(South) Africa's poor in the time of Covid
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WITS SCHOOL OF GOVERNANCE

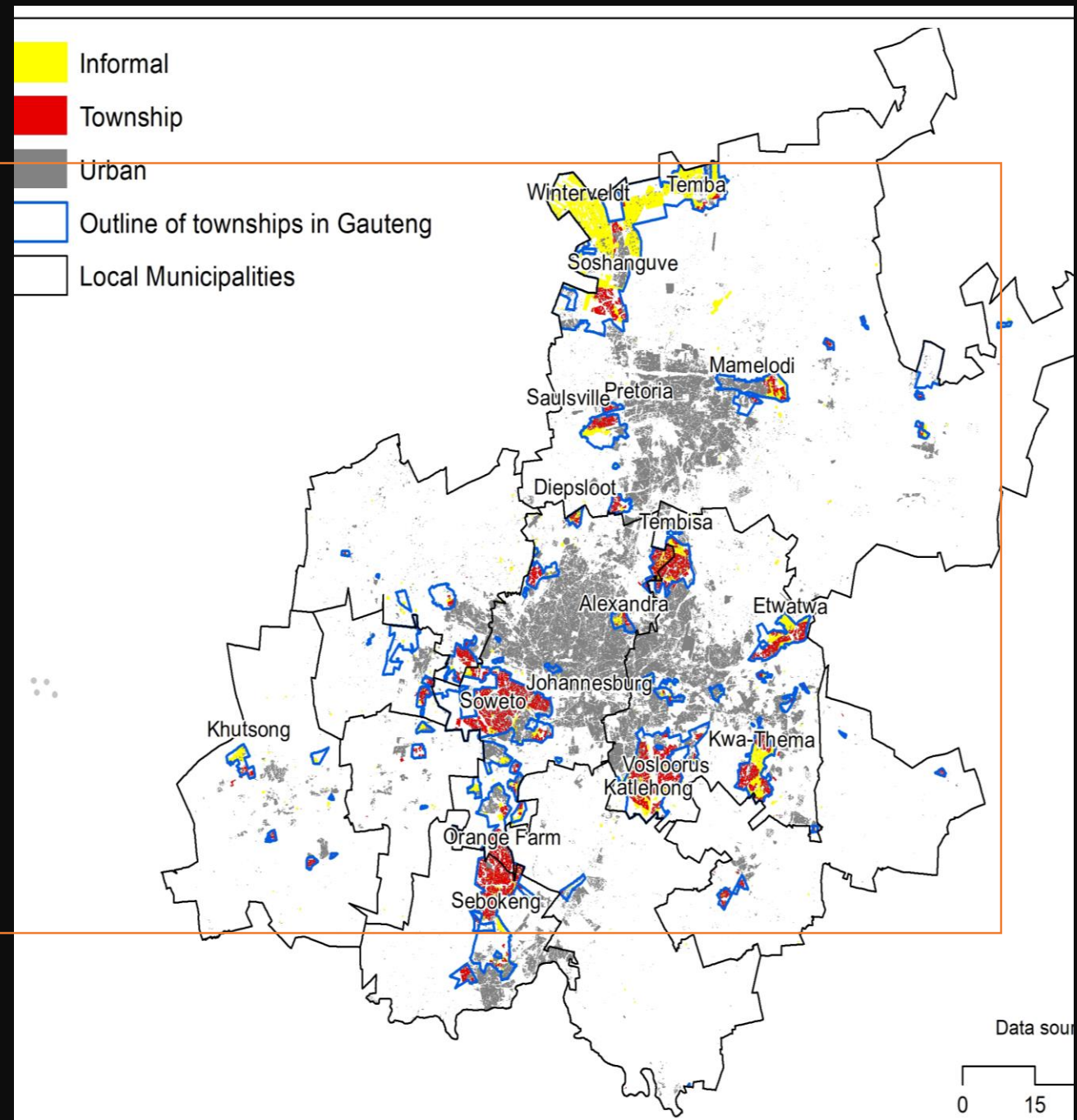SHLC
Centre for Sustainable, Healthy and Learning Cities and Neighbourhoods

Township, informal settlement and urban coverage

- Apartheid created 'townships' to house African, Indian and 'coloured' people, on the periphery and away from both CBD and 'white' suburbs.

