

Women Informal Traders and Child Care during the COVID-19 Pandemic: Findings from Accra, Durban and Nakuru



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Acknowledgements

The authors are grateful for the support from Echidna Giving to undertake this research in Accra, Durban and Nakuru.



Publication date: July 2021

ISBN number: 978-92-95106-17-8

Please cite this publication as: Boatang-Pobee, Lydia and Sarah Heneck, Anne Kamau, Francis Kapere, Kweku Kyere, Misiwe Maphumulo and Rachel Moussié. 2021. Women Informal Traders and Child Care during the COVID-19 Pandemic: Findings from Accra, Durban and Nakuru. WIEGO Resource Document No. 20. Manchester, UK: WIEGO

Published by Women in Informal Employment: Globalizing and Organizing (WIEGO)
A Charitable Company Limited by Guarantee – Company N°. 6273538, Registered
Charity N°. 1143510

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Manchester, M2 7EN
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The public health measures taken to contain the pandemic coupled with the economic slowdown have significantly reduced women informal traders' earnings across the three cities. With limited access to cash transfers and food relief, women informal traders must continue working in markets during the pandemic to earn enough for food and other necessities.

Informal food trading was deemed an essential service in all three countries allowing informal traders to sell fresh produce and cooked food during lockdown periods. This was important to guarantee food security in cities. Yet, the research shows that lower earnings are leading to greater food insecurity in informal traders' households impacting on young children's nutrition and breastfeeding practices among working mothers.

Creche and school closures have forced many women informal traders to find alternative care arrangements. They must consider different trade-offs between a set of poor options. Some women informal traders bring their young children to the market or city streets while they trade despite their fears of infection.

Even prior to the pandemic, many women informal traders brought their young children to the market. This can support breastfeeding and attachment to primary caregivers, but also reduces women informal traders' earnings as caring for young children while working is distracting, disrupts working hours and can be off-putting for customers.

Across the three cities, women informal traders expressed four key demands for food relief, cash transfers, quality and affordable child care services in markets, and financial assistance to restart their businesses.

City markets and streets are regulated trading spaces as most street vendors and market traders pay licensing fees, tolls and taxes to operate. In return, informal traders expect safe and hygienic trading spaces through municipal investments in public health measures and improved water and sanitation facilities. Additional investments in child care facilities for young children are needed to support women informal traders' earnings and enhance the impact of public health measures taken in markets to contain COVID-19.



Christina Ohenewaa is a trader in cosmetics. She trades along the footpath to the Tema Lorry station in a wooden structure. Photo credit: Benjamin Forson

1. Introduction

The crisis in child care provision for women informal workers and their children was evident prior to the COVID-19 pandemic (Alfers 2016, Moussié and Alfers 2018). The World Bank estimates that 350 million children do not have access to child care services (Devercelli and Beaton-Day 2020). Nearly 8 out of 10 of these children live in low or lower middle-income countries. A key barrier for the working poor to access child care services is a lack of provision in places where workers live and work. High costs for child care services and poor quality services are other factors that discourage women informal workers from using child care services where these exist.

Women informal workers are segregated into low paid and insecure employment in the informal economy lacking basic labour and social protections (Chen 2012, ILO 2018b). The COVID-19 crisis has hit sectors where women tend to be concentrated, such as retail and accommodation and food services, leading to higher job losses and reduced earnings for women workers. For example, 42 per cent of women in the informal economy are employed in sectors that have been identified as “high risk” during the current crisis compared with 32 per cent of men in the informal economy (ILO 2020). Women informal traders – including street vendors and market traders - make up a large component of the retail and food service sectors across Africa. Most street vendors are women in Ghana (88 per cent), Kenya (63 per cent) and South Africa (68 per cent) (ILO and WIEGO 2013). Market trade represents 40 per cent of women’s employment in Greater Accra and urban Ghana (Baah-Boateng and Vanek, 2020). The loss of income due to the COVID-19 pandemic limits women’s ability to pay for child care services and has severe repercussions on poverty and food insecurity in their households. UNICEF and Save the Children estimate that due to the pandemic an additional 150 million children are living in multi-dimensional poverty – without access to health, education, nutrition, water and sanitation and housing services (2020).

