REPUBLIC OF SOUTH AFRICA

# MILLENNIUM DEVELOPMENT GOALS

## Country Report 2010

UNDP

The south Africa I know, the home I understand

## ACKNOWLEDGEMENT

This third progress report on the Millennium Development Goals (MDGs) was produced with financial assistance from the United Nations Development Programme (UNDP). The report is a joint effort by the Government of South Africa, the Civil Society Organisations (CSOs), including business interests of South Africa and the office of the United Nations Resident Representative in South Africa. The preparation of the report was led by Statistics South Africa (Stats SA), which is the MDG Secretariat and as such provided overall direction and coordination.

The report benefited from the contributions by United Nations agencies, most specifically UNDP and UNICEF. In particular, the active advocacy and participation by the CSOs who, on their own, found it fitting to organise a CSO Summit on the MDGs and emerged with the Cape Town Declaration on the MDGs. They provided an invaluable and refreshing perspective on the successes, challenges, recommendations and a programme of action for the MDGs. Their persistence on further provincial consultation even in the dying minutes of finalising the report guaranteed stakeholder ownership and thus made this report a truly MDG Country Report. The report acknowledges substantive inputs received from all members of the Sectoral Working Groups (SWGs), the National Coordinating Committee (NCC), and the Report Drafting Team.

South Africa is one of those few African countries with adequate data for purposes of the MDGs. In particular for MDG 3, 4, and 5, South Africa has a sophisticated cause of data registration system and on MDG1, South Africa conducts regular income and expenditure surveys. Yet despite these advantages, the MDG process has laid bare some of the serious deficiencies in data quality as well as data gaps. As a consequence of quality issues, some data items remained hotly contested to date. In an endeavour to make the MDGs relevant to South Africa, a number of indicators were domesticated and a total of 95 indicators were addressed to address the eight MDG goals. The overall process for managing the MDG Country Report and in particular the explicit application of the South African Statistical Quality Assessment Framework (SASQAF) on all indicators ensured that the discourse and conclusions were based on rational processes and statistical information of the best quality possible.

Going forward we shall continuously review the indicators in an effort to apply the most recent available data.

Pali Lehohla
Statistician-General
South Africa

## FOREWORD

In reviewing the MDGs in the context of other developing countries, it is important to appreciate some unique characteristics of South Africa and not surprisingly, a review of these goals suggests a mixed picture. In some cases, South Africa has achieved its MDGs more than five years before 2015, while in others South Africa is far from achieving these MDG targets. Between these two extremes are goals where achievements are probable or possible. In these cases, appropriate government interventions remain key to making these goals achievable.

While South Africa has a sophisticated infrastructure, a well-developed private sector and a stable macro-economy, it suffers inequality in education, specifically as regards access to quality education and access to quality health care. The latter especially, combined with the high prevalence of HIV and AIDS, explains why South Africa has not achieved some targets for those MDGs related to outcomes such as employment and income levels (these are impacted on directly by education), as well as life expectancy which is impacted by health conditions.

As a middle income country, South Africa is less dependent on foreign aid, and improvements in the MDGs will depend on how well government and other stakeholders mobilise domestic resources to achieve these targets. The macro-economic environment of benign inflation holds promise, but even in the best of times growth reached a plateau at 5% in an economy requiring at least 7% to achieve both its employment and redistributive consequences. South Africa has experienced a decline in poverty largely as a result of a significant income transfer programme, massive reallocation of pro-poor expenditure, for example on housing, water, electricity and sanitation. Not surprisingly, South Africa has achieved or is close to achieving the dollar-based purchasing power parity adjusted targets. In order to make bold statements on progress or lack of it, we need statistics as the basis for evidence policy making.

An overwhelming majority of African countries do not have data for measuring MDGs and these challenges have to be addressed. Consequently, as a patron of the Young African Statisticians (YAS), under the ISIbalo banner, I am pleased to report that the YAS will host a conference focusing on the MDGs in South Africa in December this year. More than 150 papers covering all goals of the Millennium Declaration will be presented by young African intellectuals. Furthermore while the challenges of data remain supreme, African countries have mobilised under the banner of the African Symposia for Statistical Development (ASSD) to conduct a census in the 2010 Round of Population and Housing Censuses. The ASSD has now run for five years with the theme “Africa Counts”. The next theme for this ambitious African statistical development agenda will be to ensure that the vital registration systems work in and for Africa. In this regard African ministers of home affairs took a resolution that African statisticians prioritise the production of vital statistics and ensure that a credible raft of statistics in Africa is created. If you cannot measure it, you cannot manage it. We shall therefore appeal to our partners that we hold hands in this endeavour of statistical development in and for Africa.

T A Manuel, MP
Minister in the Presidency: Planning

## PREFACE

I am pleased to present South Africa to the world. This time around it is not through the FIFA World Cup. I am presenting to you the South Africa I know, the home I understand. I do so in facts and figures and demonstrate our unflinching commitment to South Africa's, Africa's and the world's development agenda.

South Africa has committed to the eight Millennium Development Goals and embraced them into a national set of ten priorities. No doubt a development agenda of this magnitude is a national effort and at the global level it demands a global and coordinated effort. This is the reason that South Africa understood this global agenda as the single most important agenda for resolving its development challenges.

In addressing the scourge of poverty, MDG 1, a South Africa's first priority, we shall speed up growth and transform the economy to create decent work and sustainable livelihoods. In this regard we have seen sustained growth in South Africa prior to the economic crisis of 2008. We are committed to a path that builds economic and social infrastructure not only to reverse the 2008 economic crisis setback but progress towards decent work. We are aware that we have a massive backlog of skills and whilst we have achieved the MDG 2 of universal primary education, we remain aware that the quality of our education holds back our route to development. In this regard we shall strengthen our skills and human resource base. Our health is our life and MDGs 3, 4 and 5 are our life. South Africa feels the burden of disease with the scourge of HIV and AIDS stubbornly reversing gains made in life expectancy. To address this, our priority is to improve the health profile of all South Africans.

South Africa, prominently with other African countries, works on continental peace, stability and development. In this we are informed by our priority of pursuing African advancement and enhanced international cooperation. Without MDG 8, global partnerships cannot be achieved.

In conclusion, let me emphasise that South Africa is committed to the MDG agenda and the Millennium Declaration of 2000. Our entire development agenda embraces the MDGs. We are, as Minister Manuel pointed out, concerned by the abject lack of statistical data and we would like to accost the world, in particular the developed world, to assist Africa to fish. On our part as South Africa and African compatriots we are pursuing an ambitious agenda for statistics on the continent through Africa Symposia for Statistical Development.

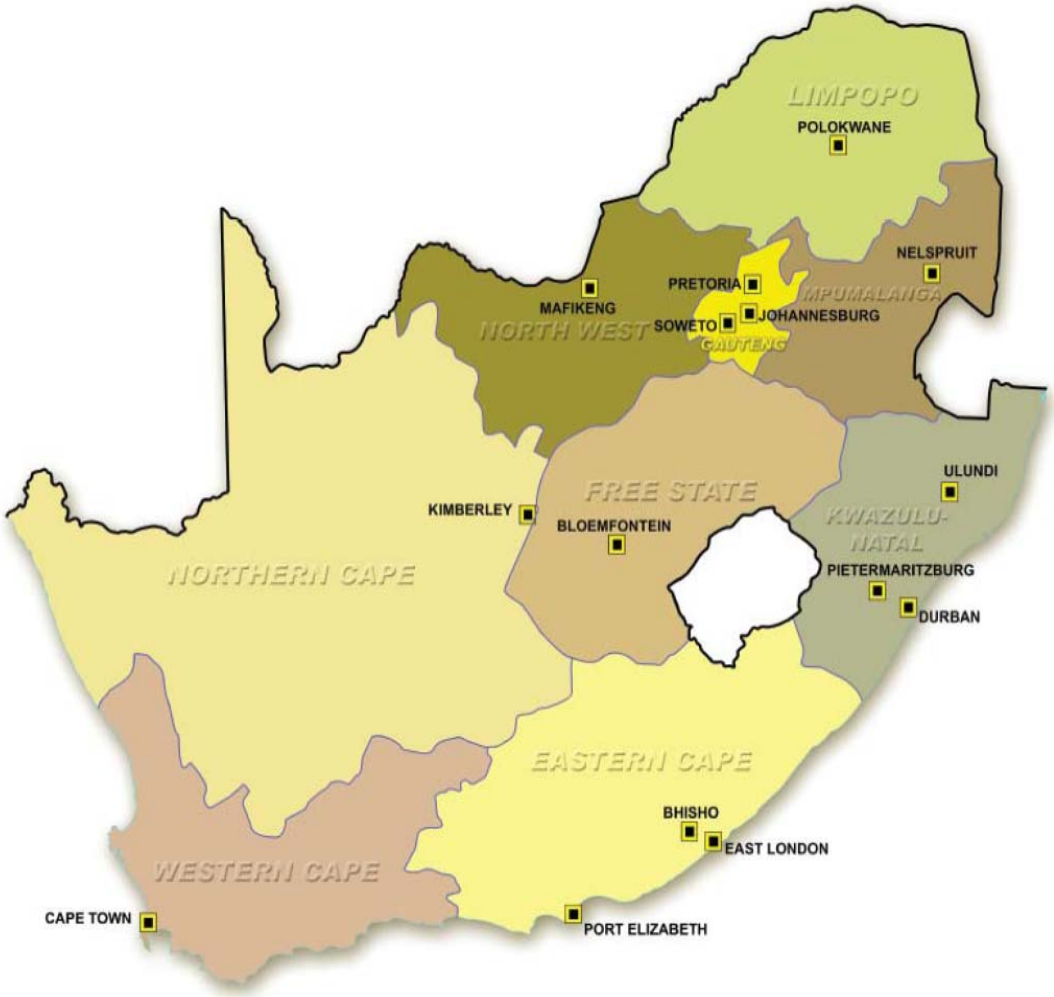
This report is a result of active participation of government with Civil Society Organisations, (CSOs) and it was the latter's intensive effort that brought to bear sharper focus of the recommendations that the country report addresses. We are pleased by the true partnership that the CSOs showed as well as the energy they imbued. A special mention of Ilitha la Bantu NGO is important to make on behalf of NGOs and CBOs, for the stewardship they brought about.

