

Pandemic Food Precarity, Crisis-Living and Translocality: Zimbabwean Migrant Households in South Africa during COVID-19



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Zimbabwean Migrant Households in
South Africa during COVID-19**

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EXECUTIVE SUMMARY

COVID-19 has been a great disrupter of international migration and a social and economic disaster for migrants. Most research attention has focused on the challenges faced by migrants and refugees in destination countries and on return to countries of origin during successive waves of the pandemic. While the impact of the COVID-19 crisis on food security has attracted more attention, most of this research has focused either on national food insecurity or the food insecurity of small samples of rural households. The findings in this report come from a household survey conducted by SAMP in mid-2021. The report argues that years of crisis-living in a hyperinflationary environment in Zimbabwe left many households in a pre-pandemic state of food insecurity and vulnerable to the pandemic shock. At the same time, the pandemic reduced the ability of Zimbabwean migrant households in South Africa to assist family back in Zimbabwe. As COVID-19 began to bite, for example, there was increased pressure on migrant households in South Africa to remit more and more often. While most did continue to remit in the first year of the pandemic, their own parlous situation meant that they had to reduce their remittances. Many had lost employment and had a reduction in income, primarily because they worked in sectors that were hard hit by the pandemic, including domestic work, the services and tourist industry, and the informal sector. Although most were working again by the time of the survey, the impact was still being felt, nowhere more so than in household food insecurity. Only 5% of the female-headed households were completely food secure. In the face of rising food prices, most were eating less and consuming cheaper foods with a drop in dietary diversity. As well as contributing to greater awareness of the negative impacts of COVID-19 on migrants and refugees in Southern Africa, this report contributes to the more general discussion on pandemic precarity. First, it applies the concept of pandemic precarity to draw attention to pre-existing forms of socioeconomic insecurity and inequality among migrant households that have been exacerbated by COVID-19 shocks and stressors. Second, it recognizes that migrant households have translocal householding commitments and obligations in their home countries. In the context of COVID-19, both have been negatively affected and need to be considered together to assess the full impact on food security. Finally, the report suggests that female migrants and female-headed households were particularly vulnerable to pandemic impacts. By adopting a gender lens, the report demonstrates that pandemic precarity was a major challenge for female migrants and their dependants. The negative implications of pandemic precarity for translocal households stretched between two or more countries are also clear from this analysis.

INTRODUCTION

The COVID-19 pandemic has been a “great disrupter” of international migration, profoundly altering mobility patterns across the globe (McAuliffe, 2020; McAuliffe et al., 2022). COVID-19 also has been a “social disaster” that has amplified and intensified pre-pandemic vulnerabilities and pervasive social inequalities with both short and long-term effects (Maestripieri, 2021). Migrants around the globe have been disproportionately impacted by the pandemic and the containment measures adopted to limit contagion. A growing body of work has analyzed the multiple consequences of the pandemic for migrants and mobile populations (Bandyopadhyay et al., 2021; Cairns and Clemente, 2023; OECD, 2021; Sirkecki and Cohen, 2020; Triandafyllidou, 2022). Much of this focuses on the challenging circumstances encountered by migrants and refugees in destination countries during successive waves of the pandemic and on return to their home countries.

This report aims to contribute to a more general discussion on the migration-food security nexus in the context of COVID-19. We apply the concept of “pandemic precarity” to draw attention to pre-existing forms of socioeconomic insecurity and inequality experienced by migrant households, which were exacerbated by COVID-19 shocks and stressors (Cassiman et al., 2022; Perry et al., 2020). Recent studies have also emphasized that many African households are spatially dispersed with household members resident in different locations and involved in “stretched” geographical, social and material arrangements (Djurfeldt, 2021, 2022; Ramamurthy, 2020; Steinbrink and Niedenfuhr, 2020). A translocal household is a “socially recognized, jointly economizing collective, whose members do not permanently live in one place, but do coordinate their activities of consumption, reproduction and resource use over a long period of time” (Steinbrink and Niedenfuhr, 2020: 44). In translocal households, opportunities, risks and vulnerabilities are therefore distributed across space. Family and kin relationships in translocal households function as informal providers of social welfare and general wellbeing as well as dispersing the management of personal and contextual shocks (Djurfeldt, 2022). Although the concept of translocality has primarily been applied to internal rural-urban migration, it also has relevance to international migration. The material dimensions and flows of cross-border translocality involve the movement and transfer of money, food and other necessities between family members in different countries (Crush and Caesar, 2018).

This report also contributes to the emerging literature on the negative impacts of COVID-19 on migrants and refugees in Southern Africa (Angu et al., 2022;

Mukumbang et al., 2022; Mushomi et al., 2022; Mutambara et al., 2022; Nhengu, 2022; Odunitan-Wayas et al., 2021; Posel and Casale, 2022). Zimbabwean migrants living between South Africa and Zimbabwe are well acquainted with “crisis-living” because of their firsthand experience of Zimbabwe’s protracted crisis, the primary driver of the large-scale exodus to South Africa (Crush and Tevera, 2010).

