Reflections on social security adversities for Zimbabwean informal sector workers and COVID 19 impacts

Abstract

The dominance of the informal sector in Zimbabwe has guaranteed many citizens livelihoods given years of socio-economic turbulence. The International Monetary Fund (IMF) noted that Zimbabwe’s informal sector comes only after that of Bolivia. It is disconcerting however that Zimbabwe’s social security schemes are not tailor made to target informal sector workers such that they fall through the cracks when targeted social security schemes are implemented especially like in the context of the novel coronavirus (COVID-19) pandemic. Accordingly, the author explored domains of livelihoods and social security for Zimbabwean informal sector workers in the wake of the COVID-19 pandemic. The researcher reviewed secondary sources of data including but not limited to journal articles and online publications. The review explored strategies for livelihoods security, gaps and weaknesses. The strategies were the increased tapping by informal workers onto the informal sector market which offers bargains and cheaper services and products unlike mainstream businesses. The gaps observed by the study were that there is lack of robust mechanisms for informal sector workers safety nets even in context of COVID-19. The weaknesses were that when informal sector workers become indigent due to say COVID illness or COVID-19 induced financial crises there are lack of government arranged social security schemes as government does not have in place social security for informal workers. At the end of the discussion, pathways are proposed for robust mechanisms for better informal workers targeting in the context of crises. These include designing of tailor made social security schemes to cushion the majority informal sector workers from being indigent due to lack of health and income sources in crises.

Key words
COVID-19, informal workers, social assistance, social security, Zimbabwe

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Introduction

The aim of this article was to explore the impact of respiratory corona virus disease (COVID-19) virus to the livelihoods of informal sector workers in Zimbabwe. The UN Sustainable Development Goal of ending poverty by 2030 stands to be impeded because of increases in the relative and absolute size of the number of poor globally, emanating from the potential impact of COVID-19 (Sumner, Hoy, & Ortiz-Juarez, 2020). Besides climate change, the COVID virus is the other single most significant global challenge currently. In the Zimbabwean context the combination of pervasive poverty and the COVID virus puts informal workers survivalist livelihoods at risk. Like any other nation, Zimbabwe has not been immune to the global trends, where countries are battling to robustly remain operational against a backdrop of serious challenges posed by this pandemic, the informal sector included. Zimbabwe’s social security schemes are not tailor made to target informal sector workers such that they fall in the cracks when targeted social security schemes are implemented especially like in the context of the Novel Corona virus.

Background

According to Mhlanga (2020) an estimated 30% of Zimbabwe formal workers having been left jobless during the course of 2020 as companies reeled from the effects of the global COVID -19 pandemic and deteriorating economic environment. In 2020 Zimbabwe battled a severe economic lapse punctuated by inflation eroding earnings, a cash crisis, forex shortages and dampened investor confidence by the time the COVID 19 pandemic hit (Mhlanga 2020). In response to these intractable challenges which also adversely impacted informal workers Government of Zimbabwe (GoZ) developed a Stimulus Package for COVID-19 aimed at: (i) providing liquidity support to agriculture, mining, tourism, SMEs, and arts; (ii) expanding social safety nets and food grants; (iii) setting up a health sector support fund; and (iv) scaling up investments in social and economic infrastructure in Cyclone Idai affected communities (International Monetary Fund (IMF) 2021).

Methodology

Secondary sources of data, including review of policy and research documents were used for this article. The majority of data on socioeconomic status, population health, policies/plans, and the dynamics of informal sector came from secondary sources, including the World Bank, United Nations Development Programme, published peer-reviewed and grey literature, and a detailed review of available social security policies and plans and other government documentation. Search words included informal sector, social security. Furthermore non-governmental organisational (NGO) documents/evaluation reports and academic publications online newspaper articles retrieved from various journals and internet sources were used.

Literature Review

The following section explores dominant narratives regarding Zimbabwe’s informal sector. The high informality levels aggravate vulnerabilities and risks of rapid spread and impact of the COVID-19. The informal sector is viewed as a stopgap measure where people subsist while waiting for jobs in the formal sector (Kinyanjui, 2020). On this basis, the sector is neglected by government policies at the local level and by development financiers at the global level.

