

**Social Protection in South Africa During COVID-19: Exploring the
Recommendation by UN Women to 'Put Cash in Women's Hands' in Response
to the Pandemic**

by

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DEDICATION

To Bongani Christopher Nur Mshweshwe

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“I can do all things through Him who strengthens me” (Philippians 4:13). This verse has been my source of strength throughout my academic journey. I want to thank the Almighty God for ensuring that this academic desire came to fruition.

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ABSTRACT

The outbreak of the COVID-19 pandemic has exposed and exacerbated pre-existing gender disparities worldwide. Countries expanded their social protection measures in response to the socio-economic implications of the health crisis. This study explores the South African government's social protection policies, and their impact on gender inequality during the pandemic, particularly in relation to social reproduction work and labour market dynamics. It investigates the expansion of social protection programmes, with attention to the Special COVID-19 Social Relief of Distress (SRD) Grant, a temporary cash transfer programme for working-age individuals with no source of income. In the labour market, it examines the implementation of the COVID-19 Temporary Employer-Employee Relief Scheme (TERS), a subsidy provided to companies by the government. The research extensively reviews existing literature, South African legislation, and particularly utilises the policy recommendation by UN Women to *put cash in women's hands*, as a strategy to mitigate the gender inequalities associated with the pandemic. By critically evaluating the government's strategies, the study contributes to illuminating the gendered impacts of COVID-19 in South Africa. A key finding of the mini-dissertation was that the government's social protection measures did not adequately address pre-existing gender disparities, and instead favoured men more than women. The study emphasises the necessity for a comprehensive and inclusive approach to social protection, that aims to address gender inequality and values care work. It proposes the introduction of a permanent grant targeted at women caregivers—a starting point to acknowledge the value of the social reproduction work they are accountable for.

KEYWORDS:

Care work, COVID-19, gender inequality, social protection, social reproduction

ABBREVIATIONS & ACRONYMS

AIDS	Acquired immunodeficiency syndrome
ANC	African National Congress
CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women
CGD	Center for Global Development
COVID-19	Coronavirus Disease 2019
CSG	Child Support Grant
DSD	Department of Social Development
GDP	Gross Domestic Product
HIV	Human Immunodeficiency Virus
ILO	International Labour Organization
IMF	International Monetary Fund
Nedlac	National Economic Development and Labour Council
NIDS-CRAM	National Income Dynamics Study—Coronavirus Rapid Mobile Survey
OECD	Organisation for Economic Co-operation and Development
SADC	Southern African Development Community
SAPO	South African Post Office
SASSA	South African Social Security Agency
SETA	Sector Education and Training Authority
SRD	Social Relief of Distress
Stats SA	Statistics South Africa
TB	Tuberculosis
TERS	Temporary Employer-Employee Relief Scheme
UIF	Unemployment Insurance Fund
UN	United Nations
UNDP	United Nations Development Programme
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
WHO	World Health Organization

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CHAPTER ONE: INTRODUCTION

The COVID-19 crisis poses a threat to decades of progress on the improvement of the lives of women and girls. As a previously marginalised group in households and society at large, the pandemic has exacerbated the marginalisation of women by disproportionately affecting their autonomy, employment and incomes, and their opportunities to advance their education. The pandemic has increased the burden placed on women of unpaid care work and significantly exacerbated violence against women and girls, which has been viewed as a 'shadow pandemic' amid COVID-19 (Parry & Gordon, 2020:804). This mini-dissertation draws on published research to argue that to address these losses in the status of women and girls, countries should implement policies and budgets that are gender-responsive, with the aim of mitigating the short-term implications of the pandemic, which will also address the pre-existing and long-term structural aspects of gender inequality.

The study explores the gendered nature of the social protection measures that were introduced by the South African government in response to the COVID-19 pandemic, focusing on their gender responsiveness. It evaluates the effectiveness of the government policies in addressing gender disparities, which were exacerbated during the pandemic. The study analyses national-level data to assess the distribution of grants among men and women, which were targeted at addressing the socio-economic effects of the pandemic. It provides focus to the disbursement of the Special COVID-19 Social Relief of Distress (SRD) grant to unemployed working-age adults and the Temporary Employer-Employee Relief Scheme (TERS) in the labour market. Although the South African government outlined measures to combat COVID-19 respectively, from March 2020, the study significantly references historical data to provide context to South Africa's social security policies.

In its Special Series on COVID-19, the International Monetary Fund (IMF, 2021) emphasises that the pandemic has thrust women and girls into extreme poverty. The Special Series conducted a study on a sample of 129 countries and territories, with the sample representing 89 percent of the global population in 2020. The results found that between 2019 and 2021, poverty rates rose from 11.7 percent to 12.5 percent for women and girls, while the rate for men and boys increased from 11.3 percent to 12.1 percent. The study estimated that these poverty levels may revert to the pre-pandemic levels only by 2030 (Tang et al., 2021:2).

It is important that all government strategies addressing the COVID-19 pandemic place women and girls – their equality, representation, inclusion, rights, economic and social status, as well as their protection, at the forefront – if they aim to fully recover from the health crisis. The United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) has conducted extensive research and provided governments with evidence-based recommendations to address the implications of COVID-19 in a gender-sensitive manner (which will be discussed in detail). It serves as an example of an important multilateral institution that has contributed to drawing attention to the gendered impact of the pandemic. The institution provides direct technical assistance to governments and UN partners to ensure that national and international response strategies meet the needs of women and girls.

As part of this effort, UN Women alongside the United Nations Development Program (UNDP), deployed the COVID-19 Global Gender Response Tracker. The purpose of the Tracker is to monitor policy interventions that were developed and implemented by governments across the world in addressing the pandemic from a gender perspective, as well as the participation and leadership of women in COVID-19 advisory groups. Another objective of the Tracker is to evaluate the gender sensitivity of the policies, by analysing which strategies provide emphasis to the economic and social security of women, including in relation to their roles in the labour market, unpaid care work, and the surge in violence against women and girls. It assesses information that is available to the public such as official government records, reports from the media, as well as existing policy databases that monitor governmental responses to COVID-19 (UN Women & UNDP, 2022:17).

The Tracker can be used as a guide for policymakers and its data can be presented as evidence for advocates who aim to ensure that COVID-19 policy responses are gender-sensitive. In a study that was conducted between March 2020 and August 2021 across 226 countries and regions, it revealed that 4,968 measures were implemented by governments in response to the pandemic. They were categorised into four policy groups, namely; labour market, business and economic support, social protection and violence against women and girls (UN Women & UNDP, 2022:17). Across 196 countries and territories, 1,605 of these measures were found to be gender-sensitive, while 50 percent of those measures addressed violence against women and girls. The Tracker revealed a disparity in the representation of

women in COVID-19 decision-making, with women holding only 24 percent of the seats on COVID-19 task forces. It found that 81 percent of low-income countries and territories had weak or no gender-sensitive responses to COVID-19, and the overall number of measures they implemented in response to the pandemic was low (UN Women & UNDP, 2022:22). A positive finding was that nine out of ten gender-sensitive cash transfer programmes were adopted by countries in the Global South (UN Women & UNDP, 2022:64).

The evidence revealed by the Tracker shows that policies and budgets that are gender-sensitive are fundamental in addressing the deepening gender gaps resulting from the pandemic. Governments that have been experiencing fiscal constraints even prior to the pandemic face the challenge of strategically implementing gender-responsive fiscal policies, to enhance the allocation of existing resources in ways that are more gender equitable, in addition to attempting to expand fiscal space for gender-sensitive policies. While the pandemic has exposed systematic failures and shortcomings, it has also provided governments with the opportunity to exceptionally recover from other societal challenges, by tackling pre-existing structural inequities and transforming the economy towards more inclusion, sustainability and resilience to overcome future crises. When designed and implemented with a gender-sensitive lens, financial policies and tax systems become robust tools for societal transformation (Tang et al., 2021:3). As the number of COVID-19 infections subsides, utilising gender-responsive allocation of public resources along with monitoring gender outcomes, has the potential to ensure an equitable and resilient recovery that will last longer than the pandemic (Tang et al., 2021:9).

To avoid ambiguity in the study, it is important to define two related terms – ‘gender-sensitive’ and ‘gender-responsive’ – both of which are key terms that inform the research. The European Commission (1998:33) defines gender-sensitive as ‘policies and programmes that take into account the particularities pertaining to the lives of both women and men, while aiming to eliminate inequalities and promote gender equality, including an equal distribution of resources, therefore addressing and taking into account the gender dimension’. According to the International Labour Organization (ILO, 2022), ‘gender-responsive policies recognise that within a society, actors are women and men, who are constrained in different and often unequal ways, and who may consequently have differing and sometimes conflicting needs, interests and priorities’. Although gender-sensitive and

gender-responsive policies are interrelated by acknowledging the importance of combatting gender disparities and promoting gender equality, the manner in which they approach their objectives are distinct. While gender-sensitive policies acknowledge gender differences, the approach of gender-responsive strategies is more proactive and transformative in addressing the inequities to promote equality and social cohesion. The South African government has made efforts to acknowledge gender differences by adopting gender-sensitive social protection policies on regional and international levels. However, more effort should be made to ensure gender inequality is addressed through the implementation of gender-responsive measures.

1.2 A Feminist Lens in Response to the COVID-19 Pandemic

The marginalisation of women is not a new phenomenon. It is one of the core motives behind the founding of the feminist theory. Feminism is a political, intellectual and social project that advocates the equal status of all people while it also exposes the marginalisation of women. The feminist movement is against the social, economic, and legal restrictions of the basic rights of all women and girls. An essential constituent in the analysis of feminism is gender. Gender can be described as the attributes which are constructed by society that women and men are assigned to, i.e. femininity and masculinity. In simple terms, gender may be regarded as what is deemed as being a woman/feminine, or what is perceived to be manly/masculine (Enloe, 2007:99). The analysis of gender is the exploration of the interpretations as well as the roles that are associated with femininity and masculinity, and the way they establish relations between women and men, as well as women and men within various institutions. Feminist analysis unpacks that which is mentioned above, while also explicitly making power central to that analysis. The analysis of feminism poses the question of how the distribution and utilisation of power are influenced by gender and institutional relations. It explores the complexities of how power operates, is legitimised and is perpetuated. Gender analysis and the examination of feminism are a complement of each other (Enloe, 2007:100 – 101).

According to Enloe (2007:104), feminism is a challenge to the sexist exclusion of women as well as the issues that are faced by women from conventional analysis. Conservative approaches to politics comprise of institutions and bodies that are male dominated, such as states and governments, non-governmental organisations, and international institutions. The roles of women in society as domestic workers, essential care workers, and caregivers, among

many other professions, are thus overlooked when one understands politics only through the aforementioned male-dominated institutions. Resultantly, women are silenced, subordinated and exploited through decision-making institutions which are based on patriarchal norms (Enloe, 2007:106).

Feminist scholars highlight the nuances of feminism with women advocating against their marginalisation in areas that include race, class, religion, ethnicity, sexuality and generation. Resultantly, there are perspectives of feminism which include *liberal feminism* (focusing on individual rights), *radical feminism* (emphasising on the perpetuation of patriarchy and misogyny), *post-structural feminism* (focusing on identities and culture) and *post-colonial feminism* (highlighting the mechanisms of gendered, racist hierarchies that enabled colonialism and continue to exist post-colonialism) (Enloe, 2007:105). The dissertation draws on Marxist feminist literature, although it provides an intersectional analysis of feminism by emphasising on the relation between race and class. Though the sex-gender distinction was briefly discussed in this section, it is explored in more detail below due to its importance in understanding the gendered impact of social welfare interventions during COVID-19.

1.3 Research Aims & Hypothesis

The aim of this dissertation is threefold. Firstly, it aims to explore the social protection measures of the South African government in response to the COVID-19 pandemic, and to uncover if the measures were sensitive to distributing resources equitably between men and women. In doing so, it shall explore the proportion of women who benefitted from the social protection measures as recipients of cash transfers in comparison to men. Secondly, it will assess the implications of the COVID-19 pandemic on the socio-economic status of women. The research is informed by the recommendation by UN Women to 'put cash in women's hands' as a strategy to mitigate the deepening gender inequalities associated with COVID-19. This response plan was suggested by UN Women on the basis that if a country has a programme already in place that can directly place money into the hands of women, it should be expanded with the effort to mitigate the burden of the pandemic on women's lives and their socio-economic position. Lastly, the dissertation examines the feasibility of UN Women's recommendation in the South African context, in relation to women in the labour market and women who perform unpaid work in households. Emphasis here is

informed by the assumption that all responses to pandemics that seek to have an equitable impact, should consider their gendered implications and should be informed by the voices of women.

In every crisis, there is an opportunity for governments to address inequality in a gender-sensitive manner. In the case of the COVID-19 pandemic, it may be the wake of a new dawn that allows a more inclusive way of life even post-pandemic. The rights enshrined in Chapter 2 of the Constitution, which encompass the Bill of Rights were fundamental to inspiring this mini-dissertation. The Bill of Rights addresses South Africa's colonial and apartheid past that perpetuated discrimination and the violation of human rights. It also specifies constitutional principles designed to protect women (Section 9) and safeguard children (Section 28). The mini-dissertation explores the gender-related issues that the South African society currently faces, including gender inequality as well as the crisis of social reproduction and care work during the pandemic, questioning the efficacy and practical implementation of the special COVID-19 SRD grant to realise the promise of gender equality contained in the Bill of Rights. The hypothesis of this study is that in South Africa, the social protection measures implemented in response to the COVID-19 pandemic have favoured men more than women for various reasons. Prior to the pandemic, the unemployment rate for women was higher than that of men, thus as a group, they faced the pandemic with fewer material resources than men. In cases where women continued working during the lockdown, they worked in high-risk and public facing jobs that exposed them to contracting the virus, so employment tended to be accompanied by health risks for them and their household members. Additionally, more men than women were employed in the formal economy, which enabled them to benefit to a greater extent from the fiscal relief measures implemented by the government for businesses, such as the COVID-19 TERS, and better standing to negotiate occupational health and safety measures during the pandemic. Lastly, a significant number of women were ineligible to receive the fiscal support that was targeted at the unemployed, specifically the special COVID-19 SRD grant, as they were already receiving other grants on behalf of the children which they were caring for. Women thus had systematically lower approval rates than men when screened for these grants.

