

**Title:** Staying connected: remittances and ties to home among young adult rural-origin South African migrants

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### **Background and theoretical motivation**

In low- and middle-income countries (LMICs), rural-origin residents often undertake migration as a livelihood strategy motivated by both personal and household needs. In response to structural and economic constraints in rural areas, migration to urban centres may serve to diversify income sources and reduce vulnerability. While individual motivations are important (Posel 2001<sup>1</sup>), migration decisions are frequently collective, aimed at supporting families and fulfilling social obligations (Collinson & Biyase, 2020<sup>2</sup>). This perspective is captured in the New Economics of Labour Migration (NELM) theory, frequently applied to the sub-Saharan African context, that conceptualises migration as a household strategy to minimise risk and protect against economic shocks (Stark & Bloom, 1985<sup>3</sup>).

Complementing this, social network theory highlights how migration is facilitated and sustained by social connections that involve reciprocal responsibilities (Massey et al. 1993<sup>4</sup>). Migrants can leverage social networks to better manage risks associated with movement, often receiving support from origin household members with childcare or family responsibilities, while sustaining community ties and maintaining investment in the origin household (Posel 2001<sup>1</sup>). Households can benefit from migration through the receipt of remittances which can improve standards of living and quality of life, and even health. Understanding migrants' remittance behaviour and ties to home can offer important insights into the potential role of migration in poverty reduction, economic development and social cohesion. However, there is a lack of suitable longitudinal data that capture these dimensions, in particular from the perspective of the migrant themselves (Collinson & Biyase, 2020<sup>2</sup>).

Remittance behaviour and social connectedness to origin are influenced by the spatial form of the migration (internal versus international, rural to urban, rural to rural), the degree of permanence of the move (temporary versus permanent relocation); economic outcomes associated with the move (employment, type of employment); characteristics of the migrant (including gender), family structure and cultural and social norms<sup>1,5</sup>. In South Africa, patterns of migration and migrants' connections to origin have been greatly influenced by the enduring effect of Apartheid-legislated movement and residence restrictions. Now thirty years after the end of Apartheid, migration within the country is still often temporary, with migrants retaining connections to origin households through regular visits, communication and remittances, knowing they will ultimately return home after a period working away. With increasing feminisation of internal migration, children may be less likely to co-reside with their mothers (or fathers) and are commonly left in the care of alternative family members (Hall and Posel, 2019<sup>6</sup>). Thus, remittances may serve to support a child through assisting the household of origin and caregiver. However, our understanding of the determinants of remittance behaviour is underdeveloped, in particular in relation to internal migration.

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<sup>1</sup> Posel, D. (2001) How Do Households Work? Migration, the Household and Remittance Behaviour in South Africa. *Social Dynamics* 27(1):165-189.

<sup>2</sup> Collinson, M., & Biyase, M. (2021) Migration and remittances in South Africa. In A. Oqubay, F. Tregenna, & I. Valodia (Eds.), *The Oxford handbook of the South African economy*. Oxford University Press.

<sup>3</sup> Stark, O. & Bloom, D. (1985) The New Economics of Labour Migration", *American Economic Review*, papers and proceedings, 173-178.

<sup>4</sup> Massey, D.S. et al. (1993) Theories of international migration: a review and appraisal. *Population and Development Review*, 19(3), 431-466.

<sup>5</sup> Pendleton, W. et al. (2006) Migration, remittances and development in Southern Africa. SAMP Migration Policy Series No. 44. Cape Town: Institute for Democratic Alternatives in South Africa

<sup>6</sup> Hall K. & Posel D. (2019) Fragmenting the family? The complexity of household migration strategies in post-apartheid South Africa. *IZA Journal of Development and Migration* 8(2).

Using three waves of data from a young adult cohort of internal migrants from a common rural-origin community of South Africa, the aims of this paper are to 1) describe remittance patterns among migrants over time, 2) characterise migrants' connections to their origin households (in terms of frequency of visits and communication with home) and 3) identify the sociodemographic determinants of remittance behaviour, focusing on individual, child, and migration-related factors. This analysis will address the following sub-questions i) Does remittance behaviour differ by age and sex? ii) What is the relationship between education level, health status and remittance behaviour? iii) How does duration of migration and migration destination affect remittance behaviour? iv) Does co-residence with children affect remittance behaviour of migrant parents?

