COVID-19 Pandemic Impact, Response, & Recovery Study

South Africa Report

JUNE 2021

Table of Contents

COVID-19 Pandemic Impact, Response, & Recovery Study

STUDY OVERVIEW

The COVID-19 pandemic is a once-in-a century crisis. Well over 3 million people have died as of June 2021, and entire economies have been disrupted in ways previously unimaginable.

This study analyzes the social, economic, and personal security impacts of the COVID-19 pandemic as well as the reach and impact of government response programs. More specifically, Fraym designed this study and related survey questionnaires to better understand the gendered impacts of the pandemic in these important areas.

We conducted large, georeferenced, and nationally-representative surveys in India, Kenya, and South Africa. All of these countries have been hard struck by the pandemic, particularly India and South Africa.

All data collection was conducted in April 2021 via a combination of online, mobile phone, and face-to-face interviews. These three surveys included nearly 50,000 respondents overall, making this one of the largest gender-disaggregated and spatially-enabled studies of the COVID-19 pandemic focused on developing economies.

This report details findings from South Africa.

In South Africa, Fraym conducted a **nationally-representative survey** of 8,028 respondents from April 9 to April 23, 2021. The survey captured how COVID-19 directly affected people's lives and their perceptions of how the pandemic and government response influenced the lives of others, including important issues such as:

1. Effects on employment, income, and household resources

2. Effects on non-employment activities like family care, shopping, and household chores

3. Effects on household food security

4. Perceptions of gender differences in health, economic, caregiving, and safety impacts of COVID-19

5. Perceptions of programs related to child support and gender-based violence

6. Perceptions of the national government's and international community's response to COVID-19

The survey data was weighted to reflect the most recent population parameters available from Statistics South Africa across gender, age, education, and provincial levels. Additional methodological information is available in the appendix.

SOUTH AFRICA

TOP 10 TAKEAWAYS

South African men and women both report pandemic-related increases in time spent on household activities and caregiving, as well as increases in economic disruptions such as job losses. However, women have borne, and are widely perceived as bearing, a disproportionate share of the impact across all examined areas. Moreover, there is widespread favorability for COVID-19 response programs that target women and vulnerable families, such as the increased Child Support Grant and support services for survivors of domestic violence.

1 South Africans are twenty times (20x) more likely to believe that increased caregiving responsibilities during the pandemic has impacted women more than men.

2 South Africans are three times (3x) more likely to believe that job losses due to school closures during the pandemic have affected women more.

3 South Africans are fifteen times (15x) more likely to believe that domestic violence has affected women more than men due to stay at home orders.

4 Nearly one in four women went a full day without eating during the pandemic because there was not enough food, compared to roughly one-in-ten prior to the pandemic.

5 While Johannesburg has the highest total number of people that are food insecure due to COVID-19, Northern Cape districts have the highest percentage of individuals that are food insecure because of COVID-19.

6 Satisfaction with the government's COVID-19 response is lowest in the Western Cape districts of Overberg and Garden Route and highest in the Limpopo districts of Mopani and Vhembe.

7 Nearly eight in ten South Africans have a favorable view of government programs focused on supporting households with children, including the Child Support Grant.

8 Seven in ten South Africans have a favorable view of government support services for survivors of gender-based violence (GBV) during the COVID-19 pandemic.

9 Less than half of South Africans are aware of *any* support from G7 nations during the COVID-19 pandemic. One-in-five believe that Chinese support has had a negative impact.

10 South Africans are more aware of, and favorable about, COVID-19 support from multilateral organizations like the WHO, World Bank, and African Union.

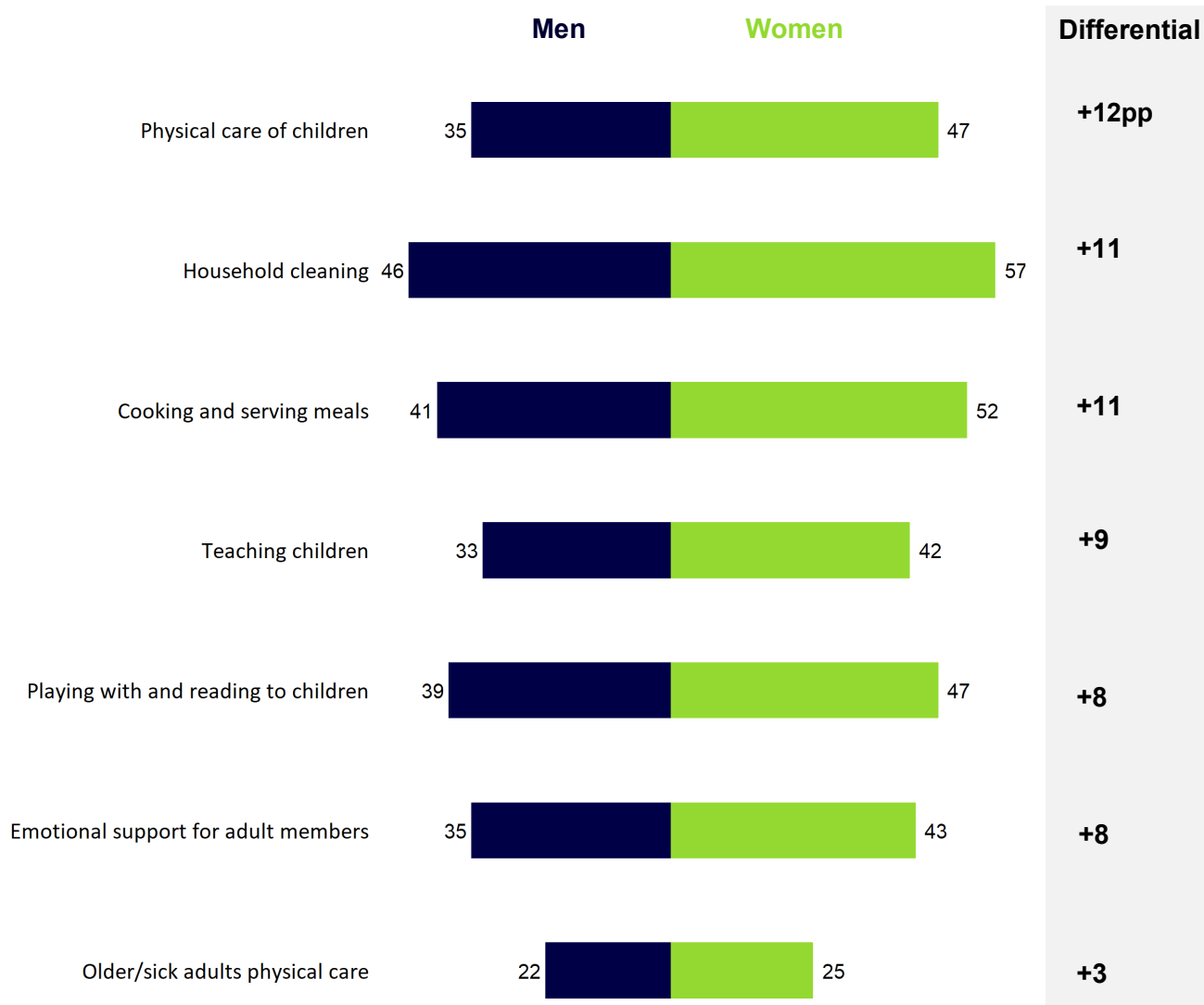# Caregiving, Household Activity, and Paid Work Impacts

Caregiving and Household Activity Impacts

Both men and women report that the pandemic has increased the hours they devote to household activities. In every category, however, women bear a disproportionate share of the increases, particularly with respect to cooking, cleaning, and caregiving for children and other adult household members.

Women were especially likely to spend more time than men **taking care of children, cleaning, and cooking.**

% reporting the COVID-19 pandemic increased the hours they devote to household activities, by gender

Activity	Men	Women	Differential
Physical care of children	35	47	+12pp
Household cleaning	46	57	+11
Cooking and serving meals	41	52	+11
Teaching children	33	42	+9
Playing with and reading to children	39	47	+8
Emotional support for adult members	35	43	+8
Older/sick adults physical care	22	25	+3

Note: Respondents could report increased, decreased, or unchanged hours, as well as not normally doing that activity in their household.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

Food Insecurity and Job Losses
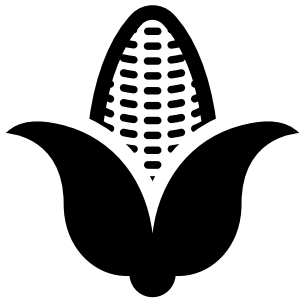
Food Insecurity:

The percentage of women that went a full day without eating because there was not enough food increased substantially *from one in ten to nearly one in four* during the pandemic.

Of women from households with annual income less than 40,000 Rand (~ USD$2,870), nearly one in three went a full day without eating during the pandemic.

Job Losses:

Three in four South Africans felt that job losses affected men and women equally.

Note: Respondents could report increased, decreased, or unchanged hours, as well as not normally doing that activity in their household.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

Gendered Impacts of the COVID-19 Pandemic

South Africans believe that women have been more burdened by caregiving responsibilities with children out of school and family members falling ill.

Six in ten South Africans believe caring for children's physical needs fell disproportionately on women during the pandemic.

South Africans believe that domestic violence has been particularly severe for women as a result of lockdown measures. 58 percent of South Africans believe domestic violence affected women more due to stay at home orders.

One in five South Africans believe job losses due to school closures affect women more than men, with nearly 75 percent believing they affect men and women equally.

Note: Respondents could select women more, men more, about the same, or not an impact.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021

% that reported the pandemic affected women or men more

Men   **Women**

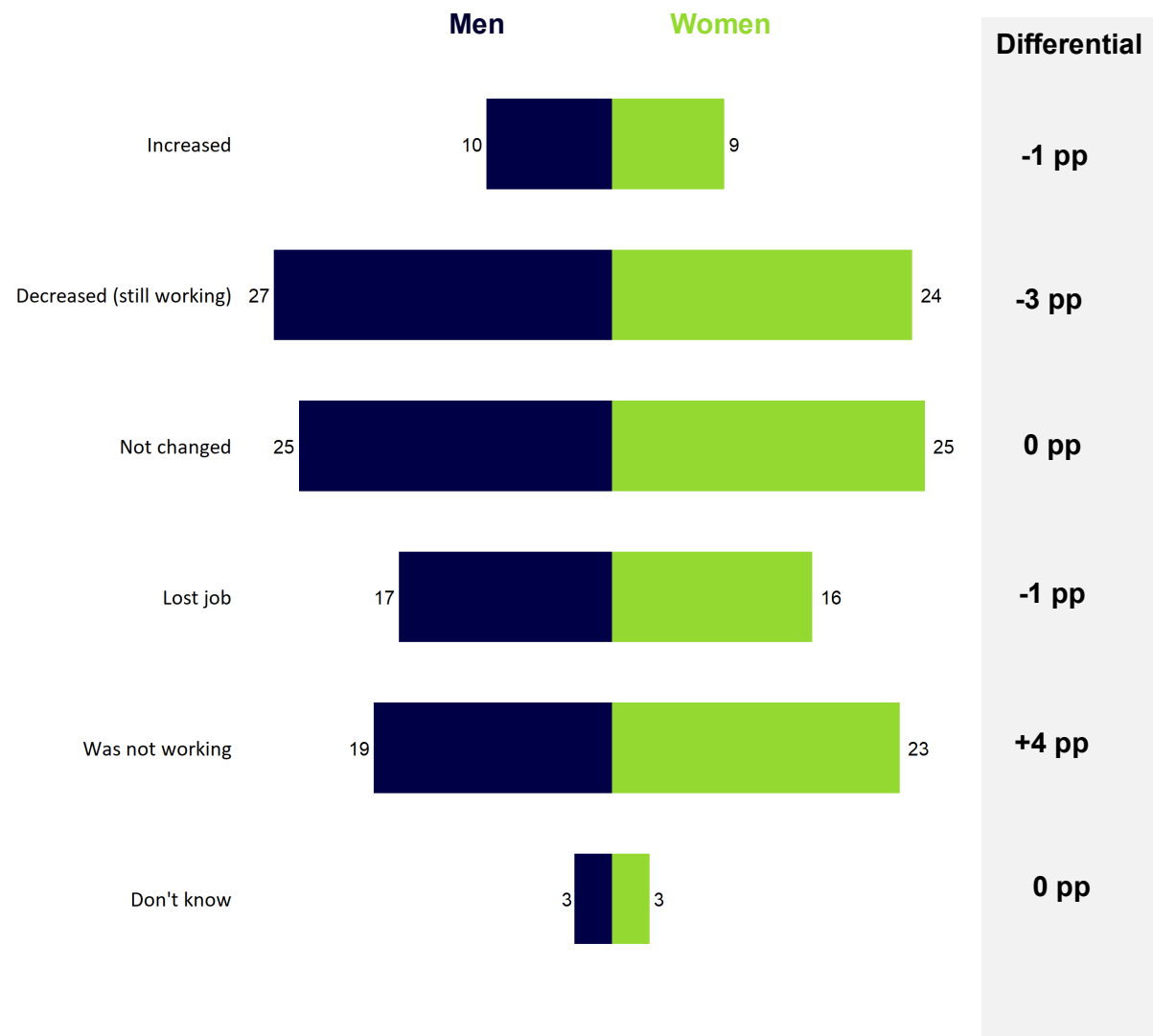|	Men	Women	Differential
Caring for children's physical needs	3	59	20x
Caring for children's emotional needs	3	56	18x
Time educating children	3	46	15x
Domestic violence inside home	4	58	15x
Violence outside home	16	31	2x
Job losses due to school closures	6	20	3x