The social protection measures implemented by the South African government in response to the COVID-19 pandemic disregarded pre-existing social inequalities, including the

gendered division of labour in the workforce, as well as the gendered nature of care work in the household, and this ultimately resulted in many women being less eligible to receive the support they needed. By focusing on the labour market and unpaid care work in South Africa, the aim of the mini-dissertation is to explore the responsiveness of the social protection measures to gender disparities during the pandemic.

The primary argument of this study, is that the social protection policies implemented by the South African government in response to COVID-19 have favoured men more than women, resulting in gender inequalities in access to support and resources. The study also emphasises that the government's strategies failed to adequately consider the gendered nature of social reproduction work, including unpaid care work and its impact on women, and that women in the labour market, particularly those in the informal sector, did not receive adequate support from the social protection measures. This results in women being disproportionately affected by the pandemic as well as the social protection measures. The research seeks to evaluate the gender-responsiveness of the strategies that were implemented by the South African government during the pandemic, and assesses their effectiveness in overcoming gender disparities which were exacerbated by the crisis.

1.4 Methodological Approach

1.4.1 Data Collection Methods

This mini-dissertation focuses on analysing publicly available primary and secondary data relevant to the topic. It is on the basis of the critical analysis of texts such as the South African Constitution (1996), the White Paper for Social Welfare (1997), as well as policies and reports published by the government in response to and the management of the COVID-19 pandemic. Research reports by local and international non-governmental organisations and civil society were utilised in the research, including media reporting, the COVID-19 Global Gender Response Tracker (UN Women & UNDP, 2022), and peer reviewed journal articles and books. Sources that were related to the social, economic and health impacts of COVID-19 were utilised in the research.

The sharing of unverified information on COVID-19 throughout social media was pervasive, and there was an influx of inaccurate and at times, deceptive information about coronavirus at the onset of the pandemic (Wasserman et al, 2021). The study was based on an analysis of

published literature to ensure the credibility of the sources. To avoid misinformation, the mini-dissertation also excludes information from articles and reports that derive from unverifiable sources such as blogs and other social media platforms.

The study uses data published until March 2023, with the exception of some sources being published thereafter. The limited studies conducted on developing countries, particularly on Africa, during the pandemic was a limitation to the study. Awareness has been highlighted on the gender disparities and the ways in which the crisis has differently affected women and men, however, not many studies have presented solutions that African states, many of which lack extensive formal welfare systems and contain large informal economic sectors, can use to mitigate those disparities. The unique characteristics of gender disparities in the African context, which affect the implications of the pandemic are discussed in more detail in the study.

1.4.2 Ethical Considerations

It is frequently assumed that given that the authors of published data would have previously dealt with the ethics of conducting research, making use of secondary data absolves the researcher of the responsibility to ensure that the principles of ethics have been adhered to. However, ethics should remain a priority throughout every step of the research. At its core, the research should aim to ensure public good (Burnham et al., 2008:253). When reporting on the secondary data in the mini-dissertation, the analysis and interpretation will be grounded in an appropriate and accurate reflection of the data. All data is referenced appropriately and cited in full in the reference list. In the process of collecting relevant data, this study abided by the policies and guidelines that are to be applied by researchers who make use of the research institutions that were utilised, including the university's library and public libraries.

1.4.3 Limitations of the Study

No primary research was conducted for this mini-dissertation, initially due to the lockdown rules and health risks imposed by the pandemic, and later due to time and resource constraints. For this reason, the analysis offered here is limited to published data. This has

meant that women's own reflections on the pandemic and the impact of the social assistance and labour market mechanisms introduced since 2020 are excluded in the study.

South Africa is a preferred destination for migrants, including refugees and asylum seekers, for reasons that include better economic and investment opportunities, political stability, quality education and healthcare services. Statistics South Africa (Stats SA) (2024) reported that more than 2.3 million international migrants reside in South Africa, with females accounting for slightly more than 1.2 million of the population (Stats SA, 2024). While a significant number of migrants constituting the country's population, the study does not account for the experiences of migrant women during the pandemic, for reasons that mainly include the difficulty in obtaining data on that population group.

Published information on the special COVID-19 SRD grant was more accessible than the Caregiver's Allowance. The South African government provided an additional monetary benefit through the Caregiver's Allowance, and a significant number of women would have been eligible for the grant as primary caregivers in households. It would have been beneficial to uncover how the particular grant impacted women's access to cash related decision-making, and their overall autonomy. However, there has been less research and literature on the Caregiver's Allowance than the special COVID-19 SRD grant, which resulted in the mini-dissertation mainly exploring the latter. This is a constraint of the research significantly relying on the availability of secondary data.

The analysis relies only on descriptive statistics, and the aim of this mini-dissertation is not to establish causal relations. Instead, it uses the descriptive statistics to identify how gender and sex are correlated to access to two social assistance measures (TERS and the special COVID-19 SRD grant). It then uses relevant theoretical literature to explore what dynamics might help to explain these correlations. This mini-dissertation focuses on South Africa and does not claim to make findings that can be generalised to other countries. However, some of the dynamics in this case study raise questions that deserve further exploration and systematic study, which may yield generalisable insights about how pandemic response measures could be designed to ensure greater gender-responsiveness.

CHAPTER 2: BACKGROUND TO THE STUDY

2.1 The Gendered Effects of COVID-19

The year 2020 was intended to highlight a milestone in the promotion of gender equality, as it marked the 25th anniversary of the Beijing Declaration and Platform for Action for Gender Equality. It is an ambitious agenda that was established by the United Nations (UN) in 1995 to advance the empowerment of women and girls, and to provide a roadmap for the realisation of gender equality worldwide. On its 25th anniversary, the agenda was planned to be reviewed to assess the progress that was made towards its successful implementation (Posel & Casale, 2019:4). However, the world was struck by the coronavirus disease, which undermined all the efforts that had been made to promote gender equality under the Beijing Platform. The COVID-19 pandemic became a worldwide health, social and economic disaster, which has had destructive effects on the state of welfare globally. The most vulnerable groups in society – those who had been previously disadvantaged, such as the poor and low-income workers, women, children, and persons with disabilities – bore the brunt of the pandemic.

In response to the health emergency, most governments opted to use unprecedented executive procedures, including national lockdowns and the closing of their national borders, in effort to contain the detrimental and life-threatening effects of the coronavirus. It is crucial to acknowledge that this global pandemic affected women and men differently. During catastrophes like COVID-19, pre-existing gender discrimination and inequalities are exposed and deepened (UN Women, 2020:2). For example, in South Africa women and men were impacted differently by COVID-19, depending on their initial circumstances (Chitiga, Henseler, Mabugu & Maisonnave, 2020:2). Pre-existing inequalities in the distribution of unpaid care and domestic work resulted in women and men using their time differently, with women spending more hours on domestic work and unpaid care in comparison to men before and during the pandemic. Various factors contribute to this situation, including the accessibility (or lack thereof) of public care services, cultural practices, the conditions of the labour market, and the ease which care-related support and work leave can be accessed. These dynamics will be discussed in this section.

2.2 Gendered Adversities Posed by the COVID-19 Pandemic

The COVID-19 pandemic and the physical and social distancing policies that have been imposed by governments have exposed disparities amongst gender, race, and socio-economic status. The oppression of formally marginalised groups, such as individuals who are internally displaced, living in extremely impoverished conditions, people living with disabilities, migrants as well as refugees, the majority of whom being women and children, is thus brought to light (Salami, Okoduwa, Chris, Ayilara & Okoduwa, 2021:2). The effects of the COVID-19 pandemic are worsened for girls and women merely because of their sex throughout every aspect of life – notably in the economy, health, security and social protection. This sub-section draws from a Fix the Patent Laws (2021) overview of the gender impact of COVID-19 in South Africa, to show that gender serves as a cross-cutting component in providing context to the manner in which the health crisis has exacerbated labour market and health vulnerability.

2.2.1 Labour Market Dynamics

Women globally have suffered disproportionately from the implications of the COVID-19 pandemic. In research conducted by NIDS-CRAM during the stringent Level 5 lockdown period between February and April 2020, it found that 2.9 million job losses were accounted for by women (Casale & Posel, 2020). Prior to the crisis in February 2020, 46 percent of women and 59 percent of men of working age reported being employed. By April 2020, when South Africa was amidst hard lockdown, 36 percent of women and 54 percent of men were reported being employed. This amounted to a 22-percentage point decline in employed women compared to a 10-percentage point decline in men who remained employed (Casale & Posel, 2020).

A research study conducted by the Southern African Labour and Development Research Unit (SALDRU) at the University of Cape Town (UCT), found that women are concentrated in four major sectors, namely; finance, service, trade and domestic work. Men, on the other hand, occupy positions in all main sectors, including agriculture, mining, finance, manufacturing, among others (Mosomi, Thornton & Branson, 2020:9 & 12). The study speaks of sectoral and

occupational sorting by gender in the South African context, which is a significant attribute to women experiencing more job losses during the COVID-19 crisis than men. Sectoral and occupational sorting can be defined as the concentration of a gender into specific occupations and sectors, which reduces employment options and limits access to certain job opportunities, perpetuating gender disparities in the labour market. This sorting is referred to as occupational segregation by sex (Anker, 1997:315-320).

Occupational sex segregation, the separation of women and men into different occupations, is one way in which inequality in the labour market is perpetuated, as it is accompanied by the discrimination against women through lower pay rates and poorer working conditions in jobs they occupy (Anker, 1997:323). Over recent decades, women have made significant strides in the labour market by advancing their education and participating in male-dominated sectors, including mining, construction and transport industries. There has also been an increase of women in technician, professional and clerk occupations. However, they usually tend to hold lower paying and lower-status positions compared to their male counterparts. An example is in the health sector – women mostly hold positions as nurses and medical assistants, while men hold higher positions such as doctors (Anker, 1997:335). In the South African context, nurses constitute 65 percent of the health sector, and women make up 87 percent of nurses and 76 percent of medical assistants (Mosomi et al., 2020:21).

With women generally occupying lower positions in the employment hierarchy, they tend to experience a lack of representation and a limitation in securing their demands for safe working conditions. This has resulted in them being at an increased risk of contracting COVID-19 compared to their male colleagues, and the pandemic has severely affected their emotional and mental health. In a national study undertaken by the Human Sciences Research Council (HSRC) and the University of KwaZulu-Natal Nelson R Mandela School of Medicine between April and May 2020, it found that nurses reported the lowest overall health and wellbeing, as well as a significantly higher level of emotional distress in comparison to other health care professionals (cited by Fix the Patent Laws, 2021).

2.2.2 Women Care Workers

A pandemic reduces the number of available health care employees due to various reasons that include illness and contracting the virus, the fatality of the workers and absenteeism, which is brought on by the fear of being infected. Health care workers who are directly exposed to infected patients and infectious working materials, endure severe suffering from the virus, as the frontline staff during the outbreak. Even though not all health care workers do not contract and potentially die from the disease, their capacity to perform their duties to the best of their abilities is compromised. By making up almost 70 percent (or two-thirds) of the health care workforce globally, women have been fundamental to the health care sector's response to COVID-19. Due to their roles as primary caregivers in their households, women frequently take on the responsibilities of caring for their sick relatives if they are not already infected themselves, providing educational care to children when schools are closed, or remain home for the concern of their safety. These factors have led to many female health care professionals choosing to remain in their homes rather than working. (Madhav, Oppenheim & Gallivan, 2017).

During the pandemic, women experienced significant job losses in comparison to men because their jobs either did not fall into the essential services category or they could not complete their jobs from home. SALDRU (Mosomi et al., 2020) reported that occupations that are dominated by females leave them at 16 percent higher risk of being exposed to infectious diseases such as COVID-19, as 23 percent of the occupations held by women are exposed to infectious diseases, in comparison to 7 percent of the jobs held by men. The jobs dominated by women such as domestic work, medical professions, and personal care are interpersonal and usually require physical proximity. The data indicated that women also constitute other interpersonal jobs including, not limited to, 92 percent of home-based care workers, 78 percent of personal care workers, and 57 percent of doctors. The gender wage gap has previously been justified by the perception that the work done by men is often dangerous, for example mining (Mosomi et al., 2020:21). However, frontline work during the COVID-19 pandemic, such as health professional and personal care work, has proven that the women also perform high-risk work which is undervalued in the labour market.

2.2.3 The Access of Women to Sex-Specific Health Care Services

The COVID-19 crisis has also posed a threat to the reproductive rights of women. The general needs and medical requirements of women, particularly their sexual and reproductive health are neglected by governments during health crises (Cousins, 2020:301). Reproductive and sexual health services remain important, even amid a pandemic. However, in many countries, they become overlooked for reasons such as funding being diverted to the responses to the health crisis. This has dire implications on the health, including the mental health of the females that are in need of those services. It has been reported that due to the COVID-19 pandemic, millions of girls and women have been deprived of family planning services (Simba & Ngcobo, 2020). Many nations across the world enacted lockdowns and travel restrictions as the virus spread internationally, in an effort to reduce transmission. Several governments made the decision to effectively close reproductive and sexual wellness services because these health services were not deemed as essential. Some of the services included abortion or, as reported in Brazil by the Human Rights Watch, contraception (Cousins, 2020:301). In addition to denying women and girls the access to life-saving and urgent essential services, the decision further hindered them from receiving health care for reproductive and sexual wellness, which had previously been a challenge to access before the pandemic.

