



University of the Witwatersrand
Forced Migration Studies Programme

RENEWAL:
Regional Network on AIDS, Livelihoods and Food Security

Summary of key findings

Johannesburg:
***A focus on urban livelihoods, rural-urban linkages and
urban food security***

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Contents

INTRODUCTION.....	3
EMBRACING COMPLEXITY OF THE AFRICAN CITY	3
AN OVERVIEW OF THE KEY FINDINGS.....	4
MIGRATION PATTERNS INTO THE CITY: DIFFERENCES BETWEEN URBAN INFORMAL AND URBAN FORMAL.....	4
<i>Urban informal</i>	5
<i>Urban formal</i>	6
<i>Unaccompanied child migrants</i>	7
URBAN LIVELIHOODS	8
<i>Earning money</i>	8
<i>Grants and social assistance</i>	8
URBAN – RURAL LINKAGES.....	8
<i>Remittances</i>	9
FOOD SECURITY	9
<i>Food access</i>	9
<i>Food shortage</i>	10
<i>Coping strategies in times of a food shortage</i>	10
<i>Food utilisation: Dietary Diversity Score</i>	11
URBAN AGRICULTURE: FOOD ACCESS NOW AND IN THE FUTURE?	11
HIV: TESTING AND PERCEPTION OF RISK	11
CONCLUSION	12
POLICY IMPLICATIONS	12

Introduction

This short paper presents a summary of the data collected in Johannesburg as part of a three-city (Addis Ababa, Johannesburg, Windhoek) RENEWAL study investigating linkages between migration, HIV and urban food security. Through a sustainable livelihoods lens, and focussing on the differences between urban informal and formal areas, the information presented here focuses on a set of key variables that have been synthesised to describe: (1) migration patterns into the city; (2) the urban livelihood strategies employed by respondents and their households; (3) linkages between urban and rural; (4) urban food security as an outcome of the livelihood system; and, (5) HIV testing patterns and perceptions of risk to HIV.

Embracing complexity of the African city

A cross-sectional household survey, undertaken in 2008, constitutes the main data source for the Johannesburg study (n = 487). In an attempt to embrace the complexity of the modern African city, the survey sample was divided between one purposively selected urban informal settlement and three purposively selected urban formal areas (three suburbs in the dense inner-city).¹ A cluster-based random sampling technique was then applied within each area. A total of 195 households (40% of the total population surveyed) were interviewed in the informal settlement and 292 households (60% of the total population surveyed) in urban formal areas of the inner-city. This enables comparisons to be made between those residing informally and those residing in the inner-city. The survey questionnaire was designed to gather information on all individuals within the household and the survey obtained information on 1,533 individuals.

In terms of nationality, 60% (n = 293) of the surveyed population are South African internal migrants and 31% are cross-border migrants (n = 150). In addition, there is a control group (9%; n = 44) of non-migrants; respondents who report always having lived in Johannesburg. The inclusion of these three groups within the survey enables important comparisons to be made between different types of migrant (internal and cross-border) and in comparison to a non-migrant group. Cross-border migrants were most likely to be located in the formal inner-city, whilst the informal settlement was mostly home to internal migrants.

To supplement the survey, a range of qualitative studies were undertaken including: focus group discussions within each area to further investigate urban food security; interviews with children (unaccompanied cross-border migrant children in the inner-city and children within the informal settlement); and, student projects investigating (1) migration status and access to health care among

¹ The informal settlement was purposively selected as the research team has conducted research in this site previously, acting as an effective entry point to conducting the survey. The three inner-city suburbs were purposively selected as they are known to be home to cross-border migrant populations.

Zimbabwean migrants², and (2) access to health and social services for people living with HIV in the informal settlement.³

An overview of the key findings

This study provides information on urban informal and formal areas, highlighting that internal South African migrants are likely to reside informally, and cross-border migrants are likely to reside in the dense formal inner-city. The synthesis presented below focuses on a comparison between urban informal and formal areas.⁴ Across a range of variables – including urban food security – it is found that residents of the informal settlement are less well-off than residents of the inner-city. As will be described, different urban residents have different relationships to ‘home’, in either rural or urban areas. The importance of ‘home’ is emphasised particularly in terms of the place that they would return to should an individual become too sick to work. In addition, this relationship is mediated through their ability to remit money, food or goods that contribute to the livelihood strategies of those who remain at ‘home’, in either rural or urban areas. The likelihood of remitting money, food or goods is significantly associated with residing in the inner-city and with being a cross-border migrant.

