

Poverty & Vulnerability to COVID-19 in South Africa

What the Individual Deprivation Measure reveals to inform targeted responses



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Research conducted in mid-2019 in South Africa¹ using the Individual Deprivation Measure (IDM), a new individual measure of multidimensional poverty, provides data to inform a COVID-19 response. The IDM reveals the different circumstances of individual men and women, going well beyond existing poverty measures. Proper hygiene, physical distancing and the lockdown are key policy measures the Government of South Africa is promoting to contain the spread of the virus.² Data from seven of the 15 dimensions of the IDM reveal the challenges of following these, particularly for those who are more deprived.



WATER

Reliability of water supply to maintain hygiene is a major concern in many areas, particularly for rural respondents. Only 30% of rural respondents reported that they had enough water for their personal needs all the time. **Thus 70% of rural respondents do not have enough water all the time.** In the urban areas, 43% reported having insufficient reliable water for their needs. Approximately 60% of rural people and 30% of urban residents have to collect water from outside their home.

Handwashing facilities are also essential for protection against COVID-19, yet only 57% have a place to wash their hands at home with sufficient water and soap; 15% reported not having a place to wash their hands at home at all. The remaining 28% had inadequate facilities (i.e. insufficient water and/or no soap). This is much worse for rural residents, where some 27% did not have a place to wash their hands.

IMPLICATIONS

Overall, 43% of the sample are unable to take the simple handwashing precautions recommended to protect themselves from COVID-19, and almost double that proportion in rural areas. **Ensuring all households have soap, access to water, a container to store water, and a bowl to wash hands is important.** Some government distribution of water tanks and water trucks is occurring, but hand sanitiser, soap and water containers may also be needed.



SANITATION

Just 59% of the respondents reported using a private toilet when at home. A further 21% share their toilet with other households, and 18% use a public toilet when at home. 2% have no toilet to use. Young people are more likely than older ones to use a shared or public toilet, and almost half of rural respondents (48%) are sharing toilet facilities with others.

IMPLICATIONS

People may spread the virus through shared and public toilet use. Young people and those in rural areas are most at risk of spreading or contracting the virus this way. Messaging about essential hygiene measures for those sharing toilets is important and public toilets—which may have questionable cleanliness—need soap/disinfectant, water and clear signs to ensure people wash hands thoroughly after toilet use.



SHELTER

IDM data shows that **26% of respondents reported that they lived in a dwelling with too many people** – and more women (29%) than men (23%) felt their homes were overcrowded. The IDM also asks individuals whether they have enough basic household items such as tableware (plates, cups, bowls) water storage vessels (if required) and bedding (such as blankets, mats and mattresses). 18% of respondents have only two or fewer of these types of items. This is particularly the case for rural residents and people with a disability.

IMPLICATIONS

Homes that are overcrowded make physical distancing impossible, yet this is necessary to stop the spread of infection if a household member is at risk of or has contracted the disease. Individuals who share basic household items with others could be particularly at risk during this pandemic. Temporary accommodation to isolate infected individuals could reduce risks.



HEALTH STATUS

While 66% reported experiencing no health problems **34% live with at least one long term or cooking-smoke related health condition**, some with both. More women (37%) than men (30%), almost half of all people over 65 years of age, 40% of those living in rural areas and more than half of those with disabilities reported suffering from such health conditions.

IMPLICATIONS

Over a third of the sample have an ongoing health condition which may make them more vulnerable to infection from COVID-19. Older people, those with disabilities and people in rural areas are most at risk due to their pre-existing health conditions. Maintaining good management of these conditions—particularly HIV and TB—despite COVID-19 demands on health services, is important.



8 RELATIONSHIPS

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Nationally, 22% of the sample reported that they depended on people outside their household to provide them with basic necessities such as food, water and shelter and they did not always have enough support. Restricting physical movement, as part of the physical distancing efforts, is likely to further deepen their deprivation, by reducing their access to this type of support.

IMPLICATIONS

There is a need to identify those who need help from outside the household with basic needs and explore ways they can be provided with this support safely.



FOOD SECURITY

Some 31% of respondents were experiencing severe food insecurity at the time of the survey and a further 19% were experiencing moderate food insecurity. More than half of respondents reported that they ate only a few kinds of food. Women in particular said they worried about not having enough food, ate few kinds of food, and were unable to eat healthy and nutritious food. Some urban people (32%) were severely food insecure and 58% of those with disabilities were severely or moderately food insecure.

IMPLICATIONS

Almost a third of respondents were food insecure before the COVID-19 crisis; in particular people with disabilities and some in urban areas are most at risk of having insufficient nutrition to remain healthy, and hence being more vulnerable to COVID-19. At the time of writing the lockdown means that only essential activities, mostly in the formal economy are allowed to operate. The poor are over-represented in the informal sector, whose life depends on daily income. **Food insecurity is therefore likely to worsen as a result of the lockdown.** Providing food aid to the poorest could boost their nutritional status and hence their resilience to infection.



UNPAID CARE WORK AND TIME USE

Women normally experience a greater time burden of work and caring responsibilities than men. Approximately 35% of women spend more than two-thirds of their time 'on call', i.e. looking after a child under the age of 13, or a person with a disability, an elderly person or someone in poor health, compared to 11% of men (and 75% of men report no 'on-call time' compared to 45% of women).



IMPLICATIONS

When schools are closed, or people get sick, the demands on women to care for children or others escalates. Publicly encouraging a more equal sharing of the work burden may assist, but consultation with women about how best to support them is also necessary.



GENDER VIOLENCE

Other studies in South Africa³ indicate **high rates of intimate partner violence** with women (29%) more likely than men (21%) to report victimisation. If men are forced to stay home from work or other activities, and households come under increasing stress from reduced income, children at home, and anxiety about COVID-19, it is expected that rates of this violence will increase.

IMPLICATIONS

Home is not always a safe place. It will be extremely difficult with COVID-19 movement restrictions in place for women victims to escape from their male perpetrators if they need to. **Increasing resources for family violence support services and making safe housing available for victims**, while also allowing women to move from their homes to escape violence, could reduce risks.

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¹ The IDM study was a national sample of 8,652 people, with a minimum of 800 people per province. It has not been weighted to precisely reflect the demographic characteristics of South Africa's population. In relation to violence, a different source is used. Gass, J.D, Stein,D.J, Williams,D.R, & Seedat,S. (2010).

² Republic of South Africa, Government Gazette 2 April 2020, Disaster Management Act, 2002: Amendment of Regulations Issued In Terms Of Section 27(2).

³ Gass, J.D, Stein,D.J, Williams,D.R, & Seedat,S. (2010). Differences in risk for Intimate Partner Violence among South African adults, Journal of Interpersonal Violence 26(14) 2764 –2789. <https://journals-sagepub-com.virtual.anu.edu.au/doi/10.1177/088626051039096> (See discussion of rates of intimate partner violence from various studies).