COVID-19 Pandemic Effects on Paid Work

Hours of paid work changed similarly for men and women due to the COVID-19 pandemic.

Four in five men and three in four women who lost paid work since the start of the COVID-19 pandemic worked for a company.

Ten percent of individuals who lost their jobs worked for a person or a household and twelve percent owned their own business. There were no observable differences in these findings by gender.

% reporting that their hours of paid work have __ since the pandemic

	Men	Women	Differential
Increased	10	9	-1 pp
Decreased (still working)	27	24	-3 pp
Not changed	25	25	0 pp
Lost job	17	16	-1 pp
Was not working	19	23	+4 pp
Don't know	3	3	0 pp

COVID-19 Pandemic Effects on Working Women

Women who have increased hours devoted to paid work mostly work for businesses, earned less than their partners/husbands prior to the pandemic, and have also increased the number of hours devoted to caretaking of children and family members during the pandemic.[1]

| Women who increased the number of hours devoted to paid work since the pandemic began…	Percentage
Described their occupation before the COVID-19 pandemic as…	
Worked for pay: companies (including working for family business)	73%
Worked for pay: household or person	5%
Owned business: did not employ people ("freelancer")	13%
Owned business: employed other people	9%
Compared their income to their partner/husband before the COVID-19 pandemic as…	
More than my partner/husband	25%
Less than my partner/husband	46%
About the same	19%
I don't know	2%
I had no earnings	3%
Partner/husband had no earnings	5%
Have also increased the number of hours devoted to ___ due to the COVID-19 pandemic.	
Caring for children including feeding, cleaning, physical care	54%
Assisting older/sick/disabled adults with medical care, feeding, cleaning, physical care	29%
Assisting older/sick/disabled adults in other ways than physical care	30%
Affective/emotional support for adult family members	47%

Note 1: Sample size for the number of women who decreased the number of hours devoted to paid work since the pandemic is 1,008.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

Localized Impacts of COVID-19 Food Insecurity

Johannesburg has the highest number of people that are food insecure (1.1 million). The Northern Cape, the largest and most sparsely populated province, has multiple districts with the highest proportion of individuals that are food insecure because of COVID-19.
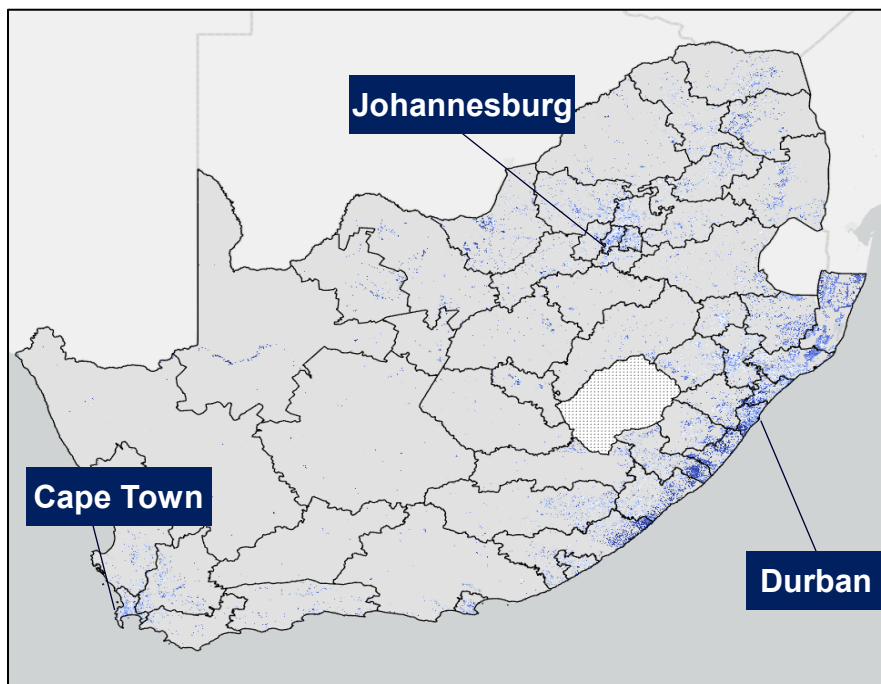
0   100%

Areas with total population fewer than 30 people per sq km

City Large cities   Lesotho

Districts with the highest food insecurity (%) due to COVID-19		Districts with the lowest food insecurity (%) due to COVID-19	
John Taolo Gaetsewe (*Northern Cape*)	29%	Umzinyathi (*Northern Cape*)	10%
Z F Mgcawu (*Northern Cape*)	29%	Overberg (*Western Cape*)	10%
Lejweleputswa (*Free State*)	28%	Uthukela (*KwaZulu-Natal*)	11%
Pixley ka Seme (*Northern Cape*)	26%	Gert Sibande (*Mpumalanga*)	12%
Dr Kenneth Kaunda (*North West*)	25%	Sekhukhune (*Limpopo*)	12%
Namakwa (*Northern Cape*)	25%	City of Tshwane (*Gauteng*)	12%
Ugu (*KwaZulu-Natal*)	23%	Sedibeng (*Gauteng*)	12%
Amathole (*Eastern Cape*)	23%	Garden Route (*Western Cape*)	13%
Frances Baard (*Northern Cape*)	23%	Umgungundlovu (*KwaZulu-Natal*)	13%
Umkhanyakude (*KwaZulu-Natal*)	22%	Nkangala (*Mpumalanga*)	13%

Note: A person is considered food insecure because of COVID-19 if they answered "Yes" to the following question: "Did you or your household member go a whole day and night without anything because there was not enough food?" after the COVID-19 pandemic but "No" in February 2020, prior to the pandemic.

Attitudes about Government Responses

Two in five South Africans are unsatisfied with their government's COVID-19 response, with a similar percentage being satisfied.
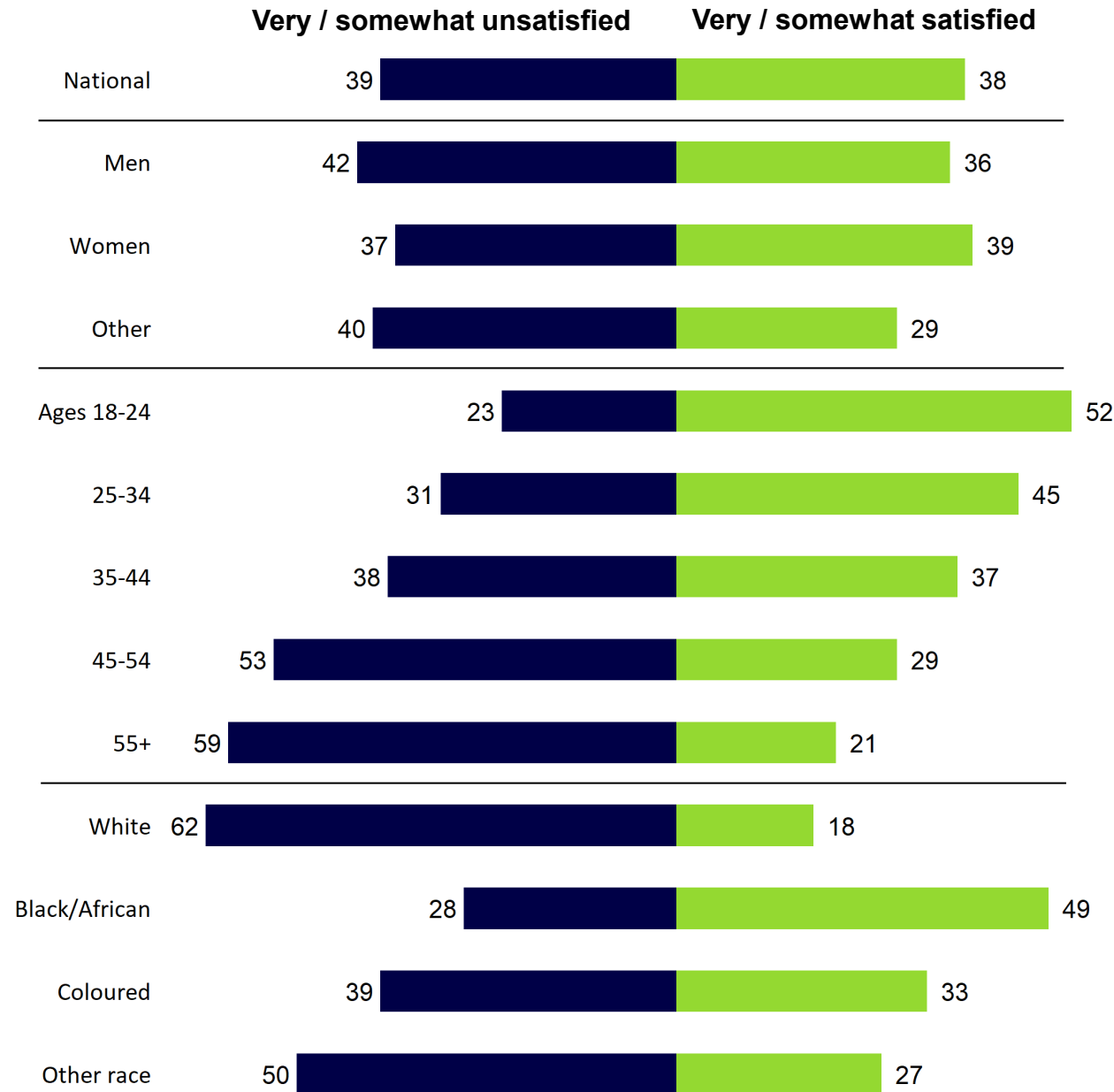
Women are slightly more satisfied than men. Older South Africans are significantly less satisfied with the government's response, while younger generations view the response more positively.

Black South Africans were over twice as likely to view the government's response positively than white South Africans.