At the same time, women's disproportionate responsibility for caring for children in their own homes affected their ability to earn an income. School and creche closures to contain the virus increased women's and girls' child care responsibilities at home. As lockdown measures eased but school and creche closures were maintained, women informal workers struggled to recover their pre-pandemic earnings, while also caring for their children. The WIEGO Global COVID-19 Crisis and the Informal Economy Study in 12 cities around the world with over 2,000 respondents reflected this reality. The first phase of the study, conducted between April – July 2020, showed that women informal workers who reported an increase in care responsibilities were earning only 40 per cent of their pre-pandemic earnings by July, as compared to all other men and women who were earning at least 60 per cent of their prior earnings (Ogando et al. 2021). At this stage in the pandemic, the primary care responsibility women mentioned was child care due to creche and school closures.

Women street vendors and market traders could not afford to stop working in light of these growing child care responsibilities as their sector of work was so severely hit by the pandemic. Across Africa, some informal traders were also deemed essential workers as they provided fresh produce and cooked food allowing them to work during lockdown periods. Though they were able to secure some income during this period, they also faced greater exposure and higher risks of infection from COVID-19 as many lacked the necessary personal protective equipment (PPE) (Bamu and Marchiori 2020).

This report focuses on the experience of women informal traders in Accra, Ghana; Durban, South Africa; and Nakuru, Kenya to shed light on the multiple and intersecting challenges they faced to both earn an income and care for their young children amidst an unprecedented global health, economic and care crisis. In many instances women had no other option but to bring their children to markets and city streets as they work. The central research question posed in these three cities aims to understand how the COVID-19 pandemic exposed children and their primary caregivers to health risks, inadequate care arrangements and threatened women informal traders' economic recovery as they struggled to care and work at the same time.

2. Methodology

The study focused on women informal traders working during the pandemic with children between 0-5 years old in their care. The interviews with women informal traders in Accra, Durban and Nakuru were conducted over the phone due to ongoing COVID-19 restrictions. The short questionnaire was first developed and piloted in Nakuru by a team of researchers at the University of Nairobi. It was then reviewed and standardized for the research teams in Accra and Durban.

Given the hardship many informal traders were facing at this time, the survey was designed to be brief and relied on established relationships with traders and their organizations based on trust and continuous engagements. The respondents were identified through informal traders' organizations and NGOs in the three cities. In Accra, the team reached out to members of the Old Fadama Kayayei Association, Greater Accra Market Association, and the Informal Hawkers and Vendors Association of Ghana. In

Durban, Asiye eTafuleni (AeT), a not-for-profit organization that has worked for the past 12 years in Warwick Junction, led the research and identified the traders through their presence in the market. In Nakuru, the Kenya National Alliance of Street Vendors and Informal Traders (KENASVIT) collaborated with researchers at the University of Nairobi to identify respondents and complete the survey.

In each city between 28-35 women informal traders participated in the survey. Their age varied between 19 to 68 years old, with the mean age of 32-36 years old across the three cities. In Accra and Nakuru all the respondents were mothers of the young children in their care. In Durban, four of the respondents were grandmothers between the ages of 45 to 68 years old. Over three-quarters of the respondents have only one child under five years old in their care, with a quarter of respondents caring for two young children. Many of the women stated they were not in a relationship, with close to half of the respondents in Nakuru stating they were single, divorced or widowed. In Durban, only three of the 28 respondents were in a partnership. In Accra, seven women said they were single, divorced or widowed. As other studies have shown, even if women are not single parents, they are likely to spend a greater share of their earnings on goods and services for the children (Quisumbing and Maluccio 2003, UN Women 2019).

“The father of my children does not really take responsibility for the children like it is expected. So even if we visit the hospital for healthcare, the health insurance scheme can only cover some part of the cost and I have to bear the other part myself including what they will wear and practically everything you can think of – all on that same source of income I have.”

