, and self-harming behaviour (Schlebusch 2012). In an analysis of mortality rates by sex and age it was found that suicide was highest in men, aged 15 to

44 years, and women older than 75 years (Matzopoulos *et al.,* 2015; Kootbodein *et al.,* 2020). These rates are likely to be underestimated and under-reported due to the sensitive and complex nature of suicide and because it is a relatively infrequent event (Pittman *et al.,* 2014). The evidence-base suggests an increasing trend towards suicidal behaviour in the past fifteen years (Alabi *et al.,* 2021), consistent with global findings of a shift from the elderly to younger people. The prevalence of suicidality in the South African community points to a mental health crisis of devastating proportions and consequences.

Despite these alarming statistics, trends, and a mandate from the WHO (WHO, 2014), South Africa has yet to implement a national strategy for suicide prevention. The government has developed policies such as the National Mental Health Policy Framework and Strategic Plan (2013-2020), now lapsed, and other strategy documents on violence and injury prevention that attempt to address suicide. These frameworks, however, "lack sufficient detail on suicide prevention to be effective substitutes for a dedicated comprehensive evidence-based national suicide prevention strategy" ("NSPS") (South African Depression and Anxiety Group, 2017). In addition, there are some non-governmental organizations (NGOs) that provide key suicide prevention initiatives, such as awareness campaigns and national suicide hotlines that are currently offered by the South African Depression and Anxiety Group (SADAG) and Lifeline. However, these initiatives have not significantly reduced the rates of suicide, nor have they meaningfully contributed to the overall well-being of at-risk groups and populations. Much more is required.

The development of a locally appropriate NSPS is of great importance in reducing suicide rates (WHO, 2012). Such an initiative would be a clear indicator of government's commitment to addressing suicidal behaviour as a major public health problem. A NSPS will identify crucial gaps in existing legislation, allow for data collection, make provision for the human and financial resources required for interventions, provide accountability for those in charge of interventions, identify key stakeholders working towards suicide reduction, and provide a context for a research agenda on suicidal behaviours (WHO, 2018). In addition, a NSPS will be instrumental in shaping advocacy, awareness-raising and media communications whilst providing guidelines on monitoring and the evaluation of interventions.

Methodology

This paper draws on meta-analyses of accredited articles, books, legal policies, and national strategies/action plans as well as programs and interventions related to suicide prevention. The evidence base around suicide and suicide prevention strategies varies a great deal in terms of design (both qualitative and quantitative) and academic strength. For this study multiple databases were reviewed to identify relevant academic sources (whether published or not), books, journal articles, program evaluations, survey data, and other influential sources, including grey literature, the last drawing on publications such as program documents, reports, and evaluations by WHO, and reports from the Centre for Disease Control (CDC). Whilst grey literature has not usually received the same quality checking as peer reviewed published material it can still make important contributions to a systematic review (Farace 1997). The value of including grey literature in this paper is that it reduces publication bias, increases the comprehensiveness and timeliness of a review, and fosters a balanced picture of available evidence (Paez, 2017).

Knowledge Gap

Whilst there is a plethora of articles on suicide prevention strategies in countries like the USA and UK, there are only a few in a LMIC like South Africa. The reviewed literature does not provide a comprehensive or even an appropriate suicide-prevention development strategy relevant to South Africa. This study thus fills a gap with the aim of advocating for a reduction in suicide rates within the South African context as it contributes to the development of an appropriate NSPS.

The unique nature of suicide generates several challenges for research that seeks to address the understanding, prevention, and treatment of the problem. Successful initiatives to address suicide as a public health problem require the systematic collection, analysis, and dissemination of accurate information on the prevalence and characteristics of suicide and suicide attempts (WHO, 2014). The sources of data that are currently available remain fragmented and 'unlinked' (Steenkamp *et al.,* 2006). This can be attributed to the inconsistent and inadequate reporting of suicidal behaviour (van Niekerk *et al.,* 2008). In South Africa, the underreporting of suicide and the doubtful quality of statistics obtained from sources like death certificates and deaths registration also limits analysis and can result in an underestimation of the true mortality burden attributable to suicide (Matzopoulos *et al.,* 2015). Still, the available data indicate that suicidal

behaviour is a significant health concern in South Africa, calling for an appropriate strategy to curb such behaviour. What may be applicable to one context may not necessarily be applicable to another, however, due to social, cultural, and other differences (Mars *et al.,* 2014). This paper therefore focuses on situations and draws from examples that are applicable to the South African context.

The foundation of any effective response in suicide prevention is the identification of suicide risk factors that are relevant to the context (WHO, 2014). Suicide is complex and does not have a single determining cause (Leenaars, 1996). It occurs in response to several factors including societal, psychological, biological, environmental, and interpersonal influences (US Department of Health and Human Services, 2013). Suicide rates vary with sex and age-groups but are also affected by choice of and access to means of suicide (Yip *et al.,* 2012), mental illness such as anxiety and depression (Van Zyl *et al.,* 2021), barriers to health care, for example, the lack of access to providers or medications and stigma (Patel *et al.,* 2016), and by stress, loneliness, substance abuse (including alcohol), unemployment, economic recession and the loss of sources of livelihood (Chang *et al.,* 2013).

The main choice of methods of completed suicide include death by hanging, one of the most common forms of suicide in South Africa (Govender, 2019), poisoning by drugs, pesticides and other poisons (Kootbodein *et al.,* 2020), gassing, drowning, asphyxia, falling, shooting, jumping off high areas, and burning (Schlebusch, 2012). Poisoning and hanging were the leading methods of suicide in women, whilst hanging followed by poisoning and the use of firearms were the leading method of suicide in men. The most common non-fatal suicide attempts include overdosing (Stark *et al.,* 2010); approximately 90 percent of victims use this method with 10 percent resorting to self-injury.

Some of the most significant precipitators of suicidal behaviour in South Africa include education related problems such as poor academic performance and parental expectations around performance and career choices (Van Zyl *et al.,* 2021), interpersonal problems, including romantic relationship difficulties and unwanted pregnancies (Keugoung *et al.,* 2013), psychological trauma such as bullying (de Freitas, 2022) and social isolation or the loss of social support systems either within the familial (for example, parental bereavement) or peer contexts (Quin *et al.,* 2003). Certain individuals, for example the homeless (Perry & Craig, 2015) and individuals with differing sexual orientations (Russell & Joyner, 2001), may be isolated from 'mainstream' society, thereby increasing their vulnerability to suicidal

behaviour. Past or present physical or sexual trauma and abuse, intimate partner violence (Devries *et al.,* 2011), adverse childhood events (Orri *et al.,* 2022), family problems including disrupted family environments, broken family relationships and adverse parent-child interactions (Orri *et al.,* 2022; Gvion & Apter, 2012), mental health problems, especially depression or a severe mood disorder, including bipolar disorder, and the lack of access to adequate health care – all have a significant association with suicidal ideation (Baiden *et al.,* 2019).

Research also indicates that between 20 and 50 percent of youths who die by suicide have a history of previous non-fatal suicide attempt (South African Depression and Anxiety Group, 2017). Thus, youths who have previously attempted suicide are particularly vulnerable to further attempts or completed suicide (Orri *et al.,* 2022; Khuzwayo *et al.,* 2018). There have also been reports of seasonal suicide attempts especially around year-end, often related to academic stresses, or to finding a job or a place at university (Schlebusch, 2012). Individuals who abuse or are dependent on alcohol or drugs are at a greater risk of suicidal behaviour (Goldstone *et al.,* 2018). Some small-scale studies in South Africa found that approximately one in three adolescents who die by suicide had been under the influence (Khuzwayo *et al.,* 2018) and 40 percent of individuals who died by suicide tested positive for alcohol (Mars *et al.,* 2014).

In addition, South Africa's socio-economic context has significant bearing on the prevalence of suicide (Kinyanda *et al.,* 2012). High unemployment rates and levels of poverty mean that South African youths and adults are confronted with significant educational and socio-economic demands resulting in feelings of anxiety and depression for the future (Hassan, 2021). These precipitators are in line with global trends indicating that health care, exposure to violence, mental illnesses, and socio-economic and personal circumstances are consistent risk factors in suicide (Bantjes *et al.,* 2016).

The Health and Economic Consequences of Suicide

Suicide and suicide attempts have far reaching consequences for individuals, families, and communities (National Action Alliance for Suicide Prevention, 2015). It has long been understood that the suicide of a family member, friend, or other emotionally close person can have a powerful and sometimes devastating impact on those left behind (Cain, 1972). The impact of knowing someone who died by suicide, or having lived experience of persons who attempted suicide or had suicidal thoughts, increases the

likelihood of long-term health and mental health consequences ((Bantjes & Mapaling, 2021; Chapman & Dixon-Gordon, 2007). Such individuals may experience ongoing pain and suffering including complicated grief (Mitchell *et al.,* 2004), stigma, depression, anxiety, post-traumatic stress disorder, and are themselves at an increased risk of suicidal ideation and suicide (Cerel *et al.,* 2014).

The financial and occupational effects on those left behind, whilst less discussed, is no less important. Little research has estimated the monetary value of human lives lost to suicide in the African continent and specifically in South Africa. The author found only one peer reviewed article that estimated the monetary value of human lives lost to suicide in the African continent; it suggested a monetary value of International Dollars (Int$) 6,989,963,325 and an average present value of Int$ 92,576 per suicide death (Kirigia *et al.,* 2020). About 31.1 percent of the total monetary value of suicide deaths were borne by high-income and upper-middle-income countries (Group 1), 54.4 percent by LMICs (Group 2), and 14.5 percent by low-income countries (Group 3) (World Data Bank, 2019). The average monetary value per human life lost from suicide deaths was Int$ 234,244 for Group 1, Int$ 109,545 for Group 2 and Int$ 32,223 for Group 3 (Kirigia *et al.,* 2020). The true economic costs are likely higher, as the study did not include monetary figures related to other societal costs such as those associated with the pain and suffering of family members.

The situation is currently bleak in South Africa. According to the latest 2022 World Mental Health report the country has again ranked low on mental health (WHO, 2022), though it does have some suicide prevention activities. The annual Teen Suicide Prevention Week, for example, takes place at the start of the academic year and provides support to parents, teachers, and learners. Campaigns are also run by SADAG, Africa's largest mental health support and advocacy group. It is involved in counselling, outreach, and capacity building work throughout South Africa, and it runs the country's only suicide helpline. These efforts help and provide evidence on the gaps that need to be filled (WHO, 2014), but are inadequate in effectively addressing suicide.

Continuous community engagement and sustained activities are important in the promotion of public and individual health, to which end some countries have successfully established health promotion foundations (Vathesatogkit *et al.,* 2011). Foundations have been proven to achieve both health and development outcomes across population groups (Mail & Guardian, 2011) but despite researchers advocating similarly (Perez *et al*.,

2013, Coe & de Beyer, 2014), South Africa has yet to establish one. It could play a vital role in strategic thinking and advocacy on health promotion and social development issues, support much needed research, and create partnerships with government departments, NGOs, academics, user groups and others to investigate risk factors in developing an effective action plan.

South Africa's healthcare system, in both its parallel public and private sectors, is riddled with deficiencies (South African Medical Research Council, 2015, WHO, 2022). Public health care is provided in a tiered system (Department of Health, 2012) but mental health services remain inadequate in both sectors. Approximately 80 percent of the South African population is serviced by the public healthcare sector (Benatar, 2013), which is inundated and faces the multiple challenges of a high burden of disease, a lack of skilled staff, and inadequate resources and infrastructure (Coovadia *et al*., 2009, Chopra *et al*., 2009). South Africans in poorer areas especially struggle to access healthcare. Reportedly, of the increasing numbers of people succumbing to mental health illness, only an estimated 27 percent are receiving treatment (Mail & Guardian, 2023). This hampers the vision of improving mental health among South Africans as espoused in the National Mental Health Policy and Strategic Framework 2013 – 2020 (Department of Health, 2013). It was meant to indicate a shift towards the provision of person-centred mental health care that is integrated into primary health care, but the inadequacies of the health system have obstructed such integration (Marais & Petersen, 2015).

In South Africa, as in many LMICs, only a small proportion of the health budget goes to mental health (WHO, 2022), with most of the available mental health funding allocated to psychiatric hospitals. This leaves little for community-based services (Mail & Guardian, 2023). Community-based care, considered a frontline defence of any healthcare system, is missing in South Africa. It has been reported that by the time mental health disorders require psychiatric hospitalisation, South Africa's mental health system has already failed in its duty of care to the patient at primary health care level as well as in community-based interventions (Mail & Guardian, 2023). Indeed, the South African Society of Psychiatrists (SASOP) has urged health care providers to better manage follow-up care for those at risk of suicide, rather than focusing primarily on one-off interventions at crisis point (SASOP, 2020).

Since it is not compulsory, neither private nor public healthcare sectors have been providing follow-ups and ongoing treatment for high-risk or vulnerable persons (SASOP, 2020). Such treatment is considered critical

in most healthcare systems. Ongoing therapeutic contact with high-risk patients is a very important strategy in suicide prevention (Nordentoft & Erlangsen, 2019). Of concern is that the ongoing outpatient treatment is not supported by most medical aids and the proposed National Health Insurance (NHI). The NHI is meant to provide access to quality health care for all South Africans, but it does not make provision for outpatient psychiatric care (Daily Maverick, 2022).

Public sector psychiatric services currently only have the capacity to treat those patients with chronic serious mental disorders, such as psychotic disorders, or to provide treatment after acute suicide attempts (SASOP, 2020). Psychiatric services, where provided, are only for in-patient care for chronic and severe mental disorders like mania or psychotic disorders. In addition, depression and suicidality are not included on the chronic disease list in private healthcare, and only acute treatment at the point of crisis, in averting a suicide, is covered by medical aids. In the public sector, once the suicidal crisis is averted, there is nowhere to refer a patient for follow-up care. There is also a general shortage of mental health specialists, such as psychologists and psychiatrists in South Africa. Most of the available specialists are concentrated in the private health sector, accessible only to those who can afford medical aids or medical insurance. There are very few specialists available to the broader population who are wholly dependent on the public health system (WHO, 2022).

What the Literature Tells Us

It is clear, firstly, that suicide places a heavy burden on the emotional suffering that families and communities experience, as well as on the economy. A close connection between exposure to death by suicide and the subsequent risk to people exposed to that suicide has been identified (Pittman *et al.,* 2014). The calculated economic costs associated with medical care and lost productivity is substantial. There are therefore real financial advantages for an LMIC like South Africa to reduce suicide. An effective NSPS must include the aftereffects of suicide in its planning, funding, and implementation of responses to a death by suicide (National Action Alliance for Suicide Prevention, 2015).

Secondly, the evidence reinforces the case for increased investment in addressing systemic problems in the provision of mental health care and identifying contextual problems that make suicide prevention challenging in the healthcare sector (Goldstone *et al.,* 2018), and ensuring comprehensive coverage of promotive, preventive, and rehabilitative mental health services.

Together with funding, widespread competencies in mental health are a vital component of a well-functioning mental health system. In tiered systems of care like the South African, diverse providers including specialists, general health care providers, community providers and individuals, must adopt different but complementary roles that use resources efficiently and make care more widely available. Timely and effective access to health care is essential to reduce the risk of suicide (Cho *et al*., 2013). Competencies in mental health need to be maintained by care providers at each tier, ranging from individuals and community providers to general and specialist health care workers (WHO, 2022). It is vital for mental health staff working in psychiatric hospitals to develop skills to efficiently work in community-based settings and for primary care staff to be trained in detecting mental health conditions and providing care. Research into a comprehensive care system has highlighted how task-sharing is not only cost-effective (Patel *et al*., 2018) but can improve health and social outcomes for people living with mental health conditions, especially in LMICs (van Ginneken *et al*., 2021). One study in KwaZulu-Natal, South Africa, found that task-sharing with competent non-specialists substantially reduces the number of health care providers needed to reduce mental health care gaps at primary level and at minimal additional cost (Petersen *et al*., 2011).

Thirdly, it is widely accepted that there is no single cause or stressor that sufficiently explains a suicidal act and that several risk factors act cumulatively to increase an individual's vulnerability to suicidal behaviour, but also that not everyone with a mental disorder necessarily dies from suicide and the mere presence of risk factors does not necessarily lead to suicidal behaviour. Effective interventions are therefore crucial to mitigating identified risk factors, including, at the individual level, a history of depression and other mental illnesses, hopelessness, substance abuse, certain health conditions, previous suicide attempt, violence, victimisation and perpetration, and genetic and biological determinants (WHO, 2014). At the relationship level, risk factors include violent relationships, feelings of isolation and lack of social support, a family or loved one's history of suicide, and financial and academic stress. The community level risk factors include inadequate community connectedness, barriers to health care (for example, lack of access to providers and medications) and, at the societal level, the availability of lethal means of suicide, and stigma associated with seeking help and mental illness. The literature also highlights that many individuals who are depressed, attempt suicide, or have other risk factors, do not necessarily die by suicide but may require ongoing support (Owens, 2002;

Olfson *et al.,* 2015). The relevance of each risk factor can vary by age, race (Flisher *et al.,* 2004), gender, sexual orientation, residential geography, and socio-cultural and economic status (Dahlberg *et al.,* 2002). Protective factors can limit suicidal behaviour and ideation and enhancing such factors is an important aim of any comprehensive suicide prevention response. They include effective coping and problem-solving skills, and strong and supportive relationships with partners, friends, and family; connectedness to school, community, and other social institutions; availability of quality and ongoing physical and mental health care; and restricted access to lethal means including pesticides, firearms, and certain medications (Stone *et al.,* 2017).

Fourthly, reductions in suicide cannot be prevented by any single strategy or approach (Silverman & Maris, 1995). To tackle suicide prevention in a way that is meaningful to the South African context, a NSPS must encompass multiple levels of focus across the individual, relationship, family, community, and societal-levels and across both private and public sectors (WHO, 2018; US Department of Health and Human Services, 2013). Thus, many interventions to promote and protect mental health need to be delivered in non-health settings and the health sector must support colleagues across sectors as they deploy effective interventions. This involves working to empower people and to build competencies and resilience in, for example, schools, prisons, businesses, and communities. A broad range of providers who are not mental health specialists, like lay volunteers, community workers, policy officers and prison staff, are required to develop competencies to deliver basic mental health interventions (Kohrt *et al*., 2018). Interventions must be geared towards effectively supporting the social inclusion of people living with mental health conditions. Such an approach will ensure a rights-based, person-centred, recovery-oriented care and support (WHO, 2022). This will help provide a holistic framework for viewing and understanding context-specific suicide risk and protective factors (Stone *et al.,* 2017). Finally, the literature suggests that suicide is preventable if timely, comprehensive, evidence-based interventions are developed and implemented (WHO, 2014).

Multiple Strategies for a NSPS

Three primary kinds of evidence-based intervention can be identified - universal, selective, and indicated interventions (Mrazek & Haggerty, 1994, Gordon, 1983). Universal prevention strategies are highly diverse and aimed at establishing supportive environments for mental health. Examples include the removal of barriers to health care and increasing access

to help, strengthening protective processes such as social support, and reshaping the determinants of mental health across individual, social, and structural spheres of influence. Universal strategies are consequently designed to reach and shift the risk profile of an entire population to boost overall well-being. Such interventions may be delivered at the community level, by local leaders or health care providers, or at higher levels, through for example national poverty reduction policies and labour laws.

Universal interventions often combine different strategies. For example, at the individual level interventions may be aimed at developing physical, emotional, and cognitive skills by adopting parenting or learning programs. Additionally, building competence though essential life skills for communication, critical thinking, decision making, problem-solving, self-awareness, empathy and care for others is essential. Building individual competence also includes interventions aimed at supporting behavioural changes that undermine both physical and mental health. For example, low levels or the absence of physical activity (Forsman *et al*., 2011), tobacco smoking, hazardous alcohol use, drug use (Murray *et al*., 2020), poor sleep and unhealthy dietary patterns are all associated with an increased risk of both physical and mental health conditions (Firth *et al*., 2020). Raising health literacy about these toxic behaviours are identified acceptable public health strategies (WHO, 2019b).

Interventions must also be aimed at addressing behaviours that shield against stress whilst building individual resilience. Developing resilience does not mean never experiencing difficulty or distress, it rather means building capacity to deal with stress and adversity to effectively adapt to life stressors. Some empowerment initiatives at individual level include developing the ability to have the confidence, choice, and control over one's own life. This includes having a sense of respect, purpose, and identity together with building feelings of mastery and justice over one's life and life choices including in all aspects of one's mental health care (WHO, 2022).

At the social level building social resources for mental health involves creating opportunities throughout life to foster positive relationships and social support across communities (including pre-school, school, and the labour market), within families (Devries *et al.,* 2011) and among peers (Putnam *et al.,* 1993). At structural levels, changes for mental health involve reshaping the underlying conditions of daily life to enhance community capacity for well-being. Such interventions may combine life skills training (individual capital) with local events for older adults (social capital) and mass anti-stigma campaigns (structural changes) (WHO, 2022). Included could be

measures to reduce financial insecurity, poverty, and income inequality (McGuire, 2022). Structural changes go far beyond mental health promotion and protection, but all can have an important effect on mental health (WHO, 2004) and any model of health promotion and universal prevention that fails to tackle the structural determinants of mental health will be limited in its reach.

Selective and indicated prevention strategies are designed to reduce risk in one or more groups of individuals who are at a high risk of experiencing mental health conditions. This could be because of the demographics, local contexts, and circumstances in which they find themselves (selective prevention) or because they are already experiencing symptoms of what may be an emerging mental disorder (indicated prevention). At-risk people may include people living in poverty or with chronic health conditions, people with disabilities, youth exposed to violence or neglect, minority groups, indigenous peoples, refugees, older adults and LGBTIQ+ people. Selective prevention is often helpful to specific age groups. For example, interventions during developmentally sensitive periods in the life of young children and youth may be very beneficial whilst interventions to expand social contacts and activities are crucial to protecting the mental well-being of older adults (McDaid, 2015).

Indicated prevention strategies target specific vulnerable individuals within the population, including persons displaying early signs of suicide tendencies, and those who have made a suicide attempt or present signs of a mental health condition but do not meet the criteria for a formal diagnosis of mental disorder. This would include people with elevated levels of depressive symptoms. Indicated interventions can include psychotherapies such as cognitive behaviour therapy and interpersonal therapy, both of which have been found to delay or prevent the onset of depression (Cuijpers *et al.,* 2021). It would also aid persons displaying symptoms of anxiety (Moreno-Peral, 2017). Helpful interventions could include self-help materials (WHO, 2022), whether through books or digital programs, or early interventions by trained lay counsellors (Correll *et al.,* 2018).

In sum, the evidence indicates that effective integration, promotion, and prevention of mental health is a multisectoral endeavour involving various stakeholders. The reshaping of various individual, social, and structural factors influencing mental health require solutions that lie beyond the health sector.

Developing an Appropriate NSPS

An effective NSPS must be approached in a systematic and strategic way (WHO, 2012). It requires clearly identified objectives that are understandable, measurable, achievable, and contextual (Government of Guyana, 2014). In addition, the strategy must be complementary and have a synergistic impact at different levels (WHO, 2014). Efforts must be aimed at impacting community and societal levels, as well as individual and relationship levels (Stone *et al.,* 2017). This study has highlighted that suicide often remains under-reported, that there is a clear need for systems to improve the availability and quality of data, and that the epidemiological data on suicide and suicide behaviour remains limited and somewhat fragmented. A systematic approach for gathering data in a sustained manner is consequently key to effectively addressing suicide and suicide attempts (WHO, 2014, 2016). An immediate step in the strategic planning process is for government to conduct a comprehensive situation analysis, starting with the available data, and to invest in a national SWOT (strengths, weaknesses, opportunities, and threats) analysis to enable it to effectively describe the problem and its context (Government of Namibia, 2011). The analysis must identify the extent of the problem in a particular geographical area, whether that is the entire country or a specific subregion and must allow answers to questions about who is dying by suicide, attempting suicide, and having thoughts of suicide. Since suicide ideation, thoughts, attempts, and deaths vary by gender, race/ethnicity, age, occupation, and other important population characteristics (Centers for Disease Control and Prevention, 2021), analysis would need to consider these specific factors.

As this study has highlighted, dynamic factors can change suicide risk. A person's normal coping mechanisms, for example, may become limited during a crisis or when faced with increased stresses thereby restricting their ability to resolve problems and cope effectively. Suicide risks change according to the number and intensity of key risk and protective factors experienced (Turecki, 2014). Ideally, the availability of multiple strategies and approaches tailored to the social, economic, cultural, and environmental context of individuals and communities is desirable. When achieved, this may increase the likelihood of removing barriers to supportive and effective health care and provide opportunities to develop individual and community resilience (Hawton *et al.,* 2016; US Department of Health and Human Services, 2013).

The SWOT analysis must accordingly determine the risk and protective factors associated with suicide, the methods people are most often

using, the circumstances under which suicide deaths and attempts occur, what if any community resources are used to identify and assist people at risk of suicide, and appropriate methods to address mental health and well-being. Answers to the questions on a large scale will translate to a solid understanding of suicide in each community and will allow for the determination of targeted and evidence-based responses. This information will also serve as a foundation to engage with stakeholders around issues of prevention and to determine what efforts are needed. Research will also play an important role in understanding the risk and protective factors as well as in identifying vulnerable persons in each context (WHO, 2018). Since access to human and financial resources is central to the success of any public health intervention (Frieden, 2014), an assessment of resources should likewise be included in the situation analysis and the allocation of resources included in the NSPS. An inadequate estimation of funding can hinder the full implementation of interventions (Government of the United Kingdom, 2012).

An important aspect to the situation analysis and key to an effective NSPS is the identification of barriers. A poor understanding of suicide in the national or local context will make it difficult to develop clear goals and actions relevant to the needs of communities. A good NSPS will list all the barriers with the concomitant proposed solutions to systematically remove them (WHO, 2018b). Without the identification of barriers, national strategies will face challenges during implementation (WHO, 2018). For example, a vital barrier to suicide prevention is a lack of understanding on stigmas or taboos linked to suicide and its prevention within a community (Government of the United Kingdom, 2012). Those who have lived experiences often face considerable stigma within their communities, which may prevent them from seeking help. Stigma can consequently become a barrier to accessing suicide prevention services by reducing a willingness to utilise health-care resources (WHO, 2018). It will also affect the quality of care provided by health-care workers. If not identified and addressed barriers will have an impact on the effectiveness of national strategies (Government of Ireland, 2015) as well as negatively impacting the recording and reporting of suicidal behaviour.

The suggested guidelines are in no way exhaustive or listed in any preferential order. The guidelines provided may need to occur before or simultaneously with others, and during the analysis stage other elements identified may well need to be included or excluded. The situation analysis can then serve as a guide for a preferential order within a South African

context. Decisions regarding inclusions and exclusions for a national strategy must be contextually informed as this is fundamental to developing an appropriate and effective NSPS.

Countries like South Africa that currently do not have a NSPS must be guided by the WHO Mental Health Action Plan initially adopted in May 2013 (WHO, 2013b) and in 2019 updated and extended until 2030 (WHO, 2021a). The updated Plan builds upon its predecessor and sets out clear actions for member states and for international, regional, and national partners to promote mental health and well-being for all. While it includes new and updated indicators and implementation options, the original four major objectives remain unchanged: more effective leadership and governance for mental health; the provision of comprehensive, integrated mental health and social care services in community-based settings; the implementation of strategies for promotion and prevention; and strengthened information systems, evidence, and research. South Africa is therefore mandated to protect those at-risk and to achieve universal coverage for mental health services.

Knowledge and understanding around suicidal behaviour have increased considerably in recent years Researchers have identified the importance of the interplay between biological, psychological, social, and environmental factors in determining suicidal behaviours (WHO, 2014; Chai *et al*., 2022). Cultural factors in suicide risk have also become apparent, with culture having roles both in increasing risk and in protection from suicidal behaviour (Kirmayer, 2022). Epidemiology has helped identify many risk and protective factors for suicide both in the general population and in vulnerable groups (WHO, 2014). The alignment and co-ordination of prevention efforts must include partners across a wide range of disciplines, sectors, and institutions. Identifying stakeholders is a key element to the development of a NSPS. The different actions and contributions from each can contribute to effective prevention. Multisectoral collaboration is more likely to succeed when there is transformative leadership that will drive prevention efforts. In developing an appropriate NSPS, South Africa must involve different actors and disciplines working on suicide prevention, such as different ministries, health administrations, non-governmental and non-profit organizations, universities, schools (WHO, 2014), law, businesses, the media, politics, employers, researchers, and civil society at national, provincial and community levels (WHO, 2018b).

South African politicians and parliamentarians are key stakeholders who ultimately influence public policy. In addition, ministers of health play

an important role in bringing together various stakeholders from different sectors. Implementing policies addressing suicide prevention in South Africa will be a solid indicator of strong will and commitment. A lack of commitment and leadership in developing a NSPS will translate to strategies being partially implemented or not at all. Political commitment, leadership, and willingness to engage in key issues are essential for ensuring that suicide prevention receives the resources and attention that it requires from national, regional, and local leaders.

Collaboration in mental health is not only the work of policymakers within government, but those individuals, organizations, and communities who have a role in developing, implementing, and enforcing policies, laws, and regulations within their institutions, whether this is done in specific provinces, schools, or the workplace environment. These entities can implement health and wellness policies that improve the overall well-being of students, staff, and other individuals. A typical example would include the case of higher education institutions that are in a unique position to develop and implement programs and policies to treat mental health issues and to support overall well-being on campuses. Whilst many higher education institutions in South Africa have wellness policies in place, these are currently not mandatory and there is no reporting or feedback mechanisms on implementation and efficacy.

In recognition that health and well-being is created by a multitude of factors beyond health care, "health in all policies" is an established collaborative approach that integrates the health implications of public policies across sectors (WHO, 2013a). Health in all policies emphasises the consequences of social and economic policies on population health, helping to strengthen the accountability of policymakers for health impacts at all levels of decision-making. Applying a "health in all policies" approach in a NSPS is essential to remodel relevant social and economic policies and it may also be effective in identifying gaps in evidence and achieving health equity (WHO, 2022).

Employers are in a key position to support evidence-based workplace wellness efforts and to implement policies and programs that foster health, wellness, and safety among their employees. Employers can provide tailored, confidential counselling to promote life skills, combat depression, address substance-use problems and ensure access to healthy foods. They can further enhance the overall emotional well-being of employees by providing health coverage for clinical preventive services or by protecting their workers from illness and injury. These initiatives will

contribute to the improvement of the health of the country's workforce whilst encouraging economic growth and reducing health-care expenditures.

The healthcare sector is a crucial partner in supporting mental health for all (WHO, 2022). It is can build partnerships with government, the private sector and crucially among people with lived experience. Such people are important agents of change (WHO, 2022; United Nations, 2020), vital to improving mental health systems, services, and outcomes (Thornicroft & Tansella, 2005). The sector can provide care at community levels through qualified practitioners who offer a range of equitable and rights-based services, irrespective of age, gender, socio-economic status, race, ethnicity, disability, or sexual orientation. A multisectoral approach to delivering care is needed because effectively supporting people with mental health conditions often extends beyond clinical care alone. Included in such an approach would be the welfare, housing, employment, education, and legal sectors.

A partnership with communities is essential. Peer networks (Hilario *et al*., 2021), NGOs (Thara & Patel, 2010), traditional healers (Bantjes *et al*., 2017) and faith-based organizations (Bazley & Pakenham, 2019) can play a crucial role in suicide prevention. Their roles may range from advocacy to end stigma, to training and capacity building, to the provision of social support to vulnerable individuals. Partnership can also allow for follow-up care and reduce the need for treatment and recovery services through the health sector alone.

The process of developing a suicide prevention strategy offers unique opportunities to increase awareness about suicide. Responsible media reporting can assist in raising awareness about suicide, its prevention and mental health generally, and about stigma reduction more specifically (Government of Ireland, 2015). The involvement of the media in awareness efforts will open conversations and generate more sustained involvement from stakeholders and from communities (Zalsman *et al.,* 2016). Certain it is that irresponsible media reporting has been associated with suicidal behaviour. Media practices are inappropriate when they gratuitously cover celebrity suicides, report unusual methods of suicide or suicide clusters, show pictures or information about the method used, or normalise suicide as an acceptable response to adversity. The reporting of celebrity deaths by suicide, for example, appears to have had impact on total suicides in the general population, but especially on students and young people (Niederkrotenthaler *et al*., 2020, Stack, 2005, McTernan *et al*., 2018, Quarshie *et al*., 2020). Inappropriate media reporting practices can sensationalize suicide,

increasing the risk of "copycat" suicides among vulnerable people. It can expose persons experiencing suicidal crises to previously not thought of suicide methods, increasing the chance of copying the suicidal behaviour (Daine *et al*., 2013). Internet and social media sites have played a supplementary role in suicide communications and have been implicated in both inciting and facilitating suicidal behaviour (Westerlund *et al*., 2012). Private individuals can readily broadcast uncensored suicidal acts and information which can be easily accessed through both media (WHO, 2014).

WHO has recognised the harmful impacts of such media and has developed guidelines for the responsible reporting of suicide by the media (WHO & International Association for Suicide Prevention, 2017). These fall outside the scope of this paper, but such guidelines are now a standard component of many national and regional suicide prevention strategies, and the reporting of suicidal behaviour in press codes of conduct for journalists and within a NSPS warrants serious consideration (McTernan *et al*., 2018).

Towards Effective Implementation

The effectiveness of a strategy will be strongly dependent on how well it is implemented, as well as the partners involved and the communities within which they are implemented (WHO, 2018). Health-care providers, practitioners and administrators become particularly important. In many communities, public health providers are typically responsible for efforts to prevent both injury and suicide, so these are key players in suicide prevention within the health-care network (Centers for Disease Control and Prevention, 2021; Frieden, 2014). Practitioners in the field are in an ideal position to assess the needs of the communities they work in and to contribute to decisions around the approaches that are best suited to their context (Stone *et al.,* 2017). Community and faith-based organizations can also assist as they are already engaged in human services, youth, and community development at grassroots level. Such organisations can therefore provide valuable partnerships in reaching out to residents, establish credibility with community members, offset costs and access human and financial resources.

The establishment of a specific mechanism for multisectoral collaboration is key to developing both an effective NSPS and an action plan for implementation. Such a mechanism will make prevention compulsory as a multisectoral priority that involves not only the health sector, but other relevant sectors as discussed. This offers the most practical option for bringing different stakeholders together for mental health promotion and

protection, especially when it comes to addressing the structural factors that influence mental health.

A NSPS and its action plan for implementation can assist with developing the most appropriate combination of effective evidence-based interventions that should include both universal interventions that target the general population (Government of Bhutan, 2015), and selective interventions that focus on subpopulations that are at a higher risk of suicide. Selective interventions can be implemented according to the contribution of factors to the overall burden of suicide including socio-demographic characteristics, geographical location, or the prevalence of mental and substance use disorders (US Department of Health and Human Services, 2013). Interventions should be aimed at persons who are already known to be vulnerable to suicide or who have previously attempted suicide (WHO, 2018; Government of Bhutan, 2015). A comprehensive suicide prevention program, to be effective, must employ a combination of universal, selective, and indicated interventions (Hawton *et al.,* 2016).

The monitoring and evaluation of interventions is key to ensuring accountability and effective implementation (US Department of Health and Human Services, 2013). High-quality case registration and surveillance systems that allow for feedback to inform improvements are essential for research activities but must also inform monitoring and evaluation (Government of Bhutan, 2015; Government of the United Kingdom, 2012). Monitoring offers opportunities to critically examine the outcome of interventions in terms of the stated objectives but must be continuous if it is to guide changes to strategy (WHO, 2018).

Conclusion

The development of a locally appropriate suicide prevention program is necessary to reduce suicide rates in South Africa. Without this, efforts are likely to abate, suicide prevention will remain neglected, and rates will escalate. Government must take the lead in developing a comprehensive multisectoral prevention strategy for the population as a whole and for vulnerable persons especially. A NSPS that recognises the social, psychological, and cultural impacts of suicide is important and will indicate government's clear commitment to tackling suicide by providing leadership on evidence-based strategies for its prevention.

