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Urban Social Protection in Africa

Jeremy Seekings

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About the author:

Jeremy Seekings is Professor of Political Studies and Sociology and director of the Centre for Social Science Research at the University of Cape Town.

Email: jeremy.seekings@uct.ac.za

ORCID id: https://orcid.org/0000-0002-8029-412X

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Abstract

Urban social protection regimes in Sub-Saharan Africa remain limited. This is the result of multiple factors: the recency and character of urbanization; political centralization in national government at the expense of urban government; the weaknesses of workers' organisations; and the preferences of elites and ordinary citizens. Urban social protection regimes in most countries are characterised by low levels of public expenditure on both social insurance (explicable in part in terms of low rates of formal employment) and social assistance (in contrast to rural areas, where social assistance has expanded on the foundations of drought relief). In Africa, the 'welfare state' is in many ways less present in urban areas than in rural areas, despite the recent advocacy of reforms by international organisations including the World Bank and the International Labour Organisation. The economic crisis resulting from Covid-19, which affected urban areas especially, has prompted a limited urbanisation of social protection in the region, although this might prove to be transitory.

1. Introduction

Africa has long been an exception to the predominant association between urbanization and social policy. In many parts of the world, welfare states reflected a compromise between the largely urban working-class and industrial bourgeoisie (and their urban middle-class allies) (e.g. Huber & Stephens, 2001, 2012). Across most of Africa, urbanization rates were low and social protection limited until recently. When social protection did expand, however, it was not in response to the risks facing urbanizing populations as much as in response to the risks facing rural populations. Urban social policy is therefore particularly undeveloped across most of Africa.

Africa is the region of the world with, by standard measures, some of the world's most limited social protection. International organisations point out that Africa remains a laggard. The International Labour Organisation (ILO) reports that public expenditure on both pensions for the elderly and all social protection (excluding health care) is lower, in relation to Gross Domestic Product (GDP), in

Africa than in any other region (ILO, 2017: 130). African countries spend, on average, only 2.8 percent of GDP on 'social security' (i.e. social insurance and social assistance), compared to a global average of 5.7 percent (World Bank, 2012). The region has the lowest 'coverage' in terms of access to social protection, including health care (ILO, 2017: xxx). Whilst African countries on average spend a higher proportion of GDP on 'safety nets' (i.e. targeted or means-tested social assistance) specifically, the absolute safety net expenditure per capita is well below any other region (World Bank, 2018a) and the proportion of households in the poorest income quintile covered by safety nets is lower in Africa (at less than 10 percent) than in any other 'developing' region (Gentilini, 2015a: 43).[1]

Africa is also the region of the world with the lowest urbanization rate, despite a recent rapid increase. As of 2014, the urbanization rate in Sub-Saharan Africa as a whole was about 40 percent, which was one half of that in Latin America and the Caribbean or Europe or North America, all of which had urbanization rates of about 80 percent. Africa's urbanization rate was lower even than Asia's. Whilst the urbanization rate in Africa has risen, the fact that much of Africa has been and remains agrarian has had profound effects on the size, shape and territorial reach of Africa's welfare states. Africa's welfare states are not, however, simply laggard versions of the welfare states of more urbanized parts of the world. They are not simply proceeding along the same welfare-state-building path as major countries in Europe or Latin America did before them. African welfare states have evolved along a different and distinctive path (or paths, given that there is some variation between them). Their origins lie primarily in rural rather than urban areas, in response to the risks that characterize agrarian societies rather than industrial ones, and motivated in large part by an agrarian conception of development. As a result, African welfare states have a different form, and need to be measured by different criteria, than those of most advanced capitalist societies of the global North. Africa's cities might now be growing very rapidly, but social policies in those cities continue to reflect the agrarian origins as well as enduring agrarian preferences and values among both elites and citizens.

Whilst urban political contestation generally drove the construction of welfare states in Europe, North America and Latin America, differential incorporation of rural classes contributed to variation between welfare regimes (Esping-Andersen, 1985; Pribble, 2011; Prasad, 2012; Huber & Stephens, 2012). Africa's welfare regimes are distinctive in that their origins lie primarily in the countryside. This

[1]The ILO and World Bank measure different things. The ILO's definition of social protection includes social insurance, most of which in Africa benefits non-poor workers and their immediate dependents, as well as some social assistance. The World Bank's definition of 'social safety nets' covers social assistance, including two sets of programmes that are excluded by the ILO: benefits paid in kind (feeding schemes) and public employment programmes (workfare); both of these are very important in Africa.

is reflected in the relative importance of social assistance compared to social insurance, in the identification of deserving groups of poor people and in enduring patterns of coverage in urban and rural areas.

This paper examines the history of welfare-state-building in African cities, focusing primarily on Anglophone East and Southern Africa. The paper considers first the history – and, crucially, character – of urbanization in the region. The paper then turns to the implications for African cities of welfare-state-building in the twentieth century, showing how nascent welfare states either made little provision for urban populations or, increasingly, extended to them systems designed for rural populations. The paper then examines more recent debate and contestation over urban policy reform, with international organisations (including both the World Bank and the ILO) promoting alternative visions of social policy in the face of generally ambivalent national governments – with some notable exceptions. The final section considers the impact of Covid-19 on, and the future prospects for, social policy reform.

