

Enforcement and Exclusion: COVID-19 Policies, Urban Migrants, and Food Insecurity in Pandemic South Africa

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Abstract

On March 5th, 2020, South Africa recorded its first official case of COVID-19 when a South African tourist returning from a holiday in northern Italy tested positive. The number of excess deaths is now over 300,000. The policy response to the pandemic is widely regarded as amongst the most draconian in Africa. In 2020, the government imposed a stay-at-home lockdown for 100 days, which was strictly enforced by armed police and the army. Breach of lockdown was a criminal offence and arrests were widespread. By April 2021, over 400,000 had been apprehended, more than in any other country globally. In his 2021 book, *One Virus, Two Countries*, Steven Friedman suggests that government containment and punishment measures had a particularly negative impact on the country's urban poor, a population that includes many internal migrants as well as several million international migrants and refugees. This MiFOOD paper provides an overview of the South Africa's militaristic policy and policing response to the advent of COVID-19 and how this impacted on migrants in the urban formal and informal economy.

Keywords

urban poor, COVID-19, lockdown, migrants and refugees, pandemic precarity

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Cover Image

South African police issue fines to homeless migrants in Cape Town for contravening city bylaws during the first wave of COVID-19 in 2020. Credit: Guy Oliver/Alamy



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Introduction

On April 4th, 2022, the South African President, Cyril Ramaphosa, announced the lifting of the National State of Disaster, which had been in force across the country for over 700 days (Presidency, 2022). Ramaphosa recalled invoking the National Disaster Act in early 2020 as a vital response to a global health emergency. This had empowered the national government “to take the measures that prevented many more people from becoming severely ill and saved countless lives.” The pandemic measures had slowed the rate of infection, eased pressure on hospitals, and provided the time to develop the infrastructure, resources, and capacity to manage a large number of people who became ill as a result of COVID-19. He enumerated several additional positive achievements, including the introduction of a special Social Relief of Distress (SRD) Grant, wage support to millions of workers, financial relief to small businesses, and the management of the pandemic in educational institutions.

Ramaphosa’s version of the state’s policy response to COVID-19 is consistent with the plaudits South Africa received at the time from the World Health Organization (WHO) (Meyer, 2020), as well as the positive endorsement of various commentators since (Carlitz & Makhura, 2021; Köhler & Hill, 2022; Mabuka et al., 2023; Noyoo, 2023; Staunton et al., 2020). The speed of the response has also been favourably contrasted with the tardy reaction to HIV/AIDs by his predecessor, President Thabo Mbeki (Gumede et al., 2022). Mbeki’s prevarication, AIDS denialism, and opposition to ARVs led to the deaths of over 300,000 men, women and children between 2000 and 2005 by some accounts, including an estimated 33,000 newborns (Chigwedere & Essex, 2010; Chigwedere et al., 2008; Nattrass, 2007).

Critics of South Africa’s policy response to COVID-19 argue that it was heavily reliant on copy-pasting imported policies from Europe and North America that were inappropriate and unnecessary in the African context (Friedman, 2021a, 2021b; Naudé & Cameron, 2021; Ndlovu-Gatsheni, 2020). First, it had a devastating impact on the precarious livelihoods and food security of the urban and rural poor (Anakpo et al., 2023; Hart et al., 2022; Simon & Khambule, 2022; Visagie & Turok, 2021). Second, it imposed a particularly heavy cost on international migrants in the country (Mukumbang et al., 2020; Odunitan-Wayas et al., 2021; Ramachandran et al., 2022). And third, it was highly centralized and exclusionary in its decision-making about the pandemic (Steytler & De Visser, 2021; Naicker, 2020). The national response was coordinated and implemented by an opaque inter-ministerial body called the National Coronavirus Command Council (NCCC), headed by the President (Seekings and Nattrass, 2020). Other levels of government, including the country’s nine provincial governments and numerous municipal governments across the country had little or no input into the strategies and decisions of the NCCC. They were simply charged with implementing the policies and regulations promulgated in a top-down fashion by the NCCC. Other voices – including those of parliament, trade unions, civil society organizations, and NGOs – were shut out altogether from decision-making. As Naicker (2020) has noted, ordinary

citizens were shut out of policy decisions about “what was practical and implementable, coherent and aligned.”

This paper focuses on the militaristic policy response of the South African government to COVID-19 and its impact on the country’s migrant population. In many respects, the challenges of navigating pandemic policies were not that different from those confronting their South African counterparts. However, as the paper argues, migrants were especially vulnerable to pandemic precarity, as well as being systematically excluded from most pandemic relief measures. The next section of the paper provides a description and timeline of the various elements of the government’s lockdown strategy. The sections that follow focus on the militaristic implementation and policing of the lockdown, and the impact of pandemic relief measures by the government. The conclusion identifies some of the knowledge gaps that remain, particularly as they pertain to the pandemic experiences of international migrants in South African cities.

Pandemic Lockdown

On 5th March 2020, South Africa recorded its first confirmed case of COVID-19, when a South African tourist returning from northern Italy tested positive for SARS-CoV-2. At the peak of the first of five waves in July 2020, over 15,000 people per day tested positive (Figure 1). By September 30th, 2020, over 4 million cases and 100,000 deaths had been recorded. South Africa’s reported infection rate during the period February to September 2020 placed it in the top 10 most heavily affected countries globally, following the United States, India, Brazil, Russia, Peru, Colombia, and Mexico. Pandemic prevalence and mortality figures are now widely regarded as underestimates. For example, sero-epidemiological surveys in Gauteng Province (with a population of 16 million) in January 2021 found that 19% of the population were seropositive for SARS-CoV-2 (Madhi et al., 2022). By November 2021, seropositivity had risen to 68% for the two-thirds of the population who had not received a COVID-19 vaccine. In terms of adjusted mortality, Table 1 shows the number of excess deaths during each wave of the pandemic. During the first wave, almost 50,000 deaths (reported plus excess) are attributable to COVID-19, compared with the reported figure of less than 19,000.

Table 2 provides a detailed timeline of actions taken by the government in response to the arrival of SARS-CoV-2 in the country. Eleven days after the first diagnosed case of COVID-19, the government declared a State of Disaster under the National Disaster Act of 2022 (Table 2). Travel bans and border closures were imposed on the same day, and all schools and universities countrywide were shuttered. Inter-provincial travel was also banned. On March 27, 2020, a nation-wide lockdown came into effect, and the police and army were mobilized to enforce it. The initial lockdown lasted 35 days from May 1, 2020. Most businesses, government offices, and shops around the country were forced to close. Essential services, such as hospitals and supermarkets, remained open, but only essential workers in the health, security services, food delivery, and municipal services remained at work. None of the activities in the country’s massive

informal economy were deemed 'essential services' despite their importance as a supplier of affordable food and other necessities to low-income households (Khambule, 2021a). A stay-at-home order meant that, with the exception of essential workers, no-one was allowed to leave their place of

residence between 8 p.m. and 5 a.m. During daylight hours, movement from the residence was restricted to collecting a social grant, accessing medical care, and purchasing food and other necessities. All sales and public consumption of alcohol and tobacco were outlawed.

Figure 1: COVID-19 Daily Infections in South Africa, March 2020 to September 2022

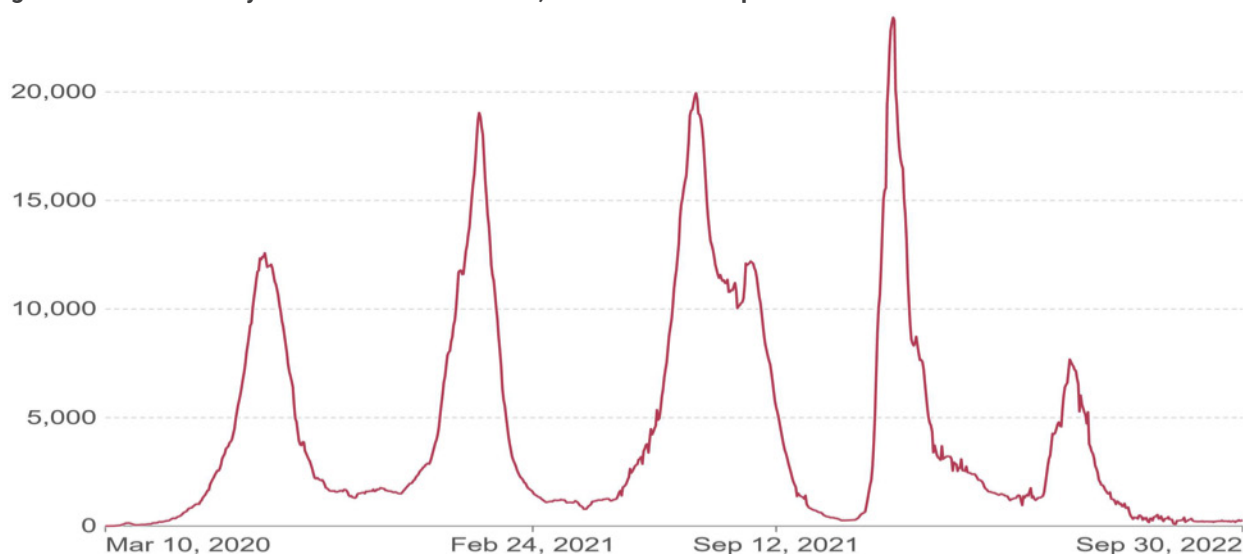


Table 1: Reported COVID-19 Deaths and Excess Natural Deaths

	No. of reported COVID-19 deaths	No. of excess natural deaths	Ratio of reported to excess deaths (%)
Wave 1	18,457	48,857	38
Wave 2	33,128	108,061	31
Wave 3	36,268	116,343	31
Wave 4	5,333	22,483	24
Total	93,186	295,135	31

