PART THREE

Children Count – The numbers
According to the South African Constitution, everyone in South Africa has a right to adequate housing, health care services, sufficient food and water, social security and basic education. Children are specifically mentioned, and every child has the right to basic nutrition, shelter, basic health care services and social services. These form part of what are collectively known as socio-economic rights. While these rights are guaranteed by the Constitution, the question is: How well are we doing as a government and as a society to make sure that these rights are realised for children?

The only way we can really answer that question is by monitoring the situation of children. Most data about the social and economic situation of South Africans does not focus on children, but instead counts people, families or households. This is standard for national data collected by central statistics organs, such as Statistics South Africa. But it is of limited use for those interested in children’s rights and well-being. We need data that tells us specifically about the situation of children in South Africa, which we can then use as a tool for measuring the realisation of their rights.
In 2005, the Children’s Institute launched a project called Children Count – Abantwana Babalulekile (isiXhosa for ‘children are important’). The project presents child-centred data on basic demographics and care arrangements for children, as well as on many of the areas covered under socio-economic rights. It draws on the most recent data from Statistics South Africa as well as on administrative data from relevant government departments. There is still a lot of information that is not available, but we hope that this project makes a good start towards monitoring the situation of children in South Africa and the realisation of their socio-economic rights.

Whenever new data is released, we will make it available on the Children Count – Abantwana Babalulekile web site at: http://www.childrencount.ci.org.za. As this project continues and new data is included with the release of national surveys, we will be able to track changes in the conditions of children and their access to services over time.

In this first edition of the South African Child Gauge we focus on a selection of indicators related to demographics and socio-economic rights. The tables on the following pages give basic information about care, health status, housing, water and basic services, social security, and education. Each table is accompanied by commentary that provides some context and gives a brief interpretation of the data. The data is presented for all South African children where possible, and by province. You can find more detailed information and a wider range of data – disaggregated by age, sex and race¹– and accompanying web links, documents and interpretation on the Children Count – Abantwana Babalulekile web site.

**Child-centred data**

The sources of data

There are a number of data sources that we have used for this project. Some are administrative databases used by government departments to monitor the services they deliver. The administrative sources we have used are from the Departments of Health, Education and Social Development. Some of the HIV/AIDS data we have used are from the ASSA model, a statistical model developed by the Actuarial Society of South Africa, which uses many different types of data sources to derive estimates of the incidence of HIV and treatment needs. Most of the indicators that we present have been developed for the first time using the General Household Survey 2004 conducted by Statistics South Africa and analysed by Debbie Budlender of the Centre for Actuarial Research at the University of Cape Town. You can find technical notes and definitions for all the indicators on pages 67 to 69, while information about data sources are displayed on pages 70.

The theme of this South African Child Gauge is HIV/AIDS. The footprints of income poverty and the HIV/AIDS pandemic can be seen throughout many of the indicators and rights areas presented in Children Count – Abantwana Babalulekile.

**Demography of South Africa’s children (pages 52 – 54)**

The section on demography details the number of children, orphans, and children living in child-headed households in South Africa. While many of these orphans have lost a parent – particularly a father – through accidents, violence, or other types of illness, HIV/AIDS is one of the main causes of the increase in the number of orphans. As the pandemic proceeds, it is possible that more child-headed households may occur, though often as a temporary living arrangement. While the number of children living in these circumstances is relatively small, it is a heavy burden for children to be primarily responsible for one another.

In addition, the majority of children in South Africa experience severe poverty. Some 66% of children are living in income poverty, which is defined here as children living in households that have less than R1,200 per month to spend on the needs of all their members.

**Children’s access to social assistance (pages 55 – 56)**

The impact of the HIV/AIDS pandemic has made many children more vulnerable and in need of extra care and support – in particular financial support. One way in which the South African government has responded to the needs of children and families is by making social assistance, in the form of cash grants, available to adults and children. There are three social grants for children, namely the Child Support Grant

¹ The terms for race groups used in this part are ‘Black’, ‘Coloured’, ‘Indian’ and ‘White’. The term ‘Black’ refers to the ‘African’ population group exclusively.
PART THREE: Children Count – The numbers

(CSG), the Care Dependency Grant (CDG), and the Foster Care Grant (FCG).

The CSG is the primary poverty alleviation mechanism for children. To date, some 67% of poor children are accessing the grant, although a large number of eligible children have yet to gain access.

The CDG is available to children with special care needs. It is aimed at children with severe disabilities. In June 2005, just over 85,000 children were receiving the CDG.

The FCG is available to parents who have a child who has been removed from his or her original family and placed in their care by an order of the court. This grant is increasingly being used to provide financial support to children who have been orphaned because of the HIV/AIDS pandemic or other causes. In June 2005, nearly 272,000 children were in receipt of a FCG.

These grants assist households to meet the basic needs of their members and contribute toward living expenses. However, many children and families cannot access these grants due to eligibility criteria and administrative requirements that often act as barriers to access.

The health sections present data that shows that South Africa has a high infant mortality (death) rate. This data reflects both the poor socio-economic conditions that children live in, as well as issues related to people's access to perinatal care and maternal health. Fifty-nine out of every 1,000 children die within a year of their birth, and 95 out of every 1,000 children die before they turn five years old. Of those who do not live to their fifth birthday, 40% die as a direct consequence of HIV/AIDS. In this same age group (0 – 5 years), 3.4% of children were HIV positive in 2005, and some 260,000 children under the age of 15 years (1.7%) were estimated to be HIV positive. The data in this section also shows that few of the children in need of antiretroviral therapy necessary for their survival are able to access it.

Aside from the direct measures of HIV/AIDS, many children in South Africa are living in substantially less than ideal circumstances. While there has been improved access to water, sanitation and electricity in some areas, the data points to a number of areas that still require improvement. In the Eastern Cape alone, nearly 2.5 million children live in areas where there is no proper water supply, and where they have to fetch water from rivers or distant communal taps.

More than 4.5 million children live in overcrowded houses and approximately 2 million live in informal dwellings and backyard shacks on the periphery of cities and towns. In addition, more than half of South Africa's children (54%) live in rural areas. A strong racial bias is evident, as 96% of rural children are Black, while only 62% of Black children live in formal housing.

South Africa has a high enrolment rate in schools, but there is evidence that attendance is low, and that many children are not enrolled at an age-appropriate level. The gradual reduction in the learner:educator ratio at schools is positive. However, the ratio remains high for public schools, especially at primary school level. And many children are travelling long distances or walking for a long time to get to schools.

In conclusion: What is striking in many of these indicators is the great disparities between the provinces. The poorer children live in the poorer and rural provinces which are less well-serviced in terms of clinics and schools, housing and basic services. And in every indicator, the racist legacy of apartheid is evident in the heavy burdens of poverty and inequitable access to assets and services by the majority of Black children.

This data and this publication will provide benchmarks against which we can monitor the improvements in children's living conditions. We hope that it will serve as a useful information resource for those tasked with developing policy, laws and programmes that shape the lives of children in South Africa.