References

Australian Bureau of Statistics. (2020, October 23). *Causes of Death, Australia, 2019*. Australian Bureau of Statistics. Retrieved May 5, 2022, from, https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/2019#:%7E:text=There%20were%20169%2C301%20registered%20and,males%2C%2084.8%20for%20females)

Aabi, A. A., Oladimeji, O. K., & Adeniyi, O. V. (2021). Prevalence and factors associated with suicidal ideation amongst college students in the Nelson Mandela Bay Municipality, South Africa. *South African Family Practice*, *63*(1), 1–9. https://doi.org/10.4102/safp.v63i1.5195

Baiden, P., Kuuire, V. Z., Shrestha, N., *et al*. (2018). Bullying victimization as a predictor of suicidal ideation and suicide attempt among senior high school students in Ghana: Results from the 2012 Ghana Global School-Based Health Survey. *Journal of School Violence*, *18*(2), 300–317. https://doi.org/10.1080/15388220.2018.1486200

Bantjes, J. R., Kagee, A., McGowan, T., *et al*. (2016). Symptoms of posttraumatic stress, depression, and anxiety as predictors of suicidal ideation among South African University students. *Journal of American College Health*, *64*(6), 429–437. https://doi.org/10.1080/07448481.2016.1178120

Bantjes, J., Swartz, L., & Cembi, S. (2017). "Our lifestyle is a mix-match": Traditional healers talk about suicide and suicide prevention in South Africa. *Transcultural Psychiatry*, *55*(1), 73–93. https://doi.org/10.1177/1363461517722065

Bazley, R., & Pakenham, K. (2019). Perspectives on suicide and suicide prevention among members of Christian faith-based organizations. *Spirituality in Clinical Practice*, *6*(1), 5–14. https://doi.org/10.1037/scp0000179

Benatar, S. R. (2013). The challenges of health disparities in South Africa. *South African Medical Journal*, *103*(3), 154. https://doi.org/10.7196/samj.6622

Cain, A. C. (1972). *Survivors of Suicide*. Springfield, Ill., Thomas.

Centers for Disease Control and Prevention. (2021, December 2). *Web-based Injury Statistics Query and Reporting System*. Centers for Disease Control and Prevention. Retrieved May 17, 2022, from https://www.cdc.gov/injury/wisqars/index.html

Centers for Disease Control and Prevention. (2022a, June 15). *Suicide Statistics*. American Foundation for Suicide Prevention. Retrieved July 20, 2022, from https://afsp.org/suicide-statistics/

Centers for Disease Control and Prevention. (2022b, July 5). *Facts About Suicide*. Centers for Disease Control and Prevention. Retrieved July 23, 2022, from https://www.cdc.gov/suicide/facts/index.html#:%7E:text=Suicide%20is%20death%20caused%20by,a%20result%20of%20their%20actions.

Cerel, J., McIntosh, J. L., Neimeyer, R. A., *et al*. (2014). The continuum of "survivorship": definitional issues in the aftermath of suicide. *Suicide and Life-Threatening Behavior*, *44*(6), 591–600. https://doi.org/10.1111/sltb.12093

Chang, S. S., Stuckler, D., Yip, P., *et al*. (2013). Impact of 2008 global economic crisis on suicide: Time trend study in 54 countries. *BMJ*, *347*(sep17 1), f5239. https://doi.org/10.1136/bmj.f5239

Chapman, A. L., & Dixon-Gordon, K. L. (2007). Emotional antecedents and consequences of deliberate self-harm and suicide attempts. *Suicide and Life-Threatening Behavior*, *37*(5), 543–552. https://doi.org/10.1521/suli.2007.37.5.543

Chai, Z. C., Jin Yi, V. H., Yuxuan, T., *et al*. (2022). A systematic review on suicide and youth: Biological, psychological, social and environmental risk factors. *International Journal of Academic Research in Business and Social Sciences*, *12*(7). https://doi.org/10.6007/ijarbss/v12-i7/13974

Cho, J., Won Young, L., Ki Hak Moon, S., *et al*. (2013). Medical care utilization during 1 year prior to death in suicides motivated by physical illnesses. *Journal of Preventive Medicine and Public Health*, *46*(3), 147–154. https://doi.org/10.3961/jpmph.2013.46.3.147

Chopra, M., Lawn, J. E., Sanders, D., *et al*. (2009). Achieving the health Millennium Development Goals for South Africa: Challenges and priorities. *The Lancet*, *374*(9694), 1023–1031. https://doi.org/10.1016/s0140-6736(09)61122-3

Coe, G., & de Beyer, J. (2014). The imperative for health promotion in universal health coverage. *Global Health: Science and Practice*, *2*(1), 10–22. https://doi.org/10.9745/ghsp-d-13-00164

Coovadia, H., Jewkes, R., Barron, P., *et al*. (2009). The health and health system of South Africa: Historical roots of current public health

challenges. *The Lancet*, *374*(9692), 817–834.
https://doi.org/10.1016/s0140-6736(09)60951-x

Correll, C. U., Galling, B., Pawar, A., *et al*. (2018). Comparison of early
intervention services vs treatment as usual for early-phase
psychosis. *JAMA Psychiatry*, *75*(6), 555.
https://doi.org/10.1001/jamapsychiatry.2018.0623

Crosby, A., Ortega, L., & Melanson, C. (2011, February 1). *Self-Directed
Violence Surveillance; Uniform Definitions and Recommended
Data Elements*. Centers for Disease Control and Prevention.
Retrieved May 12, 2022, from,
https://stacks.cdc.gov/view/cdc/11997

Cuijpers, P., Pineda, B.S., Quero, S., *et al*. Psychological interventions to
prevent the onset of depressive disorders: A meta-analysis of
randomized controlled trials. (2021). *Clinical Psychology
Review*, *83*, 101955. https://doi.org/10.1016/j.cpr.2020.101955

Dahlberg, L. L., & Krug, E. G. (2006). Violence: A global public health
problem. *Ciência & Saúde Coletiva*, *11*(2), 277–292.
https://doi.org/10.1590/s1413-81232006000200007

Daine, K., Hawton, K., Singaravelu, V., *et al*. (2013). The power of the
web: A systematic review of studies of the influence of the internet
on self-harm and suicide in young people. *PLoS ONE*, *8*(10),
e77555. https://doi.org/10.1371/journal.pone.0077555

Daily Maverick. (2022, April 17). *The Controversial National Health
Insurance Bill has Serious Constitutional and Human
Rights Implications*. Retrieved May 18, 2023, from,
https://www.dailymaverick.co.za/article/2022-04-21-the-
controversial-national-health-insurance-bill-has-serious-
constitutional-and-human-rights-implications/

de Freitas, L. (2022, February 17). *Teens Most At-Risk Group when it
Comes to Suicide in SA, Warn Experts. Here's What Parents Can
Do*. Drum. Retrieved July 24, 2022, from,
https://www.news24.com/drum/advice/parenting/teens-most-at-
risk-group-when-it-comes-to-suicide-in-sa-warn-experts-heres-
what-parents-can-do-20220217

Department of Health. (2012, March 2). *National Health Act, 2003:
Regulations relating to categories of hospitals (Government
Gazette No. R. 185)*. Pretoria: Department of Health; 2012.

Department of Health. (2013). *National Mental Health Policy Framework
and Strategic Plan 2013–2020.* Pretoria: Department of Health.

Devries, K., Watts, C., Yoshihama, M., *et al*. (2011). Violence against women is strongly associated with suicide attempts: Evidence from the WHO multi-country study on women's health and domestic violence against women. *Social Science & Medicine*, *73*(1), 79–86. https://doi.org/10.1016/j.socscimed.2011.05.006

Farace, Dominic J. (comp.) (1997). *GL'97 Proceedings: Third International Conference on Grey Literature: Perspectives on the Design and Transfer of Scientific and Technical Information.* Amsterdam: TransAtlanctic

Firth, J., Solmi, M., Wootton, R. E., *et al*. (2020). A meta-review of "lifestyle psychiatry": the role of exercise, smoking, diet and sleep in the prevention and treatment of mental disorders. *World Psychiatry*, *19*(3), 360–380. https://doi.org/10.1002/wps.20773

Florence, C., Simon, T., Haegerich, T., *et al*. (2015). Estimated lifetime medical and work-loss costs of fatal injuries - United States, 2013. *Morbidity and Mortality Weekly Report*, *64*(38), 1074–1077. https://doi.org/10.15585/mmwr.mm6438a4

Forsman, A. K., Nordmyr, J., & Wahlbeck, K. (2011). Psychosocial interventions for the promotion of mental health and the prevention of depression among older adults. *Health Promotion International*, *26*(suppl_1), i85–i107. https://doi.org/10.1093/heapro/dar074

Frieden, T. R. (2014). Six components necessary for effective public health program implementation. *American Journal of Public Health*, *104*(1), 17–22. https://doi.org/10.2105/ajph.2013.301608

Government of Bhutan. (2015). *Suicide Prevention in Bhutan - A Three Year Action Plan (July 2015 - June 2018)*. Royal Government of Bhutan. Retrieved July 24, 2022, from, https://www.mindbank.info/item/6176

Government of Guyana. (2014). *National Suicide Prevention Plan 2015–2020*. Ministry of Public Health: Guyana. Retrieved July 20, 2022, from https://www.mindbank.info/item/6321

Government of Ireland. (2015). *Connecting for Life: Ireland's National Strategy to Reduce Suicide 2015–2020*. Department of Health: Government of Ireland. Retrieved July 24, 2022, from, http://www.mindbank.info/item/5640

Goldstone, D., Bantjes, J., & Dannatt, L. (2018). Mental health care providers' suggestions for suicide prevention among people with substance use disorders in South Africa: A qualitative study.

Substance Abuse Treatment, Prevention, and Policy, *13*(1), 1–12. https://doi.org/10.1186/s13011-018-0185-y

Gordon, R. S. (1983). An operational classification of disease prevention. *Public Health Reports (Washington, D.C.: 1974)*, *98*(2), 107–109. https://pubmed.ncbi.nlm.nih.gov/6856733/

Government of Namibia. (2011). *National Strategic Plan on Prevention of Suicide in Namibia 2012–2016*. Ministry of Health and Social Services: Namibia. Retrieved July 16, 2022, from, https://www.mindbank.info/item/6272

Government of the United Kingdom. (2012, September 10). *Suicide Prevention Strategy for England*. Government of the United Kingdom. Retrieved June 1, 2022, from, https://www.gov.uk/government/publications/suicide-prevention-strategy-for-england

Govender, S. (2019, October 9). *Violence, Trauma, Financial Instability are Driving South Africans to Suicide*. SowetanLIVE. Retrieved July 17, 2022, from, https://www.sowetanlive.co.za/news/south-africa/2019-10-09-violence-trauma-financial-instability-are-driving-south-africans-to-suicide/

Gvion, Y., & Apter, A. (2012). Suicide and suicidal behavior. *Public Health Reviews*, *34*(2), 1–20. https://doi.org/10.1007/bf03391677

Hassan, I. (2021, September 10). *As South Africa Sees 23 Suicides a Day, Group Offers Help*. World Africa. Retrieved July 2, 2022, from, https://www.aa.com.tr/en/africa/as-south-africa-sees-23-suicides-a-day-group-offers-help/2361110

Hawton, K., Witt, K. G., Salisbury, T. L. T., *et al*. (2016). Psychosocial interventions following self-harm in adults: A systematic review and meta-analysis. *The Lancet Psychiatry*, *3*(8), 740–750. https://doi.org/10.1016/s2215-0366(16)30070-0

Heywood, M. (2021, April 6). *Suicide Nation: We Are Humans, Not Numbers*. Daily Maverick. Retrieved July 14, 2022, from, https://www.dailymaverick.co.za/article/2021-04-06-suicide-nation-we-are-humans-not-numbers/

Hilario, C. T., Kamanzi, J., Kennedy, M., *et al*. (2021). Peer support for youth suicide prevention: A scoping review protocol. *BMJ Open*, *11*(12), e048837. https://doi.org/10.1136/bmjopen-2021-048837

Independent OnLine News. (2022, Feb 23). *Suicide Crisis Soars in SA: A look at Men in the Entertainment Industry who Lost their Lives to*

Suicide. Retrieved May 27, 2023, from, https://www.iol.co.za/lifestyle/health/mind/suicide-crisis-soars-in-sa-a-look-at-men-in-the-entertainment-industry-who-lost-their-lives-to-suicide-63e0db0a-536e-4fe8-9d69-ff4ebb82a6ff

Khuzwayo, N., Taylor, M., & Connolly, C. (2018). High risk of suicide among high-school learners in uMgungundlovu District, KwaZulu-Natal province, South Africa. *South African Medical Journal*, *108*(6), 517–523. https://doi.org/10.7196/samj.2018.v108i6.12843

Kinyanda, E., Wamala, D., Musisi, S., *et al*. (2011). Suicide in Urban Kampala, Uganda: A preliminary exploration. *Afr Health Sci*, *11*(2), 219–227. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3158523/

Kirigia, J. M., Muthuri, R. D., & Muthuri, N. G. (2020). The monetary value of human lives lost to suicide in the African continent: Beating the African war drums. *Healthcare*, *8*(2), 84–104. https://doi.org/10.3390/healthcare8020084

Kirmayer, L. J. (2022). Suicide in cultural context: An ecosocial approach. *Transcultural Psychiatry*, *59*(1), 3–12. https://doi.org/10.1177/13634615221076424

Kohrt, B., Asher, L., Bhardwaj, A., *et al*. (2018). The role of communities in mental health care in low- and middle-income countries: A meta-review of components and competencies. *International Journal of Environmental Research and Public Health*, *15*(6), 1279. https://doi.org/10.3390/ijerph15061279

Kootbodien, T., Naicker, N., Wilson, K. S., *et al*. (2020). Trends in suicide mortality in South Africa, 1997 to 2016. *International Journal of Environmental Research and Public Health*, *17*(6), 1850–1866. https://doi.org/10.3390/ijerph17061850

Leenaar, A. A. (1996). Suicide: A multidimensional malaise. *Suicide and Life-Threatening Behavior*, *26*(3), 221–236.

Mail & Guardian. *Rationale for establishing a Health Promotion Foundation*. (2011, November 11). Retrieved May 6, 2023, from, https://mg.co.za/article/2011-11-11-rationale-for-establishing-a-health-promotion-foundation/

Mail & Guardian. *SA Depressingly Low on Mental Health*. (2023, April 30). Retrieved May 11, 2023, from, https://mg.co.za/news/2023-04-30-sa-depressingly-low-on-mental-health/

Marais, D. L., & Petersen, I. (2015). Health system governance to support integrated mental health care in South Africa: Challenges and

opportunities. *International Journal of Mental Health Systems*, *9*(1). https://doi.org/10.1186/s13033-015-0004-z

Mars, B., Burrows, S., Hjelmeland, H., *et al*. (2014). Suicidal behaviour across the African continent: A review of the literature. *BMC Public Health*, *14*(1), 1–14. https://doi.org/10.1186/1471-2458-14-606

Matzopoulos, R., Prinsloo, M., Pillay-van Wyk, V., *et al*. (2015). Injury-related mortality in South Africa: A retrospective descriptive study of post-mortem investigations. *Bulletin of the World Health Organization*, *93*(5), 303–313. https://doi.org/10.2471/blt.14.145771

McDaid, D., Forsman, A., Matosevic, T., *et al*. (2015). *Independence and Mental Wellbeing (Including Social and Emotional Wellbeing) for Older People. Review 1: What are the Most Effective Ways to Improve or Protect the Mental Wellbeing and/or Independence of Older People?* National Institute for Health and Care Excellence. Retrieved May 17, from, https://www.nice.org.uk/guidance/ng32/evidence/evidence-review-1review-of-effects-2242568562

McGuire, J., Kaiser, C., & Bach-Mortensen, A. M. (2022). A systematic review and meta-analysis of the impact of cash transfers on subjective well-being and mental health in low- and middle-income countries. *Nature Human Behaviour*. https://doi.org/10.1038/s41562-021-01252-z

McTernan, N., Spillane, A., Cully, G., *et al*. (2018). Media reporting of suicide and adherence to media guidelines. *International Journal of Social Psychiatry*, *64*(6), 536–544. https://doi.org/10.1177/0020764018784624

Mitchell, A. M., Kim, Y., Prigerson, H. G., *et al*. (2004). Complicated grief in survivors of suicide. *Crisis*, *25*(1), 12–18. https://doi.org/10.1027/0227-5910.25.1.12

Moreno-Peral, P., Conejo-Cerón, S., Rubio-Valera, M., *et al*. (2017). Effectiveness of psychological and/or educational interventions in the prevention of anxiety. *JAMA Psychiatry*, *74*(10), 1021. https://doi.org/10.1001/jamapsychiatry.2017.2509

Mrazek, P. J., & Haggerty, R. J. (Eds.). (1994). *Reducing Risks for Mental Disorders: Frontiers for Preventive Intervention Research*. Institute of Medicine (US) Committee on Prevention of Mental Disorders: National Academies Press (US).

Murray, R. M., David, A. S., & Ajnakina, O. (2020). Prevention of psychosis: Moving on from the at-risk mental state to universal primary prevention. *Psychological Medicine*, 1–5. https://doi.org/10.1017/s003329172000313x

National Action Alliance for Suicide Prevention. (2015, April). *Responding to Grief, Trauma, and Distress After a Suicide: U.S. National Guidelines*. Suicide Prevention Resource Center. Retrieved April 4, 2022, from, https://sprc.org/resources-programs/responding-grief-trauma-and-distress-after-suicide-us-national-guidelines

News24. (2022, March 16). *Celebrity Suicides Turn Spotlight on Mental Health.* Retrieved May 27, 2023, from, https://www.news24.com/news24/southafrica/z_archives/local/greytown-gazette/celebrity-suicides-turn-spotlight-on-mental-health-20220315-2

Niederkrotenthaler, T., Voracek, M., Herberth, A., *et al*. (2010). Role of media reports in completed and prevented suicide: Werther v. Papageno effects. *British Journal of Psychiatry*, *197*(3), 234–243. https://doi.org/10.1192/bjp.bp.109.074633

Niederkrotenthaler, T., Braun, M., Pirkis, J., *et al*. (2020). Association between suicide reporting in the media and suicide: Systematic review and meta-analysis. *BMJ*, m575. https://doi.org/10.1136/bmj.m575

Nordentoft, M., & Erlangsen, A. (2019). Suicide - Turning the tide. *Science*, *365*(6455), 725–725. https://doi.org/10.1126/science.aaz1568

Olfson, M., Gerhard, T., Huang, C., *et al*. (2015). Premature mortality among adults with schizophrenia in the United States. *JAMA Psychiatry*, *72*(12), 1172–1181. https://doi.org/10.1001/jamapsychiatry.2015.1737

Orri, M., Ahun, M. N., Naicker, S., *et al*. (2022). Childhood factors associated with suicidal ideation among South African youth: A 28-year longitudinal study of the birth to twenty plus cohort. *PLOS Medicine*, *19*(3), e1003946. https://doi.org/10.1371/journal.pmed.1003946

Owens, D., Horrocks, J., & House, A. (2002). Fatal and non-fatal repetition of self-harm. *British Journal of Psychiatry*, *181*(3), 193–199. https://doi.org/10.1192/bjp.181.3.193

Paez A. (2017). Grey literature: An important resource in systematic reviews. *Journal of evidence-based medicine*, 10.1111/jebm.12265. Advance online publication. https://doi.org/10.1111/jebm.12265

Patel, V., Chisholm, D., Parikh, R., *et al*. (2016). Addressing the burden of mental, neurological, and substance use disorders: Key messages from disease control priorities, 3rd edition. *The Lancet*, *387*(10028), 1672–1685. https://doi.org/10.1016/s0140-6736(15)00390-6

Patel, V., Saxena, S., Lund, C., *et al*. (2018). The Lancet Commission on global mental health and sustainable development. *The Lancet*, *392*(10157), 1553–1598. https://doi.org/10.1016/s0140-6736(18)31612-x

Perez, A. M., Ayo-Yusuf, O. A., Hofman, K., *et al*. (2013). Establishing a Health Promotion and Development Foundation in South Africa. *South African Medical Journal*, *103*(3), 147–149. https://doi.org/10.7196/SAMJ.6281

Perry, J., & Craig, T. K. (2015). Homelessness and mental health. *Trends in Urology & Men's Health*, *6*(2), 19–21. https://doi.org/10.1002/tre.445

Petersen, I., Lund, C., Bhana, A., *et al*. (2011). A task shifting approach to primary mental health care for adults in South Africa: Human resource requirements and costs for rural settings. *Health Policy and Planning*, *27*(1), 42–51. https://doi.org/10.1093/heapol/czr012

Pitman, A., Osborn, D., King, M., *et al*. (2014). Effects of suicide bereavement on mental health and suicide risk. *The Lancet Psychiatry*, *1*(1), 86–94. https://doi.org/10.1016/s2215-0366(14)70224-x

Putnam, R. D., Leonardi, R., & Nonetti, R. Y. (1993). *Making Democracy Work Civic Traditions in Modern Italy*. Princeton University Press.

Quarshie, E.N.B., Andoh-Arthur, J., Asante, K. O., & *et al*. (2020). Online media reporting of suicidal behaviour in Ghana: Analysis of adherence to the WHO guidelines. *International Journal of Social Psychiatry*, 002076402091978. https://doi.org/10.1177/0020764020919787

Qin, P., Agerbo, E., & Mortensen, P. B. (2003). Suicide risk in relation to socioeconomic, demographic, psychiatric, and familial factors: a national register–based study of all suicides in Denmark, 1981–1997. *American Journal of Psychiatry*, *160*(4), 765–772. https://doi.org/10.1176/appi.ajp.160.4.765

Russell, S. T., & Joyner, K. (2001). Adolescent sexual orientation and suicide risk: Evidence from a national study. *American Journal of Public Health*, *91*(8), 1276–1281. https://doi.org/10.2105/ajph.91.8.1276

South African Depression and Anxiety Group. (2017, July 3). *Depression - The Silent Killer*. South African Depression and Anxiety Group. Retrieved July 14, 2022, from, https://www.sadag.org/images/brochures/Depression-Infographics-2017.pdf

Schlebusch, L. (2012). Suicide prevention: A proposed national strategy for South Africa. *African Journal of Psychiatry*, *15*(6), 436–440. https://doi.org/10.4314/ajpsy.v15i6.56

Shilubane, H. N., Bos, A. E., Ruiter, R. A., *et al*. (2015). High school suicide in South Africa: Teachers' knowledge, views and training needs. *BMC Public Health*, *15*(1), 1–8. https://doi.org/10.1186/s12889-015-1599-3

Silverman, M. M., & Maris, R. W. (1995). The prevention of suicidal behaviors: An overview. *Suicide Life Threat Behav*, *25*(1), 10–21. https://pubmed.ncbi.nlm.nih.gov/7631364/

South African Medical Research Council. (2015). *2nd South African National Burden of Disease Study (SANBD2*. World Health Organization. Retrieved May 19, 2023, from https://www.samrc.ac.za/research/intramural-research-units/BOD-2nd-south-african-national-burden-disease-study-sanbd-2

South African Society of Psychiatrists. (2020). *Suicide Risk Needs to be Better Managed in SA to prevent Deaths by Self-harm*. Retrieved April 29, 2023, from, https://www.sasop.co.za/focussing-on-suicide

Stack, S. (2005). Suicide in the Media: A quantitative review of studies based on nonfictional stories. *Suicide and Life-Threatening Behavior*, *35*(2), 121–133. https://doi.org/10.1521/suli.35.2.121.62877

Stark, K., Joubert, G., Struwig, M., *et al*. (2010). Suicide cases investigated at the state mortuary in Bloemfontein, 2003–2007. *South African Family Practice*, *52*(4), 332–335. https://doi.org/10.1080/20786204.2010.10874001

Steenkamp, M., Frazier, L., Lipskiy, N., *et al*. (2006). The national violent death reporting system: An exciting new tool for public health

surveillance. *Injury Prevention*, *12*(2), ii3–ii5. https://doi.org/10.1136/ip.2006.012518

Stone, D. M., Holland, K. M., Bartholow, B., *et al*. (2017). *Preventing Suicide: A Technical Package of Policies, Programs, and Practices*. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. Retrieved May 5, 2022, from, https://www.cdc.gov/violenceprevention/pdf/suicidetechnicalpackage.pdf

Thara, R., & Patel, V. (2010). Role of non-governmental organizations in mental health in India. *Indian Journal of Psychiatry*, *52*(7), 389. https://doi.org/10.4103/0019-5545.69276

Thornicroft, G., & Tansella, M. (2005). Growing recognition of the importance of service user involvement in mental health service planning and evaluation. *Epidemiologia E Psichiatria Sociale*, *14*(1), 1–3. https://doi.org/10.1017/s1121189x00001858

TimesLive. (2022, August 15). *SA Men More Likely to Die by Suicide Than Women: SADAG*. Retrieved May 26, 2023, from, https://www.timeslive.co.za/news/south-africa/2022-08-15-sa-men-more-likely-to-die-by-suicide-than-women-sadag/

Turecki, G. (2014). Epigenetics and suicidal behavior research pathways. *American Journal of Preventive Medicine*, *47*(3), S144–S151. https://doi.org/10.1016/j.amepre.2014.06.011

United Nations. (2020). *Right of Everyone to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health*. Human Rights Council. Retrieved May 15, 2023, from, https://documents-dds-ny.un.org/doc/UNDOC/GEN/G20/094/45/PDF/G2009445.pdf?OpenElement

US Department of Health and Human Services. (2013). *2012 National Strategy for Suicide Prevention: Goals and Objectives for Action: A Report of the U. S. Surgeon General and of the National Action Alliance for Suicide Prevention*. Human Services, US Department of Health and Human Services. Retrieved May 20, 2022, from, https://www.ncbi.nlm.nih.gov/books/NBK109917/

van Ginneken, N., Chin, W. Y., Lim, Y. C., *et al*. (2021). Primary-level worker interventions for the care of people living with mental disorders and distress in low- and middle-income countries. *Cochrane Database of Systematic Reviews*, *2021*(8). https://doi.org/10.1002/14651858.cd009149.pub3

van Niekerk, A., Suffla, S., Seedat, M., *et al*. (2008). *Crime, Violence and Injury Prevention in South Africa*. Amsterdam University Press.

van Orden, K. A., Witte, T. K., Cukrowicz, K. C., *et al*. (2011). The interpersonal theory of suicide. *Psychol Rev*, *117*, 574–600.

van Zyl, P. J., Bantjes, J., Breet, E., *et al*. (2021). Motives for deliberate self-harm in a South African tertiary hospital. *South African Journal of Psychiatry*, *27*, 1–9. https://doi.org/10.4102/sajpsychiatry.v27i0.1524

Vathesatogkit, P., Lian, T.Y, & Ritthiphakdee, B. (2011). *Lessons Learnt in Establishing a Health Promotion Fund: Review of Lessons Learnt in Establishing a Health Promotion Fund*. Southeast Asia Tobacco Control Alliance (SEATCA). Retrieved May 19, 2023, from, https://www.ashthailand.or.th/en/content_attachment/attach/lessons _learned_in_establishin.pdf

Western Cape Government. (2022, May 6). *Anxiety, Depression and Adolescent Suicide*. Western Cape Government. Retrieved July 17, 2022, from, https://www.westerncape.gov.za/general-publication/anxiety-depression-and-adolescent-suicide

Westerlund, M., Hadlaczky, G., & Wasserman, D. (2012). The representation of suicide on the internet: Implications for clinicians. *Journal of Medical Internet Research*, *14*(5), e122. https://doi.org/10.2196/jmir.1979

World Health Organization. (2004*). Prevention of Mental Disorders: Effective Interventions and Policy Options: Summary Report / A Report of the World Health Organization Dept. of Mental Health and Substance Abuse; in Collaboration with the Prevention Research Centre of the Universities of Nijmegen and Maastricht*. World Health Organization. Retrieved May 20, 2023, from, https://apps.who.int/iris/handle/10665/43027

World Health Organization. (2012, July 12). *Public Health Action for the Prevention of Suicide: A Framework*. World Health Organization. Retrieved June 15, 2022, from, https://apps.who.int/iris/handle/10665/75166

World Health Organization. (2013a). *Health in all Policies: Helsinki Statement. Framework for Country Action*. Ministry of Social Affairs and Health: Finland. Retrieved May 6, 2023, from, https://apps.who.int/iris/bitstream/handle/10665/112636/97892415 06908_eng.pdf

World Health Organization. (2013b). *Mental Health Action Plan 2013-2020.* World Health Organization. Retrieved May 13, 2023, from, https://www.who.int/publications/i/item/9789241506021

World Health Organization. (2014, August 17). *Preventing Suicide: A Global Imperative*. World Health Organization. Retrieved April 29, 20223, from, https://www.who.int/publications/i/item/9789241564779

World Health Organization. (2016). *Practice Manual for Establishing and Maintaining Surveillance Systems for Suicide Attempts and Self-Harm*. World Health Organization. Retrieved July 2, 2022, from, https://www.who.int/publications/i/item/practice-manual-for-establishing-and-maintaining-surveillance-systems-for-suicide-attempts-and-self-harm

World Health Organization & International Association for Suicide Prevention. (2017). *Preventing suicide: A Resource for Media Professionals, 2017 Update.* World Health Organization. Retrieved May 19, 2023, from, http://apps.who.int/iris/handle/10665/258814

World Health Organization. (2018). *National Suicide Prevention Strategies: Progress, Examples and Indicators*. World Health Organization. Retrieved April 5, 2022, from, https://apps.who.int/iris/handle/10665/279765

World Health Organization. (2019a, September 9). *Suicide: One Person Dies Every 40 Seconds*. World Health Organization. Retrieved May 9, 2022, from, https://www.who.int/news/item/09-09-2019-suicide-one-person-dies-every-40-seconds

World Health Organization. (2019b). *WHO Independent High-Level Commission on Noncommunicable Diseases: Final Report: It's Time to Walk the Talk*. World Health Organization. Retrieved May 20, 2023, from, https://apps.who.int/iris/handle/10665/330023

World Health Organization. (2020, December). *WHO Methods and Data Sources for Country-Level Causes of Death 2000–2019*. World Health Organization, Department of Data and Analytics. Retrieved May 2, 2022, from, https://www.who.int/docs/default-source/gho-documents/global-health-estimates/ghe2019_cod_methods.pdf

World Health Organization. (2021a). *Comprehensive Mental Health Action Plan 2013–2030*. World Health Organization. Retrieved April 25, 2022, from, https://www.who.int/publications/i/item/9789240031029

World Health Organization. (2021b). *Suicide*. World Health Organization. Retrieved July 12, 2022, from, https://www.who.int/news-room/fact-sheets/detail/suicide

World Health Organization. (2021c). *Suicide Worldwide in 2019*. World Health Organization. Retrieved May 26, 2023, from, https://www.who.int/publications/i/item/9789240026643

World Health Organization. (2022, June 16). *World Mental Health Report*: *Transforming Mental Health for all*. World Health Organization. Retrieved April 30, 2023, from, https://www.who.int/teams/mental-health-and-substance-use/world-mental-health-report

World Data Bank. (2019, July 1). *New Country Classifications by Income Level: 2019–2020*. World Bank Blogs. Retrieved June 3, 2022, from, https://blogs.worldbank.org/opendata/new-country-classifications-income-level-2019-2020

Yip, P. S., Caine, E., Yousuf, S., *et al*. (2012). Means restriction for suicide prevention. *The Lancet*, *379*(9834), 2393–2399. https://doi.org/10.1016/s0140-6736(12)60521-2

Zalsman, G., Hawton, K., Wasserman, D., *et al*. (2016). Suicide prevention strategies revisited: 10-year systematic review. *The Lancet Psychiatry*, *3*(7), 646–659. https://doi.org/10.1016/s2215-0366(16)30030-x

Identity documents, Employment and Livelihoods of Refugees in South Africa

Elvis Munyoka
Justice and Society
University of South Australia
munyokae1@gmail.com

Abstract

South Africa receives more refugees and asylum seekers than any other nation in southern Africa because of its strong economic position. However, a large proportion of refugees and asylum seekers in need of protection experience lengthy delays in obtaining the identity documents that are a prerequisite for public and private services like housing, education, health care and justice. The lack of identity documents especially impedes the employment of refugees since they cannot be employed until they have proof of identity. Yet, employment is a critical source of income when the government of South Africa does not offer adequate financial assistance to refugees, or those seeking asylum in the republic. This paper argues that South Africa should fulfil its obligations to uphold refugees' fundamental rights, take a strong stance against any xenophobic attacks, and reduce processing timeframes for identity documents.

Keywords: identity documents; refugees; employment; livelihoods; South Africa

Introduction

Present rates of forced migration are higher than ever in history. At the end of 2021, 89.3 million people were displaced, including 4.6 million asylum seekers, 27.1 million refugees, and 53.2 million internally displaced persons (United Nations High Commissioner for Refugees, 2021). A refugee is 'someone who is unable or unwilling to return to their country of origin owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion' (United Nations High Commissioner for Refugees, 2021,. More than 28,300 people are forced to leave their homes every day due to persecution, extreme

poverty, natural disasters, violent conflict, and human rights abuses. According to the United Nations General Assembly (2016) fifty per cent of refugees in the world are girls and women. Around one in three children living outside their country of origin are refugee children (United Nations Children's Fund, 2020). Eighty-five per cent of refugees are concentrated in the Global South; in other words, a significant number of refugees nowadays are moving between developing countries, commonly known as South-South migration yet research on migration tends to focus on a smaller number of refugees trying to reach countries in the Global North and pays little attention to the massive movement of refugees in less developed countries.

Southern Africa alone is home to sixty per cent of intra-regional migration (International Organisation for Migration, 2020). The region experiences all types of migration, including displacement, irregular migration, and labour migration, due to its strong economic position on the continent (Schockaert et al., 2020). Employment opportunities in mining, agricultural and manufacturing industries in Southern Africa countries such as South Africa, Botswana and Zambia attract all kinds of migrants from West Africa and the Horn of Africa (International Organisation for Migration, 2013). Many refugees residing in Southern Africa come from war-torn countries such as the Democratic Republic of Congo, Sudan, Burundi, Cameroon, Somalia, Niger, Nigeria, South Sudan, and Ethiopia (Nkomo, 2019). Unsafe living conditions, wars and natural disasters are some of the main factors causing refugees to take risky migration to South Africa for protection.

However, one of the neglected problems in the world is refugee access to identity documents (World Bank, 2017). Identity documents include birth certificates, passports, national identity document cards, visas, asylum or refugee permits, and residency permits. Many refugees struggle to prove their identity due to the lack of identity documentation. Refugees find it difficult to obtain documents, to include the correct information on those documents and to have those documents accepted. This can complicate access to basic services (Refugee Council of Australia, 2020). Identity documents are a prerequisite for ensuring access to public and private services like housing, education, health care and justice. Without proof of identity, refugees are unable to open bank accounts, register a mobile sim card, attend school, access health care, obtain social security grants, access employment, seek legal protection or participate in modern society (World Bank, 2017). Nevertheless, the impact of the lack of identity documents on

the livelihoods[2] of refugees is under-researched. Few scholars have indicated the importance of identity documents for employment, health, education, and the successful integration of refugees into host communities in the context of the Global North, and there is still a larger research gap in this area in the Global South (Behrends, 2018). This paper seeks to fill this gap in the literature by exploring the impact of the lack of identity documents on the employability of refugees in South Africa. Employment is one of the most important aspects of refugees' self-reliance, integration, financial freedom, and social inclusion in host countries (Ziersch et al., 2022).

South Africa is home to some 275 000 refugees and asylum seekers, more than eighty per cent of whom come from Zimbabwe, the DRC, Somalia, and Nigeria (Masuku, 2020). Traditionally, South Africa has been a refugee hub in Southern Africa because of its open-door refugee policy, which permits refugees to stay everywhere in the country (Crush & Skinner, 2017). There is a huge backlog of more than 190 000 applications for registration in South Africa, and some refugees have gone without a final decision for more than a decade (Ekambaram, 2020). Ninety-six per cent of the applications submitted by asylum seekers to the Department of Home Affairs were rejected in 2019 alone (Amnesty International, 2019). The process of acquiring identity documents in South Africa has become complicated and presents several challenges to refugees who are not familiar with the application procedures.