Within the context of a pandemic, the “deservingness” issue of who should receive government income or some other kind of support, is highly questionable (Barrantes, 2020). Many segments of society beyond those that poverty-targeted programmes consider “the poor” or “ultra-poor” are being pulled into income insecurity and vulnerability by losing their jobs as their employers close down. Rights-based, inclusive and universal social protection is the best way forward, since pandemics do not choose who falls sick depending on an abstract construct of deservingness (Barrantes, 2020). It is laudable that Zimbabwe’s Constitution recognizes and upholds the need to provide social protection to its citizens as evidenced in Section 30, which stipulates that...

...the state must take all practical measures, within the limits of the resources available to it, to provide social security and social care to those who are in need” (World Bank, 2016).

Furthermore, Zimbabwe has specific national Acts forming the basis for social protection provision (World Bank, 2016). It is important to note that since 2004 the Zimbabwean economy underwent significant structural transformation inevitably propelling informal sector growth with an increased number of the active labour force absorbed in the informal sector. Concerns and questions from several fronts have been raised regarding the economy’s informalisation. Interest by policy makers towards informal sector formalisation encompass the revenue authorities confronted by shrinking formal sector tax base exploring ways of increased informal sector contribution to tax
Developing and implementing social protection policies and strategies in informal sector is a challenge for many developing countries. The Zimbabwean informal economy, which contributes 84% of the country's total workforce in Zimbabwe (UNDP, 2020), is a potential hotspot for the spread of COVID-19. This article, which is based on secondary literature, seeks to examine the nature, coverage and expenditure for vulnerable citizens like informal workers during the COVID 19 pandemic in Zimbabwe. Theoretically, it investigates domains of social security priorities and discusses how the workers during the COVID 19 pandemic in Zimbabwe, with a view to c...
legislation, some forms of short-term contract jobs and contingent work, temporary agency work, parttime work (especially with very few hours per week), and dependent employment misclassified as self-employment (such as for some workers in the gig economy) (UNDP 2021). A number of risks characterise the informal sector ranging from licensing, erratic markets and congestion within what others have called red ocean markets (Murisa 2021). The 2019 Labour Force and Child Labour Survey revealed that employment in the informal economy grew from 859,060 in 2014 to 975,880 in 2019 representing a 14 percent increase (Zimbabwe Congress of Trade Unions(ZCTU), 2020). The informal economy workers, including artisanal mining contribute immensely to the country’s economy, employment, household welfare and filling the social protection gaps created by the deteriorating economy. Jones (2010) terms Zimbabwe’s informal sector the ‘kukiya-kiya’ economy, which is a new logic of economic action in post-2000 Zimbabwe. In local parlance ‘kukiya-kiya’ refers to multiple forms of ‘making do’ (Jones, 2010). According to Chirisa (2009) to those who are willing and able to work, job provision failures has been the incubatory determinant of African cities’ informalisation.

Again Jones (2010, p. 286) further asserts the common refrain that ‘kukiya-kiya’, is a strategy for survival. ‘We kiya-kiya inorder to stay alive’, people say, ‘in order to eat’ and as highlighted by Jones in its presentation it is as an adjunct to ‘bare life’, kukiya-kiya appears to be an instinctive response to circumstances”

Chirisa (2009) further opines the informal sector has been the pre-dominant activity in the afriacity-scape and challenges with this sector is that the proceeds from it are never fully accounted for. Thus, as noted by Food and Agricultural Organisation (FAO), COVID-19 motivated lockdowns result in enormous disruptions to informal economy income sources like Informal cross-border trade (ICBT) (Koroma, You, Ogalo, Owino, & Nirmakoh, 2017). In most African countries ICBT constitutes a major form of informal activity. In the Southern African Development Community (SADC), for example, it makes up an estimated 30- 40 percent of total intra-SADC trade, with an estimated value of $17.6 billion (Koroma, You, Ogalo, Owino, & Nirmakoh, 2017). Consequently, unavailability of any other source of income or livelihood support from the government, it could be business as usual in informal economy markets, worsening the vulnerabilities of risk and exposure to COVID-19 (Zimbabwe Congress of Trade Unions(ZCTU), 2020).