## Methods

### Data and sample

The paper uses data from the Migrant Health Follow-Up Study (MHFUS), a nested cohort of the Agincourt Health and socio-Demographic Surveillance System (HDSS). The Agincourt HDSS is located in the rural sub-district of Bushbuckridge, Mpumalanga Province, and has collected over 30 years of longitudinal data from a geographically defined population of approximately 116 000 people and 20 000 households (Kahn et al., 2012<sup>7</sup>). The MHFUS cohort is based on a simple random sample of 3800 18–40-year-olds drawn from the Agincourt HDSS population in 2016 (Ginsburg et al., 2024<sup>8</sup>). All cohort participants have origin households in the HDSS study area. At baseline, 43% of the cohort had migrated away from origin, and the study subsequently tracked cohort members who remained living in the HDSS study area, those who migrated, and those who returned following a period away. Between 2018 and 2022, cohort members were interviewed four times, with n=3036 participants interviewed in the fourth study wave. Of the four interviews, Waves 1 and 4 were face-to-face where participants were visited at their places of residence, and Waves 2 and 3 were telephone-based. Between the first study wave in 2018 and 2022 (Wave 4), 96% of those interviewed at baseline were retained in the sample. At each data collection wave, information was collected on participant's demographic, health and socioeconomic conditions – including employment status, health conditions and behaviours. A consistent set of questions on remittances and social connections were included in the questionnaire from Wave 2. Wave 2 also introduced a section into the questionnaire on participants' children and their corresponding living arrangements.

The analytic sample for this study is restricted to male and female MHFUS participants who were living in destinations beyond the Agincourt study area during the three waves (Wave 2, 3 and 4) in which remittance and co-resident children information was collected. A total of 1959 participants contribute data to the analysis – with 66.36% (n=1300) contributing data at all three waves (since these individuals were continuous migrants), 14.29% contributing two waves of data (since they were living away from home for two of the three waves) and 19.35% contributing a single wave of data (these were either participants who initiated a first migration at Wave 4; or who spent only one of the three waves living away from the origin area).

### Analysis Methods

The analysis includes frequency distributions of the sociodemographic characteristics, patterns of remitting and social connections of migrant participants at each of the three study waves and across waves. Descriptive analysis (chi square tests) are used to identify the relationship between

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<sup>7</sup> Kahn, K. et al. (2012). Profile: Agincourt health and socio-demographic surveillance system. *International Journal of Epidemiology*, 41(4), 988–1001.

<sup>8</sup> Ginsburg, C. et al. (2024). Cohort Profile: Migrant Health Follow-Up Study (MHFUS) of internal migration in South Africa. *International Journal of Epidemiology*, 53(4).

employment, frequency of visits home and remittance behaviour (since these are tightly interwoven processes).

In multivariate analysis we use logistic regression to model the dichotomous outcome: 0) did not remit; 1) did remit based on a question that asked migrant participants about whether they typically send money or goods back to their origin households when they are away. We fit the models for each of Waves 2 – 4. We then use Stata's xtset commands for panel data to produce random-effects logit models (xtlogit) on a long format data structure.

We analyse participants' age, sex and educational attainment. To explore whether participants who are managing a chronic condition are more or less likely to remit to origin, we include in the models an indicator of participant's health status based on whether they self-report having received a diagnosis of a chronic illness. We examine internal migration destination by differentiating between migrants who relocated to surrounding parts of the Mpumalanga province outside of the study area (i.e. at shorter distances from their origin households) from those who moved to the Gauteng province (South Africa's economic hub with a majority urban population) or to other, more distant provinces. We also examine the duration that a participant has been living in the current place of residence, measured as the number of waves in which we observe the participant living outside of the study area, to differentiate longer from shorter lengths of residence. We also examine remittance behaviour in relation to patterns of child co-residence.