J Z Zuma
President of the Republic of South Africa

## SOUTH AFRICA AT A GLANCE

| Indicator | Values | |
|---|---|---|
| | | |
| Real GDP (2007) | R1,750 billion | $248 billion |
| | | |
| Real GDP per capita (2007) | R36,461 | $5,168 |
| | | |
| Adult Literacy Rate | Male – 87.2 | Female – 86.9 |
| | | |
| Population | Total | 49,320,500 |
| | Male | 23,868,700 |
| | Female | 25,451,800 |
| | 0–14 years | 15,500,700 |
| | 15–34 years | 18,447,000 |
| | | |
| Households<br>Household size | | 13,8 million<br>Average 3.6 persons |
| | | |
| Land surface area | | 1,220,813km$^2$ |
| | | |
| Provinces | Gauteng, KwaZulu-Natal, North West, Limpopo, Free State, Mpumalanga, Eastern Cape, Western Cape, Northern Cape | |
| | | |
| Key economic sectors | Mining services, transport, energy, manufacturing, tourism, agriculture | |
| | | |
| Official languages | English, isiZulu, isiXhosa, isiNdebele, Afrikaans, siSwati, Sepedi, Sesotho, Setswana, Tshivenda, Xitsonga | |
| | | |
| Government | Constitutional multiparty, three spheres (local, provincial, national) democracy. | |
| | | |
| Capitals | Pretoria (administrative); Cape Town (legislative)<br>Constitutional Court is located in Johannesburg | |
| | | |
| Currency | Rand (ZAR) – 100 cents equals one rand | |
| | | |
| Time | | GMT +2 hours |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

## MAP OF SOUTH AFRICA



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## ACRONYMS

| | | |
|---|---|---|
| ANC | - | Antenatal Clinic |
| ART | - | Antiretroviral Therapy |
| ASGISA | - | Accelerated Strategy for Growth and Investment in SA |
| BCM | - | Bromochloromethane |
| BEE | - | Black Economic Empowerment |
| BNG | - | Breaking New Ground (Policy) |
| CFC | - | Chlorofluorocarbons |
| $CO_2$ | - | Carbon Dioxide |
| CSO | - | Civil Society Organisation |
| DEA | - | Department of Environmental Affairs |
| DWAF | - | Department of Water Affairs and Forestry |
| EA | - | Environmental Assessment |
| ECA | - | Economic Commission for Africa |
| GDI | - | Gross Disposable Income |
| GDP | - | Gross Domestic Product |
| GEAR | - | Growth, Employment and Redistribution Strategy |
| GER | - | Gross Enrolment Rate |
| GERD | - | Gross Expenditure on Research and Development |
| GHS | - | General Household Survey |
| GNI | - | Gross National Income |
| GPI | - | Gender Parity Index |
| GWP | - | Global Warming Potential |
| HFC | - | Hydroflourocarbon |
| HCFC | - | Hydrochlorofluorocarbons |
| HSRC | - | Human Sciences Research Council |
| IMCI | - | Integrated Management of Childhood Illnesses |
| LDC | - | Least Developed Country |
| MDG | - | Millennium Development Goal |
| MDGR | - | Millennium Development Goal Report |
| MMR | - | Maternal Mortality Rate |
| MTSF | - | Medium-term Strategic Framework |
| NEMA | - | National Environmental Management Act |
| NGO | - | Non-governmental Organisation |
| NCC | - | National Coordinating Committee |
| NCS | - | National Communications Survey |
| NEPAD | - | New Partnership for Africa's Development |
| NGDS | - | National Growth and Development Strategy |
| NSP | - | National Strategic Plan (on HIV and AIDS) |
| NSSD | - | National Strategy on Sustainable Development |
| ODA | - | Official Development Assistance |
| ODS | - | Ozone Depleting Substances |
| PCR | - | Polymerase Chain Reaction |
| PHC | - | Primary Health Care |
| PMTCT | - | Prevention of Mother-to-child Transmission |
| PPP | - | Purchasing Power Parity |
| PPPs | - | Public Private Partnerships |
| R&D | - | Research and Development |
| SADHS | - | South African Demographic Health Survey |
| SAFCOL | - | South Africa Forestry Company |
| SALGA | - | South African Local Government Association |
| SANBI | - | South African National Biodiversity Institute |
| Stats SA | - | Statistics South Africa |
| STI | - | Sexually Transmitted Infection |
| TB | - | Tuberculosis |
| UNDG | - | United Nations Development Group |
| UNDP | - | United Nations Development Programme |

## INTRODUCTION

At the United Nations Millennium Summit in 2000, the international community reached consensus on working to achieve eight critical economic and social development priorities by 2015. Promoting gender equality and empowering women is clearly embedded in the Millennium Declaration, and is one of the eight MDGs. Set at the heart of the development agenda, the MDGs are a fresh promise for progress on gender equality and women's empowerment. Conversely, gender equality and women's empowerment are critical to achieving the MDGs – most obviously Goal 2 on universal primary education, Goal 4 on reducing child mortality, Goal 5 on improving maternal health, and Goal 6 on combating HIV/AIDS, malaria and other diseases.

Gender equality and women's empowerment also contribute to Goal 1 on poverty reduction and to economic growth directly through women's increased labour force participation, productivity and earnings, as well as indirectly through beneficial effects on children's well-being and the quality of the next generation's human resources. Despite progress on many of the targets, South Africa finds that in some parts of the country where social institutions discriminate against women the most primary school completion is on average more than 20% lower, nearly twice as many children suffer from malnutrition, and maternal mortality rates are twice as high when compared with other countries.

Ownership rights are critical to securing a sustainable livelihood and income, and the lack of these rights is one of the main sources of women's economic insecurity. When women own and control resources and family assets, they have increased decision-making power in the household and are more likely to allocate resources to support the welfare of all family members, including by reducing poverty and hunger.

Discriminatory attitudes and practices regarding the role of women in society, such as the low status of female-headed households and child-headed households, or the limited inheritance rights accorded to women, are significant barriers to their control over resources. Control over resources is therefore directly relevant to MDG 1, since even in South Africa where obstacles to women's ownership rights are widespread, the levels of hunger and malnutrition are also high. Women are also key players in the achievement of Goal 7, ensuring environmental sustainability. However, gender equality perspectives are poorly reflected across all the MDGs in their current formulation. Most have either inadequate or no gender-sensitive targets and indicators, making them difficult to achieve.

Second, the targets for Goal 3 on gender equality and their indicators are limited. They represent a possible means to equality and do not necessarily reveal the quality of rights women enjoy or women's real empowerment.

Third, the MDGs appear as stand-alone goals, blurring the multi-sectoral links between all goals, targets and indicators, including the cross-cutting gender link. For instance, preoccupation with maternal health and gender disparities in education, without addressing their relationship to feminised poverty, gender biases in the economy, gendered violence and ideologies, could thwart gender equality, women's empowerment and thus the achievement of all the goals.

The eight development priorities were termed the Millennium Development Goals, (MDGs). As a member state of the United Nations, South Africa is a signatory to this agreement. The eight MDGs are in their numerical order:

1. To eradicate extreme poverty and hunger
2. To achieve universal primary education
3. To promote gender equality and empower women
4. To reduce child mortality
5. To improve maternal health
6. To combat HIV/AIDS, malaria and other diseases
7. To ensure environmental sustainability
8. To develop a global partnership for development

The Millennium Development Goals and targets come from the Millennium Declaration, signed by 189 countries, including 147 Heads of State and Government, in September 2000 and from further agreement by member states at the 2005 World Summit (Resolution adopted by the General Assembly). The goals and targets are interrelated and should be seen as a whole. They enjoin the developed countries and the developing countries through a partnership that would be conducive to development and to the elimination of poverty.

**Previous reports:** In 2005, the Government of South Africa produced its first national report on progress made towards achieving the MDGs. The report concluded that for a number of goals, targets and associated indicators, considerable progress towards the achievement of national development targets was made. This applied specifically to economic growth (GDP), poverty reduction, gender equality, primary education and maternal health. At the same time there was a worrying trend in HIV and AIDS prevalence, while unemployment and inequality remained at high levels. A second MDG update was published for 2007 and updated in 2008. This was almost at the midway point between 2000 and 2015. This report provided a mid-term review of both the encouraging achievements and the challenges that remained on the path towards achieving the MDGs by 2015.

**Current report:** As noted in the previous report, concerns were raised regarding the extent to which the MDG reports had been the outcome of consultative processes.

Therefore, in order to address the limitations of the past report and updates, the 2010 Country Report process was designed to be widely consultative and transparent, yet concerns that dogged previous reports continued to linger and as a consequence a lot of energy was directed, albeit in the latter part of the process, at ensuring that civil society (to the extent possible) participated in the process.

The report notes that a variety of stakeholders were engaged on how to achieve domestication of MDGs in the country in a way that reflects local context. As a result some of the globally designed targets and indicators were brought to relate to local reality through a series of methodology workshops at the national and provincial levels of government with all organs of state, although the report notes that civil society participation was sporadic and often erratic. Out of these meetings, however, emerged what was largely a government report. Having noted this major limitation, CSOs and government agreed to engage with the report. The Country Report was concluded on the strength of resolutions, recommendations as well as a programme of action emanating from the Cape Town Summit on MDGs organised by Civil Society Organisations. This was held from 30 August to 1 September. Further consultations and presentation of the report were made to the South African National AIDS Council (SANAC) and to the rest of the provincial CSOs.

**Structure of the report:** The structure of this report is in line with the United Nations Development Group's (UNDG) *Second Guidance Note on Country Reporting on the Millennium Development Goals* and the *Addendum to the Second Guidance Note*. The report is structured in such a way that it provides a general chapter on the development context in South Africa, with the eight MDGs sector reports summarised in the order of their official enumeration. The summary chapters for each of the MDGs contain the following sections:

- Background
  - Information Base
- Facts and Figures
- Insights
- Discussion
- Conclusions
- Programme of Action.