– Street vendor, Accra



Kayayei carry heavy loads across the market for customers and other traders. Without access to child care services, many carry their young children on their backs while they work. Photo credit: Benjamin Forson

Although all the women are informal traders, it is relevant to distinguish between different types of workers within markets. In Accra, the survey included market traders, street vendors, and Kayayei¹ – head porters. Market traders own or rent their stall in the market premises while street vendors can operate within the market or on the city streets around the market. Generally, market traders tend to have higher incomes and savings to draw from than street vendors. Kayayei are hired by market traders and their customers to carry goods around the market. They are by far the most vulnerable, as many are young women migrants from Northern Ghana and earn the lowest incomes in the markets (Osei-Boateng 2012). In Nakuru and Durban, a mix of street vendors and market traders were surveyed. Women traders were involved in selling fresh produce, food and beverages, second-hand clothes, cosmetics, and traditional handicrafts.

As each country faced different periods of lockdown with various restrictions, the surveys could not be conducted at the same time. In Accra and Nakuru, the survey was conducted towards the end of 2020 when markets were open after an initial strict lockdown period between March – April 2020. In Durban, the survey was delayed due to the second wave of COVID-19 and was finalized in the first half of 2021. Despite this variation, at the time of each survey the economic slowdown was felt by all informal traders in the three cities, suggesting how vulnerable their incomes were to this shock.

3. COVID-19 Prevention Measures: Impact on Women Informal Traders

Evidence from the three cities demonstrates that measures taken to contain the virus, such as temporary market closures, public health measures, and creche and school closures, were in most cases necessary but had a knock-on negative effect on informal traders' incomes and food security. Relief measures taken by governments were limited and did not cushion the blow for many informal traders. The section below will provide more details as to the working conditions of informal traders amid the pandemic across the three cities and the implications this has on women traders' earnings and child care responsibilities.

Temporary Market Closures and Relocations

In Ghana, Kenya and South Africa, the governments announced lockdowns during the March – April 2020 period. In all three countries, informal food trading was deemed an essential service once lockdown measures were announced (Bamu and Marchiori 2020) while measures were taken in markets and street vending sites to limit contagion. Accra and Kumasi – the two largest cities in Ghana – were placed under lockdown. Markets remained open though there were fewer informal traders and customers. Far more market traders were working than street vendors as the latter were at times prevented from working by authorities, despite having permission (WIEGO 2021a). Street vendors were also relocated to less desirable places with reduced demand and less pedestrian flow. Kayayei were more acutely affected as there were fewer customers in the market demanding their services.

¹ “Kayayei” is the plural form of “kayayo” which is the term used to designate a head porter in Accra.

In Durban, Warwick Junction was immediately closed once the first lockdown period was announced in March 2020. Warwick Junction is a transport interchange in central Durban. Due to the high volume of commuters who travel through this area to and from work, an informal trading hub developed within and around the interchange. Over 8,000 informal workers sustained their livelihoods in this space; these included traders, recyclers, water carriers and barrow operators. A few trading spaces within and around Warwick Junction opened up as early as the first week of April 2020 allowing some street vendors and market traders to return to work. The first permitted to return were street vendors selling fresh produce and cooked food. During this lockdown period many traders reported facing harassment by police who were not aware of the new regulations allowing them to trade.

In Nakuru, the women included in the survey were originally trading in the Wakulima market which was the largest in the city hosting approximately 3,000 informal workers. As new physical distancing measures were announced, the County government temporarily closed the Wakulima market and relocated many of the traders to open air sites such as the Afraha stadium two kilometers away. Some traders operating in stalls along the streets remained but were required to maintain physical distancing. At the time of the study in September 2020, all the women traders in wholesale and retail businesses were relocated out of the Wakulima Market. The relocation sites lacked proper display spaces, roofing and protection for traders. They were exposed to the elements throughout the day, making it more difficult to trade.