### **Preliminary Findings**

In terms of the characteristics of MHFUS migrant cohort members Waves 2–4, a larger proportion are male (on average 57% across the three waves), and approximately three quarters of migrant participants had completed high-school and/or had further tertiary education. Most participants were employed between Waves 2 and 4 with a notable reduction in employment during Wave 3 which corresponded with the COVID pandemic period of lockdowns. While the largest proportion of participants had permanent employment, on average, 23% of participants indicated that their employment was not permanent at each wave. The proportion of participants reporting a chronic health condition increased slightly over time with 12.1% of Wave 4 migrants indicating that they had a diagnosis compared with 6.5% in Wave 2. Most migrants had relocated to a destination in the Gauteng Province or beyond to other provinces outside of Mpumalanga. Approximately a third of the migrant participants reported not having children. Of the two-thirds of migrants with children, about a third of participants co-resided with their children in a migrant destination, while a greater proportion of participants with children reported that their children resided elsewhere (on average 73% over the three waves). Levels of remitting among migrants varied across waves with the proportion of migrants remitting dropping to 32% in Wave 3 from 44% in Wave 2 and increasing to 51.7% of migrants in Wave 4. This likely echoes the trends in employment, and the effects of the Wave 3 COVID pandemic period on livelihoods. In terms of continuity of remitting, of those who remitted in Wave 2, 45.6% remitted in Wave 3; of those remitting in Wave 3, 67.7% remitted in Wave 4 and only 14.9% of continuous migrant respondents remitted in all three waves.

Remittances may take the form of monetary transfers, but participants commonly reported support to households in the form of food, mobile phone airtime, household assets or clothing. The recipient of migrant remittances was most commonly a female family member (mother, grandmother, or sister - between 76% and 82% of migrant remitters indicated this group of recipients). The largest proportion of migrants indicated regular visits home (45% of Wave 2 and Wave 4 migrants, and 37% of Wave 3 migrants visited home regularly), with between 20-29% visiting irregularly or never. In relation to continuity of connections home, 47.7% of those reporting regular visits in Wave 2 continued to visit

home regularly in Wave 3, while 63.4% of those who visited regularly in Wave 3 continued to do so in Wave 4. Only 12.1% of continuous migrants reported regular visits in all three waves.

In bivariate analyses, remitting was significantly associated with being employed (between 85% and 92% of employed sample members indicated that they had remitted to origin households,  $p < 0.001$ ). A significant association between remitting and frequency of visits home was also observed at each study wave ( $p < 0.001$ ). Results of the random-effects model of remittance behaviour is presented in Table 1. Older age and male gender was significantly associated with higher odds of remitting. Living in Gauteng (or more distant provinces) versus Mpumalanga, and longer duration of residence away was further significantly associated with remitting to origin. The odds of remitting were significantly higher if migrants had children with whom they were not co-resident.

### Implications

These findings provide valuable insights into remittance behaviour among internal migrants from a rural South African origin area. Remitting is not universal but strongly associated with employment and the strength of connections home. Few studies have investigated these trends from the point of view of the migrant rather than the household, and few studies have captured trends in remittances over time. Understanding migrants' remittance behaviour and ties to home can offer important insights into how migration can support rural communities, and ultimately promote poverty reduction, economic development and social cohesion.

**Table 1 – Random-effects logit model of remittance behaviour Waves 2 – 4**

Outcome: Remit		OR	95% CI
Age	Continuous	1.08***	(1.06 1.10)
Sex	Male	1.48***	(1.25 1.75)
	Female (Ref)	~	~
Education status	Incomplete high school or lower (Ref)	~	~
	Completed high school or post school	1.32**	(1.10 1.58)
Chronic condition diagnosis	Yes	0.76*	(0.58 0.99)
	No (Ref)	~	~
Province of current residence	Mpumalanga (outside Agincourt)	~	~
	Gauteng and beyond	1.37***	(1.17 1.61)
Migration duration	1 Wave	0.50***	(0.36 0.70)
	2 Waves	0.74*	(0.55 0.98)
	3 Waves	0.94	(0.72 1.21)
	4 Waves (Ref)	~	~
Child co-residence	No children (Ref)	~	~
	Only non-co-resident children	2.04***	(1.69 2.45)
	Co-resident children	0.78*	(0.61 0.99)
Study wave	Wave 2 (Ref)	~	~
	Wave 3	0.36***	(0.29 0.46)
	Wave 4	0.87	(0.67 1.14)
Constant		0.05***	(0.02 0.09)
*** $p < 0.001$ , ** $p < 0.01$ , * $p < 0.05$		N observations	4765
		N groups	1934
		Wald Chi <sup>2</sup>	405.62 ( $p < 0.001$ )