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A response paper prepared for the Comparative Urban Studies Project, Woodrow Wilson International Centre for Scholars and the Fetzer Institute seminar entitled:

‘Community resilience in the twenty-first century’

Using my experiences working with migrant women in inner city Johannesburg, this brief

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raising the awareness of human suffering. While compassion and humanitarianism are important, what these images do is deny refugees any agency, any action contemplated is outside the refugee. As Malkki says, refugees' apparent helplessness and silence calls for the actions of others more powerful (Malkki, 1996).



Kevin Carter, 1994.

These images have been used as examples of how images and discourses shape the ways practitioners and scholars see vulnerable populations. My work with migrant women in

the conceptual frames used to understand displacement and its socio-political and economic implications.

### **In ersec ing iden i ies and reali ies**

One of the issues that my research has revealed is the fact that while refugee women in Johannesburg share many common experiences, their specific social locations determine how well or not they do. Factors such as ethnicity, nationality, gender, sexuality, HIV status, marital status and so on have a bearing on whether they are materially and psychologically better off than others. A single woman with three children for example, may be more vulnerable than a married woman with the same number of children because she has a partner who can assist in supporting the family. A woman who is HIV positive could be more vulnerable than one who is not. One's ethnic affiliations could be a source of support or oppression amongst her community. Women's national origins, and in particular whether they have refugee status or not, could determine their access to state health and other services. These differences are extremely important, because they point to the fact that even amongst people from the same social category, there are varied points of vulnerability which need to be addressed. A one size fits all policy is inadequate in dealing with these differences.

This has a direct bearing on the concept that the response papers have asked us to reflect upon: the notion of *resilience*. Even if we were to adopt the term as more appropriate than others in creating healthy communities, we would need to reflect upon three critical issues. **The first is that resilience cannot be assumed to be present, in equal capacity amongst all individuals in a social group.** The questions who is resilient, how and when are therefore most critical if the term is to be useful. In any group, some will be more resilient than others. Moreover, there exist different forms of resilience amongst different individuals. We therefore need to understand how different community members respond in times of crises – where they draw their strengths from, and where they remain vulnerable.

Secondly, **no matter how resilient an individual or group, he cannot always overcome the structural conditions he face.** Drawing an example from my work experience, no matter how resourceful migrant women are, they alone cannot transform

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