Though some informal food traders designated as essential workers could continue working, lockdown restrictions, physical distancing measures, limited public transport and curfews made it more difficult for them and their customers to travel to the markets. Even as lockdown measures eased, many of these restrictions were maintained to contain infection rates. As a key transport node, Warwick Junction witnessed interrupted footfall in the markets and reduced access to passing trade. The trains that bring thousands of commuters into the markets did not start operating until July 2020 after the first lockdown period resulting in fewer customers and lower sales for traders. The legacy of Apartheid spatial planning in South Africa means most traders live far away from the city-centre and depend on public transport to sell their goods in Warwick Junction. The lack of availability and cost of taxi buses was a disincentive for traders to come to Warwick Junction even as lockdown restrictions eased. In Nakuru, informal traders pushed to return to the Wakulima Market as relocation to less accessible parts of the cities led to a fall in earnings. This was due to a combination of factors including a drop in foot traffic and the temporary market not being conducive as it lacked basic amenities such as storage facilities and adequate space to display goods.

Public Health Measures in the Markets

In Nakuru, as traders moved back into the Wakulima Market, new public health measures were introduced. Eight of the 35 women traders surveyed confirmed that the County government had provided water storage tanks, set up handwashing stations, and offered water and soap along with occasional face masks and hand sanitizers. In Durban, this support was not provided by the municipality, so Asiye eTafuleni, in collaboration with WIEGO and public health experts, developed health and safety guidelines for street vendors and market traders, handwashing stations were installed through the Geza



*Asiye eTafuleni has worked with traders to set up the “Geza Isandla” (Wash Your Hands) campaign, which includes the provision of these mobile hand washing stations.
Photo credit: Misiwe Maphumulo*

Isandla (Wash Your Hands) campaign, and hand sanitizer was provided. However, aside from the support of Asiye eTafuleni, street vendors reported little other support in relation to PPE, meaning that many had to bear the cost of keeping healthy at work themselves (WIEGO 2021b). Similarly, in Accra, informal traders were responsible for buying their own PPE and face masks had to be worn in markets.

Public awareness of physical distancing measures and fear of contracting COVID-19 affected sales in markets. All respondents commented that there were fewer customers as many were weary of entering markets. Some were forced to adapt the products and services they sold due to public health awareness. A street vendor in Nakuru noted,

“Customers stopped buying roasted maize because of fear of infection. I had no option but to change my business to something else that would give me money.”

Though only in Nakuru were children explicitly banned from markets, traders in other cities spoke of stigmatization and harassment when they did bring children to the market due to the perceived public health risk. A kayayo in Accra explained,

“Sometimes the police restrict me from entering certain places of the market. They normally ask me to take the children home.”

School and Creche Closures

In Ghana and Kenya, the government closed schools and creches from March to December 2020. In conjunction with the ban from bringing children into markets in Nakuru, women informal workers were left with few or no child care options while they

worked. In South Africa, creches and schools were closed during the first lockdown from mid-March to early July 2020. As infection rates increased again in December 2020, school holidays were extended to 15 February 2021. During this time no directive was given to creches and they were able to remain open. However, national survey data shows that attendance rates in child care centres were lower while schools were closed and more than doubled once schools reopened in February (Wills and Kika-Mistry 2021). These levels were still low at 19 per cent attendance among the national survey respondents as compared to 39 per cent in February 2020 prior to the pandemic.

Relief Measures

During the initial lockdowns in March 2020, some governments responded by extending emergency cash transfers and food rations to informal workers in urban areas to cope with the sudden loss in employment and earnings. In the case of Ghana and Kenya, few cash or in-kind transfers were expanded or introduced to specifically reach informal workers who had lost their earnings. In Ghana, a relief grant for small businesses was created under the Coronavirus Alleviation Programme, but it required formalization and few market traders and street vendors who applied for the grant received any support (WIEGO 2021a). In Nakuru, more than three-quarters of the respondents felt that the government did not provide adequate assistance to informal workers. They stated that the government should have provided financial support and food assistance to women with children during the pandemic. A contributing factor in the government's limited response was the lack of regulatory frameworks and policies for the extension of social protection to workers in the informal sector in Kenya (Kamau and Mitullah 2021).

