Hunger and Death Time To Act

Operation Bunger

Earlier this year, we tried to underline the gravity of the life threatening situation in many parts of our country. The latest statistics indicate that the situation is even worse than anticipated. Hunger is the norm and child deaths are dramatically on the increase. In a report of the Co-ordinating Committee for Drought Relief, it is estimated that 17 million South Africans are living in a situation of extreme poverty. Twelve million of these are unable to acquire sufficient food to maintain themselves at an adequate nutrition level. Some 4 million are, we estimate, in a critical, and potentially life threatening situation.

We in South Africa can no longer use our favourite fob-off "but look at the rest of Africa". World Bank figures show that 53% of our children are physically stunted, the victims of chronic protein energy malnutrition. The all Africa average is 39%. South Africa has a worse child death and malnutrition track record than Botswana and Mauritius, countries which are far less wealthy than ours.

South African child death statistics are more than double that of the average for countries across the world with similar income levels. In this country, 73 out of every 1000 children die before reaching the age of five. The world average for countries of comparable wealth is 35.

Economic Decline, the Drought and Violence

True, this represents a drop from the 91 deaths per 1000 live births in 1982, but it must be remembered that, by 1987, the 1982 figure had been halved. The last three years have shown a sharp increase. The continuing decline in the country's economy has affected all parts of the country. Unemployment has reached higher levels than ever before, and rural families dependent on migrant breadwinners have been particularly hard hit.

In addition, the drought has critically affected many people's ability to feed themselves. The lack of water has resulted in repeated crop failure, with a consequent increase in the number of mouths to feed. However, we must not lose sight of the fact that the drought simply exacerbated an already dangerous situation. The reality is that the vast majority of South Africa's rural population

are not in a position to sustain themselves off the land. The recent rains have not led to much of an improvement.

On top of all this, the levels of violence in many areas have contributed to escalating conditions of malnutrition and starvation. Over and above the physical destruction of homes, crops and facilities, the violence also drives people away from their traditional areas into regions where they are unable to support themselves.

The greatest hardship is still suffered by the rural population, but the problem of squatters in the urban areas is also a matter for serious concern. There is, for example, an influx of approximately 10 000 people from the Transkei and Ciskei to Cape Town every month. Squatting in this country has traditionally been identified with the migration of destitute black people to the towns. A rapidly evolving variation of this theme is the appearance of white squatters. These people are equally as desperate and provide their own set of unique social problems.



Clinical signs of mainutrition, Transkei, circa 1988. Photo: Medico

Appalling Levels of Malnutrition

Whenever Operation Hunger receives a new application for feeding, we survey children under 6 in that community, using median upper arm circumference and height for age or weight for age techniques. In Natal, only 25% of these children are adequately nourished. Of the remaining 75%, more than 30% are in the red, the life endangered zone. The rest are stunted, underweight, part of the world wide ineducable majority who die by inches from the moment they are born.

In the northern Transvaal, we are seeing a huge number of malnourished children in rural hospital wards. One hospital had a 500% increase in malnutrition related illnesses.

In the Orange Free State, the situation is far worse compared to that of 1992, with a 40% increase in clinically diagnosable malnutrition. It is deteriorating by the day. This dramatic decline makes it far and away the worst area in the country, with 80% of all new applicants stunted and underweight. Of these, 50% are in the danger zone.

Inappropriate, Bureaucratic and Corrupt

The situation is deteriorating despite the government's National Nutrition and Social Development Programme (NNSDP). It launched this programme in 1991, in response to widespread opposition to the introduction of VAT on food and other necessities, as a way of partially compensating the poor for the additional hardship imposed on them by making them pay this tax (see Critical Health no.38, no.39, no.40).

The real need in our country today is for a massive famine prevention programme. The NNSDP, in attempting to provide more than the minimum for comparatively few, is falling far short of this need. Furthermore, the programme has failed to make aid available on a regular basis. The government has, for purely political motives, continued to channel most of its funding through bureaucratic structures that are, at best, inept, at worst, notorious for their graft and corruption. In many regions, government money runs out well before the end of the financial year. In others, only a fraction of the money allocated is actually received.

A visitor from the European Community was in no doubt that the programme is inappropriate for our situation and that the bureaucracy in charge of it is uncaring, power drunk and primarily concerned with protecting their own jobs.

There has been much euphoria recently about the imminent transitional

government and consequent foreign investment, but this alone will not bring urgent relief to the ultra-poor. Operation Hunger has stressed that the crises of drought and recession, when applied to the black rural population, were the last straw on the camel's hump, burdened with chronic poverty and chronic deprivation, a disgrace to a country of our wealth. Time and time again, we have talked about the two worlds that exist in South Africa and that it has been only too easy for us to ignore the misery out there.

Ten Urgent Needs

The total eradication of the inequality of wealth is a huge problem, requiring vast financial resources. But there are things that can and must be done to bridge the horrendous poverty gap. We should demand of every political party at every opportunity that they include in their election platform a commitment to implement the urgent need for:

- * free pre-natal care to all low income mothers, with food supplements if necessary;
- a pre-school nutrition programme for children from families below the poverty line;
- free compulsory education for all children from 5 to 16 years;
- a re-introduction of state school feeding schemes;
- * literacy and numeracy programmes for adult men and women, to improve their prospects of finding work;
- land, land, land for those whose total lack of education gives them no alternative but to return to subsistence agriculture;
- housing projects geared towards South Africans with a family income of under R630 a month;
- * a proper almoning system in our hospitals and clinics, so that the poor can get free medical attention;
- * a hard look at our family planning structure; and
- * less 'capacity building', less 'co-ordinating', and more listening, in order to nurture and expand on the survival wisdom and hands on expertise of the people out there.

Feeding Schemes

We know that it takes at least 4 to 5 years for any community to turn itself around economically. This is why we believe that it is imperative that the need for school feeding schemes and a pre-school nutrition programme be addressed

immediately. Primary school feeding programmes, such as those that existed in this country in the 1940s, need to be introduced hand in hand with free compulsory education. This would take care of a large group of children of school going age who, at present, are too poor to go to school.

There has to be a programme to look after the needs of the under fives, the most vulnerable group of all. The ultimate solution will be the introduction of a programme similar to the Head-Start programmes in the USA, where all children whose parents are under the poverty datum line have a right to participate, at the state's expense, in a project that secures them nutritionally. Pre-schools in black rural areas in South Africa are virtually the prerogative of the middle class. Only 10% of black children attend these facilities. Massive funding must be found immediately for interim child care centres. At the very least, provision must be made for under fives to be part and parcel of feeding schemes at schools.

This article was compiled by Critical Health from various recent Operation Hunger publications.

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