In this paper, I report the findings of secondary data analysis of published sources on refugees' employability, identity documents, livelihoods, and well-being to better comprehend the impact of a lack of identity documents on refugee employment and livelihoods in South Africa. The literature reviewed included peer-reviewed journals and other sources including government reports, policy documents, think tank publications, refugee studies books, and published posts on the official websites of the United Nations High Commissioner for Refugees and the International Organisation for Migration, as well as media releases. The findings demonstrate that the lack of identity documents renders refugees vulnerable to poverty, homelessness, and human trafficking. Refugees are unable to find jobs in the formal and informal economies of South Africa and unemployment causes a shortage in needs such as food, clothing, housing, health care and education. Destitution causes those without identification

---

[2] A livelihood is a means of making a living that encompasses people's incomes, assets (both material and social resources) and capabilities essential to meet their basic needs of life such as food, clothes, and accommodation.

papers to venture into commercial prostitution, beggary, and serious crimes such as car hijacking, burglary, and drug trafficking to survive because they are not sufficiently supported or assisted by the South African government. At the same time, experienced refugees with accredited academic qualifications are unable to secure skilled employment due to the lack of evidence of legal status. Overall, the lack of identity documents hinders refugees from accessing essential services such as jobs, health care, employment, and education in South Africa. The papers develops these issues by considering in turn the context of refugee policy including amendments to the 1994 Refugee Act, the institutional and political framework of South Africa, the entrenchment of institutionalised xenophobia and the bureaucratisation of the Department of Home Affairs (DHA), the resulting issues for the employment and livelihoods of refugees in South Africa, and the place of refugees as adjunct employees in the informal economy of South Africa.

The Context and the Refugee Policy Dilemma

Since the birth of the democratic state in 1994, South Africa has been the favoured destination for asylum seekers and refugees in Southern Africa because of its progressive refugee policy (Schockaert et al., 2020). In the year from mid-2018, for example, South Africa has hosted 89 285 recognised refugees (United Nations High Commission for Refugees, 2019b). Unlike other Southern African nations, refugees live alongside the local population in South Africa. Through the non-encampment policy enshrined in the 1998 Refugee Act, refugees could study and work in South Africa (Kleinsmidt & Manicom, 2010). Unfortunately, the rights previously granted to refugees by the 1998 Refugee Act were revoked by the Amendment Act of 1 January 2020 which restricts refugees' access to work, political involvement, interaction with diplomatic missions, and the type of courses refugees can study in South Africa (Nyoka, 2020). Nevertheless, the Constitution of the Republic of South Africa still protects the fundamental rights of everyone in the country, irrespective of legal status, including access to essential services such as employment, health care and education for refugees (Crush & Dodson, 2017).

Although the rights of refugees are laid down in the Constitution of South Africa, asylum seekers and refugees are generally viewed as economic migrants attempting to exploit the asylum-seeking system, though official statistics do not support this assertion (Khan, 2020). The Department of Home Affairs lacks consistent and accurate statistics on the country's number of refugees and asylum seekers (Amnesty International, 2019). Likewise, the African Check survey indicates that the refugee data in South Africa are

flawed, unreliable and often inconsistent (Stupart, 2016). The lack of accurate refugee data allows for assumptions that intensify prejudice and xenophobia towards refugees in South Africa (Lyon, 2014).

In South Africa's hostile environment, with the highest degree of inequality in the world, refugees do not receive any government assistance during an asylum application which leaves them with little means of subsistence (Claassen, 2017; Rugunanan & Smit, 2011). The lack of support and the everyday challenges encountered by refugees pose a threat to their livelihoods and mental health in South Africa (Marshall, 2017). The delay in the asylum application process, determined solely by the Department of Home Affairs, which takes about 180 days to finalise the application, aggravates the problem of identification (Refworld, 2020). Protracted delays in the application process raised the number of pending applications to 184 200 cases in the recent past, rendering South Africa one of the countries with the largest number of cases pending for asylum seekers and refugees (Crush & Skinner, 2017). South Africa has the longest process of asylum adjudication in the world. Asylum seekers have sometimes stayed in limbo for more than a decade (Lawyers for Human Rights, 2018). South Africa has legislation and policies to protect the rights of refugees and asylum-seekers. Nevertheless, the country lacks the capacity and political will to enforce its laws, which is why refugees have been the target of xenophobic attacks (Amnesty International, 2019).

The complex crisis faced by refugees in South Africa is an urgent humanitarian issue that needs to be resolved to eliminate the prejudices and violations faced by innocent people fleeing conflict. The consideration of the livelihood problems encountered by refugees in South Africa is significant as their rights are protected by international law (Rutherford, 2020). Since 2008, South African communities have been continuously besieged by violent attacks on migrants and such violence has become a common daily activity towards those who cannot be identified as native South Africans (Landau, 2012). 'Xenophobia, especially against low-income, African and South-East Asian migrants and refugees, had been a feature of South African politics for many years' (United Nations Human Rights, 2022, p. 2). Xenophobic attacks in 2008 across South Africa caused 62 deaths, 670 were wounded, 100 000 were displaced, and many were raped in one month (Misago & Monson, 2010). At least twelve refugees were killed during xenophobic attacks in Cape Town in September 2019 (United Nations High Commission for Refugees, 2019c).

Based on the United Nations Special Rapporteurs on Human Rights (Mr González Morales and Ms Tendayi Achiume), 'discrimination against foreign nationals in South Africa has become institutionalised, both in

government policy and in South African society as a whole' (United Nations Human Rights, 2022, 1). This results in violations of the rights to life and physical integrity and to a decent standard of living and the best health possible, as well as to increased risks of arbitrary arrests, torture, and forced deportation (United Nations Human Rights, 2022). Attacks on migrants and refugees have continued recently under the orchestration of Operation Dudula, a social media protest movement that has evolved into an umbrella for the mobilisation of violent demonstrations, 'vigilante violence, arson targeting migrant-owned homes and businesses, and even the murder of foreign nationals' (United Nations Human Rights, 2022, 2).

Nonetheless, despite an increase in instances of unconscionable discrimination and violence against foreign nationals, the livelihood challenges faced by refugees due to a lack of identity documents have been overlooked in South Africa (Marshall, 2017). Why do we need to care about foreign nationals in South Africa when South African citizens are safe? Currently, the rights of refugees and asylum-seekers are being violated; tomorrow, the local population, lesbian, homosexual, bisexual, and transgender people, or women may be violated. Tolerating only one person to lose his or her constitutional rights legitimises a system of human rights abuses by the state that may lead most South African citizens to lose their rights (Lawyers for Human Rights, 2018). Left alone, refugees and asylum seekers depend for protection on the South African Constitution and Bill of Rights and international law such as the 1951 United Nations Refugee Convention. It is necessary to do more to protect their human rights.

Amendments to the 1994 Refugee Act

It has become more and more difficult to find refuge in South Africa. Three sets of amendments to the celebrated Refugee Act of 1998 were made in 2008, 2011 and 2017, but they did not take effect until January 2020 with the release of the corresponding regulations (Hobden, 2021). The 1994 Refugee Act was amended to include changes to the appeals process, the length of time a refugee can be granted permanent residency in the Republic of South Africa, the right of refugees to apply for work or study, and the reasons for which refugee and asylum status may be withdrawn (Moyo and Zanker, 2020; Nyoka, 2020). These changes are a blatant demonstration of the violation of the rights of those seeking asylum in South Africa. The modifications to the 1994 Refugee Act are disputable and reproduce unfair acts which have been extensively repudiated by the parliament of South Africa with input from civil society.

For instance, the changes to the appeals procedure tend to diminish the transparency of the appeals process. Prior to the changes, a quorum of

three staff members of the Refugee Appeal Authority were needed to make a judgement; now, just one staff member is sufficient (Olivier and Govindjee, 2021). The justification for this modification was that it would play a role in reducing the backlog but in reality it may result in the rejection of those who urgently require protection because of bias against foreign nationals (Hobden 2021).

The changes made to the Refugee Act of 1994 put the spotlight on a regime that is growing more restrictive, in part by making it easier to lose refugee status. According to Section 22 of the Refugee Amendment Act 2017, if a permit is not renewed after thirty days, it is considered to have been deserted (Moyo and Zanker, 2020). The serious consequence of such an approach is that it exposes asylum seekers to detention and expulsion and may subsequently contravene the principle of nonrefoulement. In the context of international human rights law, the concept of non-refoulement pledges that no one should be sent to a country where they would suffer torture, brutal, or humiliating treatment or other insurmountable harm (Molnár, 2016, Weissbrodt and Hortreiter, 1999).

Additional changes increase restrictions on the right to work, which was already difficult in practice (Amnesty International, 2019). Section 12 of the regulations under the amendment Act of 2017 came into force in January 2020 and require asylum seekers to declare their financial situation upon arrival; if they are able to support themselves for four months or have access to the United Nations High Commissioner for Refugees resources, they are denied the opportunity to work (Manby, 2020). There are restrictions also on the sectors of the economy in which refugees can work or study, as determined by the Standing Committee on Refugee Affairs within the department. The intelligence industry is one example of a field where asylum seekers are not authorised to work (Moyo and Zanker, 2020). These limitations make it obvious that the Department of Home Affairs is restricting labour opportunities for refugees and asylum seekers.

Before the amendments to the 1994 Refugee Act, refugee and asylum seekers were not banned by law from participating in political activities or related events. Refugees had the freedom to voice their opinions freely and were able to participate in political matters affecting their home countries (Olivier and Govindjee, 2021). With the introduction of new clauses contained in the amendment act (Article 4 subsection 2), refugees and asylum seekers are no longer allowed to participate in any form of political activity and if found to be participating in any activities that may be deemed political may lose their refugee status immediately (Hobden, 2020). Refugees are also now prevented from seeking help from the consular services of their countries in South Africa as they used to do when faced with

complicated issues related to their identity papers such as birth certificates, unfair treatment by case workers, or voting in elections in their home countries. This prohibition is quite shocking given the historical background of South Africa and anti-apartheid movements when many South African war liberation veterans had to seek refuge in neighbouring countries and participated in political matters of their country while in exile.

The broad political situation of countries in the southern African region requires cooperation to achieve democracy, and banning refugees from participating in political affairs of their respective countries worsens the refugee crisis in the region and continent at large rather than alleviates the influx of refugees and asylum seekers in the republic of South Africa.

The Institutional and Political Framework of South Africa

The institutional and political framework of South Africa now is dominated by exclusionary sentiments that perceive migrants and refugees as threat to the welfare of South African citizens. There are several political goals in refugee and migration governance. Migration governance is being used as a tool in local politics (Dodson and Crush, 2015). Xenophobic violence against refugee and migrant communities occurs on a regular basis since 2008 when the first spike of overt xenophobic attacks began. The restrictive approach works especially well as an instrument of leverage in blaming the government for its failures to address poverty and create jobs (Bourbeau, 2011). Refugees and asylum seekers are used as blameworthy parties, and refugee rights are continually eroded for domestic political gain. A focus on securitisation solidifies the anti-migrant and anti-refugee policy standpoint.

The South African regime's securitisation approach to migration entails instilling fear in migrants and responding in an explicitly securitised manner, focusing on tight borders, detention, and deportations (Neocosmos, 2008, Hammerstad, 2012). South Africa is not alone in pursuing a securitisation agenda, but it joins a growing list of countries that have placed their trust in walls and fences, as well as externalisation processes, to keep out irregular immigrants (Bourbeau, 2011). This is not simply another example of what is taking place in the Global North, even though that helps to justify it. The goal of border security has a strong foundation in South Africa. Its origins can be traced back to the apartheid era, when the state erected electric fences along the Mozambican and Zimbabwean borders to control the influx of irregular migrants (Crush, 1999). Mthembu-Salter et al. (2014) argued that even in the post-apartheid period there has been a strong focus on securing the border and on deportation. There are also long-standing stories that immigrants are deported from a South African Police operated

centre in Musina without inspection by the DHA, and that border agents deny transit visas, effectively removing any opportunity to request asylum (Sutton and Vigneswaran, 2011).

Along with the political profiteering of xenophobic argumentation, there are also frequent mass arrests and deportations of foreign nationals. As a result, rather than searching for those responsible for violence, mass arrests of suspected undocumented migrants in preparation for deportation are a common response to xenophobic acts of violence. The xenophobic discussion and horrific police conduct, in turn, continue to allow a marginalised community to express their rage, a phenomenon dubbed by Hammerstad as 'grassroots level securitisation' (Hammerstad, 2012). A significant number of undocumented migrants were rounded up during the aggressive Operation Fiela ("sweep clean"), which was implemented in response to xenophobic violence in 2015 with an additional round in 2018 that violated numerous legal and human rights standards (Dodson and Crush, 2015). More than 15000 people were deported and over 9000 people arrested. The actions were labelled state-sponsored xenophobia by civil society organisations (Dodson and Crush, 2015).

South Africa, which has one of the largest economies on the African continent, governs migration as primarily being negative. This includes subjecting refugees and asylum seekers to ridiculously high levels of bureaucracy, which can be regarded as administrative violence (Landau, 2018). The governance of migration in South Africa includes a blurring of the demarcation between skilled migrants and humanitarian migrants, which widens the protection gap created by the overwhelmed bureaucracy.

South Africa is archetypal in its depiction of how immigration and refugee policies become interconnected and woven into political interests. Peberdy (2016) argued that the exclusionary policies against migrants and asylum seekers are a major pillar of domestic legitimacy and have been so for years, even though migration is not particularly high on a political agenda that is dominated by issues like the economy, corruption, and electricity. According to Landau (2010) exclusion is both bureaucratically institutionalised and socially legitimate. The oppressive and bureaucratic processes have resulted in an overwhelmed DHA and a restrictive system, as evidenced by the continuing reduction in rights to work and study for people seeking asylum and refugees.

Institutionalised Xenophobia and Refugee Policy

After the collapse of apartheid in 1994 and the rise in migration from the African continent, xenophobic sentiments started surfacing and have occasionally led to brutality and violent attacks against African migrants in

South Africa (Moyo and Zanker, 2020). According to Misago (2019), such acts of xenophobia have been an ongoing phenomenon in South Africa's democratic system. For example, sixty-two people were violently murdered, including twenty-one South Africans, and more than one hundred thousand people were displaced in May 2008 (Misago 2019). The foundation of xenophobic rhetoric is the idea that one builds their identity by othering others, and it is also associated with poverty and dire economic situations. The politicians and the media each use rhetoric to sustain and support xenophobic narratives and discourses (Pillay, 2021). However, the border town of Musina, between Zimbabwe and South Africa, indicates that such rhetoric is not necessarily genuine since migrants have contributed significantly to South Africa's economy through both informal and formal trade, for instance. As a multicultural township and a centre for trade for both South African and foreign nationals, Musina shows that political and community leaders can play a more dynamic role in influencing public opinion on the contributions made by immigrants to communities (Pophiwa, 2017; Rukema & Pophiwa, 2020). Because the positive contributions of immigrants to the South African economy are generally overlooked; instead, much emphasis is placed on denouncing people seeking refuge from neighbouring nations (Crush & Skinner, 2017).

Systemic xenophobia and securitisation, both of which may be used by the ruling class as political capital, have a significant impact on the increasingly restrictive environment for refugees and asylum seekers in South Africa (Landau, 2018). At the same time, when it comes to institutionalised xenophobia, the DHA's lack of political will in protecting refugees and making the best of an arguably defective but primarily development-oriented migration policy is accentuated. In everything from hospitals to schools to DHA institutions, xenophobia is institutionalised and pervasive (Neocosmos, 2008). Although xenophobic violence occurs at the local level and is frequently an opportunity for local leaders to profit from, it is ultimately fostered by a state that creates the circumstances and the discourse to foster it (Landau and Misago, 2009). Thus xenophobic violence against immigrant and refugee communities persists on a regular basis, with at best a lack of political will to address it and, at worst, involvement among a variety of government officials and civil servants, such as the police (Polzer and Takabvirwa, 2010). Politicians may openly condemn xenophobic violence, but they fail to implement the appropriate regulations to stop it.

A significant marker of such failures is a lack of policy implementation (Peberdy, 2016). The sluggish pace in implementation of the National Action Plan to Combat Racism, Racial Discrimination, Xenophobia, and Related Intolerance (NAP), which took nearly twenty years

to be formally adopted in 2019, after first being committed to at South Africa's third World Conference against Racism, Racial Discrimination, Xenophobia, and Related Intolerance in Durban in 2001, is a key example of the lack of political commitment (Moyo and Zanker, 2020). Xenophobia is difficult to address in South Africa because it is primarily viewed as an economic issue rather than a political problem. According to Chigumadzi (2019), the South African government frequently assigns blame for xenophobic violence to criminal activity as a means of dodging accountability.

Bureaucratisation of the Department of Home Affairs

The DHA is charged with several mandates. It is the guardian, curator and verifier of the identity and status of South African citizens and non-South African residents. Identity documents enable people to have access to opportunities and benefits in both the public and commercial sectors as well as exercise their individual rights. Moreover, the DHA facilitates and regulates immigration and the movement of people through borders and points of entry into South Africa. It provides civic and immigration services at foreign missions and determines the status of asylum seekers and refugees in accordance with international law. Thus the DHA plays a crucial role in maintaining national security, supporting good international relations, and ensuring economic development. It is at the core of a national question in South Africa regarding irregular migrants and the consequences of migration on employment availability (Landau, 2018). In South Africa, rampant xenophobia, and nativism fuel popular outrage at the dire situation of the DHA (Landau and Misago, 2009).

While the DHA performs complex and dynamic functions, it is blamed for problems with the application processes for the documentation of foreign nationals in South Africa, including skilled migrants, refugees, and asylum seekers. One of the major issues raised is a lack of political will to enhance the DHA's administration, as well as difficulties in the execution of policies, court orders, and laws (Amnesty International, 2019). In addition to problems in policy implementation, immigration regulations have become increasingly restrictive in the last decade, one of the alleged aims being to restrict foreign nationals from flooding the country. The republic of South Africa has adopted a refugee system that still operates under the name of protection but is marked by blatant securitisation exacerbating administrative and technical obstacles to refugee and asylum application processes (Moyo and Zanker, 2020). Refugees and asylum seekers are caught up in the skilled migrants struggle whereby South African citizens blame citizens of other nations for taking their jobs.

Bureaucracy at the DHA has only increased the strain on Refugee Receptive Offices. The strain of regularly renewing permits, frequently travelling long distances, and standing in long lines is untenable and can take decades (Amnesty International, 2019). For example, in 2015, South Africa had the world's largest backlog of asylum applications at various stages of processing (UNHCR, 2016). In 2020, the UNCHR reported that 188 296 asylum cases were pending in South Africa. According to an audit of the immigration procedures at the DHA in South Africa in 2019, the Auditor General of South Africa highlighted that clearing the backlog would take sixty-eight years (Moyo and Zanker, 2020). This indicates endemic systemic problems within the structure of the DHA. In support of this, Mbiyozo (2018) argued that although the DHA, like most government ministries in South Africa, faces capacity problems and rampant corruption, the DHA's workforce also play a role in how policies are implemented. The DHA's general operation is further hampered by the xenophobic attitudes of personnel towards foreign nationals especially from neighbouring African countries such as Zimbabwe, Mozambique, and Malawi. For instance, the current minister of home affairs, Aaron Motsoaledi, has a history of using rhetoric that is hostile towards immigrants, blaming them for overcrowded hospitals while he was the minister of health (Chigumadzi, 2019).

Amnesty International (2019) noted that asylum applicants now face more complicated administrative burdens, and the procedure might take anywhere between five and ten years, or even up to nineteen years in some extreme cases. A huge population of asylum seekers are dependent on civil society organisations for their livelihood means and survival because they are not permitted to work or move around as a result of financial or administrative challenges (Vanyoro, 2021). This shows how formal state government may depend on non-state entities providing humanitarian aid. Several asylum seekers and refugees are reliant on shelter and food in one of the few severely underfunded locations in appalling conditions while many are stranded in Musina waiting to acquire their initial section 22 permits, which can take a few months now instead of days (Vanyoro, 2021). According to civil society organisations such as Amnesty International, the crisis of Zimbabwean citizens is exacerbated by additional restrictions that prevent them from registering an application at refugee reception centres in the Musina township. According to Amnesty International (2019), Zimbabweans are unable to obtain the limited humanitarian assistance provided by non-governmental organisations unless they apply for asylum at refugee reception facilities.

Employment and Livelihood in the Formal Economy

The right to work is critical for alleviating vulnerability, increasing resilience, and ensuring dignity (Carciotto & Ferraro, 2020). Harnessing refugees' skills can also benefit local economic activity and national development (Zetter & Ruaudel, 2016). The right to decent employment, labour rights and social protection are key pillars of the Sustainable Development Goals, Agenda 2030, which call for equality beyond legal status (United Nations Department of Economic and Social Affairs, 2017). Unemployment undermines the ability of refugees to maintain their livelihoods in South Africa and elsewhere globally (Wedekind, Fakoush, & Alla-Mensah, 2019). It is difficult for refugees to survive without identity documents, in particular refugee or asylum permits (Crea, Loughry, O'Halloran, & Flannery, 2017). Refugees are a category of vulnerable people who have lost all their assets and lack the resources to meet their daily needs when they arrive in host countries. Similarly, when they fled their home countries due to war and persecution, they may not have had the time or opportunity to collect their belongings, including identification documents (Refugee Council of Australia, 2020). Denying them basic services is simply a continuation of the persecution they fled in search of better lives for themselves and their families.

The right to work, education and freedom of movement previously granted to asylum seekers and refugees by the 1998 Refugee Act was retracted by the Amendment Act to the 1998 Refugee Act which came into effect on 1 January 2020, as noted above. The Amendment Act prohibits refugees from competing in the labour market (Crush & Skinner, 2017) and from participating in any political affairs (Nyoka, 2020). The amendments marked the end of the generous asylum seeker and refugee system, which allowed refugees to find formal and informal employment in South Africa (Government Gazette, 2020).

Under the restrictions set out in the new Act, asylum seekers and refugees will not be allowed to take any form of employment during their first four months of arrival in South Africa. The ban on refugees seeking employment with pending adjudications exacerbates their livelihood crisis by creating difficulties in getting basics such as food, clothing, and rent (Government Gazette, 2020). Refugees and asylum seekers are not allowed to work in the private security sector, which means that they have limited choices compared to other people. Historically, the security industry has provided migrants with innumerable job opportunities as employment in this sector does not require professional qualifications. The changes do not support the argument often cited by politician that refugees take jobs in South Africa since migrants often work in jobs that South Africans do not want,

such as security, cleaning, and waiting (Landau, 2018). Another empirical study suggests that immigrants create jobs in South Africa rather than taking up jobs for local citizens (Ngota et al., 2017).

The employment of refugees in South Africa's formal economy is difficult because refugees must prove their legal status in the country, impossible without identity documents (Schockaert et al., 2020). The formal sector consists of highly paying jobs in banks, government offices, schools, higher education institutions, hospitals, clinics, and large stores such as Pick 'n Pay, OK, Spar and Mr Price. Formal jobs come with a wide array of benefits, such as health and unemployment insurance, pension benefits, healthy working conditions, and job security (Freedman, Crankshaw & Mutambara, 2020). It is difficult for refugees to acquire formal employment, primarily because they lack the identity documents required everywhere in the formal sector to prove they are legally in the country and have working rights (Greenwood, 2018). The challenges range from the lack of legal documentation and the xenophobia of employers against foreigners to the bureaucratic obstacles imposed on the labour market by different government agencies to protect South African employees (Kavuro, 2015).

The permits issued to refugees are not enough to prove eligibility for formal employment in South Africa, as employers do not accept temporary permits in most cases (Schockaert et al., 2020). While some refugees have good academic credentials, it is still difficult for them to get permanent or qualified employment in South Africa. A one refugee said:

> After the studies, I didn't find a job and therefore I have always to look for something to help the family. The children must eat, you must see how to make them comfortable … What can I say, the way I have been saying, it is by the grace of God we are surviving? By myself, I do not find a way. Maybe you go somewhere and do something, a little job, you find a little piece job, the minimum for the family (Crea et al., 2017, p. 673).

Refugees have expressed frustration at the type of permits granted to them by the Department of Home Affairs, which are not accepted by employers in the public sector. A refugee male has claimed:

> It says asylum-seeker, it is written 'Work and study in the Republic'. I never get a job with my asylum papers. It is just helping me get around when the police are searching. 'Where's your paper' Then I give them the paper. Then they

leave me alone. Yeah. That is it. (Schockaert et al., 2020, p. 43).

Similarly,, another refugee said that:

> Life is very difficult because they do not give us documents. Because the asylum papers that I have I cannot get work. They say you cannot work with this. Sometimes I saw a good job and because of the qualifications that I have, I was qualified, then I had to take them my documents. If I show them asylum papers. 'Sorry. We need someone with a passport or ID'. I explained everything to them, but they did not understand (Schockaert et al., 2020, p. 43).

Simultaneously, language barriers also impede refugees from accessing formal sector jobs (Rugunanan & Smit, 2011). South Africans dominate the formal sector, and since some of the refugees do not speak English, they cannot converse well with their workmates. Many refugees come from other African countries to South Africa, such as the Democratic Republic of Congo and Rwanda, where English is a second language (Rogerson, 2016). They come to South Africa with a negligible degree of English proficiency which makes it difficult for them to communicate in professional businesses. Not being able to communicate in English effectively hinders the ability of refugees to seek formal employment in South Africa (Rugunanan & Smit, 2011) and a limited degree of English competence impedes refugees from interacting with other people in society.

The lack of formal employment makes refugees susceptible to chronic poverty in South Africa (McKenzie, Kelly, & Shanda, 2018). Jobs are difficult to find in the formal sector. Desperate refugees end up taking low paid jobs in the informal sector. Wages in the informal sector are not enough to meet refugees' basic needs, such as food purchases and paying rentals (United Nations High Commissioner for Refugees, 2015). Yet the ability to hold full-time employment depends on legal documentation, such as asylum seekers or refugee permits (Rugunanan & Smit, 2011). Each refugee wants identity documents but struggles to possess them because of the complicated immigration system. Their livelihoods have been impacted in many ways. For example, refugees cannot afford to pay their bills, such as electricity, gas, and rents, which are exorbitant in South Africa (Nkomo, 2019).

Refugees make up the largest number of homeless people on the streets of South Africa and are often targeted by the police (Tenai & Mbewu, 2020). Many refugees are unable to pay their housing bills; thus, they are forced to live in shared accommodations. Shared accommodation poses many challenges to the well-being of refugees, such as a lack of privacy, sexual harassment of women, and cohabitation (Freedman et al., 2020). For example, a room costs about 3000 Rands per month and homelessness is on the rise in South Africa when few refugees can afford that sum if they are unemployed (Roets et al., 2016). Again, many refugees cannot afford to buy food because they are unemployed. Explaining how the lack of documentation has made refugees financially and socially vulnerable in South Africa, one refugee said, 'there are the most vulnerable people living there. They could not even afford to buy bread, buy something to eat' (Schockaert et al., 2020, p. 43).

The restrictive legislation instituted by the government of South Africa impoverishes many refugees (Le Courant, 2015). Refugees are ready to work for less than the minimum wage (R3500 per month), and women are often likely to work for even lower wages than men. Lower wages threaten the livelihoods of refugees (Landau, Ramjathan-Keogh, & Singh, 2005). Refuges are unable to provide basic needs for themselves and their children, such as adequate food, shelter, and clothing in South Africa (United Nations High Commission for Refugees, 2019b). Poverty impacts refugees' livelihoods and leaves them with no choice but to venture into the informal sector to support their lives.

In some instances, business owners tend to use violence to reduce foreign competition in the labour market (Greenwood, 2019). Extensive xenophobia attacks occurred in South Africa between 2008 and 2015, and refugees are still being hounded out of their homes if they fail to provide valid identification documents (Tawodzera & Chikanda, 2016). One of the refugees said:

> … I'm living with people who are not from where I am and sometimes, I don't feel safe … They are South African, so I do not know how they feel about it. Sometimes I feel like I am not safe because I do not know what people there think about me (Crea et al., 2017, p. 673).

The attacks on migrants between 2008 and 2015 were responsible for the destruction of property and the loss of livelihoods of refugees in South Africa (United States Committee for Refugees and Immigrants, 2009). Many of the refugee owned Spaza (informal, convenience) shops have been destroyed,

leaving people in poverty because they relied on income from their businesses. Moreover, poor socio-economic and service delivery conditions in South Africa provide a fertile ground for competition between citizens and refugees over scarce employment, business opportunities, housing, and social services (United Nations General Assembly, 2011). The competition for scarce resources instigates violent xenophobic acts against foreigners under the pretext that refugees are eating a share of the cake, which should be enjoyed by local people. These ill-fated attitudes hinder refugees from seeking formal employment and living decently in South Africa (Schulze, 2011). Xenophobic attacks result in the discrimination, abuse, and exploitation of refugees, creating a hostile environment for refugee involvement in public spheres.

Refugees as Adjunct Employees in the Informal Economy

Many refugees in South Africa have no alternative but to work in the informal sector (Stupart, 2016). Informal sectors that often employ refugees include restaurants, construction companies, the retail industry, agriculture, and the security sector (Tawodzera & Chikanda, 2016). In the absence of financial and social assistance from the government or the Commission for Refugees, one of the main livelihood strategies of refugees is to create work for themselves in the informal economy (Crush & Dodson, 2017). Informal sector employment is characterised by low wages, lack of job security, discrimination, and long working hours (Mansour-Ille, 2018).

The hostile environment in the public sector has left no space for immigrants without the requisite legal documentation to get jobs, leaving refugees with limited survival strategies (Carciotto & Ferraro, 2020). Securing a regular high-paying job as an asylum seeker or a refugee is always challenging, if not impossible. Employers do not choose to recruit workers with temporary work permits (International Organisation for Migration, 2018). Almost all refugees work as informal employees - as security guards in parking areas, in car washes, hair salons and selling sweets and refreshments on the streets (Schockaert et al., 2020). Employers are hesitant to hire displaced persons with documents valid for a short period of time. Local authorities and the police may not recognise refugee identity cards and permits. As a result of desperation, refugees indulge in risky economic practices such as robbery and drug retailing (Landau et al., 2005).

However, risky as it is, the informal sector plays a critical role in sustaining the livelihoods of refugees in South Africa. By working in small jobs, refugees can raise money for their accommodation, food, clothing, and children's school fees (Crush & Skinner, 2017). Refugees do not benefit from government bursaries due to the lack of proof of identity. Nevertheless, they

are entitled to these rights under the Constitution of South Africa. The current restriction on the ban on refugees from employment in South Africa increases poverty and destitution, particularly in urban areas where many refugees live (Crush & Dodson, 2017).

The government of South Africa has expressed its intention to reduce the number of foreign-owned companies in South Africa (Polzer, 2010). Government officials claim that the domination of refugees in the informal sector has nurtured violence against foreign-owned enterprises and many South Africans claim that refugees compete unfairly and force them out of business (Tawodzera & Chikanda, 2016). The positive economic impacts of foreign-owned businesses are intentionally overlooked to distort reality, however, and it is difficult to believe that immigrants are creating competition. There are no reliable data on the number of refugees employed in South Africa (Lawyers for Human Rights, 2018). But available evidence indicates that refugees are taking up low-paying jobs in the informal sector, such as cleaning and security. As a result, refugees are not competing in the job market with South Africans.

The informal economy has been one of the livelihood channels of refugees in South Africa. However, several foreign-owned companies and successful entrepreneurs have been targeted by the local population under state-sponsored xenophobic raids (Tawodzera & Chikanda, 2016). The purpose of the raids was to expel foreign business owners from South Africa. Distorted information that refugees generate competition incites hostility, which also results in violent protests. For example, in 2008 and 2012, the provincial government of Limpopo allowed harsh demonstrations against asylum seekers and refugees working in the informal sector. Many refugees were beaten up and deported back to their home countries, from which they had fled to seek protection and better life in South Africa (Crush & Skinner, 2017).

In 2012, informal businesses run by refugees were wrecked under "Operation Handstick", an aggressive military-approach campaign to chase away foreigners (Stupart, 2016). In April 2015, another nationwide attack, Operation Fiela, as noted above, targeted migrant-owned enterprises (Rogerson, 2016). Since then, it has become difficult for refugees to set up businesses in South Africa which has severely impacted their livelihoods. Small businesses, such as Spaza shops, have sustained refugee livelihoods for an extended period (World Bank, 2017). The justification provided by the state for conducting Operation Fiela was that the government wanted to manage undocumented migrants. The main intention, however, was to fight refugees running businesses in South Africa. Specifically, Spaza shops have been targeted (Crush & Skinner, 2017).

Naledi Pandor, the Minister of International Relations for South Africa, said that South Africans believe that foreigners are taking advantage of their opportunities. The minister claimed that the migrant community had "displaced South Africans from what they thought would be new job opportunities for them, hence this rise in... anger" (Porter, 2019). Both formal and informal sector conditions are undesirable for developing the lives of the refugees in South Africa. Life is difficult as homeless persons do not have access to essential social services in South Africa. The government has not been willing to support the livelihoods of those fleeing from conflict and seeking international protection. There are many refugees who are agitated. They regret fleeing to South Africa because of the livelihood problems they experience every day in the country (Schockaert et al., 2020). A Congolese refugee, for example, said that

> There is uncertainty in all aspects. There is that pressure. I want to go back home but there is no life at home. I want to stay but there are no papers and I do not know what will happen tomorrow. Then there is also xenophobia in South Africa, where everywhere you pass you are a foreigner. 'You came for our job, you came for our women, you came for this and that'. So, you feel like you are left in the air. You don't know from which leg to dance (Schockaert et al., 2020, p. 47).

The future of refugees is bleak in South Africa. Local authorities have a more significant role to play in ensuring that refugees have equal access to the job market. Employment is a significant indicator of poverty resilience and vulnerability (Carciotto & Ferraro, 2020). It is necessary to enact legislation that acknowledges the working rights of refugees (Betts, Omata, Rodgers, Sterck, & Stierna, 2019). The conditions for refugees to have access to the labour market both in the formal or informal sector without restrictions are vital to their integration and the sharing of local responsibility.

Conclusion

This paper has examined the employment challenges encountered by refugees without identity documents in the formal and informal economy of South Africa. The paper provided the context and some of the causes as to why it is difficult for asylum seekers and refugees to obtain identity documentation. The securitisation and exclusionary stance adopted by the South African republic towards immigrants and non-South African citizens

is largely contributing to the plight asylum seekers face in applying for identity papers. In addition, the arguments in the paper show that the lack of identity documents is a substantial impediment to the livelihoods of refugees in South Africa. For instance, refugees cannot be employed until they have proof of identity as employers do not accept temporary permits which most refugees possess. Yet, employment is a critical livelihood source of income, provided that the government of South Africa does not offer adequate financial assistance to refugees, or those seeking asylum in the republic. Refugees are struggling as the protective policy in South Africa has not been transformed into protective practices. Although South Africa is a signatory to the 1951 United Nations Refugee Convention, and the South African Constitution recognises refugee rights, refugees do not enjoy their rights as enshrined in both domestic and international laws.

The incompetence of the Department of Home Affairs due to bureaucratisation, which takes far too long and fails to provide identity documents to refugees in a reasonable timeframe, is also to blame for the difficulties that refugees and asylum seekers face in South Africa. Desperation forces refugees to work in the informal economy where they are exploited and given low wages inadequate to secure their livelihoods. I argue that South Africa should honour its commitments to refugees' fundamental human rights and take a firm stance against racist and xenophobic attacks, which persist in the country despite the grave consequences for victims, the national economy, and the country's international reputation.

References

Amnesty International. (2019). *Living in Limbo Rights of Asylum Seekers Denied*. Amnesty International South Africa, Johannesburg: South Africa.

Behrends, A. (2018). *On categorizing. Doing and undoing 'refugees' in the aftermath of large-scale displacement*. Vienna Working Papers in Ethnography(6).

Betts, A., Omata, N., Rodgers, C., Sterck, O., & Stierna, M. (2019). *The Kalobeyei model: towards self-reliance for refugees?* Refugee Studies Centre, Oxford Department of International Development, University of Oxford.

Bourbeau, P. (2011). *The securitization of migration: A study of movement and order.* Taylor & Francis.

Carciotto, S., & Ferraro, F. (2020). Building blocks and challenges for the implementation of the global compact on refugees in Africa. *Journal on Migration and Human Security*, 8(1), 83-95.

Chigumadzi, P. (2019). Afrophobia is growing in South Africa. Why? Its leaders are feeding it. *African Arguments* (October 9).

Claassen, C. (2017). Explaining South African Xenophobia. Available at SSRN 2974065.

Crea, T. M., Loughry, M., O'Halloran, C., & Flannery, G. J. (2017). Environmental risk: Urban refugees' struggles to build livelihoods in South Africa. *International Social Work*, 60(3), 667-682.