The more extensive social assistance system and larger government revenue base in South Africa allowed for a rapid scale up of existing grants. As part of the relief package announced on April 21, the Child Support Grant was increased by R300 (USD \$16) per child in May 2020, from R420 – R720 (USD \$23 – \$40), and then by R500 (USD \$27) per caregiver for five months. This grant was provided to a child's primary caregiver regardless of kinship and gender. For instance, grandmothers with primary care responsibilities could receive the grant. All other grants, of which the disability and old age pension were the most prevalent, were topped up by R250 (USD \$14) for six months. A new grant, the Special COVID-19 Physical Relief of Distress Grant of R350 (USD \$19) per month for six months was instituted in recognition of informal workers not covered by the existing grants. However, as South Africans, controversially, may not receive more than one grant at any one time, the Durban survey respondents could not benefit from the Relief of Distress Grant as they were recipients of the Child Support Grant.

4. Livelihood, Care, and Nutrition Impacts for Women Informal Traders and Their Children

Income Losses

The public health measures and economic downturn brought on by the pandemic led to an immediate loss of income and a slow recovery for informal traders. The first phase of the WIEGO Global Survey in Accra and Durban shows that, by July 2020, informal

traders were earning far below their pre-lockdown earnings. In Accra, market traders and street vendors were earning about a third of their February earnings (WIEGO 2021a). Kayayei's earnings were so low to begin with at 35 GHC (USD\$ 6) per day that even a slight reduction made it difficult for them to meet basic needs. Street vendors in Durban reported earning 48 per cent of pre-lockdown incomes, with 53 per cent of market traders reporting zero earnings (WIEGO 2021b). In Nakuru, more than two-thirds of the women informal traders surveyed reported a fall of between 100 – 700Ksh (USD\$1 – 6) per day.

The sustained loss of income for all informal traders was made worse for women who had increased childcare responsibilities. This affected their earnings in several ways. More unpaid care work responsibilities as creches and schools were closed led to less time for paid work.

"I report to work late because I have to wait for my children to wake up and ensure that I prepare their lunch before I leave."

- Market trader, Nakuru

Women informal traders were also working shorter hours when they brought their children to the market as they were concerned for their children's wellbeing and may have come later or returned home earlier, missing out on peak trading hours.

"I have changed the location of my business, taking care of the child has reduced my ability to work. I don't trade on a regular basis like before."

- Street vendor, Durban

Almost all of the 30 respondents in Accra noted that their child care responsibilities were reducing their ability to work, affected their working hours or both. Those who brought their children with them to the markets noted that they were frequently distracted.

"You are on them [children] almost every minute providing care – to the extent that if a customer is coming to buy from you and does not exercise restraint, he/she might say you don't have time to serve him due to the distraction from the child."

- Street vendor, Accra

These concerns were raised by women informal traders in past studies (Alfers 2016, Moussié and Alfers 2018). They were felt more acutely in the context of lower earnings due to the economic slowdown.

Inadequate Care

The survey with women informal traders was conducted in Accra and Nakuru while creches and schools were still closed and while children were banned from markets in Nakuru. In Accra almost half (14 of the 30) of the women informal traders surveyed brought their children with them to the market as they had no alternative care arrangement. Six mentioned they used child care centres near their homes which were operating clandestinely. The combination of these public health measures placed women's child care options in direct opposition to their paid work. As women informal

traders needed to earn some income to survive, this was not a choice they could make, and many were forced to act outside of the law.

“My major challenge is the inability to give the best of care to the child. I wished I could stay at home to care for him to such a time that I can leave him in some other’s care but I cannot because of the need to make income. At this time with this pandemic, the best way was to stay at home to care for him to prevent the virus, but I cannot and have to bring him along to the market.”

– Street vendor, Accra



Women informal workers in particular have seen their household responsibilities increase more than their male counterparts. Photo credit: Gerald Botha

Though creches reopened in July 2020 across South Africa, there were other obstacles. Many of the creches that informal traders relied on, such as unregistered child care centres in informal settlements and townships, remained closed after the lockdown. These centres struggled to cover their overheads during the lockdown and had insufficient funds to conform to the new health and safety requirements for reopening amidst the pandemic (Wills, Kotze and Kika-Mistry 2020). As many were unregistered, they could not benefit from the public subsidies available to registered child care providers. Many of these unregistered child care services were run by women who were themselves informal workers earning low incomes and wages without adequate labour and social protections. Some child care providers were self-employed and providing child care services from their own homes. Others may have been working in a centre-based facility as an employee or owner.