Many informal workers live and/or work in crowded public spaces with little or no access to water and sanitation, and have limited access to health care. Whether they are self-employed, wage workers, casual day labourers or dependent contractors, informal workers’ dependence on their daily earnings to survive—risks extreme poverty for them due to government-ordered lockdowns. According to Kaseke (2013), African countries adoption of western social security models traditionally viewed social insurance as the preferred and dominant form of social security however excluded many people from coverage. However, given the high unemployment levels with social insurance extending social protection only to formally employed workers coverage is bound to be low (Kaseke, 2013).

In the same vein, Chitambara asserts that Zimbabwe’s past and present economic policies have failed to comprehensively address structural distortions and bottlenecks, thus entrenching dualism and enclavity. Chitambara argues what accounts for this is because most policy propositions are aimed at the formal economy. Additionally, for Dhembera (2012) as they are no employers to meet part of the contributions towards the scheme, necessity of social insurance schemes coverage extension to the self-employed and informal sector workers requires imaginative ways. Similarly, vigorously pursuing policies that promote economic growth is necessary in order to create more employment opportunities which would translate into increased membership for social insurance schemes (Dhembera, 2012).

Context

The following section of the article describes Zimbabwe’s socio-economic trajectory. The COVID-19 pandemic has hit Africa at the time when the region is experiencing modest economic growth. The African Development Bank’s 2020 African Economic Outlook (AEO) observed that Africa’s economic growth remained stable in 2019 at 3.4 percent and is on course to pick up to 3.9 percent in 2020 and 4.1 percent in 2021 (African Development Bank, 2020).

On the same note, United Nations Development Programme(UNDP) (2020) asserts the Covid-19 pandemic hit Zimbabwe at a time when economic rebound was targeted by inter alia, getting the economic fundamentals right through Transitional Stabilization Programme(TSP) implementation. The National Development Strategy (NDS) 2021-2025 is now the successor of TPS. The NDS-1 has 14 priorities which include: economic growth and stability; food and nutrition security; governance; moving the economy up the value chain and structural transformation; human capital development; environmental protection, climate...
resilience and natural resource management; housing delivery; digital economy; health and well-being; infrastructure and utilities; image building and international engagement and re-engagement; social protection; youth, sport and culture; and devolution.

However, in his critique, Murisa (2021) observes measures contained in the TSP and NDS1 are similar to the Structural Adjustment Programs (SAPs) of the 1990s. Economic Structural Adjustment Program (ESAP) in the 1990s was also focused on economic growth and creation of efficiencies within the economy through the removal of subsidies, privatisation of State-Owned Enterprises (SOEs), fiscal consolidation, cutting down on government expenditure and attracting foreign investors in the form of International Financial Institutions (IFIs) and Foreign Direct Investments (FDIs). Furthermore, Chitambara (2020) comments the Covid-19 pandemic has exposed serious structural challenges in the Zimbabwean economy and most importantly highlighted the need to make the economy more sustainable, resilient, diverse and innovative. It is projected by World Food Programme (WFP) that 6.8 million people in Zimbabwe will need humanitarian assistance during 2021, reflecting not only the COVID-19 pandemic but also the macro-economic challenges. In late December 2020, the WFP made an urgent appeal for US$204 million to support over 4 million of the most food insecure people over the next six months (International Monetary Fund 2021).

It is disconcerting to note that during and after the economic crisis, Zimbabwe’s financial resources and human capacity eroded and without development partner support, many social protection programs became non-operational (World Bank, 2016). Also, donor agencies including various United Nations bodies, like United Nations Children’s Emergency Fund (UNICEF), United Nations Education and Scientific Council (UNESCO), UN Women, United Nations Development Programme (UNDP), other non-governmental organisations (NGOs), like Save the Children and bilateral organisations, including DFID, DANIDA, USAID and SIDA, have been pivotal role in Zimbabwe’s social protection programmes (2013). Chitambara (2020) cautions that a nation’s capacity to proactively and effectively respond to crises (for example Covid-19) is a function of its social protection and healthcare systems, as well as the state of its institutions and infrastructure.