- This has been replicated by constructing hundreds of thousands of 'RDP' houses, also set far from economic hubs, increasing costs for the poor.

- Informal settlements have mushroomed since democracy (1994), some have no services at all, others are 'site & service' (very basic needs met)

- 'Slum' is not used in South Africa as a formal urban category/part of everyday speech
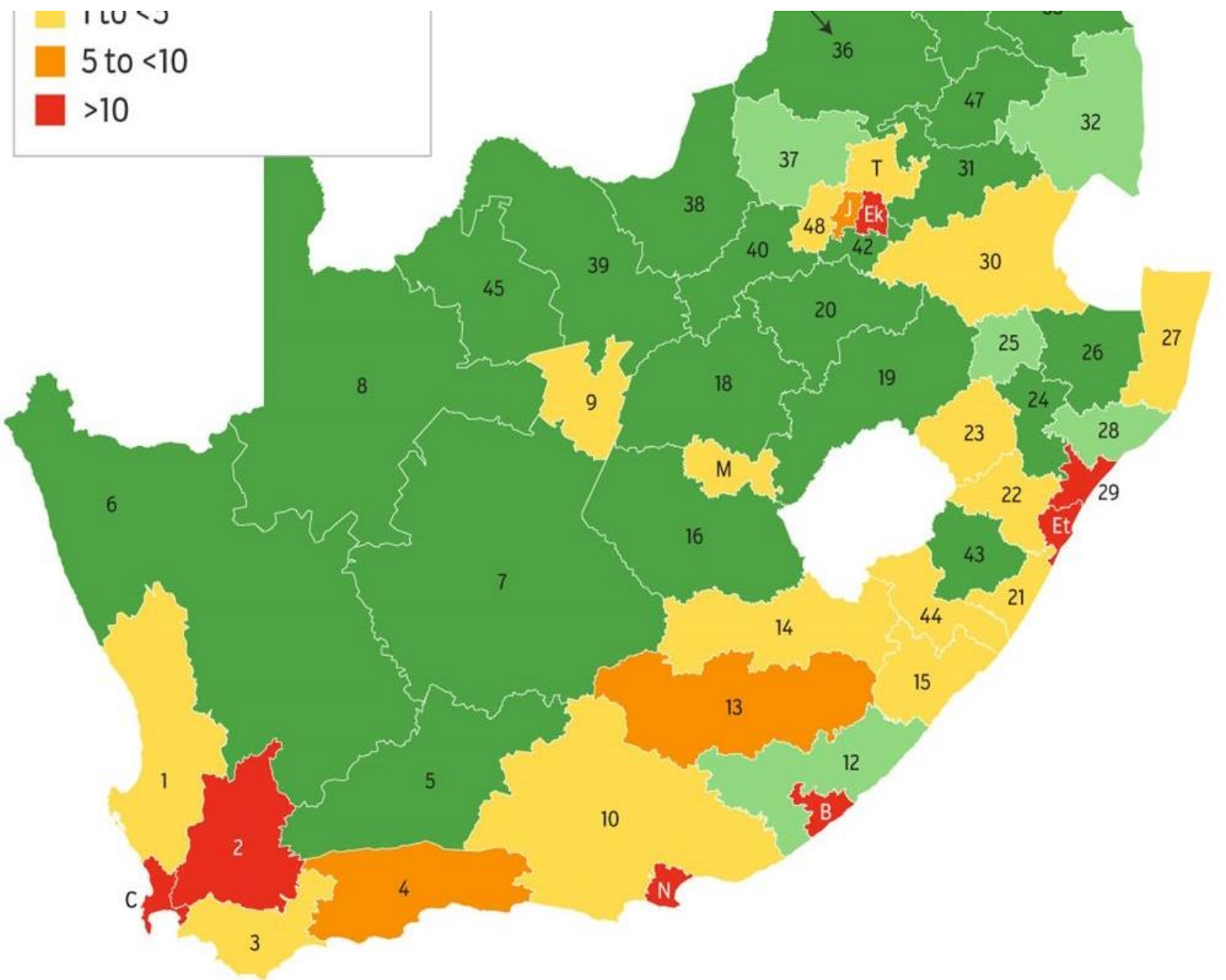
- South Africa is 66% urbanised

Legend:
- Informal (yellow)
- Township (red)
- Urban (grey)
- Outline of townships in Gauteng (blue)
- Local Municipalities (white)

Map labels: Winterveldt, Temba, Soshanguve, Mamelodi, Saulsville, Pretoria, Diepsloot, Tembisa, Alexandra, Etwatwa, Johannesburg, Soweto, Khutsong, Kwa-Thema, Vosloorus, Katlehong, Orange Farm, Sebokeng

Data sour...