The United Nations Population Fund (UNPF) made the prediction that there could be up to a total of 7 million unplanned pregnancies globally as a result of the crisis, with thousands of potential fatalities due to unsafe abortion and birth complications owing to a lack of access to urgent medical care (Cousins, 2020:301). Similarly, Marie Stopes International, an organisation that offers services for sexual and reproductive health in 37 nations, calculated that the closing of their clinics prevented up to 9.5 million vulnerable girls and women from accessing contraceptive and safe abortion services in 2020. The disruption in services may potentially lead up to 2.7 million unsafe and illegal abortions taking place as well as 11 000 deaths related to pregnancies. In many countries, facilities that were previously established for public health care services were repurposed for treating COVID-19 cases. Facilities that initially provided services specific to the sexual and reproductive needs of women and girls were also repurposed. Qualified social health activists, such as community healthcare workers were allocated to the prevention, diagnosis and treatment of COVID-19, instead of

providing family planning and other services they were qualified for (Cousins, 2020:301). Due to their weaker immune systems as well as exposure during medical procedures, pregnant women with COVID-19 are more vulnerable to experiencing other severe health issues, maternal challenges and potentially fatality (Salami et al., 2021:3).

Access to healthcare services provided by the public sector in South Africa was severely limited during the national lockdown. People may have avoided leaving their homes to seek healthcare services due to the fear of contracting and spreading coronavirus, and their mobility was limited due to the travel restrictions. The access to child-health services and women's reproductive rights were disrupted by the pandemic. Access to cervical cancer screening and treatment services – the biggest cancer that South African women succumb to – was heavily disrupted (Fix the Patent Laws, 2021). Women between the ages of 15 – 24 are reported to have a four times higher HIV prevalence than men in the same age group. The pandemic also disrupted testing and treatment services related to HIV, which is an alarming matter, with young women being overrepresented as people infected with HIV/AIDS. Women experience the disproportionate burden of the HIV epidemic, as they are twice as likely to contract the virus than men (Fix the Patent Laws, 2021). In a study conducted in the first half of 2020, data reported that during the first wave of COVID-19, there was a 30 percent national increase in maternal mortality. The peak of maternal deaths in South Africa was in June, which coincided with the most stringent levels 4 and 5 of the lockdown (Jeranji, 2021). The study further found that the maternal deaths were due to various reasons, including a lack of transportation, a shortage of beds and human resources at medical facilities, as well as the fear of being infected with COVID-19 (Jeranji, 2021).

2.2.4 Women's Unpaid Care Work

Culture, tradition, and gender are “concepts that are strongly influenced by the historical impact of apartheid, post-apartheid and globalised influences” in South Africa (Mayer & Barnard, 2015:342). Since the birth of the democratic regime in 1994, South Africa has ensured to implement significant measures towards the protection and enhancement of the rights of women. In 1995, the newly democratic government took swift strides in ensuring that these rights are internationally realised and ratified by signing the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW). Regionally, the Southern African Development Community (SADC) Protocol on Gender and Development, the Maputo

Declaration on Sexual and Reproductive Health and Rights, as well as the African Charter on Human and Peoples' Rights were signed by the democratic government (CGE 2020a:82). However, the position of women and their lived experiences in South Africa indicates a sustained disparity despite these commitments.

Growing research indicates that women and girls are more prone to experiencing immense suffering as a result of the COVID-19 pandemic than men and boys, in other spheres of life besides the formal, wage-work economy. Women, for example, are more likely to contract an infection while providing care to their infected family members because they are typically the carers in their homes (Kapur, 2020:18). During the pandemic, girls were more likely than boys to be forced to reduce the time that should be allocated to education and completing schoolwork in order to attend to the chores at home, which are traditionally allocated to females. This negatively impacted the progress of girls at school, because they spent more time at home, self-studying and home-schooling during the pandemic. In addition to providing the hygiene in their homes, women and girls are also expected to be responsible for the supply of water for sanitation in their households (Chitiga et al., 2020:4). In the South African context, access to water within many homes is deemed as a privilege. Thus, this responsibility is a challenge for women and girls that live in the rural areas and townships, where water is obtained from outside of their homes, which is usually a considerable distance from many households. Furthermore, in many conventional societies, the basic needs of women and girls are not a high priority in terms of the funding and services for health care (Chitiga et al., 2020:4). Women may end up in precarious situations as a result of these and other non-economic factors. The cumulative impact of all these factors may result in long-lasting consequences on the vulnerability on girls and women, pushing them even further behind their male counterparts, which would be detrimental to society entirely.

2.2.5 Women's Access to Social Assistance During COVID-19

In response to the devastating impact of the pandemic on vulnerable communities, governments around the world substantially extended their social protection systems (Köhler & Bhorat, 2020:2). According to the Center for Global Development (CGD) (O'Donnell, Buvinic, Bourgault, & Webster, 2021a:13), more than 200 states and regions

have executed social protection programmes in response to the COVID-19 crisis. Only 22.8 percent of the social protection policies enacted by governments were gender-sensitive, with the intention to address how the pandemic affected women and girls in particular. Of the gender-sensitive measures, the majority (53 percent) fall under social protection measures, 26 percent comprise of social insurance, while the remaining 20 percent of the strategies are concentrated on unpaid care work. There is currently a lack of evidence regarding the actual implementation and effectiveness of these measures. It is therefore challenging to evaluate their sufficiency, especially on the lives of women and girls (O'Donnell et al., 2021b).

In a review by the CGD (2021), research on the COVID-19 response efforts of the World Bank, African Development Bank, and the Asian Development Bank, discovered that out of 195 projects, 64 projects contained social protection measures. Among them, 81 percent included gender-specific targets and indicators. However, only 26.6 percent provide any kind of intersectional data that includes demographic characteristics such as age and disability status. To address the effects of the pandemic, it is important to consider the complexities that make up the characteristics of an individual. An example of a target that focuses on gender, is project that was implemented by the World Bank in the Central African Republic where women made up a minimum of 50 percent of cash transfer recipients (O'Donnell et al., 2021a:16). Another illustration is a programme funded by the African Development Bank in Uganda that aims to provide in-kind food assistance to 31 percent of households headed by women. The research discovered that cash transfers, along with food as well as other in-kind donations, were the most frequently implemented financial strategies. A childcare indicator was only reported to be utilised in one project (O'Donnell et al., 2021a:17).

The South African government expanded its non-contributory system of social assistance by institutionalising new social grants and expanding the scope of existing grants. Stated differently, it expanded the intensive margins of the grant system, through increasing the amounts of existing transfers, as well as the extensive margins, by means of introducing two new grants: the special COVID-19 SRD grant, worth R350 and a Caregiver's Allowance, worth R500 (Institute For Economic Justice [IEJ], 2020:3).¹ On 30 June 2020, the South

¹ It should be noted that the IEJ (2020) classifies the Caregiver's Allowance as one of two new grants that were distributed by the government to increase social assistance in response to COVID-19. However, the Caregiver's Allowance could also be classified as a top-up to an existing grant, i.e. the Child Support Grant, as it was received by caregivers who had previously been recipients of the Child Support Grant. The dissertation focuses on the special COVID-19 SRD grant.

African Social Security Agency (SASSA), presented to the National Economic Development and Labour Council (Nedlac) the gender proportion of the rollout of the COVID-19 SRD grant. The results were that out of the 3.25 million COVID-19 grants that were disbursed by the end of June 2020, women made up only 1.1 million of recipients. In other words, two thirds of the COVID-19 grants were paid out to men, making up 65 percent of grant recipients, even though it was women who suffered two thirds of job losses in the country (Spaull, Casale & Posel, 2020). One initial eligibility criterion for the special COVID-19 SRD grant was that an individual should not be receiving or be eligible to receive another social grant and any other government income or support. With the recipients of the Child Support Grant (CSG) being minors, their carers—the majority being women—typically receive the grants on their behalf, which made those women ineligible for the SRD grant. The criteria for the eligibility of the COVID-19 SRD grant will be discussed in depth in this dissertation.

2.3 Recommendations to Protect Women from the Socio-Economic Impact of COVID-19

This mini-dissertation emphasises that it is important that all responses of governments to the COVID-19 pandemic place women and girls – their equality, representation, inclusion, rights, economic and social effects, as well as their protection – at the forefront, if the governments want to fully recover from the pandemic. UN Women (2020) has presented cross-cutting priorities that assist governments in identifying measures that seek a significant and sustainable impact on the advancement of the rights of girls and women, even after the pandemic.

The first priority that government policies should address is to ensure that women are equally represented in the planning of responses and decisions that are made regarding COVID-19. In the past, policies that overlooked the concerns of women have ended up being less effective, while also being detrimental to society. The second strategy is the promotion of radical transformation for equality by attending to the paid and unpaid care economy. Care work is fundamental and foundational to daily life as well as the overall economy. However, in the formal and waged care work sector, which includes occupations such as teaching and nursing, women are underpaid and overworked. In less formal settings, e.g. within their own homes and as domestic workers, women are marginalised and even exploited by performing most of the care work that goes unnoticed (UN Women, 2020:15). During pandemics, care work is intensified, and it is during these times that gender inequalities should be addressed. This should include measures to ensure that care work

can be equitably redistributed among the individuals in a household. The final challenge that should be prioritised is that women and girls need to be targeted in all initiatives to alleviate the socio-economic effects of COVID-19 (UN Women, 2020:5). It is crucial to apply an intentional gender lens to the manner which the social assistance programmes and fiscal stimulus packages are designed and implemented. In doing so, policies will have the potential of achieving greater gender equality and more robust social protection.

Similarly to the UN Women priorities, the CGD provides eight recommendations for gender-sensitive social protection measures to governments and supporting donor institutions. The first recommendation is to identify opportunities to support the rights and empowerment of women and girls in response to the crisis. This would commence by acknowledging and dealing with the commonly disproportionate and oppressive gendered impacts of pandemics. It will aim to ensure that policy measures are not discriminatory towards any gender, and that gender equality is deeply rooted within a broader framework that will promote the empowerment of women and girls (O'Donnell, Holmes, Hunt, & Bourgault, 2021b).

The second recommendation by the CGD, is to target cash benefits particularly to women and girls. In doing so, this will ensure that social protection programmes are developed and put into action in a manner that will be considerate of pre-existing gaps, such as gender specific inequalities in access to bank accounts, cell phones and IDs. This would also promote the financial independence of women and girls. For example, it would enable them to create savings accounts using their own identities and would promote women's right to social protection on an individual basis. The use of financial support as a medium-term approach to promote the economic independence of women, rather than discontinuing or reducing crisis-related social assistance programmes, is the third recommendation (O'Donnell et al., 2021b).

Another recommendation is to utilise digital resources that will be beneficial to women and girls, whilst ensuring that access to technologies for communication and information remains equal for all genders. To address gender-specific constraints, social assistance should be incorporated with other interventions, including programmes that strive to combat gender-based violence and those that acknowledge, and value underpaid and unpaid care work (O'Donnell et al., 2021b). The sixth recommendation by the CGD is to improve sex-disaggregated data collection regarding the recipients of social protection programmes, and to track and evaluate the effectiveness of the social protection policies according to gender, as well as other demographic factors such as age.

The improvement of social registries to ensure inclusivity and that they cover the most marginalised women and girls is another recommendation. Administrators of social protection should ensure that the processes of identifying new recipients guarantee universal coverage and that groups which are usually socially excluded, including gender minorities and non-traditional families, are not left out. The final recommendation by the CGD is to forge meaningful alliances with specialist organisations in the promotion of gender equality and to advise, strategise and execute gender-inclusive social measures. It also urges this be done while ensuring that their vital contributions and expertise are adequately and sustainably funded (O'Donnell et al., 2021b).

The pandemic has provided governments with the opportunity to deal with it in a manner that addresses the marginalisation and vulnerabilities that women experience based on their gender. International recommendations specify that government responses should include securing additional income support, prevent gender-based violence, expand the services provided by the health care sector during the pandemic, as well as the socialisation of care work. The issue of gender inequality would also be addressed through the involvement and active participation of women in decision-making within their homes and up to the highest levels in government (Oxfam, 2014:27). The impacts of a pandemic are intersectional, and it would be difficult to fully recover by excluding the experiences of women. Women may present innovative measures in combatting the health crisis.

CHAPTER THREE: CONCEPTUAL FRAMEWORK

3.1 The Distinction Between Sex and Gender

The distinction between sex and gender is fundamental to this study and in general politics, as it is a starting point for addressing social norms that perpetuate the marginalisation of certain groups. By having a critical understanding of human identities, the promotion of human rights, gender equality, and social justice can be furthered. It establishes a comprehensive foundation for research that is more inclusive, and which will influence effective policymaking as well as societal viewpoints that embrace diverse nuances in gender identities and lived experiences. Talia Meer (2014:13) from the Gender, Health & Justice Research Unit at UCT defines sex as:

“the biological characteristics that define humans as female, male or intersex. Sex is based on biology (external genitalia, chromosomes, hormones and the internal reproductive system) and is usually assigned at birth. For example, children born with male sex organs (penis and testes) are classified as male. Once this classification happens, sex is usually used as a label for raising the child as either one gender or another. For example, male children will be raised as boys and expected to conform to stereotypes about masculinity. However not all people fall easily – or at all – into the ‘male’ and ‘female’ categories, such as intersex and transsexual people. Biological sex terms include male, female, transsexual and intersex”.