Here, we extend the concept of “everyday crisis-living” beyond the boundaries of the nation-state to show how the pandemic has reconfigured the ability of migrants to contribute to their own food security as well as that of household members in countries of origin (Helliker et al., 2020). Finally, we suggest that food insecurity is central to gendered migrant translocality and pandemic precarity and therefore provides an important lens through which to view the unequal and intersecting outcomes of COVID-19 for female migrants and their households (Crush et al., 2021).

EVERYDAY CRISIS-LIVING

Contemporary Zimbabwe has been characterized as being in a state of “unending crisis” (Noko, 2022). Since 2000, the country has experienced a series of social, economic and political crises triggered by an IMF-World Bank Structural Adjustment Program, fast-track land reforms, and heavy public indebtedness, and exacerbated by Western sanctions imposed against the ruling ZANU-PF regime. A recurrent feature has been numerous episodes of hyperinflation, with massive surges in the price of all goods and commodities, including food items. Between 2000 and 2009, for example, inflation increased by over 100% per annum and exceeded 1,500% annually from 2006 to 2009 (McIndoe-Calder et al., 2019). After a short recovery between 2010 and 2013, the situation deteriorated again. The replacement of Robert Mugabe with Emmerson Mnangagwa as President in 2017 failed to reverse the deep economic malaise. The country continued to witness hyperinflation in the years immediately preceding the COVID-19 pandemic. Annual inflation increased from 11% in 2018 to 255% in 2019 (World Bank, 2022). In the first year of the pandemic it rose further to 557%.

The manner in which ordinary Zimbabweans have lived out the crisis, responded to its specific conditions and shaped its trajectory has been labelled “everyday crisis-living” (Helliker et al., 2020). With a significant proportion of the Zimbabwean population struggling to meet their basic needs and food and nutrition security, food-

related activities have become an important dimension of the quotidian existence of crisis-living. Hyperinflation sharply reduced the purchasing power of households and led to a dramatic increase in levels of food and nutrition insecurity. Towards the end of 2019, the World Food Programme (WFP) warned that Zimbabwe was facing its worst hunger crisis in a decade (UN, 2019). A country once recognized as the “breadbasket of Africa” is now beset by “manmade starvation”, with some 7.7 million people or close to half of the country’s population characterized as food insecure (UN, 2019). The report of the UN Special Rapporteur on the Right to Food in November 2019 additionally underscored the disproportionate gendered effects of the ongoing food crisis on women and children (UN, 2020). These livelihood challenges forced most households to adopt survivalist coping strategies including multiple income-generating activities, selling assets, and migration to other countries (Tawodzera, 2011, 2012; Tawodzera et al., 2016). In turn, migration reshapes the terms and conditions of crisis-living at household level in Zimbabwe by reducing the number of mouths to feed while increasing the resources (through remittances) available to purchase food (Crush and Tevera, 2010; Crush et al., 2015).

In situations of protracted crisis, external translocal householding arrangements can be critical to survival. In Zimbabwe, for example, the geographical arrangement of many translocal households spans international borders. The family and kinship networks linking Zimbabwe with migrants in other countries are designed to address the stark material deficiencies caused by limited livelihood opportunities, low wages and weak purchasing power in the country itself. Household members “left behind”, particularly children and the elderly, are reliant to a great extent on migration-generated resources for their food security and general well-being. Many Zimbabwean migrants in South Africa are thus not autonomous individuals or family units but members of translocal households.

A number of pre-pandemic studies have unveiled various food-focused practices involved in cross-border translocality. One study in Harare shows that women have organized food clubs in which food is purchased cheaply in bulk by travelling regularly to neighbouring countries and then divided among participating households (Tawodzera, 2012). In South Africa, Kudejira’s (2021) study of irregular migrant farmworkers in South Africa’s Limpopo province emphasizes the primacy of food and food-focused social practices in the lives of Zimbabwean migrants. Food is not simply a source of nutrition and physical survival but also plays an important role in mediating social relationships with other migrants and even with South African citizens. Drawing on the Shona adage *ukama igasva hunozadziswa nekudya* [a relationship is not complete until there is food], this research underscores that food-related

practices, such as reciprocal food offerings, facilitate and build migrant networks while bringing together and unifying Zimbabwean migrant communities in South Africa. Equally importantly, these food-based practices ameliorate to a certain extent the harsh realities of the precarious working and living conditions of Zimbabwean farm labourers in this receiving country.

