The picture I have painted of the changing historical patterns of food production, diet and nutrition in South Africa is indeed gloomy, and for many black people, trapped by legislation and enforcement in our homelands today, the position is probably worse. The person who is committed to the social, economic and health development needs of the majority of South Africans is therefore confronted with almost insurmountable odds. The causes of the problem are deep lying and structural. Perhaps a starting point in the struggle to change them, however, is to analyse those structural conditions, to determine which is cause and which is effect and, in laying bare the means of oppression and exploitation to which the people are subject, make a small start on the long struggle to overcome them.



Migrant workers returning home when their contract is over — amongst other causes the drive for labour sowed the seeds of destruction amongst the successful black peasantry in the 1870's

* Pictures by courtesy of Luli Callinicos, researched for her book Gold and workers

. . present conditions



Ina Perlman

It's a mystery to me how people in the homelands survive. Updating figures of the Institute of Social Research at Natal University's we found that an average family of five should not have been able to survive in the homelands in 1982 without a cash income of at least R92 per month, over and above whatever they can grow or gather. Compared to this the average household in the homelands received a cash income of R49,60 per month in 1982/83.

The average person is lucky to get a daily bowl of mealie meal with or without some wild spinach (mirogo) or other vegetable the family can grow. Meals are almost entirely without protein, for eggs, milk, meat and even bread are all luxuries.

M rs Ina Perlman has been running Operation Hunger since January 1981 when the project, then under the Institute of Race Relations, set out to provide temporary emergency feeding for 15 000 people. In 1985, five years later, the project fed 662 000 people, mainly children, with one cup of specially-formulated protein stew with or without a dollop of non-essential mealie meal porridge each day. This year the programme is faced with requests from 370 000 more people, including, for the first time, a request from an urban community in Port Elizabeth.

'The thing that I always try to impress upon people is that malnutrition is a very long-term malady which has grown hand-in-hand with the destruction of the black subsistence economy.

'The recent drought is the final blow and although the present Government's forced removals and "black spot" clearance policies dramatically exacerbate the problem, its roots go back many decades before National Party rule,' comments Mrs Perlman.

For instance, during the Boer War African farmers from areas in the Ciskei and Transkei which are now totally denuded, were the main suppliers of fresh produce to the British soldiers. In Natal during the 19th century the black sugar cane farmers vied successfully with their white counterparts. In the aftermath of the Boer War the Orange Free State and Transvaal were devastated by the scorched earth policies of the British army. Fundamental to rebuilding these economies were African peasant producers, often share croppers.

The causes of rural under-development are dealt with in the article by David Webster.

Three generations later, in 1980/81 figures published by Tanya Vergnani of Stellenbosch University show how inadequate those cash wages are and to what extent food production has declined. In that year some three million black children throughout South Africa were so poorly fed that they had clinically diagnosable malnutrition. This means that 43% of all black children had symptoms such as patches on their skin, thin, ginger hair, swollen knees and ankles due to muscular wasting. Some 45% of adults also have 'frankly diagnosable malnutrition'.

'A black child of over six today is only a survivor,' says Mrs Perlman. Some 55% of all African deaths are those of children under the age of five. For the malnourished illnesses such as measles, diarrhoea, chest complaints can be fatal. Amongst the white population, 7% of deaths are those of children under the age of five. For the 'coloured' community the figure is 45%.

Mrs Perlman then goes on to talk about the relationship between malnutrition, brain damage and consequently education.

'Drop-out rates show that the maximum drop-out rate in rural areas takes place before the Std two level. I'm convinced that a large part of this is due to brain damage.' The consequences of providing food to children at school illustrate this point.

'The first batch of two-year old children who were part of a malnutrition prevention programme started by nuns in Venda reached school last year. Their physical size is unbelievable — they're bigger than Std 2's and 3's who are five or six years older than they are. Their mental performance is dramatically better.

'One of the first letters I ever had from a headmaster at a school where the children were being fed said that he'd had a complaint from the teachers. They were actually having to teach the children! They were no longer dealing with lifeless, listless little creatures.

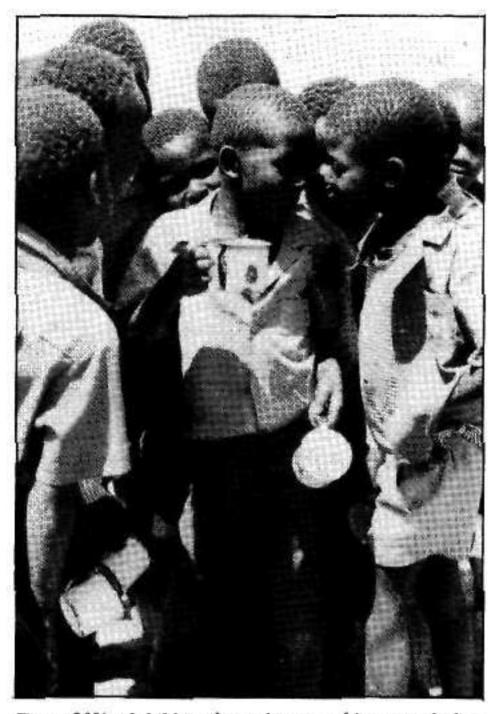
'One of the first places where we started providing food was at a resettlement camp called Tsetse in the Northern Transvaal. When we first began I was able to drive up there at midday and I would see lifeless, exhausted little beings shuffling home after school. Now I'll do anything to avoid being there at 12. If they see my car they dash out with all the energy and vitality of normal children. I'm always afraid I may knock someone over. Inevitably after we've started a feeding programme we're confronted some three months later with a request for sports equipment.'