Source: Bradshaw et al. (2021)

Table 2: Timeline of COVID-19 Lockdown in South Africa, 2020

5-March-2020	First confirmed case of COVID-19 in South Africa.
15-March-2020	President announces initial measures to combat COVID-19, including prohibition on gatherings of >100 people.
16-March-2020	Government declares a State of National Disaster under the National Disaster Act of 2002. The National Coronavirus Command Council established to develop a national response.
16-March-2020	Ports of entry closed (35 out of 53 land ports and 2 of 8 seaports).
17-March-2020	Travel ban on foreign nationals from several high-risk countries, including China, Italy, the USA and the UK.
18-March-2020	First government regulations published. Closure of all schools, universities and colleges. Restrictions on alcohol and tobacco sales.
20-March-2020	South Africa starts to build 40km fence on the border with Zimbabwe on either side of the main border post supposedly to control the spread of COVID-19.
23-March-2020	Business support measures announced by the government include tax subsidies for small businesses and individuals, lower contributions to the Unemployment Insurance Fund (UIF), and a relief fund for businesses that may have their operations affected.
25-March-2020	Minister of Police announces that those found guilty of contravening COVID-19 Disaster Management Regulations to be fined or imprisoned for up to 6 months.
26-March-2020	Hard national lockdown imposed, and lockdown regulations released, including closure of non-essential shops, restaurants, bars and cafes, and recreational parks and facilities. Prohibition on all gatherings. Ban on inter-provincial travel within the country. Countrywide home confinement with strict curfew, including ban on exercise outside the home. Some essential activities allowed between 8 a.m. and 5 p.m, including collecting social grants, accessing medical care, purchasing food.

27-March-2020	First recorded death from COVID-19. Over 170 roadblocks set up on highways nationwide to turn back motorists. SAPS officers mobilized to enforce regulations, supported by the SANDF and Metro Police Departments. Street patrols begin, and 55 people arrested across the country for breach of lockdown. All informal sector activities forced to close.
28-March-2020	Police and soldiers fire rubber bullets at shoppers outside a supermarket in Johannesburg.
30-March-2020	Police shut down migrant-owned informal food businesses (spazas).
2-April-2020	Police remove 500 asylum-seekers and refugees from a church in Cape Town, citing COVID-19 lockdown regulations. Government notice reverses policy on informal food trading but only with written permission from a municipal authority.
5-April-2020	Government announces a plan to decrease the population in 29 overcrowded informal settlements by relocating thousands of residents from their homes to try and slow the spread of the coronavirus.
9-April-2020	Lockdown extended until the end of April.
10-April-2020	Collins Khosa is first death from blunt force trauma after assault by police and soldiers enforcing lockdown.
17-April-2020	Government announces food aid program to deliver food packages to 250,000 households with South African identity documents.
20-April-2020	Government interventions to address the livelihoods of vulnerable groups announced.
21-April-2020	Government announces a fiscal stimulus package of ZAR502 billion, of which ZAR40 billion is for wage protection and ZAR 50 billion for social assistance in the form of Social Relief of Distress (SRD) grants and top-ups to existing social grants.
22-April-2020	Police in Cape Town enforcing lockdown attacked by crowd of 100.
23-April-2020	75th death COVID death. Government announces risk-adjusted strategy (Alert Levels 1-5).
1-May-2020	Lockdown conditions reduced from Alert Level 5 to Alert Level 4. Border closures to international travel continue. Travel between provinces continues to be prohibited apart from the movement of commodities and for special situations such as funerals. Public transport is permitted to function, but with restrictions on the number of commuters and strict hygiene requirements. Gatherings, except for work and funerals, still not allowed. Closure of specific social spaces continues, including shebeens, bars, and events such as conferences, sports and concerts, and social, cultural, and religious gatherings. General curfew from 8 p.m. to 5 a.m. Exercise only allowed between 6 a.m. and 9 a.m. but not in organized groups or more than 5 km from home. Decision to allow cigarette sales announced and then rescinded. Sales of alcohol and cigarettes remain prohibited. Restaurants, bars, cafes, and recreational parks and facilities remain closed. Schools, colleges and universities still closed except for the return of final year medical students.
11-May-2020	Total of 22,583 confirmed cases and 429 deaths.
15-May-2020	Four police officers assault a journalist photographing their operations. Journalist lays charges and goes into hiding, later leaving the country.
22-May-2020	Court case launched in Pretoria High Court to extend SRD benefits to asylum-seekers and migrants holding special permits.
1-June-2020	Lockdown moved from Level 4 to Level 3. North Gauteng High Court found that rules governing Levels 3 and 4 are “unconstitutional” and “invalid.” The Court wrote that the regulations “in a substantial number of instances are not rationally connected to the objectives of slowing the rate of infection or limiting the spread thereof” and that their encroachment on and limitation of rights was not justifiable.
19-June-2020	Court order grants asylum-seekers and migrants with special permits the right to apply for SRD grants.
30-June-2020	Nearly 50,000 people referred to date to the National Prosecuting Authority (NPA) for breaking lockdown regulations. Of these, 24,000 prosecuted, primarily for failure to confine themselves to place of residence and for internal travel in contravention of regulations.
01-July 2020	Supreme Court of Appeal overturns ruling of the North Gauteng High Court.
12-July-2020	State of Disaster extended to 15 August. Reintroduction of alcohol ban and national curfew imposed from 9 pm to 4 am.
23 July 2020	Closure of all schools for four weeks.
17-Aug- 2020	Restrictions lowered to Alert Level 2.
21-Sep-2020	Restrictions lowered to Alert Level 1.
14-Dec-2020	Restrictions return to Alert Level 3. Curfew reintroduced from 9 pm to 6 am, the sale and distribution of alcohol banned, and all public amenities closed.

The government introduced a lockdown grading system on 23rd April, which ranged from Alert Level 1 (the lowest level) to Alert Level 5 (the highest). The effectiveness of the Level 5 lockdown in slowing the spread of COVID-19 is a matter of some dispute (Garbaa et al., 2020; Muller, 2021). Schroder et al. (2021) maintain that the data show “strongly reduced but still supracritical growth after lockdown” while Smart et al. (2023) argue that the early, stringent lockdown did not provide South Africa with “breathing space” by slowing the spread of the disease. On May 1st, the Level 5 lockdown was downgraded to Level 4. Some aspects of the national lockdown were relaxed, but most, including restrictions on personal mobility, remained in place.

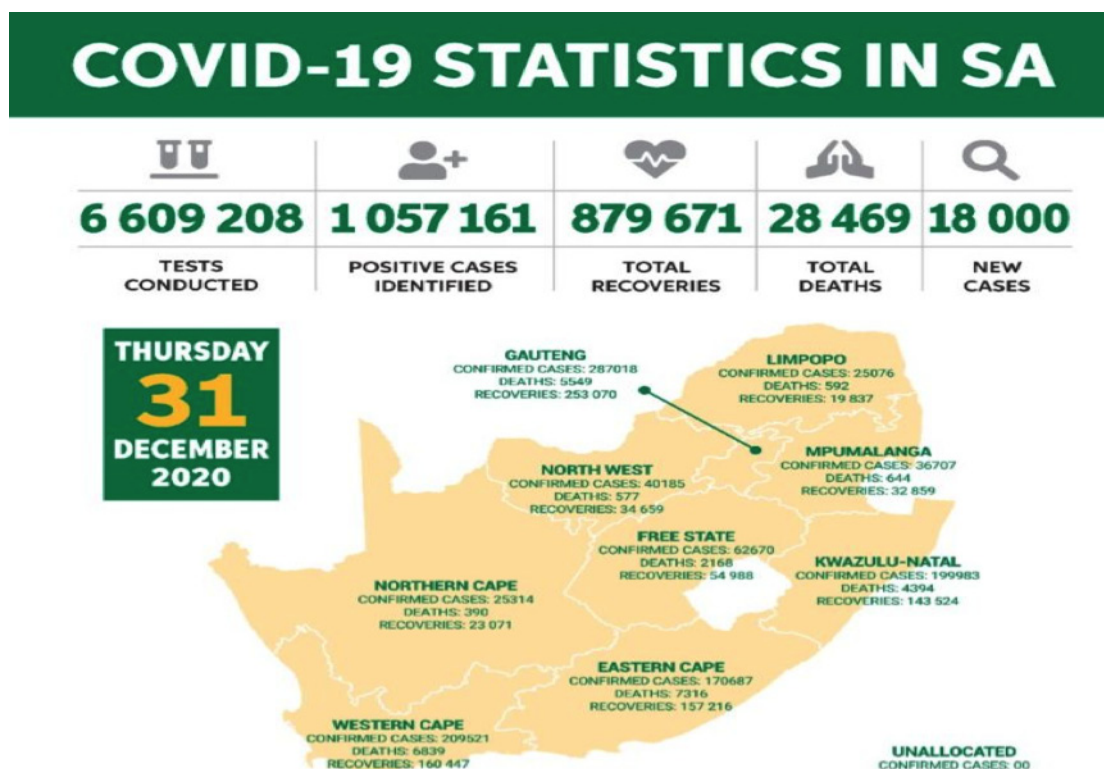
Borders continued to be closed to international travel, except for transportation of essential goods and services. Travel between provinces was still prohibited except for special events such as funerals. Public transport was permitted to function, but with restrictions on the number of passengers and strict load and hygiene requirements. All gatherings, except for work and funerals, were still prohibited. Restaurants, bars, cafes, and recreational parks and facilities remained closed. Sales of alcohol and cigarettes continued to be prohibited. The national stay-at-home order remained in place, although outside exercise was allowed for 3 hours per day not more than 5 km from the place of residence. On June 1st, 56 days after the imposition of the hard lockdown, the government announced a further relaxation to Level 3. On the same day, the Gauteng High Court found that Level 3 and 4 regulations contravened the Bill of Rights in the Constitution. Government appealed the judgment, and the decision was reversed by the Supreme Court (Thomson & Lewin, 2020).

