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CHAPTER 1: INTRODUCTION

1.1 Introduction

This study examines social protection arrangements that exist for mine workers who are disabled by mine injuries sustained in the South African mines. The study examines the social protection arrangements for these mine workers.

Social protection has gained significant importance in many countries because of the increasing levels of poverty and income insecurity around the world. According to Barrientos & Hulme (2009), the World Bank conceptualises social protection as social risk management because it perceives vulnerability to hazards as a significant constraint on economic and human development, and the efforts to reduce the likelihood of hazards as essential for economic growth and development. Social protection is defined by the World Bank as “interventions that assist poor individuals, households and communities to reduce their vulnerability by managing risks better”, (Oduro, 2010, p.1). The need for social protection is very pertinent for mine workers because the mining industry is fraught with risks that may lead to loss of life, diseases or injuries that sometimes lead to loss of earnings due the mine workers inability to engage in any income generating opportunity.

Lesotho uses both informal strategies and formal programmes aimed at mitigating the effects of income insecurity. Formal social protection arrangements include private pensions, the assistance from government, non-governmental organisations and other charitable groups. In the past, people in Lesotho used to rely on informal social support systems that could sustain their livelihoods in times of poverty. Basotho relied mainly on kinship, the extended family or the community to mitigate subsistence risk and the most common practice they used is borrowing and lending among each other while some people join mutual aid schemes such as burial schemes and rotating savings and credit schemes. However, the situation has changed tremendously because of limited resources and increased rate of migration to South Africa for employment opportunities. The Government of Lesotho has tried to fill this gap through relief programmes. Through identifying the people in need of assistance,
formal support in the form of food aid, farm implements and rehabilitation services are provided to the vulnerable groups. The government also provides assistance to the vulnerable groups through the provision of free primary education for their children.

1.2 Background

The migration of Basotho men to the South African mines is not new as it dates back to the 19th century. According to the Lesotho Bureau of Statistics (2002), contract labour migration to South Africa has been a major contributor to employment of Basotho men for over 100 years. Since this period Lesotho’s economy has been dependant on remittances from the South African mines. Lesotho is the only country in Southern Africa that is entirely landlocked by South Africa. Given this unique geographical feature of being surrounded by a country with a strong economic base, Lesotho economically relies on South Africa for trade, food items and employment.

Historically, Lesotho was a reserve of cheap labour for South African industries especially the mines. The capitalist expansion in the early years of industrialisation was dependant on the creation and maintenance of a supply of cheap labour that was secured by preserving pre-capitalist forms of production and distribution, (Patel, 2005). Basotho who were mainly peasants and subsistence farmers were coerced to seek employment in the mines through the introduction of both hut and poll taxes in the colonies. These migrant workers from Lesotho were employed in the mines to perform jobs that require little skills or no higher education and good paying positions were allocated to white labourers. Patel (2005) shows that workers were forced to maintain their links with the rural subsistence economy through the system of temporary migration and to facilitate this, wages paid to migrant workers were made sufficient to cover their needs.

Employment opportunities in the South African mines also impacted negatively on the traditional livelihood strategies in Lesotho. Labour migration from Lesotho to South Africa affected traditional safety nets as Basotho men had to find work to support other family members and the family structure changed because women had to perform both reproductive and caregivers’ roles because they assumed the status of
household heads during the absence of their husbands. Furthermore, Basotho men had
to abandon activities such as livestock production and agriculture, which were the
backbones of Lesotho’s economy and engage in wage labour in the South African
mines. The South African mining industry provided the majority of Basotho men with
lucrative employment, and the wages they received were higher than those obtainable
locally.

In the late 1980s and 1990s, the migration patterns in Lesotho changed considerably.
There was downsizing of labour in the South African mines as a result of the decrease
in demand for gold. Consequently, many Basotho men lost their jobs in the mines.
Basotho migrant mine workers fell from 95,913 in 1996 to 56,357 in 2004 and to 52,
retrenchment of Basotho mineworkers, mine employment continues to be the
mainstay of Basotho households. Lesotho’s economy continues to depend on migrant
remittances from the mines, which are estimated to account for almost 60 percent of
Lesotho’s gross domestic product. It is estimated that approximately half a million
Basotho currently work in South Africa, and the majority of them work in the mines
(International Organisation for Migration, 2010).

Lesotho’s economy has benefited from the repatriation of migrant workers income
into the economy while Basotho men contributed in building the South African
economy. International Organisation for Migration (2010) also notes that, mine work
contribute greatly to poverty reduction in Lesotho because it is a significant source of
income for families of mine workers and that half of the rural households income is
derived from migrants working in South Africa, mainly in the mining sector.

Although the benefits of labour migration are apparent, international labour migrants
often experience social exclusion, and exploitation. According to Sabates-Wheeler &
Waite (2003), international migrants require specific social protection strategies as
they face particular vulnerabilities which could be spatial when they enter a territory
other than their own, as well as socio-political vulnerabilities given that within the
foreign territory they are not legally protected as nationals or citizens of that state.
The availability of both formal and informal social protection for mine workers is very critical given the high risk of injury and death. In the past, communities in Lesotho had their own informal social support systems to sustain their livelihoods. However, the benefits from these informal networks are not reliable because they depend on economic status of the relatives and their willingness to offer support in times of need. Mine workers therefore, tend to rely on formal social protection arrangements. In view of this, the Governments of Lesotho and South African have a bilateral agreement to facilitate the payment of benefits such as retrenchment benefits and disability compensation to Basotho migrant mine workers in their home country. In 1973, the Republic of South Africa treaty series No.1 of 1973 was established. The treaty addressed issues relating to Lesotho citizens in the Republic of South Africa and the movement of such persons across international borders and the portability of benefits such as deferred pay. Compensation for Basotho mine workers who incur mine related disabilities and illnesses is through two statutes, namely Compensation for Occupational Injuries and Diseases Act (COIDA) and Occupational Diseases in Mines and Works Act of 1993 (ODMWA). In instances where a mine employee is retrenched due to disabling mine injuries, the compensation is provided to such employee by the Rand Mutual Assurance Company (RMA) and distributed by TEBA (The Employment Bureau of Africa).

1.3 Rationale and Problem Statement

Social Protection is a topical issue in the world today because of its contribution to human wellbeing. According to the International Labour Organisation (ILO) social protection is “the provision of benefits to households and individuals through public or collective arrangements to protect against low or declining living standards” (Sabates-Wheeler & Waite 2003, p. 5). The South African mining industry employs 53 000 Basotho men (Foulo, 2009). The Basotho migrate to South Africa for employment in the mines because of limited job opportunities in Lesotho. While the mining industry provides employment opportunities to Basotho men, it is, however, fraught with risks as workers are exposed to occupational diseases and injuries which normally lead to disability. Mining accidents account for about 50.9 percent of all amputations of fingers, arms and hands, about 42.6 percent of all amputation of toes,
feet and legs and for about 35.7 percent of all deafness in Lesotho (Lesotho Bureau of Statistics, 2002). As a result of injuries sustained in the mining operations, some mineworkers become permanently disabled and their ability to engage in mine duties is constrained. The mineworkers who become permanently disabled as a result of work related injuries are forced to retire and return to Lesotho. Those who have retired as a result of mine related injuries are compensated in terms of South Africa’s Compensation for Occupational Injuries and Diseases Act (COIDA).

The benefits provided under COIDA vary with the degree of injuries sustained by an employee and his earnings at the time of accident. The compensation of total or partial disability takes the form of monthly payments for a period not exceeding two years while an employee with permanent disability receives a lifetime monthly pension which expires when the employee dies. Although Basotho mine workers who are injured in the course of employment benefit from the compensation regulated by the COIDA, it would appear that the benefits are not adequate for the needs of the disabled mine workers and their dependants. There is evidence of poverty among retired mine workers with physical disability. This state of affairs therefore, challenges the notion that workers compensation is a sufficient mechanism for protecting injured workers against income insecurity. These injured mine workers could be drawing on other social support systems for their survival. However, there is lack of information concerning social protection arrangements that exist in Lesotho for mine workers who retired on account of disabling mine injuries. There is thus a need to investigate what these other social protection systems are and how they can be strengthened.

Although there has been a previous study by Budiaki (2004) on the compensation of mine workers who contracted tuberculosis, the researcher is not aware of any studies carried out on the social protection needs of Basotho mine workers who retired on account of mine injuries. This study is, therefore necessary to unravel the plight of the retired injured mine workers who have gone back to Lesotho. The findings from the study will contribute to the literature on social protection by providing data on social protection arrangements for injured mine workers in Maseru urban. The findings could be of use to the Government of Lesotho in its efforts to develop a social protection policy.
1.4 The Aim and Objectives of the Study

1.4.1 Aim
The aim of the study was to examine social protection arrangements for mine workers who retired on account of disabling mine injuries.

1.4.2 Objectives
The objectives of the study were as follows:

1. To determine the adequacy of the compensation paid to mine workers who retired on account of work related injuries.
2. To establish the challenges experienced by retired mine workers in accessing their benefits.
3. To investigate the existence of complementary social support systems for retired mine workers with physical disability.
4. To suggest ways of improving social protection of retired mine workers with work related injuries.

1.5 Research Questions

The study sought to answer the following questions:

1. What formal and informal social protection arrangements exist for retired mine workers with work related injuries?
2. How adequate are the benefits paid to retired mine workers in terms of meeting their basic needs?
3. Is the social protection delivery system reliable?
4. What are the challenges faced by the retired mine workers when accessing their benefits?
1.6 Organisation of the Research Report

The report is organised as follows; Chapter two reviews the literature related to the research topic. The chapter describes theories underpinning social protection, the forms of social protection arrangements that exist in Lesotho and other countries and legislations that facilitates portability of compensation from South Africa. Chapter three presents methodology used in the study including methods of data collection and analysis and study area. Chapter four gives analysis of research findings. The last chapter presents summary and conclusions of the main findings. It also makes recommendations based on the issues arising from the study.
CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

In both developed and developing countries, work related injuries can result in permanent disability and thereby impair one’s capacity to earn income. The United Nations (2008) indicates that, there are at least 650 million people with disabilities worldwide of whom approximately 80 per cent live in developing countries. According to International Labour Organisation (2005), out of 270 million occupational accidents that occur annually worldwide 160 million people are victims of work-related illnesses. The work related illnesses or injuries sometimes lead to disability of workers. According to Compensation for Occupational Injuries and Diseases Act (No. 130 of 1993), occupational disability can take a form of temporary and permanent disablement. The Act defines temporary disability as a state where an employee is unable to perform work for at least three days as a result of injury or disease but will recover, and permanent disability as a permanent inability of an employee to perform any work as a result of occupational disease or injury that he/she will never fully recover from such as loss of an arm, eye or limb. Klinck (2003) distinguished between occupational disability and the physical disability by defining occupational disability as a loss of earning resulting from the inability to follow one’s occupation, and physical disability as a total or partial loss of bodily, physical or mental faculties, irrespective of the consequences of such loss.

Any form of disability can negatively affect household earnings as it limits the workers’ capacity to engage fully in income generating activities. Therefore, appropriate social protection mechanisms are needed to respond to the needs of disabled people. Mitra (2005) mentions that, safety nets can reduce poverty by providing resources to the poor with disability and that they can play a preventative role by using cash and food transfer programmes that assist persons with disability in obtaining assistive devices and personal care to expand the capability, thus prevent their impairment from depriving them of their capabilities.
Social protection measures exist in almost all countries of the world. However, many terms are used in different parts of the world and by different international agencies concerned with social protection for the poor that include social security, social insurance, social assistance, safety nets, social funds and social protection (Unni & Rani, 2002). Sabates-Wheeler & Waite (2003) also reveal that, social protection remains a confusing term mainly due to the range of existing definitions and the variety of ways it is interpreted by policy-makers implementing social protection programmes.

2.2 Theories underpinning Social Protection

Poverty is a development challenge hence social protection systems are necessary to curb the impact of poverty and improve the livelihoods of people, particularly disadvantaged groups. The report identifies two development theories that contributed to the development of social protection interventions.

2.2.1 Modernisation Theory

Modernisation theory emerged as a response of Western social science to many challenges faced by the Third World in the decades immediately following the Second World War, (Dube, 1990). The theory was extremely popular during the 1950s and early 1960s. The theory was popularized by Walt Rostow in the 1960s. Rostow used linear stages of growth to show how societies progress into development stage.

The stages of economic growth include traditional society, precondition for take-off, take-off, drive to maturity and age of high mass consumption. Davids, Theron & Maphunye (2009) note that, in a traditional society societies are dominated by an agrarian form of production, and have hierarchical social structures allowing for only a small degree of social mobility and that in this stage it is difficult to expand production because agriculture is still subsistence and the level of technological knowledge is low. The precondition to take off is reached when new technologies and new way of life are introduced as intervention from more advanced societies hence the stage characterised by increase in production and infrastructure development. The
take-off stage is characterised by industrialisation which open ways for investments and savings. Rostow argues that some societies are unable to modernise because of obstacles like capital and savings and he encouraged external support such as aid to help remove the obstacles. In the drive to maturity, modern technology is extended and the economy begins to expand as people become educated and consumption increases. The age of mass consumption occurs when the goal of development is achieved and the economy is able to provide durable goods and services to the people.

According to Patel (2005), the theory encourages minimal state intervention in the provision and financing of social welfare services and it argues that the state can only intervene in times of emergency or when the normal supply structure such as family or market fail to provide. The theory further maintains that the state should only provide temporary and short-term assistance such as social relief or other empowerment programmes to those in need assistance until such person is rehabilitated or have skills that will enable his/her self sufficiency in order to avoid dependency.

Modernisation theory stipulates that individuals are responsible for their own social protection and that this is where contributory employment pension emerge as people contribute to pensions with the hope that they will provide them with financial support in times of difficulties such as loss of jobs or disability. The theory believes that the government would only provide social assistance through means test in times of emergencies and when individuals fails to support such as the death or disability of bread winner. According to Modernisation theory, the government should only provide social assistance through means test in times of emergencies and when individuals fails to support such as after the death or disability of bread winner.