Note: Other gender includes transgender and non-binary individuals (0.5% of sample). Other race includes Indian/Asian and "Other" response category (4.5 % of sample). Other living situation includes married but separated, widowed and not remarried, and divorced and not remarried (6.3 % of sample).
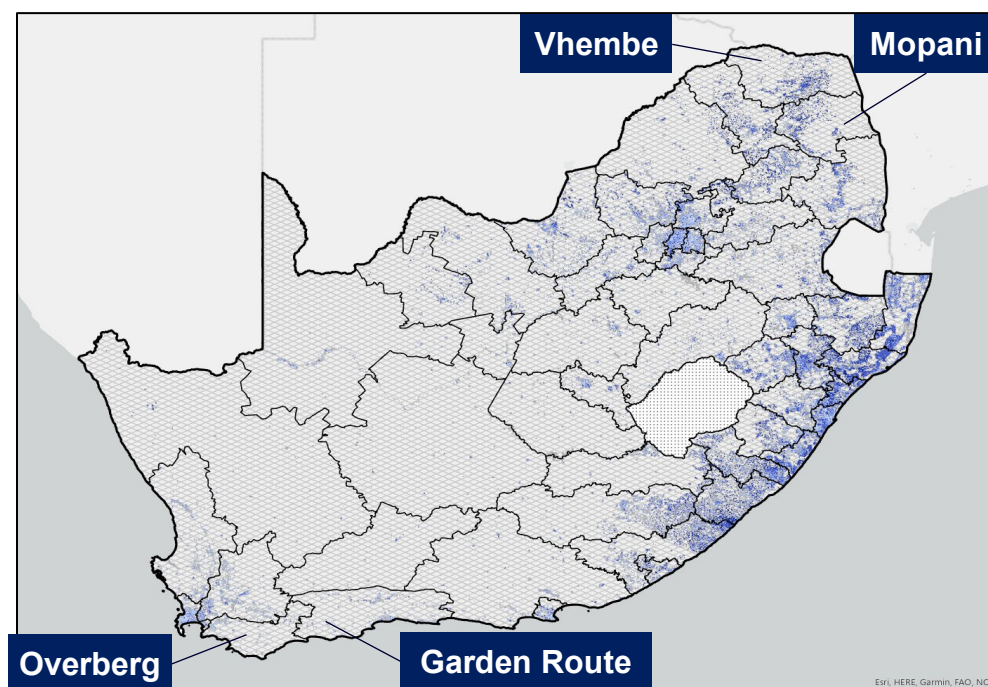
% saying they are __ with South Africa's response to COVID-19 economic disruption

	Very / somewhat unsatisfied	Very / somewhat satisfied
National	39	38
Men	42	36
Women	37	39
Other	40	29
Ages 18-24	23	52
25-34	31	45
35-44	38	37
45-54	53	29
55+	59	21
White	62	18
Black/African	28	49
Coloured	39	33
Other race	50	27

Localized Attitudes About Government Responses

Less than half of South African adults living in the Western Cape province districts of Overberg and Garden Route are satisfied with the government's COVID-19 response. Satisfaction is highest in the Limpopo province districts of Mopani and Vhembe, where roughly seven in ten adults approve of the response.

Legend:
0 — 100%
Areas with total population fewer than 30 people per sq km
District — Highlighted districts
Lesotho

Districts with the **highest** satisfaction (%) of South Africa's COVID-19 response		Districts with the **lowest** satisfaction (%) of South Africa's COVID-19 response	
Vhembe (*Limpopo*)	72%	Overberg (*Western Cape*)	43%
Mopani (*Limpopo*)	71%	Garden Route (*Western Cape*)	44%
Capricorn (*Limpopo*)	70%	West Coast (*Western Cape*)	51%
Alfred Nzo (*Eastern Cape*)	68%	City of Cape Town (*Western Cape*)	53%
Sekhukhune (*Limpopo*)	68%	Z F Mgcawu (*Northern Cape*)	53%
Uthungulu (*KwaZulu-Natal*)	67%	Sarah Baartman (*Eastern Cape*)	54%
O.R. Tambo (*Eastern Cape*)	67%	Cape Winelands (*Western Cape*)	54%
Nkangala (*Mpumalanga*)	66%	Frances Baard (*Northern Cape*)	55%
Zululand (*KwaZulu-Natal*)	66%	Thabo Mofutsanyane (*Free State*)	55%
Ugu (*KwaZulu-Natal*)	65%	Sedibeng (*Sedibeng*)	56%

Child Support Grant

About the Child Support Grant

The South African government targets financial support for poor caregivers through the Child Support Grant. In response to extraordinary pressure on children's caregivers caused by the COVID-19 pandemic, the government temporarily increased the Child Support Grant in May 2020.

1. The Child Support Grant benefits about 12.5 million children and is estimated to indirectly reach 30 million total people.

2. The Child Support Grant was increased to R740 (~$52 USD) per child from R440 (~$31 USD) in May. From June to October, the grant returned to the original amount and each benefiting caregiver received any additional R500 (~$35 USD) per month.

3. Although the program was not designed to be explicitly gender-focused, the children's primary caregivers, usually women, are responsible to pick up the Child Support Grant payments and may serve to empower female caregivers rather than male heads of household.

4. A previous evaluation of the program found that the child support grant improved child nutrition and cognitive skills as well as reduced the likelihood of illness and working for pay outside the home.[3]

Note 1: Source: http://www.thepresidency.gov.za/speeches/statement-president-cyril-ramaphosa-further-economic-and-social-measures-response-covid-19

Note 2: Source: https://www.sassa.gov.za/Pages/COVID-19_SRD_Grant.aspx

Note 3: Source: DSD, SASSA and UNICEF. 2012. The South African Child Support Grant Impact Assessment: Evidence from a survey of children, adolescents and their households. Pretoria: UNICEF South Africa. Available here: https://transfer.cpc.unc.edu/wp-content/uploads/2015/09/SAF_resources_csg2012s.pdf

Attitudes About Child Support Grant

Both South African men and women are highly satisfied with the government's Child Support Grant response program.
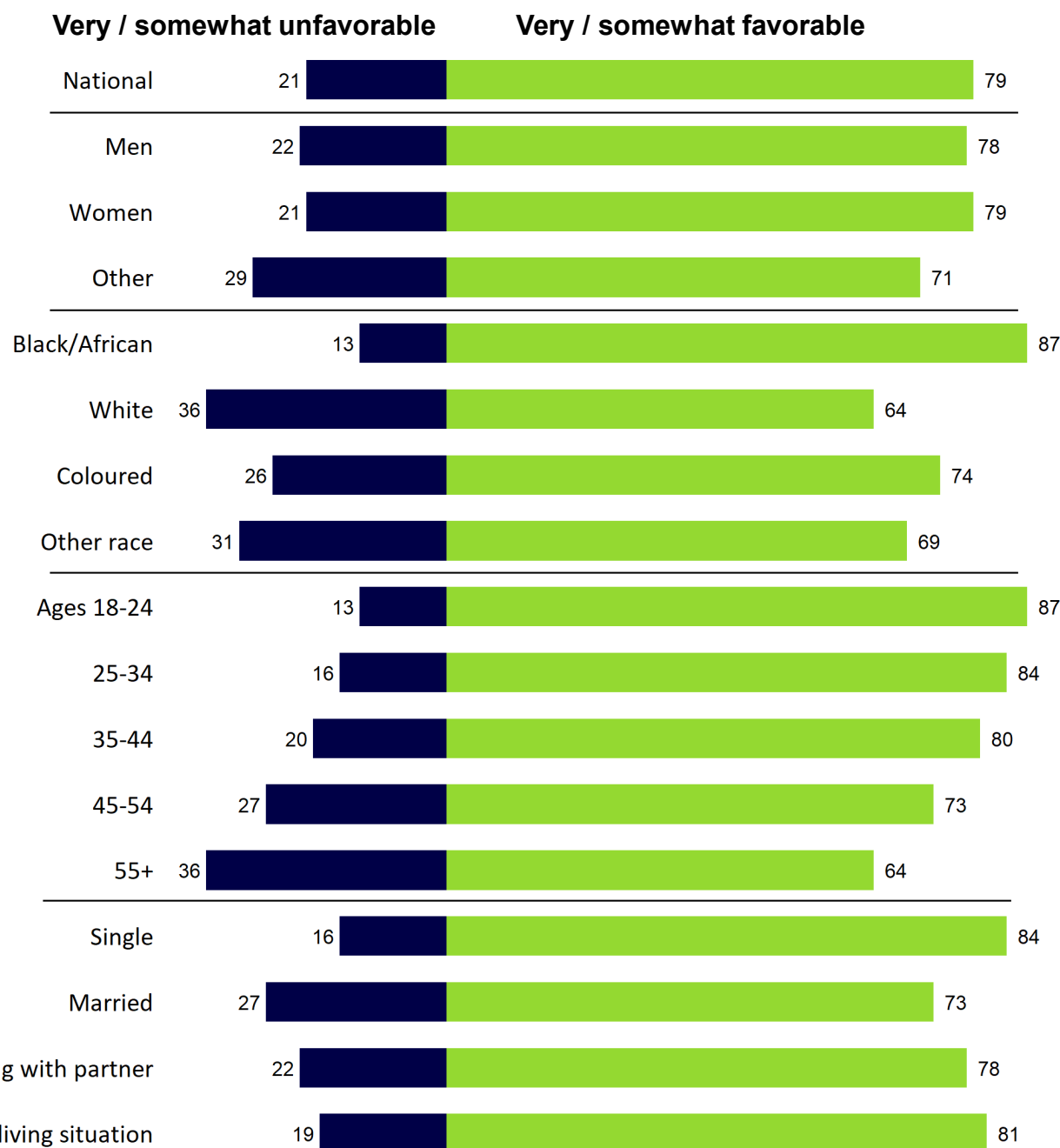
South Africans under the age of 44 have a higher satisfaction rate than older individuals. While the survey did not collect this data, this difference may be related to older South Africans not currently having children living at home.

Black South Africans overwhelmingly support the Child Support Grant, with 87 percent citing a very satisfied or somewhat satisfied view.

Note: Other gender includes transgender and non-binary individuals (0.5% of sample). Other race includes Indian/Asian and "Other" response category (4.5 % of sample). Other living situation includes married but separated, widowed and not remarried, and divorced and not remarried (6.3 % of sample).

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

% with __ opinion of Child Support Grant

	Very / somewhat unfavorable	Very / somewhat favorable
National	21	79
Men	22	78
Women	21	79
Other	29	71
Black/African	13	87
White	36	64
Coloured	26	74
Other race	31	69
Ages 18-24	13	87
25-34	16	84
35-44	20	80
45-54	27	73
55+	36	64
Single	16	84
Married	27	73
Living with partner	22	78
Other living situation	19	81

Beneficiaries of the Child Support Grant

The majority of South Africans have benefited – or know someone who has benefited – from the Child Support Grant. This program is overwhelmingly viewed as a positive intervention.