Migration patterns into the city: differences between urban informal and urban formal

This study provides information on two urban populations residing within (1) an urban informal settlement and (2) urban formal areas of the inner-city. The migration status of these two urban populations is of importance: South African internal migrants are significantly more likely to reside in the urban informal settlement and cross-border migrants are significantly more likely to reside in the formal inner-city.

² Pophiwa, N. (2009) Healthy Migrants or Health Migrants? Accounting For the Health Care Utilisation Patterns of Zimbabwean Migrants Living in South Africa. Submitted MA in Forced Migration, University of the Witwatersrand.

³ Bezuidenhout, J. (2009) Poverty and HIV in South African urban informal settlements: exploring the obstacles residents face in accessing basic services and health care services. Undergraduate research elective report, Faculty of Medicine, Radboud University Nijmegen.

⁴ Specific comparisons have also been made between migrant groups. This summary focuses on informal and formal for comparison. It is important to note that the informal settlement is mostly home to internal South African migrants whilst cross-border migrants are found in the inner-city.

		South African internal migrant	Cross-border migrant	Always lived in Johannesburg	Total
Informal	n	148	21	26	195
	%	76%	11%	13%	40%
Formal	n	145	129	18	292
	%	50%	44%	6%	60%
Total	n	293	150	44	487
	%	60%	31%	9%	100%

Table 1: Cross-border migrants are found in the inner-city

An overview of the demographics and reasons for migrating to Johannesburg are described for each population below.

Urban informal

As shown in table 1 above, the urban informal settlement was found to be home to mostly internal South African migrants (n = 147; 76% of all informal settlement residents interviewed). This group originates mostly from the Eastern Cape (27%; n = 53), Limpopo (12%; n = 24), Northwest (12%; n = 24) and Kwa-Zulu Natal (10%; n = 20) provinces of South Africa. The majority of informal settlement residents have rural linkages (81% of all informal settlement residents). This is true for both internal migrants (87.1%; n = 108) and cross-border migrants (90%; n = 18) residing in the informal settlement. Residents of the informal settlement mostly reported coming to Johannesburg for economic reasons (82%; n = 135), to be reunited with relatives (7%; n = 12) and for education (5%; n = 9). On average, residents have been in Johannesburg longer than those residing in the inner-city with most reporting having been in the city of between five and ten years.

Households were more likely to be headed by a female (35% of households in the informal settlement compared to just 22% in the inner-city), were larger in size (with three or more members), and were more likely to have children than households in the inner-city. The majority of households reside in shacks (44%; n = 84). This informal settlement reflects a diverse range of housing, with 33% (n = 64) residing in old migrant worker hostels.⁵ This site is currently being upgraded by government. It is important to note that the survey and qualitative studies clearly highlight the challenges residents are encountering through the way the upgrading is being delivered.

Linkages between environment, housing and perceptions of health are made in the survey data, and supported in the qualitative work. The majority (82%) of informal settlement respondents believe that

⁵ The sampling strategy employed within the informal settlement ensured that households were sampled across the different housing types present in the settlement. For more detail on the sampling strategy, please see the main Johannesburg report.

there are more diseases where they live now, compared to residents of the inner city (59%). Residents of the informal settlement are significantly more likely to report that there are more diseases where they live now. Sixty-seven percent of informal settlement respondents report that they are not satisfied with their current residence.