2. Urbanization in Africa

Africa might be less urbanized than other regions, but its aggregate urbanization rate has risen, especially in the 2000s. Data on urbanisation in Africa have been described as ‘surprisingly poor’ and ‘uneven and unreliable’. Not only do definitions of ‘urban’ vary between countries, but ‘basic measurement flaws and inaccuracies mean that Africa’s changing urban landscape is regularly misrepresented and misunderstood’ (Turok, 2018: 988-9). The overall trend is clear, however. Across Sub-Saharan Africa as a whole, the share of the total population living in urban areas rose steadily from 15 percent in 1960 to 40 percent as of 2014.[2] Given Africa’s rapidly rising population, this has meant that towns have become cities and cities have grown into mega-cities. As of 2016, three African cities had populations above 10 million: Cairo (19 million), Lagos (14 million) and Kinshasa (12 million). Another six cities had populations above 5 million and another 49 had populations of more than 1 million (United Nations [UN], 2014).

However, contemporary urbanisation in Africa is very different to historic urbanization in Europe. In only a few exceptional cases – notably the mining areas of the Witwatersrand (in South Africa) and the Copperbelt (extending from central Zambia into the south-eastern corner of the Democratic Republic of Congo) – was urbanization tied to industrialization. African cities and towns were rarely defined by capitalist relations. Moreover, especially after independence, cities and towns were rarely subject to tight regulation by the state. As Africa’s cities have grown,

[2] Data from World Development Indicators (WDI): https://data.worldbank.org/indicator/SP.URB.TOTL.IN.ZS.

densely-populated informal settlements ('slums') have proliferated. Nor has the growth of the urban population generally entailed a complete break with rural society and agricultural production. Whilst some migrants to towns (and their children) embraced the modernity of urban life, many others were slow to consider themselves either fully or permanently urbanized.

In some countries, urban populations grew slowly and 'urban' residents retained close ties to the countryside because governments actively restricted urbanisation. South Africa was the most egregious example of this. Under apartheid, the movement of African people into 'white' towns and cities was policed through 'influx control' policies, although not even the apartheid state was able to prevent the steady growth of the urban African population (Seekings & Nattrass, 2005). South Africa under apartheid was an extreme case in Africa, but it was not unique.[3] Both before and after independence, rural-to-urban migration was often discouraged and people seen as 'delinquent' or 'destitute' were often removed from urban areas to rural areas (Burton, 2005; Fourchard, 2006; Potts, 2006). Even when governments tolerated urbanisation, migrants themselves often chose to return to the countryside. Many migrants viewed towns as places of disorder, decadence and danger, as well as of opportunity. The imperative of working in towns did not require permanent settlement. Many urban workers preferred to remit earnings to rural kin, invest in rural areas and return to them when their employment in town was completed.

As a result, African urban life has always been (and still is) characterized by mobility, informality and blurred boundaries between town and countryside. Few people work in formal employment; many eke out livelihoods in non-tradable sectors (including retail and other services). Livelihoods, housing and services are all widely accessed through informal networks. Residents use informal political channels to address problems and engage with the 'state'. Neither the state nor capital have extended far into urban society. But informal networks and relationships cannot satisfy people's basic needs: The claims made on them always exceed the capacity to meet them. As Simone has documented, surviving in most African cities requires that residents, both individually and collaboratively, must navigate their way through chronic crisis (Simone, 2004, 2009). This is in part because urbanisation in Africa has not been accompanied by rapid economic growth: Urbanisation rates have risen rapidly in countries experiencing slow economic growth and even in some countries where GDP per capita fell (such as Zimbabwe and Liberia) (Gentilini, 2015a: 22).

Compared to the countryside, however, towns and cities have also been places of relative economic opportunity. Poverty rates have always been lower in Africa's

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[3]Outside of Africa, China's hukou system was functionally similar to 'influx control' under apartheid.

towns and cities than in the countryside. In Botswana, 68 percent of the rural population, but only 30 percent of the urban population, had incomes below the national poverty line in 1986. By 2003, poverty rates had fallen in both rural and urban areas but the difference remained: 45 percent compared with 19 percent. Kenya's urban poverty headcount rate (using its national poverty line) was 29 percent in 1994 and 34 percent in 2005 – compared with rural rates of 47 and 49 percent.[4] In Ghana, 400,000 rural households have incomes below the national poverty line, compared with 43,000 urban households (Beegle et al., 2018: 113). In South Africa, the rural poverty rate in 2009 was between double and treble the urban poverty rate, depending on the choice of poverty line (World Bank, 2018b: 7). Individuals who are unable to work are much more likely to live in rural areas. In Botswana, for example, 37 percent of rural households included elderly people in 2009; in urban areas, the proportion was only 24 percent. The proportions were almost identical to this in South Africa in 2010.[5]

The urban population share is predicted to reach 56 percent by 2050. The number of mega-cities (i.e. with populations greater than 10 million) is expected to double by 2030, with Johannesburg, Dar es Salaam and Luanda joining Cairo, Lagos and Kinshasa (UN, 2014). Across Sub-Saharan Africa, the total urban population will overtake the rural population in the early 2040s, reaching 1 billion in the late 2040s (Organization for Economic Cooperation and Development, 2017). This overall growth entails two significant specific demographic shifts. First, the elderly population, whilst small (by global standards) now, will grow steadily. Secondly, without substantial job creation there is very likely to be a rapid increase in the number of unemployed or under-employed young adults in towns and cities – which is a prospect has already caused considerable alarm among governments and within the African Union. 'Dependency' rates will rise.

3. Social protection in urban Africa across the twentieth century

The character of urbanization has framed the construction of welfare states in Africa, shaping both social insurance and social assistance programmes. Social insurance remains limited, despite attempts by states and international organisations to develop it. Social assistance has expanded, but primarily in response to needs and conditions in rural areas. The result has generally been that social protection in Africa's cities and towns remains both limited (especially in terms of expenditures) and distinctive (in the coverage of people and risks).