The Background introduces the Goal, provides a country position in relation to the goal and briefly outlines what the key targets and indicators are, as well as the information base. The section on Facts and Figures consists of a table of figures relating to the goal. On Insights, the rendition is on what the figures elicit. The discussion part of the report synthesises the policy position with facts and figures as well as highlights, challenges and opportunities. This part further highlights the main causes and developmental effects of the observed status and trends, and provides evidence on policies and how they have led to an accelerated or reversal of progress towards the achievement of the MDGs. The discussion part builds up to a conclusion. Then each goal has a programme of action that enjoins the state with all its arms to march towards achieving the MDGs.

**Description of outcome classification:** From a methodological perspective, the report is intended to present an accessible and easy-to-grasp assessment of whether the stated goals or indicators are being achieved. This has been done by using the scale 'achieved', 'likely', 'possible' or 'unlikely'. Judgements about whether a priority area is achieved, likely,

possible or unlikely, have mainly been based on the following factors: the observable trend; a change in trend for better or worse; whether an earlier target has been met; the distance from the final target; and the existing policy framework. For example, an improving trend, the earlier target having been met, no break in the trend for the worse, no greater distance to the final target than previously to the earlier target, as well as a conducive policy framework led to a qualification of a target to be classified as 'likely'. By contrast, a classification labelled 'unlikely' indicates that significant additional steps will have to be taken to achieve the target. On the other hand, a target said to be 'achieved' is one that, given what the magnitude of the target was scheduled or estimated to be on current date, has already been achieved and finally, a 'possible' is classified as those indicators whose targets are on line for being achieved.

## DEVELOPMENT CONTEXT

The attainment of democracy in 1994 brought the possibility for South Africa to address poverty and inequality and to restore the dignity of its citizens and ensure that South Africa belongs to all who live in it. In line with the democratic dispensation and in pursuit of constitutional imperatives guaranteeing a rights-based environment and the rule of law, new policies were put in place to improve people's quality of life. This has entailed a systematic effort to dismantle the social and economic relations of apartheid and create a society based on equity, non-racialism and non-sexism. Through a policy commitment to 'continuity of change', each successive administration built on the development successes achieved, as well as to take stock of ongoing challenges and develop strategic responses to address these limitations to growth and development.

**Policy instruments:** The Medium Term Strategic Framework (MTSF, 2009–2014) is a statement of government intent. It identifies the development challenges facing South Africa and outlines the medium-term strategy for improving living conditions of South Africans. The MTSF base document is meant to guide planning and resource allocation across all spheres of government. National and provincial departments in particular need to develop their five-year strategic plans and budget requirements, taking into account the medium-term imperatives. Similarly, informed by the MTSF and their 2006 mandates, municipalities are expected to adapt their integrated development plans in line with the national medium-term priorities.

The MTSF identifies the following five development objectives:

Linked to the five over-arching objectives, the MTSF has outlined ten priority areas that are intended to give effect to these strategic objectives. Within this framework the overall objective is to develop and implement a comprehensive development strategy that will meet the development needs of all South Africans. The MTSF also commits government and its development partners to a programme of gender equality, in seeking to ensure that the 'conditions have been created for the full participation of women in all critical areas of human endeavour'.

**Domesticating the MDGs:** The report has to be read in the context of these developments and thus additional indices and indicators have been included to elicit development endeavours the government committed to; thus the report articulates the

extent to which the South African government through its priorities has owned the MDG agenda and through clear policies complied with the MDG imperatives. It is plausible to conclude then that the South African Constitution and its development mandate explicitly takes the MDGs into account, and as a consequence there remain a greater possibility that despite many a challenge, South Africa has a plan in place and a winning chance in the fight against hunger, disease, ignorance, gender equality and making South Africa, Africa and the world a better place. The report below demonstrates how the MDGs have been domesticated into the current priority agenda of the government. Below is a schematic layout that maps the MDGs on the national priorities.

| **Linkage between South Africa's national development planning and the MDGs** | | |
|---|---|---|
| **MTSF STRATEGIC ELEMENTS** | | **RELEVANT MDGS** |
| 1. | Strategic Priority 1: Speeding up growth and transforming the economy to create decent work and sustainable livelihoods | MDG 1, MDG 2, MDG 3, MDG 8 |
| 2. | Strategic Priority 2: Massive programme to build economic and social infrastructure | MDG 1, MDG 3, MDG 8 |
| 3. | Strategic Priority 3: Comprehensive rural development strategy linked to land and agrarian reform and food security | MDG 1, MDG 2, MDG 7 |
| 4. | Strategic Priority 4: Strengthen the skills and human resource base | MDG 2 |
| 5. | Strategic Priority 5: Improve the health profile of all South Africans | MDG 4, MDG 5, MDG 6 |
| 6. | Strategic Priority 6: Intensify the fight against crime and corruption | MDG 2, MDG 3 |
| 7. | Strategic Priority 7: Build cohesive, caring and sustainable communities | MDG 2, MDG 3, MDG 7 |
| 8. | Strategic Priority 8: Pursuing African advancement and enhanced international cooperation | MDG 8 |
| 9. | Strategic Priority 9: Sustainable resource management and use | MDG 2, MDG 3, MDG 7 |
| 10. | Strategic Priority 10: Building a developmental state, including improvement of public services and strengthening democratic institutions | MDG 1, MDG 2, MDG 3, MDG 8 |

Having demonstrated at the strategy level how the eight MDGs are integral to the South African government's development priorities, it is important now to illustrate how, at the implementation level, these strategic policy intentions should or get to be translated into reality. In this regard for instance, in working towards a comprehensive rural development strategy, the government will take a comprehensive and integrated approach that will reflect a range of MDG-related targets and indicators, including those on poverty, food security, education, gender, health, access to services and environmental sustainability. Yet another policy terrain on ensuring primary education, a cocktail of practical steps for attracting, retaining and teaching children, is of providing for no school fees for schools servicing poorer communities, providing feeding schemes for such and further allowing for free transport.

From the development focus of the MTSF the government has derived twelve outcome areas that set the guidelines for more results-driven performance. The *TWELVE KEY OUTCOMES* that have been identified and agreed to by cabinet are:

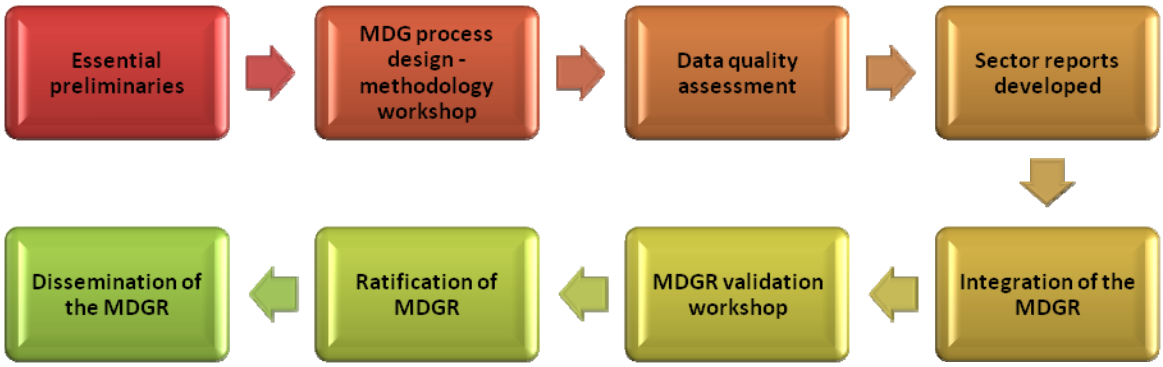
1. Improved quality of basic education;
2. A long and healthy life for all South Africans;
3. All people in South Africa are and feel safe;
4. Decent employment through inclusive economic growth;
5. A skilled and capable workforce to support and inclusive growth path;
6. An efficient, competitive and responsive economic infrastructure network;
7. Vibrant, equitable and sustainable rural communities with food security for all;
8. Sustainable human settlements and improved quality of household life;
9. A responsive, accountable, effective and efficient local government system;
10. Environmental assets and natural resources that are well protected and continually enhanced;
11. Create a better South Africa and contribute to a better and safer Africa and world;
12. An efficient, effective and development oriented public service and an empowered, fair and inclusive citizenship.

These outcomes provide strategic focus and do not cover the whole of government work and activities. This does not mean that the other work of government that is not directly related to outcomes should be neglected.

Below follows an outline of how the MDG process was actually planned and followed.

## MDG REPORT PROCESS

The concept paper for MDG 2010 makes provision for the governance of the MDG process. Governance focuses on three committees involved in delivering the MDG Report (MDGR) and the workshops in which issues of the MDGs are discussed with stakeholders. Consultative workshops have also played a central role in both setting targets for and domesticating the indicators. The three key committees guiding the process have been the National Coordinating Committee, the Sectoral Working Group and the Report Writing Team. The process for the preparation of the MDG is represented in the process flow below:




A National Methodology Workshop was held from 19 to 20 November 2009. The overall objective of the workshop was to adjust MDG indicators to reflect the local context by ensuring that the globally designed targets and indicators are in line with the local reality. This overall objective was to be achieved through five sub-objectives, namely:

1. To identify MDG indicators that might need twinning to enable both international comparisons and realistic interpretations of local reality. In this case, the generic or standard MDG indicator would facilitate international comparisons while the local indicator would be used for monitoring national development. An example is the use of the poverty line as a proxy poverty measurement; the US$1 a day (purchasing power parity) is more appropriate for international comparisons whereas a national poverty line would be more appropriate for national planning. In this regard we have provided both measures in the report.

2. To identify indicators which are relevant to South Africa but might be inappropriate to use for measurement in the context of South Africa. An example is the use of bed nets as a measure for controlling malaria when the local anti-malaria strategy uses house sprays.

3. To identify new targets and indicators for the goals to properly reflect the South African context, for example inclusion of the availability of classrooms among the indicators on education.