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The urban poor

- Important to remember that the poor are not restricted to spaces – 'slums'.

- Informality exists throughout the urban space, meaning that poverty can be found virtually everywhere – informality allows the poor to live closer to work/work opportunities, schools, etc., by entering and integrating in formal spaces.

- Informality is found in the townships (created by apartheid for everyone not white); within the hostels; around them all are informal settlements.

- The city centre has highest densities and many migrants; formerly 'white' suburbs, with rack-tented sub-divided dwelling units now precious footholds in the city. One dwelling unit will often hold multiple households.

- Urban/rural linkages – infection as narrative

- Initial infections were returning South Africans from abroad (and sets up a racialized narrative)

- Covid-19 starts as international to urban; then urban to urban (tourism in W Cape, SA travelers, most go via OR Tambo International – spikes =W Cape metro and Ekurkuleni (surrounding airport)

- Then moves urban to rural – 4 days to 'get home' before lockdown, people travel to rural homesteads, Covid now following them to rural areas.

- Rural to rural – communal traditions, funerals as key communal moments, infections spike – community infections spread rural and urban.

- Will now see rural to urban spread (and vice versa) as lockdown lifts and people begin moving.

- Economy set to open 1 June, and exponential spike expected.

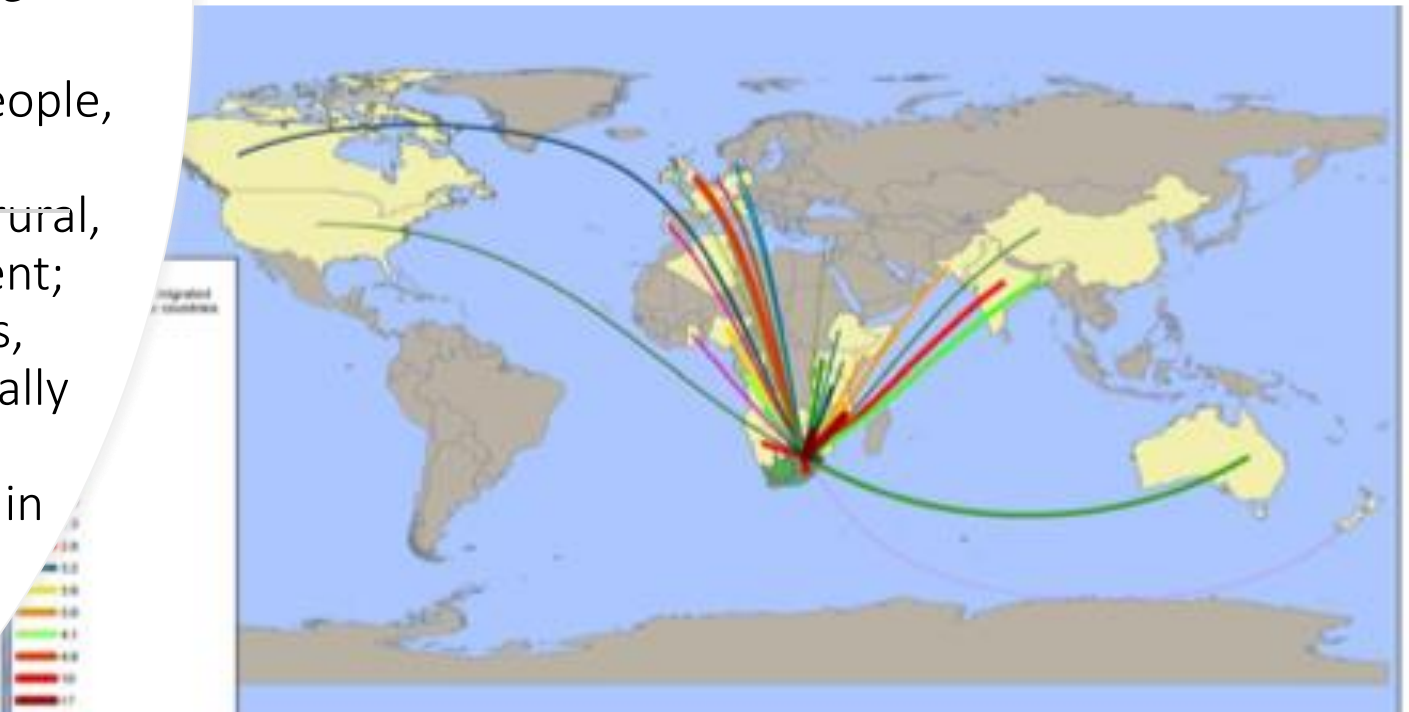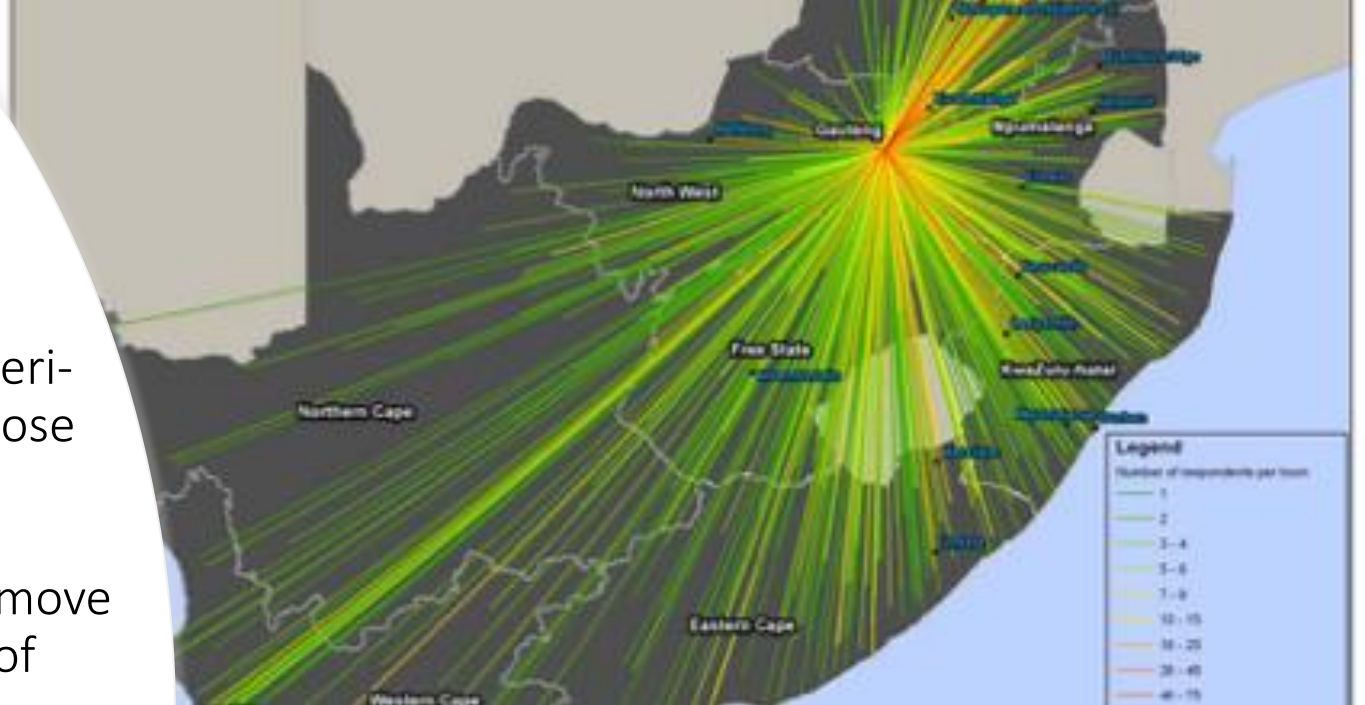| Province	District ID	Municipality	
Eastern Cape	10	Sarah Baartman	1,901
	12	Amathole	0,607
	13	Chris Hani	8,050
	14	Joe Gqabi	1,070