[4]WDI: variables *SI.POV.URHC* and *SI.POV.RUHC* (poverty rates using national poverty lines).
[5]World Bank, ASPIRE data: variables *ccx_hheld_pop_rur* and *ccx_hheld_pop_urb*.

Across much of Africa, the question of social protection was first considered during the 1950s, in the twilight of the European empires. Colonial states had hitherto regarded African workers as only temporarily resident in towns. Faced with strikes and a changing international environment – including pressure through the ILO – both British and French states began to imagine an African working class as something to mould rather than to prevent. Both the British and French sought to 'stabilize' urban workers through the regulation of wages and employment, the introduction of contributory pension schemes and (in the French case) tax-financed family allowances to supplement wages (Cooper, 1996). British attempts to implement a broadly Bismarckian approach fell short, however, in the face of the colonial state's limited capacity to administer a contributory pension system (*ibid.*) and the strong preferences for provident funds on the part of African workers themselves. Provident funds provided what were effectively individual savings schemes for workers, without any contribution by the state (except as employer in the public sector). They also allowed workers to withdraw their savings as a lump-sum on retirement (or retrenchment) – which made them very attractive to workers who aspired to return to farming when they left urban or industrial employment. Pioneered in India and Malaya (now Malaysia), provident funds were widely discussed prior to independence but then established at or soon after independence across much of Anglophone Africa (Parrott, 1985).

Provident funds were later replaced by pension funds in some countries, whilst persisting in others. Almost nowhere, however, did they come to be as important an element in urban social protection as in other parts of the world. First, coverage was restricted to (at most) workers employed formally in the public sector or in large private sector firms. They therefore reached only a small proportion of the urban population and almost no one who was poor, even in urban areas. Secondly, they proved to be financially insecure. On the Zambian Copperbelt, the introduction of contributory provident or pension schemes for mineworkers allowed many to contemplate retirement in towns rather than a return to the countryside. In the 1980s, however, the country's economic collapse eroded the value of benefits and generated unemployment, compelling many long-term urban residents to return to rural villages where agricultural livelihoods remained viable (Ferguson, 1999). In the extreme case of Zambia, the share of the population in towns fell during the 1980s and 1990s. 'Oscillating' or 'circular' migration – i.e. from countryside to town then back to the countryside – remained widespread across much of Africa (Potts, 2010). On the Copperbelt, many people who continued to live in town through the 1990s and 2000s were compelled to turn to agricultural production to support themselves (Mususa, 2010). Urban agriculture is often proposed as a response to urban food insecurity.

If social assistance and social insurance played a minor part in everyday urban life in the final years of colonial rule and the first years of independence, they played an even smaller role in everyday rural life. Most colonial governments (in the late 1940s and 1950s) and their post-colonial successors (from the 1960s) imagined that ‘development’ rather than ‘welfare’ would lift African populations out of poverty. Across most of East and Southern Africa, agricultural development and marketing programmes sought to raise the productivity of peasant agriculture and insure farmers against price instability. These ‘agrarian’ welfare regimes would, it was imagined, mitigate poverty among rural households themselves. They would also generate the resources that states could appropriate – through taxes, state-controlled marketing boards or overvalued exchange rates – and use to finance the expansion of public health and education, to invest in other sectors or simply to indulge the political elite. South Africa was an obvious exception to this, in that the apartheid state systematically dispossessed African people of land and any opportunity for agrarian livelihoods. Where South Africa was less exceptional was in its response to urban destitution: Across much of Africa, under both late colonial and post-colonial regimes, urban poverty was often ‘addressed’ through returning – by force, when necessary – the urban poor to the countryside.

Welfare states did begin to emerge. The most important risk facing the poor across much of Africa was neither old age, nor unemployment, nor price instability. It was drought and famine. Agrarian welfare regimes faced the challenge of insuring peasants against drought. Whilst most colonial administrations in Africa performed poorly on this, elected governments after independence faced strong incentives to organize drought relief, whether to legitimate themselves or (in countries with competitive elections) to win votes. Botswana pioneered massive drought relief in the late 1960s, introducing the set of programmes that subsequently grew into an extensive - if conservative - welfare state: feeding schemes for pre-school and school children (as well as pregnant women); workfare programmes for adults unable to support themselves through farming; and relief (in kind or cash) for households lacking adult members available to work. These programmes remained focused on rural areas; they were a response to temporary deagrarianisation, not urbanization or industrialization (Seekings, 2019a). Some programmes were explicitly limited to rural areas, on the basis that they were the areas requiring some compensation for depressed agricultural production. Other programmes narrowly targeted the truly desperate. Emergency workfare programmes, for example, generally paid wages that were too low to attract the urban poor. Other programmes were focused on households without adult members available to work. In rural areas, such households became more and more common, whilst in most urban areas they remained uncommon.

Over time, such ‘emergency’ drought relief programmes became institutionalized in rural areas, providing the foundations for many of the social assistance programmes that proliferated in the 2000s. Botswana – an especially drought-prone country – extended its drought relief programmes into non-drought years (*ibid.*). Across much of East Africa, the World Bank supported the 'social action funds' (such as the Tanzanian Social Action Fund, TASAF), which sought to improve livelihoods, especially in drought-prone arid areas, in part through short-term, developmental programmes that provided benefits in cash or in kind. Kenya's Hunger Safety Net Programme performed a similar role in northern Kenya, with support from Britain's aid agency.