The informal settlement remains without electricity, despite local government development. Seventy-five percent (n = 147) of respondents from the informal settlement use paraffin for cooking and 78% (n = 153) use candles for lighting. The use of paraffin and candles are closely linked to the danger of shack fires. Only 36% (n = 65) of residents have water access inside the household. Of those without water inside their homes, 90% (n = 108) rely on communal taps. Almost one quarter (n = 42) of households in the informal settlement report making use of the open bush as they do not have access to a toilet. The majority of residents make use of communal toilets. Refuse collection is inadequate within the informal settlement with only 24% reporting that rubbish is collected weekly. A range of public health challenges are associated with inadequate access to clean water, inappropriate sanitation and refuse collection, associated with the spread of water-borne infectious diseases. These challenges are exacerbated in the context of HIV and AIDS whereby people living with HIV are more susceptible to infectious diseases. In situations where a household is caring for a sick individual, the importance of being able to easily access clean water and appropriate sanitation increases. Qualitative work in the informal settlement clearly highlights that individuals struggle with an inadequate water supply, no access to electricity and poor sanitation. In addition, participants reported that inadequate access to basic services had a negative impact on the health of people living with HIV.⁶

Urban formal

Cross-border migrants were mostly likely to reside in the inner-city, as shown in table 1. It is important to note that the three suburbs included in the survey were purposively chosen in order to capture cross-border migrants. The survey did not aim to quantify the number of cross-border migrants present in the city, nor did it set out to achieve a representative picture of all cross-border migrant groups residing in the inner-city. Through the sampling employed, Zimbabwean migrants accounted for the largest group of cross-border migrants who participated in the survey in the inner-city (n = 109), with most Zimbabweans originating from Matabeleland. Such clustering of cross-border migrant groups supports other studies conducted in the Johannesburg inner-city that find individuals belonging to particular nationalities tend to cluster together, within buildings and across suburbs.⁷

⁶ Bezuidenhout, J. (2009)

⁷ Jacobsen, K., & Landau, L.B. (2003). The Dual Imperative in Refugee Research: Some Methodological and Ethical Considerations in Social Science Research on Forced Migration. *Disasters*, 27(3), 185.

Vigneswaran, D. (2007). Lost in Space: Residential Sampling and Johannesburg's Forced Migrants, *Migration Methods and Field Notes #4*: Forced Migration Studies Programme, University of the Witwatersrand.

Residents of formal areas are more likely to have urban linkages than residents of the informal settlement, with 39% of all formal respondents reporting urban linkages, and 61% reporting rural linkages. Cross-border migrants residing in the formal inner-city are more likely to have urban linkages (52%; n = 67) than internal migrants (27%; n = 38). This suggests that this group has greater knowledge and experience of the urban environment compared to residents of the informal settlement. Residents of the formal inner-city mostly reported coming for economic reasons (77%; n = 206), to be reunited with relatives (10%; n = 28), for education (6%; n = 15), and to escape political persecution (4%; n = 10). On average, residents have been in Johannesburg for a shorter period of time than those residing in the informal settlement with most reporting being in the city for less than five years.

Households were more likely to be headed by a male (78%), were smaller in size (mostly with 2 – 3 members) and were less likely to have children than households in the informal settlement. The majority of households (43%; n = 125) were found to reside in 'multi-household flats' – flats that have been subdivided to house more than one household. The majority reside with between one and four additional households. Such overcrowding presents a range of public health challenges, in particular associated with the spread of infectious diseases such as tuberculosis. An additional 23% (n = 65) reside within single-household flats. Thirty-two percent of respondents from the inner-city report that they are not satisfied with their current residence.

Unaccompanied child migrants

Interviews were accompanied with two different groups of children: (1) unaccompanied minors who have travelled to Johannesburg from Zimbabwe and currently reside within the Central Methodist Mission (CMM)⁸ in the inner-city; and (2) children living with families in the informal settlement.

The numbers of unaccompanied child migrants finding their way to Johannesburg has increased; previous work conducted by FMSP in 2007 found unaccompanied child migrants within border towns but they were not located in cities such as Johannesburg.

Interviews with unaccompanied child migrants from Zimbabwe found that their reasons for migrating to Johannesburg were closely linked to the death of a parent or a care-giver, and migration was seen as a livelihood strategy. The children drew linkages between their health, the environment within which they are living, food access and general well-being.