Notably, as of 2021 Zimbabwe’s intractable challenges have included, climatic and economic shocks driving rising humanitarian needs demanding an urgent response. Zimbabwe endured a devastating drought in 2018/2019, which brought searing heat and caused massive crop failure and in March 2019, the east of the country was struck by Cyclone Idai. As Zimbabwe battles surging cases and deaths from COVID-19 and fears of a new variant, tropical Cyclone Eloise devastated COVID-19 mitigation and containment measures and as of February 2, 2021, there were 33,814 confirmed COVID-19 cases, 26,794 recoveries and 1,254 deaths and 188 percent increase from the 11,749 cases reported in mid-December. (International Monetary Fund 2021, International Rescue Committee 2021). It is also noteworthy that the official unemployment rate stands at 11 percent although the vast majority of the people considered to be employed are engaged in low paying temporary insecure work and petty trade in the informal sector (United Nations Development Programme Zimbabwe Country Programme, 2020). Furthermore, according to the Zimbabwe Humanitarian Response Plan (HRP, 2020) launched on 2 April, 2020, 7 million people (including 3.2 million children) were projected to be in urgent need of humanitarian assistance in 2020 (United Childrens Fund Zimbabwe country office, 2020). The current ongoing 2021 lockdown is hurting the income of many families, whose earnings have already been eroded by hyperinflation. As of November 2020, the food poverty line for one poor person was Z$3,279 (USD 36), according to Zimstat. On the same note Zimbabwe is experiencing hyperinflation, at 363 percent year-on-year in January 2021. Thus, to cushion the loss of purchasing power from hyperinflation and the COVID-19 pandemic, government started paying US$75 to civil servants, US$30 to pensioners to cushion, and awarded a 50 percent salary increment which was followed by a 40 percent increment in October 2020 (International Monetary Fund 2021).

The International Monetary Fund (IMF) has reported that the Covid-19 would make it even harder for the government to balance the policies needed to restore macroeconomic stability with those needed to address urgent social needs. Related to this, Ligomeka (2019) problematizes how most traders operating in flea markets have a higher tax burden compared to formally salaried individuals who are subject to personal income tax, or companies that are subject to corporate income tax. She notes, a small-scale taxpayer paying presumptive tax, whose profit margin is less than 20%, has an effective tax rate of 52% while the maximum tax rate for personal income tax (PIT) and corporate income tax (CIT) is 45% and 25% respectively (Ligomeka, 2019).

Moreover, physical weaknesses is another poverty domain noted by Chirisa (2013) which increases vulnerability among Zimbabweans emanating from poor health and inadequate nutrition. This poverty domain is more dominant in rural areas, which serve
as a haven for operations by a host of NGOs in the fight against poverty. Quite a number of places in the country are also isolated; they lack access to services, information, markets, capital and infrastructure (2013). The 2019 Zimbabwe Vulnerability Assessment Committee (ZimVAC) estimated that 5.5 million people, 38 percent of whom are the rural population were estimated as food insecure whilst urban food insecurity is now affecting 2.2 million people thus provision of food handouts to the poor and vulnerable should remain on the priority list amid the fight against the pandemic (Zimbabwe Coalition on Debt and Development, 2020).

Furthermore globally, governments have put in place COVID-19 response mechanisms and in the case of Zimbabwe, COVID-19 response measures by the 23rd of March 2020 included:

i. Boarder control – banning of all non-essential travel (excluding returning residents) and traffic, both inbound and outbound, except for movement of cargo;

ii. Ban on entertainment and recreational activities such as nightclubs, bars, beerhalls, movie houses, swimming pools, gymnasium and sporting activities;

iii. Public gathering – which should not exceed 50 people in the following: religious fellowships, weddings, conferences, workshops and funerals; and,

iv. Restricted hospital visits which have been reduced to one visit per day involving relative per patient (Zimbabwe Congress of Trade Unions(ZCTU), 2020).