2.2.2 Basic needs Theory

The basic needs theory gained currency in the latter 1970s. It entailed a shift from grand theory to more practical approaches directly at reduction of poverty through social services such as education, health and welfare programmes, (De Beer & Swanepoel, 2002).
The theory entails a more direct targeting of the poor, poverty alleviation and a promotion of grassroots development projects. It also recognises the importance of local and central government institutions and believes that they are the best vehicles to sustainable development. The basic need theory assumes that there would be less poverty if inequality is reduced and development would be achievable.

The theory introduces a concept of universal provision as it believes that access to basic needs is a basic human right and that everyone should benefit from social assistance. The theory purports that meeting basic need is government responsibility and the government is obliged to provide for its citizens.

2.3 Social Protection

Social protection is primarily for reducing vulnerability and managing the risk of low-income individuals, households and communities with regard to basic consumption and social services. However, it remains a confusing term due to the range of definitions that exist, (Devereux & Sabates-Wheeler 2004, p.9). For instance, Barrientos & Hulme (2009), provide different definitions by the World Bank, International Labour Organisation and the United Nation. They argue that some of these agencies define the main role of social protection as lifting the constraints to human and economic development posed by social risk, others locate it in ensuring the satisfaction of basic needs while and others ground it in implementing a rights-based approach to human development. In this study social protection is defined as “the set of all initiatives, both formal and informal, that provide: social assistance to extremely poor individuals and households; social services to groups who need special care or would otherwise be denied access to basic services; social insurance to protect people against the risks and consequences of livelihood shocks; and social equity to protect people against social risks such as discrimination or abuse”, (Devereux & Sabates-Wheeler 2004, p. 9).

Social protection emerged as a critical response to the safety nets discourse of the late 1980s and early 1990s, and was conceptualised as minimalist social assistance in
countries too poor and administratively weak to introduce comprehensive social welfare programmes (Devereux & Sabates-Wheeler, 2004). Barrientos & Hulme (2008) purport that social protection has a strong productivist bent, as it is expected to make a contribution to social and economic development. They indicate that, social protection is conceived differently in advanced and developing countries. In advanced countries, social protection is constituted by a set of integrated institutions and programmes that includes social insurance, social assistance, and employment protection and promotion while in developing countries, it relies to an increasing extent on income transfers combined with access to basic services, productive employment and asset building and it involves multilateral and bilateral international organisations, and international non-governmental organisations. Social protection is therefore based on its two pillars which include basic securities such as income, food, health, education and shelter, and economic securities such as having income generating productive work and benefiting from labour standards in all forms of work, (Unni & Rani, 2002).

According to Barrientos & Lloyd-Sherlock (2002), the distinctive feature of social protection is its emphasis on risks and vulnerability as the main factors behind poverty and deprivation. Social protection includes a wide range of stakeholders and providers at both national and international level. It places great importance upon the labour market as a major source of risk and insurance for poorer households and it gives households an important role in the management of their assets to address their risks and vulnerabilities. Social protection has four distinctive elements, which are promotive, transformative, preventative and protective measures. Sabates-Wheeler & Waite (2003) mentions that promotive measures aim at improving real incomes and capabilities of people through livelihood programmes such as public works programmes and micro-credit for small and medium enterprises. Transformative measure extends social protection to arenas of equity, empowerment and social rights and moves beyond food and cash transfers by addressing issues of exclusion and social justice. Preventative measures involves both state and non-state social insurance provision for vulnerable groups and include informal mechanisms such credit schemes, savings clubs and funeral societies while protective measures include narrowly targeted safety nets such as social assistance and social grants to the vulnerable groups.
Unni & Ranni (2002) perceive social protection as a new term and an umbrella term to depict social security. Therefore, social protection and social security are two interrelated concept and one cannot exist without the other.

2.4 Social Security

Social security is defined by Van Ginneken (2003, p. 11) as “benefits that society provides to individuals and households through public and collective measures to guarantee them a minimum standard of living and to protect them against low or declining living standards arising out of a number of basic risks and needs”. Kaseke (2008) asserts that, in Southern Africa governments have adopted the International Labour Organisation (ILO) concept of social security. The ILO defines social security as “The adoption of public measures to ensure basic income security to all in need of protection, in order to relieve want and prevent destitution by restoring up to a certain level income which is lost or reduced by reason of inability to work or to obtain remunerative work due to the occurrence of various contingencies: sickness, unemployment, old age, employment injury, family responsibilities, maternity, invalidity or death of the breadwinner”, (ILO 2008, p. 3). According to Patel (2005), the ILO definition of social security makes provision for social security by both government and the private sector as a mechanism to ensure the protection of individuals who have been exposed to contingencies beyond their control, and who are unable to mobilise resources to take care of themselves.

Dupper (2008) views social security in relation to the traditional twin pillars of social insurance and social assistance. Tostensen (2008) perceives social insurance as a form of social security financed by contributions, which are based on the insurance principle, and it is achieved by pooling the contributions of a large number of similarly risk-exposed individuals or households into a common fund that compensates the loss experienced by any member. Van Ginneken (2003) on the other hand defines social insurance based on its two types which are statutory social insurance and voluntary social insurance. Statutory social insurance is considered to be compulsory for the whole population or for a particular group of people while
voluntary social insurance schemes are relatively small and characterized by flat-rate contributions which enable them to provide risk-mitigating mechanisms for workers outside the formal economy and they include micro-insurance and community-based schemes.

By contrast, social assistance is defined as “benefits in cash or in kind financed by the state (at central or local level), as a rule provided on the bases of means-testing” (Tostensen 2008, p. 5). According to Sabates-Wheeler & Waite (2003, p. 6) social assistance refers to “all forms of public actions that are designed to transfer resources to groups deemed eligible due to deprivation”. They mention that these public actions normally come in the form of formal programmes which are financed from tax revenues and targeted resource transfers such as disability benefits, single-parent allowances, and social pensions for the elderly and poor, as well as non-state provision that may be in the form of extended family support, religious support, or borrowing from friends.

Social security systems for most developing countries were developed based on western models of social support systems. According to Kaseke (2004), social security was introduced in Europe and North America where it was developed to protect workers in formal employment to enhance productivity at the work place. Since social security was designed to cover the needs of workers in formal employment, this concept of social security was revisited in England after the Beveridge report which recommended that the whole population should enjoy social protection through combination of programmes encompassing social insurance, social assistance, children allowance, comprehensive free health care and rehabilitation services and maintenance of full employment through public works (Kaseke, 2004). It was through this report that Britain adopted the Beveridgean model for use in its African colonies, and the model laid a foundation for most African countries social security system.

However, Tostensen (2008) argues that social security systems modelled on European experiences only cater for people in the modern sector of the economy those in organised public and private employment. Van Ginneken (2003) criticises ILO’s definition of social security for being too narrow for the problems faced by
developing countries. According to Unni & Rani (2002), the approach followed in the developed world may not be suitable or effective in developing countries given the rampant poverty among spatially dispersed rural populations which makes it difficult to administer social security schemes. Also, in terms of social insurance, developing countries are unable to provide social insurance coverage in similar ways to industrialised countries, especially given the effects of globalisation and the growth in the informal sectors and a typical work (Taylor, 2001).

Takala (2005) indicates that, throughout the world there is growing acceptance that accidents and ill-health at work impact not only on the lives of individual workers, their families and their potential for future work, but also the productivity and profitability of their enterprises and ultimately the welfare of the society in which they live. Justino (2003) argues that, workers should be beneficiaries of social security policies because they are likely to face a stoppage or substantial reduction of earnings for reasons such as sickness, pregnancy, invalidity, or old age. According to ILO (2000), social security schemes for employees have become an alternative for replacement of income as they provide income security and reduce or eliminate the financial pressure on workers to carry on working when sick. Van Ginneken (2003) advises that income security should be organised as far as possible on the basis of compulsory social insurance, and that the needs not covered by compulsory social insurance must be met by social assistance.

2.5 Informal Social Security Systems

According to Oduro (2010), informal social protection encompasses the arrangements and actions taken by an individual or groups of individuals that are not guided by formal legal regulations but are not necessarily contravening these laws and regulations. They range from support from the family drawing down on one’s financial assets and the disposal of physical assets to borrowing from friends and relatives, buying on credit and begging. Tostensen (2008) mentions that, traditionally, the collective solidarity of the extended family, clan and ethnic group was the mainstay of income and social security in African populations, and that these collective community-based social security arrangements are based on systems of
mutual dependence or reciprocity. According to Kaseke (1997), the extended family has traditionally been regarded as a social security institution providing support to its members in the event of exposure to contingencies such as sickness, invalidity, old age, death and drought. Kaseke (1997, p. 42) observes that “the collective solidarity through mutual assistance within the family, Clan and the tribe as well as the care by the extended family for one another in times of crisis or old age, constituted the measures of traditional social security systems”.

According to Sabates-Wheeler & Waite (2003), migration as an informal coping strategy can also be conceptualized as a means of reducing before they happen and once they have occurred. For instance, in Lesotho migration has become a social protection strategy because since the 1970s and 80s, male migrants were predominantly concerned with spending their earnings on long-term investments that could support their households on retirement while women in migrant households were also expected to undertake other economic activity, which could finance day to day living costs. In recent years, formal social protection strategy for Basotho migrant workers who retired because of disabling injuries comes in the form of monthly compensation, medicinal care and assistive devices in the form of wheel chairs and crutches.

Social security provision in developing countries has evolved by default rather than by design as developing countries still find themselves in a transitional phase as traditional forms of social security co-exist with modern ones (Tostensen, 2008). Patel (2005) notes that, over decades informal and indigenous systems have existed alongside the formal social security systems. The reason being that, the informal social security systems were developed in response to inaccessibility of formal social security systems and as a consequence of economic and social hardships. In South Africa for instance, the traditional modes of mutual assistance were used as an excuse not to award social pensions to African people in the rural areas and to support the government’s segregation policy (Patel, 2005).

Unni & Rani (2002) notes that, in developing countries, the majority of people are engaged in self-employment and informal activities and it is difficult to cover them under formal schemes of unemployment benefits, insurance and other benefits. As a
result of low coverage and inadequacy of formal social security systems, the majority of the people in most Southern African Development Community (SADC) countries rely on informal social security arrangements (Kaseke, 2004). For instance, Verhoef (1998) notes that in South Africa Black urban women utilise informal organisations as a form of financial and mutual support in adjusting to the urban environment and stokvels represents one mechanism that the women manipulate to generate funds for subsistence needs.

Kaseke (2007) mentions that, the informal social security arrangements are either based on kinship ties or mutual aid arrangements, and that the most common contingency they cover is death. He indicates that in the event of death of a member, the survivor receives assistance to meet the funeral costs. Tostensen (2008) identifies two forms of mutual-help societies that are common in most African countries that include rotating savings and credit associations (ROSCAs), and the savings and credit cooperatives. In ROSCAs members contribute a fixed sum of money periodically, which each member may withdraw at fixed intervals as they all have rotating access to a pool. The associations are usually formed on the basis of voluntary association of mutual trusted parties such as well-known and trusted friends, family and neighbours of long standing and they require regular cash contributions, (Verhoef, 1998). Tostensen (2008) notes that, most rotating savings and credit associations therefore, they constitute an important informal social security mechanism that enables poor people to deal with contingencies.

The savings and credit cooperatives are also identified as slightly formalised form of social security arrangements. According to Tostensen (2008), these arrangements are organised along cooperative lines and they are often linked to the workplace. In this association small deductions are made regularly from the wage, and after a stipulated period the contributor is allowed to withdraw a certain amount, and the repayment is done through wage deduction. Also, there is no restriction on the use of the loan and many borrowers use the money to meet contingencies. Kaseke (2004) mentions that rotating savings and credit schemes promote savings and provide credit to members and this enables the poor to meet their immediate needs.
Although informal social protection arrangements play a critical role in developing countries and poor families, Justino (2003) indicates that families and communities may not be the ideal suppliers of insurance and socio-economic protection because they can be affected by the same risks that affect individuals and their community. For instance, Oduro (2010) identifies dimensions of social protection mechanisms and argues that although family is an important institution for the provision of social assistance and social insurance, if most of the adult family members are deceased it is unlikely for individual facing to make recourse to family members for support. Therefore, the ability of a family to provide social security would depend on the capacity and willingness of family members to provide such assistance. According to Justino (2003), alternatives have to be found to protect the most vulnerable groups who no longer depend on extended families or communal links for survival.

**2.6 Social Protection for Migrant Workers**

According to Dupper (2008), the level of migration has increased in the contemporary age as a result of globalisation. He notes that, although millions of professional workers travel to other countries in search of higher wages, the migrants at the bottom of the employment ladder tend to do jobs that are dirty, dangerous and difficult. In almost all developing countries there are higher rates of morbidity and disability among low-income earners because of their relatively poor living and working conditions, (ILO, 2000). Holzmann, Johannes Koettl & Chernesky (2005) maintain that there are strong indications that the number of international migrants is going to increase. This is because since 1965 the number of international migrants has more than doubled as during that time only 75 million or 2.3 percent of the world population lived and worked outside their country of birth, as opposed to 175 million which was 3 percent in the year 2000.

According to Migration DRC (2008), the majority of people who migrate between countries in the global South do not have access to formalised social protection schemes in their host countries due to limited scope of social protection regimes provided by their governments. This includes most member countries of SADC where social protection measures such as retirement pensions, health insurance, bereavement
benefits and injury compensation are only extended to workers in the formal sector. Although international migration brings benefits to both migrant sending countries and migrant receiving countries, majority of migrant workers face vulnerabilities. Sabates-Wheeler & Waite (2003) mention that international migrants are exposed to vulnerabilities which are spatial as they enter a territory other than their own, as well as socio-political because they are not legally protected as nationals or citizens of that state within the foreign territory.