Crush, J. (1999). Fortress South Africa and the deconstruction of Apartheid's migration regime. *Geoforum*, 30, 1-11.

Crush, J., Dodson, B. & Tevera, D. (2017). Harnessing migration for inclusive growth and development in Southern Africa. Southern African Migration Programme.

Crush, J., & Skinner, C. (2017). Rendering South Africa undesirable: a critique of refugee and informal sector policy. Southern African Migration Programme.

Dodson, B. & Crush, J. (2015). Migration Governance and Migration Rights in the Southern African Development Community (SADC): Attempts at Harmonization in a Disharmonious Region. Geneva: The United Nations Research Institute for Social Development.

Ekambaram, S. (2020). Refugee and Migrant Rights Programme, Lawyers for Human Rights. www.youtube.com/watch?v=tYSmGogpztA

Freedman, J., Crankshaw, T. L., & Mutambara, V. M. (2020). Sexual and reproductive health of asylum seeking and refugee women in South Africa: Understanding the determinants of vulnerability. *Sexual and Reproductive Health Matters*, 28(1), 1758440.

Government Gazette. (2020). Article 21.6 of the Refugees Amendment Bill 2020. www.gpwonline.co.za/Gazettes/Gazettes/39067_6-8_ HomeAffairs.pdf

Greenwood, A. (2019). Authority, discourse and the construction of victimhood. *Social Identities,* 25(6), 746-758.

Greenwood, X. (2018). South Africa is the most unequal country in the world and its poverty is the "enduring legacy of apartheid", says World Bank. *The Independent* (4 April).

Hammerstad, A. (2012). Securitisation from below: the relationship between immigration and foreign policy in South Africa's approach

to the Zimbabwe crisis. *Conflict, Security & Development,* 12, 1-30.

Hobden, C. (2021). *Citizenship in a globalised world*, Routledge.

International Organisation for Migration. (2013). *Southern Africa*. https://www.iom.int/southern-africa

International Organisation for Migration. (2018). Global Migration Indicators 2018. Geneva: International Organisation for Migration.

International Organisation for Migration. (2020). World Migration Report 2020. Geneva: International Organisation for Migration.

Kavuro, C. (2015). Refugees and asylum seekers: Barriers to accessing South Africa's labour market. *Law, Democracy & Development*, 19, 232-260.

Khan, F. (2020). Does the right to dignity extend equally to refugees in South Africa? *African Human Rights Law Journal,* 20(1), 261-284.

Kleinsmidt, V., & Manicom, D. (2010). A policy analysis of the Refugee Act 130 of 1998. *Africa Insight,* 39(4), 164-183.

Landau, L. B. (2012). *Exorcising the demons within: Xenophobia, violence and statecraft in contemporary South Africa:* Wits University Press.

Landau, L. B. (2018). Xenophobia in South Africa: why it's time to unsettle narratives about migrants. *The Conversation* (6 September).

Landau, L. B., Ramjathan-Keogh, K., & Singh, G. (2005). Xenophobia in South Africa and problems related to it. Forced Migration Studies Programme, University of the Witwatersrand Johannesburg.

Landau, L. B. & Misago, J. P. (2009). Who to blame and what's to gain? reflections on space, state, and violence in Kenya and South Africa. *Africa Spectrum*, 44, 99-100.

Lawyers for Human Rights. (2018). Opinion: Open Letter to President Ramaphosa on World Refugee Day. https://mg.co.za/article/2018-06-20-00-open-letter-to-president-ramaphosa-on-world-refugee-day

Le Courant, S. (2015). Vivre sous la menace: ethnographie de la vie quotidienne des étrangers en situation irrégulière en France. Doctoral Thesis, Université Paris Nanterre. https://www.theses.fr/2015PA100014

Lyon, B. (2014). Detention of migrants: Harsher policies, increasing international law protection. In *Research Handbook on International Law and Migration* (pp. 173-193): Edward Elgar Publishing.

Manby, B. (2020). Citizenship and Statelessness in the Member States of the Southern African Development Community. Available at SSRN 3783295.

Mansour-Ille, D. (2018). The economic dimensions of mobility: access to jobs and sustainable livelihoods. London: Royal Institute of International Affairs.

Marshall, B. (2017). Surviving South Africa. African Refugees' and Asylum-seekers' Post-Migration Difficulties and Mental Health Experiences. Honours thesis, University of Kwazulu Natal.

Masuku, S. (2020). How South Africa is denying refugees their rights: what needs to change. *The Conversation* (12 May).

Mbiyozo, A.-N. (2018). Aligning South Africa's migration policies with its African vision. Institute of Security Studies. https://issafrica. org/research/policy-brief/aligning-south-africas-migration-policies-with-its-african-vision

McKenzie, J., Kelly, J., & Shanda, N. (2018). Starting where we are: Situational analysis of the needs of learners with severe to profound sensory or intellectual impairments in South Africa. Cape Town: University of Cape Town.

Misago, J., & Monson, T. (2010). Non-nationals displaced in South Africa. *Forced Migration Review*, 34, 62-64.

Molnár, T. (2016). The principle of non-refoulement under international law: Its inception and evolution in a nutshell. *Corvinus Journal of International Affairs* (COJOURN) Vol, 1.

Moyo, K., & Zanker, F. (2020). Political contestations within South African migration governance. Freiburg: Arnold-Bergstraesser-Institute. https://www. arnoldbergstraesser. de/sites/default/files/political _contestations_within_south_african_migration_governance _moyo_and_zanker. pdf.

Mthembu-Salter, G., Amit, R., Gould, C. & Landau, L. B. (2014). Counting the Cost of Securitising South Africa's Immigration Regime. University of Sussex.

Neocosmos, M. (2008). The politics of fear and the fear of politics: Reflections on xenophobic violence in South Africa. *Journal of Asian and African Studies*, 43, 586-594.

Ngota, B. L., Rajkaran, S., Balkaran, S. & Mang'unyi, E. E. (2017). Exploring the African immigrant entrepreneurship-job creation nexus: A South African case study. *International Review of Management and Marketing,* 7, 143-149.

Nkomo, T. S. (2019). Exploring Congolese refugees and asylum seekers' survival strategies in South Africa: Implication for social work

practice. *Journal of Human Behavior in the Social Environment*, 29, 4, 499-518.

Nyoka, N. (2020). Amended Refugee Act restricts fundamental rights. *Mail & Guardian* (20 January).

Olivier, M. & Govindjee, A. (2021). White Paper on International Migration and the Refugee Amendment Act 11 of 2017 (RAA). *South African Journal On Human Rights,* 37, 442-465.

Peberdy, S. (2016). International migrants in Johannesburg's informal economy. African Books Collective.

Pillay, S. (2021). The problem of colonialism: assimilation, difference, and decolonial theory in Africa. *Critical Times*, 4, 389-416.

Polzer, T. (2010). Migration Fact Sheet 1: Population Movements in and to South Africa. Johannesburg: FMSP.

Polzer, T. & Takabvirwa, K. (2010). 'Just crime'?: Violence, xenophobia and crime: discourse and practice. *South African Crime Quarterly*, 33, 3-10.

Porter, G. (2019). (Producer, September 2022). BBC Hard Talk, Dr Grace Naledi Mandisa Pandor - South African Minister of International Relations [video]. Retrieved from https://www.youtube.com/watch?v=5Hkmr1G23C8

Pophiwa, N. (2017). Cashing in on mobility: Cross-border shopping and the political economy of the Zimbabwe–South Africa Borderland. In Nshimbi, C. & Moyo, I., *Migration, cross-border trade and development in Africa: exploring the role of non-state actors in the SADC region* (pp. 159-90). Palgrave Macmillan.

Refugee Council of Australia. (2020). Identity documents for refugees. Retrieved from https://www.refugeecouncil.org.au/identity-documentation/

Refworld. (2020). Constitution of the Republic of South Africa.

Roets, L., Botha, A., Greeff, M., Human, S. P., Strydom, H., Watson, M. J., & Chigeza, S. (2016). A synthesis of homelessness in South Africa: A rapid critical appraisal. *Development Southern Africa,* 33, 5, 613-627.

Rogerson, C. M. (2016). Progressive rhetoric, ambiguous policy pathways: Street trading in inner-city Johannesburg, South Africa. *Local Economy*, 31,1-2, 204-218.

Rukema, R. J., & Pophiwa, N. (2020). Cross-border mobility between South Africa and Zimbabwe: historical and contemporary trajectories of development in Musina, South Africa. *Mankind Quarterly*, 61, 2.

Rugunanan, P., & Smit, R. (2011). Seeking refuge in South Africa: Challenges facing a group of Congolese and Burundian refugees. *Development Southern Africa*, 28(5), 705-718.

Rutherford, B. (2020). Nervous conditions on the Limpopo: Gendered insecurities, livelihoods, and Zimbabwean migrants in northern South Africa. *Studies in Social Justice*, 2020(14), 169-187.

Schockaert, L., Venables, E., Gil-Bazo, M.-T., Barnwell, G., Gerstenhaber, R., & Whitehouse, K. (2020). Behind the scenes of South Africa's asylum procedure: a qualitative study on long-term asylum-seekers from the Democratic Republic of Congo. *Refugee Survey Quarterly,* 39, 1, 26-55.

Schulze, J. (2011). Tapping the potential of displaced youth: Guidance for nonformal education and livelihoods development policy and practice. New York: Women's Refugee Commission.

Stupart, R. (2016). Is South Africa home to more than a million asylum seekers? The numbers don't add up. *Mail & Guardian Online* (15 August).

Sutton, R. & Vigneswaran, D. (2011). A Kafkaesque state: deportation and detention in South Africa. *Citizenship Studies,* 15, 627-642.

Tawodzera, G., & Chikanda, A. (2016). International Migrants and Refugees in Cape Town's Informal Economy: OSSREA.

Tenai, N. K., & Mbewu, G. N. (2020). Street homelessness in South Africa: a perspective from the Methodist Church of Southern Africa. *HTS Teologiese Studies/Theological Studies*, 76(1).

United Nations Children's Fund. (2020). Child Displacement. https://data.unicef.org/topic/child-migration-and-displacement/displacement/.

United Nations Department of Economic and Social Affairs. (2017). Population Facts. New York: UNDESA.

United Nations General Assembly. (2011). Report of the Special Rapporteur on the human rights of migrants, Jorge Bustamante: Addendum - Mission to South Africa (A/HRC/17/33/Add.4). Retrieved from https://reliefweb.int/report/south-africa/report-special-rapporteur-human-rights-migrants-jorge-bustamante-addendum

United Nations General Assembly. (2016). In safety and dignity: addressing large movements of refugees and migrants. Report of the Secretary-General.

United Nations High Commissioner for Refugees. (2015). 2015 UNHCR Country Operations Profile, South Africa: Refworld.

United Nations High Commissioner for Refugees. (2016). Global Trends Forced Migration Report 2015.

United Nations High Commission for Refugees (UNHCR) (2019a). Global Trends: Forced Displacement in 2018. Geneva.

United Nations High Commission for Refugees. (2019b). Refugee Livelihoods and Economic Inclusion 2019-2023 Global Strategy Concept Note.

United Nations High Commission for Refugees. (2019c). The UN Refugee Agency.

United Nations High Commissioner for Refugees. (2021). Figures at a Glance.

United Nations Human Rights. (2022). South Africa: UN experts condemn xenophobic violence and racial discrimination against foreign nationals.

United States Committee for Refugees and Immigrants. (2009). World Refugee Survey "South Africa".

Vanyoro, K. (2021). Activism for migrant domestic workers in South Africa: Tensions in the framing of labour rights. *Journal of Southern African Studies*, 47, 663-681.

Wedekind, V., Fakoush, H., & Alla-Mensah, J. (2019). Human Migration and TVET: Discussion Paper. Bonn: Unesco-Unevoc.

Weissbrodt, D. & Hortreiter, I. (1999). The Principle of Non-Refoulement: Article 3 of the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment in Comparison with the Non-Refoulement provisions of other international human rights treaties. *Buffalo Human Rights Law. Rev*., 5, 1.

World Bank. (2017). Principles on Identification for Sustainable Development: Toward the Digital Age, Washington, DC: USA.

Zetter, R., & Ruaudel, H. (2016). Refugees' right to work and access to labour markets–An assessment. World Bank Global Program on Forced Displacement (GPFD) and the Global Knowledge Partnership on Migration and Development (KNOMAD) Thematic Working Group on Forced Migration. KNOMAD Working Paper. Washington, DC: World Bank Group.

Ziersch, A., Due, C., Howe, J., Walsh, M., Miller, E., & Flavel, J. (2022). Pathways to employment for social inclusion, health and wellbeing for women from refugee backgrounds. Flinders University.

Cholera Discourse Among the Asante of Ghana since the Colonial Period: Continuities and Discontinuities in Ayigya Zongo

Samuel Adu-Gyamfi
mcgyamfi@yahoo.com

Janet Adjaottor
amakiejanet@gmail.com

Derrick Sarpong Owusu
dsowusu49@gmail.com

Department of History and Political Studies
Kwame Nkrumah University of Science and Technology, Kumase-Ghana

Abstract

Cholera is a highly infectious disease with the ability to cause death within hours; an outbreak of epidemic forms of cholera is widely treated as a public health emergency. Ghana is considered a cholera hotspot because the major risk factor of cholera, poor sanitation, is ever-present in most parts of the country. Data were gathered in 2021 from the archives, oral interviews, and literary sources to explore how cholera was understood and treated in the Asante Region of Ghana, with a primary focus on Ayigya Zongo in the city of Kumase. Findings revealed that most interviewees were aware of what cholera is and to a large extent the means of prevention, but socio-economic conditions may force a neglect of facts. Proper sanitation, drinking safe water, and eating clean and healthy foods are among the basic means of preventing the disease, and may also prevent other sanitary-related diseases including other diarrhoeal diseases and typhoid fever. A success story in Ayigya Zongo could have further implication for West-Africa, Ghana and Asante in particular.

Key Words: cholera, cholera hotspot, sanitation, public health

Cholera is an "acute diarrhoeal infection" caused by the ingestion of food or water that has been contaminated with the bacterium Vibrio cholerae (World Health Organization (WHO, 2021). It is highly infectious, and the emergence of epidemic forms have been treated as public health emergencies (Lee, 2001). Cholera endemic countries are those without sustainable access to improved sanitation facilities (WHO, 2021) and a majority are in Sub-Saharan Africa (Ali et al. 2015). About 1.4 billion persons are at risk of contracting cholera in endemic countries and about 3 million to 5 million persons get infected, with deaths ranging from 100,000 to 120,000 per year globally (UNICEF, 2013). More recently, WHO (2021) estimated that there are 1.3 million to 4 million cases of cholera and 21,000 to 143,000 deaths worldwide. Affected nations suffer harsh economic impacts (Lee, 2021). Thus, the European Union banned fresh imports from Kenya, Uganda, Tanzania, and Mozambique following the cholera outbreak in East Africa in 1997-98. Guinea refused to acknowledge suspected cases of cholera during a 1970 outbreak and withdrew from membership when the WHO announced it (Echenberg, 2011). Although WHO (2018) reported that the number of cholera cases globally decreased by 60% in 2017, Gonzalez et al. (2020) have warned that the menace of pandemics continues even today (COVID-19), and that the world should be on the alert. WHO (2021) reported that cholera, the "seventh pandemic" in particular, which commenced in 1961 in Asia (Indonesia) reached Africa by 1971. Echenberg (2011) maintains that at that time pandemic experts did not foresee Africa accounting for most of the global burden or that a disease of Asian origin would become an "African disease."

Forty to eighty million people across Africa are estimated to live in cholera hotspots (Global Taskforce on Cholera Control [GTFCC], 2017), including approximately eight million in Ghana (Tutu et al., 2019). The risk of cholera outbreaks is amplified in the face of poverty, war, or natural disasters, which may compel people to live in crowded conditions without adequate sanitation (Jahan, 2016). Irregular supplies of safe drinking water as well as improper sanitary practices in urban communities in Ghana put people at risk of contracting cholera (Osei and Duker, 2008). Mireku-Gyimah et al. (2018) indicate that persons with compromised immune systems and malnourished children are at greater risk of death after contracting cholera, but the disease is fatal even for healthy young adults in comparison with other

diarrhoeal diseases. During the 2014 cholera outbreak in Ghana, infected individuals aged 20-49 accounted for 70% of the total cases.

The literature on cholera outbreaks in Ghana has focused on the Greater Accra Region or on coastal regions where cholera cases are usually predominant and most works deal with the epidemiological or scientific aspects of the disease, relegating policy aspects to the background. Several works have focused on the seventh cholera pandemic (1961 to present) but little consideration has been given to the colonial period and how that has shaped present actions in Asante. This study traces the efforts of the colonial administration and local actions to prevent sanitary-related diseases. We find continuity with current local initiatives and communal interventions by city and municipal officials in the prevention of cholera, in Asante and Ayigya Zongo in particular. The study explains the relationship between cholera prevention and the prevention of other diseases and identifies challenges in cholera control and the way forward through global institutionalised policies and the lens of applied history.

Method of Study

Our study used a qualitative approach to gather data, present findings, and construct its analysis. Both primary and secondary sources were used. Primary sources included archival information and oral interviews. Archival data from the colonial period were analysed to identify the policies and means used by the colonial administration that may have quelled potential cholera outbreaks and that may have ramifications for the post-colonial period and the current fight against cholera. Oral interviews were conducted to compensate for lack of records on cholera for Ayigya Zongo. Respondents were sub-divided into three key categories: residents of Ayigya Zongo (twenty individuals) who gave first-hand information on cholera in Ayigya Zongo; officials from Oforikrom Municipal Health Directorate, the Oforikrom Municipal Assembly, and the Kumase Metropolitan Assembly (KMA) who were interviewed for their expert knowledge on policies and how they have been operationalised; and health workers from the Bomso clinic and the Kwame Nkrumah University of Science and Technology (KNUST) hospital that are closer to Ayigya Zongo who provided information on how cholera and other sanitary-related diseases could be prevented. Respondents gave consent for the interviews to be conducted based on an

introductory letter from the Department of History and Political Studies at KNUST. The interviewees did not find the interview problematic and did not think that it would have any adverse impact on any individual. Information was thematically pieced together to form a synthesis that satisfied the objects of the research. The discussion that follows is examined under two broad sections - cholera in Asante during the colonial era and cholera in contemporary times, with reflections on contemporary efforts in Ayigya Zongo, a suburb of Kumase, which is the capital of the Asante region of Ghana.

Cholera in Asante

Poor sanitation is the primary factor that triggers cholera outbreaks, though the first cholera epidemic in the world, recorded in 1817 in Jessore India, came about as a result of contaminated rice (GTFCC, 2017; Osei and Duker, 2008). The first case of cholera in Ghana was recorded on 1st September 1970 when a Togolese national from Guinea collapsed at the Kotoka International Airport and was later found to have cholera (Osei and Duker 2008). Cholera may have existed in an earlier period but owing to inadequate means of surveillance and detection was not recorded officially in what we now refer to as Ghana. The sixth cholera pandemic (1899-1923) coincided with the colonisation of the Gold Coast (1874-1957) (Berry, 1995) but did not generate a recorded case of cholera. Still, the European presence and broader human interactions brought diseases like influenza, yellow fever, and the bubonic plague, and necessitated the first formal interventions in public health (Patterson, 1983; Adu-Gyamfi & Donkoh, 2013).

Some of the settlements within the Gold Coast were known for their filthy conditions (Adu-Gyamfi et al. 2013). Some had pools of water that attracted swarms of insects and emitted foul odours and garbage was dumped indiscriminately. The lack of adequate latrines also meant that human excreta was a major sight (Adu-Gyamfi et al., 2013). Such conditions contributed to the spread of diseases including malaria, worm infestation, yellow fever, sleeping sickness, yaws, and possibly cholera (Twumasi 1975), which might have been mislabelled among the diarrhoeal diseases. Recent studies (WHO 2023) have shown that there are three clinical types of diarrhoea - acute watery diarrhoea, which includes cholera; acute bloody diarrhoea also referred to as dysentery; and persistent diarrhoea. To prevent environment-

related diseases, the colonial administration adopted certain public health measures including "health education, immunisation, and provision of health facilities, screening tests, and provision of incinerators" (Adu-Gyamfi et al., 2017). These measures ultimately led to the establishment of hospitals and Public Health Boards (PHBs) including the Kumase Public Health Board (KPHB).

Public Health Laws and Strategies in the Colonial Period

The Colonial Administration recognised the need to provide clean water because drinking contaminated water increased the risk of water-borne diseases. The Asante Administration Ordinance, 1902, required among other things that persons with barrels or tanks for storing water had to cover them properly and all openings in that receptacle had to be properly secured (ARG 1/14/3/1. Amoako-Gyampah (2021) noted that household sanitary inspection in the Gold Coast began in the late nineteenth century and reached its peak in the first decade of the twentieth century. For example, there were sanitary inspections at the Kumasehene's (Chief of Kumase) residence. In 1914, pipe-borne water in Obuase in the Asante region was provided (ADMS 5/1/113) and in 1934, "pipe-borne, filtered and chlorinated" water supply was provided for Kumase, the capital of Asante (ADMS 5/1/113). The Water Guard, a unit under Public Health Board's sanitary division in Kumase, was tasked with preventing people and animals from tampering with the town's water chlorination facility; even when no disease-causing organisms were present, it was observed that "water containing gritty earth in suspension could cause the most severe virulent diarrhoea" (Adu-Gyamfi et al. 2013). The provision of safe drinking water, without a doubt, aided the prevention of certain contaminated water related diseases. Even in contemporary times, Echenberg (2011) has argued that promoting an awareness of the role of drinking water in cholera transmission is needed as a control mechanism.

Important was the Infectious Disease Act, 1908, which aimed at preventing the spread of infectious and contagious diseases. The act re-emphasised quarantine as a means to curtail the spread of infectious diseases and criminalised the withholding of information about infected persons (Infectious Disease Act, 1908). In 1915, the Quarantine Ordinance was passed to prevent the introduction of plague and other infectious diseases that

entered the Gold Coast through the ports by quarantining individuals before they had contact with persons in the local communities (ADMS 5/1/113). From 1928-1929, Quarantine Regulations in conformity with the International Sanitary Convention, 1926, were adopted to protect countries from infectious diseases including cholera (ADMS 5/1/113).

Dr. Dalziel, the Senior Sanitary Officer of the Gold Coast in the 1920s, believed in a systematised approach of providing public education that would deal with the sanitation quandary (Public Records & Archives Administration Department [PRAAD] Kumase, 1920). Correspondence in 1924 between sanitary officials in Kumase and Victoriaborg, following the outbreak of bubonic plague in Kumase, shows how cholera might have been prevented during the colonial period. Recommendations included adequate pipe-borne water supplies, surface drainage systems, efficient refuse disposal systems, licensing food vendors, additional legislation, and increased sanitary staff (PRAAD, ARG 1/14/2/1). In 1926, the Acting Medical Officer, Selwyn-Clarke, recommended some amendments which could help strengthen byelaws to abate nuisances in Kumase (MAG 1/17/1B). The occupier or owner of a premises was responsible for the clearing of weeds and cleaning the street and drain gutters, including clearing weeds from any adjoining land situated within 20 yards of the premises (MAG 1/ 17/1B). Sanitary inspections were very important in Kumase and the training of sanitary inspectors continued even when it was stalled in Accra (ADMS 5/1/113).

Up to 1934, the Gold Coast Colony Report on the Medical Department indicated that cholera had not been recorded in the country. However, as part of efforts to prevent and control the spread of infectious diseases, public health ordinances and acts designed to prevent certain diseases also aided the prevention of cholera, including the careful disposal of "night-soil" and provision of up-to-standard toilet facilities; the control of market centres and protection of foodstuffs; and education of the public about the dangers of flies and the proper disposal of refuse to prevent the breeding of vermin (Report of the Medical Department 1934). In Kumase, a disinfection station was set up. Regular disinfection exercises were carried out for immigrant labourers from the North; they were shaved, bathed, and had their clothes disinfected to prevent them from harbouring diseases. The disinfection exercises in Kumase usually occurred in the Zongos (ADMS

5/1/113). These efforts had the propensity to mitigate diseases that resembled cholera.

Improvement in housing to prevent overcrowding, extension of layouts in the towns and rural areas, and education of people of all ages and classes with particular emphasis on the school child, largely contributed to the prevention of diseases and improved the general health and well-being of the local population. Prevention of helminthic diseases (ankylostomiasis, ascariasis, taeniasis) required the proper disposal of sewage and provision of toilet facilities as well as eating well-prepared foods, which also had the propensity to prevent diarrhoeal infections. From the notes of an interview between Kumase Bread Sellers and the Chief Commissioner of Asante, the Commissioner advised that bread should be baked in sanitary places away from flies and dust (PRAAD, 1928). The 1934 Report also indicated that missionary groups played an important role in educating the people by exhibiting exemplary acts in cleanliness, which had far-reaching effects in preventing diseases. Sanitary inspections were an important aspect of the activities of the colonial administration. They served as a tool to check unsanitary conditions or activities tagged as nuisance and injurious to health and well-being(Towns Act, 1892; Amoako-Gyampah, 2021).

There were some collaborative efforts between traditional and colonial authorities to safeguard the health of the local population. Indeed, the *Kumasehene* (the chief of Kumase) wrote to the Senior Sanitary Officer requesting an inspection of a poultry yard he had built on his premises (MAG 1/17/1B). The memorandum the senior officer sent following the inspections stated that cattle pens should be kept a distance away from his main residence and pigs should be reared outside the town's boundary to prevent contracting diseases from them (MAG 1/17/1B). In 1929, the Medical Officer of Health drew the attention of the Kumasehene, Nana Prempeh, to the filthy state of his premises, which aided the breeding of mosquitoes that were injurious to his health including the public's health. The Kumasehene took action to ensure proper sanitation of his premises (MAG 1/17/1B). The District Commissioner advised that residents paid a sanitation fee to receive improvements. They set up a sanitation committee to oversee sanitation, but the commissioner reported that education was more important to deal with the bad environmental hygiene (ARG 1/14/3/8). On 23rd December 1933, an inspection was carried out in Konongo Gold Mines in Asante by the Senior

Health Officer who advised that both combustible and incombustible refuse should be disposed in covered pits or in incinerators instead of throwing it away indiscriminately in surrounding bushes. He further advised that instead of emptying pails of sewage or night soil in surrounding bushes which bred fly-maggots, sewage could be disposed into fly-proof disposal pits; alternatively, roofed, screened pit-latrines of width, three inches, and depths of at least twenty inches, could also be constructed in place of crude pan-latrines (ADMS 5/1/113). Again, it was apparent that strengthening legislation that dealt with rural and township sanitation could achieve satisfactory results and such efforts by the colonial administration reduced diseases that came about as a result of poor sanitation. Several of these policies were replicated in post-colonial policies

Certain by-laws also helped traditional rulers to maintain hygienic standards and established penalties for violations (Adu-Gyamfi et al., 2013). Chiefs in Asante embraced these by-laws, especially in the early twentieth century (Adu-Gyamfi et al., 2013). The Asante Confederacy Native Authority issued directives in 1935 under Section 9 of the Native Authority Ordinance, which gave instructions to chiefs of various villages in Asante to build latrines and dumpsites (PRAAD Kumase, ARG 1/14/2/1). The improvement of these basic facilities, superintended by the chiefs and headmen, had the propensity to curtail sanitary and environmental related diseases including cholera.

Cholera in Post-Colonial Asante

In Asante, the Kumase Metropolitan Assembly (KMA), established in 1988, became the governing body overseeing sanitation (Ghana Statistical Service, 2014). Such assemblies traced their origins from the colonial period, especially from the creation of the Kumase Public Health Board and the emergence of District and Town Councils from the 1940s onwards. Although the study area, Ayigya Zongo, ceased to be part of the KMA in 2018, for the most part KMA was the administrative authority in charge of the community. It played an active role in the prevention of diseases including cholera through health education and routine checks by environmental health officers at markets, homes, food vendor spaces and hospitality facilities. The KMA imposed punishments including fines, seizures of equipment, and imprisonment of persons flouting the rules. An interviewee hinted that

Kumase is a hotspot for cholera outbreaks: the population of the city keeps rising steadily, with many people found in slums and squatter settlements with inadequate access to sanitary facilities (Interview with Simon Owusu, Deputy Prosecutor, KMA. 28th September 2021, at KMA Office).

Jahan (2016) has argued that the social, behavioural, and demographic characteristics of individuals and communities directly influence cholera outbreaks and their spread. Awareness about cholera and action against sanitary-related diseases among residents was keenly dependent on factors such as age, educational background, and socioeconomic status. On the part of city officials, cholera prevention was determined mainly by financial strength, which dictated the effectiveness of garbage collection, public education, and vaccination. It is clear that the current institutional action geared toward the fight against cholera is not dissimilar from the actions which were taken during the colonial period. Contemporary institutions are a semblance of the colonial institutions, which performed similar functions to prevent infectious diseases in the first instance. The continuation of such efforts could prevent the outbreak or continuous existence of cholera by 2030, as anticipated by the WHO (WHO, 2023). Individual interventions against cholera refer to preventive measures that individuals adopt for themselves against cholera. Communal interventions are preventive measures city and municipal officials and units adopt for the protection of the public from cholera and other sanitary-related diseases. According to the WHO (2021), the scope of disease prevention encompasses "specific, population-based and individual-based interventions for primary and secondary early detection and prevention… to minimize the burden of diseases and associated risk factors". UNICEF (2013) has reported that "the risk of transmission, illness and death from cholera is proportional to the interaction of cholera with the host and the environment." A combination of both individual and communal measures could prevent cholera on a wide scale.

UNICEF (2013) acknowledges that early detection and effective treatment is critical, but equally so is individual awareness and knowledge. In our sample, varying responses were given on what individuals would do if they experienced severe vomiting and frequent diarrhoea. Residents who had some formal education knew more about cholera than those who had

little or no formal education and it could be argued that residents in Ayigya Zongo who know the key symptoms of cholera would be able to identify a suspected case for themselves or those around them. 55% of the respondents indicated that they would either prepare and drink an Oral Rehydration Salt (ORS) solution or a salt and sugar solution. Others suggested that they would take Colodium capsules, a drug that causes relief of acute and non-specific diarrhoea (MIMS, 2021). 45% of the respondents indicated that they would visit the pharmacy for medication. It was after symptoms persisted or worsened that respondents indicated visiting a hospital. We note that their means of "self- medication" using ORS is consistent with the treatment recommendations of WHO (2021). The result also reaffirms the conclusion of Donkor et al. (2012) who hypothesised that the incidence of self-medication in Ghana is high. Asked how cholera is a threat to public health, 100% of the respondents indicated that cholera could lead to death or other dire consequences. This reinforces their positive level of awareness about cholera. Respondents were aware of the risk of consuming unclean food and water. Two interviewees were sceptical about buying food from food vendors reputed to prepare food with rotten foodstuffs including cooking and selling under unhygienic conditions.

Under the Local Governance Act of 2016, the Oforikrom Municipal Assembly like other Metropolitan, Municipal and District Assemblies (MMDAs) is responsible for the "development, improvement and management of human settlements and the environment". Simon Agangiba, an interviewee and an assistant to the Municipal Environment Officer, argued that the role of the Environmental Health and Sanitation Unit has been to identify disease risk factors and address them (Interview with Simon Agangiba, Assistant to Municipal Environmental Officer, 24th September 2021). People could protect themselves against cholera by practising personal hygiene and using modern toilet facilities such as flush toilets and bio-digesters. This prevention guideline has similarly been encouraged by the Centers of Disease Control and Prevention (CDC, 2020). The CDC (2020) has also advised that faeces should be buried in the ground and away from water sources as a solution to a lack of latrines. The Public Health Act 2012 guides the activities of the MMDAs including the Oforikrom Municipal Assembly and seeks to "prevent disease, promote, safeguard, maintain and protect the health of humans and animals" (Interview with Simon Agangiba).

The Act mandates the MMDAs to ensure that buildings are erected with permits and have the requisite sanitary prescriptions, and that food vendors are screened and fined or imprisoned when sanitary regulations are disregarded.

Field interviews showed that Ayigya Zongo is an at-risk community for cholera outbreaks due to inadequate sanitary facilities. The community was not properly planned, and settlement patterns do not provide adequate spaces for good sanitary practices (Interview with Simon Agangiba). Inadequate toilet facilities have led to open defecation and inadequate garbage collection systems and encouraged the indiscriminate dumping of refuse, risking cholera outbreaks (Interview with Simon Agangiba). Antwi-Agyei et al. (2019) indicate that a lack of household toilets can be attributed partly to financial barriers and lack of technical support. Some of the environmental health policies implemented in the municipality to prevent cholera include provision of toilet facilities (bio-digesters) in low-income households - 30% of the cost is borne by individuals and 70% by the government. The assembly also carries out home-to-home garbage collection, though the cost is borne by the household; areas that called for improvement were the provision of adequate sanitary facilities and enforcement of the "one house, one toilet" policy which stipulates that each household needs to have its own toilet, and access to pipe- borne water (Interview with Simon Agangiba). The one house, one toilet policy was among the 2016 campaign promises of the current government (Modern Ghana, 2022).

The interview with the head of Disease Control and Surveillance showed that the top priorities of the directorate include the abolition of malaria and diarrhoeal diseases which the Institute for Health Metrics and Evaluation lists among the top ten causes of mortality in Ghana. Two locations within the municipality were seen as places with high risk of cholera outbreaks - Ayigya Zongo and Anloga-Susuakyi in Kumase . In Ayigya Zongo, on a scale of 1-10 with 10 being the worst, the likelihood of a cholera outbreak was 7. This was because of the indiscriminate dumping of refuse, households lacking toilets and the use of "Ventilated Improved Pits" instead of flush toilets. Those regarded as especially vulnerable to infection with cholera were children between the ages of 5-10 years (Interview with Steven Ayinabom, Head of Municipal Disease Control and Surveillance Unit

at the Oforikrom Municipal Health Directorate, 24th September 2021).

The Disease Control and Surveillance Unit performs periodic disease surveillance in the communities and health centres. Interventions are made with notice of cholera outbreak in any locality. The Directorate provides information through three public health modules: first, "Prevention" (covering the vaccination of infants with Rotavac and the use of WHO-recommended oral vaccines against cholera such as Dukoral, Shanchol, and Euvichol-Plus); second, "Health Promotion" (health education and campaigns in public places such as schools, churches, markets, and mosques); and third, "Protection" (ensuring clean surroundings in collaboration with the Environmental Health and Sanitation Unit Health officers of the Assembly). Public health staff embark on educational campaigns to educate residents, especially nursing mothers on health safety practices as part of efforts in the creation of awareness (Interview with Steven Ayinabom).

The power of education in cholera prevention and control cannot be downplayed. Osei and Stein (2018) have reported that the decline in cholera cases after 18 days during the 2005 outbreak could be attributed to intense educational campaigns on radio, television and newspapers since the beginning of the outbreak. Better outcomes were achieved when education was used in conjunction with improved hygienic practices by individuals as well as the provision of improved water and sanitation by the government (Osei and Stein, 2018). At the same time, the head of the surveillance Unit at the Oforikrom Directorate hinted that the Directorate needed support in logistics and transportation to aid early detection of the disease in the event of a potential outbreak (Interview with Steven Ayinabom).

The WHO (2021) has affirmed that early detection of cholera reduces the disease burden. UNICEF Ghana has indicated that social mobilisation in urban areas for sanitation is difficult due to their multicultural and cosmopolitan nature, and the institutions of local government have limited capacity for collective action (UNICEF Ghana, n.d.). Whilst the United Nations General Assembly (2010) affirms that it is the responsibility of the State to ensure the protection of the rights of its citizens, which include access to water and sanitation (UNGA 2010), Owusu (2010) has argued that poor sanitation is as a result of inadequate policy action from central and local government institutions. The weakened capacity of local government

institutions is attributed to rapid urban growth which has exceeded their ability to provide basic services such as adequate sanitation.