The challenges in the child care sector in South Africa point to the fragility of low-cost child care services that were financed through user fees paid by the working poor –



Due to the COVID-19 pandemic, informal traders were relocated to temporary markets in Nakuru, Kenya. Photo credit: Cynthia Owuor

most of whom were informal workers. With more parents and caregivers no longer able to afford the child care fees due to job losses and lower earnings and others fearing infections among children, the sector was struggling (BRIDGE et al. 2020). In an attempt to address the informality that characterizes employment in the child care sector, the government intervened by easing registration processes so more unregistered child care services could benefit from public subsidies and instituted the Employment Stimulus Relief Fund for the Early Childhood Development Services at the start of 2021 to support workers in the child care sector (Wills and Kika-Mistry 2021).²

As schools were closed at the time of the Accra and Nakuru surveys, a few women informal traders mentioned that they left young children in the care of the children's older siblings. Another strategy mentioned among respondents in Durban and Nakuru was to send children to live with family members in rural areas. This is a common practice in South Africa stemming from Apartheid spatial planning that separated families between rural and urban areas (Budlender and Lund 2011). In Nakuru and other Kenyan cities more families sent children to rural areas once lockdowns and school closures were announced. Women informal traders' lower incomes was one factor motivating them to send their children out of the city. A street vendor in Accra explains how she used to sell fruits outside schools, but, once schools closed, she had to switch to selling in the market and her earnings suffered. She explained,

"I could not afford to take care of my first child, so I sent him to his father's family."

² See the [Vangasali registration campaign](#) started in May 2020 and the [ECD Employment Stimulus Relief Fund](#) announced in 2021.

Even as children moved to rural areas, women informal workers were expected to contribute to their living expenses.

"The child stays with my mother at the moment. The only challenge is sending money home during this pandemic [as] the business is not good."

- Market trader, Durban

The fear of infection was a deterrent for some women informal traders to leave their young children at a child care centre or in the care of a neighbour or another family member. For this reason, some felt it was safer for their child to be in their care, even if at the market. The diverse and inadequate child care arrangements suggest the different trade-offs women informal traders consider between a set of poor options. Their homes in low-income neighbourhoods and informal settlements may not present a "safer" option to the markets due to overcrowding and poor water and sanitation facilities.

Across all three cities, women informal traders raised the poor sanitary conditions and lack of physical distancing measures as a key challenge when bringing their children to the markets.

"The market is not a safe place for the children; some of the customers don't like wearing masks and we don't have enough water."

- Market trader, Durban

"At the market I always fight with the women over their careless attitude towards the protective measures so I have even warned them not to handle my child or even give him some of their food when eating. When I tell them that they get angry, but I don't care, I have to protect my child."

- Market trader, Accra

While it was hard to guarantee that customers and other traders respected physical distancing and hygiene measures, women informal workers acknowledged how difficult it was for their young children to keep their masks on all day. Accessing public transport to come to the markets was also a health concern for women informal traders who traveled with their young children. Buses were crowded and not everyone wore a mask.

Health and Nutrition

The loss of income coupled with higher risk of infections contributed to high levels of stress among women informal traders. The inability to meet children's nutritional needs and guarantee their health care was raised by several respondents. This reflects the WIEGO Global Survey findings in Accra and Durban highlighting a significant rise in food insecurity due to a fall in earnings and insufficient or no access to cash transfers or food relief packages. In Durban, 81 per cent of respondents reported incidents of hunger experienced by adult members of their households, and 90 per cent reported incidents of hunger experienced by children in their households (WIEGO 2021b).