Online media reports and features have highlighted other innovative ways through which food security has been organized more recently by translocal Zimbabweans, including the use of new apps enabling migrants to purchase food that is directly delivered to their relatives in Zimbabwe (Chingono, 2022; Sithole, 2022). Many women in Zimbabwe itself are cross-border traders who enter South Africa for periods of up to three months to purchase food and other basic commodities for resale in Zimbabwe (Chikanda and Tawodzera, 2017). As Mudvidziwa (2015: 121) notes: “cross-border trade is dominated by a highly mobile class of women specialising in long distance business activities. Zimbabwean women are no longer content [if they ever were] with being dutiful housewives and home makers. They have taken a lead on matters of household survival.”

A key modality of translocal crisis-living is the dependence of Zimbabwean households on cash remittances for food purchase as well as on direct food remittances (Chikanda and Tevera, 2008; Mazwi, 2022; Nyikahadzoi et al., 2019; Tevera et al., 2010). In turn, household members who live and work as migrants in South Africa and other countries face unrelenting pressure to send money, food and other goods to support their relatives in Zimbabwe (Crush and Tawodzera, 2017). Mazwi (2022) notes that the impact of migratory practices on food security and asset accumulation through investment in agriculture is negligible. Under conditions of crisis-living, remittances are directed to needs such as food, clothing, shelter and medical care. A large share of remittances flows through informal channels such as personal conveyance and *malayisha* couriers, which means that official data on remittances is unreliable (Nyamunda, 2014; Nyoni, 2012; Thebe, 2015). Nyoni (2020) shows that the *malayisha* industry is highly masculinized, which puts female migrant remitters at risk of crime, verbal and physical abuse, and exploitation.

Crisis-living has accelerated the feminization of Zimbabwean migration to South Africa. Women constitute a growing share of the mixed migration flows from Zimbabwe to South Africa (Crush et al., 2015, Mutambara and Maheshwari, 2019; Thebe and Maombera, 2019). By 2019, 45% of Zimbabweans in South Africa were female migrants (UN DESA, 2020). These women are deeply involved in the organization of translocal householding and livelihoods to support their sending house-

holds in crisis-ridden Zimbabwe. Since the household is not the only site where gender roles and identities exert a pervasive influence, these gendered obligations of care and support are reinforced by the gender-based challenges that Zimbabwean female migrants encounter outside their homes in South Africa. They have limited social and migrant networks and remain overexposed to the various risks, including sexual violence, limited incomes and relegation to low-paying jobs that reproduce the social division of labour (Idemudia et al., 2013; Hlatshwayo, 2019a, 2019b; Ncube and Bhata, 2021; Zack et al., 2019).

Zimbabwean women have also been forced to adopt more risky informal channels to migrate to South Africa, which inevitably brings other challenges to their lives and translocal householding pressures and arrangements (Lefko-Everett, 2010; Moyo, 2020). The organization of translocal Zimbabwean households is also deeply gendered. While migration presents female migrants with new opportunities to renegotiate their role and influence within the household, translocality mostly adheres to patriarchal frames, ideals and expectations of women as caregivers but also financial providers. Care and financial obligations are felt even more acutely by female migrants in households without spouses or partners (known as female-centred households).

PANDEMIC PRECARITY

In Zimbabwe, food-related distress assumed even greater proportions during the pandemic. Murendo et al. (2021) note that lockdowns in Zimbabwe had a major disruptive impact on the food environment and food consumption in urban areas. According to Tui et al. (2021: 3), “the most widely experienced changes are declines in food consumption and nutrition, most likely due to a combination of reduced incomes, reduced access to food sellers because of mobility restrictions, and food shortages.” In 2020, well over half of the country’s rural households (56%) experienced food insecurity during the peak hunger period (ZimVAC, 2022). Rural food insecurity declined to 27% in 2021 but rose again sharply to 38% in 2022 (SADC-RVAA, 2022). A recent household survey in Zimbabwe showed that the main concern about the impact of the pandemic was lack of food (cited by 88% of households) (Tui et al., 2022). Two-thirds of respondents felt that women would be disproportionately impacted by the lack of food. The analysis of livelihood strategies just before the pandemic (February 2020) and one year into it (February 2021) showed that the proportion of households using food-related strategies was already

high pre-pandemic but had increased significantly on every measure one year later (Table 1). There were also considerable differences between urban and rural households in both pre-pandemic use of strategies and the increase in use a year later.