Meer (2014:7) further defines gender as:

“an identity that is learned, that changes overtime, and that changes from one place, culture or society to another. Hence gender is both a social construct (something made up) and personal identity. In social terms gender refers to the socially created roles, personality traits, attitudes, behaviours and values attributed and acceptable for men and women, as well as the relative power and influence of each. That means that gender is relational (occurs in relation to something else) and refers not simply to women or men but to the relationship between them. For example, a women’s gender not only means that she is considered and expected to have feminine attributes like being soft spoken or gentle, but that these characteristics mean that society also expects her to be less dominant than men. In personal or individual terms gender refers to the specific roles, personality traits, attitudes, behaviours and dress that individuals use to express their

personal gender identity, and this is influenced both by social ideas of gender, and personal feelings about oneself and how one wants to be and be seen in the world. For this reason, even though society tells us that there are only two genders, there are in fact many different ways to express one's gender that fall between or outside of man/boy and woman/girl."

In simple terms, sex can be perceived as 'nature' because it refers to the relatively stable physical attributes within human reproduction, while gender can be regarded as 'nurture' due to its social and variable characteristics (Acker 1992:565). Gender equality refers to the ideal of securing equal rights, responsibilities and access to opportunities for all genders. It promotes the universal respect for all human beings and the freedom to exercise their human rights in all spheres of life, including in communities, the workplace, and the economy, regardless of their sex or gender. It further implies that the diversity within different groups of women and men are acknowledged, and their needs and priorities are taken into consideration. Equality does not refer to the sameness of all genders but rather that the rights of men and women will not be subject to the sex which they are born with (UN Women, 2001:11).

Several authors have contributed to the study of feminism, as well as sex and gender. In *The Second Sex* (1949:273), Simone de Beauvoir affirms that "One is not born, but rather becomes, a woman", reinforcing the distinction between sex and gender, that being a female is based on fixed sets of natural characteristics. A woman, on the other hand, is socially constructed through influences of cultural norms which have shaped the ideas of femininity and womanhood. She further exposes the oppression of women throughout history within society, by being regarded as the "Other" in comparison to men who are regarded as the default human being. According to de Beauvoir (1949), the notion of women being subordinate to men is not due to their biological characteristics, but rather a consequence of the dominant social and cultural perceptions that perpetuate patriarchy (Butler, 1986:35- 37). She criticises the prevalent influences of traditional gender roles, religion, as well as patriarchal and misogynistic ideologies (de Beauvoir, 1949).

Feminism emerged as a movement that advocates for the social, cultural, economic, and political equality of all people, regardless of their sexual or gender identities. Feminists have been challenging the sexist exclusion of women and promoting equal rights for women.

Mainstream feminism has often been criticised for its focus on gender and the universalisation of women's experiences and its framing of 'Third World Women' as victims in need of saving, thereby disregarding the complexities in the experiences and characteristics of women, such as race, socio-economic status, and ethnicity (Mohanty, *Under Western Eyes*, 1988). Western feminist scholars have rather used gender in the global discourse of the subordination and oppression of women. They have assumed a universal idea of the woman as well as her subordination, disregarding the fact that gender is a social and cultural construct. With gender being socially constructed, it is therefore, impossible to have a universal conception of a woman (Oyěwùmí, 2002:2).

Oyèrónké Oyěwùmí, a Nigerian scholar challenges the Western theories of feminism, asserting that "it is the Western nuclear family that provides the grounding for much of feminist theory", which is a single-family household that consists of a "patriarchal husband, a subordinated wife, and children" (Oyěwùmí, 2002:3). However, the nuclear family is distinctive to the European/American society—one that Africa cannot relate to. Oyěwùmí (2002), provides the example of the Yoruba society in Nigeria. She describes the Yoruba family as non-gendered, as the roles and categories in the family are not distinguished by gender. In this society, age is fundamental to the organisation of seniority within the family, rather than gender (Oyěwùmí, 2002:5). The seniority of an individual is based on their age, which can be associated to their maturity.

Ifi Amadiume (1987) also critiques Western ideas of feminism and constructs of gender, writing about the male daughters and female husbands of the Nigerian Igbo society, organised on a dual-sex principle. In this society, women were able to fulfil roles and responsibilities that are usually associated with men in the West. For example, the eldest daughter was able to inherit the wealth of her father and marry wives and take on the role of the eldest son, becoming a male daughter (Amadiume, 1987). African scholars emphasise the importance of exploring the different ways in which non-Western societies understand and experience gender, as it is not universally defined and expressed across all cultures.

3.2 The Sex-Gender Distinction and its Application to Social Assistance in South Africa

A household survey was conducted in 2011, at Doornkop, Soweto, one of the communities that experiences the direst levels of poverty in Johannesburg. The study aimed to explore the dynamics and gendered policy impacts of the CSG, as one of the largest social protection programmes in South Africa, by examining the impact of the grant on gender relations and if it promotes the empowerment of women (Patel & Hochfeld, 2011:229). In the traditional South African household, the man is the primary breadwinner and is financially responsible for the household, while the woman is the primary caregiver, performing productive work and supplementing the income of the family which is earned by the man. Due to this notion, women are the main recipients of social benefits in South Africa, and although the CSG was established as a gender-neutral cash transfer that was targeted at children, it has become significantly feminised due to the expectation that women should be the primary caregivers (Patel & Hochfeld, 2011:231). The study found that the CSG has directly contributed to the empowerment of female grant recipients. The women reported that they are responsible for deciding how the grant monies are spent, which has enabled them to have control over the decisions in financial matters within the household. The grant has also enhanced women's power and their ability to exercise the freedom to choose how it is used, enabling them to promote valuable outcomes that will improve the quality of the lives of children (Patel, Hochfeld, Moodley & Mutwali 2012:3 & 37). In terms of gendered decision-making dynamics, the grant thus seemed to challenge men's dominance of decisions about how money is spent within the household.

The study also posed the question whether the gendered nature of care work is destabilised by the CSG. It found that it does not destabilise this aspect of gender roles within the household, but rather worsens the positionality of women. Although it was reported that women in the study were empowered by the CSG to a certain extent, they also continued to accept some of the traditional gender beliefs that were associated with the roles of women and men in the households. Notably, the female beneficiaries of the grant are significantly burdened by care work responsibilities in the household as well as the responsibility of being in control of how the CSG is utilised. Therefore, it cannot be assumed that the feminisation of social protection automatically results in the empowerment of women (Patel et al., 2012:39), even if it does help to put cash in women's hands.

3.3 The Value of Social Reproduction in the Capitalist Economy

The exploitation of women, from the household to the economy at large, is a pertinent crisis in South Africa, as it is in many other countries in the world. A major factor contributing to gender inequality in the global economy is the obliviousness to women's subsidisation of capitalism through care work. In 2020, Oxfam calculated that the unpaid care work that women perform globally is worth the monetary value of at least \$10.8 trillion annually (Oxfam 2020:20). To have an adequate understanding of the gendered division of paid and unpaid work and the disproportionate burden it places on women, it is important to explore the political economy of the society that enables such relations. The feminisation of care work has always been regarded by critics of capitalism as a burden placed on women by the capitalist state. The COVID-19 pandemic has simply exposed this crisis, with care work multiplying during the lockdowns due to the closure of establishments that provide social services. Additionally, the labour market sectors that comprised of reproductive labour assumed greater importance and were regarded as essential work in the lockdown period, meaning these workers had to maintain their waged social reproduction work while also taking on the increased unwaged social reproduction work within their homes (Bhattacharya, Farris & Ferguson, 2022:45).

Tithi Bhattacharya and Sue Ferguson (2017), identify capitalism as an economic system that incorporates two processes in society: "the production of commodities and the production of workers who produce those commodities", based on the Marxist distinction of the capitalist social relation – that of the worker and the capitalist. Marx emphasised that the distinction between the two is not based on biological grounds. It is merely a social construct that took place with the rise of industrial capitalism, where individuals who did not own land or property, with their labour power as their resource, extended themselves to work for the capitalists. In simple terms, capitalism is "a trade-based division of labour" (Frank & Wallerstein quoted in Mohandesi, 2022). In the capitalist economy, one class owns capital assets, which are the means to produce goods. Wealth is accumulated by this particular group through the gaining of profits, as they are in control of the means of production, including land, factories, raw materials, systems of distribution and intellectual property rights. The capitalist class controls the access to the means of production and how the rest of society may utilise it, as they are privately owned. The privatisation of the means of production, and

the accumulation of their profit gains, are what reinforce social class distinctions within society (Armstrong, 2020).

Marx critiques this economic system, arguing that capital is dominant due to the exploitation of labour, resulting in social class distinctions and inequality. Although the industrial revolution was characterised by the advancement of machinery, replacing human labour, there are certain mental and physical attributes that only exist in a human being, which are essential to the production process. In *Capital* (1999 [1887]), Marx identifies those attributes as 'labour-power' or the 'capacity for labour', referring to labour as a 'special commodity' that contains a peculiar value that is fundamental to the means of production in the marketplace. By possessing that labour-power, an individual has the ability to create value through it, by selling it as a commodity to the capitalist (Marx, 1999 [1887]:119). Marx emphasises on the power of human labour because without it, the capitalist system would collapse.

Although the working class possesses labour-power, the capitalist class dictates the working conditions as well as the manner in which labour-power is reproduced, as it is in control of the means of production. Marxism emphasises that the relationship between the two classes is founded on exploitation, since the capitalist class has bargaining power, enabling it to regulate working conditions which result in the production of surplus value. The exploitation of labour-power takes place when the capitalist system receives an excess of labour from workers which creates surplus value. Surplus value is generated when the working class overextends itself through labour and without benefitting from the amount of work done. Instead, capital is accumulated in this process, where the capitalist class appropriates the additional value (Marx, 1999 [1887]:136).

Capitalism manipulates and exploits the working class using the impression that there is a "fair trade" between a worker and the employer through the compensation of the labour with a wage.

In addition to the Marxist view of the exploitation of the working class in the capitalist system, Silvia Federici (1974) states that the wage at the very least, acknowledges that one is a worker – thereby enabling some level of autonomy, and a publicly recognised political identity that serves as the basis for collective action within the capitalist system. In *Wages Against Housework*, Federici (1974) asserts that housework is not a job like others in the capitalist system. She refers to it as "one of the most pervasive manipulations, most subtle

and mystified forms of violence that capitalism has perpetrated against any section of the working class” (1974:76). Unlike work in the productive economy, housework is done for free – it is unwaged. Another difference of housework is that it has been imposed on women through patriarchal gender norms, as social reproduction work is framed as a natural characteristic of the female physique and personality, rather than a social contract like other jobs in the capitalist system (Federici, 1974:77). Capitalism has thus represented the housework completed by women – which goes unseen as it is done within the private sphere of the household, not in a public site like a factory – as a ‘labour of love’ that all women should strive for to acquire a successful marriage and overall family (Federici, 1974).

Care work is often regarded as ‘invisible labour’ due to the nature of women’s contribution being taken for granted or naturalised in this way. The majority of the work done by women in their households is unpaid and completed by them in the capacity of being family members. With the preconceived notion of women as nurturers, capitalism has ensured that the value of the physical and emotional work of cleaning, cooking, and caring are completely hidden and overlooked (Federici, 1974:78). This work subsidises and enables the creation and reproduction of the future wage-earner, i.e. the worker, that the capitalist depends on to generate wealth in the productive economy.

The feminisation of care work is caused by various factors that occur simultaneously, namely; the sexual division of labour, which is the perception of gender relations in paid and unpaid work, causing gender inequalities in the responsibilities and distribution of care work; the naturalisation of the ability of women to care, which is based on the belief that due to their biological ability to birth and breastfeed, women are bestowed with the superior ability to complete other forms of care, such as caring for children and cooking; and the stratified access to socialised care services. The ability of households to decide on the quality and degree of care they receive or purchase from outside the household, is based on their economic status and the social welfare system. For instance, households that can afford to employ a domestic worker for cleaning and doing the laundry, and to purchase care services such as privately run pre-schools for childcare, reduce the time that the women of those households spend on the tasks (Enríquez & Fraga, 2021:6).

Enríquez & Fraga (2021:4) define care broadly to include self-care; the interpersonal activity of care by directly caring for other people; the necessary tasks that are required to ensure that care is completed such as purchasing groceries and cooking, and cleaning the house;

care management such as the co-ordination of care schedules and managing the work of caregivers as employees; and care that is performed outside of the home, such as health care. Care work involves directly caring for the physical, psychological, emotional and developmental needs of people. Recipients of care are usually people who are unable to take care of themselves and/or require additional support such as infants, children of school-age, persons living with disabilities, people who are ill, and the elderly. As such, people need care and social support at different stages of their lives, therefore, the nature and intensity of care varies over time.

A crucial insight of feminists that study social reproduction work is that the capitalist economy presumes, perpetuates and contributes to the discrimination and domination of working-class women in particular, as it thrives off the regulation of women's performance of unpaid and/or low-paying social reproduction work (Bhattacharya, Farris & Ferguson, 2022:48). The exploitation of women through performing unpaid housework is profitable to capitalists, i.e. those who own the means of production, by keeping the production costs down. For example, it would be cheaper for capitalists if only the man of a household would be employed, while the woman remains home as a housewife, instead of them both being wage-earners. This also provides a level of security for the capitalist – when a wife and children are dependent on the man's wages, there are less chances for the man to strike or seek other job opportunities (Bhattacharya et al., 2022:51).

Social reproduction feminism is an expansion of the Marxist analysis of capitalism, arguing that Marx overlooks the contribution made by women towards the capitalist economy (though Engels (1884) does recognise and critique this in his essay on *The Origin of The Family, Private Property and the State*). In this regard, Bhattacharya (2013), poses the question "If labour power produces value, how is labour itself produced?", drawing attention to a reproduction process that takes place outside of capitalist production.