4. To identify targets which might require disaggregation by sex and race to be more relevant and useful, e.g. for purposes of eliciting gender gaps in earnings and prevalence rates for domestic violence.

5. To begin stakeholder consultation to encourage stakeholder engagement and participation in the development process by advocating for their own situations. Stakeholders have a specific role to play in development policy and decision-making processes. Furthermore, they constitute a collective with a shared responsibility for development whilst the leadership role of government is legitimised by progressive delivery of and on constitutional, legislative and administrative prescripts. The outcomes of stakeholder involvement is stakeholder (country) ownership of the Millennium Development Goals Country Report through stakeholders defining what is important to them and their engagement in what counts. The MDGs were domesticated through focus groups (for the more vulnerable members of society) as well as workshops.

| Desired outcomes of the workshop | Achieved outcomes of the workshop |
|---|---|
| ▪ List of domesticated indicators<br>▪ List of sources for data to populate the indicators<br>▪ A database of stakeholders to advance advocacy for the MDGs and related development issues | ▪ A country report relevant to the South African reality<br>▪ A country report that can be used in the monitoring activities of the government |

The overall outcomes achieved as a result of national, provincial and sector-specific consultative process have been:

- A nationally-owned MDG process and reports;
- Statistical capacity and capacity for statistical coordination built in both Stats SA and among stakeholders at both national and provincial levels;
- Appreciation for evidence-based decision-making;
- Monitoring and evaluation capacity being built in South Africa;
- Facilitation for rising levels of statistical debate;
- Awareness of poverty and development issues; and
- Restoration of trust in the MDGR and other reports resulting from the MDG process.

A series of methodology workshops were held in four different provinces:

- Limpopo and Mpumalanga held on 17 and 18 March 2010
- Gauteng, Free State, and North West held on 30 and 31 March 2010
- Eastern Cape, Northern Cape, and Western Cape held on 10 and 11 March 2010
- KwaZulu-Natal held on 26 and 27 November 2009. The KwaZulu-Natal process is led by the KwaZulu-Natal Office of the Premier

A validation workshop was held on the 6 July 2010. The purpose of the workshop was to allow the SWGs and other stakeholders to interrogate the proposed draft goal reports. The first NCC meeting was held on 10 May 2010 where the various SWGs gave feedback to members of the NCC on progress around data collection and computation of indicators. The second NCC meeting was held on 14 July 2010 where the various goal reports were presented. The third NCC meeting was held on 2 August 2010 to validate the country report. The report was then presented to Cabinet on 8 August, and to a meeting of CSOs on 9 August, following on a National Summit of CSOs held in Cape Town from 30 August to 1 September which culminated in a CSO Cape Town Declaration on Millennium Development Goals.

**Preamble to the eight-goals report**

The pre-eminence, stature and commitment of South Africa to global peace and well-being are well established and is appropriately captured in its priority area 'Create a better South Africa and contribute to a better and safer Africa and World'. This is an unambiguous expression and an explicit commitment to how South Africa will contribute to global partnerships. Indeed, South Africa, in partnership with African leaders, adopted NEPAD as a vehicle for Africa's renewal. Evidence for driving the agenda with Africa and on behalf of Africa is carried in our memories of a grandiose and successful 2010 FIFA World Cup that South Africa recently held. There is no doubt that the world has a different view about South Africa and Africa. The world has witnessed that South Africa has the potential and indeed what it takes to address development challenges. It should therefore not be surprising that South Africa has played a major role in peace building and peace-keeping missions, specifically in Africa. South Africa has committed constitutionally to eliminate all forms of discrimination and to building a more equal society. To achieve such a goal, gender and violence against women and children are cross-cutting and deserve attention and inclusion in all eight goals.

Any development effort that excludes women is poised to suffer major setbacks. Women are the majority in the population and they influence decisions at a crucial level of the economic unit, namely the family, so their inclusion is a matter of necessity and informed national self-interest and not an act of generosity. The South African government has made it its business to domesticate the Millennium Development Goals and locate in its policy specifically the needs of women and children. The priorities of government match the MDG agenda, and the country report recognises and acknowledges government commitments as articulated in various policy documents and practices, including the development of ground-breaking policy and targeted programmes especially towards achieving gender equality and women's empowerment. However, it is necessary that more is done. In this regard, government should take explicit and decisive steps to ensure that policies and interventions give effect to the implementation of all the MDGs, and pay acute attention to vulnerable people, who in the main are children and females, and to the needs of women and girl children.

To address these challenges the country report contains the following intentions:

- Government and the private sector (in partnership with organs of civil society organisations) should develop and speed up the implementation of a Programme of Action on MDGs by 2014 in order to sustain the current policy platform and intensify gains arising from a focused gender and age-sensitive MDG agenda;

- All programmes aimed at the achievement of the MDGs should be linked to violence against women and children;
- Consistent with prescripts of Goal 8 on partnerships, government should engage civil society organisations on international and regional matters in relation to Millennium Development Goals in ways similar to public participation and delegations on the Beijing Platform of Action;
- Partnerships with government should be strengthened by ensuring that resources and institutions such as the Land Bank/National Development Agency and others support the programmes towards poverty eradication;
- A clear programme outline and resource portfolio should be provided for the Ministry of Women and Children and People with Disabilities, which will facilitate rationale engagement with civil society structures and community without delay. This ministry encompasses two-thirds of the population and as a consequence resources commensurate to this demand area should be progressively availed; and
- Government should strengthen interventions regarding HIV and AIDS programmes mainly encompassing women at grassroots level. Such interventions should include but not be limited to all health care and home-based workers as community care workers.

# MDG 1: ERADICATE EXTREME POVERTY AND HUNGER

## 1.1 BACKGROUND

Poverty is a multifaceted phenomenon and actions geared towards eradicating it imply that the facets that manifest it must be progressively and comprehensively attended to in order to improve the material well-being of citizens. The Millennium Development Goals have identified targets for addressing extreme poverty and hunger under MDG 1. The key indicator for this goal is 'a dollar a day'. This measure has been revised upwards over time to take into account the changing cost of living. Secondly, for low-income countries the target was a dollar a day, whilst for middle-income countries the measure was set at $2.50 a day. Whilst South Africa is classified as a middle-income country, its society's income is very unevenly spread. The majority of the population qualifies the country as a low-income country. It is at this part of society that government interventions are targeted and it is in this sector where MDG 1 is applicable. In this regard, a few important observations can be made by reviewing Table 1.2 that displays facts and figures for MDG 1. The table presents several indicators that provide a comprehensive picture on the state of play regarding poverty and hunger in South Africa. The rendition therefore will go beyond the MDG specifics and provide further insights on the extent of interventions on matters poverty and hunger.

***Government of South Africa – Outcome Area 8: Sustainable human settlements and improved quality of household life***

Government adopted a comprehensive approach to eradicating extreme poverty and hunger. This approach combines cash transfers with social wage packages including clinic-based free primary health care (PHC) for all, compulsory education for all those aged seven to thirteen years, and provision of subsidised housing, electricity, water, sanitation, refuse removal, transportation, and transfer of township housing stock to those who have been resident in these properties for a set minimum period of time.

**Information base:** Indicators for this Goal are the Gini, dollar-based poverty measures, employment, income per capita, social services and government-based social assistance programmes. In some instances the data are disaggregated by sex and race to provide the socio-economic specificities of South Africa.

## 1.2 FACTS AND FIGURES

| Goal 1 and indicators | 1994 baseline (or closest year) | Current status 2010 (or nearest year) | 2015 target | Target achieva-bility | Indicator type |
|---|---|---|---|---|---|
| **GOAL 1: ERADICATE EXTREME POVERTY AND HUNGER** | | | | | |
| Proportion of population below $1 (PPP) per day | 11.3 *(2000)* | 5.0 *(2006)* | 5.7 | **Achieved** | **MDG** |
| Proportion of population below $1.25 (PPP) per day | 17.0 *(2000)* | 9.7 *(2006)* | 8.5 | **Likely** | **Domestic** |
| Proportion of population below $2 (PPP) per day | 33.5 *(2000)* | 25.3 *(2006)* | 16.8 | **Possible** | **Domestic** |
| Proportion of population below $2.50 (PPP) per day | 42.2 *(2000)* | 34.8 *(2006)* | 21.1 | **Unlikely** | **Domestic** |
| Poverty gap ratio ($1 (PPP) per day) | 3.2 *(2000)* | 1.1 *(2006)* | 1.6 | **Achieved** | **MDG** |
| Poverty gap ratio ($1.25 (PPP) per day) | 5.4 *(2000)* | 2.3 *(2006)* | 2.7 | **Achieved** | **Domestic** |
| Poverty gap ratio ($2 (PPP) per day) | 13.0 *(2000)* | 8.1 *(2006)* | 6.5 | **Possible** | **Domestic** |
| Poverty gap ratio ($2.5 (PPP) per day) | 18.0 *(2000)* | 12.5 *(2006)* | 9.0 | **Possible** | **Domestic** |
| Share of poorest quintile in national consumption | 2.9 *(2000)* | 2.8 *(2006)* | 5.8 | **Unlikely** | **MDG** |
| Percentage growth rate of GDP per person employed | 4.7 *(2002)* | 1.9 *(2009)* | 6.0 | **Possible** | **MDG** |
| Employment-to-population ratio | 41.5 *(2003)* | 42.5 *(2009)* | 50 – 70 | **Unlikely** | **MDG** |
| Proportion of employed people living below $1 (PPP) per day | 5.2 *(2000)* | No data | ≈ 0 | **Unlikely** | **MDG** |
| Proportion of own-account and contributing family workers in total employment | 11 *(2001)* | 9.9 *(2010)* | ≈ 5 | **Possible** | **MDG** |