TABLE 1: Household Coping Strategies to Mitigate Food Insecurity in Zimbabwe

Coping strategy	% using strategy		% using strategy in urban areas near town centre		% using strategy in urban areas far from town centre		% using strategy in rural areas near town		% using strategy in rural areas far from town	
	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021
Sell household assets	7	17	5	19	3	12	5	20	15	16
Resort to casual labour	22	30	13	23	33	44	12	29	29	25
Spend savings	37	62	9	35	33	56	16	61	91	97
Reduce non-food expenditure	12	26	7	13	9	23	7	34	26	32
Reduce number of meals	47	77	58	86	28	71	16	59	87	95
Reduce size of meals	45	78	44	67	33	81	16	65	89	98
Rely on less preferred foods	57	86	71	96	50	87	16	64	91	98

Adapted from Tui et al (2022: 29-30)

COVID-19 added another layer of precarity to poor households in South Africa. An estimated 15% of the workforce lost their jobs between February and June 2020 (amounting to 2.8 million jobs) and one-third of the workforce had lost earnings through temporary lay-offs during the hard lockdown. By March 2021, men's employment and working hours had returned to pre-pandemic levels while wom-

en's had not, further exacerbating gender inequality in the labour market (Casale and Posel, 2020; Casale and Shepherd, 2021; Ranchhod and Daniels, 2021). At the household level, female-headed households were more likely to experience the poverty outcome and shocks of the pandemic through job and income loss (Chitiga et al., 2022).

Many Zimbabweans in South Africa work in informal employment (including street trading, casual day labour and domestic work). Employment and incomes in all three sectors were severely affected by the pandemic in 2020 and 2021 (Blaauw et al, 2021; Mbeve et al., 2020; Rogan and Skinner, 2020). The number of informal-sector jobs decreased by about 25% in the early months of the pandemic, translating to a net loss of over 800,000 jobs (Skinner et al., 2021). The number of domestic workers declined by 250,000 between mid-2019 and mid-2020. Here, too, the pandemic reinforced gender inequality as women are disproportionately represented in street trading and domestic work. Unlike supermarkets, informal food traders in South African cities were initially forced to suspend all operations during the lockdown, further confirmation of the anti-informality bias in the pandemic response (Battersby, 2021; Wegerif, 2020). Women in the informal economy saw a decrease of 49% in the typical hours worked in the early months of the pandemic while men in informal employment saw a 25% decrease in typical hours (Rogan and Skinner, 2020). Among the informal self-employed who were working, average earnings decreased by 27% and typical earnings by 60%. For women in informal self-employment, typical earnings decreased by nearly 70%.

Pandemic precarity among Zimbabwean migrants in South Africa from job loss and income reduction in the formal and informal sectors was exacerbated by the inaccessibility of social assistance and increased family pressures to remit savings and cash to Zimbabwe (Bhorat et al., 2021; Mbiba and Mupfumira, 2022). The new uncertainties and anxieties caused by the pandemic and growing economic hardships for many South Africans intensified pandemic precarity in other ways. Prior to the pandemic, Zimbabweans were often the targets of anti-migrant hostility and xenophobic violence (Crush et al., 2017). Xenophobic attacks on migrants increased during the pandemic and new political groups emerged demanding large-scale expulsion of migrants (Mukumbang et al., 2020).

The pandemic also placed major constraints on the cross-border mobility of Zimbabwean migrants and disrupted the ordinary channels through which translocal livelihoods are organized. Border closures and hard lockdown measures were imposed in South Africa between March and October 2020. COVID-19 was initially used

by the South African government as an expedient to accelerate a restrictive, securitized agenda including building a new fence on a portion of its common border with Zimbabwe to limit the entry of migrants supposedly bringing COVID-19 to the country. Initially, cross-border movement was barred to all but essential workers. Thereafter, it was constrained by South Africa's mandatory entry requirements of vaccination certificates or negative PCR tests, delays in vaccine availability and weaker vaccination rates in Zimbabwe, high costs of PCR tests in Zimbabwe and related technical glitches (such as invalid QR codes), and regular rejection of these tests by South African immigration officials at the land borders. The number of official annual arrivals from Zimbabwe increased steadily from 989,614 in 2008 to 2,258,794 in 2019 and then dropped dramatically to 684,546 in 2020 and 410,730 in 2021 (Table 2).

TABLE 2: Official Arrivals from Zimbabwe into South Africa, 2005-2021

Year	Total arrivals from Zimbabwe	Total arrivals of non-citizens from all countries
2005	782,547	7,518,317
2006	989,614	8,508,805
2007	964,027	9,207,697
2008	1,248,043	9,728,860
2009	1,227,631	10,098,306
2010	1,513,714	11,574,540
2011	1,553,008	12,495,743
2012	1,847,973	13,795,530
2013	1,935,159	15,154,991
2014	2,143,716	15,092,016
2015	1,900,791	15,051,826
2016	2,028,881	16,158,419
2017	2,039,932	15,990,598
2018	2,208,930	15,939,855
2019	2,258,794	15,825,296
2020	684,546	4,586,387
2021	410,730	3,150,007

Source: Compiled from Statistics South Africa data

Moyo (2022, 2022) suggests that, despite the closures, the borders remained rela-