International migrants are prone to three vulnerabilities, which are spatial, socio-cultural and socio-political. Sabates-Wheeler & Waite (2003) indicate that, spatial vulnerabilities may occur to migrants in transit, migrants at destination, and the migrant’s family at source. For instance, a large number of undocumented migrants are vulnerable to health problems, exploitation and poverty due to their spatial dislocation from economic and social opportunities, and because of constant need to remain hidden and unidentified they are excluded from livelihood promoting possibilities and becomes difficult for the government to provide formal social protection schemes. Socio-political vulnerabilities occurs when migrants are excluded from participation in political life, from accessing social and economic benefits and legal institutions and that causes the illegal migrant to become prone to exploitation and discrimination leading to a spiral into poverty while the socio-cultural vulnerabilities emerge as a result of differences in the norms, values and customs. This hampers migrants’ search for employment or access to public goods such as health and education. Olivier (2004) argues that, the position of non-citizen migrant workers in social security is problematic as national social security legislation often contains provisions that adversely affect social security rights of non-citizen migrants, and in some instances the entitlement to benefits is linked to the immigration status of the worker that is whether migrant worker is legal or illegal migrant.

The migrants from SADC were also identified as a group that faces exploitative or even abusive labour conditions in the host countries because they have comparatively low socio-economic statuses compared to the citizens of such countries, (Migration DRC, 2008). According to IOM (2010), citizens from SADC countries decide to migrate to relatively better performing countries in the region because of the general decline and uneven development in SADC economies over the years. Also it was due
to the need for cheap labour and/or the skills shortage in receiving countries, caused citizens to migrate to relatively better performing countries in the region.

Holzmann, Koettl & Chernetsky (2005) argues that governments of host and source countries must enter into bilateral social security agreements in order to enhance the cooperation between the social security authorities of the countries involved as that would ensure the adequate portability of contributions and entitlements of migrant workers and their families and encourage return migration. They indicate that if the bilateral agreements between the host and the home country do not have any provisions that allow the migrant worker to keep her social security entitlements acquired during her stay at the host country, she will lose a substantial amount of the income earned while working overseas and the return migration will be discouraged. Migration DRC (2008) also reveals that, the lack of portability of benefits can also undermine the return or circular migration because migrants who have spent a considerable amount of time in host countries may be reluctant to return home, as they are likely to lose their benefits.

The Migration DRC (2008) suggests different ways of improving social protection for international migrants. First, it recommends that there should be legislation that decriminalise temporary worker migration and encourages circular migration in order to increase the development potential of international migration for migrant sending and receiving countries alike, and to mitigate some of the risks faced by migrants. Second, that there should be the pursuit of a decent work agenda to ensure that migrants working in low-skill jobs do not face exploitative workplace conditions. Third, the establishment of international agreements that ensure the portability of earned pension benefits for migrants so that migrants benefit from social security schemes to which they contribute whilst abroad, and finally, the support for migrant organisations such as hometown associations by governments and civil society actors in order to boost informal social networks that help to ensure the basic safety of migrants.

According to Sabates-Wheeler & Waite (2003), social protection benefits may be offered through bi-lateral or multi-lateral agreements between major labour sending and labour receiving states. However, they argue that there may be obstacles to
bilateral agreements where labour receiving governments hesitate to regulate wages for migrant workers because they consider migrant labour issues a private or business affair between employer and employee. “Bi-lateral agreements often provide the legal framework for source country governments to provide social protection for their citizens overseas” (Sabates-Wheeler & Waite 2003, p. 30). Therefore, in a situation where access to social security benefits is regulated by bilateral agreements between migrants sending and receiving country it is easier for migrants to have their benefits transferred to their countries (Millard, 2008).

Olivier (2004) also notes that, social security is widely protected as a human right both in international instruments and in constitutions around the world. Therefore, the national, regional and international instruments exist to ensure that both citizens and non-citizens have access to social protection. For instance, the regional instrument such as SADC Social Charter (2004) that requires Member States should create an enabling environment so that every worker in the region have a right to adequate social protection and that regardless of status and the type of employment, they should enjoy social security benefits.

South Africa and Lesotho signed a bilateral agreement in 1973 to regulate labour movement from Lesotho to South Africa. The Republic of South Africa Treaty (No.1 of 1973) states that Lesotho citizens employed in South Africa shall be liable to pay taxes levied upon them by the Government of Lesotho, and that in a case of workmen’s compensation and pneumoconiosis claims by or on behalf of such Lesotho citizens, the Labour representative from Lesotho will liaise with the South African authorities on behalf of Lesotho citizens employed in South Africa or their dependents.

2.7 Legislation

The South African government uses two main legislations to protect both citizens and non-citizens workers who contact occupational injuries or diseases. These legislations include Compensation for Occupational Injuries and Diseases Act (COIDA) and Occupational diseases in mines and work Act (ODMWA). Smit (2003) notes that,
COIDA provides for benefits to be paid to employees who suffer a temporary disablement, to employees who are permanently disabled and the dependents of employees who die as a result of injuries sustained in accidents at work or as a result of an occupational disease. According to the Act dependants include the employee’s surviving spouse or partner, children and certain family members who were wholly or partly dependent on the employee and under the age of 18 at the time of death. The claim form for compensation needs to be filled by an employee, or his or her dependants and others should provide proof to the commissioner that they were dependent upon the deceased.

In terms of the Occupational Diseases in Mine and Works Act (ODMWA) any person against whom there is a decision of the certification committee, or any other person or organisation acting on his behalf, or dependant of a deceased person or any organisation acting on behalf of the dependent(s) can apply to the medical reviewing authority for occupational diseases for a review of the certification committee decision (Smit, 2008). The Act also makes provision that the owner of a controlled mine or a controlled works shall for a period of not more than two years from the date of the commencement of a compensatable disease pay the reasonable cost incurred by or on behalf of a person in his service in respect of medical aid necessitated by such disease.

According to Kaseke (2007), benefits paid under workers’ compensation programmes vary depending on the degree of injury. Normally, a medical board assesses the degree of injury or disability and offers benefits such as disablement pension, medical care and rehabilitation and, in the event of death, widows or widowers receive pensions and the surviving children also receive allowances until they attain majority status. A widow's pension is usually discontinued when she remarries. ILO (2000) indicates that disability benefits are usually subject to much stricter qualifying conditions and tend to be of lower amount than cash sickness benefit because like old age pensions, their amount is often calculated on the basis of the years in insured employment. This means that workers who become incapacitated early in their working life can have low entitlements. This is the case in both COIDA and ODMWA as all payment of compensation under the Acts depends upon a calculation
of an employee’s earnings being the previous income of the injured or disease employee (Smit, 2003).

Social Security Administration (2007) establishes that, work related programmes furnish short and long term benefits which depend on both the duration of the incapacity and the age of survivors. These work related programmes provide cash and medical benefits to the beneficiaries. The cash benefits provided may be subdivided into three types: permanent disability benefits for permanent total or partially disabled and temporary disability benefits for the temporarily disabled. In the context of South Africa, it indicates that the temporary disability programme requires the waiting period of 3 days. If the insured is assessed as totally disabled, 75 percent of the insured’s earnings is paid for up to 12 months; may be extended up to 24 months (longer in special cases) after a further assessment of the disability. If partially disabled a percentage of the insured’s earnings as determined by the Compensation Commissioner’s Office is paid for up to 12 months; may be extended up to 24 months after a further assessment of the disability. It further states that in case of permanent disability if the insured is assessed as totally disabled, the maximum pension is equal to 75 percent of the insured’s earnings. The maximum monthly earnings for benefit calculation purposes are 9,321 rand. The minimum monthly benefit is 1,146.15 rand. In the case of partial disability, if the assessed degree of disability is higher than 30 percent, the full pension is paid according to the assessed degree of disability.

2.8 Social Protection in Lesotho

2.8.1 Formal Social Protection Arrangements

Social protection plays a critical role in alleviating poverty among vulnerable groups in Lesotho. Although various forms of social safety nets exist in Lesotho, the country does not have a comprehensive social security system, (Matsoso, 2003). According to Rasethuntsa (2001) social insurance is the dominant form of social protection in Lesotho and it only covers the economically productive labour force. Lesotho’s social insurance covers contingencies such as maternity, sickness, old age, employment
injuries and occupation diseases and asset enhancement. Rasethuntsa (2001) identifies three branches of social security in Lesotho that include, insurance against old-age, non-occupational disability and death, the insurance against employment injuries and occupational diseases as well as the maternity insurance.

The Lesotho Constitution ensures the availability of social protection mechanism through four main statutes which are the Labour Code Order No 24 of 1992, Workmen’s Compensation Act No 13 of 1977, Basotholand Pensions Proclamation of 1964 and the Pension’s Scheme Act 6 of 1979, (Matsoso, 2003). Section 30 a (i) of Lesotho’s constitution stipulates that the country shall adopt policies aimed at securing just and favourable conditions of work, including fair wages’ pensions or retirement benefits.

Matsoso (2003) states that, the Labour Code Order of 1992 is the principal law of Labour and Employment in Lesotho which covers all employees in the private sector by ensuring the provision of severance payment, sick pay and maternity benefits. The Labour code provides that employees are entitled to a sick leave on full pay provided that they produce a valid certificate of incapacity that is signed by a registered medical practitioner. She mentions that, in 2003 the maternity leave of six weeks before confinement and sick leave after confinement was provided to employees if the medical doctor certifies that an employee suffered form an illness arising out of confinement. However, Matsoso (2003) argues that, even though employees at the government agencies and most parastatal companies receive a full pay wages during maternity leave, the employers in the apparel industry and small and medium size scale enterprises do not pay any wages to their employees when on maternity leave. Matsoso (2003) argues that many employees in these industries to conceal their pregnancy until the last day of work in order to earn wages. The 1992 Labour code also provided that employees are entitled to severance pay of not less than two weeks wages for each completed year of service with current employer. This benefit is payable to an employee irrespective of whether or not the contract is terminated by the employer or an employee.

The Lesotho Workmen’s compensation Act of 1977 also exists to cover workers in both government as well as the private sector. According to Matsoso (2003), Lesotho
workmen’s compensation Act provides compensation to employees for injuries suffered or diseases contracted in the course of their employment. The Act ensures that the employer continues to pay wages to an employee who is temporarily incapacitated while he is still out of work. It provides for the payment of medical expenses in respect of injuries sustained. Although the Act is applicable to workers and apprentices in the private sector as well as in the government, it excludes out of work, domestic servants and any person whose services are rewarded in kind like herd boys. This means that, the outworkers, domestic servants or any person whose service is rewarded in kind such as herd boys and any class of persons whom the minister may by notice declare not be workmen for the purpose of the Act do not benefit from the Lesotho’s workmen’s compensation (Matsoso, 2003).

Lesotho Workmen’s Compensation Act of 1977 guides the compensation provided by the Ministry of Labour to the employees who sustain injuries and contact illnesses that are work related. The Act is applicable to people to all people who are employed except for government employees who are pensionable, members of armed forces, members of the police services and members of the correctional services. There are also procedures, terms and conditions involved in the Act for instance; if an employee is injured due to wilful conduct or deliberate self-injury he is not compensated. The Lesotho Workmen’s Compensation Act gives percentages that Doctors can use to determine the extent of injuries.

According to Lesotho Workmen’s Compensation Act No.13 (1977), if an employee dies as a result of work related injury his dependents receives the amount of compensation that is sum equal to 48 months earnings or R12,000 but if an employee does not leave any dependants who are wholly dependant on his earnings, the amount of compensation to be paid to beneficiary shall be such sum not exceeding the amount payable R12, 000. In addition to this money, the expenses of burial of the deceased not exceeding the sum of R150 including the medical costs shall be paid by the employer. However, in a case where an employee incur permanent incapacity as a result of an injury a sum equal to 54 months earning is paid. This highest amount to be paid is R13, 500 and to lowest amount of compensation paid is R1, 800.
In a case where a workman incur temporary incapacity (partial/total) resulting from injury, the compensation shall be the periodical payments payable at intervals as agreed upon or as the court may order, or lump sum calculated accordingly to the probable duration and probable changed in the degree of incapacity. Under Lesotho Workmen’s Compensation Act of 1977, temporary partial incapacity compensation is paid in the form of periodical payments or monthly payment equal to 75% of the workman’s loss of earnings.

The Lesotho’s Pension Proclamation of 1964 covers officers employed on a permanent basis who are also on pensionable terms in the public service as well as officers who are employed on temporary month to month or daily paid officers (Matsoso, 2003). The proclamation offers retirement pension, death pension for widows, death gratuity and compulsory retirement.

Matsoso (2003) notes that, Pension Scheme (Corporate Bodies) Act of 1979 provides for the establishment of a pension scheme for employees employed by the corporate bodies or parastatals. The Act covers employees employed on permanent terms or on a month to month terms basis. The Pension Scheme Act provides benefits such as Old Age pension that include widows pensions and dependants’ pension, death benefit or gratuity and retirement on grounds of illness. Rasethuntsa (2001) indicates that, the insured employee or his dependants are entitled to pensions. She mentions that, the pension is paid based on the basis of two percent of the average salary of an employee during the last two years of service multiplied by the number of his contributory insurance years. Also the insured must have reached the age of 60 years. However, if an insured employee sustains a non-occupational disability before he reaches age 60 he will be entitled to a disability pension that is paid to him monthly on the basis of assessment made by designated medical committee. On the other hand, Matsoso (2003) shows that Lesotho pension scheme covers male employees who have attained the age of 50 and female employees who have attained the age of 45.

The government of Lesotho through the assistance of private organisations is able to provide other social protection programmes to the needy and other vulnerable Basotho citizens. The social protection in Lesotho is in the form of free primary education, school feeding, old age pension and child support grant.
The implementation of free primary education in 2000 and the elimination of school fees was a step towards improving access to education, and to ensure a compulsory and free education for all Basotho children. The introduction of universal primary education in Lesotho is rooted in the national education dialogue of 1978. However, the idea was once again encouraged by the 1990 conference in Jomtein where Lesotho joined the rest of international community in endorsing the Convention on Education for All (Ministry of Education, 2001). According to Avenstrup, Liang and Nellmann, (2004), the Lesotho government reimburses schools for book rental fees, stationery, building maintenance, and meals, with the money paid directly to the schools. Moreover, for schools that agree not to demand fees from parents, the government pays for teachers’ salaries, materials, and other inputs.

According to Regional Evidence-Building Agenda (2007), in 1999 Lesotho adopted a Free Primary Education policy that was to roll out in successive years to one additional grade each year, beginning with grade 1 primary and it eventually covered grades 1-7 by 2007. Avenstrup et al., (2004) show that, in the first year of Free Primary Education inception, Grade 1 enrolment in Lesotho rose by 75 percent from 67,777 to 118,843, which was 16 percent more than the ministry had projected increasing overall primary education.