| Goal 1 and indicators | 1994 baseline (or closest year) | Current status 2010 (or nearest year) | 2015 target | Target achieva-bility | Indicator type |
|---|---|---|---|---|---|
| Prevalence of underweight children under-five years of age (as a percentage) | 9.3 *(1994)* | 10.2 *(2005)* | 4.7 | **Unlikely** | **MDG** |
| Incidence of severe malnutrition in children under 5 years of age (rate per 1,000) | 1.4 *(1994)* | 1.0 *(2005)* | 0.7 | **Possible** | **Domestic** |
| Proportion of population below minimum level of dietary energy consumption | No data | No data | No target | **Unknown** | **MDG** |
| Percentage children below minimum level of dietary energy consumption | 46.3 *(1999)* | No data *(2005)* | 23 | **Unknown** | **Domestic** |
| Gini coefficient (including salaries, wages and social grants) | 0.70 *(2000)* | 0.73 *(2006)* | 0.3 | **Unlikely** | **Domestic** |
| Gini coefficient (per capita expenditure excluding taxes) | 0.65 *(2000)* | 0.67 *(2006)* | | | |
| Proportion of households with access to free basic services: • Water | 66.0 *(2002)* | 60.6 *(2008)* | No target | **Not applicable** | **Domestic** |
| • Electricity | 41.0 *(2002)* | 34.8 *(2008)* | | | |
| • Sewerage and Sanitation | 31.2 *(2002)* | 32.7 *(2008)* | | | |
| • Solid waste | 18.4 *(2002)* | 21.8 *(2008)* | | | |

| Goal 1 and indicators | 1994 baseline (or closest year) | Current status 2010 (or nearest year) | 2015 target | Target achieva-bility | Indicator type |
|---|---|---|---|---|---|
| Percentage of indigent households receiving free basic services<br>• Water | 61.8<br>*(2004)* | 73.2<br>*(2007)* | No target | **Not applicable** | **Domestic** |
| • Electricity | 29.2<br>*(2004)* | 50.4<br>*(2007)* | No target | **Not applicable** | **Domestic** |
| • Sewerage and Sanitation | 38.5<br>*(2004)* | 52.1<br>*(2007)* | No target | **Not applicable** | **Domestic** |
| • Solid waste | 38.7<br>*(2004)* | 52.6<br>*(2007)* | No target | **Not applicable** | **Domestic** |
| Number of beneficiaries of Income Support (millions) | 2.6<br>(1997) | 14.1<br>(2010) | No target | **Not applicable** | **Domestic** |

## 1.3 INSIGHTS

Globally, with as many as one in three women being violently assaulted in her lifetime, the chances of severe, debilitating injury to a large number of abused women are high Severely abused women are generally unable to work, especially if they are also responsible for performing the physical labour of harvesting food and gathering fuel and water for their families. During the UN Civil Society plenary Session held from 14 to 15 June 2010, it was noted that violence against women is increasingly acknowledged to be both a consequence and a cause of poverty among women and children.

The evidence on the link between poverty and violence is not conclusive, i.e. has not been proved and therefore one cannot accept or state that poor people, for being poor, are more violent than those with economic resources. What is known is that poor people are more vulnerable because of the lack of leisure spaces, lower educational level and other social and environmental deprivations. Hunger and the need for bringing home food lead many people, in despair, to steal and, sometimes, to commit more serious crimes. Violence against women is a cause and consequence of economic dependence for women.

Injuries and fear of violence prevent women from engaging in productive employment leading to a drain on both households and national economies. One study has estimated that incidents of violence can result in loss of household income equivalent to 25-30 per cent of the monthly income of poor households. It has also been estimated that for the South Africa the loss of economic output due to violence against women is as high as R3 billion per year.

Poverty alleviation programmes can in fact be undermined by this huge drain of resources at household and national levels. Furthermore, domestic violence is linked to the unequal distribution of resources within the household resulting in poverty and hunger for women and their children.

**Absolute poverty:** The proportion of people experiencing absolute poverty has declined. This is based on two essential measures, namely the proportion of the population who live below the thresholds of $1 up to $2.50 per day, and the poverty gap ratio which has also reduced. Applying this measure, South Africa has effectively more than halved the population living below the poverty line of a $1 per day, thus achieving MDG1 of halving poverty. The decline is from 11.3% in 2000 to 5% in 2006. Whilst poverty has been halved for both males and females, the proportion of females living below $1 (PPP) per day remains high compared to that of males: 12.0% (females) and 10.0% (males) in 2000; and

5.3% (females) and 4.8% (males) in 2006. The same pattern is found when other poverty lines such as $1.25, $2, and $2.5 per day are used. It is unlikely that South Africa will meet this MDG at $2.50 per day even though the proportion of those below this threshold indicates a declining trend across time, namely from 42.2% in 2000 to 34.8% in 2006. The evidence of a decline in absolute poverty is further confirmed by commensurate declines in the poverty gap ratio. The average poverty gap is the average amount by which a proportion of the population fall below a given poverty line. This ratio declined from 3.3 in 2000 to 1.1 in 2006 at the $1 per day threshold.

**Income distribution:** To measure income distribution, a measure called the Gini is applied. The Gini value ranges from 0 to 1. A Gini value of zero implies equal proportion of population access commensurate proportion of income, thus a Gini of zero would imply equal income distribution across the population. A Gini of one on the other hand implies an extremely unequal distribution of income. The report presents several Ginis in the table. It is clear from the table that, depending on which definition one uses, a series of Ginis with an upper bound in 2006 of 0.73 and a lower bound of 0.67 can be generated. These different estimates depend on whether the Gini is based on gross income or net income, expenditure, includes or excludes social grants, household or per capita income and a variety of other permutations. In sum, the level of the Gini is extremely sensitive to what is included or excluded as income. It is also important to bear in mind that the social grants play an important role in reducing the level of the Gini estimate.

What also needs to be stressed is that one cannot from the presentation of the two years of the Gini estimates infer that the inequality measure has worsened. As for consistency, the Income and Expenditure Survey, which is the key source for these measures, in its attempts to improve the data, has been subjected to many significant changes from 1995 to 2006. Amongst the changes that took place, one notes that the sample frame in 1995 was different from that of 2000 and 2006; the collection methodology changed substantially from 2000 to 2006; and finally, sampling variability in both surveys potentially would affect any measure of change. Hence, while we can conclude that inequality remains high, we cannot automatically infer from the data that inequality has worsened.

**Food poverty line:** Elaborating further on poverty reduction applying the domesticated food poverty line, Table 1.1 below shows that the percentage of the population living below the food poverty line of R148 in 2000 and R209 equivalent in 2006 declined from 28.5 to 24.8 respectively. The same downward trend was observed when looking at the food poverty line by sex because for both males and females the proportion of people living below the food poverty line declined between 2000 and 2006 from 26.7% for males to 22.9% and for females it declined from 30.2% to 26.4%. However, it should be noted

the proportion of females living below the food poverty line (similar to the trend observed using the international lines) remains high compared to that of males. Although the target is achieved in terms of the MDGs targets as provided for at a $ 1 and $ 1.25 per day measure, poverty remains a reality in South Africa as indicated in Table 1.1 below.

**Table 1.1: Percentage living below poverty lines and poverty gap; 2000 and 2006**

| Poverty line | Percentage below poverty line | | Poverty gap | |
|---|---|---|---|---|
| | 2000 | 2006 | 2000 | 2006 |
| Food poverty line | R148<br>28.5 | R209<br>24.8 | R148<br>10.4 | R209<br>7.9 |
| $1.00 (ppp) | 11.3<br>(0.72) | 5.0<br>(0.77) | 3.2 | 1.1 |
| $1.25 (ppp) | 17.0<br>(0.85) | 9.7<br>(0.95) | 5.4 | 2.3 |
| $2.00 (ppp) | 33.5<br>(1.23) | 25.3<br>(1.36) | 13.0 | 8.1 |
| $2.50 (ppp) | 42.2<br>(1.44) | 34.8<br>(1.60) | 18.0 | 12.5 |

*Parentheses show the average income of those below the specific poverty line in $(ppp)*
Source: *Income and Expenditure Surveys 2000, 2005/6*

Table 1.2 represents the racial distribution of poverty in South Africa and shows that interracial inequality remains high. In this regard, the Black African population which in 2006 constituted 79.4 per cent of the population and 76.8% of households, earned 41.2 per cent of the 747.6 billion ZAR of income. In contrast to this, 45.3% of that income was earned by white persons who constituted only 9.2 per cent of the population.

**Table 1.2: Percentage distribution of household income within per capita income deciles by population group, 2006**

| Decile | Black African | Coloured | Indian/Asian | White | Total income (ZAR billion) |
|---|---|---|---|---|---|
| **1** | 93.2 | 3.2 | 0.5 | 3.0 | 1.1 |
| **2** | 94.2 | 4.0 | 0.8 | 1.0 | 9.0 |
| **3** | 93.0 | 5.4 | 0.4 | 1.1 | 16.2 |
| **4** | 90.3 | 7.9 | 0.8 | 1.0 | 21.5 |
| **5** | 83.6 | 12.0 | 2.6 | 1.7 | 26.2 |
| **6** | 78.7 | 16.0 | 2.7 | 2.6 | 35.4 |
| **7** | 78.7 | 13.6 | 2.4 | 5.0 | 47.6 |
| **8** | 63.7 | 12.9 | 7.0 | 16.1 | 76.7 |
| **9** | 47.8 | 11.4 | 6.8 | 33.8 | 133.0 |
| **10** | 17.0 | 5.5 | 4.7 | 72.7 | 381.0 |
| Total income (ZAR billion) | 41.2 | 8.6 | 4.8 | 45.3 | 747.6 |
| % of total population | 79.4 | 8.8 | 2.5 | 9.2 | 100<br>(n= 47.4 million) |
| % of households | 76.8 | 7.8 | 2.5 | 12.8 | 100<br>(n=12.5 million) |

Source: *Income and Expenditure 2006*

**Race-based analysis on income distribution:** Within the deciles, evidence points out that 93.2% of the income of the lowest decile of 1.1 billion ZAR was earned by the Black African population and only 3% by the white population. The result suggests that there are severe racial disproportions in income distribution, and this is mainly skewed towards the Black African population. At the top end of the scale, only 17% of the income is attributed to Black Africans whilst 72.7% is shared amongst the white population.

Table 1.3 below shows that the share of the poorest quintile is less than 2% for both 2000 and 2006. Similarly, when consumption is considered, the share of the poorest quintile is less than 3%, although there appears to be a slight drop in 2006 as compared to 2000.