⁸ The Central Methodist Mission is located in the inner-city and has a large population of Zimbabwean migrants residing there. The numbers of unaccompanied children finding their way to the CMM has increased in the last year.

Urban livelihoods

Earning money

Urban livelihoods are cash-based. Respondents residing informally are significantly more likely to report that they are not currently earning money: 59% of respondents residing informally compared to 44% of respondents residing formally are not currently earning money. Residents of the formal inner-city are most likely to be working in the service industry (25%; n = 63), whilst residents of the informal settlement are most likely to be engaged in construction work (18%; n = 26).

Grants and social assistance

In order to explore the role of social protection in Johannesburg, the survey collected information on access to grants and social assistance. Overall, 23% of households (n = 110) report receiving a grant or social assistance. Households in the informal settlement are more likely to report that they receive a grant with (n = 83; 75% of all households receiving a grant). Thirty-five percent of households in the informal settlement report receiving a Child Support Grant (n = 68) compared to 0.6% of household in the inner-city (n = 16). The second most important grant is the Old Age Pension: just 0.05% (n = 9) households in the informal settlement and 0.01% (n = 3) households in the inner-city receive this.

Urban – rural linkages

Eighty-two percent of households in the informal settlement report having rural linkages, compared to 61% of households in the inner-city. Households in the inner-city are more likely to report having urban linkages than households in the informal settlement (39% compared to 18%). Linkages are associated with having a home or family in the rural or urban place of origin. As described below, these linkages provide support to migrants in times of chronic sickness.

The survey data clearly reflected the importance of a 'home' outside of Johannesburg (whether rural or urban) with the majority of respondents indicating that they would return home should they become chronically ill (54%; n = 105 of informal settlement residents and 67%; n = 193 of inner-city residents). It is important to note that migration status (i.e. being an internal migrant or a cross-border migrant) is not associated with the choice to return home; the majority of respondents (regardless of migration status) report that they would go home if they were too sick to work. The main reason reported for returning home is that family would be able to care for them (52%; n = 99 informal settlement and 67%; n = 191 inner-city). The importance of food is highlighted, especially for respondents from the informal settlement, with 69% (n = 128) reporting that their family would be able to support them with food, compared to 48% (n = 135) of respondents from the inner-city.

Respondents indicated that they would like to be buried in their place of origin. Very few respondents reported hosting a sick relative in the city, with residents of the informal settlement most likely to

report this (6%; n = 12) compared to residents of the inner-city (2%; n = 7). These findings challenge the prevailing view that individuals travel to the city when sick.

Remittances

In order to explore reciprocity between Johannesburg and 'home', the survey explored remittance patterns from Johannesburg to the 'home' outside of Johannesburg (both rural and urban). Overall, 51% of households send money outside of Johannesburg, 21% of households send food and 8% send goods. Households in the inner-city are more likely to send money, food and goods than households in the informal settlement. It is important to note that the length of time in Johannesburg was not associated with reports of sending money, food or goods. This suggests that new arrivals to Johannesburg may start remitting quickly. In the case of cross-border migrants, this highlights their ability to insert themselves in the city and begin to 'benefit' from being in the city quickly (to earn money and remit).

Sixty percent of households (n = 174) in the formal inner-city send money outside of Johannesburg, compared to 38% (n = 73) of households in the informal settlement. Thirty percent of household (n = 88) in the inner-city send food outside of Johannesburg, compared to 6% (n = 11) in the informal settlement. Eight percent of formal households (n = 24) send goods outside of Johannesburg compared to 7% (n = 13) of households in the informal settlement. These remittance patterns highlight the complexity – and importance - of urban livelihood strategies that transcend both urban and rural spaces. These findings indicate that urban livelihood strategies are an important component of livelihoods in another place (mostly rural, some urban), through the process of remitting money, food and goods.

An important finding from this study is that households in both informal and formal areas do not report receiving money, food or goods from outside Johannesburg. This finding challenges one of the initial study hypotheses; that rural food production contributed to the food budget of urban households.