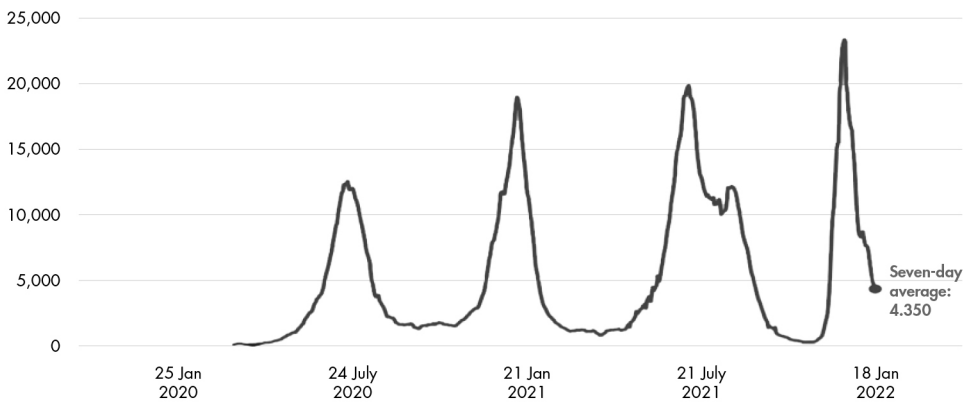
tively porous as there were numerous workarounds including an increase in irregular border crossing. Informal cross-border trade was disrupted but did not cease. Border closure also did not prevent an upsurge in return migration to Zimbabwe during the early months of the pandemic. The IOM has estimated that between 200,000 and 500,000 Zimbabwean migrants returned to the country as a direct result of the pandemic (IOM, 2021). The primary reason for return was loss of income and employment. A sample survey of returnees found that they were disproportionately female (60%), had suffered financial hardship and had experienced hunger while away.

An under-explored aspect of migrant pandemic precarity in Zimbabwe and South Africa is increased individual and household food insecurity. In South Africa, van der Berg et al. (2022) argue that there was a “drastic increase” in household and child hunger during the first hard lockdown. Relaxation of the lockdown in late 2020 plus relief measures led to some improvement. However, “the reduction in hunger did not last, and lack of money to buy food ... has not changed substantially since June 2020” (van der berg et al, 2022). Odunitan-Wayas et al. (2021) hypothesize a dramatic increase in the food insecurity of migrants in South Africa but supporting evidence is currently sparse.

METHODOLOGY

The research for this report was conducted in July and August 2021, when South Africa was experiencing its third wave of COVID-19 (Figure 1). A face-to-face survey was administered to 500 Zimbabwean migrant households in six neighbourhoods in the cities of Cape Town (Dunoon, Masiphumelele, Nyanga) and Johannesburg (Johannesburg Central, Alexandra Park, Orange Farm). Survey participants were identified using snowball sampling. In each of the six study sites, six Zimbabwean migrant households were located and assigned numbers. A starting point (the initial household) was established and interviewed. This household was asked to identify another household. The process was repeated until an adequate sample was achieved in one area before moving on to the next where the procedure was repeated. Within the household, household heads were interviewed, but in their absence any household member 18 years of age or older with sufficient knowledge of household food economics was chosen for questionnaire administration.

FIGURE 1: Daily Confirmed Coronavirus Cases in South Africa (7-day average)



Source: Johns Hopkins

For this report, we identified a sub-sample of 153 female-centred households in the larger data for analysis. By female-centred households, we refer to households where women are de facto heads of household who assume financial and social responsibility for meeting the needs and wellbeing of their dependants. By definition, there is no adult male living in the household (unless they are a son and dependant of the head). Most of the women in these female-centred households do not have a husband or long-term partner in South Africa. All interviews were conducted in person using tablets.

PANDEMIC INCOME PRECARITY

Three-quarters of the female household heads (73%) were between 25 and 44 years of age (Table 3). Just over half were unmarried while 12% said they were married but living apart from their spouse. Another 24% had been married but were now separated, divorced or widowed. Despite their different marital statuses, these women were all the primary income earner for their household in South Africa. Many were in occupations or sectors adversely affected by COVID-19 lockdowns, closures and lay-offs (Skinner et al., 2021). Just over 40%, for example, were employed as service or domestic workers. Female service workers, particularly in the tourist industry, were let go in large numbers. Domestic workers in South Africa lost their jobs as employers shut them out of their houses. More than one-third of the women

surveyed were self-employed as operators of small-scale informal businesses, a sector which, as noted above, was badly affected by official bans on informal activity and lockdowns.