From June 1st, most workers were allowed to return to work if they and their employers followed public health guidelines. Employees who did not need to be in the workplace were urged to continue to work from home. Exercise during the day was permitted, but not in groups. Gatherings remained banned, apart from funerals and workplace meetings. Entertainment, cultural, recreational, and sporting venues remained closed. The sale of alcohol was permitted for home consumption, for restricted hours, and on stipulated days. The sale of tobacco products continued to be banned. Between June and December, the national lockdown moved progressively from Level 3 to Level 1. However, in December 2020, South Africa experienced a second COVID-19 wave, and Level 3 was re-imposed at the end of December. At that stage, South Africa had over one million confirmed cases and over 28,000 deaths from COVID-19 (Figure 2).

Militaristic Enforcement

On the eve of the lockdown in March 2020, the South African Minister of Police characterized the lockdown as “war against a common enemy, the corona virus. Whoever breaks the law and chooses to join the enemy against the citizens, will face the full might of the law and police will decisively make sure that we defend the people of South Africa” (SAG, 2020). Over 24,000 police officers were mobilized to enforce the regulations, augmented by municipal police departments and the army (Lamb, 2023; Mkhwanazi et al., 2020). When he commissioned the army detachments prior to their deployment, President Ramaphosa dressed in full battle fatigues. Throughout the lockdown, government ministers regularly used military metaphors to describe and justify the state response. Militaristic words licensed

Figure 2: Mapping of COVID-19 at End of 2020



Source: Sacoronavirus (2020).

militaristic actions. As Kriegler et al. (2022: 241) note, lockdown enforcement by armed police and the army resulted in “a dramatic expansion of police duties, surveillance, and visibility.”

Because breach of lockdown regulations was a criminal offence punishable by fine or imprisonment, the police saw their role as a crime-fighting operation. According to Lamb (2023: 142), they viewed large sections of the South African population as “potentially criminal and (who) should be targets of aggressive forms of policing.” At the same time, officials, and politicians were quick to celebrate the fact that the lockdown had reduced the incidence of serious crime (Lamb, 2023). They were less forthcoming about the increase in gender-based domestic violence that accompanied the stay-at-home order (Nduna & Tshona, 2021). Boots-on-the-ground enforcement by the police and army focused on informal settlements and other over-crowded low-income neighbourhoods (Langa & Leopeng, 2020; Nyashanu et al., 2020). As Parker (2023: 45) recalls, “over-reach and brutality by soldiers and police immediately followed – a response particularly evident in impoverished township settings.”

Compliance with stay-at-home and social distancing orders was all but impossible in these areas (Durizzo et al., 2021; Van Wyk & Reddy, 2022), which allowed the police and army to dramatically improve their crime-fighting statistics through mass arrests. Apprehensions for breach of lockdown reached 300,000 by June 2020, more than in any other country. Complaints about brutal police and army treatment abounded on social media, and there were several widely publicized deaths at the hands of the enforcers (Faull et al., 2021; Lamb, 2023). By April 2021, the total number of arrests had exceeded 400,000. Veteran South African journalist Ferial Haffajee (2020) called the lockdown enforcement “death by jackboot” with a “breath-taking level of police violence.” For his part, President Ramaphosa dismissed the actions of the police and army as “over-enthusiasm”.

Migrants and refugees in low-income neighbourhoods were caught up in the enforcement dragnet. Chew et al. (2020: 47-48) argue that the lockdown had a disproportionate impact on migrant communities, mainly because the regulations criminalized anyone who violated the regulations. Misconduct by law enforcement produced a “slew of human rights violations and deprivations.” The South African police came into the pandemic with an unhappy record of xenophobic targeting and abuse of vulnerable migrants, refugees and asylum-seekers (Tawodzera & Crush, 2023). With the new weapon of lockdown in their arsenal, misconduct towards migrants intensified. Arbitrary arrests of non-citizens for minor transgressions were common, and the police were also able to target and arrest undocumented migrants at their places of residence (Chew et al., 2020). Most South Africans arrested for violation of lockdown regulations were quickly released on payment of a fine. In contrast, some non-citizens experienced indefinite detention.

In October 2019, the Cape Town city police used rubber bullets and pepper spray to forcibly remove refugees protesting at the UNHCR offices about their treatment in South Africa

(Mafolo & Shoba, 2019). Over 600 refugees subsequently took shelter in the Central Methodist Church. As one of their banners read: “No more SA (South Africa). Refugees are not welcome. No protection. No future for us. Only xenophobia is our food that we eat” (Mafolo & Shoba, 2020). The protesters demanded that the UNHCR arrange their relocation to a safe third country. For several months, the City of Cape Town tried unsuccessfully through court orders to evict the refugees from the church. In late February, the City obtained an interdict to evict a group of refugees camped outside the church. And on April 2nd, under cover of COVID-19 lockdown regulations, police wearing riot gear forced their way into the church and forcibly removed the refugees to two encampments on the outskirts of the city. There, they were subject to all the lockdown restrictions. In late 2022, 500 refugees, including many children, were still living in one of these camps called Paint City in ‘wretched’ conditions (Washinyira, 2022).

Many migrants in South Africa are informally employed in sectors such as street vending, casual day labour, and domestic work. Employment and incomes in all three sectors were severely affected by the pandemic. A significant number of refugees and migrants in South Africa depend on employment and self-employment in the urban informal economy for their livelihoods. They play a particularly important role in making food accessible in low-income settlements and townships through street vending and the operation of small shops (or spazas). When the lockdown was first imposed, the government announced that only supermarkets would remain open for food purchases, which effectively choked off the food supply to the urban poor (Battersby, 2020). The policy was quickly reversed under pressure from civil society organizations, but only South African-owned spazas were initially allowed to continue to operate. The police forced many migrant-owned spazas to stay closed (Sizani, 2020). According to Skinner & Watson (2020), the South African government policy was aimed at accomplishing the longer-term objectives of formalizing the informal economy while excluding or targeting foreign nationals.

After two weeks of lockdown, informal food vendors were allowed to resume operating, but only if they sold uncooked foods and had an existing municipal permit. The chaotic permitting system put up another barrier for migrants. All traders in the informal sector faced challenges, including problems in getting permits and the absence of information on where to access them (Skinner & Watson, 2020). Further, when many food traders went to municipal offices, they found that some had no system in place for issuing permits or made unreasonable and obstructive demands (Wegerif, 2020). Other difficulties included the closure of fresh-produce wholesale markets, transport problems, and confiscation of supplies by the police (Skinner and Watson, 2020). In many municipalities, only South Africans were issued with permits, and law enforcement began aggressively shutting migrant-owned businesses. Migrants who were denied or did not have permits adopted various methods to continue to operate while avoiding the long arm of the lockdown law (Mbeve et al., 2021; Rwafa-Ponela et al., 2022).