The first imported COVID-19 case was reported on 21 March 2020 with local transmission starting on 24 March. On 7 May 2020, a COVID-19 Addendum to the Zimbabwe Humanitarian Response Plan (HRP) was published requiring US$84.9 million to respond to the immediate public health crisis and the secondary impacts of the pandemic on vulnerable people. This is in addition to the $715 million required in the Humanitarian Response Plan (United Nations Office of the Coordination of Humanitarian Affairs(OCHA), 2020). In the 2020–2021 rainfall season, Zimbabwe is expected to receive normal to above normal rainfall with La Niña in the forecast, the country is at risk of flash flooding and outbreaks of diarrhoeal diseases, including cholera. An estimated 7.9 million people, including 4.1 million children, will urgently require humanitarian assistance in the course of 2021, due to food insecurity, health crises, the impacts of COVID-19 and economic deterioration (UNICEF Zimbabwe country office, 2020).

Significantly, no furlough schemes are in existence in Zimbabwe and social safety nets were already fraying and strained to capacity at COVID 19 onset. More than 80 per cent of people in Zimbabwe survive in the informal work sector and a lockdown largely ceased informal trading, leaving millions with no income sources. Second hand clothes selling is one of the many informal sector jobs categories. According to Gukurume and Oestrom (2020) videos circulated on WhatsApp networks warning Zimbabweans that second-hand clothes imported from China were contaminated with the virus. This was made reference to by the Minister of Information, Publicity and Broadcasting Services in her call to enforce a ban on second-hand clothes (Gukurume & Oosterom, 2020).

The Government of Zimbabwe reintroduced lockdown measures of level 4 on January 06, 2021. The initial 30-day period was extended by a further 15 days up to the 15th of February 2021 and the situation will be reviewed during the month of February 2021. The informal sector as well as other sectors, including education, however remained closed. The lockdown was now being extended indefinitely with a review every two weeks. In the following sections, challenges of social security based cushioning informal workers from adverse effects of COVID 19 instigated lockdowns are explored.

Social assistance dynamics and COVID 19 livelihoods insecurity for informal workers

Firstly, social protection is recognised by the 2030 Agenda as a key policy tool in achievement of goals as the eradication of income poverty, gender equality, and reducing income inequality. It is important to note that countries with well-established social protection systems are better able to address the COVID-specific or COVID-intensified needs that have already been generated (Devereux, Lind, Roelen, & Sabates-Wheeler, 2020).Devereux et al further state that mobilising an adequate response by poor countries with low administrative capacity is a struggle and a familiar paradox where countries with the greatest social protection needs have the lowest capacity to address those needs. Again, as suggested by Kaseke (2013), social insurance plays a pivotal role in preventing poverty thus an anti-poverty form of social security, which prevents insured individuals from sliding into poverty in the event of being exposed to a social risk (Kaseke, 2013).

As for Zimbabwean social assistance provisions, for the social protection agenda advancement in 2015 the Government developed a National Social Protection Policy Framework, but it is not yet operationalised. This policy framework recognises...
Zimbabwe’s commitment to poverty eradication in the Constitution; the Sustainable Development Goals; and other international declarations that identify social protection as a basic human right (World Bank, 2016). The country’s primary social protection programmes are the Basic Education Assistance Module (BEAM) and the Harmonised Social Cash Transfer Programme (HSCT). BEAM only has a coverage of about 530 000 out of the about 1 300 000 million children in need, while the HSCT programme, which is implemented by government and supported by the United Nations, only covers about 55 509 very poor and labour-constrained households in 20 districts (Chitambara, 2020).

