

Symposium | Multicultural Mental Health and Interpreting : [Symposium 91] Navigating Mental Health Systems: Informal Care, Multilingualism and Professional Interpreting

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[Symposium 91] Navigating Mental Health Systems: Informal Care, Multilingualism and Professional Interpreting

Moderator: Mike Mösko (University of Applied Science Magdeburg-Stendal)

[SY-91-03] *'We have been completely immersed in frustration and trauma'*: Ambivalence in informal migrant care systems in South Africa

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This paper explores the everyday experiences and emotional complexities of migrant caregivers in South Africa, who often require care themselves yet continue to support fellow immigrants within their communities. Drawing on rich qualitative data, the study foregrounds the ambivalence and reciprocity within informal care systems in migrant contexts, challenging linear and simplistic conceptions of caregiving roles. The research is part of the international MiM2M (Multilingualism in Migrant Mental Health Care) project, which examines migrant health communication and care across five countries South Africa, Germany, China, Romania, and the Netherlands. Fifteen in-depth, semi-structured interviews were conducted with migrant carers affiliated with People Against Suffering, Oppression, and Poverty (PASSOP), a migrant rights organization in Cape Town. Participants were purposively sampled to reflect a range of caregiving contexts, national backgrounds, and gender identities. Culturally sensitive, trauma-informed methodologies were used to ensure ethical engagement, including multilingual facilitation where needed. Thematic analysis revealed that caregiving within migrant networks is shaped by precarious legal statuses, emotional fatigue, and constrained access to formal health and social services. Participants described feelings of being “completely immersed in frustration and trauma, highlighting how caregiving is both a survival strategy and a source of psychological burden. At the same time, these acts of care challenge dominant narratives that portray migrants as either passive victims or self-reliant achievers. Instead, they reveal complex negotiations of identity, obligation, and solidarity. This paper contributes to broader discussions on care ethics, migration, and social inclusion by highlighting the invisible, yet essential care labour performed by migrants. It calls for more inclusive care and health policies in South Africa that recognize and support the intertwined realities of caregiving and receiving care within migrant communities.