Bhattacharya (2013), outlines the three processes in which the reproduction of labour power takes place: (i) the activities that regenerate workers outside the workplace, enabling them to return, such as food, a home and a bed to sleep in, as well as psychical care that provide emotional support; (ii) the activities that sustain and replenish the non- workers who are not part of the production process, i.e. children who are future workers and the adults who have left the workforce due to retirement, disability or unemployment and; (iii) by the reproduction of new workers through childbirth. These activities, which are

fundamental to the capitalist system, in that they reproduce the worker, are completed at no cost by members of the household and community, with the majority being women (Bhattacharya, 2013). The processes create the labour force at no cost, significantly subsidising the capitalist class and the state, which is freed from compensating for this work through social welfare programmes. As a step towards the recognition of the value of care work to capitalism, the concept of the care economy emerged, which “focuses on the systemic economic role of unpaid house and care work, and its contribution to the generation of economic value” (Enríquez & Fraga, 2021:4).

To demand wages for housework, according to Federici (1974), is the first step towards the emancipation of women. It will start by making the care work done by women visible – highlighting the fact that women hold many positions concurrently. Federici (1974:82) further argues that women should also be compensated for all the roles they have, giving them the ability to choose which ones they want to partake in. Scholars contributing to this literature further note that the formal workforce is also an extension of the characteristics of the housewife, as well as its implications. They point out that women are concentrated in jobs such as teachers, domestic workers and nurses – occupations that comprise of caring for people’s lives, which are an extension of the training they acquire in the household. This also forms part of the reason that those kinds of jobs are usually low-paid. The capitalist system assumes that they do not require significant training, as the skills are innate in women’s attributes.

Austerity refers to policies that are adopted by the government to reduce public expenditure when a country experiences financial challenges. Measures include the reduction of budgets on social services and welfare programmes, as well as raising taxes. Although the policies are often implemented as a response to economic crises, such as an inflation of public debt and high deficits in the budget of the government, critiques of austerity have argued that it has been a fundamental tool to protect capitalism as a classist socio-economic system. Authors such as Clara Mattei (2022), have further emphasised that austerity is a political project that successfully prevents foreclosing alternatives to capitalism, and should not be simply understood as a response to fiscal constraints. Mattei (2022) explores how economic theories and political ideologies are interconnected, as well as their potentially disastrous effects on societies. The austerity strategy is one of the many impediments to the financial support for women and other marginalised groups in society. A report by Oxfam (2022)

revealed that austerity measures are a form of gender-based violence due to their gendered harms which disproportionately impact women, girls and non-binary individuals. For example, in the labour market, austerity measures can lead to the economic exploitation of women. 87 percent of employed women in Africa work in the informal sector which makes them vulnerable to labour deregulation and the decrease in decent working conditions. The informalisation of work, an austerity measure, leads to the economic violence against women (Abed & Kelleher, 2022:23). By decreasing public services such as access to schools during the COVID-19 lockdown period, this austerity measure exacerbated the responsibility of unpaid care work upon women and restricted their access to the economy, which also resulted in a loss of income (Abed & Kelleher, 2022:28).

Many social reproduction feminists have advocated for the socialisation of housework to lift its burden on women. Enríquez & Fraga (2021:5) refer to the socialisation of care being the way in which the needs of care are met between several actors – the household, community organisations, the State, and the market. A time-use survey that was conducted in 2010 by Stats SA, reported that women in South Africa spend an average of 3 hours and 15 minutes daily on activities related to household activities, in comparison to men, who spend an average of 1 hour and 28 minutes on the same activities (Public Services International, 2021). In the South African context, the invisible social reproduction work of women has been written about by Benya (2015), Fakier and Cock (2009), Bezuidenhout and Fakier (2006), Moore (2020), and Timm et al. (2020). The recognition of the economic value of unpaid care work can be a starting point to addressing gender inequality and biases against women. The feminisation of care work is a social construct that is based on patriarchal norms. Care work is a component of social reproduction, which is based on the processes and activities that maintain and reproduce the social, cultural and economic compositions of societies. Social reproduction is perpetuated in various ways that include education, beliefs within family dynamics through daily domestic practices, transmissions of culture and traditions, and the media (Enríquez & Fraga (2021:6). The dissertation will be using the terms ‘care work’, ‘housework’ and ‘social reproduction’ interchangeably.

CHAPTER FOUR: THE SOUTH AFRICAN WELFARE STATE

4.1 Social Development & Social Protection in South Africa Prior to the COVID-19 Pandemic

In the West, organised social welfare emerged with the rise of modernity toward the end of the 19th century to meet the advancement of human development, and to address the social problems that occurred due to industrialisation. Social welfare services were initially provided to those in need by religious and voluntary groups. Over time, governments worked alongside the voluntary sectors and other social groups to meet human needs, managing social problems through the provision of social benefits and social programmes such as education, health, economic, and social services that were fundamental to the conservation of society and meeting the needs of people (Patel, 2015:14-15).

The purpose of welfare policies and programmes is to assist in meeting the basic needs of people and can be utilised as a standard by which a society measures how well it is meeting the needs of its people, both poor and rich. When implemented correctly, social welfare can ensure that people live a dignified life, and enhance the quality of their lives, regardless of their employment status or wealth. In the South African context, social welfare and social development are concepts that are frequently used interchangeably. According to the White Paper for Social Welfare (1997), the term 'social welfare' refers to an integrated system of social policies, social services, programmes, benefits, and social security measures with the aim of promoting social development, social justice, as well as social functioning in an enabling and caring environment.

The United Nations Economic and Social Commission for Western Asia (2020) defines a welfare state as "a social system in which a government is responsible for the economic and social welfare of its citizens and has policies to provide free health care, money for people without jobs, etc.; also: a country that has such a system". It furthermore refers to social welfare as involving the well-being of the entire society, by not simply having the same standard of living, but to rather ensure that the individual needs of all people are met. It is more concerned with the quality of life for all, which includes fundamental factors, such as the availability and provision of essential social services. A welfare state has often been regarded as one that takes the responsibility of providing for the basic needs and social security for all citizens. The welfare state implements social policies to structure its society as well as its economic and social relationships.

4.1.1 A Better Life for All: Welfare Measures in the South African Constitution

In its campaign during South Africa's first democratic elections in 1994, the slogan of the African National Congress (ANC) was 'A Better Life For All'. One of the promises in the political party's election manifesto was "basic welfare rights" which included "the basic needs such as shelter, food, healthcare, work opportunities, income security and all those aspects that promote the physical, social and emotional well-being of all people in our country, with special provision made for those who are unable to provide for themselves because of specific problems" (ANC, 1994:52). Section 27 (1) (c) of the Constitution of the Republic of South Africa provides explicit obligations of the state to its citizens. The nation's 1996 Constitution recognises the right to social security, stating that all South Africans "have the right [...] to social security, including, if they are unable to support themselves and their dependents, appropriate social assistance" as a fundamental right of everyone in South Africa (Republic of South Africa, 1996:11). It also recognises additional social and economic rights in the Bill of Rights, which are explicitly detailed in Chapter 2 of the Constitution: "everyone in South Africa has the right to adequate housing, health care, education as well as social security, subject to the availability of the resources" (Republic of South Africa, 1996:11). The particular right was subsequently formalised in the Social Assistance Act of 2004, which enabled all citizens to implement the right to social security through the legislative framework of the country. The targeted areas of social security are; the prevention and alleviation of poverty, social compensation as well as the distribution of income (*Social Assistance Act, No. 13 of 2004, 2004*).

The administration of social assistance programmes in South Africa is allocated to various departments in government, statutory bodies and non-profit organisations (Chitonge & Mazibuko, 2018:205). The national departments that are in charge of the delivery of social service programmes include the Departments of Basic Education, Health, Women, Children and People Living with Disabilities, Correctional Services, Justice and Constitutional Development, the South African Police Service, and Cooperative Governance and Traditional Affairs. Each of the national departments has its respective responsibilities and services that it provides to the social welfare sector. The Department of Social Development, in particular "provides strategic leadership and support and also coordinates the implementation of social welfare services throughout the welfare sector. The national department is responsible for developing national norms and standards for the rendering of services and for ensuring

uniformity in the application of particular functions. Interdepartmental collaboration takes place between government departments whose mandates include promoting social development and the delivery of developmental social welfare services” (Department of Social Development, 2013:16).

The grant system in particular, is administered by the Department of Social Development, and in South Africa’s first decade as a democracy, the provincial governments were responsible for the management and disbursement of social grants. Most provincial governments made use of third-party service providers primarily for the payment of the grant to the beneficiaries. In 2004, the National Treasury revised the arrangement after a government review identified issues that were related to the provincial administration, including delays in the approval of grant applications, fraudulent grants and challenges in accessing the payments. The National Treasury made the decision for the grants to be disbursed through conditional grants that would be managed by the Department of Social Development. In 2005, an independent government agency was established with the purpose of administering and implementing social grants, named the South African Social Security Agency (SASSA). The purpose of the agency is “providing efficiency in the administration and distribution of social grants as well as working closely with law enforcement agencies in uprooting fraud and corruption within the social security system” (South African Government, 2007). SASSA is monitored and evaluated by the national Department of Social Development, with the mandate of “paying the right social grant, to the right person, at the right time and place” (SASSA, 2020:8).

4.1.2 The Importance of Wages for Securing Welfare

Historically, South Africa’s welfare system has been organised around the idea that wages should function as the default means by which households secure their wellbeing. This means that the social assistance scheme mainly allocates public resources to populations that are too old to work (through the Old Age Pension), too sick to work (the Disability Grant and the Grant-in-Aid), or too young to work (the Child Support Grant, Care Dependency Grant, and the Foster Child Grant). The government also avails a War Veterans Grant which is available to former soldiers who fought in the Korean and Second World Wars, but this is means tested (Chitonge & Mazibuko, 2018:320). The South African government has emphasised that there should not be a dependency of its citizens on social welfare, and that the system is rather

aimed at individuals who are unable to support themselves and their families. Thus, the government has attempted to prioritise inclusive growth strategies that expand the economy through increased access to employment opportunities, especially for youth and low-skilled workers, and through support for entrepreneurship schemes. During the COVID-19 pandemic, a new grant was introduced – the special COVID-19 SRD grant. As previously mentioned, many women failed to qualify for this grant as they were already receiving other grants which were aimed at benefiting children in their care.

South Africa's ruling party, the ANC and the government have emphasised that to address the challenges in development that are being faced by the country, a democratic and socially inclusive developmental state is required. The aim of a developmental state is to promote economic development and industrialisation, with the intention of creating inclusive economic growth (Edigheji, 2010:1). Much of what is regarded to constitute a developmental state is based on the framework of the East Asian Tigers. The emergence of the developmental state in the discourse on development arose in the abrupt economic growth and industrialisation of the Four Asian Tigers (Hong Kong, Singapore, South Korea and Taiwan) at the end of the twentieth century. The East Asian Tigers (consisting of China, Japan, Malaysia, Indonesia as well as the Four Asian Tigers) have been highly regarded as an inspiration to developing countries, in how the power of the state can be utilised in providing strategic leadership to overcome developmental crises which they face, and to achieve human development goals (Edigheji, 2010:5).

Similarly to South Africa, the East Asian Tigers were previously colonial territories, and they successfully advanced their position in the global economic stage, transitioning from being regarded as 'underdeveloped' to 'developed' states over two generations. The developmental states of the East Asian Tigers comprise of the intervention of the state in the operation of the free market to achieve socio-economic goals. In developmental states, policy-making and implementation institutions are fundamental to their advancement. They diversify their economies by investing in the resources which they possess in abundance. Developing states which are rich in minerals, for example, usually depend on the exportation of their minerals, such as gold and diamonds as their primary source of revenue without investing in manufacturing (Edigheji, 2010:11-12). The institutions of developmental states are established to promote social and economic development. In the South African case, conversations on the nationalisation of mines have sparked as a starting point for

development (Edigheji, 2010:3). Many scholars have highlighted that the success of the East Asian Tigers was also based on highly authoritative regimes – ones that suppressed political and civil rights. It is important to note that this has resulted in the assumption that it is impossible for development and democracy to co-exist, as it is believed that the two are incompatible (Edigheji, 2010:3-11). Therefore, it is essential to acknowledge that the economic success of the East Asian states would not be possible if they embraced democratic regimes.

The ANC government has aimed to establish a developmental state that grows the economy in order to lower the high unemployment rate, eradicate poverty and reduce inequality, and improve the overall lives of South Africans (Edigheji, 2010:11). At its 2005 National General Council, the ANC emphasised that it committed itself to building a developmental state that will intervene by restructuring the economy of South Africa (ANC, 2005). The ruling party further emphasised its commitment in various other platforms, including its manifesto in preparation for the 2009 general election and at its 52nd policy conference held in 2007. The party pledged to building a developmental state that will hold a fundamental and strategic role by “directly investing in underdeveloped areas and directing private sector investment” and will address the issue of “high unemployment, poverty and inequality” (ANC, 2007:19) and also “accelerate economic growth” and deal with the “skewed patterns of ownership and production” (ANC, 2007:17). At its conferences, the resolutions presented by the ANC connected the imperatives for the growth of the economy along with addressing the challenges faced by South Africans. The resolutions affirmed that “Whilst acting effectively to promote growth, efficiency and productivity, it [the developmental state] must be equally effective in addressing the social conditions of the masses of our people and realising economic progress for the poor” (ANC, 2007:18), by also creating decent job opportunities. Furthermore, the government asserted that the developmental state will accelerate economic growth and transform the South African economy, combat poverty, and promote social cohesion, among other priorities (ANC, 2007:18).

The developmental approach to South Africa's social welfare has evolved from the country's unique past that entailed structural injustice and the infringement of human rights which were caused by colonialism and the apartheid regime. The country's history, the experiences of the majority of South Africans and their understanding of oppression, along with an expansive heritage of human agency and social action to transform these oppressive

conditions, informed the creation of the new society. It was in 1994, at the dawn of democracy, that the Ministry for Social Welfare and Population Development was established, and a welfare policy and strategy was created and implemented. It was the first time that a separate Ministry for social welfare was established in South Africa, as social welfare was previously part of the health ministry (Patel, 2015:75-16). It was regarded as a positive stance taken by the democratic government, reflecting its commitment to prioritising and fostering social wellbeing, the reduction of poverty, and providing support to the most vulnerable members of society.