Pandemic Relief

The economic and labour market impact of rolling lockdowns was particularly devastating for poorer communities. One-third of the workforce lost earnings through temporary lay-offs during the hard lockdown. Statistics South Africa (2020) further estimates that 2.2 million jobs were lost between April and June 2020 compared with the same period in 2019 (Figure 3), primarily in services, manufacturing, construction and finance. The number of domestic workers in private households declined by 311,000, while the agricultural sector shed 66,000 jobs. Almost 30% of informal jobs were lost, compared to 8% of formal sector jobs (giving an overall decline of 13%). This means that nearly 1.5 million informal jobs and 840,000 formal jobs were lost in the early months of the pandemic. Other sources estimate that as many as 3 million jobs formal and informal jobs were lost between February and April 2020 (Ranchhod & Daniels, 2021). 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 & Skinner, 2020). Among the informal self-employed who were working, average earnings decreased by 27% and typical earnings by 60%. By the end of 2020, despite two quarters of employment growth, the number of employed people had fallen by nearly 1.5 million from pre-pandemic levels, and the wages of workers who still had jobs had fallen by 10-15% (World Bank, 2021).

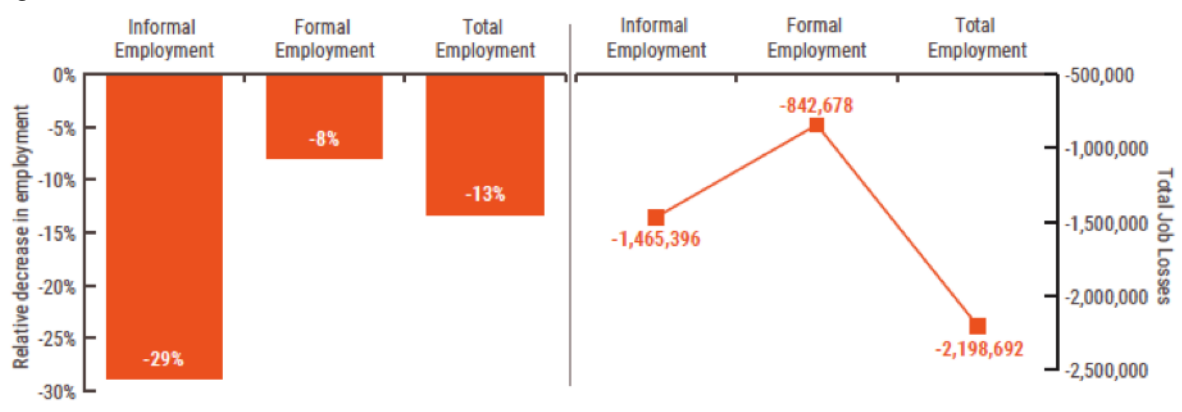
On 21 April 2020, the government announced it was allocating ZAR500 billion for pandemic relief. This included ZAR370 billion to businesses in the form of loan guarantees, tax and payment deferrals and holidays, and wage subsidies. Only 10% was directed to new and existing social protection programs (Muller, 2021). South Africa's subsequent expansion of social protection in the second half of 2020 has been described as a tale of "bold promises, constrained capacity, and stumbling delivery" (Seekings, 2020). The longer-term implications for South Africa's system of social protection are also uncertain (Bassier & Leibbrandt, 2020; Noyoo, 2023). Government rolled out three forms of cash assistance to individuals and households: (a) the Special COVID-19 Social Relief of Distress (SRD) Grant, (b) the Temporary Employer-Employee Relief Scheme (TERS), and (c) top ups to existing social protection grants.

The SRD and TERS were announced three weeks into the lockdown as part of a ZAR500 billion fiscal stimulus and social relief package. The SRD was intended for unemployed individuals in poor households. As many as 10 million individuals were eligible for the ZAR350 per person per month grant, while 4.3 million applications were approved by June 2020, a figure that had risen to over 6 million in early 2021 (Bhorat et al., 2021). According to Moses and Woolard (2023: 170), the SRD was poorly targeted and "beleaguered by both errors of inclusion and errors of exclusion." For example, an estimated 15 million South Africans were eligible for the SRD program. By early June 2020, 6.5million applications had been received, but only 600,000 grants paid. Around 60% of rejected applicants were actually eligible for grants (Schotte & Zizzamia, 2023). Skinner et al. (2021: 12) were left to conclude that "the vast majority of informal wage workers who lost their jobs in 2020 have been left without any income or only the minimal support offered through the COVID-19 SRD Grant."

The TERS was a wage subsidy scheme designed to support firms and workers in the formal sector. The policy targeted workers who suffered income loss because of full or partial closure of their employer's operations (Köhler and Hill, 2022). Pandemic benefits ranged from 38% to 60% of a worker's wage subject to lower (ZAR3,500) and upper (ZAR6,730) limits. Government used existing structures, databases, and legislation to roll out the benefits. Around 1.8 million workers benefitted during the initial lockdown (Moses & Woolard, 2023). The TERS was extended and revised as the pandemic progressed, and by 2022, nearly 6 million workers had benefitted. According to Moses and Woolard (2023), the TERS disbursements were plagued by large-scale fraud and other irregularities, including payments to government employees, deceased persons, and students).

Prior to the pandemic, the government provided 18 million social grants every month, of which the child support grant (CSG) was the most important. A total of ZAR400 per month was paid to caregivers for each child and amounted to 12.8 million individual grants (or 71%) of the total. Top-ups to existing social grant beneficiaries were introduced in May 2020. Child support grants were topped up by an additional ZAR300 per child for May, and by ZAR500 per caregiver (regardless of the number of children) from June to October.

Figure 3: Pandemic-Related Job Losses in South Africa



Source: Skinner et al. (2021: 4)

Other grant benefits (such as old age pensions) were topped up by an additional ZAR250 per month for six months. Bassier & Leibbrandt (2020) estimate that the caregiver's allowance and COVID-19 SRD grant prevented over 5 million people from falling below the food poverty line.

April 21st, the President announced that government would also provide financial support for SMMEs through grants, loans, and debt restructuring. However, support packages were restricted to businesses which were 100% owned by citizens whose employees were at least 70% South African. The Minister of Small Business Development (DSBD) announced several initiatives to assist small businesses, focused on debt relief for medium and small enterprises. ZAR500 million was allocated to small businesses to assist with payroll, rent, and utilities, but disbursed in the form of a few large loans to a small number of applicants. A Township and Rural Enterprise Programme (TERP) was later launched to provide a loan and grant package of up to ZAR10,000. A grant of ZAR1,000 was added in September 2020 to fruit and vegetable vendors. To qualify for TERP funding, enterprises had to be registered with the Companies Intellectual Property Commission, the South African Revenue Service, and the Unemployment Insurance Fund. (SARS) and the UIF, which effectively excluded virtually all informal enterprises (Skinner et al, 2021).

Migrant Exclusions

The number of international migrants who endured the pandemic in South Africa rather than their home countries is not known. However, the time between the announcement of a total lockdown and its implementation was a matter of days, which made it difficult to arrange transportation home. Once the lockdown came into effect, it became much more difficult even to return to neighbouring countries. There is little evidence that the lockdown or its progressive easing during the rest of 2020 and 2021 precipitated an exodus from South Africa. As a result, Census 2022 results can be taken as a very rough approximation of the numbers of migrants in South Africa during the pandemic. Of the 2.36 million foreign-born migrants recorded by the census, 22% said they held South African citizenship, leaving around 1.83 million non-citizens. The main countries of migrant origin are shown in Figure 4.

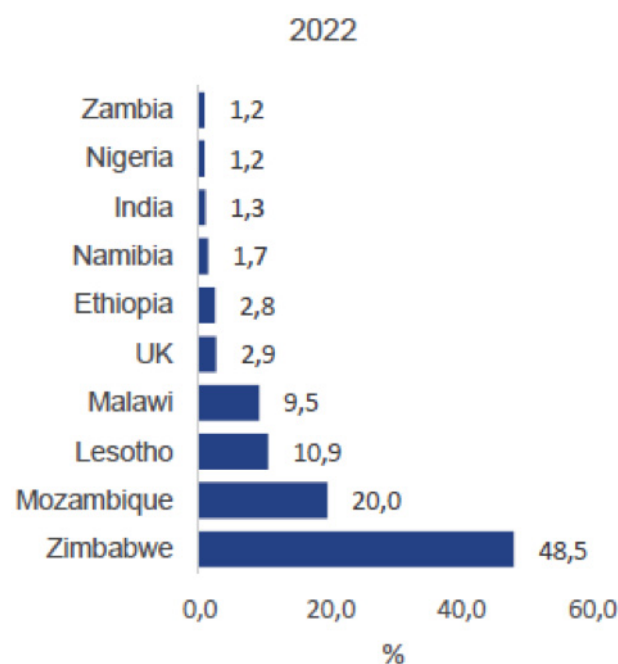
Pandemic precarity for migrants and refugees in South Africa took various forms and elicited different coping strategies. Migrants trapped in South Africa by lockdown and mobility restrictions were unable to return home. The essays in Angu et al. (2022) all demonstrate the particular hardships of the lockdowns on migrants and refugees. Several other case studies have demonstrated amongst the migrant population, asylum-seekers, refugees, and irregular migrants felt disproportionate lockdown effects by virtue of their precarious legal status, informal employment, and class and gender position (Mukumbang et al., 2020; Nhengu, 2022). As Chekero (2023) observes, "this inevitably placed many migrants and forced migrants in a worse position than nationals. Thus, with refugees losing their livelihoods, particularly in the informal economy, and

civil society and international agencies unable to assist all, many were stranded and unable to meet their own and their families' needs." As a direct result, they experienced a rapid increase in "the triple burden of food insecurity, poverty and malnutrition compounded with social injustice and income inequality" (Odunitan-Wayas et al., 2021).