Food security

In this study, urban food security is considered as an outcome of the urban livelihood system. Three key indicators have been used to consider urban food security (1) changes in food access since moving to Johannesburg and experiences of a food shortage in the previous 12 months; (2) coping strategies in a time of food shortage; and (3) Dietary Diversity Score.

Food access

Overall, 49% (n = 237) of all respondents reported that their food access had improved since moving to Johannesburg. Nineteen percent (n = 93) felt that their food access was now worse and 31% (n = 149) reported experiencing no change. Residents of the inner-city were more likely to report that their

food access had improved since moving to Johannesburg (59%; n = 168) than residents of the informal settlement (36%; n = 69). Informal settlement residents were more likely to report that their food access was now worse since moving to Johannesburg (30%; n = 58) than residents of the inner-city (12%; n = 35).

Cross-border migrants were the group most likely to report that their food access had improved since moving to Johannesburg (70%; n = 104) compared to internal migrants (40%; n = 114). Respondents who were not currently earning money were the most likely to report that their food security had worsened since moving to Johannesburg (68%; n = 62). This finding is linked to the cash-based economy of Johannesburg; those without cash struggle to access food.

Food shortage

Residents of the informal settlement were more likely to report that they had experienced a food shortage in the previous 12 months (68%; n = 133) than residents of the inner-city (56%; n = 163).

A range of reasons for this food shortage were given, which were found to be significantly different between the informal settlement and the inner-city. An unreliable income was the most common reason given for experiencing a food shortage in the previous 12 months, for 49% (n = 65) of those reporting a food shortage in the informal settlement and 36% (n = 59) of those reporting a food shortage in the inner-city. Twenty-six percent (n = 34) of households experiencing a food shortage in the informal settlement stated that food security is always poor, compared to just 8% (n = 13) of households in the inner-city. For those residing in the inner-city, 23% (n = 37) attributed this to having just arrived in Johannesburg (compared to 5%; n = 6 in the informal settlement). In addition, one quarter (n = 41) of household in the inner-city and 13% (n = 17) of households in the informal settlement linked their food shortage to having lost a job.

Coping strategies in times of a food shortage

When asked what respondents did in order to cope with this food shortage, significantly different strategies were employed in the informal settlement and in the inner-city. Residents in the formal inner-city are most likely to borrow money to cope with a food shortage (42%; n = 62) whilst residents of the informal settlement are equally likely to either borrow money (26%; n = 25) or rely on neighbours for food (26%; n = 25). Only 16% of residents of the inner-city reported that they would rely on their neighbours for food should they experience a food shortage (n = 24). More inner-city residents would make use of credit in times of a food shortage (12%; n = 18) than residents of the informal settlement (5%; n = 5).

Only 3% (n = 15) of all households report that a member of their household regularly goes and eats with others because there is insufficient food.

Food utilisation: Dietary Diversity Score

Place of residence is significantly associated with dietary diversity. Respondents residing in the informal settlement have a lower dietary diversity score, with 66% having a deficient dietary diversity score (just 31% sufficient and 3% diverse). This is compared to 23% of respondents in the formal inner-city having a deficient dietary diversity score (62% sufficient and 15% diverse). Dietary diversity is not associated with whether a respondent is currently working or not.

Urban agriculture: food access now and in the future?

Urban agriculture was not found to be of significance in Johannesburg. However, significantly more residents of the informal settlement (13%) reported that there are gardens where people grow vegetables to eat or sell, compared to residents of the inner-city (just 3%). This requires further investigation particularly if issues of food security are to be addressed now and in the future.

HIV: testing and perception of risk

A recent study has found that women in food insecure southern Africa are putting themselves in danger of contracting HIV in their struggle to feed themselves and their families.⁹ The study investigated the association between food insufficiency and inconsistent condom use, sex exchange, and other measures of risky sex among 1,255 adults in Botswana and 796 adults in Swaziland. The study argued that insufficient food for people's daily needs and infection with HIV were inextricably linked and major causes of illness and death. The study found that women in both countries who reported food insufficiency were nearly twice as likely to have used condoms inconsistently with a non-regular partner or to have sold sex.