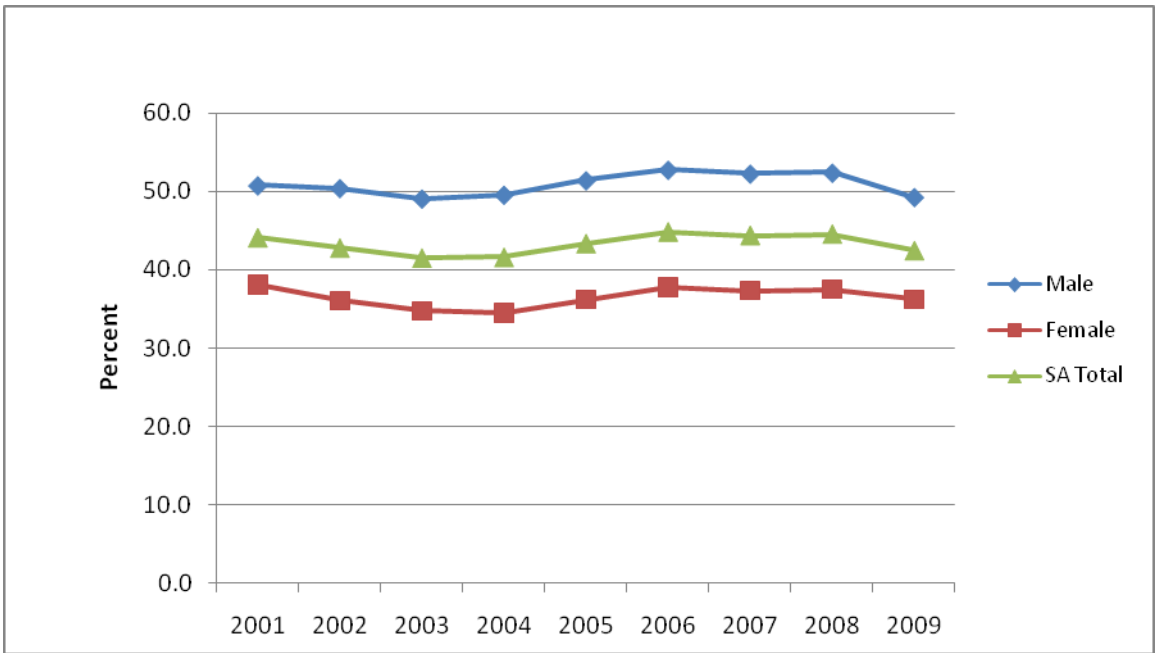
**Table 1.3: Share of the poorest quintile in total consumption**

| Time period | Income | Consumption |
|---|---|---|
| 2000 | 1.9 | 2.9 |
| 2006 | 1.8 | 2.8 |

Source: *Income and Expenditure Survey 2000 and 2005/6*

**Employment as a correlate of poverty:** In the South African context, poverty and unemployment remain structurally inter-linked. The employment to population ratio in South Africa since 2001 is low, averaging 51% for males and 37% approximately for females. The national average is approximately 43%. This ratio suggests a high level of unemployment in South Africa which although declined from a high of 29% in 2000 to a low of 24% in 2009, still remains high by any standard. The result of this phenomenon is a potential increase of poverty especially amongst females.

**Figure 1.1: Employment to population ratio**




Source: *Labour Force Survey 2000-2008, Quarterly Labour Force Survey 2009*

As regards the measurement of the proportion of employed people living below a $1 a day, the Income and Expenditure Survey is usually used. In 2000, the Labour Force and Income and Expenditure Surveys were conducted simultaneously in the same households. This survey implementation strategy made it possible to generate information for the measurement of the proportion of employed living below $1 (PPP) a day. However this survey strategy was not implemented in 2006 and instead the Income and Expenditure Survey was conducted in a different master sample to that of the Labour Force Survey. Consequently, as regards 2006, a corresponding measure to 2000 does not exist. According to the joint 2000 surveys, 5.2% of the employed population earned less than $1 per day (PPP).

**Table 1.4: Proportion of employed people living below $1 a day**

| Poverty status | Employed (thousands) | Proportion of employed people living below $1 a day |
|---|---|---|
| Non-poor | 11 431 | 94.8 |
| Poor | 628 | 5.2 |
| **Total employed*** | **12 058** | **100.0** |

Source: *Labour Force Survey 2000, Income and Expenditure Survey 2000*

On average, the highest percentage of own-account workers and unpaid contributing family members are found in Limpopo at 20.9%, and the lowest percentage is recorded in the Northern Cape at 4.2%. There is a higher percentage variation in own-account workers and unpaid contributing family members between provinces than within each province across years.

**Table 1.5: Own-account workers and unpaid contributing family members by province and year**

| Province | Year | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | Average |
| Western Cape | 6.9 | 6.4 | 5.0 | 5.5 | 6.7 | 6.7 | 5.5 | 5.6 | **6.0** |
| Eastern Cape | 15.2 | 12.6 | 12.8 | 14.5 | 14.0 | 14.0 | 12.0 | 12.6 | **13.5** |
| Northern Cape | 2.7 | 3.0 | 3.8 | 6.5 | 5.0 | 5.0 | 4.2 | 3.5 | **4.2** |
| Free State | 9.3 | 9.3 | 10.5 | 10.9 | 10.6 | 10.6 | 9.7 | 10.2 | **10.1** |
| KwaZulu-Natal | 12.5 | 10.4 | 9.8 | 12.1 | 11.9 | 11.9 | 11.5 | 11.0 | **11.4** |
| North West | 10.1 | 9.8 | 9.8 | 11.8 | 9.8 | 9.8 | 8.7 | 8.7 | **9.8** |
| Gauteng | 9.1 | 8.6 | 8.6 | 9.3 | 9.9 | 9.9 | 8.9 | 8.9 | **9.1** |
| Mpumalanga | 18.1 | 18.0 | 19.2 | 16.4 | 15.2 | 15.2 | 15.6 | 13.5 | **16.4** |
| Limpopo | 22.1 | 23.4 | 21.6 | 23.0 | 21.5 | 21.5 | 16.9 | 17.6 | **20.9** |
| RSA | 11.5 | 10.6 | 10.4 | 11.4 | 11.3 | 11.3 | 10.1 | 10.0 | **10.8** |

Source: *Labour Force Survey 2000-2008, Quarterly Labour Force Survey 2008-2009*

Poverty and underemployment and or unemployment generally result in poor levels of nutrition, increased levels of food insecurity and incidences of malnutrition. A reasonable proxy for income poverty and hunger is child under-nutrition.

Table 1.6 shows severe malnutrition incidence for under-five children averaged over the period 2001 to 2010, according to data provided by District Health Information System in the Department of Health. It shows that, on average, the highest incidences of severe malnutrition were in KwaZulu-Natal (13.3%), Northern Cape (9.8%) and North West (9.4%), and these incidents are lowest in Limpopo (4.4%), Free State (5.1%), Mpumalanga (5.4%) and Gauteng (6%). Over the reference period, the national incidence of severe malnutrition averaged 7.8%.

**Table 1.6: Severe malnutrition incidence for children under 5 years by province**

| Prevalence of malnutrition (%) | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Western Cape | Eastern Cape | Northern Cape | Free State | KwaZulu-Natal | North West | Gauteng | Mpuma-langa | Limpopo | RSA |
| 3.8 | 8.1 | 9.8 | 5.1 | 13.3 | 9.4 | 6.0 | 5.4 | 4.4 | 7.8 |

Source: *District Health Information System*

## Government-based social assistance programmes

To counteract the effects of unemployment, the post-apartheid government focused on short-term to medium-term solutions for eradicating extreme poverty and hunger.

**Free basic services and targeting the indigent:** The government's anti-poverty strategy has been to implement a comprehensive social security programme that combines income support (through the grant system) with a social wage package that includes clinic-based free primary health care (PHC) for all, compulsory education for all those aged seven to thirteen years, and subsidised housing, electricity, water, sanitation, refuse removal and transportation for those that qualify.

The total number of indigent households receiving free basic services in South Africa vary by types of service. Municipalities across the country have identified and registered households that are indigent. The definition of an indigent household however, varies across municipalities, making it difficult to compare the figures directly. The policy of government is to discriminate provision of free basic services in favour of the indigent. The table below shows the number of households receiving free basic services as well as quantifying amongst them the indigent households receiving any of the services. As a percentage to general access by the public to free basic services, services to the indigent are more targeted, thus suggesting that government is addressing poverty consistent with its policy prescripts.

Table 1.7 below gives information on the current targets set by the South African government in order to accelerate service delivery to meet the basic needs of the citizens and to promote growth.

**Table 1.7: Minimum standard for each basic service, source vision 2014**

| Sector | Minimum standard 2014 target |
|---|---|
| Water | All households to have access to at least clean piped water located at least within 200 m from the household. |
| Sanitation | All households to have access to at least a ventilated pit latrine on site. |
| Electricity | All households to be connected to the national grid |
| Refuse removal | All households to have access to at least once-a-week refuse removal services. |
| Housing | All existing informal settlements to be formalised with land-use plans for economic and social facilities and with provision of permanent basic services. |
| Other (education, health, roads, transport, sports and recreation, street trading, parks, community halls, etc.) | Standards for access for all other social, government and economic services must be clearly defined, planned; and where possible implemented by each sector working together with municipalities in the development and implementation of IDPs. |

Source: *Local government turnaround strategy: November 2009*

## Progress in access to priority services

In examining the possibility of government meeting the above set of minimum standards, it is important to look at the latest available data (June 2008) regarding the provision of free basic services to the residents by municipalities. Of particular interest to policy-makers is the evidence that more households, particularly the previously disadvantaged, are receiving basic services from the municipalities in which they reside. The results show that about 460 000 more consumer units had access to basic electricity (an increase of 6,0%) between the 2007 and 2008 financial years. The largest contributors to that increase were Limpopo (120 436), Gauteng (99 487), and Northern Cape (77 363). Free State showed an increase of 13 272 consumer units, which is the lowest contributor.