Lesotho School feeding programme was also adopted as part of Free Primary Education programme. The Lesotho school feeding programme is used as a measure to attract orphans and vulnerable children to schools and to increase enrolment of children from food insecure households. Ellis, Devereux and White (2009) indicate that, persistent hunger can keep children out of school, results in high dropout rates and diminished children’s ability to learn. Therefore, they state that, the goal of Lesotho school feeding programme is to reverse rising vulnerability by helping to break intergenerational transmission of poverty and vulnerability.

The school feeding as a social transfer has a long history in Lesotho as between 1966 and 1990 the World Food Programme (WFP) School feeding programme covered all schools in the country (Ellis et al., 2009). The feeding programme was once more phased in after the adoption of Free Primary Education policy in 2000, and the
Government of Lesotho worked in collaboration with the WFP in providing food to government schools. According to REBA (2007), WFP is responsible for supplying highland schools, while the government of Lesotho supply food to primary schools in the lowlands and foothills according to the Free Primary Education roll-out programme by grade. Ellis et al (2009) mention that under the government of Lesotho, school feeding is contracted out to caterers who are typically local women who prepare the food off site and bring it into the school. The caterers procure the required ingredients and follow weekly meal prescribed by the Ministry of Education and Training, and they are paid a fixed fee of M2.30 per child per day. However, under WFP School feeding scheme, cooks are paid M0.90 per child per day since they are only required to supply their own salt, sugar and fuel; food is prepared at the school kitchen or premises using the WFP food supplies.

The Government of Lesotho has also committed itself to providing cash assistance to assist orphans and vulnerable children. The Lesotho child support grant started in 2009 and Thahane (2010) states that, the Lesotho government is working with the European Commission and UNICEF to introduce a Child Support Grant worth M360 per family per quarter to support Orphaned and Vulnerable Children.

The Lesotho Old Age pension is another social assistance programme specifically targeted at the elderly. According to Pelham (2007), Lesotho’s old Age Pension commenced in November 2004 and it benefits all Lesotho residents aged 70 years and above. Hagen (2008) shows that, the Chiefs are placed both at the margin and at the centre of the scheme and their role is important in the application process of the pension scheme because they are the only official persons who know the pensioner and thus can confirm the age and citizenship of the pensioner. However, the Chief needs the help of the District Officer to attest the applicant’s age as he is not legally authorized to attest the application.

According to Croome, Nyanguru & Molisana (2007), the Lesotho scheme is characterized as a social pension and an instrument of social protection as it is being used to buy food and clothes, to pay for school fees, schoolbooks and school transport, and to meet the costs of children’s health needs. They argue that pensioners do not have to be resident in Lesotho, but they need show Lesotho citizenship in order...
to qualify. The Lesotho Old Age pension is housed under the Ministry of Finance. Hagel (2008) indicates that the pension is placed under the Ministry because it is completely paid out of tax income. The post offices were identified as the best placed service providers of the pension because every district has one main post office in the district capital and at least two or more smaller post offices but in areas where post offices or agencies were too far away from the villages, other local public buildings such as schools or clinics are used as pay points while in areas where the pay points are unreachable by car, a helicopter of the army brings the money and the staff to the right place. The beneficiaries of the pension are entitled to receive the single rate of M300 per month.

Food aid is another important social protection mechanism that responds to risks affecting vulnerable communities. Food aid comes in different forms. In some instances, communities are given free food while in others the aid is delivered through food-for-work initiatives in development projects. There are also instances where communities participated in cash-for-work projects such as planting trees and constructing gravel roads in villages. According to Freeman, Kaitibie, Moyo & Perry (2008), the WFP is in charge of food distribution and it uses services of NGOs such as World Vision and the International Red Cross/Red Crescent to distribute food aid to needy communities. The WFP sets the criteria for food aid recipients, with most food aid going to vulnerable households. Many aid agencies use asset or wealth status as a yardstick for distribution of food aid and other transfers and potential recipients are required to register with the Chief before they can qualify for receiving formal transfers.

2.8.2 Informal Social Protection Arrangements

Informal social protection arrangements have a long history in Lesotho. Informal social protection mechanisms are used to help families and communities to deal with contingencies such as low harvest, diseases, death and decreased income. Kinship was the main form of social protection as family members and relatives spend their time growing and processing food, caring for children and other vulnerable extended family members. According to Ziervogel, Taylor & Butterfield (2008), communities
in Lesotho have their own informal social networks to guarantee or protect the vulnerable members from destitution and/or abuse. Most of these mechanisms are social safety nets based on good will of neighbours, community based organizations (CBOs) and/or blood relationship.

Community members in Lesotho rely on informal safety nets for any unexpected risks that may affect their households. For instance, people who do not have adequate land to produce crops usually work in other people’s fields in exchange for produce while lending and borrowing among each other allow community member to obtain assistance when in need. Moreover, for majority of Basotho men to earn cash income, they have to leave their communities for prolonged periods of time to work in the South African mines, industries or farms. They return every few months to be with their families, to bring home money and their family members’ benefits from remittances. However, in times of scarcity, household members supplement their incomes by selling food, goods or vegetables. In most cases, unemployed women whose husbands’ work outside the country and in other districts buy on credit or take loans that they would pay back once their husbands arrive.

Funeral schemes are also important traditional coping mechanisms for majority of people in Lesotho. Funerals can be expensive for poor families because immediate family of the deceased has to pay for the funeral costs such as coffin, mortuary and provide the village with food and drinks for several days while preparing for the burial. Mapetla, Matobo & Setoi (2007) indicate that majority of poor people in Lesotho burial societies are a form of informal social insurance and/or savings scheme that many women voluntarily join. They are an alternative means to reducing risk upon death of a family member. They state that, burial societies are based on Basotho culture of reciprocity and members use them to assist one another during times of happiness and sorrow. The burial societies are initiated as a response to vulnerabilities in order for a member to be buried or to bury their relatives decently in a socially acceptable manner. Members are assured of a coffin, cash, groceries and labour for grave digging while some of the non-spent cash received from claiming death benefits are used for other developmental activities such as agricultural projects and catering services.
According to Mapetla et al., (2007), Basotho make use of three traditional burial societies. The first are Family-based burial societies which are formed along family lines by relatives therefore, members of these societies share emotional attachments and operate in many cases without written by-laws. The second is Community-based burial societies that were formed along community lines. To form this society people from the same village or under the same chiefdom get together to form a burial society that is or may be registered and is governed by societies by-laws. The third is a Work-based burial society that draws its members from people working together in an institution or workplace. The society is formed by people who come from different places and sometimes different countries. The workers decide to form a group for it to ensure them a one-off payment that will cover the high costs associated with death.

Ziervogel, Taylor & Butterfield (2008) show that, Lesotho has some good examples of community-induced social protection measure for food security. These informal social protection measures include a range of production-oriented and access-oriented measures. In the case of production-oriented measures, first there is sharecropping of the fields of the destitute by the non-destitute, and sharing the produce on 50:50 bases in order to ensure equity of access to food security. This is an important coping strategy in Lesotho because people who do not have farm implements such as seeds or equipment to cultivate land allow a person who does not have land to cultivate his field free of charge, this is normally based on the condition that after harvesting production will be shared equally. The second practice is “Mafisa” or cattle loans where a household with more livestock gives part of their stock to a destitute household in order for them to get milk in return and use of by-products like cow dung for fuel, and also for ploughing their fields. The third measure is that of “matsema” or working parties where the destitute team-up with the non-destitute households so that their fields might be cultivated as well and they can then access food security. The fourth practice identified under production-oriented measure is that of community farming. In community farming the community works the chiefs’ fields jointly in order to enable the chief to feed the destitute members of the community.

According to Ziervogel et al (2008), the tendency in access-oriented strategies has been to extend cash gifts to destitute and vulnerable households by the non-destitute ones to purchase food but in some cases, food handouts are given out directly.
Moreover, they state that under this strategy it is common for relatives to bring up some children of the destitute as an informal social protection measure. In Lesotho, relatives, the chief and other good Samaritans play the lead role in informal social protection in Lesotho. However, changing family and households’ structures, and rising cost of living due to inflation and recession exert serious strain on these informal social safety nets. They argue that some analysts have attacked these measures as facilitating exploitation of the poor by the rich and promoting accumulation of capital by the rich.

2.9 Conclusion

It is important to note that the western concept of social security has to a larger extent influenced social security systems in Africa, also that the development of formal social security systems in these countries were predetermined by the colonial powers. The social security was introduced to suit the specific socio-economic conditions obtainable in Europe and North America (Kaseke, 2004). The British adopted the Beveridgean model for use in their colonies in Africa, however this was used in a selective basis because the programmes that were introduced were meant for the benefit of the white settler community while majority of the population was excluded (Kaseke, 2004). This is still felt today due to the fact that the coverage of formal social security systems in Africa is still inadequate.

Although in the past community members and families were considered responsible for social protection activities, it is clear that the state also has to intervene by establishing relevant social protection programmes for the vulnerable groups, such as people with disability because their disability can impact on household expenditure and earnings. Moreover, the position of non-citizen migrant workers in social security is still problematic (Olivier, 2004). Therefore, it is important for the migrant providing countries and migrant receiving countries to have bilateral agreements that compel migrant workers from countries like Lesotho to contribute on pension funds so that on when they retire they reap monthly payment on their return home. Although Lesotho does not have a formalized social security system, it is clear from the literature that there are social protection systems in place that Lesotho government
and donor agencies utilize to protect workers and other vulnerable groups from contingencies.
CHAPTER 3: RESEARCH METHODOLOGY

3.1 Introduction

This chapter discusses the methodology used in the study. It describes the research design, the area under study and explains how the research participants were selected. Moreover, it then discusses the methods that the researcher used to obtain information from the research participants and provides the rationale for choosing such methods.

3.2 Research Design

Henn, Weinstein & Foard (2006) define research design as “the framework that is to be followed in conducting the research”. This study was exploratory and qualitative in nature. An exploratory research is essential whenever a researcher is breaking new ground in order to yield new insights into a topic for research, (Rubin & Babbie, 2001). For this study, exploratory research was relevant because little information was available in respect of the social protection arrangements for mine workers from Lesotho who retired on account of disabling mine injuries.

The use of qualitative research design allowed the researcher to explore feelings, opinions and attitudes of research participants concerning social protection arrangements from mine workers who retired on account of disabling mine injuries in Maseru urban. Thus, a qualitative approach was employed so that the researcher would obtain detailed answers that would enable her to understand the phenomenon being studied from different points of views of research participants. According to Henn et al., (2006), a qualitative research allows for an exploration and understanding of the lives of people as they are really lived. It also provides textual description of how people experience a given research issue (Marc, Woodsong, MacQueen, Guest & Namey, 2005).
3.3 Study Area and Population

3.3.1 Study Area

The study was conducted in Maseru district which is the Capital city of Lesotho. Lesotho is a landlocked country which is entirely surrounded by the Republic of South Africa. It has a population of approximately 1,876,633 and a size of 30,000 km\(^2\). Lesotho is made up of ten districts and four ecological zones which are Lowlands, Foothills, Mountains and Senqu River valley. Maseru urban is situated in the Lowlands, on the northwestern part of Lesotho and along the South African border which is denoted by the Caledon River.

According to the Bureau of Statistics (2006), Maseru has an area of 4,279 km\(^2\) with a population size of 429,823 which includes 205,175 males and 224,648 females. This area of study was selected based on researcher’s convenience. Although Maseru district has three livelihood zones which are the urban area, peri-urban and rural area, the research was conducted in Maseru urban because of logistical considerations. The researcher resides in Maseru urban; therefore, it was less costly to conduct the study in this area because research participants were accessed with limited time and budget. This also saved researchers time and money because she did not need to hire an interpreter.

3.3.2 Study Population

The study population consisted of fifty five former mine workers who retired from South African mines on account of disabling mine injuries in Maseru district. The list was provided by TEBA Limited. In addition, there were four key informants drawn from the Ministry of Labour, the Department of Social Welfare, TEBA Limited and National Union of Mineworkers (NUM). These key informants were selected because they were from offices that work directly with mine workers, and the researcher believed that they could provide additional information to the study as they know about issues confronting mine workers who retired on account of mine injuries.
3.4 Sampling

To identify and select mine workers who retired on account of disabling mine injuries in Maseru district, the researcher used a list provided by TEBA Limited. The list had 55 names. The study was meant to use a 100 per cent sample given the size of the target population. However, only forty seven retired mine workers who were available during the time of the interviews were eventually interviewed. The reasons for this were that some of these mine workers were not present in their household because they were admitted in hospital while some respondents did not provide their contact details which made it difficult for the researcher to locate them. For the participants whose households were not identified, the researcher went to the TEBA office during the compensation pay day to interview them.

Purposive sampling was used to select the four organisations which provided the key informants. Purposive sampling allows the researcher to select people or events that are likely to produce valuable results from the group he already knows (Denscombe, 2007). The key informants from each organisation were not selected by the researcher but the management of organisations selected a representative to participate as key informant in the study. The key informants were able to provide additional information on the issues of mine workers who retired on account of mine injuries because they work directly with them and provide them with support where necessary.

3.5 Research Instruments

3.5.1 Semi-Structured Interviews

Two semi-structured interview schedules were used to collect data from forty seven retired mine workers and four key informants. The research participants were asked questions in an open ended manner. The open ended questions enabled the researcher to obtain in depth information on social protection arrangements for mine workers because research participants provided detailed responses on research questions. According to Neuman (2007) open-ended questions allow participants to answer
questions in detail and to qualify or clarify their responses. Since open ended questions permit in-depth interviews, unanticipated answers were obtained as new issues emerged from the interviews. Moreover, because of the flexibility of the interview, the order of questions was not strictly followed as the interview was driven by the responses that the research participants provided.

3.5.2 Documents

The secondary data sources in the form of reports, policies and brochures of organisations were also used. These documents supplemented information that was collected during the interviews with key informants. They also enabled the researcher to gain more knowledge and information concerning the activities of these organizations and the role they play in relation to mine workers who were disabled by mine injuries. The secondary data also made it easier for the researcher to verify some information without disrupting research participants.