Black, young, single South Africans benefited from the program at the highest rates. This provides evidence that the program is targeting the most vulnerable populations.
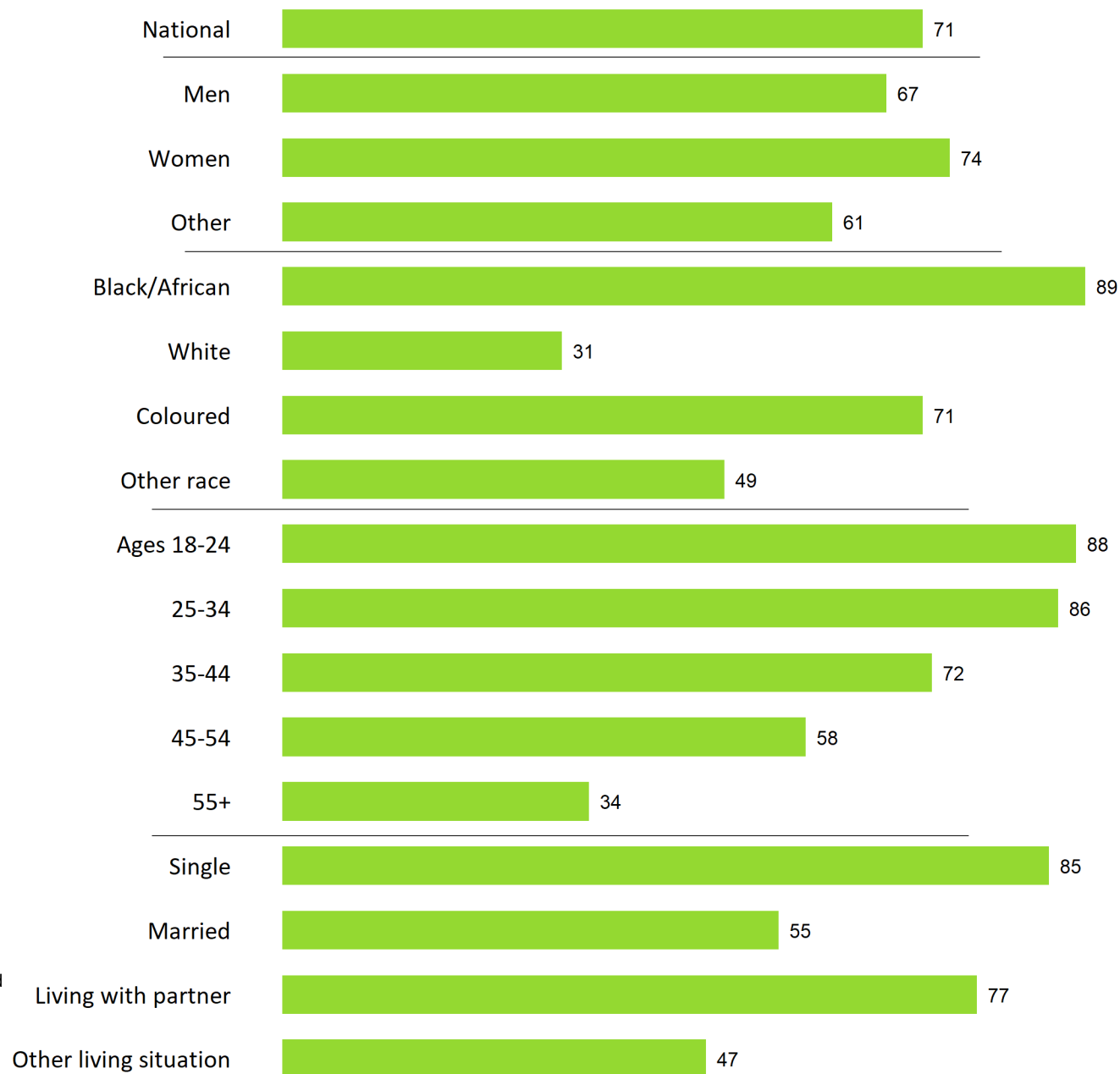
Nearly two-thirds of South Africans believe the Child Support Grant benefits women more than men.

Note: Other gender includes transgender and non-binary individuals (0.5% of sample). Other race includes Indian/Asian and "Other" response category (4.5 % of sample). Other living situation includes married but separated, widowed and not remarried, and divorced and not remarried (6.3 % of sample).

Only those that were aware of the program were asked to report if they were beneficiaries or know someone who has benefitted.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

% who benefits or knows someone who benefits from the Child Support Grant

Category	%
National	71
Men	67
Women	74
Other	61
Black/African	89
White	31
Coloured	71
Other race	49
Ages 18-24	88
25-34	86
35-44	72
45-54	58
55+	34
Single	85
Married	55
Living with partner	77
Other living situation	47

# Beliefs about Gendered Impacts of Child Support Grant

Nationally, over half of South Africans believe that the Child Support Grant benefits women more than men.

Only two percent of both men and women believe that the Child Support Grant will benefit men more than women, which is consistent across nearly all demographic groups.

Compared to white South Africans, Black/African and Coloured South Africans who are more likely to have benefitted from the program are also more likely to see think the program benefits women more than men.

% that believes Child Support Grant benefits __ more

Group	About the same	Women more	Men more
National	37	56	2
Men	38	54	2
Women	35	59	2
Other	36	57	7
Ages 18-24	38	57	2
25-34	36	58	2
35-44	37	56	1
45-54	34	58	2
55+	37	52	1
Black/African	34	61	2
White	39	49	2
Coloured	39	53	2
Other race	41	45	1

Legend: About the same · Women more · Men more

Note: Other gender includes transgender and non-binary individuals (0.5% of sample). Other race includes Indian/Asian and "Other" response category (4.5 % of sample).

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.
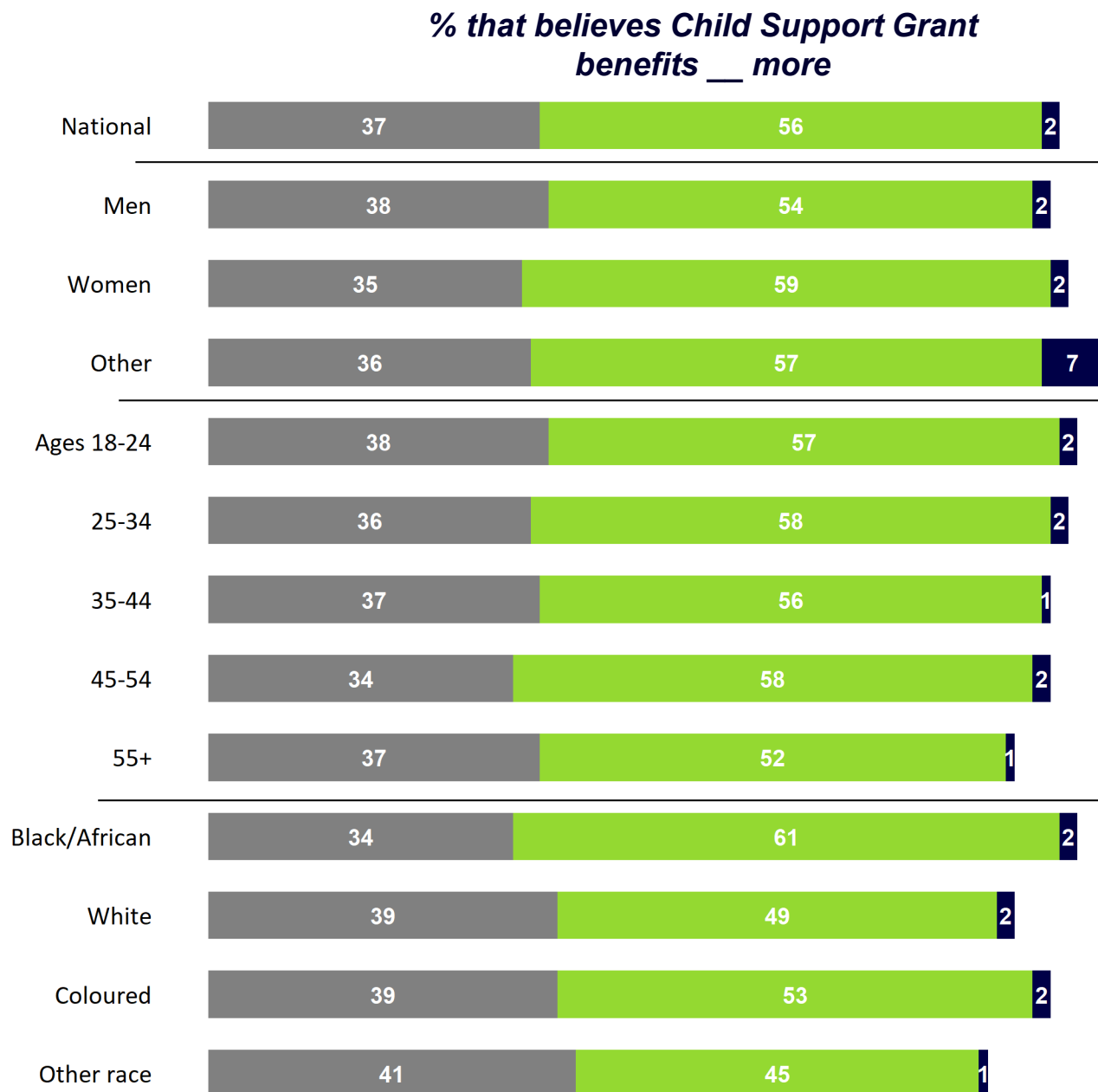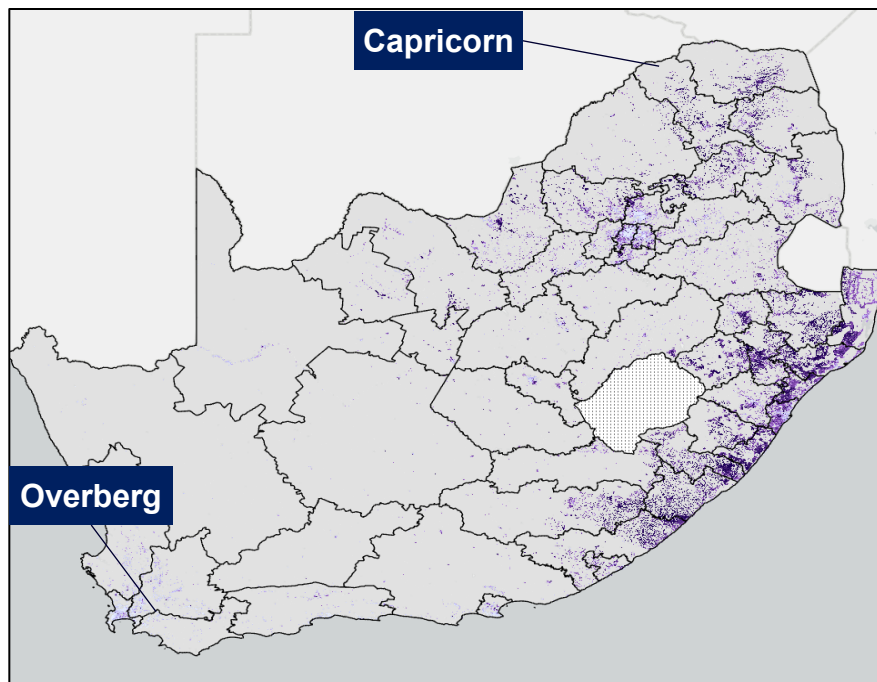
Localized Beneficiaries of Child Support Grant

South Africans in Capricorn district are most likely to be beneficiaries or know a beneficiary of the Child Support Grant, while South Africans in the Overberg district are the least likely.