As a result, the ideas and implementation of social welfare were infused with notions of human emancipation and transformation. During the transition, there was an acknowledgment that reconciliation as well as the healing of the divided society were fundamental to the establishment of a united South Africa, with foundations that would be based on human rights, democratic values, gender equality, and social justice. These rights were institutionalised in the Constitution of 1996. The rights-based approach is a key theme in the conception of South Africa's developmental social welfare. The policy framework of the White Paper for Social Welfare (1997) consists of four other themes – the interrelations between economic and social development to overcome the unequal and distorted system of development; democracy and participation in development; the pluralism of social welfare, with a clear distinction of the role of the different actors in social development, including the state and civil society; as well as the reconciliation of the micro and macro division in developmental social welfare in theory and implementation (Patel, 2015:82).

Welfare services in South Africa have a racially discriminatory background, with an influence of gendered notions of care and support which contributed to the unequal status of women as well as their positions in their families, communities, and society at large. With care being considered as the work of women, the role of men in their provision of care work in their households received limited attention (Patel, 2016). The country's developmental approach to social welfare was established at the end of apartheid, and the policies that were implemented were guided by a racially inclusive framework that aimed to address the discriminatory system of the previous regime. However, the Constitution (1996) and the overarching policy framework which is presented in the White Paper for Social Welfare (1997) do not consider care. The promotion of gender equality has been prioritised in these

policies locally and in agendas of international institutions including the UN, but they have received criticism for their limited focus on the health and education of women and girls, while not giving attention to their contribution to the economy through the unpaid care work they complete (Patel, 2016).

Although care work is fundamental to economic and social development, the South African government has not prioritised its equal distribution in the development of an inclusive nation. At often times, women who have care responsibilities are unemployed due to the time, as well as the physical and emotional capacity required to complete care work. This results in women experiencing social isolation and losing education and employment opportunities. Therefore, it is crucial for women to be compensated for care work. As discussed in the preceding section, when the CSG is received by women, the children benefit from it while also enabling a sense of financial freedom and decision-making power to the women.

4.1.3 Social Assistance Measures

South Africa has one of the most extensive programmes of social assistance in the African continent and among developing countries, and the government currently operates one of the most sophisticated cash transfer systems (i.e. social grants) in the world. It utilises a biometric electronic payment system that is created on the latest and advanced cash payment technology (Chitonge & Mazibuko, 2018:1). Its social welfare system is widely renowned as one of the most extensive cash payout programmes among nations that are developing, as well as one of the “world’s first debit card-based payment system for welfare and social security” (Ungerleider, 2012, quoted in Chitonge & Mazibuko, 2018:1). The purpose of the social assistance programme is to provide support to the families who are unable to meet their basic needs on a daily basis. The programme is meant to assist in maintaining an adequate basic standard of living to all citizens. In many countries, the provision of social assistance is regarded as a tool to alleviate poverty in as far as the programme is rendered. In the South African case, social welfare services such as the social grant are aimed to not only reduce inequality and poverty rates, but to also empower citizens. (Chitonge & Mazibuko, 2018:8). Chitonge and Mazibuko (2018:9-10) define social policy as the “public regulations and instruments which govern the delivery of a broad range of public services including education, health, social welfare services, social security, housing services, water, electricity, indigence programmes, etc”.

The Older Persons Grant is the first cash transfer programme to be implemented in South Africa after the enactment of the Old Age Pension Act in 1928. The programme initially supported white and coloured citizens only, and was extended in 1944 to provide support to a small population of Africans and Indians who resided in urban areas (Bhorat, 1995:596 - 597). In post-apartheid South Africa, the social welfare system has deracialised and significantly expanded its coverage. Social grants have resultantly become one of the largest kinds of cash transfers providing financial support to poor households. The deracialisation of access to the child support grant, resulted in an increase in the monthly rollout of the number of grants. In 1998, 2.5 million grants were paid monthly and by 2020, 18 million were disbursed to vulnerable individuals and households, covering a third of South Africa's population. (SASSA, 2020:7).

Social assistance is funded by public revenue through the country's tax system. The eligibility for each grant is unconditional and depends on an income-based means test cash transfer that supports vulnerable groups such as the disabled, the elderly and children. The values of the grants are adjusted annually for inflation purposes and are disbursed via cash or through electronic payment transfers to the beneficiaries or selected recipients. The social assistance programme in South Africa comprises of several types of grants, targeting different groups in society. These are namely:

- Child Support Grant

It is the most extensive grant, providing financial support to families with children below the age of 18. At its inception in 1998, the CSG was initially aimed to assist children who were under the age of seven. However, due to its high demand, support was gradually raised to provide support to children under 18 years of age. The applicant of the grant is the primary caregiver of the child who is usually a woman. With the recipient being a minor, the primary caregiver receives the grant on behalf of the beneficiary.

- Care Dependency Grant

The Care Dependency Grant offers financial aid to parents, foster parents, or the primary caregiver of a child younger than the age of 18, who needs and receives continuous assistance or care due to a psychological or physical disability s/he is living with. The carer, however, is ineligible in receiving the grant if the child is cared for on a 24-hour basis for more than six months at a facility that receives funding from the State. The majority recipients of this grant are also women, usually being the primary caregivers in households.

- Foster Child Grant

The Foster Child Grant financially supports families that provide care for children who are abandoned, orphaned, or abused who are under the age of 18. The aim of the grant is to assist in covering the costs of basic needs such as food, healthcare and education for the duration of the children's placement. Similarly to the CSG and Care Dependency Grant, the Foster Child Grant is often received by women, who are in most cases, the primary carers of foster children.

- Disability Grant

This grant provides fiscal support to individuals who, due to a physical or mental disability, are unfit to obtain by virtue of service, any form of employment or profession, resulting in the inability to financially sustain themselves. The grant aims to cover the costs of basic needs including food, medication and clothes. Its objective is to ensure that people living with disabilities have access to basic necessities and that they do not encounter additional challenges due to the conditions they are living with.

- Older Persons Grant

The Older Persons Grants was designed to provide relief to the elderly who at oftentimes experience social and economic challenges that are associated with ageism. The grant supports women from the age of 60 years and men who have attained the age of 65 years, who are no longer able to support themselves as a result of exiting the employment sector due to their age. The elderly who are above the age of 75 receive a greater amount than those who are between the ages of 60 and 75 years of age.

- War Veterans' Grant

This grant is for a person who performed any military, naval or air force service during the Second World War or the Korean War. An individual is eligible for a War Veterans' Grant if s/he has attained 60 years of age or due to a mental or physical disability, is unable to obtain employment and provide their own maintenance.

- Grant-In-Aid

The Grant-In-Aid is for a current grant holder who is in a mental or physical condition that requires regular attendance by another individual due to their inability to care for themselves. The purpose of the grant is to compensate the cost of assistive devices and therapies that assist in a person's daily life and activities.

- Social Relief of Distress

This grant provides temporary financial assistance to individuals who are unable to support themselves and their households due to unforeseen circumstances. This particular grant can be provided in the form of cash transfers as well as food vouchers and food parcels (Gronbach et al., 2022:7).

Social grant applicants must be South African citizens, lawful permanent residents or refugees who are currently residing in South Africa. Social grants are means tested with some being income and asset tested, apart from the Foster Care Grant and the Grant-In-Aid, which are not means-tested. The social grants are available for eligible people based on their age and income and eligible beneficiaries include children under 18 years, women and men over the age of 60, and those living with disabilities (Chitonge & Mazibuko, 2018:323). Before the COVID-19 pandemic, South Africa's social transfer system did not provide support to unemployed individuals aged between 19 and 59.

4.1.4 Social Security Measures

Social security is promoted by policies that ensure that all people have adequate economic and social protection during periods of unemployment, illness, pregnancy, childcare, disability, widowhood, and old age through contributory and non-contributory schemes that provide for their most fundamental needs. In South Africa, social assistance programmes that are funded by the state include benefits of the following categories: disability, old age, child and family care, and poverty relief. The final category is a temporary provision of assistance that is intended for individuals in dire material need, resulting in the inability to meet their most basic needs and/or those of their family members. In addition, the temporary grant provides support for a period of up to three months with the potential of being extended. It is provided in either the form of food parcels, vouchers and at times, cash. The other grants provide support for longer periods, provided that the recipients still qualify.

In its aim to tackle the high levels of inequality, unemployment and poverty, the South African government has two primary goals through the implementation of the social security system. The first aim is to rapidly decrease poverty among the members in society who are unable to contribute completely to the labour market, resulting in them being vulnerable to low income and the inability to financially support themselves. This group usually consists of the elderly, children and those who are living with disabilities. The subsequent goal is to enhance the investment in nutrition, health and education, which will contribute to the

country's economic growth and development. These two objectives are reflected in the South African government's 1997 White Paper for Social Welfare, stating that "a social security system is essential for healthy economic development, particularly in a rapidly changing economy, and will contribute actively to the development process. It is important for the immediate alleviation of poverty and is a mechanism for active redistribution" (White Paper for Social Welfare, 1997:53). The White Paper for Social Welfare (1997) offers the framework for the modernisation and restructuring of South Africa's social welfare services. It also serves as the foundation for the South African government's policy framework for social welfare services (Department of Social Development, 2013:12).

4.2 Social Protection Responses to COVID-19 in South Africa

Social protection has been utilised as a mechanism for responding to the COVID-19 pandemic with the aim to fulfil four related roles: (i) safeguarding the livelihoods of the critically vulnerable; (ii) enhancing non-pharmaceutical strategies (iii) maintaining and enhancing capacity for restoration; (iv) and establishing long-term resilience (Gronbach, Seekings & Megannon, 2022:10). With a foundation of South Africa's expansive social provision framework, the government implemented a two-pronged strategy that was mostly cash-based and included components that were by means of social protection and social assistance.

With the aim to provide fiscal support to households, companies and their employees in response to the shock of the pandemic, governments around the world introduced economic relief measures that combined existing and new social protection programmes. The South African government, working alongside professionals in academia and organisations of civil society, developed strategies to increase social assistance at intensive (or vertical) margins by supplementing existing grants and extensive (or horizontal) margins through the introduction of new emergency programmes (Devereux, 2021:423). On 15 March 2020, in a speech made by President Cyril Ramaphosa, the South African government outlined measures that would be implemented to combat the coronavirus in the country. In the first phase, a variety of measures were set out with the aim to mitigate the impact of the pandemic on communities, business and individuals. The measures comprised of the distribution of disaster relief funds and the funding of small businesses, tax relief, emergency

procurement, as well as wage support through the Unemployment Insurance Fund (UIF) (UNDP South Africa, 2020:28).

The table below provides an overview of South Africa’s cash-based social protection system in response to the COVID-19 pandemic, which will be discussed in the sections to follow.

Table 1: Outline of fiscal social protection programmes introduced in South Africa in response to the COVID-19 pandemic

Programme	Amount Per Month	Beneficiaries	Duration
Special COVID-19 Social Relief of Distress (SRD) Grant	R350	Unemployed adults (18–59 years old) not supported by any other social security scheme and not cared for in a state institution. <i>First round: 6 million beneficiaries. Second round: 13 million applications received and 8.3 million approved (as of October 2021).</i>	First round: 1 year (May 2020–April 2021) Second round: 8 months (August 2021–March 2022) Due to come to an end in March 2025.
Top-up of Old Age Pension, Disability Grant, Foster Care Grant, Care Dependency Grant and War Veteran’s Grant	R250	Recipients of South Africa’s regular social grant programme (excluding the CSG and the Grant In-Aid). <i>Approx. 5.2 million beneficiaries.</i>	6 months (May–October 2020)
Top-up of Child Support Grant	R300	Beneficiaries of the Child Support Grant (i.e. the child, but paid to the caregiver). <i>12.78 million beneficiaries, 7.2 million recipients (caregivers).</i>	1 month (May 2020)
Child Support Grant ‘Caregiver Allowance’	R500	Caregivers receiving the Child Support Grant for one or several eligible children. <i>7.2 million beneficiaries.</i>	5 months (June–October 2020)

Relief Fund for Artists and Athletes	First cycle: R20,000 – R75,000 (once-off) Second cycle: R2,200 Third cycle: R10,000	Individuals and projects in the sports and arts sector who had been affected by the lockdown, e.g. through cancelled events and restrictions on gatherings. <i>Approx. 20,000 beneficiaries.</i>	First cycle: 1 month to apply, pay-outs over several months (April– August 2020). Second cycle: 3 months (September to November 2020, paid once-off). Third cycle: 1 month (February 2021, once-off)
Relief Fund for Registered Tourist Guides	R1,500	Freelance tourist guides registered with the Provincial Registrars of Tourist Guides and unable to work due to the lockdown. <i>Approx. 6,000 beneficiaries.</i>	3 months (announced in May, first payments in August, no specified period)
COVID-19 Temporary Employer/Employee Relief Scheme (TERS)	Sectoral minimum wage, up to R17,712	Employees registered with the UIF and who have been laid off or were being paid less following the implementation of lockdown measures. <i>5.4 million beneficiaries.</i>	16 months (April 2020 – July 2021)
Presidential Employment Stimulus	Varied, e.g. R3,500 for school assistants	Mostly young people. Some jobs saved through a wage subsidy; some small farmers through vouchers for farm inputs. <i>0.5 million beneficiaries under Phase 1.</i>	Varied: school assistants were employed for 5 months under Phase 1 (Dec 2020 to April 2021) and for 5 months under Phase 2 (from Nov 2021).