The country's sizable population of international migrants were systematically ostracized by COVID-19 relief programming. Despite widespread layoffs and unemployment in the formal and informal sectors and a precipitous decline in household income, many migrants were ineligible for government social grants, wage support, and financial relief for small businesses (Mukumbang et al., 2020; Mushomi et al., 2022; Mutambara et al., 2022; Odunitan-Wayas et al., 2021). Applicants for the SMME support programmes had to be South African citizens, 70% of their employees had to be South African, and non-citizen employees had to have work permits. As Skinner et al. (2021) note, "the exclusion of immigrants, including refugees and asylum seekers, is not only generating extreme hardship among a particularly vulnerable group but ...is likely to be unconstitutional." Because the TERS programme and its mode of implementation were confined to registered formal sector employees and excluded individuals working informally, as well as refugees and asylum-seekers, few migrants appear to have benefitted. Prior to the pandemic, social grant recipients had to be South African citizens, permanent residents or recognized refugees living in South Africa, which meant that only these groups were eligible for the top-ups, excluding many migrants from benefitting from this form of pandemic assistance.

Vulnerable African migrants and asylum seekers were also disadvantaged by their exclusion from the SRD grant programme (Nzabamwita & Dinbabo, 2022). The exclusion and marginalization of migrant groups from the South African

Figure 4: Main Countries of Migrant Origin



government's COVID-19 social grants was litigated by a prominent NGO, the Scalabrini Centre of Cape Town. On 22 May 2020, the Centre initiated urgent legal action in the Pretoria High Court concerning the exclusion of migrants with special permits (who were primarily from Angola, Lesotho and Zimbabwe) and asylum-seekers from receiving the COVID-19 Social Relief and Distress (SRD) Grant (SAFLII, 2020). The argument, which was uncontested by the respondent Minister of Social Development, focused on the exclusion of migrant groups from government financial relief packages, food parcel distribution, and the expiration of visas during the lockdown, which had led to job losses, poor access to banking services, and no other income source. Scalabrini argued before the Court that there had been:

A surge in asylum seekers and permit holders requesting assistance for basic needs such as food. These persons stated that they had been self-employed or running informal businesses until they were prevented from doing so by the lockdown. Some had been employed in industries such as restaurants or the hospitality sector which had also been impacted by the lockdown. Their children had been unable to access the school funding programmes and parents had no income. The conditions in which the asylum seekers found themselves were worsening by the day as they had neither savings nor sources of income. The suffering of these persons and their families was immediate and could possibly lead to irreparable harm. It is logical to accept that the asylum seekers and special permit holders have not escaped the negative consequences of not only the pandemic but also of the lockdown. This would inevitably come about not, only due to the inability to move and work but also through the inability to secure resources to buy food and other basic necessities for their families. It is also common cause that the asylum seekers and permit holders are as it were "locked in" in South Africa due to closed borders during lockdown, economic and other circumstances in their countries of origin.

The ruling by the High Court on 18 June 2020 declared that the denial of relief to special permit holders and asylum-seekers was unlawful, unconstitutional, and invalid. As the Court observed: "In the context of social assistance for asylum seekers and special permit holders, the interrelatedness of the rights of equality, human dignity and access to social assistance cannot be overemphasised. Conditions created by COVID-19 and the subsequent lockdown declaration served only to highlight the need for State authorities to bear this interrelationship in mind when implementing the relevant regulations. Failure to do so could only lead to the result that the regulations be declared unconstitutional such as in the present case" (SAFLII, 2020).

An immediate consequence of the Court's decision was that asylum-seekers and special-permit holders could apply for SRD grants. The landmark judgment theoretically broadened access for over 200,000 special-permit holders from Angola, Lesotho, and Zimbabwe and almost 80,000 asylum-seekers. Table 3 shows how many migrants applied for SRD grants by province of application. In total, just over 54,000 applications were received (compared with 15.7 million citizens). Of these, 34,000 (62%) were from permanent residents and 5,700 were from refugees (10%). In other words, only around 7% of refugees applied for support. Another 5,700 applicants were asylum-seekers (10% of total migrant applications and just 3% of registered asylum-seekers. A total of 9,000 Special Permit holders (or 18% of the migrants) applied for grants. Over 90% of the applicants were from Lesotho. Less than 600 Zimbabweans out of an eligible population of over 150,000 applied. Perhaps cognizant of the fact that their applications would likely be rejected, the rest could not be bothered to apply. Overall, only 3% of migrants (other than naturalized citizens and permanent residents) applied for SRD grants, primarily in Gauteng and Limpopo Province. However, they faced administrative obstacles, bureaucratic constraints, documentation difficulties, delays, and language barriers when trying to access government SRD support (Khan & Kolabhai, 2021). How many actually benefitted from grants for which they applied prior to the termination of the SRD in April 2021 is unknown.

Table 3: Migrant Applications for Social Relief of Distress Grants

	Permanent residents	Refugees	Asylum-seekers	Zimbabwe special permits	Lesotho special permits	Angola special permits	Totals
Eastern Cape	881	706	549	53	149	44	2,382
Free State	883	51	312	16	816	5	2,073
Gauteng	10,661	1,818	1,273	247	5,080	13	19,092
Kwazulu-Natal	2,677	855	931	87	366	25	4,941
Limpopo	12,085	178	524	47	357	23	13,214
Mpumalanga	4,136	184	358	46	273	12	5,009
North West	1,244	72	285	32	1,127	17	2,777
Northern Cape	164	20	177	7	81	10	459
Western Cape	1,197	1,799	1,292	33	117	23	4,461
Total	33,928	5,683	5,701	568	8,366	172	54,418

Source: Statistics South Africa (2024)

Pandemic Impacts on Food Security

Hart et al. (2022) argue that “the state was unprepared and unable to mitigate the lockdown effects. Lockdown measures focused on controlling the virus and did not consider the effects on vulnerable households.” However, once it became apparent that the lockdown was causing a dramatic increase in food insecurity, various emergency measures were announced. In mid-April, 28% of adults reported that they had gone to bed hungry, a figure that had risen to 42% by mid-2020. The government’s response to growing food insecurity was to introduce a food parcel distribution program in early April, which aimed to target 250,000 households. The target was never reached as the program was undermined by delays and corruption, and eventually abandoned (Hart et al., 2022; Mudau, 2022). In cities like Cape Town, civil society organizations were far more effective than the state in rolling out emergency food relief (Kroll & Adelle, 2022). Migrants were systematically precluded from accessing the government program as only those with South African IDs were deemed eligible, an exclusionary policy that did not apply to civil society schemes.

Seekings (2020) argues that “the national government failed to provide poor people with food during the lockdown it imposed on them.” It quickly became apparent that the lockdown was causing a dramatic increase in hunger and food insecurity in poorer communities. The closure of all schools and school feeding programs, which deprived nearly 10 million children of an important supplement to their daily diet is cited as a prime example of this failure. On the other hand, Khambule (2021b) argues that a fiscally-constrained state quickly implemented a range of ‘counter-cyclical’ measures with variable success and little remedy for informal sector workers: “the unintended consequence of the government’s job protection measures is the unprecedented loss of employment within the precarious informal sector that left millions without recourse.”

The government’s initial response to the obvious signs of food distress was a food parcel distribution program aimed at 250,000 low-income households. The nutritional value of the food parcels was questionable (Vermuelen et al, 2020). However, South Africans reaped little benefit from a food distribution programme that was compromised by delays and corruption, and eventually abandoned (Mudau, 2022; Mokoena et al., 2023; Ndinda et al., 2023). Civil society organizations were much more effective in rolling out

emergency food relief to those in need during the course of 2020 (Kroll & Adelle, 2022; Seekings, 2020). In October 2020, the Department of Social Development (DSD) was allocated ZAR1 billion for food relief and had distributed 2.6 million food parcels by April 2021, reaching an estimated 11.6 million people (van der Berg et al., 2021). Another 385,000 food parcels were distributed to 1.9 million people through partnerships with non-profits, corporate social responsibility programs, and faith-based organizations. However, as Odunitan-Wayas et al. (2021) point out, migrants were generally excluded from state-funded food relief and had to depend on charity from community and non-governmental organizations such as community action networks and faith-based organizations. On a farm in the Western Cape, one woman migrant from Zimbabwe described the impact of exclusion from government relief as follows:

Since we failed to go back to Zimbabwe, when some of us got food, we put it together (and) that food was shared among all Zimbabweans in order to survive. The government was helping its own people, nothing for Zimbabweans. The government they were writing names for food parcels just for their own people; nothing for Zimbabweans. It was very tough. We suffered, we really suffered. We will never forget that time. We thought that the government is going to see what they can do with the visitors here, but nothing, they did nothing at all (quoted in Fortuin (2021: 68))

A survey of 500 Zimbabwean migrant households conducted in Cape Town and Johannesburg in mid-2021 found that 90% of households reported worse or much worse household economic conditions than before the pandemic (Ramachandran et al., 2022; Tawodzera & Crush, 2022). Table 4 clarifies the reasons for the prognosis with 87% reporting a loss of household income, 72% that they had lost their employment, and 70% that other household members had also lost their jobs. Just over three-quarters (77%) had less food to eat in the household and 87% said that food had become much more expensive.