In Accra, 96 per cent of kayayei reported incidents of hunger by adults in their households (WIEGO 2021a). Not surprisingly then, in the smaller child care survey, the three respondents out of 30 who mentioned a reduction in breastfeeding during the

pandemic were kayayei. As one kayayo noted, she stopped breastfeeding altogether as *“I myself was very hungry at those times.”*

The benefits to mothers and infants of exclusive breastfeeding for the first six months and continuous breastfeeding for up to two years is widely promoted by the World Health Organization. Yet, as previous studies show, women informal traders face several challenges in breastfeeding in public markets while working (Horwood et al. 2020, Horwood et al. 2019). Women informal traders in Durban were concerned markets were unsafe and unhygienic to breastfeed, while breastfeeding itself was at times seen as socially unacceptable and off-putting by male traders, customers and commuters. However, the flexibility offered by informal trading allowed some women to breastfeed for longer even if they returned to work shortly after childbirth (Horwood et al. 2020). Across the three cities, most women who said they were breastfeeding noted no change in their breastfeeding practices since the start of the pandemic.

The inadequacy of relief measures is worth noting here. In South Africa, the top-up of the Child Support Grant over a six-month period was a small reliable supplement to reduced income. However, the child grant that was intended to supplement the needs of one child was used towards securing the basic needs of entire households. When asked what support women informal traders caring for young children required, four key demands emerged for food relief, cash transfers, quality and affordable child care services in markets and financial assistance to restart their businesses. These demands were consistent across the three cities and between the various groups of informal traders.

5. Conclusion

The pandemic underscored what informal traders have always known; markets and city streets are regulated and organized workplaces. Too often informal traders are thought to be operating outside of the law by selling in overcrowded markets or city streets, yet the vast majority pay licenses, fees and tolls to operate in these spaces (Horn 2018). In return, municipal authorities are expected to make these trading spaces hygienic, safe and conducive workplaces for informal traders and their customers. The lack of adequate access to clean water and sanitary facilities was underscored when municipalities tried to encourage hand washing and physical distancing. The introduction of physical distancing measures to curtail the spread of the virus in city markets and streets required investment and continued engagement with informal traders.

In addition, the new visibility afforded to food vendors as essential workers can be an opportunity for street vendors and market traders to put forward their demands for improved working conditions.

This three-city survey suggests that investments in safer child care spaces and services in and around markets are just as critical as water and sanitation investments in public trading spaces. The reality in many African city markets and streets is that mothers or primary caregivers bring their children with them while they trade. Ignoring this fact by closing creches and banning children from markets, as in the case of Nakuru, forces women informal traders to make impossible choices and break the law. Without more generous cash transfers or food relief packages, women informal traders cannot stay at home. The risk of infection posed by COVID-19 does not outweigh the necessity for women informal traders to earn an income, feed their families and care for their children.

Quality and accessible child care services allow women informal traders to work and recover their lost earnings and provide children a more stimulating, caring and protective environment. It can also create new decent work opportunities for women through an expanded public child care service (ILO 2018a, Devercelli and Beaton-Day 2020). In the midst of a global pandemic, child care services for women informal traders can augment the effectiveness of public health measures taken in markets to curtail the spread of the virus, as well as offering new spaces closer to workers to encourage birth registration and vaccinations for young children with support from mobile clinic visits. Informal trade in Africa is dominated by women and addressing their care needs can stimulate economic recovery and diminish the lifelong repercussions of inadequate care and nutrition among young children brought on by the pandemic. A scaling up of public investment in child care services and regulation is essential for quality and infrastructure standards adapted to diverse settings including informal settlements, low-income neighbourhoods and informal workers' workplaces. In a COVID-19 context, this will also entail supporting child care service providers to implement public health measures so that more parents and caregivers are at ease with sending their children to a child care centre.

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Collaborating Organizations



About WIEGO

Women in Informal Employment: Globalizing and Organizing (WIEGO) is a global network focused on empowering the working poor, especially women, in the informal economy to secure their livelihoods. We believe all workers should have equal economic opportunities, rights, protection and voice. WIEGO promotes change by improving statistics and expanding knowledge on the informal economy, building networks and capacity among informal worker organizations and, jointly with the networks and organizations, influencing local, national and international policies. Visit www.wiego.org