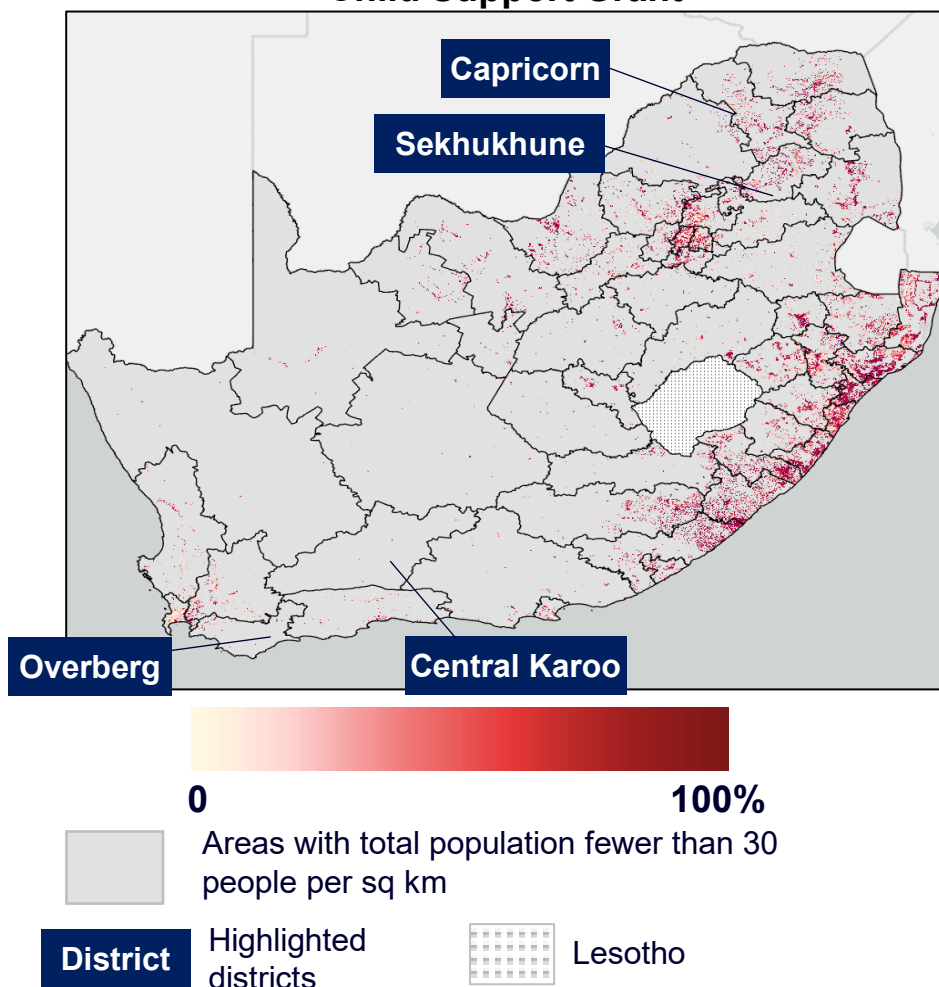**Percent of individuals that benefit from the Child Support Grant**

Districts with the highest beneficiaries (%) of the Child Support Grant		Districts with the lowest beneficiaries (%) of the Child Support Grant	
Capricorn (*Limpopo*)	95%	Overberg (*Western Cape*)	49%
O.R. Tambo (*Eastern Cape*)	94%	Namakwa (*Northern Cape*)	50%
Alfred Nzo (*Eastern Cape*)	94%	Garden Route (*Western Cape*)	57%
Vhembe (*Limpopo*)	94%	West Coast (*Western Cape*)	61%
Sekhukhune (*Limpopo*)	94%	City of Cape Town (*Western Cape*)	63%
Amathole (*Eastern Cape*)	91%	Cape Winelands (*Western Cape*)	65%
Mopani (*Limpopo*)	91%	ZF Mgcawu (*Northern Cape*)	67%
uThukela (*KwaZulu-Natal*)	91%	Central Karoo (*Western Cape*)	67%
Zululand (*KwaZulu-Natal*)	91%	Sarah Baartman (*Eastern Cape*)	69%
Harry Gwala (*KwaZulu-Natal*)	91%	Nelson Mandela Bay (*Eastern Cape*)	72%

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021

Localized Awareness of Child Support Grant

Nationally, there is a high level of awareness of the Child Support Grant Program. Awareness is relatively lower in the Western Cape districts of Overberg, Central Karoo, and West Coast. Program awareness is highest in the Limpopo districts of Capricorn and Sekhukhune, which are some of the poorest areas of South Africa.

Percent of individuals that are aware of the Child Support Grant

Capricorn
Sekhukhune
Overberg
Central Karoo

0   100%

Areas with total population fewer than 30 people per sq km

District   Highlighted districts   Lesotho

Districts with the <u>highest</u> awareness (%) of the Child Support Grant		Districts with the <u>lowest</u> awareness (%) of the Child Support Grant	
Capricorn (*Limpopo*)	98%	Overberg (*Western Cape*)	81%
Sekhukhune (*Limpopo*)	98%	Central Karoo (*Western Cape*)	86%
Sedibeng (*Gauteng*)	97%	West Coast (*Western Cape*)	86%
O.R. Tambo (*Eastern Cape*)	97%	Namakwa (*Northern Cape*)	87%
Mopani (*Limpopo*)	97%	Cape Winelands (*Western Cape*)	88%
Vhembe (*Limpopo*)	97%	Gert Sibande (*Mpumalanga*)	89%
Ehlanzeni (*Mpumalanga*)	97%	John Taolo Gaetsewe (*Northern Cape*)	89%
Alfred Nzo (*Eastern Cape*)	97%	Garden Route (*Western Cape*)	89%
Ekurhuleni (*Gauteng*)	97%	Z F Mgcawu (*Northern Cape*)	90%
iLembe (*KwaZulu-Natal*)	96%	City of Cape Town (*Western Cape*)	90%

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

Child Support Grant Impacts

% who reported the Child Support Grant had provided ___ benefits

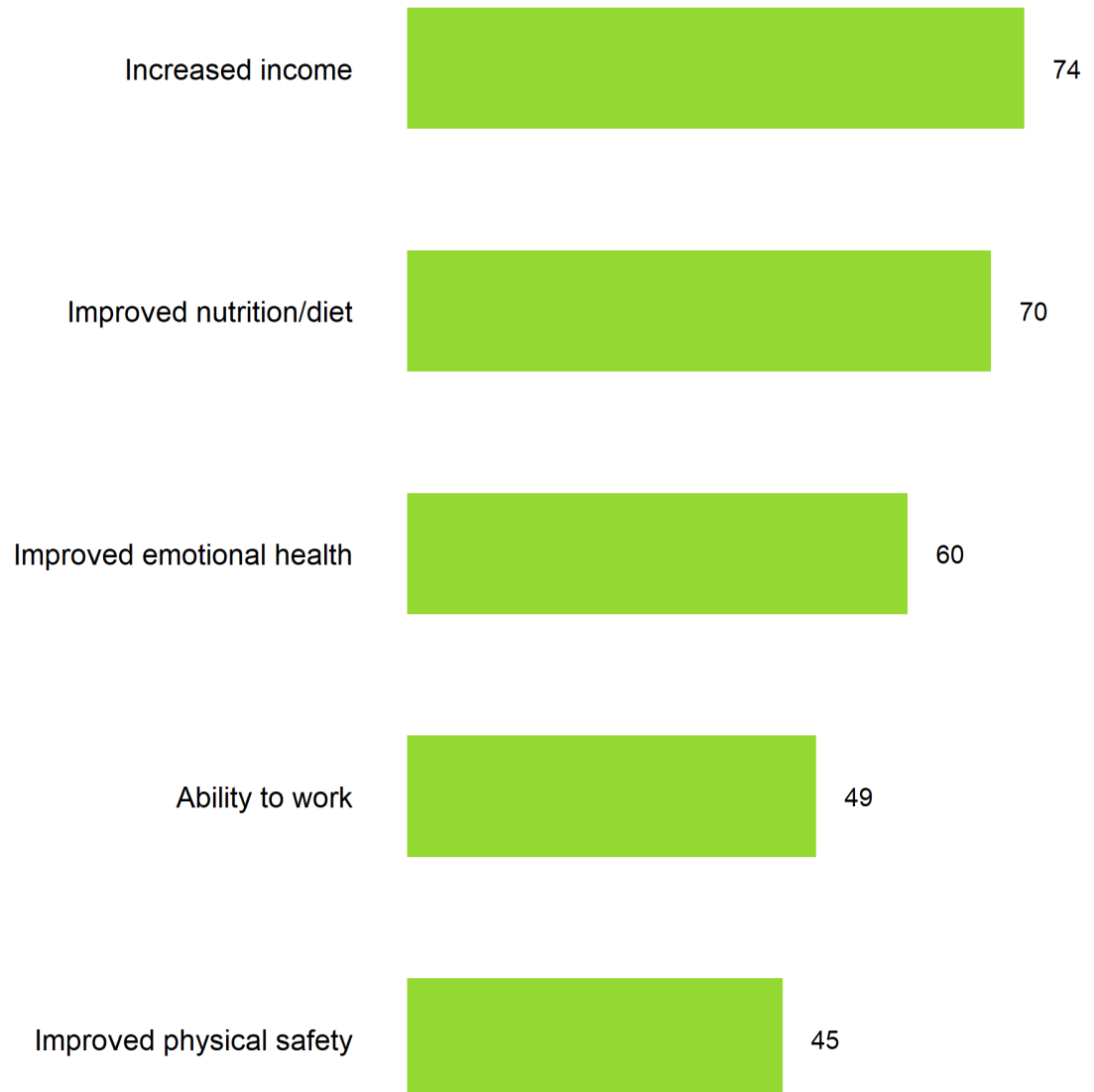The Child Support Grant has supported impoverished caregivers and their families.

Economic Impacts: Three in four South Africans believe that the program increased incomes among those who benefited from it, and nearly half believe it has improved beneficiaries' ability to continue working.

Health and Safety Impacts: The program has led to improved nutrition, emotional health, and physical safety. With COVID-19 taking an enormous toll on mental and physical health, it is notable that the majority of South Africans attribute improved health outcomes to the intervention.

Benefit	%
Increased income	74
Improved nutrition/diet	70
Improved emotional health	60
Ability to work	49
Improved physical safety	45

Note: Only those who benefited or knew someone who benefited were asked about impacts. Respondents could select more than one impact.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

Gender-Based Violence Support Services

Gender-Based Violence Services Overview

National lockdown measures increased the risk and exposure of women to abusive partners and potentially limited options to seek protection. Under President Cyril Ramaphosa's leadership, the government has taken an outspoken position on the need to prevent GBV and to provide services for GBV survivors.

"It is with the heaviest of hearts that I stand before the women and girls of South Africa this evening to talk about another pandemic that is raging in our country – the killing of women and children by the men of our country."
- Pres. Cyril Ramaphosa, Televised Address to the Nation, 17 June 2020

"Ending gender-based violence is imperative if we lay claim to being a society rooted in equality and non-sexism."
- Pres. Cyril Ramaphosa, State of the Nation Address, 11 February 2021

How has the South African government responded to gender-based violence concerns?

The government released its National Strategic Plan to combat gender-based violence and femicide in May 2020 to strengthen a coordinated national response to the GBV crisis in South Africa.

The Department of Social Development kept its Gender-Based Violence Command Centre (GBVCC) open with its 24/7 call center facility operating.

The GBVCC along with the Vodacom Foundation launched the Bright Sky SA mobile phone application, including a risk assessment module, information on GBV and on support services, such as police stations, hospitals, and NGOs.