At the time of the survey, the HFIAS and HFIAP food security measurements showed that 43% of the migrant households were severely food insecure and only 8% were completely food secure (Table 5). The main coping strategies being deployed by households included relying on less preferred and less expensive foods (79%) and reducing the number of

Table 4: Pandemic Impacts on Employment, Incomes and Food Access

	Yes (%)	No (%)	Neither (%)
My household experienced a loss of income	86.9	9.7	3.4
Food became much more expensive in South Africa	86.7	4.4	8.9
My household in South Africa had less food to eat	76.7	11.3	12.0
I sent less money to Zimbabwe	76.7	11.9	11.4
I became unemployed and was unable to find a job	72.2	20.1	7.7
Others in my household became unemployed and were unable to find a job	70.2	22.7	7.1
It was more difficult to access food from informal traders	60.0	29.2	10.8
Members of my household became ill because of COVID-19	20.7	74.0	5.3

	No.	%
Severely food insecure	214	42.5
Moderately food insecure	201	40.0
Mildly food insecure	47	9.3
Food secure	41	8.2

meals consumed in a day (56%) (Table 6). As Table 4 also shows, 60% of households found it more difficult to access food from informal traders during the pandemic. A pre-pandemic survey of the food buying strategies of Zimbabwean migrant households in the same neighbourhoods of Cape Town and Johannesburg found 93% of respondents regularly bought food from informal vendors and 38% did so every day (Crush and Tawodzera, 2016). Hence, the disruptions to the informal sector during 2020 referred to above clearly impacted on the ability of migrant households to access cheap, affordable food.

Many migrant households depend on Zimbabwean informal vendors for culturally-appropriate foods that are not readily available in South Africa. This may explain why so many households were reliant on less preferred foods. But it also raises the question of the extent to which food insecurity was driven by the challenges confronting Zimbabwean food vendors in the informal sector of the two cities. Interestingly, 26% of the households in the survey noted that one of their coping strategies was to consume food from their own food vending business during the pandemic. Therefore, household food insecurity put extra demands on the informal food business of households involved in the sector, but was also mitigated to a degree by being able to access food from the business.

A survey of 450 migrant informal food enterprises in Cape Town and Johannesburg during the pandemic revealed some of the difficulties and challenges facing their operations. Crush and Tawodzera (2024) develop a scale to mea-

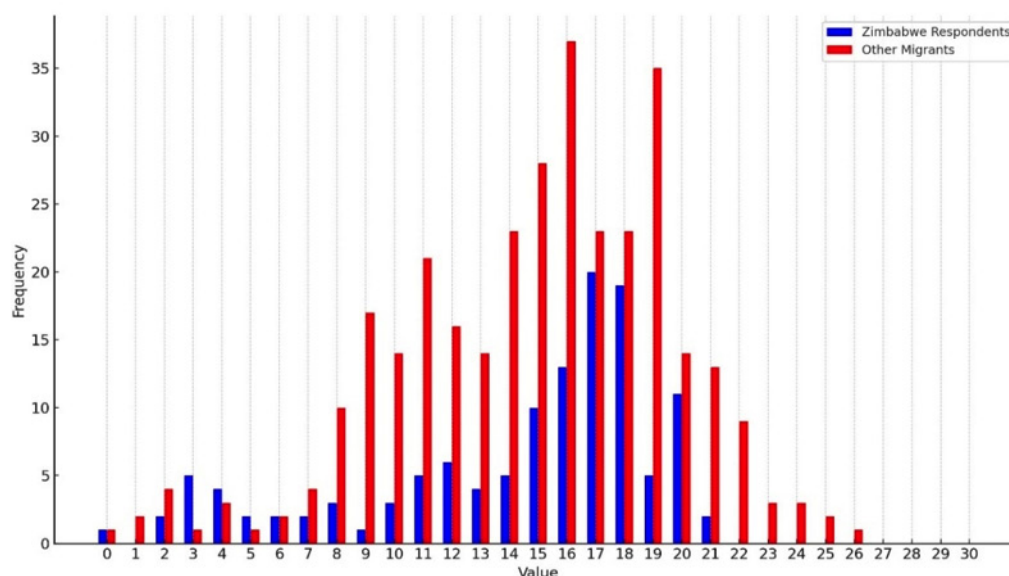
sure the impact of the pandemic on these food enterprises. The Informal Pandemic Precarity Scale (IPPS) rates each enterprise on a scale from 0 to 30 with the higher the score, the greater the negative impact. Figure 5 shows the distribution of all migrant food enterprises on the IPPS. The general distribution of Zimbabwean enterprises (the largest group by country of origin) mirrors that of other migrants although there are more Zimbabwean enterprises with low impact (IPPS<5) and more with very negative impact (IPPS>18).

Conclusion

This paper began with the triumphalist narrative of the South African President that the policy response to COVID-19 was an unheralded success in managing the health crisis and the socio-economic fallout of the pandemic. There is now an evidence-based counter-narrative that takes issue with the aims, rationale, mode of implementation, and effectiveness of applying a version of the draconian Chinese lockdown model to the South African context. Initial public and media support for the Declaration of the State of National Disaster and COVID-19 in mid-March quickly evaporated once a nationwide lockdown was imposed and ruthlessly enforced by the country's national and local police and army. South Africa was certainly not the only African country to adopt a militaristic, crime-fighting approach to policing the lockdown (Haider et al., 2020). Nor was it the only country in which law enforcement abused its new powers (Katana et al., 2021; Mutahi and Wanjiru, 2020; Nkomo and Mangiza, 2021; Onuoha et al., 2021).

In the past 7 days, did you or your household:	No.	%
Rely on less preferred and less expensive foods	398	79.1
Reduce the number of meals consumed in a day	279	55.5
Borrow food or rely on help from friends/relatives	147	29.2
Consume food from food vending business	133	26.4
Limit portion size at mealtimes	118	23.5
Purchase food on credit	92	18.3
Go a whole day without eating	20	4.0
Beg for food	10	2.0
Restrict adult consumption so children can eat	5	1.0
<i>Note: Multiple-response question</i>		

Figure 5: Distribution of Pandemic Precarity Scores of Migrant Food Businesses



In the paper, we show, first, that provincial and municipal governments in South Africa had little or no say in the deliberations of the national government in the formulation of the pandemic response. Their designated role was to supply the resources and personnel to implement national policy. Second, the militaristic implementation of the lockdown led to widespread abuse of human rights, mass arrests and detentions of people for the “crime” of breach of lockdown regulations, as well as enormous economic hardship as whole neighbourhoods transitioned from pre-pandemic low-income to pandemic no-income status. Third, the effectiveness of pandemic relief measures was compromised by slow roll-out, poor messaging, wastage, and corruption. As a result, the extent to which pandemic mitigation served to mitigate pandemic pain in the cities has yet to be established. Fourth, South Africa is one of the most-urbanized countries in Sub-Saharan Africa, so the burden of pandemic lockdown and draconian enforcement inevitably fell squarely on the country’s cities, and within cities, on its low-income townships and sprawling informal settlements. Many of these neighbourhoods are populated by internal and international migrants who rely on temporary work and the informal sector for household income. To assess the devastating impact of the pandemic response on the country’s urban population is, therefore, by extension, to examine its impact on internal and international migrants (Crush et al., 2015; Ramachandran et al., 2022; Tawodzera & Crush, 2022).