TABLE 3: Profile of Female-Centred Household Heads

Age	No.	%
16-24	22	14.4
25-34	70	45.8
35-44	41	26.8
45-54	14	9.2
55-64	14	9.2
65+	6	3.9
Marital status		
Unmarried	81	52.9
Separated	25	16.3
Married	19	12.4
Divorced	15	9.8
Widowed	8	5.2
Other	5	3.3
Main occupation		
Domestic/service worker	67	43.8
Self-employed	53	34.6
Unskilled manual worker	11	7.2
Education (e.g. teacher/student)	5	3.3
Skilled manual worker	5	3.3
Office worker	3	3.0
Employer/manager	1	0.7
Farm worker	1	0.7
Unemployed	5	3.3

The experience of pandemic precarity is captured in responses to livelihood impact questions on a five point scale from strongly disagree to strongly agree. Table 4 aggregates the responses into agree (4-5), disagree (1-2) and neither (3). First, around 20% of the households had someone who became ill with COVID-19 (a prevalence figure that excludes most asymptomatic infections). Second, as many as 71% of household heads had become unemployed at some point as a direct result of the pandemic (with 60% of households also experiencing unemployment of another household member). Third, and as a direct result, nearly 90% of households had lost income through the pandemic. Mean scores were highest for loss of income (3.52 out of 5.0), followed by unemployment of the household head (2.89).

TABLE 4: COVID-19 Impact on Employment and Income

	Agree	Disagree	Neither	Mean
Members of my household became ill because of the pandemic	20.9	71.2	7.9	1.92
I became unemployed and was unable to find a job because of the pandemic	71.3	22.2	6.5	2.89
Others in my household became unemployed and were unable to find a job because of the pandemic	60.4	29.4	10.2	2.73
My household experienced a loss of income because of the pandemic	87.0	5.9	7.1	3.52

By late 2021, when the research took place, very few of the women were still unemployed or did not have some form of income, in stark contrast with the early months of the pandemic. Most surveyed households were obtaining income from wage work (56%), casual work (22%) and informal sector activity (28%) (Table 5). Only a small number were receiving supplemental income from remittances in the form of cash, money or goods from relatives in other countries.

Despite the restoration of employment and incomes in late 2020 and 2021, after the hard lockdown, less than 10% of household heads felt that the economic status of their household was the same or better than before the pandemic (Table 6). Over 90% indicated that their household economic conditions had gotten worse (25%) or much worse (67%).

TABLE 5: Sources of Household Income

	No.	% of households
Wage work	86	56.2
Casual work	34	22.2
Informal businesses	43	28.1
Cash remittances	9	5.9
Goods remittances	3	2.0
Food remittances	2	1.3
<i>Note: Multiple-response question</i>		

TABLE 6: Perceptions of Changes in Household Economic Conditions

	No.	%
Much worse than before the pandemic	102	66.7
Worse than before the pandemic	38	24.8
Remained the same	11	7.2
Better than before the pandemic	2	1.3

PANDEMIC REMITTING

Four out of every five of the women had dispatched remittances to family in Zimbabwe during the pandemic. Although there were variations in frequency and total amounts sent, only 20% had not sent anything home, probably because their incomes were too low and erratic (Table 7). However, only 20% managed to remit frequently, at least once per month or more often. Just over half had sent remittances a few times in the year. Three-quarters (75%) had sent less money to Zimbabwe because of COVID-19, however (Figure 2). Only 13% had not.

Accommodation (primarily rent) and food were the two most important categories of household expenditure making up 60% of all expenses combined. Of the other expenditure categories, remittances were the most important (Table 8). The mean monthly amount remitted to Zimbabwe was ZAR713 for a total transfer of ZAR55,000 in the month prior to the survey. However, only half of the households had remitted anything. These households possessed very little disposable income to

spend on non-essential items or invest in savings for emergencies and accumulation of assets. Some 80% of the households had not managed to save anything in the previous month.

TABLE 7: Frequency of Household Remitting to Zimbabwe

	No.	%
More than once per month	2	1.3
Once per month	27	17.6
A few times per year	81	52.9
Once per year	10	6.5
Occasionally	3	2.0
Never	30	19.6
Total	153	100.0