**Table 1.8: Number of consumer units receiving electricity and water services from municipalities and services providers in South Africa: 2007 and 2008**

| Province | Electricity | | Water | |
|---|---|---|---|---|
| | 2007 | 2008 | 2007 | 2008 |
| Western Cape | 1 147 112 | 1 191 515 | 917 684 | 1 011 094 |
| Eastern Cape | 764 787 | 809 474 | 1 213 142 | 1 790 989 |
| Northern Cape | 176 723 | 254 086 | 212 499 | 248 363 |
| Free State | 562 068 | 575 340 | 626 011 | 659 658 |
| KwaZulu-Natal | 1 326 805 | 1 390 065 | 1 941 653 | 2 176 649 |
| North West | 645 899 | 613 554 | 678 501 | 733 393 |
| Gauteng | 1 690 155 | 1 789 642 | 2 566 240 | 2 820 537 |
| Mpumalanga | 533 456 | 562 297 | 798 967 | 817 109 |
| Limpopo | 790 060 | 910 496 | 935 766 | 1 245 969 |
| **South Africa** | **7 637 065** | **8 096 469** | **9 890 463** | **11 503 761** |

Source: *Non-Financial Census of Municipalities for the year ended 30 June 2008 (P9115)*

For water, the total number of consumer units that received free basic water services increased by 16,3% (from 9,9 million to 11,5 million) between the 2007 and 2008 financial years. Eastern Cape is tops the list with an increase of 47,6%, followed by Limpopo with 33,1 %. Mpumalanga showed the lowest proportion (2,3%), after Free State (5,4%).

Table 1.9 below shows the proportion of consumer units that benefited from the free basic electricity policy. According to 2008 estimates; 8,1 million consumer units were receiving electricity from municipalities and service providers in South Africa, and 2,8 million (34,8%) consumer units had access to free basic electricity. Free State had the highest proportion of consumer units that benefited from the free basic electricity policy (61,9%), followed by Western Cape (47,8%) and Gauteng (41,6%). KwaZulu-Natal had the lowest proportion (11,2%) after North West (19,8%).

As can be seen from Table 1.9 below, the 2008 estimates show that about 11,5 million consumer units received water from municipalities and service providers in South Africa, of which 7,0 million (60,6%) consumer units received it for free.

**Table 1.9: Number of consumer units receiving free basic electricity and water from municipalities**

| Province | Electricity | | | Water | | |
|---|---|---|---|---|---|---|
| | Number of consumer units receiving electricity services | Number of consumer units receiving free basic electricity services | % | Number of consumer units receiving water services | Number of consumer units receiving free basic water services | % |
| Western Cape | 1 191 515 | 569 279 | 47,8 | 1 011 094 | 836 122 | 82,7 |
| Eastern Cape | 809 474 | 281 471 | 34,8 | 1 790 989 | 1 025 384 | 57,3 |
| Northern Cape | 254 086 | 103 508 | 40,7 | 248 363 | 119 198 | 48,0 |
| Free State | 575 340 | 356 302 | 61,9 | 659 658 | 411 483 | 62,4 |
| KwaZulu-Natal | 1 390 065 | 155 579 | 11,2 | 2 176 649 | 1 202 694 | 55,3 |
| North West | 613 554 | 121 785 | 19,8 | 733 393 | 365 965 | 49,9 |
| Gauteng | 1 789 642 | 745 215 | 41,6 | 2 820 537 | 1 993 399 | 70,7 |
| Mpumalanga | 562 297 | 227 193 | 40,4 | 817 109 | 358 263 | 43,8 |
| Limpopo | 910 496 | 257 627 | 28,3 | 1 245 969 | 662 343 | 53,2 |
| **South Africa** | **8 096 469** | **2 817 959** | **34,8** | **11 503 761** | **6 974 851** | **60,6** |

Source: *Non-Financial Census of Municipalities for the year ended 30 June 2008 (P9115)*

**Income support:** As part of its poverty alleviation programme, the government operates a number of income support programmes including the old age grant, the child support grant, the disability grant, the foster care grant, care dependency and grant in aid. The reach of these programmes as shown in Table 1.10 is that the number of beneficiaries increased drastically between 1997 and 2010, leading to more than 14 million beneficiaries of income support programmes in 2010 as compared to 2.6 million in 1997.

**Table 1.10: Income support beneficiaries by province; 1997 to 2010 (millions)**

| Province | 1997 | 2010 | Annual average |
|---|---|---|---|
| Western Cape | 0.3 | 1.0 | 0.6 |
| Eastern Cape | 0.4 | 2.5 | 1.4 |
| Northern Cape | 0.1 | 0.4 | 0.2 |
| Free State | 0.3 | 0.8 | 0.5 |
| KwaZulu-Natal | 0.4 | 3.4 | 1.7 |
| North West | 0.2 | 1.1 | 0.6 |
| Gauteng | 0.6 | 1.7 | 0.9 |
| Mpumalanga | 0.2 | 1.0 | 0.5 |
| Limpopo | 0.3 | 2.0 | 1.1 |
| **Total RSA** | 2.6 | 14.1 | 7.5 |

Source: South African Social Security Agency

## 1.4 DISCUSSION

While the data indicate a number of positive and improving impacts on poverty, poverty does, however, remain one of South Africa's most serious developmental challenges. Over the past few years the government has prioritised a range of poverty reduction initiatives that include:

- National economic and development policy frameworks, specifically the Reconstruction and Development Programme (RDP), the National Growth and Development Strategy (NGDS), and the Growth, Employment and Redistribution strategy (GEAR);
- Anti-poverty strategies, including the Poverty Alleviation Fund and the general move towards developmental social welfare;
- A broad-based employment-creation and skills development focused on public works and this is currently operating as the Expanded Public Works Programme (EPWP);
- Public-works programmes aimed at promoting environmental conservation and job-creation, namely the Working for Water Programme and the LandCare Programme;
- Major infrastructure programmes, with a focus on the national housing programme; and
- Second-generation integration strategies, including the Integrated Sustainable Rural Development Programme (ISRDP) and the Urban Renewal Strategy (URS).

Despite the best efforts of the government and other development partners there continues to be a number of contingent and structural challenges that are hindering successful poverty eradication:

| | |
|---|---|
| ➢ **The effects of declining GDP growth on the poor** | While national data indicates strong GDP growth up to 2006, per capita GDP started to decline from 2007. Although no disaggregation analysis was done, it is possible that the decline would negatively affect the poor more than the rich |
| ➢ **Persistent high levels of income and expenditure inequalities** | Both income and expenditure are heavily skewed towards the rich. The per capita mean income and per capita mean expenditure of the poorest decile are only 1.1 and 1.8 per cent of that of the richest decile. |
| ➢ **Poverty levels remain high, with a disproportionate impact on women** | Unemployment remains stubbornly high, and a comparison by gender shows that there are still higher levels of employment to population ratio. This is higher for women (43%) than it is for men (36%). |

Given the legacy of poverty, inequality and marginalisation, the government has made significant progress in a number of poverty reduction initiatives. The evidence suggests that MDG 1 may be an achievable goal if government's poverty reduction strategies continue at current levels. There will, however, need to be a concerted effort to strengthen employment and income generation initiatives, and to ensure that integrated poverty-reduction programmes address the ever-increasing income disparities. It is clear, however, that these initiatives are in most cases providing a strong platform for further sustainable, longer-term solutions to poverty-related issues:

| | |
|---|---|
| ➢ **A significant strengthening and expansion of the social wage** | Government's approach to eradicating extreme poverty and hunger has been a comprehensive one combining cash transfers with social wage packages including clinic-based free primary health care (PHC) for all, compulsory education for all those aged seven to thirteen years, and to those that qualify for subsidised housing, electricity, water, sanitation, refuse removal, transportation, etc; |
| ➢ **A noticeable reduction in the poverty gap** | The current poverty gap reflects substantive gains in poverty reduction, with the Poverty gap measure showing a marked decrease, indicating that the income of even the extremely poor has improved. With the economic recession it is likely that reversal of gains will be witnessed. |
| ➢ **A reduction in income disparity and general socio-economic inequalities** | Efforts to grow the income of the poor are succeeding, with current policy initiatives that seek to enhance them, it is likely that income disparities may reduce. The reduction of income inequality without slowing down the overall growth of the economy is the government's optimal scenario. |

| | |
|---|---|
| ➢ **The positive impact of social transfers and other poverty reduction strategies for the poor** | The slightly higher percentage of per capita expenditure may be a result of many factors including social transfers. This may also point towards the positive impact of the programmes directed towards poverty reduction. However how sustainable social grants are remains to be seen. |
| ➢ **Rising per capita expenditure of the Black African middle income population** | The high national average per capita expenditure of 41.2% for Black Africans implies that the incomes of the Black African middle income population is also growing faster than that of the Black African poorest. This strongly suggests that poverty reduction strategies should be directed towards the poor Black African population |
| ➢ **A reduction in childhood malnutrition and under-nutrition** | The health sector has seen significant gains in efforts to reduce malnutrition amongst children, with interventions that include:<br>• National nutrition promotion programmes, including the Integrated Nutrition Programme and the Primary School Feeding Scheme;<br>• The promotion of breastfeeding, early detection of malnutrition, providing nutritional supplements for children and fortifying staple foods;<br>• Regulations have been introduced from 2003 for the mandatory fortification of all maize meal and white and brown bread flour, with six vitamins and two minerals, (i.e. Vitamin A, thiamine, riboflavin, niacin, pyridoxine, folic acid, iron and zinc);<br>• A public-private partnership has seen the provision of Vitamin A supplementation to children and mothers. By the end of March 2007, 96.4% of children aged six to eleven months (who were seen at health facilities) had received these supplements. |

## 1.5 CONCLUSION

Several factors account for the decline in absolute poverty. These include amongst others, overall economic growth for the period under consideration and reallocation of government priorities through the introduction of an expansive social grants system. In particular, South Africa focused on mitigating effects of poverty in expanding the social assistance programme. For instance, the grant system has grown from a reach of 2.6 million persons to one that reaches to 14.1 million persons in 2010, with a high and explicit bias progressively targeted to children. However, it must further be noted that these measures of poverty do not take into consideration other forms of pro-poor government investments such as developments in health care, housing, water and sanitation and electricity where targeted interventions are progressively directed towards the indigent.