It must be noted that a lack of institutionalised sick leave means that for many informal employees, there is an explicit trade-off between their health and their financial survival. Moreover, Chitambara argues that in post-independence Zimbabwe, over the years social assistance has undergone massive changes. In the 1980s social assistance was based on a system of social safety nets under the aegis of the Department of Social Services within the Ministry of Labour and Social Services. As Chitambara observes following Economic Structural Adjustment Programme (ESAP) adoption in 1991 the concept was expanded with Social Dimension of Adjustment (SDA) programme establishment designed to mitigate the impact of adjustment on vulnerable groups. Consequently this led to a Social Development Fund (SDF) creation under SDA programme (Chitambara, 2010). Consequently, unconditional cash transfers remain the most straightforward and practical way to distribute relief that reaches the informal economy and targeted transfers may have a greater impact on poverty reduction (International Centre for Tax and Development, 2020).

Through a 30 March 2020 press statement, the Minister of Finance and Economic Development, Mr Ncube indicated ZWLS200 million availing monthly, targeting one million vulnerable households under the harmonised cash transfer programme. Effectively, this was to translate to ZWLS200 per household. Mr Ncube advised usage of a “sophisticated algorithm” for beneficiaries of the ZWS180 per household Covid-19 “pocket money” selection (Kunambura, 2020).

The government’s expectation was for the money to benefit at least one million of the most impoverished Zimbabwean families as part of the ZWS600 million the government aimed at mitigating the effects of the Covid-19 pandemic (Kunambura, 2020).

According to Zimbabwe Coalition on Debt and Development (ZIMCDDD) (2020), with ZWLS200 one household could only buy either of the following products:

- 6 loaves of bread only per month
- 2kg of rice only per month
- 4kgs of sugar only per month
- 1 pocket of potatoes only per month
- 1kg of meat only per month

Furthermore, it was reported that Social Welfare Minister Mr Paul Mavima had stated government’s identification of 90 000 vulnerable citizens who would receive an increased amount of $300 to cushion them against the effects of the Covid-19 induced lockdown period (Chibamu, 2020). The newspaper report stated that that Social Welfare Minister stated that ZWLS200 million was not enough to sustain vulnerable citizens thus the ZS200 (US$8) originally planned to pay out to each beneficiary had been shrunvel by inflation, and the amount to be paid had now been upped to ZS300 (US$12) (Chibamu, 2020).

**Contested status of informal workers**

Informal workers sometimes bear the brunt of Zimbabwean authorities keen to ensure orderliness in town planning. In a 19 April 2020 press statement dated Zimbabwe Chamber of Informal Economy Associations (ZCIEA) (2020) lamented the local authorities directed vendors’ stalls destruction in areas as city of Kwekwe, Harare residential areas as Mbare, Machipisa and other areas.

> Whenever there is an outbreak, either cholera or typhoid informal economy workers and traders are blamed as the causes of such outbreaks, now we have COVID-19 they are victims again, their stalls are being destroyed. Why is the public health war on COVID-19 pandemic becoming a war on the livelihoods of the vulnerable urban poor dependent on informal trading for their livelihoods?

As noted in Mackworth-Young, et al., (2020)’s study, social distancing policies are disconnected to communities’ ability to follow such measures, without access at home to water, long-term food supplies, or a daily income. Because of lack of formal informal sector recognition it falls ultra vires the existing institutionalised organisations, the NSSA included (Chirisa, 2013). This means that bulk of the population does not have a formal channel through which to make contributions or social security subscriptions towards mitigating risks after retirement, leaving them vulnerable in old age and their families at risk in the event of their death (Chirisa, 2013).Finally, Chitambara (2020) notes according to the 2019 Labour Force and Child Labour Survey (LFCLS), about 249 000 persons, which is approximately 2% of the population, were
receiving a monthly pension or any social security fund or both.

Again, in the LFCLS as for medical insurance, about 984,000 persons, representing about 7% of the population, indicated they were members of a medical aid scheme (Chitambara, 2020). Chitambara further opines, poor households spending of their average about 40% of their incomes on health care-related expenses implies access to health care will become increasingly unaffordable in the wake of the Covid-19 pandemic, thus households falling deeper into extreme poverty.