Note 1: Source: https://www.justice.gov.za/vg/gbv/NSP-GBVF-FINAL-DOC-04-05.pdf

Note 2: Source: https://www.vodacom.com/news-article.php?articleID=7594

Attitudes About GBV Support Services

Both South African men and women have equally strong favorable views of the government's focus on providing resources for survivors of gender-based violence.
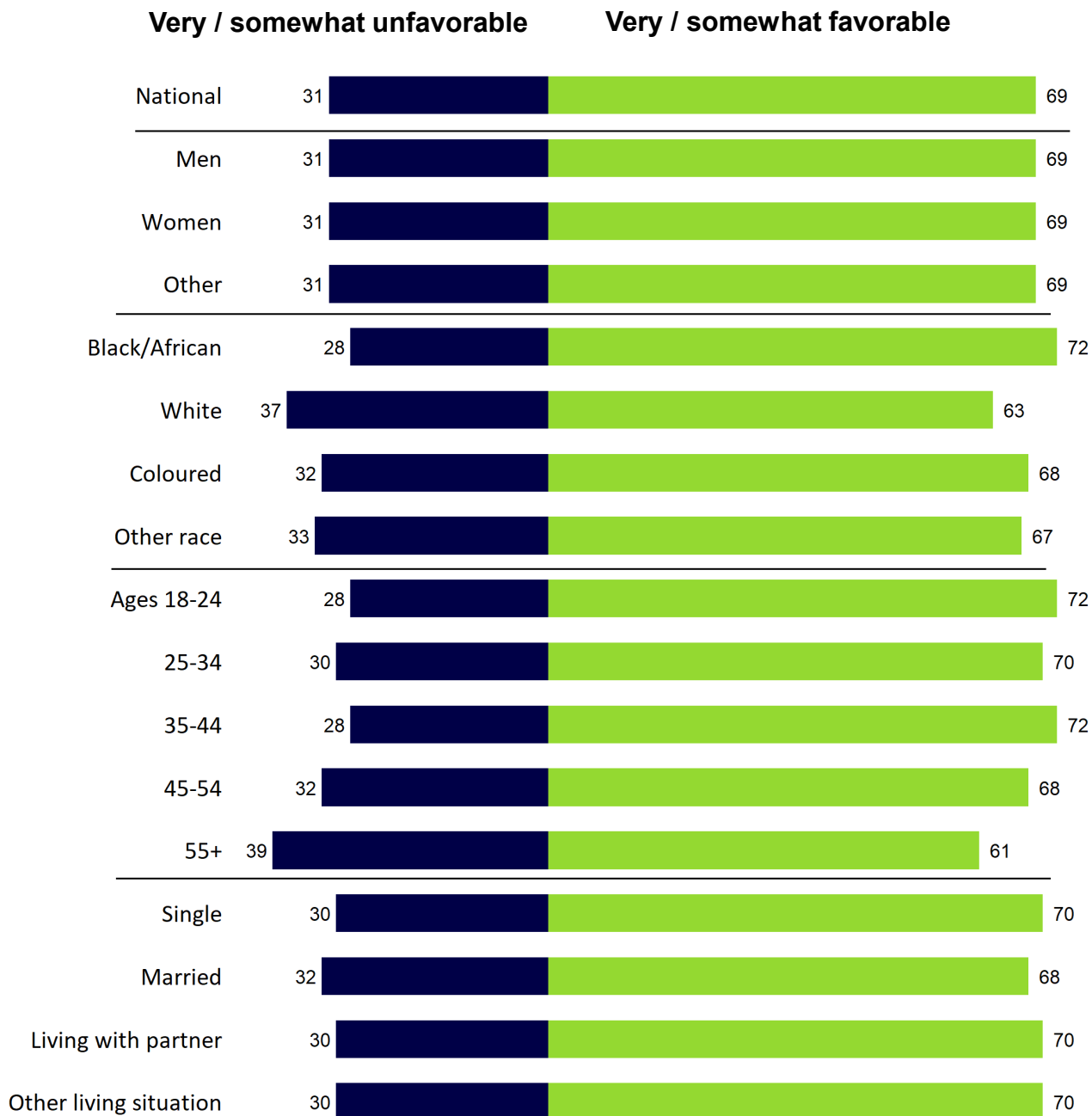
Favorability rates are slightly lower amongst white South Africans, of which nearly two thirds are very or somewhat favorable of the government's focus in this area.

Favorability rates are high in all age groups, but dip slightly among those aged 55 and older.

Note: Other gender includes transgender and non-binary individuals (0.5% of sample). Other race includes Indian/Asian and "Other" response category (4.5 % of sample). Other living situation includes married but separated, widowed and not remarried, and divorced and not remarried (6.3 % of sample).

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

% with __ opinion of the government providing resources for survivors of GBV

	Very / somewhat unfavorable	Very / somewhat favorable
National	31	69
Men	31	69
Women	31	69
Other	31	69
Black/African	28	72
White	37	63
Coloured	32	68
Other race	33	67
Ages 18-24	28	72
25-34	30	70
35-44	28	72
45-54	32	68
55+	39	61
Single	30	70
Married	32	68
Living with partner	30	70
Other living situation	30	70

Beneficiaries of GBV Services

The majority of South Africans have not benefitted – or know someone who has benefitted – from the increased support for GBV victims, although it is overwhelmingly viewed as a positive intervention.

Black, young, single South Africans, with little formal education benefited from the program at the highest rates. This provides evidence that the program is targeting the most vulnerable populations.
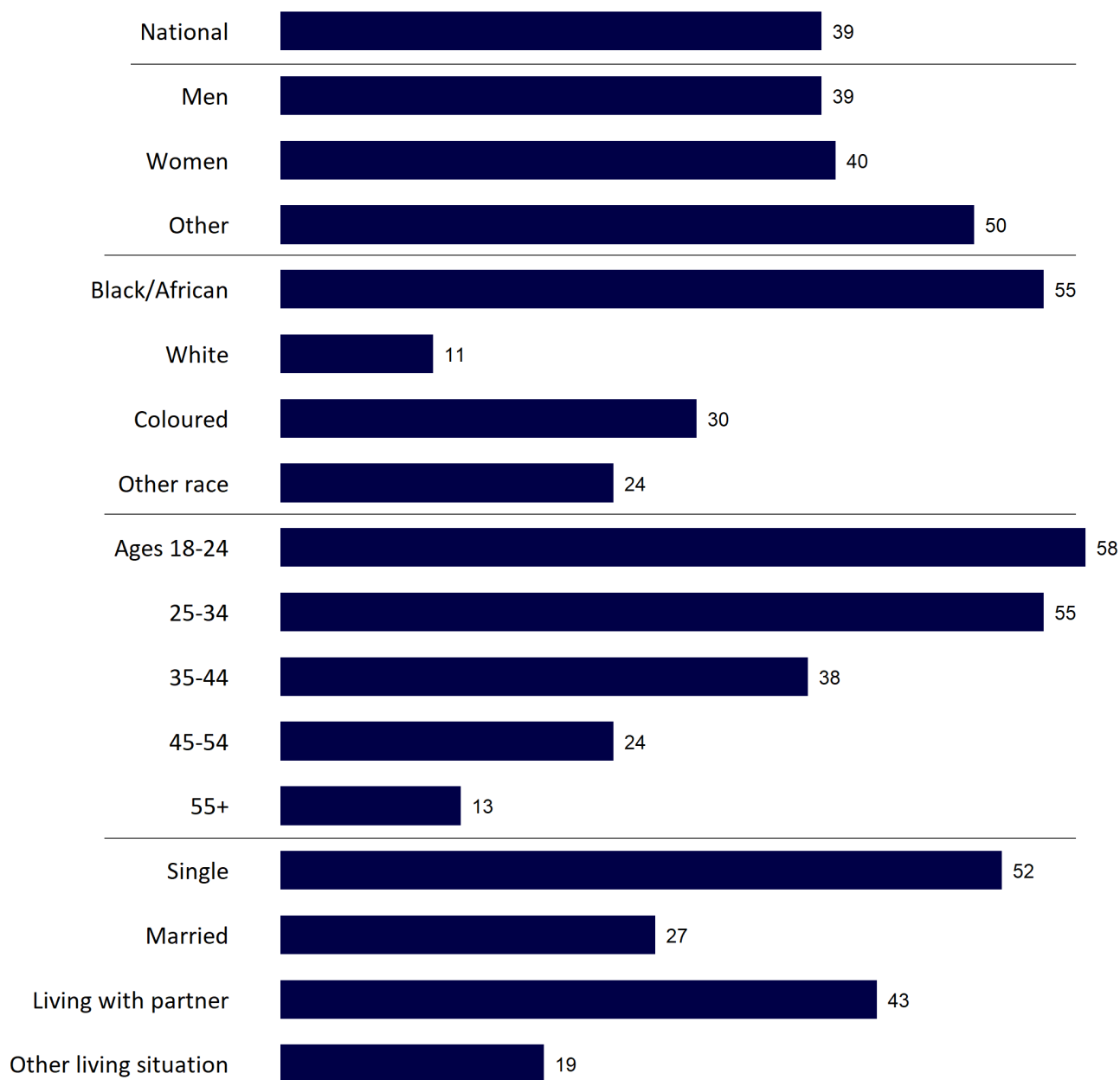
Over 70 percent of South Africans who benefited – or know someone who benefited from the program – claim the intervention has improved emotional health, physical safety, and nutrition/diets.

Note: Other gender includes transgender and non-binary individuals (0.5% of sample). Other race includes Indian/Asian and "Other" response category (4.5 % of sample). Other living situation includes married but separated, widowed and not remarried, and divorced and not remarried (6.3 % of sample).

Only those that were aware of the program were asked to report if they were beneficiaries or know someone who has benefitted.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

% who receive or knows someone who has received GBV support

Category	Value
National	39
Men	39
Women	40
Other	50
Black/African	55
White	11
Coloured	30
Other race	24
Ages 18-24	58
25-34	55
35-44	38
45-54	24
55+	13
Single	52
Married	27
Living with partner	43
Other living situation	19

Localized Beneficiaries of GBV Services

South Africans in the poorer province of Limpopo are most likely to be or know beneficiaries of gender-based violence services. More than six in ten South African adults in the Limpopo districts of Vhembe, Mopani, Capricorn, and Sekhukhune benefit or know beneficiaries of GBV services. This is 50 percent higher than the national average.

Percent of individuals that receive or know recipients of GBV services
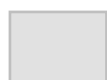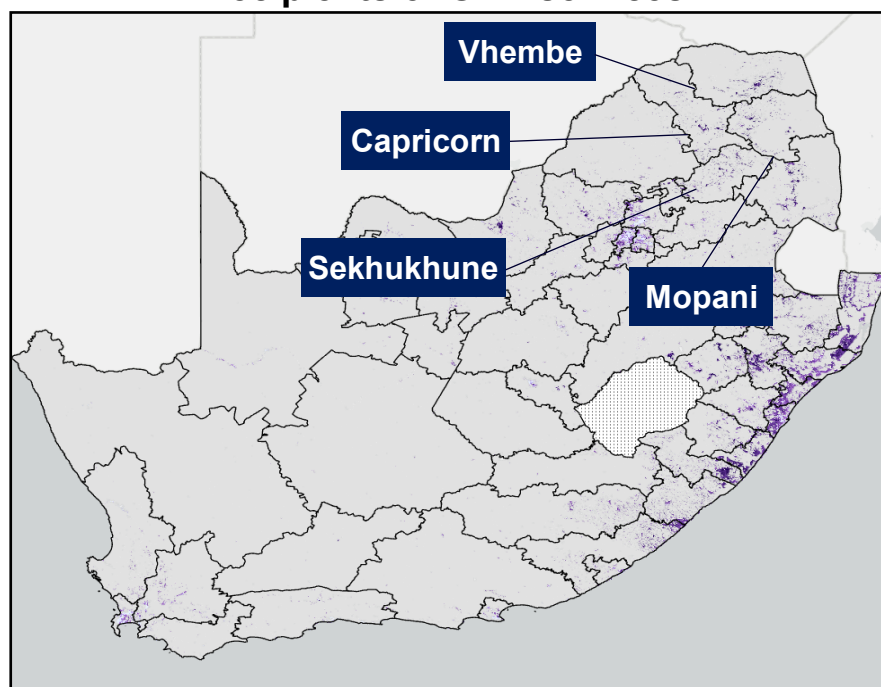
0   100%

Areas with total population fewer than 30 people per sq km
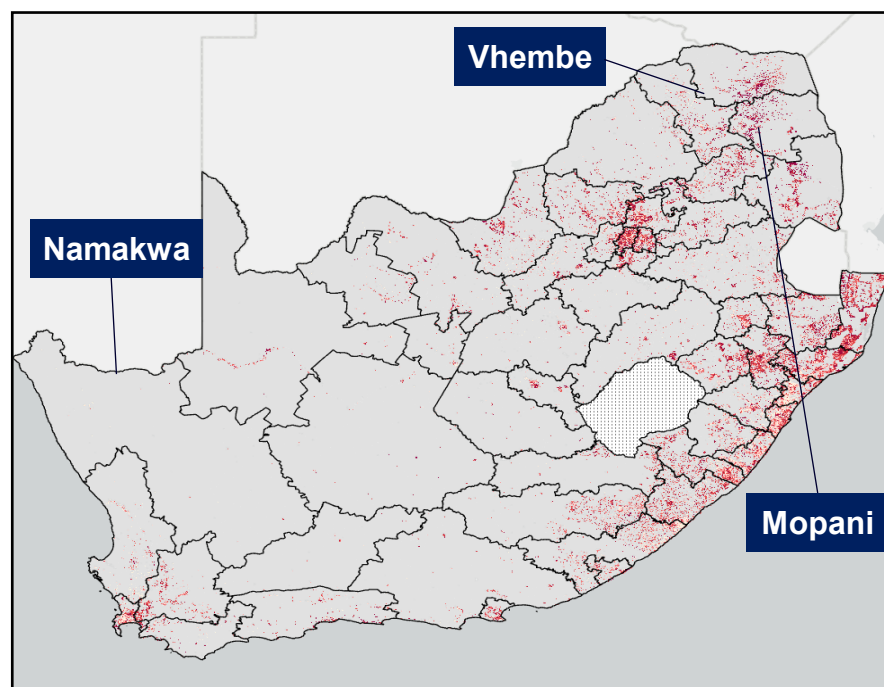
Districts   Highlighted districts