3.6 Pre-testing research tool

The findings from the pre-test helped the researcher to identify the questions that need to be clarified and that need to be modified. A pilot study defined as preliminary study on small samples that help to identify potential problems with the design, particularly of the research instruments (Wassenaar, 2006). Therefore, the research tool was pre-tested before starting the data collection exercise to determine the appropriateness of the research questions. The researcher used face to face interviews to pilot the research tool on four individuals who were in similar circumstances to those of the study population mine workers who retired on account of disabling mine injuries. The individuals used for pretesting were not included during the data collection exercises.
3.7 Method of Data Collection

The researcher used face to face interviews to collect data. The researcher was able to have one to one conversation with research participants and this enabled her to establish rapport with the research participants. A face to face interview allows the researcher to make use of non-verbal communication and visual aid (Neumann, 2007). The face to face interview with the participant also allowed the researcher to observe and listen to research participants’ gestures during the conversation, and the researcher asked the participants to clarify and interpret responses where suitable. Denscombe (2007) also mentions that, face to face interviews make it is easier for the researcher to transcribe an interview because the opinions and views stem from one source as only one person talks at a time. According to Neumann (2007), face to face interviews have a high response rate because it is controlled by an interviewer through the use of prompts and probes and illiterate people can also participate in the interviews.

However, face to face interviews have some limitations. An interviewer bias may occur because the researcher has control over information obtained from the research participants. The method was also costly as the researcher had to travel to far areas with high cost, and with budgetary constraint only small areas could be covered. However, costs were minimized because most of the participants were eventually interviewed at TEBA offices where they were collecting their compensation. Face to face interviews inhibited freedom of research participants especially when discussing sensitive topics. This could result in research participant providing false or misleading information which can lead to biased responses.

The research instruments such as notes and audio record were also used by the researcher to obtain information from research participants. However, the permission was first sought from the research participants after explaining to them the purpose of the study and reasons why the interview was recorded and how information will be utilized. The audio records enabled the researcher to obtain comprehensive record of the interviews which allowed her ensure accuracy of data by verifying responses obtained so that data and results presented are relevant to the research questions.
3.8 Data Analysis

According to De Vos, Strydom, Fouché & Delport (2005), a qualitative data analysis can be done at the research site during data collection and away from the site after data collection period. In this study, at the end of the day of the interviews, the researcher transcribed responses from research participants by paraphrasing their views and where responses were in Sesotho they were translated into English. The data was analysed according to the themes and concepts obtained from the interviews. At the end of data collection exercise, the researcher went through all data to identify the themes that emerged and then created categories based on identified key words and related answers. The themes that emerged from the study were different types of support provided by formal institutions, informal arrangements of support that exist, challenges that were experience in accessing social protection and the adequacy of benefits provided by formal institutions. The concepts that emerged from the data were noted, and the similar themes and categories that emerged from the findings were grouped together to ease the analysis. This was done by putting together similar responses and identifying contrasting views. This same process followed with all data collected from the key informants.

3.9 Methods of Data Verification

According to De Vos et al (2005), Lincoln and Guba use four strategies to establish the truth values of the study, its applicability, consistency and neutrality. These strategies are Credibility, Transferability, Dependability and Confirmability.

The goal of credibility is to demonstrate that the inquiry is conducted in a manner that ensures that subject is accurately identified and described, (De Vos et al, 2005). To ensure credibility of research findings, the interview schedules with open ended questions were used in order for research participants to provide detailed responses. The researcher also used probes to validate the responses. The two different samples were used, one sample was from the mine workers who retired from the mines on account of disabling mine injuries and the other sample consisted of key informants that work directly with disabled mine workers. The responses from these two different
samples allowed the researcher to compare and contrast the information they provided.

In addressing transferability, De Vos et al. (2005) suggest that the investigator must ensure that findings can be applied to another context. Transferability has been enhanced by providing detailed analysis of findings so that the reader can judge the appropriateness of the findings and if they can be applied in other areas.

The researcher ensured dependability of research findings by clearly showing the methods used for data collection and analysis as well as sampling procedures employed. This will enable other readers who want to repeat the study to do so and come up with similar findings. In the view of Neuman (2007), dependability means reliability and according to him it suggests that if the same thing is repeated it can reoccur under identical or very similar conditions.

The trustworthiness of qualitative data was also ensured through confirmability. Confirmability emphasises the need to ask whether the findings of the study could be confirmed by another (De Vos et al, 2005). The researcher used categories and themes during analysis to allow rechecking of research findings.

### 3.10 Ethical Considerations

Ethics involves the responsibilities that researchers bear toward those who participate in research (Monette, Sullivan & De Jong, 2005). “Ethics include the concerns, dilemmas, and conflicts that arise over the proper way to conduct research” (Neuman, 2007). This means certain ethical guidelines need to be followed when the study is conducted.

A written informed consent statement was drawn and translated to Sesotho language as majority of research participants were illiterate. The researcher relayed all important details of the study, including the study purpose and objectives, to the research participants before the interviews. The research participants were not coerced to participate as they were informed that their participation in the study was voluntary.
The study participants were requested to sign the consent form to show that they were willing to take part in the study. However, for some of the participants who could not write because of their disabilities or illiteracy the next of kin were requested to sign on their behalf where they were present while others gave verbal consent.

The researcher participants were not harmed in any way during the course of interviews. The researcher was aware that the study had the potential to inflict harm to the research participants because it explored their problems and needs. Therefore, the researcher clearly stated to the research participants that their participation was voluntary. Participants were provided with a statement of informed consent and participant information sheet with the contact of counselor. The researcher made arrangements with the Department of Social Welfare to provide free counselling for research participants if they felt any emotional distress during the interviews.

The researcher did not deceive participants about the true purpose of the research. She disclosed her identity to the participants before commencing the interviews by informing them that she was a student at the University of Witwatersrand and that the study was being conducted as part of university requirements.

Anonymity and confidentiality was ensured in the study. The researcher protected the privacy of research participants by not disclosing their identity and where there was a need to quote responses of participants, pseudonyms were used. Anonymity means that people remain anonymous or nameless (Neuman 2007, p. 57). Confidentiality was also be maintained by ensuring that information obtained during interviews was only accessed by the researcher and the supervisor. The raw data will be kept in a secure safe for at least six years if not published or two years if the results are published. The researcher will make the study results available to participants on request.

The research proposal was submitted to the University ethics committee and the ethics clearance letter was obtained before the researcher started to collect data.
3.11 Limitations

The study was limited to Maseru urban therefore, the findings from the study cannot be generalised to other areas. Furthermore, the interviewer bias can be expected as the researcher’s presence during the interviews might have influenced the outcome of the findings. In some instances, research participants would not answer the questions in details or sometimes exaggerate their problems with the hope that they would get additional support. This could be a limitation because the answers will not reflect a true picture of a phenomenon being studied. However, to overcome this, the researcher clarified to them that I do not work for any organisation and that I am a student doing the research for my Masters degree. Another limitation was that, there was no sufficient literature on the topic of social protection arrangement in Lesotho therefore I had to rely on literature from other countries which might provide different meaning of social protection systems.

3.12 Conclusion

The chapter provided an outline of the methods that the research employed to obtain information and to analyse research findings from this study. It shows that the study was exploratory in nature and it employed a qualitative design in order to obtain knowledge and information regarding social protection arrangements for mine workers who retired on account of disabling mine injuries. The chapter shows that semi-structured face to face interviews were conducted to obtain in-depth information that will answer the research questions. The analysis of the study findings was also done by transcribing research participants’ responses and categorising them into themes and concepts.
CHAPTER 4: PRESENTATION AND DISCUSSION OF RESEARCH FINDINGS

4.1 Introduction

The aim of the study was to examine social protection arrangements for Lesotho mine workers who retired from South African mines on account of mine injuries. This chapter discusses the findings of the study. It begins by describing the profile of research participants in relation to factors such as age, gender and marital status. It then discusses the research findings according to the objectives of the study.

4.2 Profile of respondents

This section provides the profile of retired mine workers who took part in the study. It provides information about each research participants’ gender, age, marital status, educational attainment and the number of dependants.

Table 1: Age distribution of mineworkers

<table>
<thead>
<tr>
<th>Age Group (in years)</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>40-49</td>
<td>8</td>
<td>17%</td>
</tr>
<tr>
<td>50-59</td>
<td>18</td>
<td>38%</td>
</tr>
<tr>
<td>60-69</td>
<td>14</td>
<td>30%</td>
</tr>
<tr>
<td>70-79</td>
<td>7</td>
<td>15%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>47</td>
<td>100%</td>
</tr>
</tbody>
</table>

The table illustrates that the participants interviewed were between the ages of 40 to 79 years. The majority of respondents (32 participants) were between the ages 50 and 69 years. All forty-seven-research participants were males. This was because migrant labour in Lesotho has been a male preserve. International Organisation for Migration (2010) mentions that, migrant labour to the South African mines was male dominated until around 2001 when females started to work as miners, with approximately 3 percent of total Basotho mine workers being females. Consequently, the probability of
having male participants was high because they are the majority in the mining industry.

The majority of the research participants notably 94% were married with 9% of them being in their second or third marriage. Only 3 (6%) respondents were widowed.

Table 2: Number of dependants

<table>
<thead>
<tr>
<th>Number of dependants</th>
<th>Number of Research participants</th>
<th>Percentage (no. of participants)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-4</td>
<td>18</td>
<td>38%</td>
</tr>
<tr>
<td>5-8</td>
<td>21</td>
<td>45%</td>
</tr>
<tr>
<td>9-12</td>
<td>7</td>
<td>15%</td>
</tr>
<tr>
<td>13</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>47</td>
<td>100%</td>
</tr>
</tbody>
</table>

The table shows that a total of 21 (45%) research participants had 5-8 dependants that they support with their income, while only one research participant supports approximately 13 people with his income. This research participant indicated that he has high number of dependants because he supports his brother and two sisters and their children with his income.

The findings contrasts with those from the Bureau of Statistics (2010) which show that the average household size in the urban areas of Lesotho has decreased from 3.9 in 2003 to 3.5 in 2010. The findings were dissimilar because the population for this study was mainly mine workers with little or no education. In most cases illiterate people tend to have larger families than literate people. Owuamanam & Alowolodu (2010) argue that family background, parental education and income are some of the factors that could affect family size.
Table 3: Educational Levels of the Participants

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Number of Participants</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never attended school</td>
<td>20</td>
<td>43%</td>
</tr>
<tr>
<td>Primary education</td>
<td>24</td>
<td>51%</td>
</tr>
<tr>
<td>Secondary education</td>
<td>2</td>
<td>4%</td>
</tr>
<tr>
<td>High School education</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Total</td>
<td>47</td>
<td>100%</td>
</tr>
</tbody>
</table>

The results from the findings show that 43% of the research participants never attended school. The number of illiterate participants was, however, higher given that in the discussions, 16 of the 24 participants who went to primary school dropped out in their first and second level of primary school. The Lesotho Bureau of Statistics (2006) views education as important for country’s development because it provides people with professional, technical, vocational and intellectual skills that a country requires for development. However, it reports an inverse relationship between education and international migration in Lesotho because the main form of migration is labour migration to the South African mines, factories or farms which require people with little or no education.

It is clear therefore, that most research participants who worked in the South African mining industries dropped out of school in the early years of primary school while others did not attend school at all. This was because the South African mines offered manual jobs that required no education. According to IOM (2010), many Basotho were hired for semi-skilled jobs such as machine operators, locomotive drivers and general labourers. The other reasons provided by Lesotho Bureau of Statistics (2002) were that, Basotho men could not attend school because the custom required them as young boys to herd animals such as cattle, sheep and goats since their families depended on these animals for their subsistence while others chose to migrate to South Africa and work in the mines because the industry offered a ready, lucrative and lifetime employment. They felt that the income from the mines was good as it provided them with a better standard of living than many of their counterparts back home in Lesotho, who went to school and obtained formal qualifications. For this reason, the proportion of males that had never attended school became much higher than that for females Lesotho.
Lesotho Bureau of Statistics (2002) states that, Lesotho is one of a few countries in the world, where literacy levels, current school attendance and level of education completed are higher for females than for males. For instance in 2002 and 2003, the literacy rate for females and males were 82.9 percent and 80.2 percent respectively (Bureau of Statistics, 2006). In 2008, the literacy rate of women was also greater than that of men by 21 percent. The literacy rate within the 15 and 49 years age group in Lesotho was 90.1 percent for females 68.8 percent for males (Huebler, 2008).

### 4.3 Adequacy of Compensation

The first objective of the study was to determine the adequacy of the compensation paid to mine workers who retired from South African mines on account of work related injuries. The purpose of paying compensation for work related injuries is to provide income replacement. This income replacement is meant to enable claimants to meet their basic needs and maintain their lifestyles. Thus the assumption is that the benefits are always adequate for this purpose.

The adequacy of compensation in this study refers to the extent to which the compensation enables the beneficiaries to meet their basic needs. The International Social Security Association (2006) argues that adequacy of benefits should not be limited solely to the level of income from social security schemes. It argues that the adequacy has to be viewed from the broader social protection enjoyed by citizens such as the availability of free comprehensive health services, free education and income support for purchase of basic foodstuffs. The other factors to be considered may include wealth accumulated, the type of family support, including other forms of assistance that can be available from family members and NGOs. This was supported by Wason & Hall (2007) who argued that, assets and other measures must be included when measuring poverty because income alone would not necessarily correlate with other measures of poverty.

The research participants indicated they collect their compensation from TEBA Limited at the end of each month. However, they were clear that the compensation that they receive comes from the Rand Mutual Assurance (RMA). According to the
key informant from TEBA, TEBA Limited have offices in ten districts of Lesotho whose purpose is to procure labour from Lesotho on behalf of the South African mines. He indicated that the other role of TEBA Limited is to assist the RMA with payment of compensation to mine workers who were disabled by mine injuries and the dependants of employees who died of work related accidents.