Source: Gronbach et al., 2022:11

4.2.1 Vertical Expansion of Existing Social Protection Programmes

The vertical (intensive) expansion entails the increment of the amount or depth of a particular programme, by either adding components or by increasing the value of cash transferred to an individual or household (Devereux, 2021:423). President Ramaphosa announced on 21 April 2020 the second phase of recovery in South Africa where a fiscal support package was a fundamental component to the government's response. He declared that a social assistance and financial support scheme worth R50 billion was targeted at the poorest and most disadvantaged, representing 10 percent of the budget allocation for COVID-19 relief measures, and 1 percent of the country's gross domestic product (GDP) (UNDP South Africa, 2020:30). The policy package was budgeted at R30 billion and existing beneficiary lists and disbursement platforms were used. The first measure after the announcement was that all recipients of South Africa's grants—excluding the Grant In-Aid— would be eligible to receive monthly top-up transfers for a period of six months, between May and October 2020 (The Presidency, 2020). Recipients of the Disability Grant, the Old Age Pension, the War Veteran Grant, the Foster Care Grant, as well as the Care Dependency Grant received a top-up of R250. The Child Support Grant initially increased by R300 per child in May 2020, but was later changed to R500 per caregiver from June until October 2020. The Minister of Social Development explained in a press conference in April 2020, that the change in the allocation of the Child Support Grant top-up from the beneficiary to the recipient was due to the limited budget of the top-up (South African Government, 2020).

4.2.2 Horizontal Expansion of Social Protection Programmes

The horizontal (extensive) expansion comprises of extending the reach of existing social protection programmes and platform by registering additional beneficiaries. The process is more complex than the vertical expansion, as new beneficiaries are required to apply or be identified for the eligibility, vetted, and registered which may cause delays in the disbursement (Devereux, 2021:423).

4.2.2.1 The Special COVID-19 Grant

From 27 March 2020, South Africa was placed into a nation-wide lockdown, which encompassed through a risk-adjusted approach that ranged from Alert Level 1 to Alert Level 5. The national lockdown resulted in the loss of jobs and income for many South Africans who had already been living in poverty and without any income protection, which led to the introduction and implementation of the special COVID-19 SRD Grant. It was

implemented with the sole aim of supporting individuals who had no other income during the pandemic (IEJ, 2020). The grant was initially rolled out for a period of six months but was later extended for several months (Department of Social Development, 2021:1).

The criteria for the eligibility for receiving the grant was: a South African citizen, permanent resident or a refugee registered at Home Affairs or a resident within the Republic of South Africa's borders; above the age of 18 years; unemployed, not receiving any kind of income; not a recipient of another social grant; not receiving an unemployment social benefit including the UIF and ineligible to receive the UIF; not receiving a stipend from the National Student Financial Aid Scheme (NSFAS); not a recipient of any other COVID-19 response related support from the government; and not a resident in an institution that is funded or subsidised by the government (Department of Social Development, 2021:1).

At the rollout of the special COVID-19 SRD grant, SASSA and the Department of Social Development commissioned a Rapid Assessment of the Implementation and Utilisation of the grant (Department of Social Development, 2021). The assessment reported that, in the period between May and November 2020, SASSA received a total of 9,537,007 applications for the special COVID-19 SRD grant, with more male applicants. Of those, 6,449,916 (67.6%) were approved, with men comprising 67.9% (4,379,331) compared to only 32.1% (2,070,285) of women's applications being approved. However, when the ages and genders of the applicants were analysed, it was discovered that there were less applications submitted by women who were at their peak reproductive ages, while between the ages of 18-24 years and 49-59 years of age categories, there were more women that applied than men. This may imply that receiving the CSG had a significant influence in motivating women to submit application for the special COVID-19 SRD grant. (Department of Social Development, 2021:8-10).

There were several inefficiencies and controversies that arose regarding the administration of the special COVID-19 SRD grant. A significant issue was the slow and unequal rollout of the grant, due to the limited capacity of administrators and/or the confusion related to the eligibility criteria (Devereux, 2021:439). A significant amount of the special COVID-19 SRD grant's recipients were men, comprising of almost 68 percent (Senona, Torkelson & Zembe-Mkabile, 2021:5). This was mainly caused by the criteria to qualify for the grant. Many women were ineligible to receive the grants, as they were already recipients of other grants. For

example, 97 percent of the CSG recipients are women (Senona et al., 2021:5). However, as indicated in the previous sections, the CSG is for the primary care of children, and the women simply administer it on the children's behalf.

The Caregiver's Allowance may be regarded as a "top-up" of the CSG due to the recipients of the CSG qualifying to receive the additional income worth R500. Resultantly, an overwhelming majority of the Caregiver's Allowance recipients were women, at 95 percent (Black Sash, 2021). This comes as no surprise due to the feminisation of childcare and women receiving the grant on behalf of the children they are raising. The COVID-19 SRD grant was initially rolled out for six months and was extended several times. It is now expected to come to an end in March 2025. The Caregiver's Allowance, on the other hand was strictly disbursed for five months, between June and October 2020. The termination of the Caregiver's Allowance on 31 October 2020, resulted in a significant number of poor women losing additional social protection. They were unable to apply for the special COVID- 19 SRD grant, as they were already receiving the CSG (Senona et al., 2021:5).

The COVID-19 pandemic has illuminated the inefficiencies of South Africa's social protection measures, by leaving out a fundamental group of the nation. Before the pandemic, unemployed individuals between the ages of 18-59 did not receive social assistance. With the introduction of the special COVID-19 SRD grant, the government had the opportunity to reach that population for the first time. However, a significant number of women were left out. During the lockdown period of the pandemic, social reproduction work was multiplied as a result of the confinement of individuals within households. Due to the feminisation of care work, women and girls were left with the responsibility to complete the additional housework. In its strategies to expand social protection measures, the government did not consider how the pandemic and subsequent lockdown would affect women and men.

Additionally, the criteria for the special COVID-19 SRD set by the government disqualified many women who were recipients of the CSG. Instead of putting cash in women's hands, South Africa's government did the opposite, by taking cash away from women.

This chapter has indicated that the social protection measures that were implemented by the government aimed to provide support to the most vulnerable South Africans—women and children—but fell far short due to their failure to consider the gendered nature of social reproduction work in South Africa, including the disadvantaged position of women as recipients of grants on behalf of children in their care. Women are expected to provide social

reproduction to their families without compensation. Furthermore, in the case of the two new COVID-19 grants, they are effectively penalised for the care work they perform. The South African government and international institutions have established policies that aim to address gender inequality, however, they continue to ignore the contribution made by women to the economy and in overall society through care work. In the next chapter, the analysis will turn to the social protection measures by the government in the labour market.

CHAPTER FIVE: GENDER, COVID-19, AND THE SOUTH AFRICAN LABOUR MARKET

5.1 Gender Inequality in the South African Labour Market

Toward the end of apartheid, the formal structures of the discriminatory regime were dismantled and replaced with a democracy underpinned by a progressive Constitution. The first democratically elected South African government took significant strides in promoting the equality of all citizens. It further sought to address inequities across gender lines by protecting women's rights and formally committing to reducing gender inequality. In the labour market, a number of laws pertaining to equal employment opportunities and a minimum wage were introduced in an effort to either directly protect women, or to provide some level of support to the vulnerable employment sectors that are dominated by women. The newly democratic government tasked the Ministry of Labour with the responsibility to establish a legal framework that would be a guide for all employees and employers to equally participate in the new South African labour market. The Employment Equity Act was enacted in 1998 as a legislation that addresses inequalities among racial and gender lines. The Act aims to achieve equity in the labour force through the advancement of equal opportunities, the fair treatment of employees and the commitment to eliminating workplace discrimination (*Employment Equity Act, No. 55 of 1998, 1998:s2*).

Additionally, the South African government reinforced its effort in promoting equality by making several policy commitments in the international arena to reduce gender inequality. In this regard, South Africa was a part of the Fourth World Conference on Women which was held in Beijing, China in 1995, and endorsed the Beijing Platform of Action and thus, committed itself to foster the goal of gender equality. The Beijing Declaration and Platform for Action emphasised that the decisions made on the budgets of policies and programmes are to be approached with a gender-sensitive lens, and for programmes that focus on promoting gender equality to receive adequate funding and support (Posel & Casale, 2019:4). On a regional level, South Africa ratified policies that aimed to combat the discrimination of women, including the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, as well as the Southern African Development Community (SADC) Protocol on Gender and Development (Posel & Casale, 2019:4).

The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), an extensive treaty of international law, often regarded as the universal bill of rights for women,

was enacted by the UN General Assembly in 1979. It acknowledges that "extensive discrimination against women continues to exist" and emphasising that such discrimination "violates the principles of equality of rights and respect for human dignity" (CEDAW, 1979:1). The Convention was established as a resolution to address the disadvantaged position and discrimination against women in society. It was agreed upon that states need to be legally bound by a set of specific standards pertaining to the equality of women in all areas of life, as there was previously no convention that particularly addressed the discrimination of women. It provides the basis for the internationally adequate standards and procedures to achieve equality for men and women by ensuring equal access to opportunities. It prohibits discrimination against women in both the private and public spheres of life. The Convention defines the discrimination against women as "any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field" (Commission for Gender Equality [CGE], 2020b:13). States that acceded or ratified the Convention are legally required to implement its principles, and are obliged to submit national reports to the CEDAW Committee every five years, providing updates on the strategies they have implemented in compliance with the commitments to the treaty (CGE, 2020a:136).

South Africa ratified the Convention without reservation in 1995, and CEDAW has since been fundamental in providing guidance to South Africa towards achieving gender equality. The first report was submitted by South Africa in 1998, and combined its second, third and fourth reports in 2008, which were presented to the CEDAW Committee in 2011 (CGE, 2020a:55). In its report, South Africa identified four cross-cutting issues and emphasised that they were of high priority: (i) the improvement of the socio-economic conditions of women, particularly with regard to unemployment, poverty, and their predominance in the informal and second economy; (ii) reducing violence against women while tackling the attitudes and behaviours that perpetuate iniquity of gender-based violence; (iii) vigilance and strides to address the violations of constitutional and human rights against women and girls through alliances with various sectors such as the government, the private sector, civil society and donors, implementing campaigns with set targets, monitoring and evaluations and impact

assessments and; (iv) removing obstructions in public and private spheres with the aim to combat bias, prejudice and discriminatory practices (CGE, 2020b:10).

The Commission on Gender Equality (CGE) is an entity of the Constitution that was established to promote respect for gender equality, as well as developing, protecting, and attaining gender equality (CGE, 2021). In 2020, the CGE alongside CEDAW released a research report as an assessment of the South African government's compliance with the commitments it had made as a signatory of conventions, policies, charters and international treaties that are in relation to the safeguarding and advancement of gender equality and the protection of women. The report asserted that South Africa is experiencing a plethora of issues which are related to gender inequality, and highlighted several challenges that should be prioritised, with one being the feminisation of poverty. It emphasised that the government should prioritise the improvement of the socio-economic status of women, especially their high levels of poverty, unemployment, and in the labour market where they are concentrated in the second and informal economy (CGE 2020a:9). The report indicated that over the first 21 years of democracy in South Africa, the positionalities and life experiences of the majority of women have remained the same and even more difficult (CGE 2020a:15).

Although the democratic South African government adopted new legal and policy frameworks on national, regional and international platforms with the aim to eradicate gender discrimination, careful evaluation and analysis is equally fundamental to determine whether the changes were being implemented and how they are affecting women (Casale & Posel, 2019:4). The government adopted policies and laws that aimed to promote gender equality and to protect women, as a previously disadvantaged group in society. Instead of the practical implementation of the policies, the South African society continues to experience inequities and is deeply rooted in inequality. This section of the mini-dissertation focuses on the discrimination of women in the labour market which perpetuates gender inequality. It will explore labour surveys that were conducted by Stats SA in the years 2000 and 2022 – a vast period after the South African government had committed itself to regional and international policies that aimed to promote gender equality.

The labour market is a fundamental driver that enables gender and income inequality due to wages and salaries that typically vary based on the sector, the quality of the working conditions, gender as well as the lack of job opportunities. Despite the democratic

government's efforts in adopting excellent policy frameworks and interventions that promote the economic empowerment of women, with the aim to achieve gender equity in the economy, the country continues to experience substantially high levels of gender disparities. In 2022, the ILO recorded the global participation rate for women in the labour force stands below 47 percent, in comparison to 72 percent for men (ILO, 2022). In South Africa, the participation rate for women in the labour force in the second quarter of the same year stood at 53 percent in comparison to 64,4 percent for men – a difference of 11,4 percentage points (ILO, 2022). This implies that nearly half of women of working age in South Africa do not participate in the labour force and are economically inactive, compared to 35,6 percent of men.

Table 2: Indicators of the labour market by sex for the working-age population (15-64 years) in 2000 and 2022

Labour Market Indicator	September 2000	April – June 2022
	(Thousand)	
Employed (a)		
Female	5 566	6 920
Male	6 770	8 642
Total for both sexes	12 336	15 562
Unemployed (b)		
Female	2 004	3 809
Male	1 738	4 185
Total for both sexes	3 742	7 994
Not economically active (c)		
Female	6 720	9 528
Male	4 210	7 093
Total for both sexes	10 930	16 621
Labour force (a+b)		
Female	7 570	10 729
Male	8 508	12 827
Total for both sexes	16 078	23 556
Working age population (a+b+c)		
Female	14 290	20 257
Male	12 718	19 920
Total for both sexes	27 008	40 177
Discouraged work-seekers		
Female	555	1 889
Male	981	1 680
Total for both sexes	1 536	3 568

**Numbers may possibly not equate to the totals for both sexes due to rounding off.*

Sources: Labour Force Survey Historical Revision September Series 2000 to 2007 (2009:4) and Quarter Labour Force Survey Quarter 2: 2022 (2022:2) – Data provided by Stats SA.