Prevention of Cholera and Other Diseases

The practice of preventing a disease which has the potential of preventing another disease is not alien in the Ghanaian context. For instance, Amoako-Gyampah (2021) indicated that the control of mosquitoes within the colonial period also dealt with yellow fever. At the time of the field interviews, there was no ongoing cholera epidemic in Ayigya Zongo. The majority of the interviewees had not been directly infected with cholera but were able to draw linkages between cholera prevention and its effect on the prevention of other sanitary-related diseases. There was close uniformity in responses from residents, municipal officials, and health workers. Generally, the respondents were of the view that eating good food, drinking clean water, and maintaining clean surroundings are at the centre of the prevention of diseases such as typhoid fever and malaria. According to Adu-Gyamfi et al. (2017), proper waste management has reduced the risk of cholera and simultaneously helped in preventing malaria and typhoid fever. An interview with a Principal Nursing Officer at Bomso Clinic showed that the causes of cholera were similar to typhoid fever, and the prevention of cholera led to the prevention of typhoid fever (Interview with Vera Duncan, Nurse Manager, Bomso Clinic. 27th September 2021). A Chief Nursing Officer (Intensive Care Unit) at KNUST Hospital, argued that maintaining proper hygiene prevented cholera as well as other diseases. Residents are implored to maintain proper hygiene and to eat balanced meals to enjoy the benefits of good health (Interview with Seth Boateng, Chief Nursing Officer at KNUST Hospital (ICU), 27th September 2021). Similarly, a midwife at the KNUST Hospital suggested that eating warm foods, drinking clean water, and living in hygienic places reduced the risk of cholera infection and typhoid fever (Interview with a Midwife at KNUST Hospital. 27th September, 2021). A resident of Ayigya Zongo noted that regular hand washing reduced the risk of coronavirus infection and could also reduce the risk of cholera infections and several other diseases (Interview with Felicia Achibonga, Resident of Ayigya Zongo, 22nd September, 2021).

A letter to the director of medical services in March 1950 indicated that poor record keeping could be detrimental to the public health system

(PRAAD Kumase, Illaro Experimental Mosquito Eradication). Field interviews in the contemporary period revealed that some records units in some hospitals in Kumase still do not have records on cholera (Interview with personnel from KNUST Hospital, Records Unit. 27th September, 2021). Neither did the Oforikrom Municipal Health Directorate, which started operations in 2018, hold any data on cholera (Interview with Steven Ayinabom). WHO (2021) indicated that "local capacity to detect and monitor cholera occurrence is central to an effective surveillance system to plan control measures". Without proper means of identifying cholera cases, symptoms would have to be physically identified in the event of an outbreak. There will also be increasing danger when infections spread fast, especially in unhygienic areas (Ohene-Adjei et al., 2017). Often, the identification of cholera is very difficult as most people infected are asymptomatic or exhibit mild symptoms which can be mistaken for diarrhoea (WHO, 2021). According to King et al. (2008), mild or asymptomatic cholera cases affect "the interpretation of epidemiological records."

Health workers who were interviewed revealed that they had not come into contact with any cholera cases in their line of duty. An interviewee, who had worked in the health sector for five years and witnessed persons suffering from cholera, described it as an "emergency condition." (Interview with Vera Duncan, Nurse Manager, Bomso Clinic. 27th September 2021). She further indicated that inadequate preventive action from city officials and late reporting by victims in the event of infection may have grave consequences. A general nurse (2021) at KNUST Hospital described cholera as "contagious" but thought that with proper surveillance, adequate education, and good sanitary practices the risk of cholera would be fully curtailed (Interview with a General Nurse at KNUST Hospital. 27th September, 2021). The Global Task Force on Cholera Control (2017) has adopted three key measures to ensure that cholera is reduced by 90% in 2030: early detection and quick response to contain outbreaks; a targeted multi-sectorial approach to preventing cholera recurrence; and an effective mechanism of coordination for technical support, advocacy, resource mobilisation, and partnership at local and global levels (GTFCC, 2017).

Conclusion

Cholera is a diarrhoeal disease and is largely linked to poor sanitation. It may rightly be regarded as the "poor man's disease" because in most cases poor people do not have access to proper sanitary conditions. Rapid urbanisation, spikes in population, and deteriorating levels of

sanitation have led to several incidences of cholera outbreaks in Ghana. The risk of further outbreaks is high when underlying causes have not been properly addressed. Before independence, the colonial administration was in charge of public health and standards of sanitation were achieved through taboos, communal labour, and punishments. Due to the efforts of traditional rulers and the colonial administration on sanitation especially, the outbreak of cholera was held at bay until the 1970s. Contemporary field interviews have confirmed local knowledge of cholera in Ayigya Zongo, including the knowledge of symptoms. Persons living in slums or without adequate access to proper sanitary requirements understand the importance of sanitation in preventing sanitary-related diseases such as cholera and their knowledge may largely be attributed to media campaigns and health education by municipal and metropolitan assemblies. However, socioeconomic conditions, especially poverty, hinder access to required sanitary facilities. The study also established that the prevention of cholera tends to prevent other sanitary-related diseases and solutions have emanated from some continuities in adopting earlier colonial policies that suffice in contemporary times. This is especially shown in the Assembly's fight against cholera in Ayigya Zongo. We conclude that continuing research of continuities and discontinuities in the fight against cholera is important. A successful resolution in Ayigya Zongo, especially obtaining a zero percentage or 90 percent success in the fight against cholera by 2030, would be a good model for the fight against cholera in other territories or communities in West-Africa, Ghana and Asante in particular.

References

Adu-Gyamfi, Samuel, Edward Brenya, and Peter Nana Egyir. (2017). "Public Health in Colonial and Post-Colonial Ghana: Lesson-Drawing for the Twenty-First Century." *Studies in Arts and Humanities* 3, no. 1 : 1-12. https://doi.org/10.18193/sah.v3i1.89

Adu-Gyamfi, Samuel, Prince Osei-Wusu Adjei, and Cynthia Tetteh. "The Waste Management Department of the Metropolitan Assembly of a City in Ghana (1992-2016): An Evidence Based Assessment from a People." *YFJEH* 7, no. 1 (2017): 7-38.

Adu-Gyamfi, Samuel, Prince Osei-Wusu Adjei, and Daniel Owusu-Ansah. "Preventive Healthcare Strategies and Impact among the Asante People of the Early Twentieth Century Gold Coast: A Historical Narrative and Lessons for the Present Sanitation Challenge in Kumasi." *Journal of Studies in Social Sciences* 5, no. 2 (2013): 214-238.

Ali, Mohammad, Allyson R. Nelson, Anna Lena Lopez, and David A. Sack. "Updated Global Burden of Cholera in Endemic countries. *PLOS Neglected Tropical Diseases* 9, no. 6 (2015): 1-13. https://doi.org/10.1371/journal.pntd.0003832.

Amoako-Gyampah, Akwasi Kwarteng."The Public Health Question and Mortuary Politics in Colonial Ghana." *Social History* 47, no. 3 (2021): 290-314.

Antwi-Agyei, Prince, Isaac Monney, Bismark Dwumfour-Asare, and Sue Cavill. "Toilets for Tenants: A Cooperative Approach to Sanitation Bye-Law Enforcement in Ga West, Accra. "*Environment and Urbanization*" 31, no. 1(2019) : 293-308.

Ashitey, Gilford A. *An Epidemiology of Disease Control in Ghana 1901-1990*. Accra: Ghana Universities Press, 1994.

Bharat Biotech. Rotavac. https://www.bharatbiotech.com/rotavac.html

Bwire, Godfrey, Maurice Mwesawina, Yosia Baluku, Setiala S. E. Kanyanda, and Christopher Garimoi Orach. "Cross-Border Cholera Outbreaks in Sub-Saharan Africa, the Mystery behind the Silent Illness: What needs to be done?" *PLOS ONE* 11, no. 6 (2016): 1-15. https://doi.org/10.1371/journal.pone.0156674

Centers for Disease Control and Prevention. Five Basic Cholera Prevention Steps. 2020 https://www.cdc.gov/cholera/preventionsteps.html

Centers for Disease Prevention and Control Updated 2022 https://www.cdc.gov/coronavirus/2019-ncov/your-health/isolation.html

Donkor, Eric S., Patience B. Tetteh-Quarcoo, Patrick Nartey, and Isaac O. Agyeman. "Self-Medication Practices with Antibiotics among Tertiary Level Students in Ghana: a Cross-Sectional Study."

International Journal of Environmental Research and Public Health 9 (2012): 3519-3529. https://doi.org/10.3390/ijerh103519

Echenberg, Myron. *Africa in the Time of Cholera: A History of Pandemics from 1817 to the Present*. Vol. 114. Cambridge University Press, 2011.

Ganesan, Divya, Sanjukta Sen Gupta, and Dominique Legros. "Cholera Surveillance and Estimation of Burden of Cholera." *Vaccine* 38, sup. 1 (2020): A13-A17. https://doi.org/10.1016/j.vaccine.2019.07.036

Ghana Statistical Service. "2010 Population and Housing Census: District Analytical Report, Kumasi Metropolitan." (2014)   . https://kma.gov.gh/kma_metro/docs/945KMA%20(1).pdf#page30

Global Task Force on Cholera Control. *Ending Cholera: A Global Roadmap to 2030.* Geneva, 2017.

Hahn, Robert A., and Benedict I. Truman. "Education improves public health and promotes health equity." *International Journal of Health Services* 45, no. 4 (2015): 657-678.

Infectious Disease Act. 1908 http://www.vertic.org/media/National%20Legislation/Ghana/GH_Infectious_Disease_Act_1908.pdf

Institute for Health Metrics and Evaluation. https://www.healthdata.org/ghana
Jahan, Saulat. "Cholera–Epidemiology, Prevention and Control" in *Significance, Prevention and Control of Food Related Diseases by Husssaini Anthony Makun (ed.). Croatia: InTechOpen* (2016): 145-157. http://dx.doi.org/10.5772/63358

King, Aaron A., Ionides, Edward L., Pascual, Mercedes, and Bouma, Menno J. (2008). "Inapparent Infections and Cholera Dynamics." *Nature 454(7206), 877–880.* https://doi.org/10.1038/nature07084

Lee, Kelley. "The Global Dimensions of Cholera." *Global Change and Human Health* 2, no. 1 (2001): 6-17. https://doi.org/10.1023/A:1011925107536

Lin, Ka, Ayesha Mumtaz, Mohammad Anisur Rahaman, and Ka Ho Mok. "Social Quarantine and its Four Modes: Conceptional Exploration and the Theoretical Construction of the Policies against COVID-19." *Frontiers in Public Health* 9 (2021).

Local Government Service-Ghana. Local Governance Act of 2016, Act 936. https://lgs.gov.gh/index.php/local-governance-act-of-2016-act-936/

Manhyia Archives of Ghana. MAG 1/17/1B. Letter from P. S. Selwyn-Clarke to the President of the KPHB dated 14th December, 1926.

Manhyia Archives of Ghana. MAG 1/17/1B. Letter from the Medical Officer of Health to the Kumasehene dated 26th July, 1929.

Manhyia Archives of Ghana. MAG 1/17/1B. Letter to the Medical Officer of Health from the Kumasehene dated 11th September 1929.

Manhyia Archives of Ghana. MAG 1/17/1B. Memorandum from the Medical Officer of Health to the Kumasehene dated 17th September, 1927.

Manhyia Archives of Ghana. MAG 1/17/1B. Letter from Kumasehene, Nana Prempeh, to the Senior Sanitary Officer dated 15th September, 1927.

MIMS. "Colodium." https://www.mims.com/hongkong/drug/info/colodium

Mireku-Gyimah, Nana, Paschal Awingura Apanga, and John Koku Awoonor-Williams. "Cyclical Cholera Outbreaks in Ghana: Filth Not Myth." *Infectious Diseases of Poverty* 7, no. 51 (2018): 1-5. https://doi.org/10.1186/s40249-018-0436-1

Modern Ghana. 1 Toilet, 1 Household Policy on Course. https://www.modernghana.com/news/869965/1-toilet-1-household-policy-on-course.html

N'cho, Hammand S., Karen K. Wong, and Eric D. Mintz. "Travel-Related Infectious Diseases: Cholera" in *CDC Yellow Book 2020: Health Information for International Travel,* eds. Gary W. Brunette and Jeffrey B. Nemhauser. New York: Oxford University Press, 2019.

Ohene-Adjei, Kennedy, Ernest Kenu, Delia Akosua Bandoh, Prince Nii Ossah Addo, Charles Lwanga Noora, Priscillia Nortey, and Edwin Andrew Afari. "Epidemiological link of a major cholera outbreak in Greater Accra region of Ghana, 2014." *BMC Public Health* 17, no. 1 (2017): 1-10.

Osei, Frank B. and Alfred A. Duker. "Spatial and Demographic Patterns of Cholera in Ashanti Region-Ghana." *International Journal of Health Geographics* 7, no. 44 (2008): 1-10. https://doi.org/10.1186/1476-072X-7-44

Osei, Frank B. and Alfred A. Duker. "Spatial Dependency of V. Cholera Prevalence on Open Space Refuse Dumps in Kumasi, Ghana: a Spatial Statistical Modelling." *International Journal of Health Geographics* 7, no. 62 (2008): 1-17. https://doi.org/10.1186/1476-072X-7-62

Osei, Frank Badu, and Alfred Stein. "Temporal Trend and Spatial Clustering of Cholera Epidemic in Kumasi-Ghana." *Scientific Reports* 8, no. 1. 2018, https://doi.org/10.1038/s41598-018-36029-4

Owusu, George. "Social Effects of Poor Sanitation and Waste Management on Poor Urban Communities: A Neighborhood-Specific Study of Sabon Zongo, Accra." Journal of Urbanism 3, no. 2 (2010): 145-160.

Patterson, K. David. "The Influenza Epidemic of 1918–19 in the Gold Coast1." *The Journal of African History* 24, no. 4 (1983): 485-502.

PRAAD, Kumasi. ARG 1/14/2/1. 1919-1920 Memorandum by Dr. J. M. Dalziel (Senior Sanitary Officer, Gold Coast) on Cerebro-spinal Fever in the Northern Territories of the Gold Coast and in Ashanti together with Despatches Relating thereto and Recommendations by the Acting Principal Medical Officer. Government Press: Accra, 1920.

PRAAD, Kumasi. ARG 1/14/3/8. Letter from District Commissioner to the Chief Commission of Asante about Sanitation in Suame dated 11th November, 1944.

PRAAD Kumasi, ARG 1/14/3/2. Rules with Respect to the Regulation of Towns and Villages under Section 27 of the Ashanti Administration Ordinance.

PRAAD Accra. ADMS 5/1/113. Gold Coast Medical Report, 1933-1934.

PRAAD, Kumasi. ARG 1/14/2/1. Plague in Coomassie, 1924-1929.

PRAAD Kumasi. Illaro Experimental Mosquito Eradication. Letter from the Acting Director of Medical Services, Kumasi, to the Director of Medical Services, Accra. Dated 1st March 1950.

PRAAD Kumasi. ARG 1/14/2/1. Sanitary Rules Provided for the Guidance of Chiefs and Headmen in Ashanti.

Public Health Act 2012, Act 851. http://extwprlegs1.fao.org/docs/pdf/gha136559.pdf

Rabbani, G. H. and W. B. Greenough III. "Food as a Vehicle of Transmission of Cholera." *Journal of Diarrhoeal Diseases Research* 19, no. 1 (1999): 1-9.

Schiffer, Harriet B. "Local Administration and National Development: Fragmentation and Centralization in Ghana." *Canadian Journal of African Studies* 4, no. 1 (1970): 57-76. https://doi.org/10.1080/00083968.1970.10803593

Senah, Kojo. "In Sickness and in Health: Globalization and Health Care Delivery in Ghana." *Institute of African Studies Research Review* 17, no. 1 (2001): 83-89.

Towns Act, 1892. http://extwprlegs1.fao.org/docs/pdf/gha93491.pdf

Tutu, Raymond Asare, Sangeeta Gupta, and Janice Desire Busingye. "Examining Health Literacy on Cholera in an Endemic Community in Accra, Ghana: a Cross-Sectional Study." Tropical Medicine and Health 47, no. 31 (2019): 1-10. https://doi.org/10.1186/s41182-019-0157-6

Twumasi, Patrick. *Medical Systems in Ghana.* Accra: Ghana Publishing Corporation, 1975.

UN General Assembly. "Resolution adopted by the General Assembly on 28 July 2010: 64/292."*The Human Right to Water and Sanitation" . https://www.un.org/en/ga/search/view_doc.asp*

UNICEF, Ghana. Sanitation: Working for a Cleaner Ghana . https://www.unicef.org/ghana/sanitation

UNICEF. "Cholera Toolkit." 2013. https://www.medbox.org/preview/5ba0e451-ebc4-43a2-98b0-18b41fcc7b87/doc.pdf

World Health Organization. (WHO). *International Health Regulations* (2005). No. SEA/RC58/R4. World Health Organization, 2005.

WHO. "Cholera, 2018." *Weekly Epidemiological Record* 94, no. 48 (2019): 561-580.

WHO. "Cholera". 2021. https://www.who.int/news-room/fact-sheets/detail/cholera

WHO. "Diarrhoeal Disease" 2023 .https://www.who.int/news-room/fact-sheets/detail/diarrhoeal-disease

WHO. Global Task Force on Cholera Control" 2023. https://www.gtfcc.org/wp-content/uploads/2019/10/gtfcc-ending-cholera-a-global-roadmap-to-2030.pdf

WHO/UNICEF. Progress on Sanitation and Drinking Water: 2015 Update and MDG Assessment. 2015. https://www.unwater.org/app/uploads/2020/04/WHOUNICEF-Joint-Monitoring-Program-for-Water-Supply-and-Sanitation-JMP-%E2%80%93-2015-Update_-ENG.pdf

World Bank. Urban Environmental Sanitation Project. 1996. https://documents1.worldbank.org/curated/en/797301468770981963 /pdf/multi0page.pdf

Football *Supportérisme* as Political Expression in the Age of Youth's Political Disinterest

Mohamed Boualam and Setta El Houari

Faculty of Legal and Political Sciences,
Hassan First University of Settat, Morocco
m.boualam@uhp.ac.ma

Abstract

At the same time as Moroccan youth show a declining interest in politics, political expression in the form of tifos (choreographed visual displays), chants and singing has been expanding in football stadiums over the past several years. Through case studies of Moroccan ultras groups (passionate and organised groups of young football supporters) from South, Center, and North regions, this paper seeks to show what political issues football fans chant about. With thematic analysis we find that the Moroccan "ultras groups" express demands that political parties should take into account for each geographic area of the country.

Keywords: Political expression, football fandom, Morocco, sport and politics, political engagement, youth.

Football has become one of the most significant signifiers of societal and political trends in modern societies. Research in the social sciences has focused on the study of football fandom, particularly those strong and organised groups of club supporters known as "Ultras". The study of their political activism in stadiums is a widely researched topic worldwide. Various aspects of this phenomenon have been explored, such as football fans' involvement in fostering activism and protest (Fitzpatrick and Hoey 2022), and the social conditions that make it possible for activist football fans to be recruited and mobilised (Glaurdić 2020). Similarly, the chants of football fans have received significant attention in numerous articles across diverse social contexts (Bell and Bell 2021; Huddleston 2022).

In the Moroccan context, football supporters are at the heart of the news. The local press underlines the political character of the expressions of the ultras when it reports the ultras groups as "spokespersons of social protest". The protest connotation of the speech of the ultras has visibly marked the political elite in Morocco. The Ultras "Green Boys," one of the ultras groups that support the Raja Club Athletic (RCA), a team from

Casablanca, the economic capital of the kingdom, brandished a tifo in November 2019 that featured the phrase "Room 101," referencing the torture room from the novel "1984" by George Orwell. Before that, in 2017, the Ultras Eagles group, who support the same club, had attracted attention by producing a song "Oppressed in My Country", the lyrics of which are critical of the rulers, political class, and the beneficiaries of the political regime. As a result, it is recited on many occasions as a form of protest and expression in public spaces. The publications of Ultras groups on their official social media accounts are part of this dynamic. They strongly denounce the arrests of their members by the security forces, these arrests themselves a sign of hostility of officialdom and its desire to exercise control over the content displayed in the stadiums. The vocality of these ultras, from a socio-political perspective, is part of strategic political participation outside the known classical forms. Social, economic, and political claims are made directly during football matches in the stadiums in the form of rational and organised political action.

The Context

Ultras are passionate fan groups who show steadfast devotion to their football team. Originally emerging in Italy, the term refers today to organised football fan groups worldwide. These kinds of supporters show their passion through tifo, choreography, chants, and banners at football stadiums. Ultras groups manage these acts to create an exhilarating atmosphere that boosts their team and terrifies rivals.

The history of ultras in Morocco dates from 2005 with the foundation of the Green Boys (above), the Ultras Winners (Supporters of the Wydad Athletic of Casablanca - WAC), and the Ultras Askary (supporters of the Club Forces Armées Royales in Rabat – FAR). Since then other ultras have emerged and about fifty cover the entire Moroccan territory currently. Their numbers are still increasing and most football clubs are represented (Bennis 2019). Moroccan ultras are considered among the most famous on the international scene. The YouTube channel known as "Ultras World" ranks communities of football fans around the world and annually ranks the top ten, determined by evaluating the level of commitment and innovative practices displayed by ultras groups globally. In 2020, two Moroccan ultras were classified in the Top-10 ultras in the world. Thus, the Greens Boys occupied the 4th place, but the Ultras Askary occupied the first place on a world scale, due doubtless to their famous actions during the match in Rabat played against Raja Club Athletic of Casablanca (RCA) (Ultras World 2020).

Table 1: Selected Moroccan ultras - supported clubs and areas.

CITY	SUPPORTED CLUB	YEAR FOUNDED	NAME OF ULTRAS GROUPS	GEOG. AREA
TETOUAN	MAT : Maghreb Atletico of Tétouan	2005	Ultras los Matadores	NORTH
TETOUAN	MAT : Maghreb Atlético of Tetouan	2006	Ultras Syambry Paloma	
TANGERS	IRT - Ittihad Riadhi of Tangier	2007	Ultras Heraculos	
BERKANE	RSB - Renaissance Sportive of Berkane	2007	Ultras Orange	
CASABLANCA	WAC: Wydad Athletic Club	2005	Ultras Winners	CENTER
RABAT	FAR: Royal Armed ForcesSports Association	2005	Ultras Askary	
CASABLANCA	RCA: Raja Club Athletic	2005	Green Boys	
CASABLANCA	RCA: Raja Club Athletic	2006	Ultras Eagles	
RABAT	FAR: Royal Armed Forces Sports Association	2006	Ultras Black Army	
FES	MAS - Maghreb Athletic Sports	2006	Ultras Fatal Tigers	
CASABLANCA	RCA: Raja Club Athletic	2006	Ultras Green Gladiators	
SALÉ	ASS - Association Sportive de Salé	2006	Ultras Red Pirates	
SAFI	OCS - Olympic Club of Safi	2006	Ultras Sharks	
EL JADIDA	DHJ - Difaâ Hassani d'El Jadida	2007	Ultras Cap Soleil	
KHOURIBGA	OCK - Olympic Club of Khouribga	2007	Ultras Green Cost	
KINETRA	KAC - Athletic Club of Kinetra	2007	Ultras Helala Boys	
MARRAKECH	KACM - Kawkab Athletic Club of Marrakech	2006	Ultras Green Boys	SOUTH
AGADIR	HUSA - Hassania Union Sports Athletic	2006	Ultras Imazighen	
EL OYOUN	JSM - Jeunesse Sportive d'El Massira	2007	Ultras Sahari	

The socio-political context, characterised by political opportunities limited to traditional channels controlled, managed, and regulated by the State, engenders a way to develop new spaces of freedom. Political opportunities exist within structural channels of action, and different nations have distinct arenas of action, with different relationships between those arenas. Some polities may assign tasks to courts, for example, that make the judicial system a promising avenue of protest - but not in others. Some constitutions give enormous powers to their legislative assemblies, but others attempt to balance this power with other structures (Kitschelt 1986). The activism of the ultras groups on the Moroccan political field is intrinsically linked to the protest dynamic in the country. Its significance can only be understood in the broader context of political life as a whole and the diversity of social and protest movements in the streets and public spaces. The denunciation of state oppression and social injustice is reflected in a multitude of protest movements. In 2011, the February 20 movement led protest marchs calling for freedom and the establishment of the rule of law. The "Arab Spring" reinforced a culture of resistance that spread and embodied itself through several strategies, tools and spaces: the street, social networks and even football stadiums. The waves of the demonstrations had a geographical character: the Hirak (popular resistance) of the Rif in the North-East in 2016, the Hirak of Jerada in the East of Morocco in 2018 and earlier the demonstrations of Sidi Ifni in the West of the country in 2008.

The Ultras-State Relationship

The relationship between the ultras and the Moroccan state is not linear. The positioning of the ultras in relation to the preoccupations on both youth and society in general gives them an image of a group wanting to defend the rights of marginalised social strata. The bleachers serve as a tribune of anger and discomfort. The political tendency of the speech of the ultras and their feeling of hostility towards official forces has pushed the officials to take certain measures to regulate the activities of the ultras. On the legislative level, a law (09.09) of 2011 supplemented the criminal law related to violence committed during competitions or sporting events by providing a series of penalties for perpetrators of violent acts in stadiums. Then the authorities decided to ban the various activities of the ultras following the multiple acts of violence that occurred in the stadiums during the season 2015/2016, especially the confrontations that took place in Casablanca between two ultras rivals of the Raja of Casablanca (Eagles and Green Boys). The violence triggered the deaths of three supporters and injuries to more than 70 others. Two years later, in March 2018, the

authorities decided to lift the ban on ultras, except for tifos which are still subject to the authorities' permission. For the ultras, this ban is a form of discrimination and injustice. Thus, through the messages expressed at the time of each match and through the chants recited in the stands or the posted writings, they challenge this ban.

Literature Review

Football stadiums are increasingly becoming one of the public arenas allowing the free expression of opinions, feelings of deprivation and social unease. They become an area of political socialisation and sociability, where individuals give themselves the opportunity to address social and political questions (Bromberger 2002:80). This phenomenon is taking on a scale not known before and supporters have become political activists using a wide repertory of expression in slogans, tifos and songs. These means remain the most used channels to express unease and the feeling of dissatisfaction with the social, economic, and political situation of the country. Ultras culture is transforming into a new form of political expression taking charge of the ills of society and its problems (Bromberger 2002; Busset and Gasparini 2016; Lestrelin 2015) .

Football fans become political activists, using different methods to express their political opinions and positions. One prevalent method involves prominently displaying banners containing visible political messages related to political and social issues during matches. These fans participate actively in protests or demonstrations held outside stadiums or other public spaces, strategically employing the broad media coverage and popularity surrounding football to enhance the propagation of their message and thus garner awareness for particular problems or grievances. In certain instances, supporters may opt to engage in boycotts of specific matches, products, or companies as a means of engaging in political activism and expressing their dissatisfaction, with the intention of exerting pressure on clubs and their officers. The utilisation of social media platforms enables individuals to effectively disseminate information and engage a broader audience beyond the conventional confines of their activities. In Morocco, there is also a recurring phenomenon where ultras groups frequently coordinate donation campaigns and participate in philanthropic endeavours and excursions aimed at assisting marginalised and impoverished communities residing in rural villages and isolated regions.
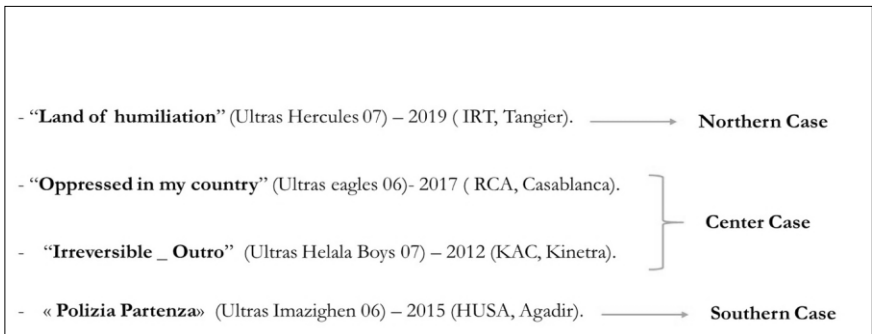
The chants and messages of the ultras represent rhetoric aimed at strengthening the sense of belonging in a group when facing the supporters of an opposing camp but at the same time they highlight people's demands

and give them scope (Bromberger, Hayot, and Mariottini 1995). Then, the bleachers are a political platform (Kabbadj 2019); the tifos, slogans and songs carry a political charge towards the state (Zairg 2019).

Methodology and Condition of Research

The main objective of our work is to cover the different themes addressed by the songs of the ultras in Morocco. As noted, the number of ultras in Morocco exceeds fifty, and to study all their songs remains a difficult task considering the proliferation of productions from each ultra. We therefore limited the number of ultras and their songs in our sample, but it seemed relevant to spread the study cases spread over the entire Moroccan territory, and so we divided the country into three geographical areas: south, center, and north, and selected study cases in each area. The selection was guided by the reputation of the chants on social networks.

Figure 1: The chants that are the subject of the study

- **"Land of humiliation"** (Ultras Hercules 07) – 2019 (IRT, Tangier). ———→ **Northern Case**

- **"Oppressed in my country"** (Ultras eagles 06)- 2017 (RCA, Casablanca).

- **"Irreversible _ Outro"** (Ultras Helala Boys 07) – 2012 (KAC, Kinetra). **Center Case**

- **« Polizia Partenza»** (Ultras Imazighen 06) – 2015 (HUSA, Agadir). ———→ **Southern Case**

In the south, the most famous of the ultras is Imazighen 06, and the most viewed song on its YouTube channel is "Polizia Partenza" (Ultras Imazighen 2015), part of the album "La Doce" released in 2015 with a total number of views exceeding 1.6 million since. In the center, the song that has echoed since 2017 is "Oppressed in My Country", produced by the Ultras Eagles 06, a song that is sung at every collective protest action in Morocco. Because of its words, which carry a significant political charge, this song has surpassed 16 million views on the YouTube channel of the electronic newspaper Le7TV.ma (2018). In the same geographical area, we selected the

song "Irreversible: Outro" by the ultras Helala Boys 2007 (2012), which has reached more than 3 million views since its sharing on the YouTube channel. This ultras is considered to be among the first to have introduced the political discourse of protest into their songs in the stands in Morocco. In the northern part of the kingdom, we have chosen a song from the ultras Hercules 07, supporters the Tangier Itihad club. These ultras have produced a song that circulated very fast and widely on social networks (especially Facebook and YouTube); it has been viewed 200, 000 times on the Facebook page of the newspaper hespress.com (2019) and shared several times on other pages. The same song had more than 5.3 million views after being covered by an artist Reda Al Aroudi on his YouTube channel (El Aroudi 2020).

Using Thematic Analysis

We chose a qualitative thematic analysis as the most adequate method for our purposes. It is a suitable method for identifying, analysing and reporting patterns (themes) in data and a rigorous approach can produce insightful analysis that answers specific research questions (Braun and Clarke 2006, 97).   The identification of themes in the data collected (the chants of the ultras in our sample) was subjected to the main requirement, which is consistency throughout the process. As Bazeley claims (2009, 9), themes only reach their full meaning when they are linked together in order to form a coordinated image or an explanatory model. Themes or models in the data can be identified either inductively as "ascending " (Frith and Gleeson 2004) or theoretically and deductively as "descending" (Boyatzis 1998; Hayes 1997). According to Thomas (2006, 2), the main objective of the inductive approach is to organize the research results to bring out frequent, dominant or significant themes inherent in raw data. However, it cannot be denied that the top-down and bottom-up processes are desirably interactive.

"Describe, compare, relate" is a simple three-step formula for reporting results. The data collected (the lyrics of the songs) were analysed in a similar way to that described by the three-step procedure suggested in the literature (Creswell and Poth 2018; Miles, Huberman, and Saldaña 2020). Data were prepared for analysis by transcribing and reducing the data into themes through a data coding and representation process using MAXQDA 2020 software. The procedures used for the analysis largely followed the approach proposed by Braun and Clarke (2006).

Analysis and findings

The thematic analysis generated nine themes:

Feelings of frustration, injustice, repression and humiliation.
Appointment of enemies, resistance and face the enemies.
Contested social issues.
Negative judgement and distrust of leaders and politicians.
Feelings of pleasure and festivity.
The claims (social, economic and political).
Invocation of religion.
Think of illegal immigration as solution.
Identity-related words.

These themes are shown in graphic format in Graph 1 : Thematic Analysis of Ultras Songs Studied based on Geographic Areas: North, Centre and South.

It seems that there are marked differences between the three cases under study, and while we find that there are themes that distinguish each case from the others, we find also that there are intersections between two or more cases. These intersections can be represented in Figure 2.

Graph 1 : Thematic Analysis of Ultras Songs Studied based on Geographic Areas: North, Centre and South.

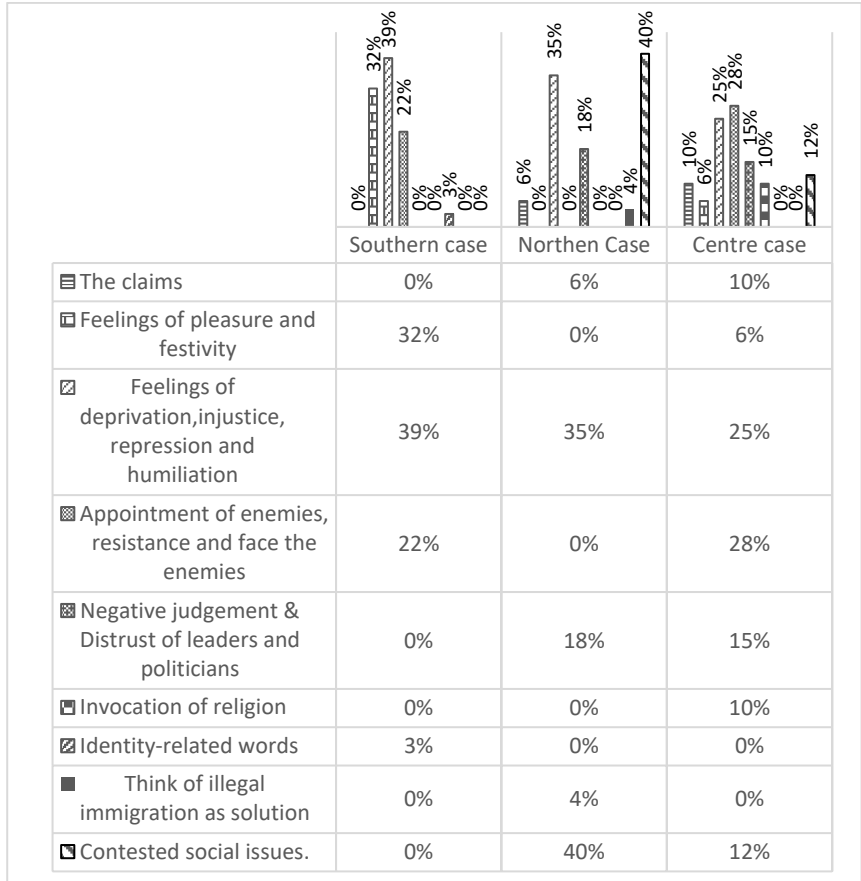|	Southern case	Northen Case	Centre case
The claims	0%	6%	10%
Feelings of pleasure and festivity	32%	0%	6%
Feelings of deprivation,injustice, repression and humiliation	39%	35%	25%
Appointment of enemies, resistance and face the enemies	22%	0%	28%
Negative judgement & Distrust of leaders and politicians	0%	18%	15%
Invocation of religion	0%	0%	10%
Identity-related words	3%	0%	0%
Think of illegal immigration as solution	0%	4%	0%
Contested social issues.	0%	40%	12%

Figure 2: The Three Cases according to the Themes addressed
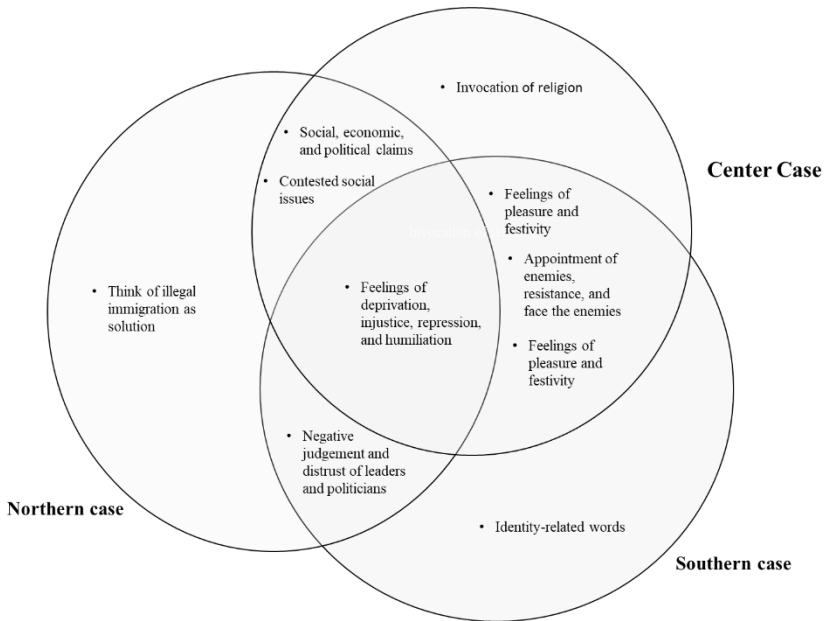
Comparative Studies of the Three Case Studies

Cross-cutting themes of frustration, injustice, repression, and humiliation

We can clearly identify the thematic in common between the different cases studied as feelings of frustration, injustice, repression, humiliation, and corruption among officials. This suggests that despite potential changes in the political landscape or leadership transitions, the underlying mechanisms of control and repression persist, ensuring the perpetuation of the political regime. "A continuity of repressive practices, of the structures that support them, and of the actors who lead them" (Vairel 2014) is rooted in the understanding that such systems tend to maintain their grip on power through consistent patterns of repression, control, and leadership.