The province grows 2.6%pa due to in-migration

Not all migration is rural/urban, much is rural -> peri-urban, then -> urban informal, then -> urban as close to work as possible (formal or informal)

Peri-urban areas may act as 'springboards' in the move from rural to urban. 2011 Census found that half of Gauteng residents had migrated into the province

You say: "The reciprocal and repetitive flow of people, goods and financial and environmental services (defining urban-rural linkages) between specific rural, peri-urban and urban locations are interdependent; they are the reality of socio-spatial arrangements, creating places with distinct yet interwoven, socially constructed identities."
Will the arrival of potentially infected 'urbanites' in 'home' villages enhance social cohesion – or the reverse, as seeders of Covid?
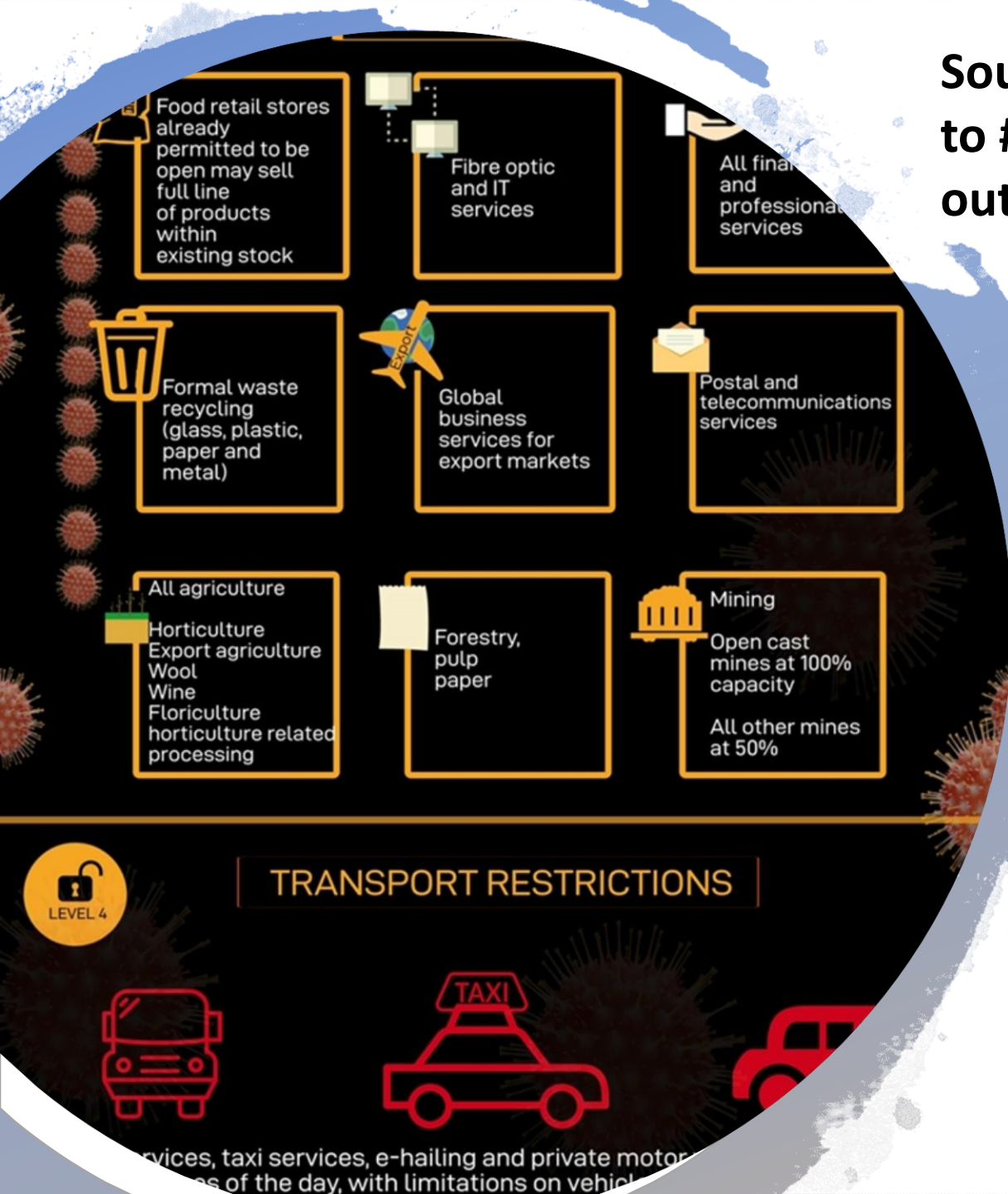
South Africa moved early into a very tight lockdown to #flattenthecurve with 5 stages, but perverse outcomes (and perverse decisions) are concerning

Acute childhood malnutrition now appearing in Soweto hospitals.