The table above reveals that between the years 2000 and 2022, the labour force in South Africa increased by 7.5 million, with males accounting for the majority of 4.3 million, while the number of females entering the labour force being 3.1 million in that period. Compared to the year 2000, the working-age population increased by 67 percent in 2022. The number of employed individuals increased by 4.2 million, a low amount in comparison to the 13 million persons of working-age. The inability of South Africa's economy to absorb the increased number of working-age persons resulted in the increase of unemployed individuals, with the number increasing by 48 percent in that period. The increase in unemployed persons also affected the number of discouraged job-seekers. The amount of discouraged job-seekers increased significantly among both gender lines, with the number multiplying from 1.5 million in 2000 to 3.5 million in 2022.

Table 3: The workforce (employers, employees and self-employed) by sector and main industry between 15-64 years in 2000 and 2022

Sector and industry (formal and informal)	2000			2022		
	Female	Male	Both sexes	Female	Male	Both sexes
	(Thousand)					
Agriculture	543	819	1 362	276	597	874
Mining	14	417	431	85	323	407
Manufacturing	661	1 093	1 754	505	1 002	1 507
Utilities	12	67	79	22	82	104
Construction	57	652	709	165	1 012	1 177
Trade	1 484	1 411	2 895	1 462	1 701	3 163
Transport	100	585	685	128	779	906
Finance	412	609	1 021	1 016	1 444	2 460
Community & social services	1 220	883	2 103	2 394	1 428	3 821
Private households	1 063	234	1 297	857	267	1 124
Other	—	—	—	11	8	18
Total	5 566	6 770	12 336	6 920	8 642	15 562

**The 'Other' category had not been recorded by Stats SA in 2000.*

Sources: Labour Force Survey Historical Revision September Series 2000 to 2007 (2009:17-18) and Quarter Labour Force Survey Quarter 2: 2022 (2022:54) – Data provided by Stats SA.

Table 3 shows the distribution of employment between genders across various sectors in 2000 and 2022. The workforce has grown by 3.2 million, with men dominating the majority of the sectors. In both years, males had higher chances of being employed in most sectors, except for the private household and the community and social services sectors. There has been a decline in the portion of women working in sectors that include the agricultural and manufacturing sectors. However, a slight increase of females in more formal occupations has taken place, with more being employed in finance. Overall, throughout the 22-year period, occupational segregation continued, with males and females being concentrated in jobs that are associated with the traditional gender roles.

Oxfam South Africa (2020:9) refers to labour market inequality as “when a group or individual earns more from the work they do than another group or individual because of the way in which the labour market values the work that is done”. Inequality in the labour market is exacerbated by the norms that are associated with the gendered roles in households, which are extended into the economy. The universal and long-term segregation in work sectors, the insecurity of women’s occupations, the instability of work, and the disproportionate burden of care carried by women are all reinforced by the gendered economic roles (Oxfam South Africa, 2020:49).

The stereotypes that are associated with each gender are highly problematic and detrimental to society, such as women being expected to be carers and homemakers due to their ‘gentle nature’; while the expectation for men is to perform physical and technical work and in doing so, to be the breadwinners. The government through its policy-making and practices in the private sector, also contributes to the norms about the gendered nature of the economy. For example, the norms that recognise the economy as the only labour market and do not acknowledge households as workplaces, although work is performed within homes, perpetuate the exclusion of private household workers from labour laws, as well as the statistics that do not record unpaid caregivers as participants of the labour force (Oxfam South Africa 2020:49).

5.2 The Government’s Response to Wage and Worker Precarity During COVID-19

Governments around the world implemented job retention policies as strategies that aimed to alleviate the significant job losses that were experienced at the outbreak of the COVID-19 pandemic. The policies assisted companies which were experiencing a reduction in

production and activity by supporting the wages of employees and alleviating labour costs through subsidies (Köhler & Hill, 2021:4).

5.2.1 COVID-19 TERS

The TERS was established by the South African government in December 2019. The programme was initially created to provide relief to businesses that were experiencing financial distress by temporarily laying off their workers, provided that the workers were receiving training through the Sector Education and Training Authority (SETA) and received a training stipend. In March 2020, the Department of Employment and Labour made the statement that the programme would be revised and extended to address the pandemic, by creating a COVID-19 Temporary Employer-Employee Relief Scheme (COVID-19 TERS) (Gronbach et al., 2022:15). The amended scheme enabled employers to claim financial support on behalf of their employees to amounts between 38 percent and 60 percent of their original salaries. A sliding scale was used to calculate the cash payments, and each employee would receive a maximum of R17,712 per month. The payments were later disbursed directly to the employees due to challenges that included irregularities and delayed payment processes. By October 2021, a total of R63 billion was disbursed to 5.4 million employees of more than 1 million companies (SA News, 2021).

Table 4: Distribution of TERS by sex between Waves 1-5

Sex	Wave 1 (April 2020)	Wave 2 (June 2020)	Wave 3 (October 2020)	Wave 4 (January 2021)	Wave 5 (March 2021)
Male	61%	60%	63%	65%	64%
Female	39%	40%	37%	35%	36%

Source: Köhler & Hill (2021:12)

Table 4 provides the distribution of the TERS benefit between women and men. In a study that was conducted by the NIDS-CRAM between Waves 1-5 (April 2020 – March 2021) of the pandemic, it discovered that the overwhelming majority of the TERS recipients were men. During Waves 1-5, NIDS-CRAM reported that the proportion of men in the employed population was 53 and 56 percent. The study indicates in Table 4 that approximately 61 percent of the recipients of the TERS were men, which is greater than the number of men

who were reported to be employed (Köhler & Hill, 2021:15). Throughout all waves, men accounted for more than 60 percent of recipients, indicating that the TERS has significantly benefited men during the hard lockdown period of the pandemic.

5.2.2 Presidential Employment Stimulus

President Ramaphosa established the Presidential Employment Stimulus in October 2020, as a component of the Economic Reconstruction and Recovery Plan (ERRP), which consisted of strategies to deal with the economic disruptions of the COVID-19 pandemic. The goal of the ERRP is to acquire rapid and inclusive growth for the creation of sustainable employment opportunities in the private sector, by implementing economic reforms and other strategies to enable the recovery. The Presidential Employment Stimulus aimed to make use of public funding for job creation and to support livelihoods during the recovery of the labour market (The Presidency, 2021). The first phase of the programme envisaged a budget worth R13 billion through 15 government departments to attain the goal of creating job opportunities and save jobs through wage subsidies, as well as providing support to the incomes of self-employed individuals in sectors that include agriculture and childcare.

Phase 2 had a budget of R11 billion and was announced in October 2021, targeting the youth for employment opportunities. The Office of the Presidency reported that about 320,000 job opportunities were created by September 2021. Additionally, 40,000 jobs were protected and 120,000 livelihoods were aided. Most job opportunities were created under a Basic Education Employment Initiative, consisting of about 200,000 teaching assistants. The majority of the beneficiaries consisted of the youth, making 84 percent, and 65 percent were women (The Presidency, 2021). Although the employment opportunities were available for a limited time, the programme had a significant reach and compensated the national minimal wage. During the first phase, school assistants received a monthly stipend of R3 500 for an initial period of four months and later extended to five months, between December 2020 and April 2021 (Gronbach et al., 2022:17). Over the five-month period, an individual who had the employment opportunity as a school assistant, ought to have earned a total of R17,500.

The government provided additional social protection measures through relief funds for individuals such as athletes, artists, registered tourist guides and technical personnel, which were disbursed by the respective departments (Gronbach et al., 2022:18). The Department of Sports, Arts and Culture had a relief fund worth R150 million, which provided financial

support to persons and projects in the arts and sports sector who experienced challenges during the national lockdown. Similarly, the Department of Tourism administered a Tourism Relief Fund for registered tourist guides working as freelancers. The scheme's budget was R30 million, disbursing R1,500 per month to individuals for three months (Gronbach et al., 2022:18-19). The financial sector also provided support to individuals and businesses, through means such as tax and payment relief, credit restructuring and additional loans. The Banking Association of South Africa (2020), announced that South African major commercial banks were offering payment and debt relief to their customers who had previously had a responsible relationship with banks and facing financial challenges due to COVID-19.

South Africa's working age population has grown exponentially between the years 2000 and 2022, almost doubling in size. Unfortunately, the labour market was unable to absorb all working age individuals, which has resulted in the high unemployment rate. The majority of the working age population consists of women, however, more women are reported to be unemployed and economically inactive, overall. This may be caused by several factors, with one being that women have had to sacrifice opportunities to advance their education and work to provide full time care work in their homes. Another reason may be that due to less education opportunities, women's choices in jobs are limited in the market, which may result in them working in social reproduction sectors. As indicated in Table 3, women are concentrated in the private households as well as the community and social services sectors, which mainly comprise of social reproduction work – an extension of the care work they are trained to perform in households.

In its aim to mitigate the ramifications of the COVID-19 crisis upon the economy, the South African government provided fiscal support to companies and their employees through the COVID-19 TERS, the Presidential Employment Stimulus, as well as other relief funds. A significant shortcoming of these measures was that the government did not consider employees who are part of the informal sector, such as domestic workers and hawkers. Those individuals did not qualify to receive the government's fiscal support. A large portion of South Africa's economy consists of the informal sector, comprising of a significant number of women, which is not represented in the formal economy. It comes as no surprise that over 60 percent of the COVID-19 TERS beneficiaries consists of men, a gender that has benefited from the patriarchal economic system even prior to the pandemic. This chapter

has revealed that the measures by the South African government in response to the economic effect of COVID-19, have failed to provide support to women in the labour market, and to subsequently address gender inequality in the economy, although they experienced more job losses than men during the crisis. For as long as the social reproduction work completed by women is undervalued and unrecognised by the government, women will continue to be overlooked in the economy.

CHAPTER SIX: CONCLUDING REMARKS

South Africa, a country that has overcome adversities that include colonialism and apartheid, has transitioned into a democratic regime, encompassing one of the most advanced Constitutions in the world. The Constitution holds the nation's fundamental values that include equality, democracy, and reconciliation. It is an embodiment of the vision of the anti-apartheid revolutionary who fought for a South Africa that would belong to all who live in it – a non-racial nation, rooted in human rights. South Africa is also a member of international bodies and signed numerous treaties that aim to mitigate discrimination and actively promote equality. However, South Africa suffers among the highest levels of inequality in the world, and the austerity policies contribute to the oppression of marginalised groups. The government has implemented various tools to overcome the high levels of inequality, including the expansion of social protection programmes to reach the most vulnerable members of society.

Although South Africa is democratic, patriarchy is deeply rooted in its society. Women and girls carry responsibilities of being the caregivers of the nation by performing unpaid care work such as cooking, cleaning, and caring for the ill and elderly. Gender is a social construct that has reinforced and advanced the capitalist economy through the subordination of women. The strategies that were implemented by governments to mitigate the spread of the COVID-19 virus, such as lockdowns and the closing of national borders has exposed and exacerbated pre-existing inequalities within societies. During the lockdowns, care work was multiplied due to the extra time that families had spent within their homes. For example, instead of children going to school for education and care, the females in the households had to take on those responsibilities. The unpaid social reproduction work completed by women in households and in low-paying jobs significantly subsidises the government for its responsibility to provide services of social reproduction.

As a response to the loss of income resultant to the confinement of the lockdowns, many countries expanded their social protection measures by introducing fiscal stimulus packages. The South African government introduced the special COVID-19 Social Relief of Distress Grant, a temporary cash transfer programme worth R350, for working-age individuals with no source of income. In the labour market, the government implemented job retention policy through a wage subsidy by introducing the Temporary Employer-Employee Relief Scheme, with the

aim to prevent the retrenchment of the employed by providing wage subsidies to the employers who have reduced or completely shut down operations due to the surge of the pandemic. Evidence has shown that the social protection responses that were implemented by the government in both the labour market and in the households, were not benefitted by women at the same rate as men, although women were affected by the pandemic more than men. While women experienced the most loss of income than men, they received less support through social protection. Instead, by being the primary caregivers of children, they were further penalised for their responsibilities of unpaid care work. The study sheds light on the normalised and systematic injustices of capitalism which rely on patriarchy, by analysing the social security measures during the pandemic.

UN Women has highlighted that for countries to fully recover from the pandemic, their strategies should prioritise the experiences of women and girls, and recommended that governments put cash in women's hands. The dissertation has argued that the South African government did not consider and prioritise the different ways that the pandemic affected women in comparison to men in its strategies to mitigate the financial implications of the pandemic. The government did not provide additional or tailored support to women, as a previously marginalised group prior to the pandemic. The study asserts that women as caregivers should be acknowledged and compensated for their contribution to the care economy, as the unpaid care economy is fundamental to the growth of the society. By exploring the recommendation made by UN Women, the dissertation proposes the introduction of a new permanent social grant that will be targeted at women who are caregivers. It is evident in the case of the CSG that when women receive social grants, the money is managed well, contributing to the wellbeing of the children which they are responsible for. When cash is placed in women's hands, they also experience freedom and decision-making power, which advances their positions in households and in overall society.

South Africa is a member of global governance institutions such as the Beijing Declaration and Platform for Action for Gender Equality and UN Women that aim to promote gender quality. When the world was struck by the COVID-19 pandemic, these institutions presented the very strong principle to put cash in women's hands, as a strategy that aimed to preserve their decades-old efforts to protect and advance the rights of women. In theory, the recommendation appeared to be an intervention that will benefit women globally. However,

by analysing South Africa as a country-level case study, the intervention appears to have advantages as well as limitations. It is also important to be cautious about how a universal solution to a complex issue is implemented on a national level. However, compensating women for social reproduction work by putting cash in their hands, may be a starting point to acknowledge their contribution to the economy. This strategy is a possible solution for the emancipation of women.

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