Conclusions

The article has explored different domains of risks to informal sector viability as a mainstay of the majority of Zimbabweans given lockdowns necessitated to curb COVID-19 pandemic spread. Moreover, the article has shown that the role of social welfare in the fight against COVID-19 cannot be overemphasised. Social protection systems should be barrier-free and inclusive and structured in a manner which ensures that everyone has equal opportunities to access social protection schemes (Barrantes, 2020). Social policy should be reframed to address social exclusion, which by its nature is a complex reality that, attacking social exclusion becomes a multi-stakeholder venture (Chirisa, 2013). ZIMCODD laments the absence of the Ministry of Public Service, Labour and Social Welfare in the COVID-19 Inter-Ministerial Taskforce is being treated as an oversight on the part of government.

Additionally, Ngunu and Lombard (2012) assert that in a scenario where political and socio-economic contexts are not favourable for social and economic development, the government protection of women in the informal sector should be by developing, implementing and monitoring legislated standards and regulations for the informal economy. Gukurume and Oosterom (2020) commented that the abrupt announcement of enforcing the ban on second-clothes produced outrage, as thousands would instantly lose their income. ZimRights, a human rights organisation umbrella body, regarded the demolitions as an attack on poor people’s livelihoods and economic rights, and vendor’s associations have argued they will only compound the crisis and exacerbate poverty for informal vendors (Gukurume & Oosterom, 2020). Undeniably, the provision of social security has become a major area of interest in the global south social work due to high level of poverty as a way to address social injustice and advance human wellbeing (Nhapi & Mathende, 2017). Social workers should buttress advocacy towards informal workers inclusion in social security schemes like health insurance to mitigate impacts of future crises similar to COVID-19. Galvanising innovative informal sector social security is one pathway Zimbabwe can achieve the Sustainable Development Goal mantra of Leaving No One Behind.

Implications of the findings for development

Mhlanga (2020) reports that according to Employers’ Confederation of Zimbabwe president Israel Murefu as of December 2020, 30% of the country’s formal sector lost their jobs as COVID-19 ravaged the Zimbabwe’s economy. Furthermore Zimbabwe’s National Employment Council in 2020 estimated that 1.2 million workers were thrown onto the streets over a period of 18 months as a result of the Covid-19 pandemic and other economic ills (Mhlanga 2020). Henceforth, Zimbabwe suffered a steep 30% job loss and has been shedding more jobs than it creates every year. Government announced plans for rolling out a COVID-19 vaccination program with US$100 million set aside for vaccines, expected to cover about 60 percent of the population. This expenditure was not included in the 2021 National Budget. As of February 3 2021, the COVAX facility regional supply forecasts 1,152,000 vaccines for Zimbabwe. It is vital that Zimbabwe that going forward in the spirit of the National Development Strategy 2021-2025 designs tailor made social security interventions for the informal sector. This should be high on the agenda given how in the 2021 national budget government proposed taxing the informal sector workers a special tax for the premises they operate from. Given how Zimbabwe in principle values access to social security for its citizens imaginative approaches should be embedded towards targeting the majority informal sector workers. For instance a universal health insurance programme targeting the informal sector workers can be implemented so that they have access to health care and be cushioned from effects of communicable and non-communicable diseases. Social development includes ensuring household food security, equitable access to education and health, affordable housing and social safety nets (Murisa 2021). As observed by Murisa a framework and quantifiable milestones is needed to guide the different ministries that have to contribute towards broader social development. Some of the cost cutting measures have served to undermine capacity to meet social development goals and some actually erode livelihood capacities. Thus, with livelihood erosion, the informal sector needs to be incentivised through less tax and embedding social security mechanisms amongst informal sector workers. This can be through for example tapping into their mutual
aid schemes which serve as a fall back in times of emergencies like funerals.

**Conclusion**

In conclusion informality is an integral pillar of livelihoods security in Zimbabwe and Africa. It is important that informal sector workers be prioritised in planning and designing responses to crises as COVID-19 and other natural climatic shocks. Professionals as social workers, rural and urban planners need to engage in applied action research studies that can elicit a corpus of empirically verifiable knowledge on how best to incorporate the informal sector workers in current domains of implementing Zimbabwe’s development agenda.

**References**


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