The Rand Mutual Assurance provides compensation to mine workers according to South Africa’s Compensation for Occupational Injuries and Diseases Act (COIDA). The Act covers all workers except domestic workers who are employed on a contract basis. Temporary disability benefit is payable at 75 percent of the employee’s monthly earnings at the time of accident, for permanent disability of 30 percent, an employee is paid 15 times his monthly earnings to a minimum compensation of R12,375 and a maximum of R67,950 while a payment for permanent disablement of 100 percent, an employee receives 75 percent of his monthly earnings at the time of the accident to a minimum of R618,75 and to a maximum of R6,065.50 per month, (COIDA, 1993).

Table 4 gives the levels of compensation received per month by mine workers who retired on account of disabling mine injuries.

Table 4: Amount of Compensation paid to Mineworkers

<table>
<thead>
<tr>
<th>Total Income (in Maloti) per month</th>
<th>Number of Mineworkers</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>400-850</td>
<td>11</td>
<td>23%</td>
</tr>
<tr>
<td>900-1350</td>
<td>16</td>
<td>34%</td>
</tr>
<tr>
<td>1400-1850</td>
<td>7</td>
<td>15%</td>
</tr>
<tr>
<td>1900-2350</td>
<td>5</td>
<td>11%</td>
</tr>
<tr>
<td>2400-2850</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>2900-3350</td>
<td>2</td>
<td>4%</td>
</tr>
<tr>
<td>3400 and above</td>
<td>5</td>
<td>11%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>47</td>
<td>100%</td>
</tr>
</tbody>
</table>
The table shows that the majority of respondents (57%) received a monthly compensation ranging from 400 Maloti to 1,399 Maloti. Only five respondents received between 3,400 Maloti and above per month. All research participants indicated that they spent most of their compensation income on food. In addition, 16 of these research participants mentioned that they also spent compensation income on electricity while 31 participants spent it on fuel such as gas and paraffin which they use for cooking and lighting in their households. The research participants also reported that they use the compensation on occasional expenditures which includes the purchase of household furniture such as chairs, tables and beds. A total of 13 participants stated that they use part of the compensation for educational purposes such as paying for their children tuition and to buy school books and uniform. The 19 research participants use their compensation income to buy clothing for themselves and their children. However, 15 these research participants of them complained that the compensation allows them to buy only poor quality clothing because they are cheaper.

Research participants were asked whether the compensation income was adequate for purposes of meeting their basic needs. A total of 34 (72%) research participants indicated that the amount of compensation they received was not adequate because they could not meet some of their household needs such as paying for children’s education. The research participants provided the following responses:

“The money is not adequate, I have many needs that I fail to meet… It was even better when I was still working because I earned R900 that time and now after ten years I get only R700 of compensation”

“The money is too little, my children who were in high school had to drop out of their high schools because I could not afford the fees”

“The compensation is too little…I always rely on money I borrow from other people which I repay at the end of every month after receiving my compensation”.
However, three respondents mentioned that they were satisfied with the monthly compensation they received because it was better than not receiving anything at all. They also mentioned that they are able to meet some household needs. Lesotho Bureau of Statistics (2005) reports that general monthly minimum wage in Lesotho was M650 in 2005 for both the employees with less than 12 months service and employees with more than 12 months service. This compensation income for most of the research participant is above the given minimum wage and this amount is acceptable in Lesotho wage standard.

One of the key informant said “I consider it as adequate because besides the money they are receiving from the Rand Mutual Assurance, the company pays for their medical costs which are usually very high”. Another key informant was of the view that the research participants were better off than those receiving workers compensation benefits from Lesotho government. The compensation provided in South Africa differs from that of the Lesotho Workmen’s Compensation because South Africa pays part of the compensation as a lump sum and invests the other portion so that an employee can get a pension on monthly basis. However, in Lesotho an incapacitated employee gets once off payment of his or her compensation.

In order to make an objective assessment of the adequacy of the benefits received it is essential to compare the benefit levels with the food poverty line and poverty line in Lesotho. Lesotho uses two sets of poverty lines being food and non-food poverty lines to identify poor and very poor household. The households are classified as being poor if their consumption value is below overall poverty line but above food poverty line, while the households whose consumption value falls below food poverty line are considered to be very poor, (Lesotho Bureau of Statistics, 2003). The Lesotho Bureau of Statistics (2010) reports that, due to 50% increase in food prices since 2003, the value of monthly per person food poverty line has increased from M84 in 2003 to M100 in 2010 while the poverty line increased from M150 per month to M185 per month in 2010 with an average household poverty line of M870 per month. This implies that in terms of food poverty line all research participants have their incomes above food poverty line. Therefore, they should all be able to meet their food requirements. However, with an average household poverty line of M870, only 23% of research participants would be classified as poor as their income fall below the
poverty line while 77% of the research participants would be better off because their compensation income is above poverty line.

Lesotho Bureau of Statistics (2010) argues that the average household expenditure in Lesotho is just above 100 Maloti per month. The report showed distinction between urban and rural expenditure by indicating that the urban households of 4 people would need 3,000 Maloti per month while rural households that consist of 5 people can survive on 1,800 Maloti. Given that most research participants in the study support between 5 to 8 people with their income, approximately 7 participants would afford household expenditures as their compensation ranges from M 2, 900 and above M 3, 400 per month. However, majority of the research participants would not meet some of the household expenditures such as sending their children to school or buying other assets because their monthly compensation falls below poverty line. These research participants would require additional support both formal and informal social support systems that will prevent them from falling into poverty.

The household size also poses challenge in the distribution of compensation income among household members. Owuamanam & Alowolodu (2010) observe that prevalence of poverty is high in households with large families. They further note that children form small families tend to be better educated and healthier than the once from large households. Given that the 39 research participants have between 5 to 13 dependants and only 18 participants support 1 to 4 dependants, it means that the compensation income would not be adequate for the needs of all household members. For instance, the Disaster Management Authority (2010) show that the price of 12.5kg of maize meal which is Lesotho’s staple food cost 42.50 to 70.00 Maloti depending on the brand. Moseley & Earl (1997), observe that as a general rule an average person needs 16 kgs of maize meal per month if it is all he or she is consuming. This shows that the price of 12.5kg of maize meal is between 42.50 and 70.00 Maloti. Therefore, this would imply that for a family size of 5 to 8 people a research participant would spend between 272.00 to 716.00 Maloti per month on maize meal.

Although research participants are of the view that the compensation they receive is not adequate for their needs, the compensation provided to workers under COIDA are different from that of workers in who incurred work related injuries in Lesotho. The
findings of the study revealed that Lesotho also provide support to workers who encounter work related illnesses and injuries or die because of the injury. The key informant from the Ministry of Labour indicated that the compensation provided by the organisation benefits all workers except government employees who are pensionable, members of armed forces, members of the police services and members of the correctional services. The compensation is provided to the employees who sustain injuries and contact illnesses that are work related according to Lesotho Workmen’s Compensation Act of 1977. According to the Key informant, the compensation provided in Lesotho differs from South Africa because in Lesotho an incapacitated employee gets once off payment of his or her compensation while in South Africa the compensation is divided into two parts, an employee receives part of the money as a lump sum and another part is invested so that an employee will receive it as a pension on a monthly basis.

It is important to note that COIDA is the major source of income that mine workers who retired on account of disabling mine injuries in Lesotho are dependant on for their subsistence. The amount of compensation provided to permanently disabled workers under COIDA is higher compared to the amount paid to workers who became permanently disabled under Lesotho Workmen’s Compensation. An employee who incur work related permanent disability in South Africa receives 15 times his monthly earnings to a minimum compensation of R12, 375 and a maximum of R67, 950, while in Lesotho an employee receives a sum equal to the earnings for 54 months with the highest amount paid being R13, 500 and the lowest amount of compensation paid is R1,800. The difference in the amount of compensation paid is attributable to the low salaries paid to workers in Lesotho industries as South Africa pays much better salaries because of its strong economic base.

From the findings, it appears that the compensation provided to research participants was less than what they were earning before their disablement. The research participants did not seem to realise that compensation is never a 100 percent replacement of income but it is just a percentage which in terms of ILO Convention 102 ranges from 40 percent to 60 percent.
4.4 Access to benefits

The second objective sought to establish the challenges experienced by retired mine workers in accessing their benefits. The research participants were also asked if they had experienced any delays in accessing their benefits and the reasons for such delays. Table 5 below shows the period that mine workers waited before they could receive their first monthly compensation.
Table 5: Waiting period before receiving first Compensation

<table>
<thead>
<tr>
<th>Number of Mineworkers</th>
<th>Waiting period before first compensation</th>
<th>Type of Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>1-5 months</td>
<td>2 leg amputees</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 lost eyes</td>
</tr>
<tr>
<td>8</td>
<td>6-11 months</td>
<td>5 leg amputees</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 head injured</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 arm injured</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 spinal cord injury</td>
</tr>
<tr>
<td>16</td>
<td>1-3 years</td>
<td>7 leg amputees</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 head injured</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2 arm amputees</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 spinal injured</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 lost an eye</td>
</tr>
<tr>
<td>7</td>
<td>4-6 years</td>
<td>5 leg amputees</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2 spinal injured</td>
</tr>
<tr>
<td>3</td>
<td>7-9 years</td>
<td>2 leg amputees</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 arm amputee</td>
</tr>
<tr>
<td>1</td>
<td>10-12 years</td>
<td>1 lost an eye</td>
</tr>
<tr>
<td>1</td>
<td>13-15 years</td>
<td>1 arm amputee</td>
</tr>
<tr>
<td>1</td>
<td>16-18 years</td>
<td>1 leg amputee</td>
</tr>
<tr>
<td>2</td>
<td>19-38 years</td>
<td>1 leg amputee</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 all fingers removed</td>
</tr>
<tr>
<td>5</td>
<td>Cannot remember</td>
<td>4 leg amputees</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 spinal injury</td>
</tr>
<tr>
<td><strong>TOTAL:</strong> 47</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The issue of timely payment of compensation is very critical in social security therefore, any delay in the payment of compensation undermine the core objective of social security. The waiting period of 3 months is too long; 1 to 2 months at most.
would be enough as the delay in payment defeat the whole notion of social security and increase the problem of income insecurity.

The above table reveals that only three (3) research participants were able to receive their first compensation between 1 to 5 months. These participants reported that they did not encounter any delays because their compensation was paid in their first or second month after their release from the hospitals. According to the key informant, some of the injured mine workers’ compensation is delayed in cases where the reports from the doctors fail to reach the RMA offices on time. The doctor’s report shows the extent of injuries sustained by the worker and enabled the insurance company to calculate the amount of compensation that the disabled worker is entitled to.

The participants who waited for longer than one year identified a number of factors that led to the delay of accessing their compensation. For instance, the persons who took the longest time before receiving the compensation were two research participants who received their first compensation in 19-38 years. He mentioned that his compensation was delayed because when he left the mines he was not informed about the existed of the monthly pension. He claimed that he was told it by an official from TEBA office when he went for a meeting where all former mine workers were invited. The other research participants’ reasons for delay were:

“My accident report was not taken to the hospital on time”

“I spent a long time in hospital after my injury because I was severely injured”

All the research participants complained about the location of TEBA offices by arguing that the offices are situated far from their villages. Seven research participants who are using wheel chairs reported that the use of public transport to access the pay station has become a challenge because they stay far from the bus stops. They stated that in order for them to reach the bus stop they have to find at least one person that would accompany them to the bus stop and assist when entering the taxi as some passengers are not willing to help them. However, four of these seven participants who are using wheel chairs mentioned that their spouses or children usually accompany them to the bus stop. Chitereka (2010) also mentions that, the available
mode of transport in Lesotho is not designed to respond to the needs of people with disabilities. He argues that the only possible public transports in Lesotho are taxis and buses, and that all these transport options are not designed to accommodate people with disabilities.

The research participants also indicated that TEBA offices are situated in town and it becomes costly for them to access the services because they have to pay transport costs which are high. Twenty-five research participants stated that they have to borrow money for transport from their neighbours and friends in order to get to the offices and they normally repay the money after receiving their compensation. The research participants showed that their total transport cost to TEBA offices range from R20 to R40. According to Lesotho Bureau of Statistics (2003), households in Maseru urban takes 0-14 minute to reach public transport services and they walk 1-500 metres which is relatively shorter distance compared to other regions.

Twelve research participants complained about the time they spent at the pay office before they receive services. They indicated that the queues are usually long which cause them to wait for 2 hours or longer before being served. The other research participants also mentioned that they sometimes wait for long hours in the queues when the computers are down. The other research participants mentioned during the pay days they have to wake up early in order to avoid long queues.

Even though the first claims of compensation were delayed, all the research participants confirmed that after the first claim all payments were being paid timely. They indicated that they usually receive their compensation income from the 23rd to the 25th of every month, and that to access the money they are required to bring with them an identity document in the form of a passport or temporary travel permit as well as a bank deposit booklet. They mentioned that failure to produce an identity document also delays payment.
4.5 Social Support systems

The third objective of the study was to investigate the existence of complementary social support systems for retired mine workers with physical disability. The assumption behind this objective was that these injured mine workers could be drawing on other social support systems for their survival. The research participants were asked whether they have other social support systems in place. This was based on the understanding that African people utilise a variety of social support systems in order to enhance their wellbeing. The researcher believed that alternative social support systems would complement the existing social protection thereby help to alleviate poverty in the households of mine workers who retired on account of disabling mine injuries. Most research participants confirmed that they make use of both formal and informal social protection arrangements to meet their households’ needs.

The research participants identified different types of informal arrangements that they utilise. According to Oduro (2010), informal social protection mechanisms range from drawing down on one’s financial assets and the disposal of physical assets to borrowing from friends and relatives, buying on credit and begging. A total of 11 research participants mentioned that they participate in income generating activities such as knitting jerseys and sewing table clothes, selling home brewed beer and hiring out their tractors to other people to plough fields while another one showed that he hire out his tractor to other villagers during cultivation seasons. The other eight research participants indicated that they earned their extra income by engaging in agricultural activities such as sale of vegetables, poultry projects, selling eggs, rearing pigs or goats and selling mohair. The Ministry of Local Government (2006) confirmed these views and noted that majority of the poor in Lesotho derive their livelihoods from rearing animals, cattle, sheep, and goats, producing wool and mohair while some community groups manufacture oil, or other income generating activities such as dress making, crafts and vending activities.