Lesotho

Districts with the highest beneficiary (%) of GBV services		Districts with the lowest beneficiary (%) of GBV Services	
Vhembe (*Limpopo*)	66%	ZF Mgcawu (*Northern Cape*)	26%
Mopani (*Limpopo*)	64%	Garden Route (*Western Cape*)	29%
Capricorn (*Limpopo*)	62%	Namakwa (*Northern Cape*)	30%
Sekhukhune (*Limpopo*)	60%	Overberg (*Western Cape*)	31%
Ehlanzeni (*Mpumalanga*)	59%	City of Cape Town (*Western Cape*)	35%
Zululand (*KwaZulu-Natal*)	59%	West Coast (*Western Cape*)	37%
uThukela (*KwaZulu-Natal*)	58%	Cape Winelands (*Western Cape*)	39%
Ugu (*KwaZulu-Natal*)	57%	City of Tshwane (*Gauteng*)	39%
Amajuba (*KwaZulu-Natal*)	57%	Fezile Dabi (*Free State*)	40%
Waterberg (*Limpopo*)	55%	Ekurhuleni (*Gauteng*)	41%

Localized Awareness of GBV Services

Respondents in the Mopani and Vhembe districts of Limpopo province are 42% more likely to be aware of GBV services than the national average. GBV service awareness is lowest in the Namakwa district of the Northern Cape province.

Percent of individuals that aware of GBV services

0   100%

Areas with total population fewer than 30 people per sq km

Districts   Highlighted districts   Lesotho

Districts with the **highest** awareness (%) of GBV services		Districts with the **lowest** awareness (%) of GBV services	
Mopani (*Limpopo*)	74%	Namakwa (*Northern Cape*)	46%
Vhembe (*Limpopo*)	72%	West Coast (*Western Cape*)	50%
Ehlanzeni (*Mpumalanga*)	68%	City of Cape Town (*Western Cape*)	57%
ZF Mgcawu (*Northern Cape*)	68%	uMgungundlovu (*KwaZulu-Natal*)	58%
Pixley ka Seme (*Northern Cape*)	67%	Harry Gwala (*KwaZulu-Natal*)	58%
City of Tshwane (*Gauteng*)	67%	Amajuba (*KwaZulu-Natal*)	58%
Nelson Mandela Bay (*Eastern Cape*)	66%	Waterberg (*Limpopo*)	58%
Sedibeng (*Gauteng*)	65%	Gert Sibande (*Mpumalanga*)	58%
Mangaung (*Free State*)	65%	Ugu (*KwaZulu-Natal*)	58%
Dr Kenneth Kaunda (*North West*)	65%	Chris Hani (*Eastern Cape*)	59%

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021

GBV Service Impacts

% who reported GBV support had provided __ benefits
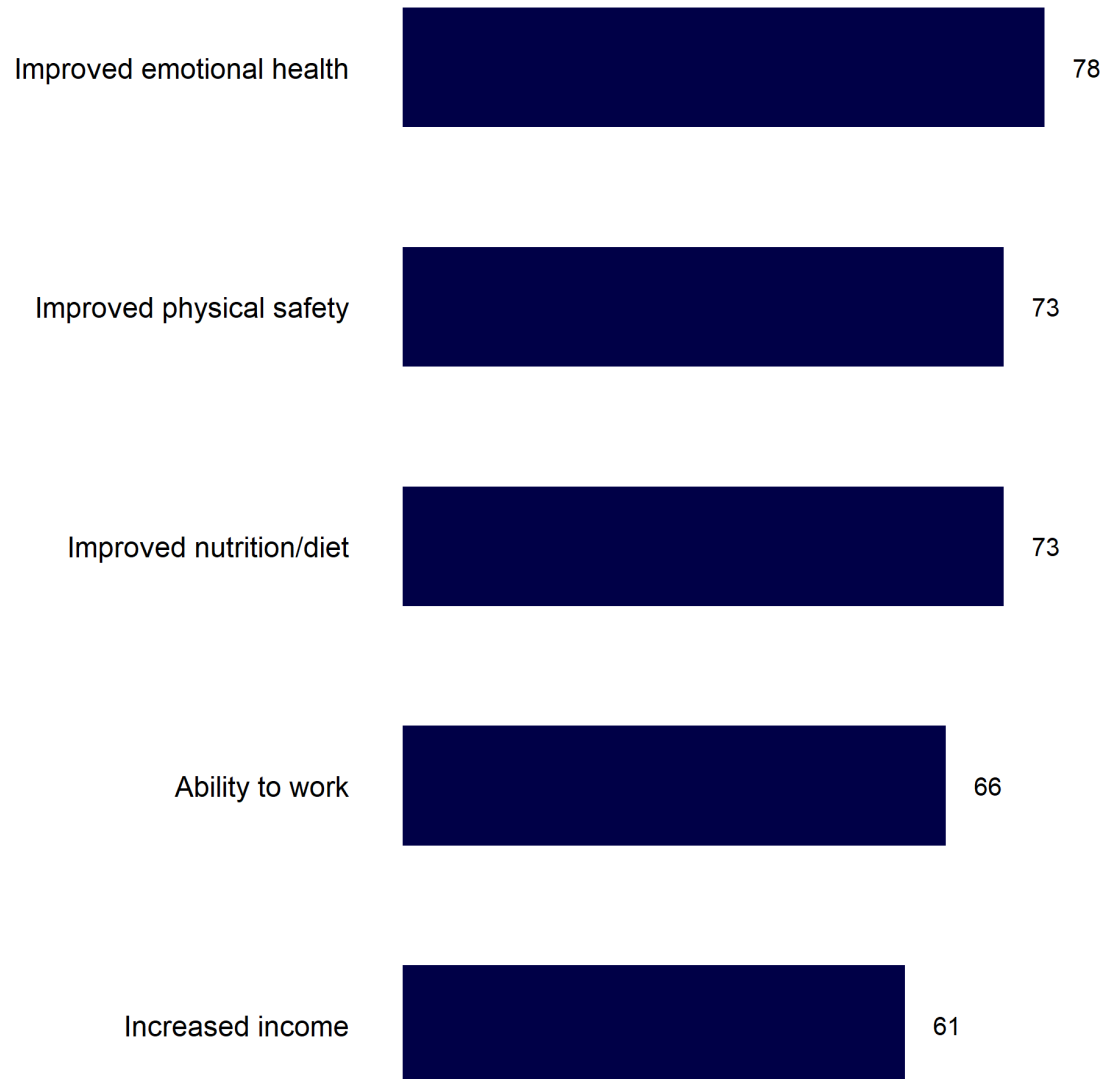
Economic Impacts: Three in five South Africans who benefited from the program directly, or report knowing someone who benefited, believe that recipients have increased incomes and are able to continue working due to the support.

Health and Safety Impacts: South Africans report that the program has led to improved nutrition, emotional health, and physical safety. Over 70 percent of South Africans who benefited – or know someone who benefited from the program – claim the intervention has improved emotional health, physical safety, and nutrition / diet.

Benefit	%
Improved emotional health	78
Improved physical safety	73
Improved nutrition/diet	73
Ability to work	66
Increased income	61

Note: Only those who benefited or knew someone who benefited were asked about impacts. Respondents could select more than one impact.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

International Support

I.   G7 and Other Bilateral Support

II.   Multilateral Organization Support

Attitudes on G7 Support

The majority of South Africans are not aware that G7 members —composed of the United Kingdom, United States, Canada, France, Germany, Italy, and Japan —are providing support to South Africa during the COVID-19 pandemic.
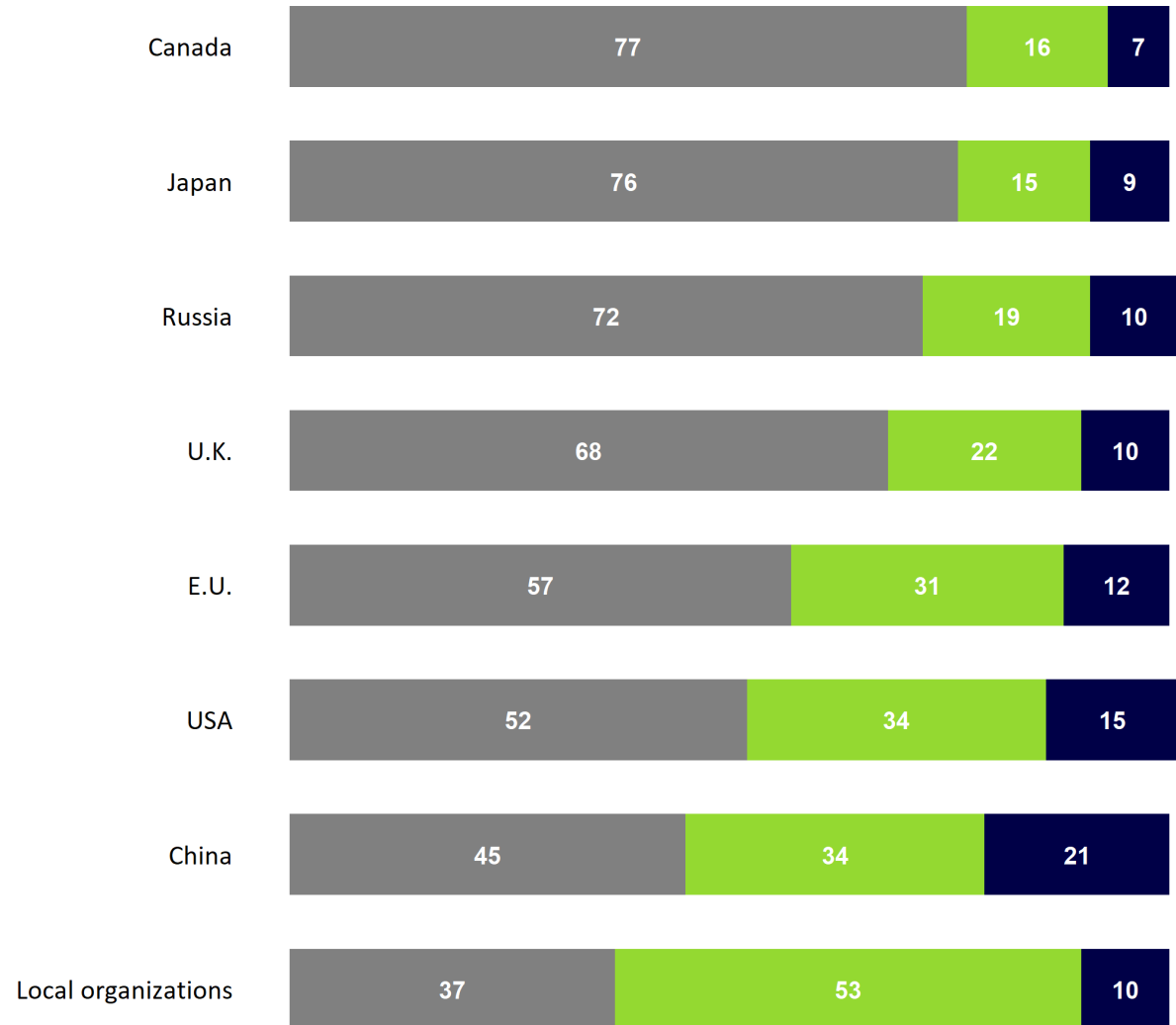
Less than half of all South Africans are aware of **any** G7 country support. Less than one-quarter are aware that Canada and Japan are providing support, and only one-third are aware of support from Russia and the UK.