On the other hand, it is relevant to contextualise this social protest dynamic more broadly, taking into consideration the economic, social, and political situation. For Gurr (2016), the feeling of relative deprivation

contributes to the emergence of social conflict. Relative deprivation, as Gurr explains it, is produced when the goods obtained decrease in quantity while expectations are not met or increase. This gap between the perceived legitimate expectations and the required goods is "relative deprivation". The social change that Moroccan society has undergone in recent years is clearly remarkable; the comparison of "all with all" (as we term it) would be at the heart of this feeling of frustration. It is enough not to have goods (material or symbolic) acquired by others for frustration to rise to surface and create a flurry of protests. Demands among young Moroccans are clearly identified in the songs of the ultras. "If some individuals enjoy material or symbolic good and others do not, then…. " - the meaning is: If some people have the opportunity to take pleasure in material or symbolic goods while others are unable to, this causes others to feel dissatisfaction which in turn motivates them to mobilise against the current situation and insist that they be given the same opportunities. The subjective "feeling" of felt deprivation is essential to the concept of the relative deprivation   .

This trend of protest is also motivated by distrust in the political elite, and this leads to rupture with political life. This expressed mistrust of institutions supposed to play the role of mediation between citizens and the state (political parties, unions, civil societies) makes political action in the country complex. The corruption of political officials is strongly emphasised through the songs as well.

The statistics show that young people in Morocco are becoming less interested in political engagement that takes place through the conventional means by which citizens can seek to satisfy their needs and preferences. Statistics on young Moroccans' voting involvement in elections, such as those for the 2021 legislature, show that young people are less interested in voting than older age groups. The rate of young people who are not on the electoral rolls is very high, reaching 66.4% in the category of those aged 18 to 24, and 42.9 percent in the category of young people aged 25 to 34, and then a rate of 27.5 % among those between the ages of 35 and 44. These results demonstrate a lack of interest among young people in signing up for the electoral lists that grant the right to vote (see Graph 2).

Having distinguished the topic that constitutes a common denominator between the three cases under study, we show below the distinctive topics of each case separately and what distinguishes them from others.

**Graph 2: Voter Registration by Age Groups (in %)_
Moroccan General Election_2021**
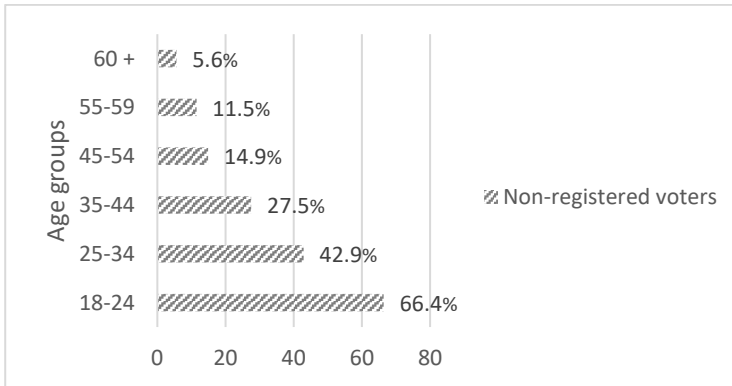
Source: HCP 2021b

The centre case: The vocation of religion

Young Moroccans are very attached to religion. Several studies emphasise that the religiosity of young Moroccan Muslims is strong, and that today's youth are more religious than the youth of yesterday (El Ayadi, Rachik, and Tozy 2013). The Arab Human Development Report published in 2016 by the United Nations Development Program (UNDP 2016), for example, reveals this reality. Religion has a strong presence among youth in the MENA region and Morocco in particular: in 2010, 93% of young Moroccans declared that religion constitutes an important part in their daily lives; this number jumped to 99% in 2013. Religion affects the ideology and intellectual orientations of young people, and the way they act towards society and family (UNDP 2016:35–36). The unconscious work of inculcation, assimilation, the conscious work of socializing and educating religious capital can contribute largely to the formation and reproduction a deeply embedded religious "ethos" (ibid, 171). The present study confirms that religion is an important factor in the daily life of young Moroccans who are consistent their attachment to religion.

The identification of the individuals with a group to which they belong, with its norms and values, in short with its culture, is a crucial element in the process of social integration and the transmission of traditional values. The importance of the religious fact could also be explained by upheaval, disorientation due to urbanisation, globalisation and technological developments which are causing major changes in societies. Young people

continue turning to religion to counter an overall sense of exclusion and lack of opportunity. In general, this orientation of young people towards the invocation of religion is a question which is inscribed in the cultural structure of society and the individuals who compose it. Identification with the religious fact represents for young people a refuge from the socio-economic and political problems in their daily lives and from the exclusion of which they are victims The ultras songs reflect this reality well.

The north: immigration, a particular theme

The specificity of the northern area of Morocco and its proximity to Europe are explanatory elements for this remarkable trend of an unfinished desire to reach the other side of the Mediterranean (Spain in particular). Each year there are several attempts at illegal immigration, for example the one that occurred in April 2021 when 130 young Moroccans tried to reach the city of Ceuta by swimming despite the risks and dangers faced. For a long time and until the beginning of the 20th century, Morocco knew migratory flux (Alaoui 2013), with most of the emigrants came from the poorest and mountainous regions of southern Morocco (Atouf 2004). After the revolution the numbers of people wishing to emigrate has increased and the conditions of emigration have become more complex. The host countries have imposed restrictions on emigrants, such as having qualified skills and employment contracts, and those regulations have contributed to the increased complexity and difficulty of the legal emigration procedure. Consequently, some individuals choose to employ illicit emigration methods because of their perception that it is a more accessible alternative to meeting prescribed legal requirements (ibid). The socioeconomic conditions in the country no doubt have caused Moroccans to think more and more about emigration. A public survey carried out by the Arab Barometer Report (2019) estimated that around 44% of Moroccans dream of emigrating, an increase compared to previous years.

The profiles of Moroccan emigrants are diverse: they may be low-skilled workers, guest workers, highly skilled workers, businesspeople and students, and though mostly male include a growing number of women (Berriane, de Haas, and Natter 2015). For example, in the Netherlands, most emigrants in this country come from the north of Morocco, the Rif (Ennaji 2014). Young people belonging to the northern regions of Morocco are the most likely to think of emigration. Indeed, according to the report published by the High Commission for Planning (HCP 2020), the main reasons that push Moroccans to emigrate are socioeconomic with job-seeking at first position with 44.5%. The unemployment rate in this region (eastern and

northern) is higher than the national level (HCP 2021a) allows few work opportunities for young people. Having migrants abroad is a factor that also feeds the rate of potential migrants when Europe does not seem like a distant destination. Most of the first generations of immigrants from Morocco to Belgium came from Nador in northern Morocco (Reniers 1999), for example. The existence of networks between immigrants in Belgium and their families, friends or neighbours in their country of origin can strengthen a desire to emigrate (Timmerman et al. 2017).

The question of Amazigh identity in the south

The Amazigh identity has undergone a long process of questioning and construction, whether at the level of speech, language, literature and ideological production; at the level of the organizational relationships, coordination, and internationalisation; or at the political level of political demand (Tozy, Lakhsassi, and Aït Mouss 2006). In the Moroccan context, the emergence of the Amazigh claim began at the end of the 1960s. Intellectuals, generally from the city, the educated middle class and cultural organizations of civil society, founded the Amazigh Cultural Movement (MCA), a mission to promote the Amazigh language and identity. The movement introduced the notion of diversity to Moroccan national culture (Aït Mous 2011) and it bore fruit, as an institution was founded to enhance the prominence of the Amazigh people in the cultural life of the country – that is, the "'Royal Institute of Amazigh Culture".

The implementation of the most recent constitution, adopted in 2011, established Tamazight as an official language: - "Tamazight is an official language of the state and the common heritage of all Moroccans " (Dahir n ° 1- 11-91, 2011, art.V, § 1). It is stated in the fifth chapter, fourth paragraph that an organic law determines the stages of the activation of the official character of Tamazight, and the modalities of its integration in the field of education and in the priority areas of public life, in order for it to fulfil its future function as an official language. This goal was achieved in July 2019, after Parliament approved it, knowing that the Amazigh language had been integrated into education previously by the Ministry of National Education. In 2023, Morocco's King approved the celebration of the Amazigh New Year, also known as "Yennayer," as an official national holiday. Nevertheless, the Amazigh movement's activists still claim a more advanced status for the Amazigh language, including for example the adoption of the Amazigh script on bank bills and the national identity card (CIN), and to be obligatory in administrative transactions and official documents. Thus, the inscription of the songs the ultras in this perspective,

of a struggle to recognise the Amazigh identity, comes from the same direction as the movement initiated by the civil society and the cultural elite.

Conclusion

Ultras are increasingly becoming a research subject of interest to social scientists studying sports (Doidge and Lieser 2018). This importance stems from the fact that they begin to engage in new fields of social life and society in general by going beyond the framework of football simply as sport. We have seen how the chants of the ultras are not limited to the encouragement of a supported football club, but they go beyond it to expose the concerns of the people. This interest in the political concerns of social classes suffering from economic and social issues has increased the brilliance and popularity of these songs among individuals of different affiliations; therefore, their productions (slogans, tifos, songs) are widely received by the public and reused whenever the opportunity arises, and the context requires it.

We have presented a comparative study of models of ultras songs in Morocco, using as a criterion the geographical affiliation (south, center, north); based on the thematic analysis it was concluded that although there are themes that unite the songs of the ultras, on the other hand, the geographical determinant gives a certain variation between them. If feelings of deprivation and humiliation constitute the common basis between the three cases of the sample studied, there are themes that characterise each geographic region: migration in the north and issue of identity in the south. It also confirms that the ultras constitute a voice to convey the demands specific to each region, and that they are very close to the concerns of the populations. The behaviour of the ultras groups is not separated from the dynamics of the political life of the country. The theme that unites the cases we have studied, which is the feeling of relative deprivation, is intimately linked to the demands of the popular movements that Morocco has known over the past ten years.

At the same time, the geographical affiliation of the ultras groups distinguishes them from one another in relation to certain concerns specific to a particular geographical area. In the south, the question of Amazigh identity is marked in the Ultras Amazigh song because the citizens residing in this area are mostly Amazigh. In the north, immigration remains the subject that characterises this region for several considerations, including those linked to the geographical location close to Europe or as a solution to feelings of humiliation and deprivation. In the centre, the recourse to religion can be seen as a solution which alleviates the concerns of the region. These

songs reflect the social life of individuals in general and of football fans in particular.

The critical discourse produced by ultras groups targets the political class in general, but it is interesting to note that it is no longer addressed to the king of the kingdom. Their songs and slogans are aimed at elected, state officials and managers of sports clubs and football teams. They also target the police and security agents. The ultras, although involved in the criticism of the political affairs of the country, always play within the rules and respect the unifying constants of religion, national unity, and the monarchy. It is true that the number of cases studied represent a small sample, but all the same they remain representative as they were selected as the most popular on social networks. The widening of the circle of the cases studied to a larger number of songs would constitute a qualitative advantage and give more comprehensive results.

References

Aït Mous, Fadma. 2011. 'Les enjeux de l'amazighité au Maroc'. *Confluences Méditerranée* N° 78 (3): 121. doi:10.3917/come.078.0121.

Alaoui, Rachid. 2013. 'Peut-on Parler de Diaspora Marocaine ?' *Hommes & Migrations*, no. 1303 (July): 7–15. doi: 10.4000/hommesmigrations.2543.

Arab Barometer. 2019. 'Arab Barometer V Morocco Country Report'. (https://www.arabbarometer.org/wp-content/uploads/ABV_Morocco_Report_Public-Opinion_Arab-Barometer_2019.pdf).

Atouf, Elkbir. 2004. 'Les migrations marocaines vers la France durant l'entre-deux-guerres'. *Hommes et Migrations* 1247 (1): 48–59. doi: 10.3406/homig.2004.4122.

Bazeley, Pat. 2009. 'Analysing Qualitative Data: More than "Identifying Themes"'. *Malaysian Journal of Qualitative Research* 2 (2): 6–22.

Bell, John, and Paul Bell. 2021. 'And This Is What We Sing – *What* Do We Sing? Exploring the Football Fan Songs of the Northern Irish "Green and White Army"'. *International Review for the Sociology of Sport* 56 (8): 1206–23. doi:10.1177/1012690220979715.

Bennis, Said. 2019. 'Tamatollat Lkhitab Ihtijaji Li Ultras Fi Lmaghrib Wa Taabiratoho Syassia [Representations of the Protest Discourse of the Ultras in Morocco and Its Political Effects]'. *Lubab*, no. 2 : 143–72.

Berriane, Mohamed, Hein de Haas, and Katharina Natter. 2015.
     'Introduction: Revisiting Moroccan Migrations'. *The Journal of
     North African Studies* 20 (4): 503–21. doi:
     10.1080/13629387.2015.1065036.
Boyatzis, Richard E. 1998. *Transforming Qualitative Information:
     Thematic Analysis and Code Development*. Thousand Oaks, CA:
     Sage Publications.
Braun, Virginia, and Victoria Clarke. 2006. 'Using Thematic Analysis in
     Psychology'. *Qualitative Research in Psychology* 3 (2): 77–101.
     doi:10.1191/1478088706qp063oa.
Bromberger, Christian. 2002. *Passions ordinaires: football, jardinage,
     généalogie, concours de dictée*. Paris: Hachette littératures.
Bromberger, Christian, Alain Hayot, and Jean-Marc Mariottini. 1995. *Le
     Match de Football: Ethnologie d'une Passion Partisane à
     Marseille, Naples et Turin*. Collection Ethnologie de La France 16.
     Paris: Maison des sciences de l'homme.
Busset, Thomas, and William Gasparini, eds. 2016. *Aux frontières du
     football et du politique: supportérismes et engagement militant
     dans l'espace public*. Savoirs sportifs, vol. 8. Bern Berlin Bruxelles
     Frankfurt am Main New York Oxford Wien: Peter Lang.
Creswell, John W., and Cheryl N. Poth. 2018. *Qualitative Inquiry &
     Research Design: Choosing among Five Approaches*. Fourth
     edition. Los Angeles: SAGE.
Doidge, Mark, and Martin Lieser. 2018. 'The Importance of Research on
     the Ultras: Introduction'. *Sport in Society* 21 (6): 833–40.
     doi:10.1080/17430437.2017.1300377.
El Aroudi, Reda. 2020. 'Hadi Blad Al-Lhagra [This Is Land of
     Humuliation]'. YouTube video. February 27, 2020, 3:40.
     (https://www.youtube.com/watch?v=sennyAM9cWQ).
El Ayadi, Moḥammad, Hassan Rachik, and Mohamed Tozy. 2013. *L'islam
     Au Quotidien: Enquête Sur Les Valeurs et Les Pratiques
     Religieuses Au Maroc*. Casablanca (Maroc): la Croisée des
     chemins, Fondation Friedrich Ebert.
Ennaji, Moha. 2014. *Muslim Moroccan Migrants in Europe*. New York:
     Palgrave Macmillan US. doi:10.1057/9781137476494.
Fitzpatrick, Danny, and Paddy Hoey. 2022. 'From Fanzines to Foodbanks:
     Football Fan Activism in the Age of Anti-Politics'. *International
     Review for the Sociology of Sport*.
     doi:10.1177/10126902221077188.

Frith, Hannah, and Kate Gleeson. 2004. 'Clothing and Embodiment: Men Managing Body Image and Appearance.' *Psychology of Men & Masculinity* 5 (1): 40–48. doi:10.1037/1524-9220.5.1.40.

Glaurdić, Josip. 2020. 'Football Activism as Political Contention: Contextual Determinants of Membership in the Association of Supporters of Hajduk Split'. *International Review for the Sociology of Sport* 55 (8): 1094–1115. doi:10.1177/1012690219889565.

Gurr, Ted Robert. 2016. *Why Men Rebel*. Abingdon, Oxon; New York, N.Y.: Routledge. https://www.taylorfrancis.com/books/e/9781315631073.

Hayes, Nicky, ed. 1997. *Doing Qualitative Analysis in Psychology*. Hove, East Sussex: Psychology Press.

HB2007com. 2012. *Helala Boys - Irreversible : 8 - Outro*. YouTube video, February 22, 2012 , 5:32 (https://www.youtube.com/watch?v=sAl1DXybNdo).

HCP. 2020. *La migration internationale au Maroc*. 2020. Morocco, Rabat: Haut Commissariat au Plan (HCP). (https://www.hcp.ma/file/230793/).

——— 2021a. *Note d'information du haut-commissariat au plan relative à la situation du marché du travail en 2020*. Morocco, Rabat: Haut Commissariat au Plan (HCP). (https://www.hcp.ma/attachment/2233052/).

———. 2021b. *Quelques caractéristiques des primo-votants aux élections de 2021*. Morocco, Rabat: Haut Commissariat au Plan (HCP). (https://www.hcp.ma/attachment/2232968/).

Hespress. 2019. Ultras Heraculos: Hadi Blad Lhogra [Ultras Heraculos : This Is Land of Humuliation]'. Facebook, September 24, 2019. (https://www.facebook.com/Hespress/videos/839062066495472/).

Huddleston, William. 2022. 'Kicking off: Violence, Honour, Identity and Masculinity in Argentinian Football Chants'. *International Review for the Sociology of Sport* 57 (1): 34–53.doi:10.1177/1012690220988651.

Kabbadj, Omar. 2019. 'Ultras: Stades, Nouvelle Tribune Politique'. *Telquel.ma*, January 4, 2019. (https://telquel.ma/2019/01/04/ultras-stades-nouvelle-tribune-politique_1624467).

Kitschelt, Herbert P. 1986. 'Political Opportunity Structures and Political Protest: Anti-Nuclear Movements in Four Democracies'. *British Journal of Political Science* 16 (1): 57–85. doi:10.1017/S000712340000380X.

Le7TV. 2018. 'Oghniat Fi Bladi Dhalmoni [A Song Oppressed in My
          Country]'. YouTube video, October 25, 2018, 3:20.
          (https://www.youtube.com/watch?v=2Auxpy-0wHE).
Lestrelin, Ludovic. 2015. 'De l'avantage de comparer les *carières
          supportéristes* à des *carières militantes*'. *Sciences sociales et sport*
          8 (1): 51. doi:10.3917/rsss.008.0051.
Miles, Matthew B., A. M. Huberman, and Johnny Saldaña. 2020.
          Qualitative Data Analysis: A Methods Sourcebook. Fourth edition.
          Los Angeles: SAGE.
Reniers, Georges. 1999. 'On the History and Selectivity of Turkish and
          Moroccan Migration to Belgium'. *International Migration* 37 (4):
          679–713. doi:10.1111/1468-2435.00090.
Thomas, David R. 2006. 'A General Inductive Approach for Analyzing
          Qualitative Evaluation Data'. *American Journal of Evaluation* 27
          (2): 237–46. doi:10.1177/1098214005283748.
Timmerman, Christiane, Nadia Fadil, Idesbald Goddeeris, Noel Clycq, and
          Karim Ettourki, eds. 2017. *Moroccan Migration in Belgium: More
          than 50 Years of Settlement*. CeMIS Migration and Intercultural
          Studies 1. Leuven, Belgium: Leuven University Press.
Tozy, Mohamed, Abderrahman Lakhsassi, and Fadma Aït Mouss. 2006.
          Usages de l'identité Amazighe Au Maroc. Edited by Hassan
          Rachik. Casablanca: Impr. Najah el jadida.
Ultras Imazighen. 2015. 'Ultras Imazighen - Album 'La Doce' - 6 - Polizia
          Partenza'. YouTube video, May 25, 2015, 2:57.
          (https://www.youtube.com/watch?v=rsPqUckUsLY).
Ultras World. 2020. 'Top-10 Ultras Actions of 2020 || Ultras World'.
          YouTube video, December 27, 2020, 26:00.
          (https://www.youtube.com/watch?v=ZrNXSRUFFWQ).
UNDP, ed. 2016. *Youth and the Prospects for Human Development in a
          Changing Reality*. The Arab Human Development Report, 6.2016.
          New York, NY: United Nations Development Programme,
          Regional Bureau for Arab States.
Vairel, Frédéric. 2014. *Politique et Mouvements Sociaux Au Maroc: La
          Révolution Désamorcée ?* Presses de Sciences Po.
          (https://www.cairn.info/politique-et-mouvements-sociaux-au-
          maroc--9782724615951.htm)
Zairg, Reda. 2019. 'Maroc : Les Ultras, un «mouvement protestataire» ?'.
          Y*abiladi.com*, December 25, 2019.
          (https://www.yabiladi.com/articles/details/87073/maroc-ultras-
          mouvement-protestataire.html).

The Sociology of Education in Morocco: Issues of Research, Teaching, and Epistemological Identity

Mohammed El Idrissi
Laboratory of Human Societies and Values
Department of Sociology
Faculty of Humanities and Social Sciences
Ibn Tofail University, Kenitra, Morocco
mohammed.elidrissi1@uit.ac.ma
https://orcid.org/0000-0001-6554-7275

Abstract

This article sheds light on the educational question in the evolution of sociological practice in Morocco over the last half-century. The cradle of sociology in Morocco is associated with the decolonisation objectives of the Moroccan social sciences (practice and knowledge) and the attention paid to the rural world and agricultural issues. As a result, issues of education and schooling were treated as secondary issues in a preoccupation with the transformations of the Moroccan rural world (Paul Pascon) and with women's studies (Fatima Mernissi). The low representation of the sociology of education, research and teaching at the university and in research centres in Morocco led to a "displacement" of this discipline to teacher training centres within the branch of "sciences of education". However, this has created an identity crisis and a problematic institutionalisation for the sociology of education and the school for decades, despite the consideration given to it at the Moroccan university in recent years.

Keywords: Education, Sociology, Sociology of Education, sociology of school, School, Morocco.

An analysis of the state of Moroccan sociology of education requires an epistemological review of the history of the development of sociology itself in Morocco during decolonisation and the period of independence. In

addition to the objective of decolonising sociological knowledge, the founding fathers, who were Marxists and contributors to the process of development and political and social change, attempted to establish a sociological practice that combined objectivity, scientific commitment, and political struggle. The state was seen as a partner in development with its constant interest in sociological research and the rural world became the focus of sociological investigation and intervention during the 1960s and 1970s. For this reason, we can consider the history of sociology in Morocco as the history of the "ruralisation" (Rachik & Bourqia, 2011) of scientific practice and the production of sociological knowledge, and the marginalisation of other sociological fields, including the sociology of education.

Sociological studies focused on women by emphasising 'family, women, and childhood issues' during the 1970s and 1980s. Objective engagement was linked to the desire to empower and change the position of Moroccan women. Educational issues were always considered secondary variables and thus the sociology of education was again marginalised within the sociological field. As a result, the subject was displaced as a major to teacher training centres within the branch of "educational sciences".

The sociology of education was not institutionalised as a field in the Moroccan university at its lowest levels until recent years. With the development of teaching modules in master's programs and research teams in doctoral laboratories in some universities, however, the sociology of education was eventually recognised as an academic field linked to university research centres and it emerged from the controversy of epistemological identity that was associated with decades of dependence on teacher training centres.

Sociology in independent Morocco: starting critical, political, scientific
The origins of sociological practice in Morocco date back to the colonial period. Its emergence was associated with Paul Pascon, as "a pioneer" (Tozy, 2013) and "the founder of sociological activity in Morocco" (Rachik, 2007: 5). Despite the context of fear, and then 'the rejection and exclusion that accompanied the process of development and institutionalisation of sociological practice in Morocco during the period of independence' (Zahi, 2014: 183), a consensus to establish the modern state was reached between the political will and sociologists during the 1960s. Pascon's group, with Najib Bouderbala, Ahmed Lahlimi, and Gregori

Lazarev (Rachik, 2007: 5), participated in the creation of the "Interdisciplinary Group for Research in the Humanities" (*EIRESH*) and the Institute of Science Researchers. They took on the task of setting up a sociological practice (decolonisation of sociological knowledge) and a committed political practice (making sociology independent of political objectives with an openness to political actors to lead social change) (Rachik and Bourqia, 2011). In addition, Pascon's group focused on issues that historical and transitional circumstances imposed on Morocco (issues of rural areas, agricultural and water policies, and women's and children's issues, for example). The group linked the production of knowledge to change the social world according to a Marxist framework that focuses on "the logic of revealing what [was] hidden and correcting a distorted or poor social reality" (Rachik, 2007: 12).

Indeed, sociology in Morocco took on profound critical dimensions opposed to both the colonial order and the "Old Morocco"; it would record the loss of traditional regulations and study the changes introduced into the social and economic fabric by the transformations of modes and relations of production (Roussillon, 2002: 458). Thus, Pascon introduced the theory of the 'composite society' to understand and analyse the "competing social orders - political, legal, social, symbolic - through which voluntary and forced transformations of modes of life and production [had] emerged" (Ibid.: 458-459).

Sociology in Morocco faced three challenges -institutionalisation of scientific practice, achievement of social change and independence from the political actor. These challenges meant that the process of institutionalising sociology went through "three major stages": 1) of political acceptance and critical commitment; 2) of rejection, leading to the closure of the Institute of Sociology (below); and 3) of "re-institutionalisation and academic recognition" (Zahi, 2014: 184). In summary, sociology was considered a major player in the construction of the modern state by the political actor in the 1960s before being rejected and fought against from the 1970s to the late 1980s. After that, it was recognised and rehabilitated from the 1990s until today.

During the first phase, sociology in Morocco was distinguished by its "political commitment" (Rachik, 2007: 10). It also maintained the necessary critical distance from the political actor in order "not to become the representative of a certain class" (Pascon, 1986c: 62). Even so, it was opened up to the political actor to institutionalise its scientific practice and

sociologists took part in social change so as not to fall into the "danger of marginalisation or self-marginalisation" (ibid.: 62). On the other hand, sociologists attempted to "decolonise sociological knowledge" by adopting a "double critique". First was a deconstruction of concepts of sociological knowledge and discourses coming from the West and marked by a Eurocentric ideology that spoke about the Arab world. Second and at the same time a critique was elaborated by the different societies of the Arab world "for their own use" (Khatibi, 1975: 1). This deep critique and call for objectivity led to replacing the deological and religious forces of national sociology with "a more scientific purpose guided and mobilised by the concern to highlight the unifying element of Moroccan society" (EL-Maliki, 2011:   133).

The academic institutionalisation of the field was associated with the creation of the Institute of Sociology in 1960. The Institute provided training courses in sociology, demography, social statistics and cultural anthropology, and constituted a "basic structure for teaching and research before its role in teaching was limited due to lack of teachers and poor financial and logistical means" (Zahi, 2014: 184). Sociology aimed to "maintain a kind of harmony between scientific research and political engagement" (Rachik, 2007: 11) by conducting field research, training students, publishing scientific studies and research, and participating in political and social projects. On this basis, sociology interacted with political demand with a strict critical eye by questioning the "limits and ends of political generosity" (Pascon, 1986c [1979]: 61). In turn, it strived to serve the objective of "making knowledge available to the public so that knowledge contributed to change" (Pascon, 1986b: 60). As a result, the political actor sensed the "sociological danger" that led to the closure of the Institute of Sociology in 1970.

This closure gave rise to a period of rejection and hostility that was accompanied by two regional contexts.   First, the events of May 1968 in France, led by students and elites in sociology and philosophy, provoked a mass uprising against the power of social and political tutelage and a declaration of a new era for freedom and individual and political rights. Second was the context of the Cold War between the United States of America and the Soviet Union and the general Western hostility to socialist projects. Sociological teaching and research in Morocco during the 1960s was associated with researchers of French-speaking origin, especially communists, and with young students carrying a dream of change. It was

clear from the process of development of training, teaching, and research that the first generation of sociologists in Morocco was "against the state" and rejected many national policies (agricultural, hydraulic, social, and so on) and used sociology as a tool to spread class consciousness among the youth and the public. As a result, the political actors felt the danger that the Institute of Sociology would turn into a breeding ground for left-wing revolutionary thought threatening the stability of a large transitional and unstable political system. Thus, the institute was closed and "sociology and sociologists [were] marginalised and pushed into secondary colleges and departments" (Madoui, 2015: 105).

The moment of rejection bridled the objective of institutionalising a genuine sociological practice in postcolonial Morocco through "the isolation of sociologists and the withdrawal of many of them from the field of scientific research or at least the focus on individual work" (Zahi, 2014: 186). However, it also contributed to "the renewal of anthropological practice" (Madoui, 2015: 105) and paved the way for a sociological approach to new questions and issues. As a result, research on women, childhood and urbanisation issues opened up a broad spectrum that enabled the issue of education to be the focus of researchers, even for those who focused on women's studies research. For example, issues of socialisation, girls' education and women's empowerment were central to the work of Fatima Mernissi with her team "Family, Women and Childhood Issues" and the "Approaches" series supervised by Aicha Belarbi (Mernissi, 1987: 7-14.).

The moment of political rehabilitation and academic recognition was associated with the death of Hassan 2nd and the accession to the throne of Mohammed 6th in 1999. At the beginning of the new millennium, sociological studies were established and became a commonplace branch in philosophy departments and the base of professors and students was broadened (Zahi, 2014: 187). However, the teaching of sociology was only introduced in all Moroccan universities in 2016 - half a century after the establishment of the praxeological conditions of Moroccan sociology by the founders.

It is difficult to say with certainty that this rehabilitation has been accompanied by a political awareness of the centrality of social science to development. The transformations of the neoliberal era imposed the evolution of the global demand for sociological expertise with the increase in the number of donors and the need of companies, international organisations as well as the political actor for sociological research to follow

the course of modernisation and lay the foundations for global development (El Idrissi, 2017). On this basis, this phase is related to the interest in education and school as central issues with the increase of official political demand (the Ministry of National Education), national institutions (the Higher Council of Education, Training and Scientific Research), international organisations and donors in a way that contributes to the emergence of sociological PhD degrees (and MA since 2016 in FLSH Ibn Tofail (Kenitra) and Moulay Ismail (Meknes) university) that focus on education issues. It should be noted that, to date, no Moroccan university offers a BA degree in the sociology of education.

According to the three phases mentioned above, it is possible to distinguish two main sociological fields that have dominated the logic of sociological teaching and research in Morocco since the dawn of independence until today. First, "the classical fields … [have been] linked to rural sociology and political sociology" (Zahi, 2014: 188) since the 1960s in a way that makes the history of sociology in Morocco essentially a history of reflection on the rural question. These fields frame the academic institutionalisation of teaching and classical sociology departments (with the LMD [BA-MA-PhD] system) that have, since 2002, "acquired political and economic importance in the context of the application of new perceptions of social development" (Ibid.: 188) in the Moroccan university system – that is, with the process of developing "professionalisation" that links universities to the labour market and follows the social transformations of Moroccan society. Second, "the emerging fields … are associated with the specialisations that are taught in most sociology departments in Moroccan universities" (Ibid.). In this context, the sociology of education has become a secondary and marginalised branch because it does not lead to any qualification. It is taught only in two universities and engages only a few multidisciplinary research teams due to the lack of laboratories in the sociology of education.

The main objective of the scientific and political commitment was accompanied by the challenge of the internationalisation / nationalisation of social sciences in the local space. The critique of colonial knowledge was accompanied by the Arabisation of research and training paths. However, many of the founders of sociology ended up admitting that "Arabisation has effectively isolated the new generation from an international corpus of knowledge to which their French-speaking predecessors had free access" (Roussillon, 2003: 464). Indeed, "the nationalist paradigm and the cold look

at decolonisation" (Ibid.: 465) was replaced by a more expert, political and economic demand. However, this did not prevent the reconnection between the global and the local in the production of sociological knowledge with an equation of "Publish globally and perish locally Vs. Publish locally and perish globally" (Hanafi, 2011). In addition to this, it revived some of the hidden tendencies of the Arabisation and Islamisation of sociology at the Moroccan University that require a profound rethinking of the epistemological conditions of scientific practice, the relationship between ideological and scientific foundations in the production of knowledge, and the boundaries between what is social, political and sociological in scientific publication and sociological discourse towards the public.

The epistemological identity of the sociology of education
The marginalisation of the field of sociology of education in the decades following independence was due to its weak institutionalisation in Morocco. The political actor considered sociology as a revolutionary practice, and its criticism of social and educational structures as dangerous for the "Makhzen" system and the future of the monarchy itself. The sociology of education was not therefore blocked or fought but was transferred from the university to the teacher training centres. Its potential criticism was mitigated by linking it to official demand and praxeological education.

It is possible to talk about marginalisation from sociology itself. Paul Pascon considered the Moroccan educational system during the period of independence was "an imported system that does not teach us life as far as preparing the student for the labour market is concerned" (Pascon, 1986a: 29). Consequently, it was difficult to rely on the Moroccan school to lead social change, at least during this transitional period. For Pascon, effective social change "is indeed not only linked to one factor" (ibid.), but also to agricultural reforms, the equitable distribution of wealth, and the sensitisation of peasants and marginalised classes, all of which were priorities of sociological engagement and practice in the 1960s and 1970s.

Due to the spread of illiteracy, low school enrolment and the use of the education system for political purposes, Moroccan sociologists found in rural and political sociology some specialisations that could allow the institutionalisation of sociology. Furthermore, sociologists tried to change the conditions of the marginalised class by understanding the conditions of production of the social world and spreading class consciousness, as well as

by confronting the policies of exclusion that were followed by the state to impede social change. As a result, the sociology of education was marginalised within sociology in Morocco - no longer preventing the development of many studies in the field but preventing social inequalities and the selective school from getting the attention of sociologists in Morocco.

Although Pascon was satisfied with the establishment of a sociological practice in rural Morocco "for historical [the legacy of the colonial period] and political reasons [the focus on agriculture]" (Pascon, 1986b: 42), he was still "concerned about the lack of interest of social scientists in other important areas" (Ibid.). While praising the "attractiveness of urban sociology and women's studies", he implicitly encouraged researchers to pay more attention to issues of education and the Moroccan school, even under the guise of other specialisations. His study with Mekki Bentahar, "Ce que disent 296 jeunes ruraux" (Pascon & Bentahar, [1969], 1978: 145-287), made the first attempts at the sociology of youth, and school was highlighted as a secondary variable (Rachik and Bourqia, 2011). The emergence of research in the sociology of education and school is thus associated with the development of the sociology of women, family and children. This interest in women's issues did not come out of nowhere. As "the first generation of sociologists is obsessed with a Marxist ideology with a holistic worldview, subsequent generations are affected by sectoral, less organised and inclusive ideologies" (Ibid.). This brings to the surface issues of socialisation and education, alongside concern for girls, rural areas, working women, and support from international organisations and local government sectors.

It is undeniable that most sociological studies since the 1980s have been interconnected with "the interest and financial support provided by some international organisations on the issue of women and children*"* (Rachik, 2007: 21). For this reason, the publications of the group and Mernissi's approaches mark a new phase in the development of sociological practice in Morocco. Sociological research is no longer opposed to the state or the conduct of social change. In trying to change the social status of women (Ibid.: 16), it was found that improving the status of women depended on changing the mental and cultural foundations of socialisation, undertaking fundamental social and educational reforms, and supporting the schooling of girls and their professional and political empowerment. Therefore, socialisation and childhood become crucial concepts for sociological education (Ibid.: 20).