Casual labour was also identified by the Disaster Management Authority (DMA) as another important source of cash income for the very poor and poor households in
Lesotho. According to DMA (2008), casual labour contributes up to 35% of total annual household income. The report indicates that the daily wage of casual labour has increased to an estimated of R20 for an average of 5 hours. However, thirty-one research participants identified various reasons why they could not engage in either casual labour or other income generating activities by providing responses that included:

“I cannot engage in any physical duties because of my injuries”

“I tried to look for a casual work two months after I returned home but I couldn’t find any… I think people are reluctant to give us jobs because they think we would not perform our work like ordinary people because of our disabilities”

The other research participants mentioned that after sustaining the injuries, the mines provided them with vocational skills which included mechanical work, leather work, painting and other related skills. These skills allowed injured workers who were not ready to retire to remain in the mines and do other jobs within the mining sector. For instance, ten research participants explained that after their discharge from the hospital they decided to stay in the mines where they were given minor jobs which paid less salary. Some of the responses from the research participants were;

“After losing my leg I was assigned other easy duties in the mines… I repaired hard hat lamps for people working under ground”

“I was a driver of mine elevator but after my injury I became an office cleaner in the mine offices”

“I worked at the mining sector registry office”

“I had to work as a hospital porter at the mine hospital”.

These skills also enabled mine workers who retired due to mine injuries to start their own income generating projects so that they become self reliant when they arrive at
their home countries. However, most of the research participants who were provided with vocational training reported that they did not use their skills when they arrive in the Lesotho. One research participant who was trained to repair mine helmet globes said he did the job for only two weeks while in the mine but stopped after that he returned to Lesotho. The two respondents were also trained on repairing and making shoes but one reported that he could not do the job because he failed the test while another indicated that he lacked capital for equipment. Another research participant who was trained to sew jerseys mentioned that he could not continue with the job because the mining industry could not give him a sewing machine promised while the other respondent who was trained on making tomb stones could not use his skills in after he arrived in Lesotho because he did not have grave stone moulds.

It is clear from the responses that injuries prevented some of retired mine workers with disability to engage in casual work while other research participants could not engage in income generating activities because they lacked capital to start businesses. The Ministry of Local Government (2006) also affirms that some income-generating activities in Lesotho fail because people lack ready markets and requisite marketing skills, and technical knowhow to maximize benefits.

A total of thirty-nine research participants indicated that they were members of funeral schemes and that they provide social support to their families if a member dies. Only four of these research participants were members of the formal funeral insurance groups while thirty five research participants were members of community initiated funeral schemes. In Lesotho, burial societies are established based on Basotho culture of reciprocity, therefore, they are voluntarily formed by people who cannot financially and socially afford burial cost to assist one another during times of happiness and sorrow, (Mapetla et al., 2007). According to the research participants, each member of the funeral scheme is expected to pay a monthly contribution that ranges from 10 Maloti to 100 Maloti, while others mentioned that in their schemes they contribute money ranging from 20 Maloti to 150 Maloti once only when a member or his family member dies. The research participants stated that the amount of subscription paid for funeral scheme varies from one scheme to another also that the amount paid depends on the benefits provided by each funeral insurance scheme. The support that the participants receive from the funeral schemes include oxen,
grocery and a coffin to the family of the deceased while some schemes gives money to the family of the deceased so that they use it to cover funeral expenses. The participants also showed that they are also allowed to borrow money from the funeral schemes that they usually pay back with interest.

Four of the thirty-nine who are members of the funeral schemes revealed that they were also members of the savings schemes. The research participants indicated that in these savings schemes each member pays money once at the beginning of the year, the members then randomly select the first group to receive the money and this group is expected to return the money within three months with an interest that ranges from 10 percent to 20 percent so that the money would circulate to other groups which are also expected to do the same. According to the participants, the money is shared among the members at the last month of the year. Three of these four research participants who are members of the savings schemes showed that they are also members of the grocery associations. They stated that the money for the grocery association is contributed monthly and that they use the money to buy grocery items such as foodstuffs, toiletries and other household cleaning materials which they share amongst members at the end of every year. One research the research participants who were members of savings scheme indicated that his wife is also a member in another association in the village where members buy each other kitchen items such as pots, dishes and other utensils at the end of every second month.

Only five of the forty-seven research participants specified that they receive financial and material support from relatives and neighbours whenever they have problems. Majority of the research participants mentioned that they were not receiving any support from the relatives and friend. This is because informal social support from relatives has been weakened by modernisation and migration as people have abandoned their cultural practices and norms. Odoru (2010) also mentions that support from relatives is determined by their willingness to provide assistance and their capacity to help. This implies that during this period of recession most people would not afford to provide financial and material support to friends and relatives.

Old Age Pension was identified by two research participants as contributing positively to the households of the beneficiaries as some beneficiaries used it to buy
food and clothes, to pay for school fees, schoolbooks and school transport, and to meet the children’s health needs and in some cases it can be used as capital for income generating projects. Lesotho’s Old Age Pension grant is only accessed at 70 years and above so it rules out the majority of the research participants. It is also unlikely that the majority of those research participants would in future benefit from the Government of Lesotho pension benefit given according to DMA (2010), Lesotho’s life expectancy at birth is 43 years for both males and females.

Other forms of government support include food aid that is distributed to the beneficiaries based on their eligibility for food support. The three participants identified food aid as the main form of support they received from government and non-governmental organisations but they mentioned that the food aid support was for a short period of time. Some of the observations made by respondents were:

“...in 1990, I received 20kg of maize meal on a monthly basis but that only happened for 2 years and stopped, and I don’t know why it stopped”

“I only received food aid for 3 months in 2000 at the Roma Hospital because I had TB”

“I benefited from food aid scheme only in 1988 and 1989 because we had good relationships with the former chief...he was the one who registered me as on the food aid beneficiary list but this current chief refuses to register me and I don’t know why”.

The two respondents who collected their food parcels form the health centres indicated that the food basket contained maize meal, 5 litre pulses, and 1litre of vegetable oil. One respondent indicated that the food parcel he received from the chiefs’ place included sorghum, maize and beans. According to Kaitibie, Moyo & Peri (2008) aid agencies in Lesotho use asset or wealth status as a yardstick for distribution of food aid and other transfers. After the assessment all potential recipients are required to register with the chief/headman before they can qualify for receiving formal transfers. They note that most of the Lesotho food aid is from the United States of America and the European Union and its distribution is coordinated
by WFP, which sets the criteria for identifying food aid recipients. Lesotho food aid comes in different forms as in some instances communities are given free food while in others the aid is provided through food for work initiatives in development projects.

Two respondents pointed out that they received formal support through their involvement in public works programmes. One research participant mentioned that he received support only once in July 2010 when he engaged in a Public Works Programme that took place in the village. He stated that he knew about the programme when one government official approached him and advised him to find a person that can work on his behalf in the public works programme. He indicated that he received 970 Maloti from the project only for one month before the project was terminated. Another respondent mentioned that he was involved in a public works programme once in 2005 where he earned 800 Maloti.

Two government departments, namely Department of Social Welfare and Department of Labour have played a significant role of providing care and support to people with disabilities in Lesotho, including mine workers who retired on account of disabling mine injuries. The Department of Social Welfare was established in 1976 due to the increasing levels of poverty and other social problems in Lesotho. The key informant from Social Welfare pointed out that their organisation provides support to all people with disabilities including the ones that were disabled by mine injuries. According to the informant, the Social Workers in the department perform both preventative and curative roles, and they provide rehabilitative services for people with disabilities. She mentioned that the Department provides psychosocial support to people with disabilities, assistive devices, and vocational trainings such as carpentry, leatherwork and woodwork while agriculture is compulsory to all learners.

The key informant also highlighted that the Department of Social Welfare works in collaboration with non-governmental organisations in the country including other development partners to improve the welfare of all people with disabilities. She indicated that with the support of these agencies the Department operates a centre called Ithuseng Vocational Rehabilitation centre which is located in Maseru district. The centre supports youth and adults with any form of disability by providing them with vocational guidance and training, literacy and numeracy training skills and
vocational skills. When asked about the support the Department offers to the mine workers who retired on account of disabling mine injuries, the key informant mentioned that the mineworkers benefit from services they provide to other people in similar conditions. However, she maintained that TEBA is the one that plays a major role of providing pensions and paying medical expenses of mine workers who were disabled by mine injuries because at the moment Lesotho does not have specific social protection arrangements for all people with disabilities.

Rehabilitation services in the form of physiotherapy, counselling and vocational skills training were provided to 26 research participants. A total of 17 of the research participants showed that counselling service was provided while they were still in hospital while only three of them attended counselling session even after leaving the hospital. They indicated that in counselling sessions they were taught to accept their disability status and HIV/AIDS status. Some participants were also given physiotherapy while they were still in hospital, they were trained how to walk and on the use of crutches, artificial limbs and wheel chairs. Only 6 participants received vocation skills training that would assist them to engage in income generating activities. According to Kaseke (2010), rehabilitation of injured workers is critical because injuries can remove workers from the labour market. He argues that it would be important if rehabilitation look on to the notion of reintegration as it is an important function of social security because at present rehabilitation tends to be largely medical and only serves to help injured workers to regain the use of their limbs.

Another form of support from the Department of Social Welfare is the grant for orphans and vulnerable children. The key informant indicated this grant is given to children from poor household and that the children of the injured mine workers can also benefit from the grant. An applicant needs a letter from the village chief. Thereafter, an officer from the department visits the applicants’ house to make assessments. Furthermore, Chitereka (2010) observes that people with disabilities in Lesotho do not have a special grant to cater for their welfare needs. He notes that the Department of Social Welfare only gives the poor and vulnerable people with disabilities public assistance of one hundred Maloti (R100) a month which is means-
tested and it is barely adequate to cover all the needs of the poorer sections of the people with disabilities.

The participants were also asked if they knew of any association for people living with disabilities and if they were the members of such organisations. The researcher asked this question to determine if the participants are members to any associations because associations provide support to the members. The majority of research participants mentioned that while working in the mining industry they were members of the National Union of Mineworkers (NUM). The members of NUM are expected to pay an annual subscription so that the Union represents and protects the interests while at work. 31 (67%) of the respondents indicated that they were members of NUM, 4 (9%) know NUM but they were not members while 12 (26%) showed they have not heard of NUM. Some of the mine workers who were members of NUM stated that the Union has helped them to get their retrenchment benefits while other respondents indicated that they did not get assistance from the Union because they did not ask for it.

The key informant also mentioned that mineworkers who retired on account of disabling mine injuries and those who are not necessarily members of the union can still benefit from NUM because they are allowed to part of the money that the union have come from the mining industry. NUM has established a training centre called Lesotho Development Centre that provides mineworkers with vocational skills, agriculture skills, business skills and they also assist former mineworkers to start their own income generating projects such as poultry projects. However, the key informant asserts that the projects are not successful because there is no consistent market for the produce. He also argues that Basotho men are reluctant to engage in these projects because they believe that men are supposed to engage in physical jobs while women can engage in minor projects such as piggery and poultry farming that they are trained to do. The union also support members by giving out scholarships for higher education to the wives and children of mine workers for them to further their studies at the universities or other recognised tertiary institutions.

TEBA also supports mine workers who retired because of mine injuries by assisting the Rand Mutual Assurance in the payment of mineworkers’ compensation. TEBA
also assist Rand Mutual by tracing ex-mine workers who are entitled to lump sum compensation and the dependants of the deceased employee. Another role of TEBA Limited is to make transport arrangements for the mineworkers when they go for medical check-ups and when they want to renew their artificial limbs. The office also ensures that disabled mine workers have paraplegic toilets, bathrooms and that their houses are built in areas that are accessible as some of these mine workers stay very far from the main roads.

The key informant indicated that TEBA Limited is a recruitment agency since its purpose is to recruit Basotho workers to work in South African mines. He stated that the office is committed to improving the lives of former mine workers by creating livelihood opportunities in their villages such as poverty alleviation projects, the office also provide care and support services to former mine workers who are infected or affected by HIV/AIDS through their home based care services. These projects also benefit mineworkers disabled by mine injuries who reside in project area.

The researcher asked the research participants about other forms of support that they receive from Rand Mutual Assurance. Most researcher participants indicated that besides the monthly compensation the Rand Mutual provides them with assistive devices such as wheel chairs, crutches, shoes and for people with spinal injuries they build toilets. However, 10 (21%) of the research participants confirmed that they were receiving assistive devices but they were not sure if they were from TEBA Limited or Rand Mutual. The two respondents said; “I know that there is an office called Rand Mutual but I collected my artificial limb at TEBA and TEBA officials were present”, while other said; “I collected my rod and crutches from the TEBA office but there was a white man who was checking our limbs”. The other 27 (57%) respondents also mentioned that Rand Mutual pays for their medical check-ups but only if the illness is caused by the injury.

Similar to the views of other research participants, the key informant from TEBA acknowledged the contribution of Rand Mutual Assurance on the lives of the mineworkers who retired on account of disabling mine injuries. He pointed out that all the services they provide for the mine workers are financed by the Rand Mutual,
TEBA only perform a social responsibility function as it administers projects arranged by Rand Mutual.

4.4 Suggestions for improving Social Protection

Participants were asked to suggest ways of improving social protection for mine workers who retire as a result of work related injuries.

All research participants were of the view that TEBA Limited offices are situated far from their villages. As a result of this, the respondents indicated that in most cases they leave home early to avoid long queues but return late, which is not safe for them. Most respondents suggested that it would be better if many pay points were opened in the district especially in their villages. The key informant also confirmed that TEBA offices are only found in the centres of every Lesotho district, and each district has only one office.

Twenty four research participants stated that the compensation income is not adequate for their needs. Therefore they suggested that the government should also assist them by giving them other assistance such as food aid like other poor people. Another respondent complained by saying, “the government does not care about our welfare as people with mine related disabilities. They are forgetting that while we were still capable the country was benefiting from South African government because of us”. This respondent recommended that the elected officials in parliament should talk about the retired mine workers problems and improve them. According to IOM (2010), Lesotho has been dependent on remittances from the mines in South Africa and mine work is still a significant source of income for the families of mineworkers, contributing greatly to poverty reduction in the country. For instance, in the second quarter of 2010 most remittances that were received in cash from household members abroad were M967 while remittances that were received in-kind from household members abroad was M255, (Lesotho Bureau of Statistics, 2010).