More South Africans are aware of Chinese and U.S. support than of support from other nations; only one-third of all respondents had a positive perception of such support.

Note: Only respondents who were aware of COVID-19 response efforts for a given organization were asked if support was positive or negative. Local organizations include charities, churches, mosques, or temples.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

% who have a ___ perception of country's support towards South Africa during COVID-19

	Not Aware	Positive	Negative
Canada	77	16	7
Japan	76	15	9
Russia	72	19	10
U.K.	68	22	10
E.U.	57	31	12
USA	52	34	15
China	45	34	21
Local organizations	37	53	10

Legend: Not Aware, Positive, Negative

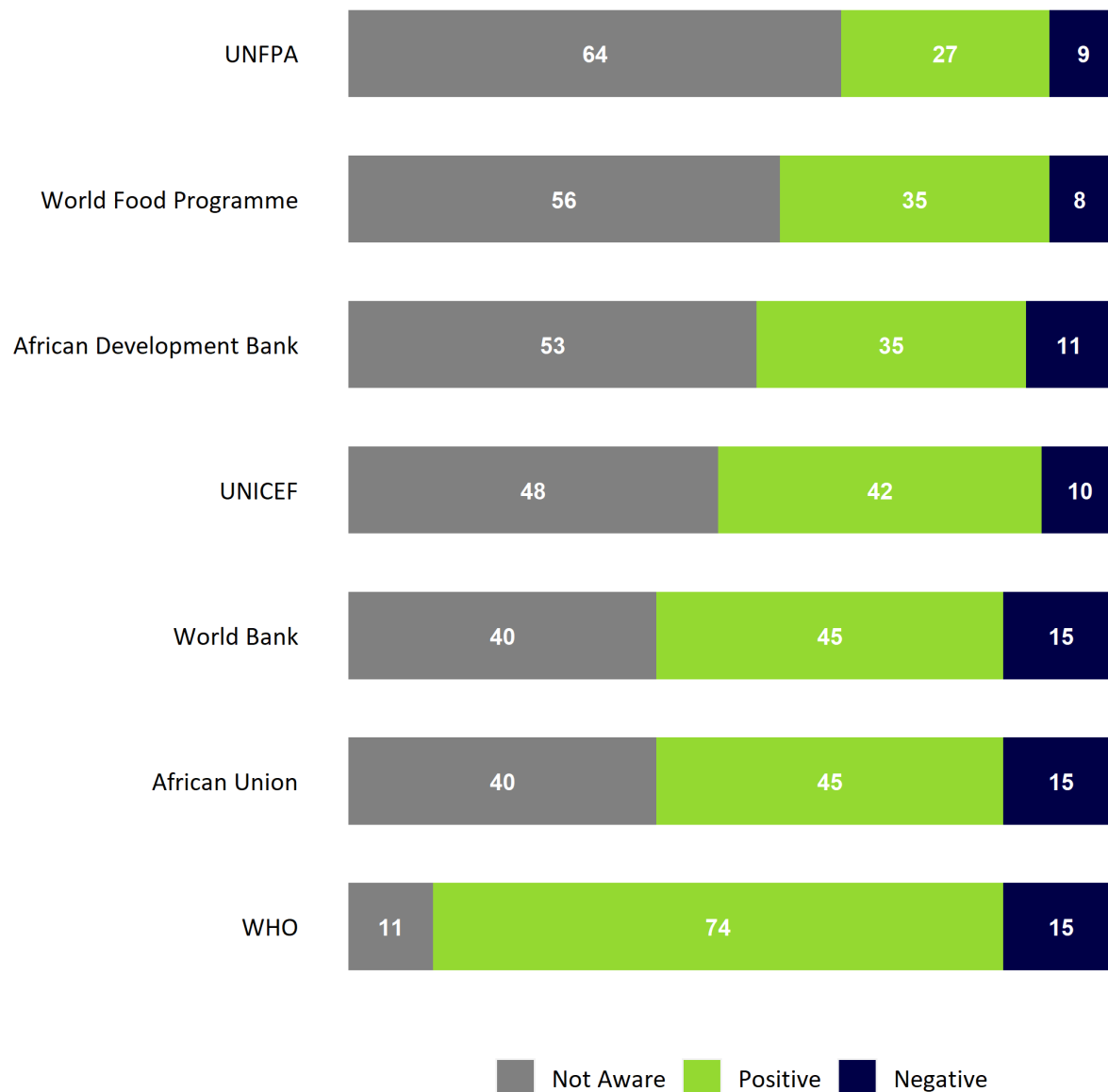# Attitudes on Multilateral Organization's Support

South Africans are more aware of COVID-19 support from multilateral organizations than from individual countries.

Nine in ten South Africans are aware of support from the World Health Organization (WHO). Three in four South Africans have a positive view of this support.

South Africans also have high awareness of World Bank and African Union support, with 45 percent reporting a positive perception.

Awareness of COVID-19 support is lowest for United Nations Population Fund (UNFPA) and World Food Program (WFP) support. More than half of South Africans are not aware of **any** support from these multilateral organizations.

Note: Only respondents who were aware of COVID-19 response efforts for a given organization were asked if support was positive or negative.

Source: Fraym nationally representative online panel of 8,028 South African adults conducted April 9-23, 2021.

% who have a __ view of multilateral organization's support towards South Africa during COVID-19

Organization	Not Aware	Positive	Negative
UNFPA	64	27	9
World Food Programme	56	35	8
African Development Bank	53	35	11
UNICEF	48	42	10
World Bank	40	45	15
African Union	40	45	15
WHO	11	74	15

Legend: Not Aware | Positive | Negative

Appendix

Study Methodology

Fraym conducted a survey of 8,024 South African respondents via a demographically and geographically-targeted online panel. Data was collected between April 9 to 23, 2021.

The respondents identified the following gender identities: 4,578 females (57%), 3,457 males (43%), and 43 (0.5%) respondents who identified as transgender female, transgender male, other/non-binary, or preferred not to answer. South Africa's nine provinces were represented as follows: Eastern Cape, 716 (9%), Free State, 377 (5%), Gauteng, 2,548 (32%), KwaZulu-Natal, 1,537 (19%), Limpopo, 668 (8%), Mpumalanga, 537 (7%), North West, 361 (4%), Northern Cape, 119 (1%), and Western Cape, 1,215 (15%).

The average survey completion time was 21 minutes for respondents. The survey consisted of about 50 questions. Topics included demographics, impacts of the COVID-19 pandemic, perceptions of the gender burden of these impacts as well as attitudes toward support from international, national, and local actors.

The panel vendor used for the sample adheres to industry best-practices. These include: (i) regularly testing/validating on a rolling basis to ensure participants and their responses are real/accurate; (ii) comparing answers from respondents to pre-collected information on the same respondents for consistency, such as same age, gender, socio-economic status, and geography; (iii) using automated natural language processing (NLP) on open-ended responses to detect non-sensical language etc.; (iv) check for straight lining (e.g. answering "C" for all questions); and (v) checking speed of completion rates, (e.g. flagging anyone who spends 1/3 or less of the median time to complete the questionnaire). Responses that fail any one of these tests were automatically removed from the data and possibly lead to the removal from the vendor's sample pool as well.

The data was designed to be nationally representative. Modest divergence was found between sample characteristics and the population parameters according to available Statistics South Africa data. Post-hoc weights were created to correct for these differences. An iterative proportional fitting process was used to simultaneously balance the distributions of the following parameters: gender, age, urban status, and the population in each of South Africa's nine provinces.

The localized maps seen in this report were produced using the proprietary software FUSE*fraym™*. This software uses artificial intelligence and machine learning (AI/ML) to weave together survey data with satellite imagery and geostatistical datasets. These include earth observation (EO) data, gridded population information (e.g., human settlement mapping), and biophysical surfaces like soil characteristics. Fraym data scientists ensure that the software only uses high-quality imagery inputs. Derived products are carefully assessed for model metrics, contextual checking, and pedigree within the geospatial data science community. Remotely sensed data, such as satellite imagery, are downloaded from long running and frequently quality-checked satellites and sensors. Data is provided by respected organizations including the National Aeronautics and Space Administration (NASA), National Oceanic and Atmospheric Administration (NOAA), European Space Agency (ESA), the Socioeconomic and Applications Center (SEDAC), and the Center for International Earth Science Information Network (CIESEN).

About Fraym

Fraym has built machine learning (ML) software that weaves together geo-tagged household survey data with satellite imagery to create localized population information (1 km^2).

1 The primary ML model input is data from high-quality, geo-tagged household surveys. Key indications of a high-quality household survey include implementing organization(s), sample design, sample size, and response rates. After data collection, *post-hoc* sampling weights are created to account for any oversampling and ensure representativeness.

2 The second major data input is satellite imagery and related derived data products, including Earth observation (EO) data, gridded population information (e.g., human settlement mapping, etc.), proximity to physical locations (e.g., health clinics, ports, roads, etc.) and biophysical surfaces like soil characteristics. As with the survey data, Fraym data scientists ensure that the software only uses high-quality imagery and derivative inputs.

3 To create spatial layers from household survey data, Fraym leverages machine learning to predict an indicator of interest at a 1 square kilometer resolution. This methodology builds upon existing, tested methodologies for interpolation of spatial data. The resulting model is used to predict the survey data for all non-enumerated areas. A similar approach was originally developed by academic researchers focused on health outcomes, which were expanded upon by USAID's Demographic and Health Surveys program since then by Fraym and others.[1]

ACQUIRE DATA
Geo-tagged household surveys

Satellite imagery

Partner datasets

Mobility data from network operators

HARMONIZE DATA
Validate
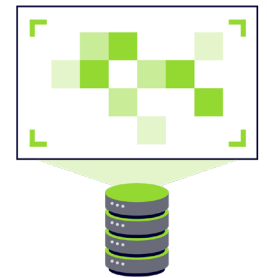
Clean

Geospatially enable

MACHINE LEARNING
Proprietary algorithms

Human-centric QA/QC

Automation

GEOSPATIAL INSIGHT
Predictive modeling

API enabled

Analytic services

Front-end tools

Note 1: Gething, Peter, Andy Tatem, Tom Bird, and Clara R. Burgert-Brucker. 2015. Creating Spatial Interpolation Surfaces with DHS Data DHS Spatial Analysis Reports No. 11. Rockville, Maryland, USA: ICF International. Other notable, relevant work includes: Weiss DJ, Lucas TCD, Nguyen M, et al. Mapping the global prevalence, incidence, and mortality of *Plasmodium falciparum*, 2000–17: a spatial and temporal modelling study. Lancet 2019 and Tatem A, Gething P, Pezzulo C, Weiss D, and Bhatt S. 2014. Final Report: Development of High-Resolution Gridded Poverty Surfaces. University of Southampton. https://www.worldpop.org/resources/docs/pdf/Poverty-mapping-report.pdf
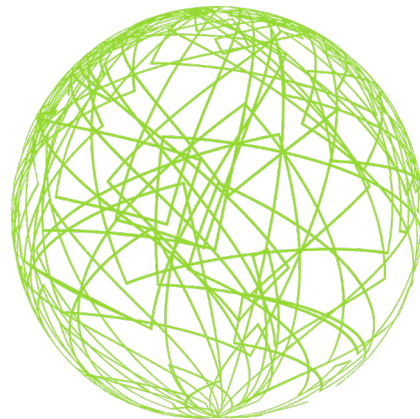
Have questions about how Fraym data can help your organization?

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