In the 1960s the first study in the sociology of education focusing on socialisation emerged (Radi, 1969). It is indeed associated with the rural context and later studies from a feminist perspective have focused on childhood and the girl child (the work of Aisha Belarbi for example), but these studies remain exploratory, and education is presented as a secondary variable. In addition to this, the lack of institutionalisation of the field of sociology of education is evident in the theoretical, epistemological, and even ideological discussions with which this research is involved. Often the focus is on theoretical frameworks that address the issues of girls' schooling, women's empowerment and the status of childhood, without reference to theoretical paradigms that have been specifically framed for the sociology of education – the Theory of Reproduction with Pierre Bourdieu (Bourdieu and Passeron, 1964) Rational Choice Theory with Raymond Boudon (Boudon, 1973), the New Sociology of Education in Britain (Young, 1971) or the Sociology of School Experience with François Dubet (Dubet & Martuccelli, 1996).

The Moroccan anthropologist Hassan Rachik confirms that "the most important sociological field that has been marginalised for decades is the field of sociology of education, which has become a marginal discipline and to which researchers have not given much importance" (Rachik, 2007: 23). Indeed, the wave of neo-liberalism requires the reconsideration of many inputs and outputs of education in terms of the link between school and the training of a skilled and semi-skilled workforce. The calls for 'professionalisation', to link the school to the labour market and the need of international institutions and Moroccan governmental sectors for sociological expertise in the field of education to shape an educational policy linked to professional and economic dimensions, coincides with the development of the privatisation system (that is, the promotion of private education).

As far as the development of political demand and sociological expertise is concerned, the transformations of the Moroccan school, the criticism of the political reforms and the circumstances of the transition opened the way for a group of sociologists who were interested in the "educational question", the "challenges of schooling in rural areas", "educational policies" and the "curriculum" (Muhsin 1990; Faoubar 2016, Boulahcen 2006; Boukhriss & Herhar 2018). At the beginning of the new millennium, the number of research studies, sociological studies and theses on the Moroccan school increased.

In addition to the context of the internal marginalisation of the sociology of education within the sociological practice in Morocco, it is also possible to discuss the nature of the complex relationship between the sociology of education and the sciences of education concerning issues of teaching, research, and training over the decades. While the emergence of sociology in Morocco is linked to rural issues, agricultural reforms, and later women's issues, the Moroccan state has been conducting "a reform of education based on two pillars: *first,* the centralisation of the management of the sector since the period of independence. *Secondly*, pedagogical approaches that rely on the humanities" (Lahchimi, 2015: 21). Due to the lack of Moroccan specialists and the epistemological establishment of the educational sciences during the 1950s and 1960s, the state recruited Moroccan as well as foreign researchers and teachers from the fields of sociology, philosophy and psychology (and even the educational sciences) to provide educational staff, teachers and researchers in the teacher training centres. This resulted in the institutionalisation of the sociological research career in education, but outside the university and scientific communities. It was also influenced by intervention research which frames the interaction between educational sciences and educational issues.

After the closure of the Institute of Sociology and the political rejection of sociological practice, official institutions continued to benefit from sociological experience in research, training and pedagogical supervision to train teachers and prepare reports and studies. Sociological practice in training centres and government sectors was considered a secondary specification by including it in the humanities and educational sciences in general. For this reason, the historical interrelation between the sociology of education and the educational sciences clearly shows the evolution of many research careers in education and training centres.

With the creation of teacher training centres after 1956 – including the *Ecoles Normales Supérieures (ENS)* in 1963, the "Centres Educatifs de l'Enseignement Secondaire" in 1958, the Centre de Formation des Inspecteurs in 1969, the Centres Pédagogiques Régionaux in 1970, the Ecole Supérieure des Sciences de l'Education in 1983, and the Centre d'Orientation et de Planification in 1987 - the scientific practice in the field of educational sciences was institutionalised within the framework of a practical, procedural and formative character. It aimed to ensure the training of human resources and other personnel in the education and training sector. The field of educational sciences in Morocco was becoming a multidisciplinary field of

human and social sciences. Thus, the presence of the sociology of education was limited to providing theoretical training and producing pedagogical research on the transformations of school organisation and the professional practice of the various actors in the system (teachers, education administrators, inspectors, guidance counsellors and so on).

Given the weakness of a sociological scientific group within these training institutions and the lack of mutual interaction with scientific groups in universities and research centres, the role of sociologists and researchers was limited to providing training about the history of sociological theories on education during the classical and modern period; the focus was rarely on new theories and the context of the development of school sociology. Accordingly, the epistemological establishment of the field was the product of individual efforts and collaborations with other researchers to liberate sociological practice from the legacy of educational science. After that, many efforts were made to create research teams and training groups to work on issues of education and school (e.g. the Ecoles Normales Supérieures of Meknes, Martel, Marrakech, Fez ... that later, in 2009, joined the universities).

Epistemologically, it is important to accentuate that the marginalisation experienced by anthropology in Morocco and the Arab region contributed to the "usurpation of an anthropologist's profile that has become almost fashionable ... by researchers from other fields of knowledge such as literature, popular culture, political science, and history" (Boubrik, 2019: 188). Historically, the practice of the sociology of education during the colonial period also resulted in 'an accumulation of writings and a mutual dependence between writers to formulate facts, attitudes, [and] reproduce descriptive discourses' (Faoubar, 2016: 86). The result was 'the failure and isolation of these writings from the development of the field of sociology and social sciences in the twentieth century [so that] they remained closed to transcendent concepts, and functional theses' (Ibid.). The sociology of education experienced the same situation in the training centres. There was thus a deep crisis of epistemological identity, an uncertain future of scientific practice and the relationship with the university.

In recent years, literature and guidebooks related to the sociology of education or schooling have been published and written by researchers in the educational sciences, and sometimes in the discipline of arts and languages, that lack conceptual, epistemological, and critical coherence in dealing with sociological theories. This creates confusion among students and researchers

who interact with research that is not produced by specialists in the field. It also leads to the possibility of turning educational publications into a business (especially with commercial books), not to mention the "threat" of usurping the profile of a sociologist.

Many of these publications do not allow for the linking of epistemological and methodological bases to create a critical debate between local scientific communities. The lack of specialisation leads to "a relative weakness of theoretical research and a lack of research that extracts new concepts from these grand theories and their critique to submit them to empirical research in the field" (Hammoudi, 2018: 39-40). Furthermore, some colleges and training centres (the École supérieure des sciences de l'éducation and the ENS in particular) offer master's and doctoral degrees after a basic or professional degree in education sciences or related specialties. All this can pose a real problem for the academic future of students and researchers, especially as degrees in the sociology of education can be obtained outside the faculties of Arts and Humanities. This situation is further complicated when laboratories and research groups in the arts and languages award higher degrees related to the field of sociology of education.

Whether it is the process of university professionalisation or the philosophy of containing so many disciplines due to the weak institutionalisation of specialisation, the crisis of the epistemological identity of the field of sociology of education is surely transferred from training centres to the university, as is already the case with the fields of anthropology and popular culture in Morocco (El Idrissi, 2020). It is clear that the interconnection of the development of sociological practice in Morocco with rural and women's issues has contributed to the marginalisation of the educational question for decades and has made it a secondary variable in the work of the leaders of Moroccan sociology. This marginalisation is reflected in the adoption of the sociology of education by training centres and its incorporation in the field of educational sciences.

Challenges of scientific practice and the university's institutionalisation of the sociology of education

The real process of sociological research on education and school issues was launched in the 1990s. However, it is still a marginal specialisation at the Moroccan university, and individual efforts alone cannot ensure an institutionalisation of the sociology of education. To develop a scientific practice around the school and to unite the scientific and political

efforts of different actors to accompany the changes in the Moroccan school in the digital age, it is necessary to confront the processes of commodification of society and in educational activities (Burawoy, 2015). Analysis of the centrality of the school in the production of social and spatial inequalities in the context of a transformed society is vital.

Though political and economic interest in sociology is selective, its use in educational training and research centres contributes to rethinking the relationship between political engagement and scientific research; its use can make critique multidimensional – open to political demand and able to contribute to public debate and general reform. Indeed, the emphasis on centralising the accumulation of knowledge of sociological research on education has made the objective of establishing analytical frameworks compatible with the nature of Moroccan society as a developing society. However, this does not eliminate "the importance of the utilitarian dimension of scientific knowledge provided that it has the necessary awareness of the complementary and interactive argument between theory and concrete practice" (Muhsin, 1999: 8).

The process of privatisation and professionalisation (that is, the professionalisation of the careers of high school students and linking education to the labour market) extends to the Moroccan education system, which depends on the French model. The political actor is thus no longer the only actor of change as soon as educational reforms become compatible with the objectives of donors and the philosophy of the market. It is, therefore, necessary to mention the philosophy of Pascon in the institutionalisation of a sociological practice that is open to political and economic actors who can build an accumulation of knowledge to ensure the future of multidimensional sociological criticism and to allow sociologists to participate in reforms and gain social legitimacy after decades of marginalisation.

Alongside the critique of the educational system and educational policies in Morocco (in terms of political and economic dependence), sociological research on the university also developed when youth and values were studied (Bourqia, El Harras & Bensaïd, 1995). This is an extension of the investigative studies model (Bourqia, El Ayadi, El Harras & Rachik, 2000) that characterised the practice of sociology in Morocco in the 1980s. This research "intermingles" sociological and anthropological approaches and refers to the field as the basic system of sociological practice. Also, the richness and diversity of research techniques and approaches show the real evolution of sociological practice in Morocco. However, it "focuses mainly

on students, while the university as an organisation and the teaching profession remain largely absent and do not constitute an object of research in the field of the sociology of organisations, the sociology of the profession" (Bourqia, 2009: 12). Indeed, in addition to focusing on young people, this research aims to monitor the issue of values and social change in Morocco (Bourqia et al. 2010). Consequently, Such studies contribute to the broadening of the intervention of the sociology of education to include multiple issues (youth, university, values) as well as sensitive issues (religion, gender). They also pave the way for interdisciplinarity and the establishment of a dialogue between the "social sciences".

Over the last three decades, the practice of the sociology of education has maintained its link with economic, political, and institutional demand. However, this time the linkage is focused on specific issues, especially political and economic issues, that raise many questions about the relationship between sociological practice and the general system of the capitalisation and liberalisation of the world. The dependence on experience has a great impact on the weak institutionalisation of sociological practice in Morocco which "makes its themes go hand in hand with specific criteria rather than having a research strategy*" (Zahi, 2014: 189)*. The concentration on the sociology of education in training centres has highlighted the evolution of the training system in these centres (Chekroun, 1989). The first of these studies is part of the sociology of the professions, which is interested in the training system accompanying the establishment of the CPRs (*centres pédagogiques régionaux*) [...] and which accordingly analyses the social status of teachers and their academic career in relation to values (Rachik, 2007: 23). When it comes to a sociological evaluation of central educational reforms that are linked to the strengthening of human resources, much attention is paid to the evaluation of training institutions and their impact on the construction of personal projects and the conditions for the construction of the professional and social experience of teachers and educational actors. The teacher training system has been analysed through two approaches: firstly, the principle of centralisation and its dependence on the international system through the 'generalisation of training'; and secondly, the development of professionalisation strategies" (Lahchimi, 2015: 23) in relation to the objective of improving educational provision.

During the 1990s, the training of educational actors was confined to the training institutions of the Ministry of National Education in almost total separation from the university. Thus, these institutions are considered

professional organisations rather than fields of production and organisation of knowledge (compared to universities). The mission of the university is to provide basic training before entering the training centres. Universities contribute to the process of professionalisation of education since the adoption of *"Professional Licences"* to link knowledge to the labour market and the professionalisation of academic training in a more technical and economic direction.

After analysing schools in rural areas, the schooling of girls and the critique of educational policies, attention is turned to issues related to school guidance and guidance professions in Morocco. The interest in the sociology of school guidance came from the educational sciences in parallel with the interest of political actors in school guidance issues since the 1990s.

The contribution of the school guidance process to the production of social inequalities and inequalities in educational achievement (Boulahcen, 2002), has been the subject of much attention during this period. It also analyses counselling practices, school guidance and the conditions of production of the professional experience of counsellors in Morocco (Boulahcen, 2005).

Indeed, by limiting its effectiveness in institutions, marginalising the different actors in its production and linking it to bureaucratic procedures that are associated with market requirements, school guidance becomes an 'institutional weapon in the hands of the Moroccan education system to legalise the lack of equal opportunities that is reflected in the so-called compulsory education (up to the age of 15) at the end of the preparatory stage [....] The institutional mechanisms allow all disadvantaged pupils to settle for the status inherited from their social group' (Boulahcen, 2005: 32). From an epistemological point of view, the critical spirit that has taken hold since the emergence of sociology in Morocco preserves analysis the interweaving of the economy and politics in the production of educational activities.

The institutionalisation of sociological practice during the 1990s is marked by the use of Arabic and French as languages of publication and scientific research, unlike the pioneer period when French dominated most sociological productions. This has allowed an increase in the number of local researchers due to the development of the Arabisation of sociology in Morocco. Over the last two decades, the sociology of education in Morocco has sought to go beyond the secondary position of education and the school in the work of the pioneer generation and the founding fathers by adopting critical multidimensional approaches. It attempts to dismantle the

manifestations of the crisis in the Moroccan education system and to participate in reforms that move away from the philosophy of dependency and take into consideration local specificities. Emerging issues have been highlighted such as educational policies, curricula, programs, and school guidance, which are revived by new approaches even outside the practice of the sociology of education while maintaining a consensual dependence between social and political demand, effective critique, and macro and micro-sociological approaches. Issues of social inequality, school accessibility, school integration and school success remain the central pillars that organise the different sociological works produced during this period. Initially, much work was done to develop a sociological practice far removed from the pedagogical philosophy of educational sciences and to link the sociology of education to universities and institutions. Still, after several years of work and the increase in the number of researchers, many research attempts have been made to shed light on the school experience and to follow the process of production of social and educational inequalities in Moroccan schools in relation to gender and gender differences.

Conclusion

Enrolling students in MA and PhD degrees in the sociology of education is a turning point in the institutionalisation of a sociology that attends to issues of education and schooling in universities rather than to the needs of training centres as has been the case for decades. The sociology of education is no longer a university module that is taught as part of the Bachelor of Arts - or Professional - degree and is represented to students as a set of theories and knowledge to gain access to teacher training centres; it has become a main branch at the university. Many researchers strive to make the correspondence between teaching and learning and training and to produce sociological knowledge about the Moroccan school and the development of scientific practice. To this end, sociology has not only "penetrated new problems and questions" but is creating important accumulations of knowledge through personal efforts to develop sociology in Morocco in general, and the sociology of education in particular.

On this basis, attention is given to issues such as school violence, in a micro-perspective (especially in urban areas) (Yaqine, 2013), social, school and gender inequalities (Boukhriss, 2018), the issue of empowerment (Žvan Elliott, 2015), school curricula and the environment (Herhar, 2018) and value issues (Jarmouni, 2018), educational policies and gender (Boukhriss, 2018),

school guidance and guidance professions (Boulehcen, 2005, 2006) and the crisis of educational systems and the question of reform (Jarmouni, 2017). Such studies work with innovative approaches that combine theoretical, field, and anthropological dimensions. They maintain the interconnection between scientific engagement and sociological knowledge that is of paramount importance for the development of society.

In the last decade, despite the weak institutionalisation and accumulation of knowledge production, school and schooling-related micro-issues have become the basis of knowledge production in the sociology of education (compared to rural and women's issues). Indeed, thanks to individual and collective initiatives, school issues are linked to academic research and the latest international sociological theories and approaches in the field. Thus, a genuine Moroccan sociological practice of education has started to develop.

References

Boubrik B. (2019), Anthropology: Theories and experiences, Casablanca, East Africa (in Arabic).

Bouderbala N. (1984), Pour un regard froid sur la colonisation. La perception de la colonisation dans le champ de la pensée décolonisée, le cas du Maroc, in Vatin J.C., (ed.), Connaissances du Maghreb, sciences sociales et colonisation, Paris, CNRS, pp. 423-434.

Boudon R (1973), L'inégalité des chances, Paris, Armand Colin.

Boukhriss F (2018), Sociology of education and gender: From social inequalities to gender disparities, Omran journal, issue 25, pp. 145-157. (in Arabic).

Boukhriss F. (2018), Politique éducative et genre: Une approche théorique de l'expérience marocaine, In Boukhriss F. & Herhar A., (eds.), Questions de sociologie de l'éducation: genre, environnement et valeurs, Rabat, Net, pp. 27-41 (in Arabic).

Boulahcen A. (2002), Sociologie de l'Éducation. Les systèmes éducatifs en France et au Maroc. Étude comparative. Casablanca: Afrique-Orient, Casablanca.

Boulahcen A. (2005), "Le processus d'orientation scolaire au Maroc", Revue internationale d'éducation de Sèvres, issue 38, pp. 25-34.

Boulahcen A. (2006), Sociologie de l'orientation: étude des processus scolaires et professionnels en France et au Maroc: l'état de la recherche, Rabat: Editions & Impressions Bouregreg communication,

Bourdieu P. and Passeron J.C. (1964), Les héritiers, Paris, Minuit.

Bourqia R. (2009), Vers une sociologie de l'université marocaine, revue Al-Madrassa Al- Maghribiya (Conseil Supérieur de L'Enseignement-Maroc), N° 2, pp. 11-55.

Bourqia R. (2010), "Values and social change in Morocco", Quaderns de la Mediterrània, Issue 13, pp. 105-115.

Bourqia R., El Ayadi M., El Harras M. & R. Hassan (2000), Jeunes et valeurs religieuses, Casablanca, Éditions Eddif.

Bourqia R., El Harras M. and D. Bensaïd (1995), Jeunesse estudiantine marocaine: valeurs et stratégies, with the collaboration of Jamila Bennaghmouch, Rabat, Éditions de la Faculté des lettres et des sciences humaines.

Burawoy, M. (2015). Facing an unequal world. Current Sociology, issue 63(1), pp. 5-34. https://doi.org/10.1177/0011392114564091

Chekroun M. (1989), Culture et pédagogie au Maroc, Casablanca, Toubkal.

Dialmy A. (2015), Sexual transition in Morocco: the right to sex, filiation and abortion, Rabat, Dar al Aman (in Arabic).

Dubet F and Martuccelli D (1996), À l'école. sociologie de l'expérience scolaire, Le Seuil, coll. "L'épreuve des faits", Paris.

El Idrissi M. (2017), Teaching Sociology in Morocco: Research Institutions and the Epistemological Institutionalization of Scientific Practice, Arab Social Science Council, Working Paper Series No. 1, Beirut, Lebanon (in Arabic). http://www.theacss.org/uploads/cke_documents/Teaching-Sociology-in-Morocco-Paper-Final-Ar.pdf

El Idrissi M. (2020), Teaching Folk culture in the Moroccan university: research, training, and the bet of institutionalizing the epistemological identity, Revue al-Mourooth, numéro 18, pp.154-177 (in Arabic)

Elliott, K. (2015). (Dis)Empowering Education: The Case of Morocco. Urban Anthropology and Cultural Systems Studies and Global Economic Development, Issue 44(1/2), pp. 1-42.

El-Maliki A. (2011), "Moroccan Sociology: Epistemological Preliminaries". In Readings in Methodology: African Perspectives,

edited by Jean-Bernard Ouédraogo and Carlos Cardoso. Dakar: Codesria (Codesria Book Series), pp. 127- 138.

Faoubar M. (2016), Sociology of colonial knowledge production: education in Morocco, Omran journal, issue 17, pp. 67-90 (in Arabic).

Felk A (1992), "Société civile et espace scolaire: de l'espace scolaire comme espace d'autorité", Signes du présen, N. hors-série, pp. 285-295.

Hammoudi A. (2018), Social Sciences in the Arab Region: An Approach to Arabic Language Productions (2000-2016), Arab Council for Social Sciences, Report No. 2, Beirut, Lebanon, (in Arabic). http://www.theacss.org/uploads/cke_documents/Arab-Social-Science-Report-2017-Ar.pdf

Herhar A. (2017), La culture environnementale dans les programmes scolaires au Maroc, in Maamri L. & Kanbaai A., (eds.), territoire, société et développement durable, Fez, USMBA, pp. 165-190 (in Arabic).

Herhar A. (2018), Manifestations of environmental awareness among qualifying secondary school students: A study in environmental sociology, In Boukhriss F. & Herhar A., (eds.), Questions de sociologie de l'éducation: genre, environnement et valeurs, Rabat, Net, pp. 149-176 (in Arabic).

Jarmouni R. (2018), La question de la valeur dans les programmes et curricula de l'école marocaine: Questions et observations, In Boukhriss F. & Herhar A., (eds.), Questions de sociologie de l'éducation: genre, environnement et valeurs, Rabat, Net, pp. 107-121 (in Arabic).

Khatibi A. (1975), "Sociologie du monde arabe: Positions", BESM (126), pp. 13-26.

Lahchimi M. (2015) 'La réforme de la formation des enseignants au Maroc', Revue internationale d'éducation de Sèvres, issue 69, pp. 21-26.

Madoui, M. (2015). Moroccan sociology: from denial to rehabilitation. Sociologies pratiques, issue 30(1), pp. 99-113. doi:10.3917/sopr.030.0099.

Mernissi F. (1987), "Préface", in Belarbi A., Portraits de femmes, Casablanca, Éditions le Fennec, Collection Approches. DOI: 10.1097/00004311-198305000-00002

Muhsin M. (1990), The general sociological framework of the education system, Rabat, Majallat ʿĀlam al-Tarbiyah (in Arabic).

Muhsin M. (1993), Savoir et Institution: Contribution à l'analyse sociologique du discours philosophique de l'école au Maroc, Beirut, Dar Attalia (in Arabic).

Muhsin M. (1999), The Discourse of Educational Reform between the Issues of Crisis and the Challenges of Civilization Transformation: A Critical Sociological Look, Casablanca-Beirut, Al-Markaz Al-Thaqafi Al Arabi (in Arabic).

Pascon P. & M. Bentahar (1978 [1969]), "Ce que disent 296 jeunes ruraux", in Études sociologiques sur le Maroc: recueil d'articles conceived and prepared by Abdelkébir Khatibi, Tangiers, Éditions marocaines et internationales, pp. 145-287.

Pascon P. (1986a), L'ensemence des modèles et l'absence d'innovation, Interviewed by Zakia Daoud, translated into Arabic by Mustapha el Hasnaoui, Revue Bayt Al-Hikma, Numéro 3, pp.3-30. (in Arabic).

Pascon P. (1986b), En sociologie rurale, Interviewed by Tahar ben Jelloun, Translated into Arabic by Mohamed Boulaich, Revue Bayt Al-Hikma, Numéro 3, pp. 31-52. (in Arabic).

Pascon P. (1986c) [1979], "La sociologie, pourquoi faire ?" in Pascon P., Trente ans de sociologie au Maroc (textes anciens et inédits), Rabat, Bulletin économique et social du Maroc, (155-156), pp. 59-70.

Rachik H. and Bourqia R. (2011), "La sociologie au Maroc: grandes étapes et jalons thématiques", SociologieS [Online], http://sociologies.revues.org/3719.

Rachik H. (2007), Sociologie, Anthropologie & Science politique au Maroc, Jalons thématiques et institutionnels, 1959-2006, Rabat, Ministère de l'Enseignement supérieur, Direction des Sciences.

Radi A. (1969) "Processus de socialisation de l'enfant marocain", Revue des études philosophiques et littéraires, Rabat, April, pp. 33-47.

Roussillon, A. (2003). Sociology in Egypt and Morocco. In Porter T. & Ross D. (Eds.), The Cambridge History of Science, pp. 450-465. Cambridge: Cambridge University Press. doi:10.1017/CHOL9780521594424.026

Tozy M. (2013), "Paul Pascon, un pionnier de la sociologie marocaine", SociologieS (online), http://sociologies.revues.org/4322.

Yaqine M. (2018), Violence in the school environment from a micro-sociological perspective, Al Baht Al'Ilmi Journal, Issue 54, Pp. 53-78 (In Arabic).

Young F. D. M (1971), Knowledge and control: new directions for the sociology of education. London: Collier-Macmillan.

Zahi K. (2014), The practice of sociology in Morocco: institutional evolution and new challenges. Practical Sociologies, hs 1(3), pp. 183-192. doi:10.3917/sopr.hs01.0183.

Zouggari A. (1991), "Stratégie des agriculteurs en matière d'éducation", in Zouggari A and Vignet-Zunz J, Jbala: histoire et société: études sur le Maroc du Nord-ouest, Paris: CNRS éditions, pp. 203-230.

Educational Challenges and Opportunities among African Refugee Students in the Australian Education System: A Scoping Review

Mavis Boamah

School of Social Science, Media and Film and Education
Swinburne University of Technology, Melbourne
mboamah@swin.edu.au

Education plays a critical role in the resettlement process of young refugees in Australia. This scoping review examines the Australian literature on the educational experiences of African students from refugee backgrounds. Specifically reviewing 10 articles published between 2001 and 2021 revealed that these students experienced educational challenges related to literacy and racism whilst maintaining high academic expectations. Guided by Putnam's social capital theory (2000), analysis of findings also indicates that: a) social networks that build social capital in rural communities may not offer the same opportunities to students in urban areas, and b) for students to successfully develop social capital, there is a need to reduce social inequalities such as racial discrimination. This paper suggests that attention be directed to reducing social inequalities in schools and communities and to promoting school-based mechanisms that enhance the active use of social capital by students from minority groups.

Keywords: refugee education; social capital; resettlement; social networks; Africa

The majority of young refugees from Africa have experienced inter-generational conflicts and interrupted schooling and arrive in Australia with no or a low level of formal education (Lee & Cheung, 2022). The fragmented experiences could mean young African refugees typically enter the Australian education system without the same level of academic and

institutional 'know-how' that might be expected among students in their age group. This possible educational challenge may stem from years of political instability in countries of origin and many years in transiting countries and refugee camps (Mupenzi, 2018).

Education is typically viewed as the main means through which refugees can fulfil their aspirations (Earnest et al., 2007). Education has the capacity to dispel ignorance about the historical precedents and contemporary politics of global and local inequality and injustice and it can work towards actively challenging disadvantage, discrimination, oppression, underdevelopment, conflict and violence (UNESCO 2003; cited in Matthews, 2008). Schools in Australia are regarded as key sites where young African refugees learn about Australian culture, acquire literacy skills, and make their dreams a reality (Earnest et al., 2015). Despite the important role schools play, scholars have argued that education policy frameworks at the national level do not address the unique needs and challenges of refugee background students (Harvey et al., 2016). Terry et al. (2016: 5) argue that the government's formal equity categories for higher education list students from refugee backgrounds within a broad category of Non-English-Speaking Background (NESB) students, without considering either the unique obstacles refugee students face due to past experience of disrupted schooling or the strengths they possess.

Akin to the policy deficit, African students from refugee backgrounds are typically discussed in terms of the particular educational challenges they face, due to their experiences of war, life in transition, and disrupted schooling (Naidoo et al., 2015). Despite the challenges, these young people have educational aspirations (Naidoo et al., 2015). There is a growing body of research that focusses on how family and other social networks contribute to building the social capital and overall educational achievements of young people from refugee backgrounds. Studies to date show that the educational attainments of students can be linked to the forms of capital – social, economic, or cultural - that a person does or does not possess (Eng, 2009; Sullivan, 2001). The more access individuals have to these forms of capital the better the chances of positive educational outcome (Pishghadam & Zabihi, 2011). Researchers that establish links between educational attainments and social capital mostly employ the theoretical perspectives advanced by Bourdieu (1986), Coleman (1988), and Putnam (2000). Putnam's (2000) concept of social capital in which he categorises two models – bonding and bridging – is fundamental to understanding

students from refugee backgrounds and the social networks that contribute to their educational outcomes.

Providing a more detailed, evidence-based and nuanced account, this scoping review surveys the research on the educational experiences of African refugee students in Australia and elucidates their key challenges and opportunities by drawing on Putnam's (2000) social capital theory to further our understanding. The study reviewed ten peer reviewed journal articles published between June 2001 and June 2021, allowing the review to capture both older and contemporary studies. Only studies specifically focused on African students with refugee backgrounds were included because their years in refugee camps rendered them likely to encounter significant challenges in their new home. Based on this, the study does not analyse the dataset on any one specific African country, but draws data from multiple African countries at once, commonly Sudan, South Sudan, Eritrea, and Sierra Leone.

The review is organised in four parts. The first provides a brief account of Putnam's (2000) social capital theory. The second focuses on the review process and draws on Arksey and O'Malley's (2005) five stage framework for conducting scoping reviews. The third part analyses key findings from the review, documenting challenges such as literacy skills and opportunities such as social networks. The final part interrogates the relevance of social capital to educational outcomes.

Social capital: theoretical framework

Different theoretical lenses can be applied to study the integration and educational experiences of refugees. Theories of social capital are especially useful, and the approaches of both Bourdieu (1986) and Putnam (2000) have been influential. The analysis below draws mainly on the work of the latter. Bourdieu views social capital as the various networks and connections that an individual possesses, contributing to power and class distinction, but Putnam emphasises that social capital fosters integration and promotes communal values and togetherness; it can be a glue that holds the collective norms and values of society together (Adkins 2005; Siisiainen 2003). Putnam's book, 'Bowling Alone', explained how Americans' changing behaviour led to social disconnection and a subsequent decline in community engagement and increased violence, crime and public health problems. He argued that active involvement in public organisations, including sports, was

the key to building social capital and arresting American's decline in social integration.

In Australia, social networks have been found to support refugees' resettlement in their new environment, amidst their fears and challenges (McDonald et al., 2008). This article goes further. It focusses on Putnam's ideas of "bonding" and "bridging" social capital to explore the varying social networks that young African students from refugee backgrounds draw on to build social capital and then to explain the relevance of social capital to their educational outcomes. Bonding social capital refers to the ties between already established relationships, for example families and ethnic groups, and bridging social capital to relationships between people of different background and ethnicity (Putnam, 2000; Walseth, 2008). Putnam placed more value on bridging capital and believed "bonding capital is good for 'getting by', but bridging capital is crucial for 'getting ahead'" (Putnam, 2000, p. 23). The two models of social capital are both fundamental to explaining the integration of young refugees. According to Strang and Ager (2010), when young refugees develop bonding social capital, they gain confidence and self-worth, which facilitates the building of bridging capital. Bridging capital is fundamental to building the navigational capacity of young refugees (Murray, 2010). Social capital as a theory is indeed central to an explanation of the inclusion and empowerment of minority communities and its relevance to educational outcomes among young African students from refugee backgrounds is unpacked in the discussion section.

Review process

This paper draws on Arksey and O'Malley's (2005) five stage framework for conducting scoping reviews to examine the research conducted around African refugees and their educational experiences. The stages of the framework are: (1) identifying the research question; (2) identifying relevant studies; (3) selecting studies; (4) charting the data; (5) collating, summarising, and reporting the results**.**

Identifying the research question

This review was guided by one main and two supporting research questions: 1) what does the literature typically focus on in relation to educational experiences of young African refugees in Australia? 2) What are the key challenges and opportunities identified in the literature? 3) What is

the relevance of social capital to young African refugees' educational outcomes? These questions aim at examining the state of the selected Australian literature on educational access, participation, barriers, opportunities, and outcomes for young African refugees living in Australia.

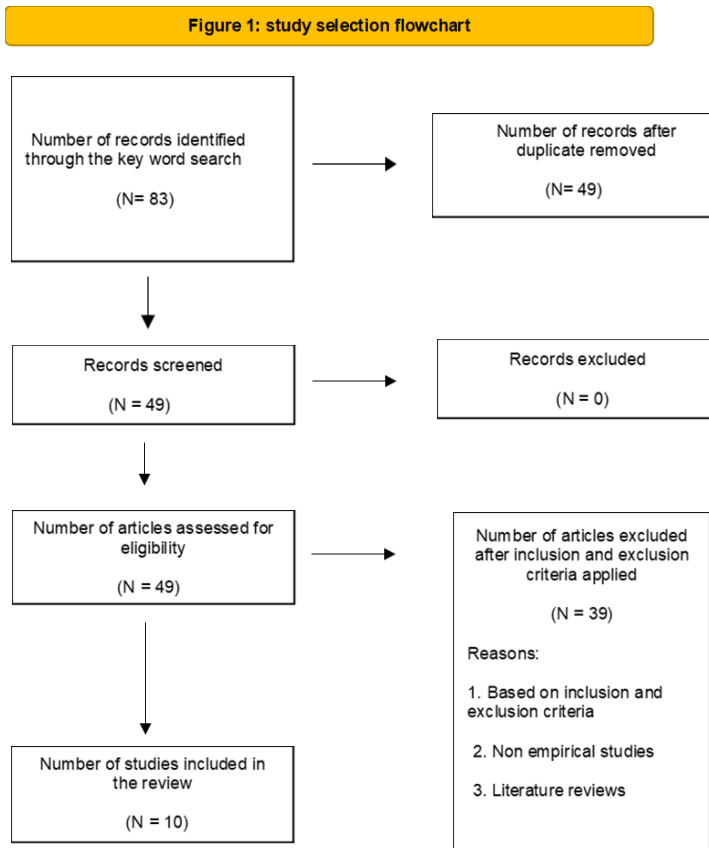**Identifying relevant studies**

To identify relevant articles for this study, a thorough search through EBSCOhost was conducted. The search was limited to studies conducted within the Australian context from June 2001 to June 2021. There were six major databases in EBSCOhost that covered the research topic for this review: Education Resources Information Centre (ERIC), Urban Studies Abstract, Race Relations Abstract, SocINDEX, Education Research Complete and Academic Research Complete. There were six levels of search terms. First was the setting: school*/educate*/education*. The second level was the target group: refugee*/" political refugee*"/"religious refugee*". This was followed by an age category: youth*/" young people*"/teenage*/children*. The fourth level was the country of origin: Africa*/South Sudan*/Ethiopia*. The last but one level included search terms specific to the overall educational experiences: access*/ barriers*/ participation*/ challenges*/ resilience*/experiences*. Finally, the search was focussed on studies conducted in Australia*.

Study selection

The initial Boolean phrase search with the key terms from the six databases identified 83 publications, from which 10 articles were selected for review. The selection strategy followed recommendations offered in the PRISMA statement – Preferred Reporting Items for Systematic reviews and Meta-Analysis (Moher et al., 2009). A summary of the selection process can be found below in Figure 1. Qualitative studies that explored experiences of refugee students in Australia was the central focus. Based on the research questions that guided this review, the search terms were kept broad to ensure all relevant publications were captured. All duplicates were removed. Abstracts of remaining articles were read, and inclusion and exclusion criteria were developed and applied. Inclusion criteria included: a) peer review or scholarly journal b) publication from June 2001 to June 2021 c) publications in English d) articles specifically about African students from refugee backgrounds e) studies conducted within the Australian context f) either qualitative or a mix of qualitative and quantitative studies.

Non-English publications, studies published earlier than June 2001 and later than June 2021 were removed. Conference papers, non-peer reviewed journals and studies outside the scope of Australian literature were also excluded, as, because of time constraints, were books. Purely quantitative studies were also excluded because they did not provide information on first-hand experience by study participants. After inclusion and exclusion criteria were applied, ten articles were eligible for the review. The next stage was to read the full articles to encapsulate the full scope of the literature (Badger et al., 2000).

Figure 1. Study selection flow chart

Figure 1: study selection flowchart

Number of records identified through the key word search

(N= 83)

Number of records after duplicate removed

(N= 49)

Records screened

(N = 49)

Records excluded

(N = 0)

Number of articles assessed for eligibility

(N = 49)

Number of articles excluded after inclusion and exclusion criteria applied

(N = 39)

Reasons:

1. Based on inclusion and exclusion criteria

2. Non empirical studies

3. Literature reviews

Number of studies included in the review

(N = 10)

Charting the data

This stage recorded specific and general information about the study. Information on author, year, methods and whether educational experiences were discussed was recorded in a chart. All studies included in the review explored educational experiences of students, teachers, or community workers. More than half of the studies were purely qualitative, while three studies included a mixed method of both qualitative and quantitative. The oldest study in this review was published in 2008. The review also included current studies in 2021. See Table 1 following.