Africa's most extensive social protection system or welfare state followed a slightly different path but to a similar destination. The ILO identifies South Africa as the 'front runner' in terms of 'effective coverage', i.e. the proportion of the population that is either actively contributing to a social insurance scheme or receiving benefits (contributory or non-contributory). The ILO calculates that effective coverage in South Africa stands at 48 percent, which is more than double the rate in any other African country (ILO, 2017: 123). The first pillar of South Africa's social protection system comprises its extensive social assistance programmes, which pay monthly grants to (or for) one in every three South Africans at a cost of more than 3 percent of GDP. Grants for the elderly and disabled are most generous; grants to poor mothers are more parsimonious. The second pillar comprises contributory programmes, including 'semi-socialised' insurance for formally-employed workers (through privately-run but statutorily-mandated contributory pension and medical aid programmes) and a very inadequate publicly-run unemployment insurance programme (Seekings, 2002).

South Africa's welfare system dates from the 1920s and 1930s, when social assistance programmes were introduced for the partly-racist purpose of raising 'poor whites' out of poverty – mostly in or from rural areas – so as to ensure a clear racial income hierarchy. South Africa decided against fully social ('national') insurance on the grounds that it was too statist and that national schemes were inappropriate in a society that remained significantly rural. Thus, both the social assistance and semi-social insurance sides of the system were shaped profoundly by rural considerations. In the 1940s, social assistance was partially extended to the African population, in large part because officials identified the deepening of poverty among the rural African population (Sagner, 2000; Seekings, 2005, 2007). Social assistance remains a major source of income for rural households in the 2000s. Indeed, as private remittances from migrant workers to rural households have declined in importance, so social grants have become the major source of income for as many as one half of all rural households.[6] Many more rural households are indirectly dependent on social

[6]General Household Survey, 2017, my calculations.

assistance in that they depend on selling goods or services to pensioners and other grant-holders.

Across most of Africa, social protection as late as the 1980s comprised a mix of contributory programmes with limited coverage for the minority of formally-employed workers and nascent social assistance programmes in rural areas born out of the imperatives of drought relief. The urban poor survived through their own efforts in the informal sector or through dependence on kin (Ferguson, 2015). If unable to work or lacking supportive urban kin, poor people often returned to rural areas. Under one-party states or authoritarian regimes, the urban poor had few opportunities to present their demands to their governments, but could threaten street protest. Faced with this threat, many states regulated or subsidised the price of food and other basic commodities (Lipton, 1977).

Several inter-related factors from the late 1980s persuaded governments that a new approach to urban (as well as rural) social protection was required. First, population growth resulted in growing landlessness in many rural areas, which meant not only that removing the urban poor to the countryside was no longer a credibly effective mechanism for mitigating destitution, but also that more and more young people from the countryside were being pushed into towns and cities. Secondly, structural adjustment programmes often required the reduction or elimination of subsidies for urban consumers. Thirdly, the restoration or introduction of multi-party elections meant that some strategies were no longer politically feasible – and there were electoral incentives to appeal to the poor. Henceforth, governments needed to use carrots more than sticks. Many governments continued to view the urban poor as a threat to order, and assessed that rural social protection could serve as an incentive to remain in the countryside (on Ethiopia, see Lavers, 2019). However, natural population growth alone was swelling the numbers of urban-born people whose expectations were not the same as their migrant parents or grandparents. In general, therefore, governments faced growing pressures to expand social protection in urban areas.

One path towards expanding urban social protection required no reforms of policy. In a few cases, existing social assistance programmes were national in coverage, although most of the beneficiaries had hitherto been in rural areas because the people deemed deserving of assistance – especially the elderly – lived disproportionately in rural areas. As growing numbers of elderly people, and also children, lived in towns and cities, so national social assistance programmes provided assistance to a growing number of urban individuals and households. In South Africa, the existing system of social pensions and other social grants began to play an important role in urban as well as in rural society. In South Africa's major cities, as of 2017, 31 percent of all households received at least one grant; grants were the largest source of income for 13 percent of all households in the major cities.[7] Most grants are paid to women – because more pensioners are female than male and almost all child support grants are paid to mothers – and thus empower women within urban (as well as rural) households and communities (Hochfeld & Plagerson, 2011; Patel & Ulriksen, 2017). This also provokes conflict: the payment of grants to young women contradicts patriarchal norms; unemployed working-age men who are not eligible for any grant resent being dependent on pensioners; and some mothers are seen as abusing grants by spending on themselves money that was intended to benefit their children (Blake, 2018; Button & Ncapai, 2019).

In Botswana, similarly, the universal old-age pension scheme provided for elderly men and women in urban as well as rural areas, and children in urban as well as rural households benefitted from school feeding schemes. Workfare was, however, confined to rural areas, having been introduced originally as a drought relief measure, and still in the early 2000s was understood as temporary support for temporarily destitute households.

In cases like this, programmes that had previously been limited to rural areas were subsequently extended to urban areas also. Botswana's Ipelegeng workfare programme was extended to towns in 2009, shortly before a highly competitive election. By 2013, one in three people working on the programme were in urban areas. But the demand for workfare employment in urban areas was less than anticipated, probably because the low wages were not attractive (Hamer, 2016). Similarly in Ethiopia, an urban arm of the Productive Safety Net Programme (PSNP) was launched in 2016, in response to urban protests (Beegle et al., 2018: 147). In Ghana, the Livelihood Empowerment Against Poverty (LEAP) programme was extended to urban areas in 2016, although eligibility and take-up rates remained very low even in the poorest urban neighbourhoods (United Nations Children's Fund, 2017; Cuesta et al., 2020). Many countries continued to target programmes geographically, however, by prioritizing poorer, rural districts and excluding urban areas. In Tanzania, for example, TASAF rolled out workfare and conditional cash transfers in poor, rural districts. The expansion of urban social protection in response to the Covid-19 crisis also included workfare programmes (see below). Even if it remains limited, urban workfare may be more prevalent in Africa than in other parts of the world.