National Institute of Communicable Diseases (NICD) reports 48% decline in TB testing since lockdown - because of fear, restrictions on movement and public transport, not availability of healthcare services.

For drug-resistant TB, case-finding and treatment initiation has plummeted to 10-15% of the normal annual figure. Thousands are avoiding health facilities out of fear of Covid-19 - and being harassed by police.

Mobile clinics that provide HIV, TB and contraceptive services have reported a huge drop in clients – possibly because all health services are being associated with Covid-19. (At and around our Hillbrow node, head counts at clinics are down by between 30% and 70%.)

The poor – at the receiving end, again

Marginalised communities in African cities face a double disadvantage

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They live under conditions prone to spreading disease.

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They also occupy spaces where compliance with the law is difficult. Every failure to comply,

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...every violation of an impracticable law or regulation becomes justification for additional

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restrictions and violence

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e.g. 29 women and children arrested in Durban's Cato Manor – for sleeping on the street after being evicted during lockdown.

Starve or social distance?

- Almost 1-million people in Johannesburg, SA's commercial hub, are in need of food aid due to movement restrictions imposed to curb the coronavirus pandemic, according to its mayor.

- Government imposed a hard lockdown on March 27 that closed schools and businesses and only allowed essential workers out of their homes.

- Today, about 300,000 households in Johannesburg require food assistance, mayor Geoff Makhubo said. "As more and more people get unemployed, the incidence of poverty and food insecurity starts to increase. Social distress is something that is real."

- Alcohol ban – good medical argument, but 118,000 jobs lost, and mass illicit trade established, and price extortion (double/triple normal price) so poor HHs spend even more on alcohol – illicit trade will look for new markets in peri-urban/rural areas (ditto tobacco ban)
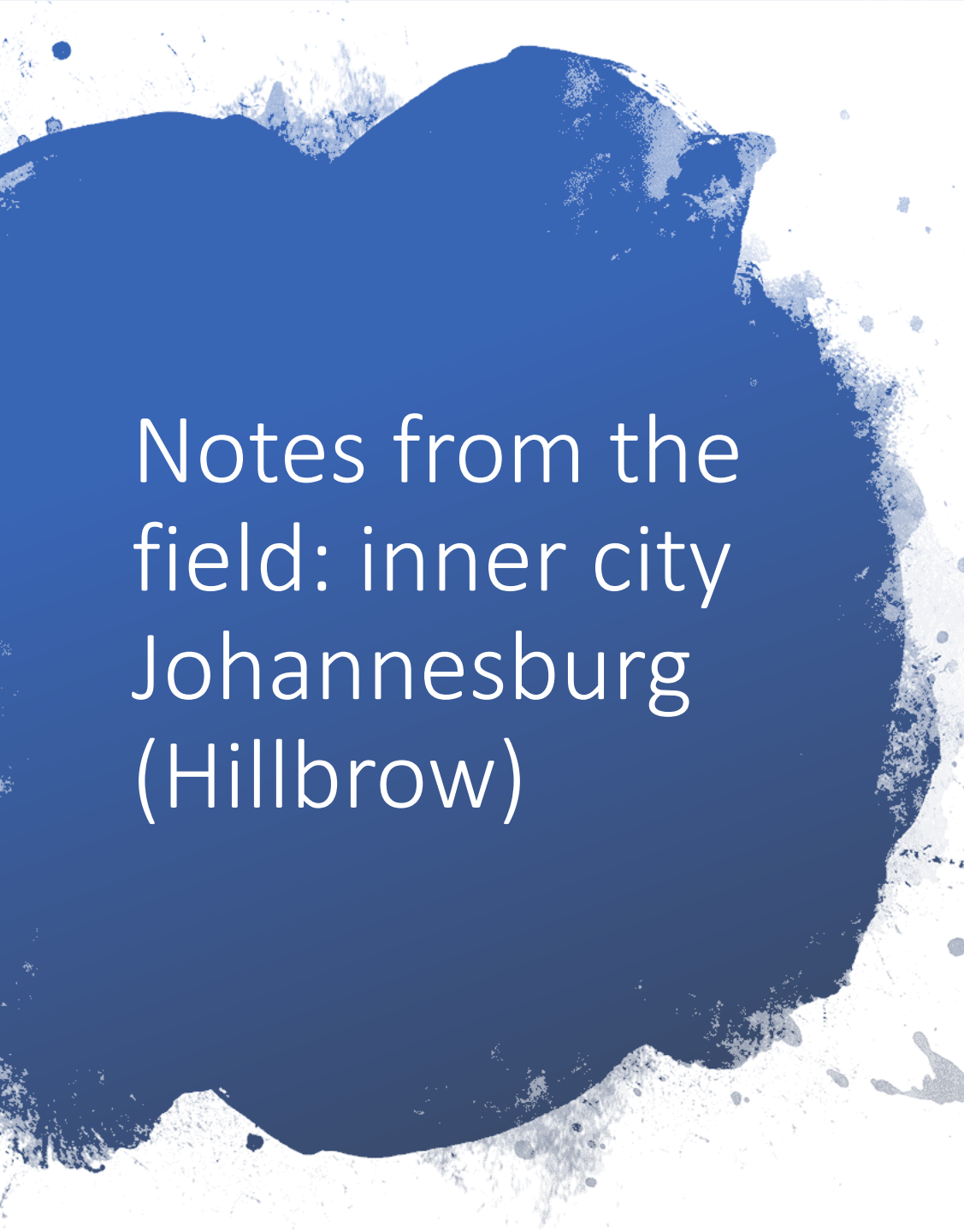
3km queue in Pretoria (SA administrative capital) for food parcels