Table 1 Summary of Data Charting

Author / year	Method	Country specified?	Experiences discussed	Sample	Age	Gender
De Anstiss et al 2019	Mixed	No	Yes	Yes	Yes	No
Dooley et al 2011	Qualitative	Yes - more than one	Yes	Yes	Yes	No
Earnest et al 2010	Qualitative	Yes - more than one	Yes	Yes	No	Yes
Harris & Marlowe 2011	Qualitative	No	Yes	Yes	No	No
Major et al 2013	Qualitative	Yes - One	Yes	Yes	Yes	Yes
Matthews 2008	Mixed	No	Yes	Yes	No	No
Molla 2020	Mixed	Yes - more than one	Yes	No	No	No
Molla 2021	Qualitative	No	Yes	Yes	Yes	Yes
Naidoo 2009	Qualitative	No	Yes			
Oliver et al 2009	Qualitative	No	Yes	Yes	No	No

Collating, summarising, reporting the results

The final stage involved summarising and presenting findings from collated data, outlining the main elements related to the experiences of education. Before presenting the results of this review, it is important to note the variables used in the selected papers, including country of origin, age and gender. Studies were based on sample sizes ranging from eight to 117

participants. Multiple samples were employed: students, parents, community, and youth workers. Six of the ten papers reviewed did not report on the specific country of origin; three reported more than one; and only one study was conducted on one specific African country. Most of the literature in the review did not provide the age composition and gender of participants. General information such as teenagers, adolescent, young people, youth were used. See Table 1 above.

Analysis of key findings

The research consistently focused on persistent academic barriers faced by refugee students from Africa. Most studies discuss the impact of literacy skills on overall educational experience. A significant finding from the review indicates students experience racism and pressure from family members. Another critical theme to emerge from the studies is the dissatisfaction of students, parents, and teachers with the placement of students by age, without considering literacy skills and prior learning. Notwithstanding these challenges, the review also found African students from refugee backgrounds value education. The evidence in this review indicates that African refugee students see education as a beacon of hope and that building their social networks increases their chances of educational achievement.

Key challenges: literacy skills

Inadequate literacy skills were seen as the main impediment to educational access, participation, and achievement among African students from refugee backgrounds. It must be noted that the Australian government has humanitarian programs that support the settlement and educational needs of refugee students. For instance, refugees have access to Intensive English language programs for up to 12months (FaHCSIA, 2012). This service is, however, offered on arrival through the Humanitarian Settlement Program (HSP). de Anstiss et al. (2019) presented evidence that students spent up to 12 months in English language centres but were still unprepared to transition to mainstream schools. This can partly be attributed to the fact that there is no distinction made between the needs of refugees and migrants (de Anstiss et al., 2019). Earlier research had similarly shown that refugee and migrant students were being enrolled in English classes together, with limited consideration of the specific needs of refugee children, or the previous disruptions to education they may have experienced (Miller et al., 2005).

From this, it can be argued that refugee background students have all been subsumed within a bigger umbrella of Non-English-Speaking Background (NESB) students.

Akin to this, as noted, more than half of the studies (n = 6) did not report on specific country of origin of participants. These studies were conducted on students from Africa as a homogenous sample without considering how individual experiences and needs impacted educational outcomes. A few studies (n =3) were however, based on more than one African country, with only one study that examined participants from one specific African country. Although other studies acknowledge homogenising this group could be based on defining obvious common characteristics such as skin colour, limited literacy, and interrupted schooling (Mupenzi, 2018), this can portray a misleading sense of cultural commonality. Some international studies have well criticised the tendency to homogenise refugees from Africa (Khapoya, 2015), yet some researchers homogenise this group without acknowledging important cultural differences (Rutter, 2006). The studies reviewed repeat same error.

This one size fits all approach to research on African students from refugee backgrounds, evident in the literature reviewed, prohibits a deeper dive into the challenging needs of specific individuals or of related groups. Findings from Molla's (2020) study in this review showed that Africans from refugee backgrounds have been identified to have more re-settlement challenges. In a policy context, the Refugee Council of Australia (RCOA, 2019) posits that if these cohorts of refugees are targeted using effective and tailored services, it will reduce the pressure on some social services, including Intensive English classes.

This argument is consistent with evidence from other studies that suggest that the educational needs of refugee students are rarely targeted using a specific policy at the national level (Sidhu & Taylor, 2007). Two studies from the review emphasised that refugee students from Africa exited intensive language schools with relatively low literacy skills (Dooley & Thangaperumal, 2011; Oliver et al., 2009). Olive et al. (2009) found that participants expressed the need to extend the time for intensive language schools to acquire skills and become familiar with the Australian education system before transitioning to mainstream schools. These scholars argue that young African refugees develop basic interpersonal communication skills faster than academic skills and it should not be assumed that their oral fluency is enough to access and fully participate in Australian schools. This suggests

that it takes more than twelve months of intensive English program to develop academic literacy skills, which is fundamental to educational achievement, and implies that African students from refugee background need extra literacy support beyond the twelve months Intensive English period.

Differences in accent was also recorded as a challenge among African students from refugee backgrounds. Two studies (Dooley & Thangaperumal, 2011; Earnest et al., 2010) found that students struggled to understand native English speakers because of how fast they communicated. Dooley and Thangaperumal (2011) emphasised how participants in their study were laughed at because they could not speak and respond in the same way as their teacher. Although six studies (de Anstiss et al., 2019; Dooley & Thangaperumal, 2011; Earnest et al., 2010; Harris & Marlowe, 2011; Matthews, 2008; Oliver et al., 2009) presented evidence on literacy challenges and how African refugee students struggle academically, Earnest et al. (2010) added that literacy skills and students' struggle with accents impeded on their overall educational access and participation. Findings from Earnest et al. (2010) suggest that African students from refugee backgrounds were not expressive in class and chose to remain quiet for fear of being ridiculed due to their English proficiency skill or accent. This explains the finding from Oliver et al. (2009) where teachers revealed a belief that many African refugee students do not get support they require because they try to hide. This notwithstanding, Earnest et al. (2010) argues that some student participants were mostly not aware of support services and those that were aware, found it culturally inappropriate.

Pressure from family members

Pressure from family was one of the prevalent challenges recorded across the dataset. These pressures have been categorised into three themes: emotional and navigational; financial; and academic. Four articles (de Anstiss et al., 2019; Harris & Marlowe, 2011; Molla, 2020; Naidoo, 2009) found family pressure negatively impacted on student's overall academic performance. The study by de Anstiss et al. (2019), revealed how the family members of participants continue to struggle with trauma from war, including loss of loved ones and property. The authors argue that student participants in the study often had to provide emotional support at the expense of their own needs. In addition, students revealed how their support went beyond emotional to supporting family members navigate their new social context,

such as accessing social services, medical appointments or interpreting for them. This led to participants having less time to dedicate to their educational needs such as homework. Financial pressure also posed a significant challenge to many. Participants who lost parents to war expressed how they became a parental replacement to their younger siblings, forcing them to work more hours to financially support younger family members, including family overseas, which puts a strain on their education (de Anstiss et al., 2019; Harris & Marlowe, 2011). Similarly, in other studies King and Owens (2018) found that financial remittances to family members overseas by refugees from Africa was an obligation. Findings from this study revealed that a regular financial contribution overseas was highly enforced and failure to remit funds means family members will starve.

This review showed that academic pressure stemmed from family expectations for their children to excel. Harris and Marlowe's (2011) study found that male participants faced more academic pressure than their female counterparts. Harris and Marlowe's (2011) study suggests that males in African society are often considered breadwinners of the family and are expected to perform academically, land a good job and take care of the family. In the same study, these two authors argue that half of teacher participants indicated that pressure from family members adversely impacted on students' learning. In their study, a female student recounts how her home does not provide conducive environment for study. Although these findings do not represent the general case for all African students from refugee backgrounds, a review of the study by these two authors highlights some pressures from family that these students experience and how they contribute to their overall academic underachievement. While the studies reviewed did not suggest interventions on all categories of family pressure, Harris and Marlowe (2011) and Naidoo (2009) found that extra non-compulsory tutoring and after school homework support are fundamental to supporting these students who struggle due to some of these challenges.

Racism

In this review, four studies (de Anstiss et al., 2019; Harris & Marlowe, 2011; Matthews, 2008; Molla, 2021) found students from refugee backgrounds experienced varied forms of racism, discrimination, and vilification. One study, Matthews (2008), recorded how two young white girls taking a stroll stopped abruptly upon seeing two tall African boys in their loose clothes. This author described how the two girls slowly turned

back and went ahead at some distance. In other literature, scholars have asserted that young African refugees in Australia have come under racial attacks from the police, the media and in schools (Windle, 2008; Windle & Miller, 2013). While racism in Australia is prohibited under the Racial Discrimination Act (1975), some other scholars, including Markus (2016) and Halse (2017), argue that everyday racism is commonly experienced by young African students from refugee backgrounds and is widespread in Australian education settings (Halse, 2017).

Molla (2020) argues that racism puts stress on the young African refugee and hinders their social engagement and learning abilities. Racism in schools has been recorded as a challenge to academic success and social integration (de Anstiss et al., 2019; Halse, 2017; Harris & Marlowe, 2011; Matthews, 2008; Molla, 2020; Stratton, 2006). Although the Racial Discrimination Act 1975 is enforced and scholars have documented how racism impedes academic achievement, it is hard to say the experience of racism by young African refugees will completely be eradicated from the Australian community and educational institutions. One adverse effect of racism is the academic stress African students from refugee backgrounds experience. Harris and Marlowe (2011) found that students are often under pressure to debunk the dominant stereotype about African refugees' academic failure and underachievement, to prove they are resilient and can succeed academically. This suggests there is the need to promote positive image and cultural awareness in schools for teachers, school leaders and students (de Anstiss et al., 2019).

Age placement of students

In Australia, students are placed in grades based on age eligibility. Two studies in this review (Naidoo, 2009; Oliver et al., 2009) found this to be a challenge for African students from refugee backgrounds. These studies contend that students were placed in grades based on their age, which was often higher than their academic competence. Teachers in the study highlighted how this challenge affected not only the student but teachers as they struggled to make students understand content which was beyond their abilities. Oliver et al. (2009) argues parents' disappointment in the Australian education system. Parents in their study noted that, unlike Africa, students in Australia are promoted based on age and this did not favour students from refugee backgrounds, who have experienced interrupted schooling or have no prior formal education.

Although these studies do not establish a relationship between limited literacy skills and the challenge teachers and students experience with age placement, I argue that the challenge with language acquisition by African students from refugee backgrounds shown in this review is exacerbated by age placement. According to the Department of Immigration and Multicultural Affairs (2003), language competence is fundamental and considered a key indicator to successful resettlement. When students exit intensive English programs with low literacy skills, they are more likely to experience further academic challenge when placed in grades higher than their academic competence. From this review, it is critical to develop a holistic national policy framework that is specific to the placement of students from refugee backgrounds. At the institution level, Earnest et al. (2010) suggest under-prepared students need to have a more targeted induction to make them ready for any future academic challenges.

Opportunities: commitment to education

African students from refugee backgrounds come from countries that are characterised by war and protracted conflicts (Lischer, 2014). They arrive in Australia with hopes and aspirations. Four studies in this review (Matthews, 2008; Molla, 2021; Naidoo, 2009; Oliver et al., 2009) recorded how refugee students from Africa value education and their commitment to study to make their dreams materialise. These studies found that participants were ready to learn, gain a university degree, become professionals like doctors and serve the community. The enthusiasm to achieve future goals was evident in the study by Molla (2021) in which a participant recounts how their educational challenges from country of origin, through to transit country and in Australia, shaped their understanding and made them determined to achieve educational success. Similarly, Naidoo (2009) found that teachers reiterated the importance African refugee students place on education, which the teachers suggest makes it quicker for the students to adopt Australian school culture.

Social networks

Studies in this review suggest some factors that contribute to positive educational outcome. In one of the studies, Major et al. (2013) presented evidence of the relationship between participants' social capital and educational attainment. In their study, the authors found that family, friends and location and community were important factors that enabled participants

to build their social capital. The study showed that connection with family and friends increased participants' social networks and their chances of getting support. Close networks such as families provided emotional support, thereby building bonding social capital. On the other hand, friends from heterogenous groups such as school, church or sports enabled participants to access support outside their immediate family. Findings from Major et al.'s (2013) study suggested that bonding network helped participants to build their bridging social capital which allowed them to connect with the wider Australian community. Evidence from the findings further shows that regional location played a significant role in building participants' social capital. In smaller regional towns, participants could easily access and participate in activities, and build their confidence and self-worth which contributed to their overall educational attainment. Major et al. (2013) however, argues that these out-of-school networks in rural communities may not offer the same opportunities to students from refugee backgrounds in Africa in urban areas.

Few authors in this review shifted attention away from the challenges African students from refugee backgrounds experience and focussed on factors that support their educational achievement. There is a growing body of research about these cohorts of refugees that have documented academic and non-academic challenges, including Anselme & Hands (2010) and Earnest et al. (2007), and in this review Harris & Marlowe (2011) and Oliver et al. (2009). Although these challenges have been acknowledged and recorded, few studies in this review, such as (Major et al., 2013),take a strength-based approach to examine their educational resilience. From this, one can argue that African students from refugee backgrounds have challenges, but this does not mean they are less intelligent. They can receive higher returns on education when given the support, as evident in the findings of Major et al. (2013).

Discussion: social capital and educational outcomes

The review found that participants in the study by Major et al. (2013) were able to draw on out-of-school resources to build on their bonding and bridging capital. The study suggests family, friends and location supported participants to build their social capital.

Family was identified as a strong enabler for building bonding capital in this review. Major et al. (2013) found that participants received emotional and material support from their strong ties with close and extended families.

In addition, the study highlighted how family members supported newly arrived refugees to navigate and access services, including housing. The review also found that connections with friends significantly contributed to the building of both bonding and bridging capital of participants. The confidence and self-worth through bonding capital helped participants to bridge their social network with friends of different background (Major et al., 2013). Participants developed friendship network through the school, church, and sports. The study concluded that participants' association with people of dissimilar interests opened opportunities to access support which contributed to their overall success. This finding is consistent with Strang and Ager's (2010) study which suggests the importance of bonding capital goes beyond emotional support to providing useful information and resources that help in overall integration.

However, this does not suggest all African refugee students have access and strong ties with family and friends. This review found that participants provided emotional and navigational support to family members, instead of vice versa (de Anstiss et al., 2019). Findings from the review also show that participants found making friends with Australian students challenging because of limited literacy skills and the fear of being ridiculed (Earnest et al., 2010). This is not different from a study by Uptin et al. (2013 p.130) who adds that the obvious difference in African refugee students mark them as 'other' and makes it challenging to find friendship with Australian students, who often position them as 'unworthy of friendship'. Examples of instances recorded in these scholarships pose a challenge to students to build social capital. Although these social connections can create opportunities for African students from refugee backgrounds to build their social capital, some social factors as seen in the aforementioned studies do not allow these young students to fully explore the available resources to their advantage.

In other studies, Coburn (2000) contends that bridging social capital is not freely accessible to the minority group in an unequal society. According to Coburn (2000), inequalities in society reflect capitalism and vice versa and as reduce the level of social trust and cohesion. Akin to this, Uslaner (2000) argues that if there is a link between trust and inequality, people from minority groups in terms of power have less reason to trust and so the fight against inequality is a part of the solution to building successful social capital. Leonardi et al. (2001) in a study of Italian democracy emphasised that distrust and negative experiences of bridging capital in unequal societies forces people to turn to family, making bonding capital not

a luxury but a need. Evidence in these studies illuminates the findings from the review on the challenges some African students from refugee backgrounds experience in building their bridging capital in Australian schools. Putnam's work on bridging and bonding social capital has been criticised for disregarding how power relations and social structures affect the overall building of such capital. This suggests that, for African students from refugee backgrounds to successfully develop social capital, there is an urgent need to focus attention on reducing social inequalities in schools and communities.

Under the circumstances discussed above, one can argue that diverse social networks sometimes become a challenge to building social capital (Gelderblom, 2018). Social networks do not become the ultimate factor for developing social capital because, sometimes, they are unlikely to form (Gelderblom, 2018). Although Morrow (2004) demonstrates how social connections, particularly friendship, makes young people feel a sense of belonging in schools and communities and emphasises the significance of social capital for young people, there is a need for collective approach to enhancing school-based mechanisms that encourage the active use of social capital by African students from refugee backgrounds. Schools have the power to either facilitate or hinder the building of social capital by students from minority groups, including refugees (Ndhlovu, 2009). In a school with predominantly Anglo-Australian students, visibly black students require social network systems that can make them feel a sense of belonging (Wilkinson & Langat, 2012). This is more because positive educational outcome or vice- versa for African students from refugee backgrounds often depends on the social networks they can identify and the amount of social capital they are able to build both in and out of school (Langat et al., 2019). It is, therefore, important to note that social capital should not only be developed from bottom up but be supported from the top down (Newton, 1997). This suggests that the provision and availability of social networks such as family and friends at school, church or sports are not enough to build successful social capital. Location was one significant factor uncovered in this review that could bolster the development of social capital among participants.

A study by Beaudoin & Thorson (2004) suggests that rural communities tend to have increased level of social networks, social integration and attachment compared to urban communities. Similarly, Sampson's (1988) study found that urban centres had adverse associations

with local attachment and networks at both the community and individual levels. These studies suggest that location is crucial to how individuals develop social networks and build social capital. Burt (2004) further adds that individuals have advantage when they belong to more than one group in a particular location. Consistent with findings from this review, Major et al. (2013) found that regional location played an important role in building participants' social capital. This was mainly because participants were in relatively small regional towns where access and participation in school, church, sports, and the community was easier. Evidence from the review further adds that student participants had the freedom to visit and socialise with friends while staying close to home. Participants belonged to different social networks – church, school, sports, family - which contributed to their overall success. Overall, Putnam's concepts of bridging and bonding social capital are fundamental and provide a better understanding of the various social networks that students can draw on to access support. The clear distinction between bonding (family) and bridging (friends at school, church, community, sports) offers opportunities to students from minority groups to leverage support to reduce academic underachievement. However, this does not necessarily suggest that African students from refugee backgrounds can effectively explore these social networks to their benefit on their own.

Limitation of review

This review analysed what researchers have focussed on in terms of educational experiences of students from refugee backgrounds. This review was discussed from Putnam's social capital theoretical lens and did not consider the influence of power relations and social structures in building social capital. Findings from the review cannot be generalised because review was limited to studies published within the last two decades. Although the review looked at contemporary studies, the search was limited to only six databases and 10 journal articles due to time constraints. In addition, the review identified only peer reviewed journal and did not include books and non-scholarly articles such as grey literature as these were outside the scope of the paper. Also, majority of the literature reviewed were not specific to a particular African country, as a result the dataset was analysed in general without consideration the experiences from specific African country.

Conclusion

Much of the literature in this review focusses on educational challenges faced by refugees from African backgrounds when navigating Australian education, with literacy skills a prevalent challenge. Some of the literature also highlighted how refugee students from Africa value education. A growing body of studies are examining out-of-school resources that contribute to refugee students from Africa's educational outcome. The review found out-of-school resources and social networks help build social capital in rural communities but may not offer the same opportunities to students in urban areas. The findings in the review also suggest that although social connections create possible opportunities for African students from refugee backgrounds to build social capital, factors such as literacy skills, family pressure and social inequalities do not allow these young students to fully explore the available resources to their advantage. This means emphasis on a student's individual agency alone is not enough to build social capital. This calls for an urgent need for explicit attention to school-based mechanisms that enhance active use of social capital by students from minority groups.

Acknowledgments

Reference List

Adkins, L. (2005). Social capital: The anatomy of a troubled concept. *Feminist Theory*, *6*(2), 195-211.

Anselme, M. L., & Hands, C. (2010). Access to secondary and tertiary education for all refugees: Steps and challenges to overcome. *Refuge: Canada's Journal on Refugees*, *27*(2), 89-96.

Arksey, H., & O'Malley, L. (2005). Scoping studies: Towards a methodological framework. *International Journal of Social Research Methodology*, *8*(1), 19-32.

Badger, D., Nursten, J., Williams, P., & Woodward, M. (2000). Should all literature reviews be systematic? *Evaluation & Research in Education*, *14*(3-4), 220-230.

Beaudoin, C. E., & Thorson, E. (2004). Social capital in rural and urban communities: Testing differences in media effects and models. Journalism & Mass Communication Quarterly, 81(2), 378-399.

Burt, R. S. (2004). Structural holes and good ideas. *American Journal of Sociology*, *110*(2), 349-399.

Coburn, D. (2000). Income inequality, social cohesion and the health status of populations: The role of neo-liberalism. *Social Science & Medicine*, *51*(1), 135-146.

Coleman, J. S. (1988). Social capital in the creation of human capital. *American Journal of Sociology*, *94*, S95-S120.

*de Anstiss, H., Savelsberg, H., & Ziaian, T. (2019). Relationships in a new country: A qualitative study of the social connections of refugee youth resettled in South Australia. *Journal of Youth Studies*, *22*(3), 346-362. https://doi.org/10.1080/13676261.2018.1508824

*Dooley, K. T., & Thangaperumal, P. (2011). Pedagogy and participation: Literacy education for low-literate refugee students of African origin in a western school system. *Language and Education*, *25*(5), 385-397.

Earnest, J., Housen, T., & Gillieatt, S. (2007). A new cohort of refugee students in Perth: Challenges for students and educators. *In Student Engagement. Proceedings of the 16th Annual Teaching Learning Forum* (pp. 30-31). The University of Western Australia.

*Earnest, J., Joyce, A., De Mori, G., & Silvagni, G. (2010). Are universities responding to the needs of students from refugee backgrounds? *Australian Journal of Education*, *54*(2), 155-174.

Earnest, J., Mansi, R., Bayati, S., Earnest, J., & Thompson, S. (2015). Resettlement experiences and resilience in refugee youth in Perth, Western Australia*. BMC Research notes*, 8(1), 1-10. https://doi.org/10.1186/s13104-015-1208-7.

Eng, S. (2009). Social capital and academic achievement among children in Cambodia: A close look at family. *Unpublished PhD dissertation. Texas Tech University*.

FaHCSIA. (2012). *FaHCSIA Annual Report* https://www.dss.gov.au/about-the-department/publications-articles/corporate-publications/annual-reports/fahcsia-annual-report-2011-2012.

Gelderblom, D. (2018). The limits to bridging social capital: Power, social context and the theory of Robert Putnam. *The Sociological Review*

(Keele), 66(6), 1309-1324.
https://doi.org/10.1177/0038026118765360

Grandi, F. (2016). *Missing Out: Refugee Education in Crisis*. United
Nations High Commissioner for Refugees.
https://www.unhcr.org/publications/education/57d9d01d0/
missing-refugee-education-crisis.html.

Halse, C. (2017). Responsibility for racism in the everyday talk of
secondary students. *Discourse: Studies in the Cultural Politics of
Education*, *38*(1), 2-15.

Hancock, P. (2009). Recent African refugees to Australia: Analysis of
current refugee services, a case study from Western Australia.
International Journal of Psychological Studies, *1*(2), 10-17.

*Harris, V., & Marlowe, J. (2011). Hard Yards and High Hopes: The
Educational Challenges of African Refugee University Students in
Australia. *International Journal of Teaching and Learning in
Higher Education*, *23*(2), 186-196.

Harvey, A., Burnheim, C., & Brett, M. (2016). *Student equity in Australian
higher education*. Springer.

Khapoya, V. (2015). *The African Experience*. Routledge.

King, S. M., & Owens, L. (2018). Great expectations: African youth from
refugee backgrounds and the transition to university. In *University
pathway programs: Local responses within a growing global
trend* (pp. 67-84). Springer.

Langat, K., Major, J., & Wilkinson, J. (2019). Refugee Young People (Re)
forming Identities: The Role of Social Networks. International
Education Journal: Comparative Perspectives, 18(3), 74-87.

Lee, R., & Cheung, S. Y. (2022). Refugee Children in Australia:
Wellbeing and Integration. In J. Baxter, J. Lam, J. Povey, R. Lee,
& S. R. Zubrick (Eds.), Family Dynamics over the Life Course:
Foundations, Turning Points and Outcomes (pp. 71-96). Springer
International Publishing. https://doi.org/10.1007/978-3-031-
12224-8_5.

Leonardi, R., Nanetti, R. Y., & Putnam, R. D. (2001). *Making democracy
work: Civic traditions in modern Italy*. Princeton university press
Princeton, NJ.

Lischer, S. (2014). Conflict and crisis induced displacement. *The Oxford
Handbook of Refugee and Forced Migration Studies.* Oxford
University Press, Oxford, 317-329.

*Major, J., Wilkinson, J., Langat, K., & Santoro, N. (2013). Sudanese young people of refugee background in rural and regional Australia: Social capital and education success. *Australian and International Journal of Rural Education*, *23*(3), 95-105.

Markus, A. B. (2016). *Australians today: The Australia@ 2015 Scanlon foundation survey*. ACJC Monash University.

*Matthews, J. (2008). Schooling and settlement: Refugee education in Australia. *International Studies in Sociology of Education*, *18*(1), 31-45. https://doi.org/10.1080/09620210802195947

McBrien, J. L. (2005). Educational needs and barriers for refugee students in the United States: A review of the literature. *Review of Educational Research*, *75*(3), 329-364. https://doi.org/10.3102/00346543075003329

McDonald, B., Gifford, S., Webster, K., Wiseman, J., & Casey, S. (2008). Refugee resettlement in regional and rural Victoria: Impacts and policy issues. *Victorian Health Promotion Foundation*.

Miller, J., Mitchell, J., & Brown, J. (2005). African refugees with interrupted schooling in the high school mainstream: Dilemmas for teachers. *Prospect*, 20(2), 19-33.

Moher, D., Liberati, A., Tetzlaff, J., Altman, D. G., & Group, P. (2009). Preferred reporting items for systematic reviews and meta-analyses: The PRISMA statement. *PLoS Medicine*, *6*(7), e1000097.

*Molla, T. (2020). African refugee youth in Australia: Higher education participation. *Higher Education Research & Development*, 1-15.

*Molla, T. (2021). Educational aspirations and experiences of refugee-background African youth in Australia: A case study. *International Journal of Inclusive Education*, *25*(8), 877-895.

Morrow, V. (2004). Networks and neighbourhoods: Children's accounts of friendship, family and place. *Social networks and social exclusion: sociological and policy issues*, 50-71.

Mupenzi, A. (2018). Educational resilience and experiences of African students with a refugee background in Australian tertiary education. *Australasian Review of African Studies*, *39*(2), 122-150. https://doi.org/10.22160/22035184/aras-2018-39-2/122-150

Murray, K. E. (2010). Sudanese Perspectives on Resettlement in Australia. *Journal of Pacific Rim Psychology*, *4*(1), 30-43. https://doi.org/10.1375/prp.4.1.30

*Naidoo, L. (2009). Developing social inclusion through after-school homework tutoring: a study of African refugee students in Greater Western Sydney. *British Journal of Sociology of Education*, *30*(3), 261-273.

Naidoo, L., Wilkinson, J., Langat, K., Adoniou, M., Cunneen, R., & Bolger, D. (2015). *Case study report: Supporting school-university pathways for refugee students' access and participation in tertiary education*. Research report.

Newton, K. (1997). Social capital and democracy. *American Behavioral Scientist*, *40*(5), 575-586.

Ndhlovu, F. (2009). The limitations of language and nationality as prime markers of African diaspora identities in the state of Victoria. African Identities, 7(1), 17-32.

*Oliver, R., Haig, Y., & Grote, E. (2009). Addressing the educational challenges faced by African refugee background students: Perceptions of West Australian stakeholders. *TESOL in Context*, *19*(1), 23-38.

Pishghadam, R., & Zabihi, R. (2011). Parental education and social and cultural capital in academic achievement. *International Journal of English Linguistics*, *1*(2), 50.

Pittaway, E. E., Bartolomei, L., & Doney, G. (2016). The glue that binds: An exploration of the way resettled refugee communities define and experience social capital. Community Development Journal, 51(3), 401-418.

Putnam, R. D. (2000). *Bowling alone: The collapse and revival of American community*. Simon and Schuster.

Refugee Council of Australia. (2019). *Intake submission on Australia's 2017-2018 refugee and humanitarian program*. https://www.refugeecouncil.org.au/intake-sub-2017-2018/

Rutter, J. (2006). *Refugee children in the UK*. McGraw-Hill Education (UK).

Sampson, R. J. (1988). Local friendship ties and community attachment in mass society: A multilevel systemic model. American sociological review, 766-779.

Sidhu, R., & Taylor, S. (2007). Educational provision for refugee youth in Australia: Left to chance? *Journal of Sociology*, *43*(3), 283-300.

Siisiainen, M. (2003). Two concepts of social capital: Bourdieu vs. Putnam. *International J Contemporary Sociology*, *40*(2), 183-204.

Strang, A., & Ager, A. (2010). Refugee integration: Emerging trends and remaining agendas. *Journal of Refugee Studies*, *23*(4), 589-607.

Stratton, J. (2006). Two rescues, one history: Everyday racism in Australia. *Social Identities*, *12*(6), 657-681.

Sullivan, A. (2001). Cultural capital and educational attainment. *Sociology*, *35*(4), 893-912.

Terry, L., Naylor, R., Nguyen, N., & Rizzo, A. (2016). Not there yet: An investigation into the participation of students of refugee backgrounds in the Australian higher education system. *National Center for Student Equity in Higher Education.*

Uptin, J., Wright, J., & Harwood, V. (2016). Finding education: Stories of how young former refugees constituted strategic identities in order to access school. *Race Ethnicity and Education*, *19*(3), 598-617.

Uptin, J., Wright, J., & Harwood, V. (2013). 'It felt like I was a black dot on white paper': Examining young former refugees' experience of entering Australian high schools. The Australian Educational Researcher, 40(1), 125-137.

Uslaner, E. M. (2000). Producing and consuming trust. *Political Science Quarterly*, *115*(4), 569-590.

Walseth, K. (2008). Bridging and bonding social capital in sport—experiences of young women with an immigrant background. *Sport, Education and Society*, *13*(1), 1-17.

Wilkinson, J., & Langat, K. (2012). Exploring educators' practices for African students from refugee backgrounds in an Australian regional high school. *Australasian Review of African Studies,* 33(2), 158-177.

Wilkinson, J., Santoro, N., & Major, J. (2017). Sudanese refugee youth and educational success: The role of church and youth group in supporting cultural and academic adjustment and schooling achievement. *International Journal of Intercultural Relations*, *60*, 210-219. https://doi.org/10.1016/j.ijintrel.2017.04.003

Windle, J. (2008). The racialisation of African youth in Australia. *Social Identities*, *14*(5), 553-566.

Windle, J., & Miller, J. (2013). Marginal integration: The reception of refugee-background students in Australian schools. In *Refugees, Immigrants, and Education in the Global South* (pp. 208-222). Routledge.

BOOK REVIEW

David B. Moore. *Mugabe's Legacy: Coups, Conspiracies and the Conceits of Power in Zimbabwe*. London, Hurst Publishers, 2022.

Mugabe and Zimbabwe's moment in history may be long past, the re-election of Emerson Mnangagwa as the country's president, for example, being barely noticed. Nevertheless, the ongoing tragedy of Zimbabwe, as well as rounds of coups and conspiracies on the continent, give Moore's engaging study a relevance beyond its immediate subject. Antonio Gramsci's notion of interregna and Karl Marx's concept of primitive accumulation weave through Moore's conceptualisation of the coups and conspiracies associated with the former president's political ascendancy, negation and physical demise.

The emergence and subsequent suppression of the Zimbabwe People's Army (ZIPA) is key to Moore's narrative of Mugabe's relationship with power. 1974 was a chaotic year for the Zimbabwe African National Union (ZANU). The liberation struggle stalled as problems associated with frontline logistics, imprisonment and negotiations took their toll on unity. Mutiny, executions, murders and assassinations followed in the wake of the factional strife. Young guerrillas such as Wilfred Mhanda, motivated by ideas of unity and democracy, dodged the disarray and, at the initial behest of the Frontline States, stepped into the military and political vacuum.

The reinspired combatants resumed armed incursions into Rhodesia in early 1975 and soon shattered the white minorities' delusions of a 1,000-year rule. Attempting to forestall the inevitable, later in 1975 the Rhodesians agreed to talks in Geneva. This conference presented Mugabe with an international stage on which he staked his claim to be the political leader of ZANU – the party's founder, Nadinbigni Sithole, had earlier been deposed in a dubious prison coup – and, somewhat more questionably, to also lead the guerrillas. Mugabe's pretence became reality when, after negotiations stalled, his old guard allies, Josiah Tongogara and Solomon Mujuru, rushed back from Geneva to establish their control over the camps in Mozambique, and to suppress ZIPA. Mhanda and 50 key ZIPA leaders were arrested and incarcerated for the duration of the war.

Bringing down the axe was the ZANU euphemism for the purge of perceived oppositionists within the camps. This reinforced an ongoing pattern of ruthlessly suppressing real or imagined opponents and conspiracies.

When independence arrived in 1980, this cabal were well situated to insert themselves into influential military, political and economic positions. ZANU leaders and functionaries with ambition, contacts and the wherewithal started to position themselves to replace and/or share power and wealth with the existing dominant class. Rivals were excluded; for example, supporters of the Zimbabwe African Peoples Union in Matabeleland and Midlands were murdered and politically marginalised by a genocidal military unit during Operation Gukurahundi in 1982-1987. Many of Mugabe's former opponents in Zimbabwe and Western diplomats stayed quiet about the Gukurahundi massacres, a time when the current President was Minister for state security.

This illustrates the morbidity associated with the interregna, the period between reigns or regimes as an emerging ruling group/ruling class establishes itself over the influence of the *ancien regime* (by suppression or compromise). The process of class formation that occurs during a complicated interregnum, such as in Zimbabwe, can last for generations. Another morbid symptom was the way in which popular demands for democracy and economic redistribution were ignored. Pre-liberation pledges of land and economic justice made by ZANU during the war were forestalled, while many of the economic policies and laws of the former colonial regime were retained.

Consequently, after independence, the capital accumulated through the ongoing dispossession and exploitation of the Shona, Ndebele and other peoples, who in the main laboured on the farms and in industry, remained locked in private hands. Using his liberation credentials to establish a general consent to rule, Mugabe was also adept at switching between being a progressive and a pragmatist, depending on the audience. This is consistent with the support he received from both East and West. Archival evidence reveals that he conversed with US delegations, and to shelter and support his wife while he was in jail, he depended on the former colonial masters in England. As Moore notes, Mugabe would 'forever spout radical rhetoric ranging from Marxist-Leninist Maoism to the "third Chimurenga" and Africanist sovereignty, while for as long as possible easing into the global and regional strictures militating against them'.

Mugabe's rule became even more morbid when the state periodically unleashed repressive 'operations' such as Murambatsvina (Winnowing the chaff) in 2005 and Makavhoterapapi (Account for your vote) in 2008. Realpolitik meant that the ZANU's actual economic project was to integrate Zimbabwe into the global economy, take advantage of opportunities for primitive accumulation, and expropriate as much of that capital as possible. Party connections created economic advantage where it involved access to State resources and revenues. For those well connected to the military high command, the attraction was access to plunder, of the Democratic Republic of the Congo resources, the diamond mines in Eastern Zimbabwe and, when it proved expedient, the farms during the land invasions. Such undertakings generated significant accumulations of capital and, consequently, political and business rivalries between the wealthy individuals and their associated factions. Owners of capital like political and social conditions that favour business opportunities to continue without disruption.

Scenarios where political conceits, particularly those associated with a head of state, interfere with business opportunities and capital accumulation create fertile ground for conspiracies. As Mugabe lost his ability to play off the different centres of power, the ability of his entourage to dissemble the truth about his rule dissolved and the conspiracies became actual as the social consent that underlies political hegemony crumbled. Moore fleshes out the veracity of the various rumours about coups that have swirled around Mugabe. The 2017 'Military Assisted Transition' of 2017 was thus, in one sense, another in a long line of conspiracies and coups. Moore completes the circle when he notes that the justification of the 2017 coup references, albeit inaccurately, previous coup attempts, including the suppression of ZIPA.

In a broader sense this work contextualises a question I often find asked. How did the ideals of the likes of Thomas Sankara, Patrice Lumumba, Amical Cabral, Eduardo Mondlane, Steve Biko, Chris Hani, Wilfred Mhanda and the many unnamed female fighter became something very different at independence? Africa continuing to be the poorest continent on the planet would not have been in any post liberation future they imagined.

As for Zimbabwe, the interregnum continues, with Mugabe's legacy continuing to be a State founded on alternate realities, conceits, conspiracies and coups.

Stephen O'Brien
University of Newcastle