4. Urban social protection initiatives

Where programmes existed in rural areas, these programmes might be extended to (and perhaps also adapted for) urban areas. Where rural social protection was more limited, new programmes were needed, either for urban areas specifically or to provide for both rural and urban populations. The scope for specifically

[7] General Household Survey, 2017, my calculations.

urban initiatives has been limited by the lack of resources available to municipal governments in most African countries. In some other parts of the world – most notably, across much of Latin America – municipal governments had the resources and powers to introduce social welfare reforms. Brazil’s federal Bolsa Familia programme, for example, began life as municipal initiatives. When the federal government sought to extend it countrywide, it provided federal funding to municipalities (Melo, 2008). Across much of Latin America, conservative and progressive municipal governments constructed different kinds of urban regimes, focused on growth or welfare respectively (Goldfrank & Schrank, 2009). In most African countries there has been some decentralization of service delivery from central to local government, but few municipal governments have the resources or powers to initiate significant social protection reforms. The fact that many of Africa’s cities (including, for example, Cape Town in South Africa, Kampala in Uganda and Gaborone in Botswana) are strongholds of opposition parties has not incentivized incumbent parties to decentralize finances. Many municipal governments simply lack the funding to provide significant services (Resnick, 2011, 2014).

The consequence of this centralization is that specifically urban initiatives have generally been limited to countries where the incumbent party has a clear political interest in addressing urban poverty or insecurity. Mozambique was one of the few countries in Africa where a new social assistance programme was initiated in direct response to the removal of urban food and other subsidies, and to the ensuing urban protests. In a few other countries (including Kenya), small dedicated programmes have been launched in urban slums. These are exceptions, however. Across most of Africa, the urban poor continue to depend on themselves, typically through informal livelihoods, or on kin. International organisations have, however, begun to emphasize the importance of expanding urban social protection. The World Bank has begun to promote urban safety nets (Gentilini, 2015b), whilst the ILO encourages the extension of social insurance to more workers in the informal sector (ILO, 2015).

The Mozambican case illustrates how social protection can have an urban focus, whilst also revealing the pressures to retain a rural emphasis. Mozambique’s government in the 1980s and early 1990s was especially vulnerable to dissent in the capital city, Maputo. Having lost control of much of the rural, central and northern part of the country in a civil war, the south – including Maputo – was the stronghold of the governing party, the Frente de Libertação de Moçambique (Frelimo). Hitherto, the self-proclaimed ‘Marxist-Leninist’ party had contained urban dissent through stringent food rationing, price controls and subsidies. As the economic crisis deepened, the government was compelled to implement a structural adjustment programme. Food prices rose, in part because the civil war prevented any quick improvement in agricultural production (O’Laughlin, 1996).

With technical advice and initial financial assistance from the German development agency (then the GTZ), the Swiss development agency and the United Nations Children's Fund (UNICEF), the Frelimo government introduced the Programa de Súbsidio de Alimentos (PSA, i.e. Food Subsidy Programme) in the early 1990s. The programme targeted the destitute urban population, specifically households with no able-bodied, working-age adults (and with no family members working elsewhere, including over the border in South Africa):

> Households with a severely undernourished child or with a severely under-nourished pregnant woman; elderly persons (over 60 years) living alone or heading households with no employable members; severely disabled people living alone or heading female-headed households which have at least five children to keep and which have no other employable members (Schubert, 1995: 509).

The programme notionally was means-tested (although it is not clear that this was enforced) and was limited to the urban poor on the grounds that they lacked community- or kin-based informal safety nets. By 1997 it reached more than 100,000 urban households (Garcia & Moore, 2012: 279-80). Despite the parsimonious benefits and modest expansion, the government continued to view social protection as a minor element in its overall strategy.

In February 2008 and then again in September 2010, the rising cost of bread, minibus transport, water and electricity led to another round of riots, first in Maputo, then elsewhere also. The 2008 riots prompted the government to triple the very low benefits paid through the PSA, to expand fuel subsidies (especially for urban transport) and to introduce a new urban food voucher programme (Cesta Basica). The government also reviewed its approach to social protection. Under pressure from the British and Dutch development agencies as well as UNICEF, the government expanded social protection in rural areas. Firstly, the PSA was expanded to rural areas, focused on the elderly and disabled, and renamed the Basic Social Subsidy Programme (Programa de Subsídio Social Básico, PSSB). Secondly, two new programmes were created: the Productive Social Action Programme (Progama Acção Social Produtiva, PASP), based on the Ethiopian PSNP, provided workfare, whilst the Direct Social Action Programme (Programa de Apoio Social Directo, PASD) provided short-term benefits to poor households without adults available for work. These new programmes did cover urban areas, but only reached tiny numbers of urban beneficiaries. In 2016, only 2,000 out of the total of 50,000 beneficiaries of the PASP and only 7,000 of the 46,000 beneficiaries of the PASD were in urban areas. In aggregate, in 2015-16, the three programmes reached only 100,000 urban households, i.e. the same number as almost twenty years previously, whilst expanding to almost 480,000 rural households. Expenditure on these three social assistance programmes increased to almost 0.5 percent of GDP, but this was much less than the 1.1 percent of GDP spent on fuel subsidies, mostly to the benefit of the non-poor (Zapatero et al., 2017: 51, 70).