This clearly reinforces the point that as a result of severe food insecurity, people develop negative coping mechanisms, or ways of survival that have harmful effects on their lives, which include eating fewer meals, migration, pulling children out of school and often, girls and women exchanging sex for food.

Overall, just over 50% of respondents report ever having tested for HIV; 60% report testing more than once with more female respondents (67%; n = 184) reporting having tested than men (31%; n = 65). This appears to be linked to HIV testing during pregnancy. Residents of the informal settlement were significantly more likely to report ever having tested for HIV; 64% (n = 123) reported ever having tested for HIV compared to 44% (n = 128) of residents of the inner-city.

⁹ Weiser, S. *et al* (2007) Food Insufficiency Is Associated with High-Risk Sexual Behavior among Women in Botswana and Swaziland *PLOS Medicine* 4(1) e260

Residents of the informal settlement were significantly more likely to report that they felt at risk of HIV (58%; n = 106) compared to residents of the inner-city (40%; n = 112). Overall, female respondents are significantly more likely to report that they feel at risk of HIV (54%; n = 138) than male respondents (39%; n = 78).

Whilst not significant, there is an association between risk perception and ever having tested. Perception of being at risk of HIV was not linked to whether an individual is currently earning money or to issues surrounding food security (no associations between perception of risk of HIV to dietary diversity score or having experienced a food shortage in the previous 12 months).

Conclusion

This study highlights that a better understanding of the complexities of the modern African city can be obtained through knowledge of in-migration patterns and associated patterns of residence (informal compared to formal); urban livelihood strategies; how these livelihood strategies connect and support another place (predominantly rural) through remittances; urban-rural linkages related to health and care; and urban food security strategies. Findings indicate that cross-border migrants in the inner-city (most of whom are from Zimbabwe) are most likely to report that their access to food has improved since moving to Johannesburg, whereas internal migrants in the informal settlement are more likely to report that their food access has worsened. Interventions to improve urban food security for all residents are needed. Opportunities for embracing the migration-development nexus for development in the urban context must be explored.

Migration needs to be seen in light of connected livelihood strategies between Johannesburg and another place, which is predominantly rural. This study reveals the importance of these linkages and the need to see them in terms of a reciprocal relationship in which the direction of the remittances (money, food, goods), flows from the city to the household of origin (mostly in rural areas). It is important to consider findings relating to health and sickness which show the importance of the household of origin in supporting migrants who report that, in case of sickness and being unable to work, they would return home to be cared for.

Policy implications

Integrated policy and programming interventions are required to address the interlinked urban development needs posed by the triple challenge of migration, HIV and urban food insecurity. Migration, HIV and food insecurity involve all dimensions of urban policy; a 'joined-up' approach to local government is urgently required. Migration is a central feature of South African cities and intervention with national and local government is required in order to strengthen the understanding of migration related urban challenges.

Importantly, it is essential to recognise that residents of informal settlements, who are mostly internal migrants, are in need of urgent attention to address issues relating to HIV and food insecurity. Local city governments must develop and implement specific policies to address migration – both internal and cross-border – and informal settlements, particularly since urban policy is the responsibility of local government. Local government must proactively engage with realistic estimates of urban population growth in order to appropriately plan service delivery for all residents. This includes recognising that the pressure on appropriate housing will continue to rise, resulting in further increases in the numbers of urban residents residing informally. Whilst ‘pro-poor’ policies and programmes may exist, local government must proactively engage with internal and cross-border migrants - including residents of urban informal settlements - who sit on the periphery of welfare provision. Cohesion between all city residents is required for equitable and sustained urban growth. Local government programmes must incorporate all population groups present within the city, coordinate with provincial authorities as necessary, and work to encourage the integration and involvement of all within its systems of livelihood and social welfare.

Campaigns and the provision of appropriate facilities are required to encourage regular HIV testing across all migrant groups. Urban planners should incorporate places for the sale of affordable food in their planning, for example within upgrading programmes.

A meaningful policy response from government is required that recognises and positively engages with unaccompanied child migrants, particularly those lacking documentation.