References

1. Anakpo, G., Hlungwane, F., & Mishi, S. (2023). The impact of COVID-19 and related policy measures on livelihood strategies in rural South Africa. *AfricaGrowth Agenda*, 20(2).
2. Angu, P., Masiya, T., Gustafsson, K., & Mulu, N. (Eds.). (2022). *South African-based African migrants’ responses to COVID-19: Strategies, opportunities, challenges and implications*. Langaa RPCIG.
3. Bassier, I., & Leibbrandt, M. (2020). Social protection in response to COVID-19. Paper 2: Poverty impact and incidence of social protection measures. Paper commissioned by the Presidency of South Africa, Pretoria.
4. Battersby, J. (2020). South Africa’s lockdown regulations and the reinforcement of anti-informality bias. *Journal of Agriculture and Human Values*, 37, 543-544.
5. Bhorat, H., Oosthuizen, M., & Stanwix, B. (2021). Social assistance amidst the COVID-19 epidemic in South Africa: A policy assessment. *South African Journal of Economics*, 89(1), 63-81.
6. Bradshaw, D., Dorrington, R., Laubscher, R., Moultrie, T., & Groenewald, P. (2021). Tracking mortality in near to real time provides essential information about the impact of the COVID-19 pandemic in South Africa in 2020. *South African Medical Journal*, 111(8), 732-740.
7. Carlitz, R., & Makhura, N. (2021). Life under lockdown: Illustrating tradeoffs in South Africa’s response to COVID-19. *World Development*, 137, 105168.
8. Chekero, T. (2023). Borders and boundaries in daily urban mobility practices of refugees in Cape Town, South Africa. *Refugee Survey Quarterly*, 42(3), 361-381.
9. Chew, V., Phillips, M., & Yamada Park, M. (2020). COVID-19 impacts on immigration detention: Global responses. *International Detention Coalition and HADRI/ Western Sydney University*.
10. Chigwedere, P., & Essex, M. (2010). AIDS denialism and public health practice. *AIDS and Behavior*, 14, 237-247.
11. Chigwedere, P., Seage, G., Gruskin, S., Lee, T-H., & Essex, M. (2008). Estimating the lost benefits of antiretroviral drug use in South Africa. *Journal of Acquired Immune Deficiency Syndromes*, 49(4), 410-415.
12. Crush, J., & Tawodzera, G. (2016). *The Food Insecurities of Zimbabwean Migrants in Urban South Africa*. AFSUN Urban Food Security Series No. 23, Cape Town.
13. Crush, J., & Tawodzera, G. (2024). International Migration, Pandemic Precarity, and the Informal Food Sector

in South Africa. MiFOOD Paper No. 17, Cape Town and Waterloo.

14. Crush, J., Chikanda, A., & Skinner, C. (Eds.). (2015). *Mean Streets: Migration, Xenophobia, and Informality in South Africa*. Ottawa: IDRC.
15. Durizzo, K., Asiedu, E., Van der Merwe, A., Van Niekerk, A., & Günther, I. (2021). Managing the COVID-19 pandemic in poor urban neighborhoods: The case of Accra and Johannesburg. *World Development*, 137, 105175.
16. Faull, A., Kelly, J., & Dissel, A. (2021). Lockdown lessons: Violence and policing in a pandemic. *Southern Africa Report No. 44*, Institute for Security Studies, Pretoria.
17. Fortuin, C. (2021). 'It's not easy to leave your family and come to South Africa': The working and living conditions of migrant woman farm workers in South Africa. Retrieved from https://www.academia.edu/84852182/_It_is_not_easy_to_leave_your_family_and_come_to_South_Africa_The_Working_and_Living_Conditions_of_Migrant_Women_Farm_Workers_in_South_Africa?uc-sb-sw=36765017
18. Friedman, S. (2021a). In but not of Africa: A divided South Africa faces COVID-19. *Round Table*, 110(1), 16-30.
19. Friedman, S. (2021b). *One Virus: Two Countries: What COVID-19 Tells Us About South Africa*. Johannesburg: Wits University Press.
20. Garbaa, S., Lubumaa, J., & Tsanoua, B. (2020). Modeling the transmission dynamics of the COVID-19 pandemic in South Africa. *Mathematical Biosciences*, 328, 108441.
21. Gumede, N., Durden, E., & Govender, E. (2022). Presidential communication approaches and the impact on public health: A comparative analysis of three South African presidents' communication on AIDS and COVID-19. *African Journal of AIDS Research*, 21(2), 143-151.
22. Haffajee, F. (2020). Ramaphosa calls 11 lockdown deaths and 230,000 arrests an act of 'over-enthusiasm' – really! *Daily Maverick*, June 1.
23. Haider, N., Osman, A., Gadzekpo, A., et al. (2020). Lockdown measures in response to COVID-19 in nine sub-Saharan African countries. *BMJ Global Health*, 5, e003319.
24. Hart, T., David, Y., Rule, S., Titivanhu, P., & Mtyingizane, S. (2022). The COVID-19 pandemic reveals an unprecedented rise in hunger: The South African government was ill-prepared to meet the challenge. *Scientific African*, 16, e01169.
25. Katana, E., Amodan, B., Bulage, L., Ario, A., Fodjo, J., Colebunders, R., & Wanyenze, R. (2021). Violence and discrimination among Ugandan residents during the COVID-19 lockdown. *BMC Public Health*, 21, 467.
26. Khambule, I. (2021a). The effects of COVID-19 on the South African informal economy: Limits and pitfalls of government's response. *Loyola Journal of Social Sciences*, 34(1), 91-109.
27. Khambule, I. (2021b). COVID-19 and the counter-cyclical role of the state in South Africa. *Progress in Development Studies*, 21(4), 380-396.
28. Khan, F., & Kolabhai, M. (2021). Bureaucratic barriers to social protection for refugees and asylum seekers during the COVID-19 disaster in South Africa. *African Human Mobility Review*, 7(2), 74-94.
29. Köhler, T., & Hill, R. (2022). Wage subsidies and COVID-19: The distribution and dynamics of South Africa's TERS policy. *Development Southern Africa*, 39, 689-721.
30. Kriegler, A., Moul, K., & van der Spuy, E. (2022). Policing South Africa's lockdown. *European Law Enforcement Research Bulletin SCE*, 5, 239-249.
31. Kroll, F., & Adelle, C. (2022). Lockdown resilience and emergency statecraft in the Cape Town food system. *Cities*, 131, 104004.
32. Lamb, G. (2023). Police legitimacy and the SAPS's policing of the COVID-19 pandemic. In P. Fourie & G. Lamb (Eds.), *The South African Response to COVID-19: The Early Years* (pp. 136-155). New York: Routledge.
33. Langa, M., & Leopeng, B. (2020). COVID-19: Violent policing of black men during lockdown regulations in South Africa. *African Safety Promotion: A Journal of Injury and Violence Prevention*, 18(2), 116-126.
34. Mabuka, T., Ncube, N., Ross, M., Silaji, A., Macharia, W., Ndemera, T., & Lemeke, T. (2023). The impact of non-pharmaceutical interventions on the first COVID-19 epidemic wave in South Africa. *BMC Public Health*, 23, 1492.
35. Madhi, S. A., Kwatra, G., Myers, J. E., Jassat, W., Dhar, N., Mukendi, C. K., ... & Mutevedzi, P. C. (2022). Population immunity and Covid-19 severity with Omicron variant in South Africa. *New England Journal of Medicine*, 386(14), 1314-1326.
36. Mafolo, K., & Shoba, S. (2019). Refugees 'angry' and 'traumatized' after violent eviction. *Daily Maverick*, October 31.
37. Mafolo, K., & Shoba, S. (2020). Things fall apart in the church of refugees. *Daily Maverick*, January 16.
38. Mbeve, O., Nyambuya, V., Munyoro, A., & Dube, N. (2021). The challenges faced and survival strategies adopted by Zimbabwean informal traders that live in Johannesburg inner-city during the COVID-19-induced lockdown in South Africa. *Journal of Social Development in Africa*, 36(1), 31-64.
39. Meyer, D. (2020). WHO praises South Africa for 'incredible' COVID-19 response. Retrieved from <https://www.thesouthafrican.com/news/world-health-organisation-south-africa-praise-covid-19-2020/>
40. Mkhwanazi, Z., Bello, P., Khosa, D., & Olutola, A. (2020). The marriage of convenience between the South African Police Service and the South African National Defence Force: The COVID-19 experience in the spectacle of national disaster. *Acta Criminologica: African Journal of Criminology & Victimology*, 33(3).
41. Mokoena, O., Ramarumo, T., Seeletse, S. & Ntuli, S. (2023). Learning from the pandemic: Structural implications of food parcel distribution scheme in South Africa. *Community Development Journal*, 7(2): 104-112
42. Moses, M., & Woolard, I. (2023). The role of temporary social grants in mitigating the poverty impact of COVID-19 in South Africa. In P. Fourie & G. Lamb (Eds.), *The South*

African Response to COVID-19: The Early Years (pp. 156-177). New York: Routledge.