This Mozambican case thus entailed an initially urban-focused programme being absorbed into a traditionally rural-oriented set of programmes. The design of the two new programmes (PASP and PASD) reflected rural rather than urban needs. PASP provided workfare for up to six months per year. As a World Bank team commented:

> The logic for this seasonality comes from the experience in rural areas, where households are engaged in agriculture for longer periods of the year and labor-intensive public works are only implemented during the lean season in order not to overlap with households' productive activities. However, this seasonality does not exist in urban areas (at least in some cities like Maputo). Experiences from other programs in Brazil or Peru, have shown that it is more efficient to provide a more intensive and continuous support during a shorter period of time. (Zapatero et al., 2017: 74)

The World Bank team acknowledged that:

> One of the main concerns of the Government of Mozambique to scale up safety net programs is the risk of dependency for able-bodied, working age beneficiaries and the potential disincentives that cash transfers could create for their participation in other productive activities (*ibid.*: 16).

Governments across Africa have been more willing to entertain short-term rural workfare programmes – extending the principle of drought relief to non-drought years also – than urban workfare.[8]

A focus on rural rather than urban poverty – in Mozambique and elsewhere – was encouraged by the World Bank. In the 1990s the World Bank ousted the ILO as the premier international organization operating in the field of social protection across the global South. The World Bank championed two sets of reforms. Firstly, it encouraged the privatization of contributory pension schemes, i.e. replacing social insurance with individual savings accounts. Given that formally-employed workers were mostly in urban areas, this had the effect of reducing the state's role

[8]The World Bank team point to the additional constraint on state capacity, which (the team suggests) explains why the actual number of urban households participating in workfare in 2016 (7,000) was less than one quarter of the number (30,000) for which the budget provided (Zapatero et al., 2017: 24-25). The World Bank team does not explain, however, why the Mozambican state has less capacity in urban than in rural areas.

in urban areas. Secondly, the World Bank promoted 'safety nets' for the very poor, which meant the rural poor. In the World Bank's view, safety nets – including workfare – could serve as developmental 'springboards' out of poverty. In the 2000s, the World Bank became enamoured with conditional cash transfers, as pioneered in Mexico and Brazil, as a specific form of safety net. It strongly encouraged African governments to introduce similar programmes. Whilst conditional cash transfers in Brazil reached many poor urban households (and originated as municipal experiments), in the African context they were directed primarily at the very poor – most of whom were in rural areas.

In the mid-2010s, the World Bank began to recognise the challenges posed by persistent poverty in Africa's rapidly-growing towns and cities. A report in 2015 emphasised the global need for safety nets in urban as well as rural areas (Gentilini, 2015a). The report suggested that 'we are at the beginning of a journey where interest, practices and know-how are growing, but where the role of safety nets in urban areas – and in the urbanization process more widely – remains a complex, dynamic and largely pristine domain' (*ibid.*: 12). Their careful review of some of the 'first generation' of urban safety nets programmes did, however, identify many innovative ways in which safety net programmes had been adapted to overcome the technical and other challenges posed in urban areas. This review covered at length cases from Latin America and Asia, but the only African case discussed was Nairobi (Kenya), where two small unconditional cash transfer programs were introduced in slum neighbourhoods in response to food price rises in 2009. Both coverage and benefits were modest, with fewer than five thousand households receiving an amount sufficient to cover only one-third of the household food basket. The programmes were run by non-government organisations. The programmes were intended to be developmental, assisting young people to find work. Benefits were therefore paid for a limited period only (*ibid.*: 123-30). A short version of the report was included in the World Bank's 2015 *State of Social Safety Nets* report (Gentilini, 2015b). A subsequent report examined similarly modest, essentially experimental, programmes targeted narrowly on people living in extreme poverty in selected urban areas in three Francophone African countries (Benin, Republic of Congo and Mali). The primary obstacle to implementation was the problem of identifying beneficiaries, given the weaknesses of both existing official identification systems and of community organisation (Moreira & Gentilini, 2016).

Such programmes might be modest in Africa – with a total of only 13,000 beneficiaries in the four countries concerned – but the World Bank soon incorporated into its social protection strategy an acknowledgement of the importance of urban social safety nets. Whereas the word 'urban' was mentioned only eight times in the World Bank's 2012 *Africa Social Protection Strategy 2012-2022* (World Bank, 2012), it was mentioned 47 times in the World Bank's

2018 report on *Realising the Full Potential of Safety Nets in Africa* (Beegle et al., 2018). The latter report argued that there was 'a need to create innovative social safety nets to fit the urban context', whilst acknowledging challenges including 'the identification and targeting of the poor in informal urban settlements, communication campaigns, and high population mobility, which could result in low program uptake and enrollment' (*ibid.*: 72).

The World Bank has not been the only international organisation to emphasise the importance of expanding social protection in African cities. The ILO pushed back against the World Bank in response to the Bank's appropriation of the issue of social protection in the 1990s. The ILO recognised that it needed to shift away from its long-standing commitment to (and preoccupation with) contributory social insurance. In the early 2000s, it began to emphasise social security 'for all' and costed proposals for social assistance reforms in Africa (and elsewhere). It formulated proposals for 'social protection floors', culminating in a recommendation adopted at the 2012 International Labour Conference (Deacon, 2013). The social protection floor strategy enabled the ILO to call for social assistance (covering the poor) at the same time as it continued to promote social insurance for the non-poor. The strategy was framed by the ILO's priority of promoting 'decent work' and the formalisation of informal employment. The ILO had not engaged fully with African conditions, however. Of the 35 chapters in the ILO's celebration of *One Hundred Years of Social Protection* (excluding sections on health and fiscal space), only seven concerned Africa: Five of these focused on the South African case, one on Cabo Verde and one on the Sahel (focusing on responses to climate-related shocks) (Ortiz, Schmitt & De, 2019). Most African governments, however, remained ambivalent about the social protection floor strategy (as well as the broader decent-work agenda) (Seekings, 2019b).