The poor quality of food is a serious problem, the complete lack of any food at all is even worse. Mrs Perlman says that from their experience only 10 to 20% of children have anything to eat before they go to school in the morning, and then on top of that they usually have to walk five kms to get there. So most children sit through five hours of school on an empty stomach.

'A hungry child cannot concentrate. It's likely he's asleep by 10 am. And when that's over there's the five km walk home again. If the child is lucky enough to have a mother who has a seasonal job she may not be there, but



In 1985 662 000 people each received one cup of specially formulated protein stew every day from Operation Hunger



Ten to 20% of children do not have anything to eat before going to school in the morning. On top of that they usually have to walk about five kms to get there.

in the evening there'll be a more healthy meal. If not a grandmother may provide a bowl of mealie meal after school. In the evening water is added to the dregs in the pot to make a thin tasteless soup.

In 1986, hopefully, Operation Hunger will be able to find the funds to respond to all the requests facing it and feed over one million people. But, when one hears how decisions have to be made about when to set up feeding programmes, one realises that there must be millions more starving people. Mrs Perlman explains:

'We never approach a community to offer food. We only respond to requests - and then only to whole communities in extreme circumstances, not as a general rule to families or individuals in need. When we get a request we talk to the local clinics, we look at available statistics for the area and so on. If we find that 30 to 40% of the children at school have malnutrition we can assume that the rest are not getting proper food either. If over 60% of the people in a village are employed, say as migrant workers, then we reckon that the whole village, through kinship networks and a spirit of sharing, will be alright. But now the problem is that more and more of the villages have 50% or less of their potential labour force employed. And in those circumstances the communal pot isn't big enough to go around.' Once it's established that a community needs food Operation Hunger enters into a partnership with the adults to provide food for the children. The community must undertake to administer the programme and to

provide such things as firewood and water. Both can be difficult because sometimes it takes three or four hours walking to reach a supply of decent water. In some areas fuel for fires is also a problem. And then, if the community can, they undertake to provide the dollop of mealie meal that goes with the protein stew. The community choose how to administer the food, for instance through a school or clinic.

'In some areas, school children are the elite as many parents cannot afford the school fees. So we have a problem reaching all children and especially those who are too young to walk,' Mrs Perlman adds.

To cope with these problems Operation Hunger has started using a tactic that was adopted in the War on Poverty programme to eradicate poverty in the Southern States of America. It involves the use of a surrogate granny. With the drought and the failure of seasonal labour jobs, more and more mothers are leaving the rural areas in search of jobs in the urban areas. Grannies and children are left at home. The grannies are encouraged to bring the very young to the clinics to be fed. They themselves receive a meal if they are prepared to bring one child that is not their own.

Mrs Perlman is convinced that feeding is a vital part of rural redevelopment. 'Operation Hunger has always said that feeding and development go hand-in-hand. We have to break the vicious cycle of hunger that keeps a mother worrying about where she's going to find the next meal for her children. In breaking that cycle you bring mothers together again as they administer the schemes on a roster basis and you remove the anxiety. There is not one group in our programme that has not come to us within three or four months to ask for help in establishing a communal vegetable garden, or a sewing cooperative, a brick-making cooperative or whatever. After that they start hammering away on pensions and other issues.'

Operation Hunger has funds set aside for community development. 'But we dare not break into them to meet additional requests for feeding,' explains Mrs Perlman. 'We have promised that we will assist with vegetable gardens and development projects. To break the cycle of starvation we must spend the money that we have set aside for this purpose.'

Operation Hunger has discovered that under 'intensive dry farming' techniques which do not depend on rain and which use maximum water conservation methods, a three hectare plot can feed 250 families and yield enough to provide each family with R50 in cash each month. It costs R15 000 to set up such a plot and to provide it with a borehole for irrigation. Mrs Perlman comments; 'We could have developed 250 such plots on

the money that was paid to 15 Australian cricketers at R250 000 each'.

In conclusion Mrs Perlman says; 'I've never come to terms with the mystery of rural survival. It can only be because of that untranslatable notion of *ubuntu* — its a mixture of love, caring, compassion, sharing and the much-extended family network.

'There is hope for the future. There must be change somehow in which there's got to be a reapportionment of land and resources and a state in which the well-being of people are the most important aspect.

'In the meantime we are trying to create educable people who are capable of responding to whatever education is brought to them.'