Are Covid protection measures in place in informal settlements?

- Answers only really available where health services are at work e.g. Melusi, C'ty Development Workers and C'ty health Workers active in the site

- Inner city informality as needy as defined 'slum' or informal settlement

Notes from the field: inner city Johannesburg (Hillbrow)

- Health: The clinics are incredibly busy, people are accessing healthcare. Long queues of patients, with minimal social distancing.

- Staff are stressed and overwhelmed by numbers of patients and limited space with new Covid-19 facility plans. Adolescent clinic headcount reduced by about 40% since February 2020 due to many patients returning home to other provinces.

- Psychosocial issues big, many cases of GBV, patients going missing and increased mental health difficulties such as anxiety, depression and suicidal thoughts.

- Many health-care tests and programmes disrupted by participants who moved home to other provinces.

- Food parcels are the number one request, social workers from DOH and Wits RHI are struggling to assist due to a lack of resources available.

- Many migrants and refugees can be found in shelters all over the City. However, been reported that shelters are filled with 99% men only. Substance abuse services and healthcare services are provided through mobile vans.

Layers of need and risk

SA Police guard foreign-owned spaza shop

- Asylum seekers, refugees, undocumented migrants are to be found in most African cities
- Existing hostilities are being exacerbated by 'othering', blame and straight extortion – pay for protection or lose everything
- Xenophobia, racism and various deeply negative attitudes and narratives are emerging, not helped by conspiracy theories, but exist regardless
- Arguments have been made that this is a white disease, a Chinese disease, 'not a black disease', that melanin defeats it, blacks are immune, etc. – fear, hunger and security force heavy-handedness make for highly politicised narratives

Conclusion

- We cannot create the inclusive cities envisioned by SDGs and New Urban Agenda without a more just spatial politics and a more integrated approach to space (and planning and delivery).

- Rural/urban linkages must be built into the DNA of data-gathering – though current trend is very granular micro data, very local planning, etc.

- We need to use Covid to better understand the depth of inequality and talk less of 'smart' cities than of caring, inclusive, sharing cities that self-consciously fight inequality, xenophobia, gender-based violence and the conditions into which we force the poor to live.

- Covid is wrecking economies and institutions. This is not only a pandemic, but a test of social cohesion, tolerance, and the social contracts within and between groups in society, and countries. But it is also an opportunity to build something new and more equal from the wreckage.