In practice, whilst the ILO continued to promote the strengthening of social protection floors (see, for example, Falange and Pellerano, 2016, on Mozambique), it also continued to promote the expansion of social insurance as part of its goal of formalising informal employment. This second strand to its work was especially important in urban Africa. Whilst the ILO has little to say about peasant farmers, who make up the vast majority of informal sector workers in Africa, it has more to say about informally-employed wage workers in towns, including domestic workers, taxi-drivers and construction workers. In Zambia's major urban areas, i.e. Lusaka and towns in the Copperbelt, informal employment represents about 80 percent of total employment. ILO researchers in Zambia noted clearly the many challenges, including weak state capacity, widespread distrust of the state, weak civil society organisation, and low and irregular earnings. What was less clear was how to address these. The ILO recommended an integrated system of contributory social insurance against the risks of destitution, but suggested also that this would need to be tailored to the needs of specific sectors, would pay contribution-related (not flat-rate) benefits, and would require subsidisation from tax revenues (or cross-subsidisation from unidentified higher-income participants in risk-pooling schemes) (Phe Goursat & Pellerano, 2016).

Whilst both the World Bank and ILO now advocate urban-focused social protection initiatives, such initiatives remain a lower priority than programmes that are explicitly or implicitly focused on poorer, rural areas. In the absence of significant political and fiscal decentralisation, African states themselves have been slow to initiate major reforms of urban social protection. The result is that urban social protection continues to be the poor relation of its rural cousins. As other scholars have noted, most African countries have not formulated clear urban policies (Parnell & Pieterse, 2011), at least not until recently (Turok, 2015).

In addition to political and ideological factors, the slow expansion of urban social protection might also reflect administrative difficulties. Most rural social assistance programmes entail targeting through some kind of a means test or community-based selection. Designing and administering a means test or running a community-based process may be more complicated in urban than in rural areas (Cuesta et al., 2020).

5. Covid-19 and urban social protection

In Africa, Covid-19 generated an economic crisis rather than a public health one. Much of Africa escaped the worst of the Covid-19 pandemic during 2020, with only South Africa and the North African countries suffering from large numbers of confirmed cases and fatalities: South Africa alone accounted for about one half of the continent's 1 million confirmed cases and 30,000 deaths, according to official sources by September 2020, with the North African countries accounting for another fifth of the total.[9] But the continent was plunged into its first recession in a generation, affecting urban areas disproportionately. Urban livelihoods are firmly rooted in the market economy and monetized, rendering them especially sensitive to economic recession. Rural livelihoods withstood the global recession better, with food production – whether for subsistence or sale – affected less by the recession than by natural disasters (including drought, floods and locusts) and ongoing armed conflicts.

Preliminary studies, as well as models, revealed the likely economic impact in urban areas. In Ethiopia, six out of ten urban households reported that their income had fallen. In Kenya, 45 percent of urban households reported reduced incomes, with the poorest slums experiencing the biggest reduction (United Nations Habitat/World Food Programme [UN Habitat/WFP], 2020: 18-20). Whilst food insecurity remained worse in rural than urban areas, the rate of food insecurity in

[9] https://www.worldometers.info/coronavirus/.

urban areas is estimated to have risen dramatically (UN Habitat/WFP, 2020: 18-20).

Globally, many governments announced dramatic expansions of social protection. Data collated by Gentilini (at the World Bank) suggested that 1.3 billion people benefitted globally from the expansion of social assistance cash transfers in 2020, with another half-billion people benefitting from in-kind (i.e. non-cash) programmes. This amounted to one in six people on the planet. In Africa, coverage expanded, but from a very low base (Gentilini et al., 2020). Contributory unemployment programmes were of limited importance, except in South Africa, and even in the South African case the eligibility rules had to be modified to facilitate rapid access. Social insurance accounted for only 9 percent of reforms across Africa (compared to 24 percent globally). In contrast, social assistance programmes predominated, accounting for 84 percent of African reforms (compared to 61 percent globally).

In South Africa – the country worst affected by Covid-19 and by an extended and severe lockdown – the government announced a bold package of reforms, most of which built on existing social protection programmes covering urban and rural areas. The total cost of the emergency social protection announced in March and April would amount to about 2 percent of GDP, i.e. an increase of more than 50 percent above pre-lockdown provision. First, the unemployment insurance programme was extended through an emergency reform, paying in effect a wage subsidy through employers to several million workers who had been in formal employment, almost all in urban areas. Secondly, existing social grants were supplemented by between $10 and $25 per month for six months, benefitting about twelve million people, including the elderly, the disabled and poor mothers. Thirdly, a new emergency programme was introduced for unemployed adults with no other source of income. This programme was aimed at eight million people who had been employed or who had lost informal employment, and who would be paid the equivalent of about $20 per month for up to six months. Whilst the emergency unemployment insurance scheme and the supplements to existing grants were rolled out quickly, the new social grant was rolled out slowly (Seekings, 2020a). By September, it had reached only five million people, well below the target of eight million.[10] In addition, the suspension of South Africa's school and preschool feeding programmes deprived millions of children of daily meals (Seekings, 2020b). The various initiatives directly reached about one half of the adult population, and indirectly a much higher proportion. It is possible that the expansion of social protection will endure beyond the Covid-19 crisis.