FIGURE 2: Impact of COVID-19 on Cash Remitting to Zimbabwe

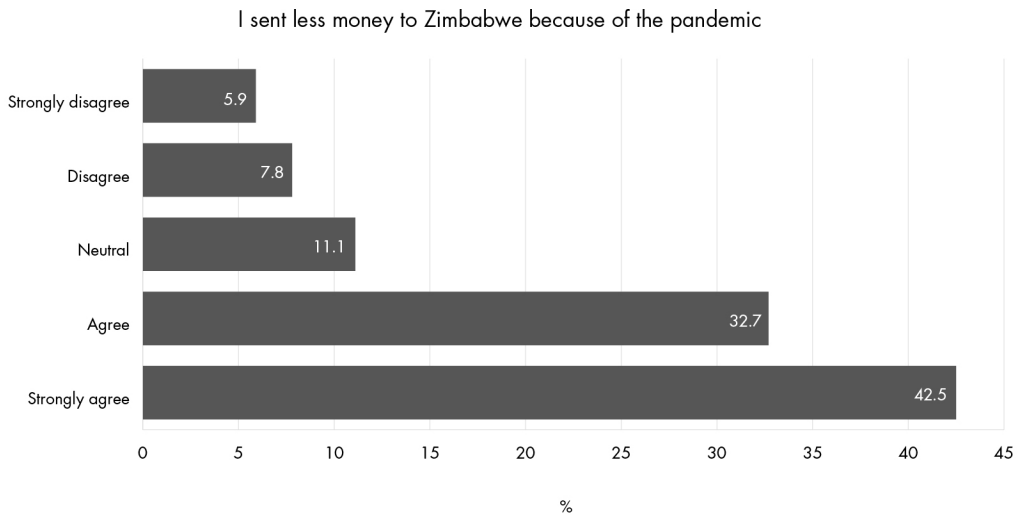


TABLE 8: Distribution of Household Expenditure in South Africa

	Total monthly spend (ZAR)	% of total spend	Mean monthly amount (ZAR)	% of households incurring expense
Accommodation	183,300	32.4	1,272.92	94
Food and groceries	156,050	27.6	1,019.93	100
Remittances	54,887	9.7	712.81	50
Transportation	42,090	7.4	610.00	45
Utilities	36,370	6.4	382.84	62
Goods purchased for resale	31,475	5.6	1,311.46	16
Savings	24,900	4.4	803.23	20
Education	22,280	3.9	636.58	23
Medical	4,954	0.9	176.93	18
Fuel	3,750	0.7	375.00	7
Insurance	3,305	0.6	118.00	18
Debt repayment	1,351	0.2	225.11	4
Funeral costs	1,217	0.2	93.60	9

PANDEMIC FOOD PRECARITY

Hart et al. (2022) document an “unprecedented” rise in hunger during the pandemic. Zimbabweans are not isolated in their dataset so it is not clear whether the additional demands placed on female-headed migrant households (and their documented exclusion from government pandemic relief measures) left them in an even more parlous position. However, the survey results suggest that food insecurity was a central feature of pandemic precarity for female-centred Zimbabwean migrant households in South Africa. Nearly 80% (mean 3.36) said they had less food to eat because of the pandemic. Even more (nearly 90%, mean 3.62) said that food had become more expensive since the start of the pandemic. As many as 61% (mean 2.76) said that the pandemic had interfered with the supply of food from the informal-food sector, a major source for many households, during the pandemic. In another question, only 19% of household heads said the household had never gone without enough food to eat in the previous year.

TABLE 9: Impact of Pandemic on Food Access

	Agree	Disagree	Neither	Mean
My household in South Africa had less food to eat because of the pandemic	77.7	12.4	9.9	3.36
Food became much more expensive in South Africa during the pandemic	88.3	4.0	7.7	3.62
It was more difficult to access food from informal traders during the pandemic	60.8	26.8	12.2	2.76

Despite the recovery of employment and income by mid-2021, most households were still experiencing serious food insecurity. According to the HFIAP classification (Table 10), only 5% were completely food secure, with nearly half being either moderately or severely food insecure during the month prior to the survey. Table 11 provides a breakdown of the HFIAP questions showing the frequency of experiencing different aspects of food insecurity in the previous month due to a lack of resources/money. The most important finding is that nearly half (45%) of the heads had worried that there would not be enough food in the household and a similar proportion had eaten smaller meals (45%) or fewer meals (43%) because there was not enough food in the house. However, only one-fifth (20%) had experienced a time when there was no food at all in the house and less than 10% had household members who had either gone to sleep hungry or gone 24 hours without eating. By contrast, the pandemic had a major impact on the quality of the household diet, with 60% having to eat a limited variety of food and eating food they did not want to eat.

TABLE 10: Prevalence of Household Food Insecurity

	No.	%
Severely food insecure	12	7.8
Moderately food insecure	63	41.2
Mildly food insecure	70	45.8
Food secure	8	5.2

TABLE 11: Frequency of Experiencing Types of Food Insecurity

In the past 4 weeks:	Sometimes/Often	No/Rarely
Were you or any household member not able to eat the kinds of foods you preferred due to a lack of resources?	61.5	38.5
Did you or any household member have to eat some foods that you did not want to eat because of a lack of resources to obtain other types of food?	60.8	39.2
Did you or any household member have to eat a limited variety of foods due to a lack of resources?	59.4	40.6
Did you worry that your household would not have enough food?	46.4	53.6
Did you or any household member have to eat a smaller meal than you felt you needed because there was not enough food?	45.1	54.9
Did you or any household member have to eat fewer meals in a day because there was not enough food?	43.1	56.9
Was there ever no food to eat of any kind in your household because of a lack of resources to get food?	19.6	80.4
Did you or any household member go to sleep at night hungry because there was not enough food?	8.5	91.5
Did you or any household member go a whole day and night without eating anything because there was not enough food?	5.9	94.1