The research participants who were trained in vocational work such as sewing, carpentry and leatherwork but could not continue with the work after their injuries
suggested that they it would be better if they were assisted with capital to start their own income generating projects so that they are able to pay their children school fees. The other research participants mentioned that after their injuries the relationships with family members changed because the wives and children no longer respect them. One of these three respondents mentioned that he is not treated properly by community members because they once attacked him without any reason. He indicated that after his retirement, he opened a shop in the village but the people stole his goods.

According to the responses that research participants provided, it is clear that there is a need to strengthen informal social protection arrangement in order to improve the welfare of mine workers who retired on account of disabling mine injuries. In relation to this, the key informants mentioned that after the injury, the relationship in the household changes because the mine workers sometimes do not accept their status as they complain that they were bewitched by their wives. However, he observed that in such cases these mine workers are allowed to choose the family member whom they prefer to stay with.

It was further suggested that the issues of disabled people in the country could be addressed properly if Lesotho designs its own social security policy. The key informant suggested that Lesotho should develop a social protection policy which will clearly stipulate how issues of all vulnerable groups should be addressed more specifically those of all people with disabilities including retired mine workers.

4.5 Conclusion

Based on the statements responses obtained from the research participants, the researcher can conclude that the compensation that retired mine workers with disabilities receive is reliable because it is provided on a monthly basis to the beneficiaries. Most of the participants complained about the amount of compensation they are receiving by arguing that it is inadequate for their household needs. They revealed that they have to rely on borrowing from friends or neighbours while other
participants indicated that they engage in other income generating activities to complement their income. Besides the monthly compensation that they research participants receives, the key informants identified other forms of support provided by their organisations to the participants.

It is also apparent that not all the retired mine workers benefited from these assistance because majority of the research participants were not aware of the existence of such assistance. As a general view from both the key informants and research participants, both formal and informal social protection arrangements in Lesotho should be strengthened so that they can effectively address the needs of vulnerable people including mine workers who retired on account of disabling mine injuries.
CHAPTER 5: SUMMARY, CONCLUSION & RECOMMENDATIONS

5.1 Introduction

The study sought to investigate social protection arrangements for mine workers who retired on account of disabling mine injuries. The chapter gives a summary of the main findings and draws conclusions from the study. Lastly, recommendations arising from the study are also presented.

5.2 Summary of findings

The following is a summary of the main findings of the study as per study objectives:

Objective 1: To determine the adequacy of the compensation paid mine workers provided the amount of compensation they receive every month

- The majority of respondents (57 %) received a monthly compensation ranging from 400 Maloti to 1,399 Maloti. Only five respondents received between 3,400 Maloti and above per month. All research participants spent most of their compensation income on food, electricity and fuel. Some of the research participants use their compensation to pay school fees and to buy school books and uniform for their children who have completed their primary schools.

- A total of 34 (72%) research participants considered their monthly compensation income to be inadequate for their need. The research participants observed that the compensation they were receiving was lower than their monthly salaries that they used to earn from the mines.

- The compensation income that the research participants were receiving was above food poverty. Therefore, they should all be able to meet their food requirements. However, with an average household poverty line of M870,
only 23% of research participants would be classified as poor as their income fall below the poverty line.

- Because of the high number of dependents, the compensation is evenly spread thus making it difficult for the research participants to meet their needs.

**Objective 2:** To establish the challenges experienced by retired mine workers in accessing their benefits

- The study revealed that the waiting period for compensation was long, thus defeating the objective of social protection. Only three research participants received their compensation after a waiting period of up to 5 months. The waiting period for the majority of the research participants was more than 5 months.

- The research participants feel that the offices were not located within easy reach. It is costly for some beneficiaries as they incur high transport costs. Twenty-seven research participants reported that they usually borrow money for transport from their neighbours and friends in order to get to the offices.

- The findings also reveal that the time that the research participant spent at TEBA office before they received the services was long. The research participants reported that they sometimes wait for two to four hours waiting when the queues are long.

- Participants confirmed that after the first claim all payments were made timely. They indicated that they usually receive their compensation income from the 23rd to the 25th of every month, and that to access the money they are required to bring with them an identity document in the form of passport or temporary travel permit as well as a bank deposit booklet. The failure to produce an identity document in the form of passport was mentioned by the research participants as one of the things that delays the payment of compensation.
Objective 3: To investigate the existence of complementary social support systems for retired mine workers with physical disability

- The findings confirmed that research participants have complementary social protection arrangements that they rely on. The participants make use of formal social protection from government and non-governmental organisations and informal social protection from relatives, friend and community to meet their households’ needs. A total of eleven research participants engaged in income generating activities such as sewing clothes and selling home brewed beer, while only eight research participants engaging in agricultural activities such as sale of vegetables and poultry projects.

- Majority of the participants were members to the funeral scheme which they mentioned assist them by providing their families with money, grocery or coffin when their relatives die.

- The support from the government and non-governmental organisations was limited as only 7 research participants are benefiting from government Old Age Pension, food aid and Public Works Programmes.

Objective 4: To suggest ways of improving social protection of retired mine workers with work related injuries

- The findings reveal that research participants are not satisfied with the location of the paying office. The participants suggested that the services should be decentralised by opening offices near their villages as this would cut their transport costs.

- Lack of capital was identified by some of the research participants as one of the factor that prevents them from engaging in income generating activities. It was suggested that government should address this challenge by assisting them with capital in the form of equipment or farm implements so that they start their businesses.
5.3 Conclusion

The following conclusions are drawn from the study. The mining industry is fraught with risks, and mine workers are exposed to work related accidents usually sustain injuries that lead to their physical disability. This underscores the importance of social protection for mine workers. The study also shows that that physical disability increases household expenditure because of financial burdens such as medical expenses, transport and buying of assistive devices.

It is unrealistic to expect beneficiaries to rely solely on compensation, it is therefore necessary to have different forms of social protection systems to address their needs on a holistic manner. It is also important for the beneficiaries to understand that the benefits they receive are basically compensation and not full replacement of their income.

The mine workers who rely on compensation from COIDA are in a more fortunate economic situation than other people receiving similar benefits in Lesotho. The 5 percent annual inflation increase on the compensation income that participants are receiving is also higher when compared with Lesotho’s inflation rate of 3.4 percent. Moreover, majority of the research participants have their compensation which is above Lesotho’s monthly minimum wage of M650 and this allow them to afford the basic necessities and to be above the poverty line.

The compensation system is reliable as the beneficiaries are able to access their payment on time. The centralisation of the office compromises accessibility. Decentralisation would make the services more accessible, particularly given their physical conditions.

It can be said that disabled research participants follow several livelihood strategies which secure income and improve their living standards. Complementary social support systems are available for mine workers in the form of income generating projects. The dependence on support from relatives and friends alone is not reliable as these traditional support systems have been weakened by factors such as urbanisation,
migration and declining economy. The support from relatives also depends on the willingness of the relatives to provide assistance and also their capacity to provide support.

Physical disability is still a constraint to most of them since it makes it difficult for them to engage in other income generating activities thus they are wholly dependent on their monthly compensation.

5.4 Recommendations

There is a need to put emphasis on reintegration programmes such as physiotherapy and vocational skills training, the efforts should also concentrate more on reintegration programmes such as psychological support and family reunification. Educational workshops focusing on coping strategies are essential in order to prepare them for the future challenges. This is would address some difficulties that these retired mine workers experience when they arrive home. There is need to monitor progress of these retired mine workers.

In view of the fact that the retired mine workers are not a homogeneous group, there is a need for the government to extent assistance to those with low compensation income in order to enhance their quality of life.

The social protection in Lesotho is rudimentary there is therefore a need for social protection policy. The existing informal support arrangement should also be strengthened by educating people about the importance of communal relationships or kinship ties. This is because it appeared from some responses that some of the research participants were not treated properly by community members because of their disablement while in some households it appears that research participants left their wives because they did not accept their disability status by claiming that their wives bewitched them.

The study was conducted in Maseru urban therefore, the findings of this study may not be generalised because of the smaller sample size. There is thus a need for more
studies which consist of larger sample sizes and that also covers other districts that were excluded in this study.

The research participants for the study were mainly mine workers who retired on account of disabling mine injuries. It would be important if future studies investigate the role of other family members such as wives and children in supporting these retired mine workers including the challenges that they face as a result of the physical disability.
REFERENCES


Appendix A: PARTICIPANT INFORMATION SHEET

Good day,

My name is Thuso Tlhaole, and I am registered for Masters Degree in Social Development at the University of the Witwatersrand. As part of the requirement for the degree, I am conducting research on Social Protection arrangements for retired mine workers with physical disability in Maseru urban-Lesotho. It is hoped that the findings from this research will improve social protection systems for mine workers disabled by mine injuries in Lesotho.

I therefore wish to invite you to participate in my study. Your participation is entirely voluntary and refusal to participate will not be held against you in any way. If you agree to take part, I shall arrange to interview you at a time and place that is suitable for you. The interview will last approximately one hour. You may withdraw from the study at anytime and you may also refuse to answer any questions that you feel uncomfortable with answering.

With your permission, the interview will be tape-recorded. No one other than my supervisor will have access to the tapes. The tapes and interview schedules will be kept for two years following any publications or for six years if no publications emanate from the study. Please be assured that any name and personal details will be kept confidential and no identifying information will be included in the final research report.

As the interview will include sensitive issues, there is the possibility that you may experience some feelings of emotional distress. Should you therefore feel emotional distress in any way during the interview, free supportive counseling services may be provided by the Department of Social Welfare. They may be contacted at

Please feel free to ask any questions regarding the study. I shall answer them to the best of my ability. I may be contacted at 63000267 or +27 785086114. Should you wish to receive a summary of the results of the study, an abstract will be made available on request.

Thank you for taking the time to consider participating in the study.
Yours sincerely

__________________________
Thuso Tlhaole
Appendix B: CONSENT FORM FOR PARTICIPATION IN THE STUDY

I hereby consent to participate in the research project. The purpose and procedures of the study has been explained to me. I understand that my participation is voluntary and that I may refuse to answer any particular items or withdraw from the study at any time without any negative consequences. I understand that my responses will be kept confidential.

_______________________________________
Name of participant

_______________________________________
Date

_______________________________________
Signature
Appendix C: CONSENT FORM FOR AUDIO-TAPING OF THE INTERVIEW

I hereby consent to tape-recording of the interview. I understand that my confidentiality will be maintained at all times and that the tapes will be destroyed two years after any publication arising from the study or six years after completion of the study if there are no publications.

___________________________________
Name of participant

___________________________________
Date

___________________________________
Signature
Appendix D: SEMI-STRUCTURED INTERVIEW SCHEDULE
FOR RETIRED MINE WORKERS

1. DEMOGRAPHICS:
   1.1 Age (in years)
   1.2 Marital Status
   1.3 Highest level of Education
   1.4 Number of Dependents (Number of people you support with your income)

2. COMPENSATION:
   2.1 When did you start working in South Africa?
   2.2 When did you sustain mine injury?
   2.3 Type of disability you sustained?
   2.4 When did you retire from South African mines?
   2.5 When did you return to Lesotho?
   2.6 Were you compensated for the injury?
   2.7 What was the waiting period?
   2.8 How is compensation paid? (monthly or weekly)
   2.9 How much is the compensation?
   2.10 What do you use the compensation for?
   2.11 Who collects your compensation?
   2.12 How long does it take to get your compensation/ have you experienced any delays?
   2.13 Is the compensation adequate for your needs and those of your dependants?
   2.14 Are there other benefits you are receiving from your former employer (mines)?

3. OTHER SOURCES OF SUPPORT:
   3.1 Do you have other social support systems that you rely on (Family/community/ church/ NGOs/government)?
   3.2 What forms of support do you receive/ have you received?
   3.3 How often do you receive this support?
3.4 How adequate and reliable is this support?
3.5 Do you have private sources of support (savings, occupational pension or insurance)?
3.6 Have you heard of any organisation for disabled people in the country/your community?
3.7 Are you a member in such organisation?
3.8 What kind of support do these organizations offer for mine workers disabled by mine injuries?
3.9 Since the accident have you engaged in any income generating activity?
3.10 If yes, what activity are you engaged in?
3.11 Did you receive any skill training after the injury?
3.12 If yes, who provided the training?
3.13 Do you have any school-going children?
3.14 Who pays for your children education and health care?

4. REHABILITATION:
   4.1 After the injury did you go to rehabilitation center?
   4.2 If yes, for how long?
   4.3 If No, why?
   4.4 What was the nature of rehabilitation?
   4.5 Are you currently going for medical check-ups?
   4.6 How often do you go?
   4.7 Who pays for the medical costs?

5. GENERAL:
   5.1 In your opinion, what are the challenges faced by mine workers who retired on account of disabling mine injuries in Lesotho?
   5.2 Can you suggest ways in which this problem can be solved?
   5.3 In your opinion, what are the challenges faced by mine workers who retired on account of disabling mine injuries in Lesotho?
   5.4 Can you recommend ways in which this problem be solved?
Appendix E: SEMI-STRUCTURED INTERVIEW SCHEDULE FOR KEY INFORMANTS

1. When was the organisation established?
2. What is the purpose of this organisation?
3. What role does the organisation play regarding retired mine workers with physical disability?
4. What kind of support does the organisation provide to mine workers disabled by mine injuries?
5. How often do you provide support for these retired mine workers?
6. Do you provide any skills training for retired mine workers with disability?
7. If yes, what type of training do you provide?
8. Do you offer counseling to the mineworkers who retired on account of mine injuries?
9. How often is the counseling provided?
10. Beside the support you provide, what other support services do you feel the retired mine workers with disability need?
11. Do mine workers who retired an account of disabling mine injuries get support from government?
12. In your opinion do you think the compensation that they receive from South Africa is adequate?
13. In a case where the mineworker dies, is the compensation transferred to his beneficiaries?
14. What challenges do mine workers disabled by mine injuries face?
15. What can be done to overcome these challenges?