[10]South Africa, 'Update on Covid-19' by Department of Social Development to Parliamentary Portfolio Committee on Social Development, 2 September 2020.

In Malawi, a court ordered the government to make provision for the poor affected by the lockdown. A total of 172,000 poor urban households – i.e. about one-third of the urban population – were identified for cash transfers of about $47 per month, for six months, part-funded by the World Bank. This emergency programme was a substantial extension of existing programmes in rural areas (Gronbach, 2020). In Kenya, beneficiaries under existing programmes were paid once-off supplements worth approximately $70, or four months of regular transfers. A new emergency workfare programme (Kazi Mtaani) was introduced for urban youth. At first focused on just over 100,000 people in four cities, it was later extended to towns across the country, reaching 270,000 people. The programme paid $4 per day for 11 days per month (Gronbach, 2020).[11] The WFP funded an extension of Zambia's Social Cash Transfer programme to urban areas, paying much higher benefits than had been paid hitherto in rural areas. Togo's Novissi programme ('novissi' means solidarity in the Ewe language) paid the equivalent of about $20 per month to more than a half-million adults, i.e. 7 percent of the population.

Across most of Africa, reforms of social protection systems were very modest. Emergency programmes in urban areas were generally highly targeted (on people in extreme poverty) and paid parsimonious benefits. In Madagascar, the government and international organisations joined to run and fund the Tosika Fameno programme, through which two cash payments were made to about 270,000 households (in April/May and June/July 2020). In Mali, a one-off emergency cash transfer was paid to 75,000 urban households. In Uganda, the existing rural workfare programme was extended to urban areas (through an Urban Cash for Work Programme), reaching an estimated half-million beneficiaries. In all of these cases the benefits were parsimonious. The Ugandan urban workfare programme, for example, paid participants the equivalent of $1.75 per day for up to 24 days, i.e. a total of $42 (UN Habitat/WFP, 2020).

Gentilini et al. (2020: 3) calculate that the per capita value of social protection reforms across Sub-Saharan Africa was, as of September 2020, only $10, compared to a global average of close to $250. Some countries implemented almost no reforms. Botswana, for example, only provided additional food baskets to the poor. Whilst the Covid-19 crisis did drive an expansion of urban social protection, the emergency programmes generally reflected prior programmes: Most paid modest benefits, and most either targeted the very poor or entailed workfare.

[11] See also: https://nation.africa/kenya/blogs-opinion/opinion/kazi-mtaani-initiative-has-to-succeed-1910028.

Whilst the benefits and coverage of emergency programmes were generally modest, they did represent a partial urbanization of social protection. Whether the programmes will remain, once the Covid-19 emergency is past, is not clear.

6. Conclusion

Africa's urban social protection regimes are characterized by low overall coverage, comprising limited social insurance, which covers the generally small numbers of workers in formal employment, and growing social assistance, which is generally still limited. The recency of urbanization and the prevalence of oscillating or circulatory migration reduced the demand for large-scale urban social protection, whilst conditions in rural areas – especially drought – served to promote interventions with a primarily agrarian focus. Urban social protection regimes remain limited, in part because many of the favoured interventions – including both social pensions and short-term workfare – are aimed at categories of deserving poor located in rural areas more than in urban areas and address risks that are more common in rural than in urban areas. The Covid-19 economic crisis propelled some expansion of social protection, especially in urban areas, but in most countries the emergency measures remained modest.

Path dependence might be important, but why has recent rapid urbanization (and the Covid-19 crisis) not pushed urban social protection off the former path in a different direction? The neglect of urban social protection in Africa stands in sharp contrast with rapid expansion of urban social protection in some other parts of the global South. China's Dibao and Brazil's Bolsa Familia programmes were originally introduced in urban areas. In both countries, sub-national urban government had the administrative and fiscal capacity, as well as political incentives and authority, to initiate reform. Few urban administrations in Africa have any such capacity or authority. Social protection in Africa remains focused on rural areas, and is run by the national government, often with external funding from aid donors. Even when supposedly national in coverage, programmes tend to reflect the perceived priorities of the rural poor (short-term workfare, for example) or to benefit social groups concentrated disproportionately in rural areas (the elderly, for example).

Even when governing parties have a strong incentive to appeal to poor urban votes, they rarely advocate dedicated urban social protection programmes. In Zambia, the Copperbelt and Lusaka have been the decisive provinces in recent elections: Each of the two major contestants had rural strongholds so the elections turned on votes in these urban areas. In 2011, Michael Sata and his Patriotic Front (PF) won the election in part through their populist appeal to urban voters (Resnick, 2013). In 2015 and 2016 the PF candidate, Edgar Lungu, retained sufficient urban support to win (albeit on a playing field that was far from level, in that the opposition was harassed and there was probably also some electoral fraud). Yet neither Sata nor Lungu ever fully embraced social protection. Their populist message revolved instead around infrastructure and patronage (Siachiwena, 2016, 2017). The ambivalence towards urban social protection reflects an enduring idealisation of the rural condition and of work, among elites and ordinary citizens alike. South Africa has the most extensive regular social protection system in Sub-Saharan Africa. Even there, amidst very high unemployment, unemployed young men in urban areas oppose suggestions that young men like them should receive unemployment benefits (Dawson & Fouksman, 2020). Across Africa as a whole, not even the economic crisis arising from Covid-19 has led to a dramatic expansion of urban social protection.

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