The Zimbabwean households in South Africa were using various coping strategies to manage the food security shock of the COVID-19 crisis (Table 12). Although only 3% of the sample had gone without food during the entire daily stretch, the vast majority (80%) had to significantly alter their dietary patterns and rely on less desirable and less expensive foods. Most had reduced their consumption of nutrient-rich foods, such as proteins, fruit and vegetables. Around half the households had reduced the number of meals consumed in a day and nearly one-quarter had decreased the amount of food they consumed during mealtimes. Thirty percent had been forced to borrow food or rely on help from their social networks. Return to Zimbabwe was not seen as a viable strategy to mitigate food insecurity as three-quarters of the female heads said this would only make their food insecurity worse.

TABLE 12: Food Security Coping Strategies during the COVID-19 Pandemic

In the past 7 days, how often did you:	Yes (%)	Mean no. of days
Rely on less preferred and less expensive foods	80.4	4.2
Reduce number of meals consumed in a day	52.3	4.3
Borrow food or rely on help from friends and relatives	30.1	2.0
Consume food from food vending business	26.1	4.2
Limit portion size at meal times	22.9	4.1
Purchase food on credit	13.1	1.9
Go a whole day without eating	3.3	1.5
Send household members to eat elsewhere	0.7	5.0
Feed working before non-working household members	0.0	-
Restrict adult consumption so children can eat	0.0	-
Gather wild/indigenous food	0.0	-

Note: Multiple-response question

CONCLUSION

In this report, we apply the concept of pandemic precarity to a cohort of female migrant heads of households struggling to meet their translocal householding obligations and their South African household's basic needs. We draw for evidence on the findings of a survey conducted during the pandemic with a sample of Zimbabwean women in two of South Africa's migrant gateway cities, Cape Town and Johannesburg, which are both popular destinations for Zimbabwean migrants. The ongoing crisis in Zimbabwe and, since early 2020, the compounding effects of the pandemic brought greater urgency to gendered expectations of material forms of care by these migrants. There were two main reasons for this state of pandemic precarity: first, months of reduced income in 2020 and 2021 had taken their toll on the household economy. Second, these were translocal female-headed households who experienced increased and persistent requests and appeals for cash and food remittances to cope with the trials of crisis-living. However, Zimbabwean women in South Africa are clustered in the service industry, in domestic work and in the informal sector, all of which were particularly hard hit by the global lockdowns. The pandemic impacted on their personal and household mobility, their health and access to health care, their prospects for continued employment and self-employment, their income earning opportunities and their food security.

The report applied a food security lens to pandemic precarity to illuminate the challenges of crisis-living in a country of migrant origin and the struggles of female migrants to secure their own food security in a country of migrant destination. Previous research has confirmed that prior to the advent of COVID-19, Zimbabwe was in the grip of a prolonged food security crisis that dramatically intensified across the country in the wake of COVID-19. Researchers have also confirmed that the Zimbabwean migrant cohort in South Africa faced very high levels of pre-pandemic food insecurity. COVID-19 clearly deepened the food insecurity shock for translocal households with family members in two different countries and levels of food security have still not recovered, even to their precarious pre-pandemic levels. Without systematic policy attention to the nexus, female migrants and their households in South Africa and other countries like Zimbabwe will remain overexposed to the enduring legacy of pandemic-related food insecurity shocks and stressors.

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COVID-19 has been a great disrupter of international migration and a social and economic disaster for migrants. The findings in this report come from a household survey conducted by SAMP in mid-2021 in the South African cities of Cape Town and Johannesburg. The report argues that years of crisis-living in a hyperinflationary environment in Zimbabwe left many households in a pre-pandemic state of food insecurity and vulnerable to the pandemic shock. At the same time, the COVID-19 crisis reduced the ability of Zimbabwean migrant households in South Africa to assist family back in Zimbabwe. As well as contributing to greater awareness of the negative impacts of COVID-19 on migrants and refugees in Southern Africa, this report contributes to the more general discussion on pandemic precarity. First, it applies the concept of pandemic precarity to draw attention to pre-existing forms of socioeconomic insecurity and inequality among migrant households that have been exacerbated by COVID-19 shocks and stressors. Second, it recognizes that migrant households have trans-local householding commitments and obligations in their home countries. In the context of COVID-19, both have been negatively affected and need to be considered together to assess the full impact on food security. Finally, the report suggests that woman migrants and female-headed households were particularly vulnerable to pandemic impacts. By adopting a gender lens, the report demonstrates that pandemic precarity was a major challenge for women migrants and their dependants. The implications of precarity for trans-local households stretched between two or more countries are also clear from this analysis.