43. Mudau, P. (2022). The implications of food-parcel corruption for the right to food during the Covid-19 pandemic in South Africa. *ESR Review*, 23(2), 4-9.
44. Mukumbang, F., Ambe, A., & Adebeyi, B. (2020). Unspoken inequality: How COVID-19 has exacerbated existing vulnerabilities of asylum-seekers, refugees and undocumented migrants in South Africa. *International Journal for Equity in Health*, 19, 141.
45. Muller, S. (2021). The dangers of performative scientism as the alternative to anti-scientific policymaking: A critical preliminary assessment of South Africa's Covid-19 response and its consequences. *World Development*, 140, 105290.
46. Mushomi, J. A., Palattiyil, G., Bukuluki, P., Sidhva, D., Myburgh, N. D., Nair, H., ... & Nyasulu, P. S. (2022). Impact of coronavirus disease (COVID-19) crisis on migrants on the move in southern Africa: implications for policy and practice. *Health Systems & Reform*, 8(1), e2019571.
47. Mutambara, V., Crankshaw, T., & Freedman, J. (2022). Assessing the impacts of COVID-19 on women refugees in South Africa. *Journal of Refugee Studies*, 35(1), 704-721.
48. Mutahi, P., & Wanjiru, K. (2020). Police brutality and solidarity during the COVID-19 pandemic in Mathare (Nairobi). *Mambo!*, 17(5).
49. Naicker, I. (2020). The voices missing from South Africa's response to COVID-19. *The Conversation*, June 11.
50. Nattrass, N. (2007). *Mortal Combat: AIDS Denialism and the Struggle for Antiretroviral Treatment*. Cape Town: David Philip.
51. Naudé, W., & Cameron, M. (2021). Failing to pull together: South Africa's troubled response to COVID-19. *Transforming Government: People, Process, and Policy*, 15(2), 219-235.
52. Ndinda, C., Adebayo, P., & Alubafi, M. (2023). Migrant women's experiences of the COVID-19 lockdown: Lessons for policy and programming in South Africa. In R. Biakady, S.M. Sajid, V. Nadesan, J. Przeperski, & M. Rizaul (Eds.), *The Palgrave Handbook of Global Social Change* (pp. 1-21). Cham: Palgrave Macmillan.
53. Ndlovu-Gatsheni, S. (2020). Geopolitics of power and knowledge in the COVID-19 pandemic: Decolonial reflections on a global crisis. *Journal of Developing Societies*, 36(4), 366-389.
54. Nduna, M., & Tshona, S. (2021). Domesticated poly-violence against women during the 2020 Covid-19 lockdown in South Africa. *Psychological Studies*, 66(3), 347-353.
55. Nhengu, D. (2022). Covid-19 and female migrants: policy challenges and multiple vulnerabilities. *Comparative Migration Studies*, 10(1), 23.
56. Nkomo, B., & Mangiza, O. (2021). Civil 'disobedience' and images of war: The military and police in the face of the Covid-19 pandemic in Zimbabwe. *The Dyke*, 15(1), 131-148.
57. Noyoo, N. (2023). South African social policy after Covid-19: New policy imperatives? *Global Social Policy*, 23(2), 356-359.
58. Nyashanu, M., Simbanegavi, P., & Gibson, L. (2020). Exploring the impact of COVID-19 pandemic lockdown on informal settlements in Tshwane, Gauteng Province, South Africa. *Global Public Health*, 15(10), 1443-1453.
59. Nzabamwita, J., & Dinbabo, M. (2022). International migration and social protection in South Africa. *Cogent Social Sciences*, 8(1).
60. Odunitan-Wayas, F., Alaba, O., & Lambert, E. (2021). Food insecurity and social injustice: The plight of urban poor African immigrants in South Africa during the COVID-19 crisis. *Global Public Health*, 16(1), 149-152.
61. Onuoha, F., Ezirim, G., & Onuh, P. (2021). Extortionate policing and the futility of COVID-19 pandemic nationwide lockdown in Nigeria: Insights from the South East Zone. *African Security Review*, 30(4), 451-472.
62. Parker, W. (2023). The rough and the smooth: South Africa's uneven response to COVID-19. In P. Fourie & G. Lamb (Eds.), *The South African Response to COVID-19: The Early Years* (pp. 39-55). New York: Routledge.
63. Presidency. (2022). Statement by President Cyril Ramaphosa on the termination of the National State of Disaster in response to the Covid-19 pandemic. Retrieved from <https://www.thepresidency.gov.za/speeches/statement-president-cyril-ramaphosa-termination-national-state-disaster-response-covid-19-pandemic>
64. Ranchhod, V., & Daniels, R. (2021). Labour market dynamics in South Africa at the onset of the COVID-19 pandemic. *South African Journal of Economics*, 89(1), 44-62.
65. Ramachandran, S., Crush, J., Tawodzera, G., & Onyango, E. (2022). Pandemic food precarity, crisis-living and translocality: Zimbabwean migrant households in South Africa during COVID-19. *SAMP Migration Policy Series No. 85*, Waterloo.
66. Rwafo-Ponela, T., Goldstein, S., Kruger, P., Erzse, A., Abdool Karim, S., & Hofman, K. (2022). Urban informal food traders: A rapid qualitative study of COVID-19 lockdown measures in South Africa. *Sustainability*, 14, 2294.
67. South African Government (SAG). (2020). Minister Bheki Cele confirms 55 arrests on day 1 of coronavirus covid-19 lockdown. Retrieved from <https://www.gov.za/speeches/minister-bheki-cele-confirms-55-arrests-day-1-lockdown-curb-spread-coronavirus-covid-19-28>
68. Schotte, S., & Zizzamia, R. (2023). The livelihood impacts of COVID-19 in urban South Africa: A view from below. *Social Indicators Research*, 165(1), 1-30.
69. Schroder, M., Bossert, A., Kersting, M., Aeffner, S., Coetzee, J., Timme, M., & Schlüter, J. (2021). COVID-19 in South Africa: Outbreak despite interventions. *Scientific Reports*, 11, 4956.
70. Seekings, J. (2020). Bold promises, constrained capacity, stumbling delivery: The expansion of social protection in response to the Covid-19 lockdown in South Africa. *CSSR Working Paper No. 456*, University of Cape Town: Centre for Social Science Research.

71. Seekings, J., & Nattrass, N. (2020). COVID vs. democracy: South Africa's lockdown misfire. *Journal of Democracy*, 31(4), 106-121.
72. Simon, B., & Khambule, I. (2022). Modelling the impact of the COVID-19 pandemic on South African livelihoods. *International Journal of Sociology and Social Policy*, 42(11/12), 926-948.
73. Sizani, M. (2020). South Africa: COVID-19: Police shut immigrant-owned spaza shops after Minister's xenophobic statement. *GroundUp*. March 30.
74. Skinner, C., & Watson, V. (2020). Planning and informal food traders under Covid-19: The South African case. *Town Planning Review*, 92, 301-307.
75. Skinner, C., Barrett, J., Alfors, L., & Rogan, M. (2021). Informal work in South Africa and COVID-19: Gendered impacts and priority interventions. *WIEGO Policy Brief No. 22*, Manchester.
76. Smart, B., Combrink, H., Broadbent, A., & Streicher, P. (2023). Direct and indirect health effects of lockdown in South Africa. *WP572 Center for Global Development*, Washington D.C.
77. Southern African Legal Information Institute (SAFLII). (2020). The South African High Court judgment in the case between Scalabrini Centre of Cape Town and the Minister of Social Development. Case No. 22808/2020, Office of the Chief Justice. Retrieved from <http://www.saflii.org.za/za/cases/ZAGPPHC/2020/308.pdf>
78. Statistics South Africa. (2020). Quarterly Labour Force Survey Third Quarter 2020. *Statistical Release P0211*, Pretoria.
79. Statistics South Africa. (2024). Migration Profile Report for South Africa. Pretoria: SSA.
80. Staunton, C., Swanepoel, C., & Labuschagne, M. (2020). Between a rock and a hard place: COVID-19 and South Africa's response. *Journal of Law and the Biosciences*, 7(1), 052.
81. Steytler, N., & De Visser, J. (2021). South Africa's response to COVID-19: The multilevel government dynamic. In R. Chattopadhyay, F. Knüpling, D. Chebenova, L. Whittington, & P. Gonzalez (Eds.), *Federalism and the Response to COVID-19* (Chapter 20). Abingdon: Routledge.
82. Tawodzera, G., & Crush, J. (2022). Pandemic precarity and food insecurity: Zimbabwean migrants in South Africa during COVID-19. *MiFOOD Paper No. 4*, Cape Town: MiFOOD Network.
83. Tawodzera, G., & Crush, J. (2023). 'A foreigner is not a person in this country': Xenophobia and the informal sector in South Africa's secondary cities. *Urban Transformations*, 5, 2.
84. Thomson, M., & Lewin, L. (2020). The lockdown is unconstitutional. Retrieved from <https://www.lexisnexis.co.za/lexis-digest/resources/the-lockdown-is-unconstitutional>
85. Van der Berg, S., Patel, L., & Bridgman, G. (2022). Food insecurity in South Africa: Evidence from NIDS-CRAM wave 5. *Development Southern Africa*, 39(5), 722-737.
86. Van Wyk, D., & Reddy, V. (2022). Pandemic governance: Developing a politics of informality. *South African Journal of Science*, 118(5/6), 13163.
87. Vermeulen, H., Schönfeldt, H., & Hall, N. (2020). Nutrient profiling of South African foods: Classifying for health. *South African Journal of Clinical Nutrition*, 33(3), 60-68.
88. Visagie, J., & Turok, I. (2021). Rural-urban inequalities amplified by COVID-19: Evidence from South Africa. *Area Development and Policy*, 6(1), 50-62.
89. Washinyara, T. (2022). 500 refugees living in wretched conditions in Cape Town camp. *Daily Maverick*, November 18.
90. Wegerif, M. (2020). "Informal" food traders and food security: Experiences from the COVID-19 response in South Africa. *Food Security*, 12, 797-800.
91. World Bank. (2021). *South Africa Economic Update Edition 13: Building Back Better From COVID-19 With a Special Focus on Jobs*. Washington DC: World Bank.