In contrast to absolute poverty, relative inequality remains high, as measured by the Gini coefficient. One important factor that contributes (but is not exclusively responsible for high inequality), is the high unemployment rate and low labour force participation rate in South Africa. Not surprisingly, the employment to population ratio remains below the

target set. The main reason why South Africa's employment to population ratio is below the MDG target, is the high unemployment rate, hovering around 25%, going slightly below at times of boom, and marginally above in the recession. A low employment to population ratio results in South Africa having a high dependency ratio. In other words, there is an exceptionally large number of non-working people depending on each employed person.

A few important conclusions can be drawn from an assessment of Goal 1, consistent with the indicators presented in the table. Absolute poverty has declined, based on a period of economic growth combined with a series of redistributive measures carried out by the government of the day. Most notable, is the five-fold increase in the number of people benefiting from social grants. An additional area of importance, not captured by the above measures of income inequality, is a variety of pro-poor investments in services such as sanitation, housing and others. Challenges, however, remain in South Africa. These range from a persistently unequal society, although with scope for accelerating declines in absolute poverty specifically for a proportion of the population, living under $2.50 a day. Further attention needs to be paid to malnutrition and child health and the problem of unemployment as a long-term solution that would potentially replace social assistance programmes. In this regard the following recommendations are appropriate.

**Recommendations**

- Government departments should tailor responses in terms of programmes and budgets to address disparities and in an enjoined programme optimise actions that cushion against negative consequences on the vulnerable;
- Improve the current food security interventions, which include (Food Parcels, Soup Kitchens, Social Grants), and constantly monitor their usage and their impact on recipients along the lines adopted by Brazil where a move to achieving Zero Hunger is followed at local level;
- Government should support Women in Cooperatives and secure land for this purpose, whilst school governing boards should consider making more effective use of school gardens as food production units, and communities on their part should have community gardens and use methods that transform backyard gardens units into sustainable fresh produce units;
- Communities should demand the implementation of a socially cohesive response to poverty and implementation of nutrition programmes across departments;
- Municipalities should focus on Local Economic Development (LEDs) initiatives that are skills creating, employment generating and domestic production and consumption promoting such as bakeries and construction. In this regard Local Government should be strengthened and resourced to support local entrepreneurs;

- In partnership with CSOs government should implement skills development and mentorship with sharp focus on rebuilding artisan programmes that have the potential of targeting the young and in particular unemployed women;
- There should be greater focus on monitoring the outputs and outcomes of the Extended Public Works Programmes as it holds the potential for poverty relief and providing first level skills and opportunity for productive citizenry;
- Government through CSO channels should speed up land reform and support services that include finances, training, low-cost inputs, mentoring, infrastructure and access to markets;
- Put a ceiling on land prices and land ownership particularly on foreign land ownership
- Develop a programme that creates conditions and support for small-scale food processing and beneficiation
- Women should have inheritance rights of land especially in rural areas and tribal land
- Develop a leasehold system for land with user rights;
- Intensify the monitoring of price fixing especially on essential goods and products by corporate companies
- Government should create better, more reliable data systems that capture events accurately, classify them appropriately and disseminate them at a disaggregated level by sex and age for purposes of knowing, understanding and addressing poverty and vulnerability.

# MDG 2: ACHIEVE UNIVERSAL PRIMARY EDUCATION

## 2.1 BACKGROUND

The lack of women's decision-making power in the family and household limits their ability to make choices to safeguard the health, education and welfare of themselves and that of their children. In particular, where women and girls have a very low status in the household, they may have few alternatives or limited negotiation power to avoid social pressure to enter into an early marriage. Early marriage has a negative impact on MDG 2, since it reduces the likelihood that women will be able to ensure that their children receive an education, as well as decreasing the chance that they will attend or complete school themselves.

***Government of South Africa – Outcome Area 1: Improved quality of basic education***

An educated population remains the fundamental platform for meeting most of the other MDGs. Literate and educated people are in a better position to obtain meaningful and decent formal employment, and to create work opportunities for themselves and others. Education has the potential to iron out income disparities. Conditions for a more educated society are more likely to bring about a reduction in poverty, unemployment and want, and increase the overall standard of living of the population. Furthermore, education provides a firm foundation for life-long learning and skills acquisition, which are increasingly necessary elements of a dynamic, fast-moving knowledge-based society. Education is of particular importance for women, as it provides them with the necessary means and capacity to take leadership positions and enhances their scope for more equitable participation in decision-making processes that effect their own lives. Education also enables women to make more strategic choices around employment, sexual and reproductive health and childcare. Since 1994, the government has worked to reverse the detrimental impact that apartheid education policies and practices have had on the majority of South Africa's population. Following the 2009 national elections, the new administration split its Department of Education into two national departments: the

Department of Basic Education and the Department of Higher Education and Training. The rationale underpinning this change was recognition of the need to intensify and strengthen educational improvement initiatives at all levels of the education system, from foundation phase through to tertiary level. It is the Department of Basic Education that is primarily responsible for implementing the primary and secondary schooling elements of MDG 2.

**Information base:** Information for this indicator is sex disaggregated population base data for children aged 7–13 and persons 15–24 years of age.

## 2.2 FACTS AND FIGURES

| Goal and indicators | 1994 baseline (or closest year) | | Current status 2010 (or nearest year) | | 2015 target | Target achieva-bility | Indicator type |
|---|---|---|---|---|---|---|---|
| **GOAL 2: ACHIEVE UNIVERSAL PRIMARY EDUCATION** | | | | | | | |
| Net enrolment ratio in primary education | Used adjusted net enrolment ratio | | Used adjusted net enrolment ratio | | 100 | **Unknown** | **MDG** |
| Proportion of pupils starting grade 1 who reach last grade of primary | Used completion rates for 18 year olds | | Used completion rates for 18 year olds | | 100 | **Unknown** | **MDG** |
| Literacy rate of 15 – 24 year-olds, male and female | 83.4 *(2002)* | 88.4 *(2002)* | 89 *(2009)* | 93.1 *(2009)* | 100 | **Likely** | **MDG** |
| Adjusted net enrolment ratios primary education, male and female | 96.4 *(2002)* | 97.0 *(2002)* | 99.4 *(2009)* | 98.8 *(2009)* | 100 | **Achieved** | **Domestic** |
| Completion rate of primary education for 18 year olds | 89.6 *(2002)* | | 93.8 *(2009)* | | 100 | **Likely** | **Domestic** |

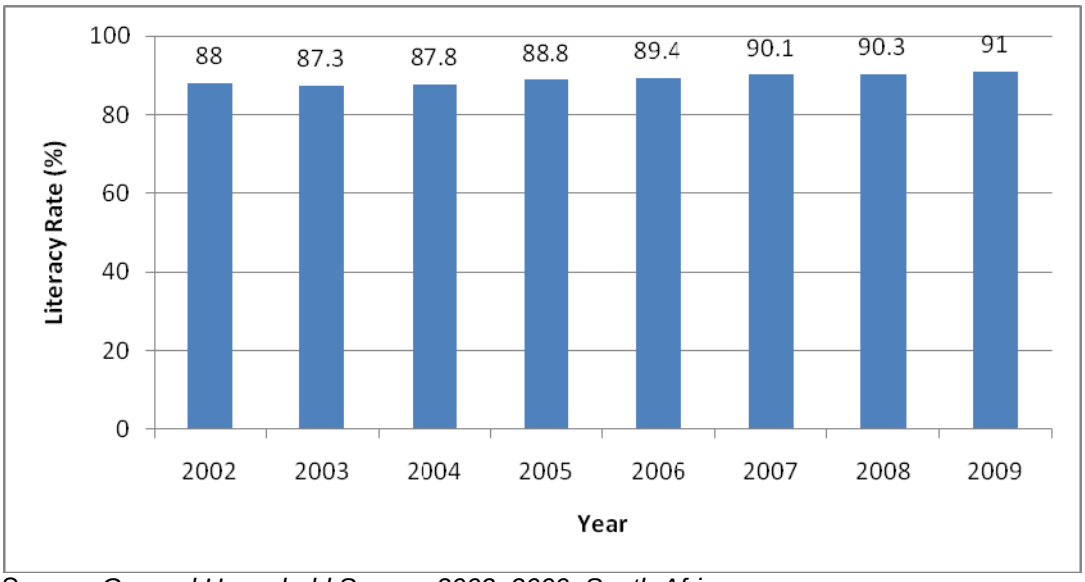
## 2.3 INSIGHTS

The population of children aged 7–13 years was about seven million and constituted 15.7% of the entire population of 44,819,780 in South Africa in 2001, the last census undertaken to date. The population of children aged 0–13 years constitutes nearly 30% of the South African population. In this context, it is significant that South Africa has attained almost universal access to primary education. According to the General Household Survey, school attendance for those aged 7–13 has increased from an already high level of 96.7% (boys 96.4% and girls 97.0%) in 2002 to 98.6% (boys 98.4% and girls 98.8%) in 2009. The functional literacy rate, which is based on educational achievement of up to Grade 7, has also risen from 88% to 91% during the decade.

However, where economic factors perpetuate the practice of early marriage, the gains that are observed run the risk of not reaching out to particularly the disadvantaged. In this regard there is need for policies that should provide socioeconomic security for girls and their households, thereby incentivising the family to keep girls in school, especially those who are vulnerable. In addition to ensuring completion of their education, transforming attitudes towards early marriage can have a significant inter-generational impact. Children are less likely to go to school if their mother has not been educated, and this is more likely to be the case if girls are married off young. The lost years of schooling not only impact

negatively on the girls themselves who are married young, but also on their community and the next generation. While there are many factors driving early marriage, this research shows that if women are able to exercise greater decision-making power over their lives and resist early marriage, then their children's primary completion rates are likely to be higher.

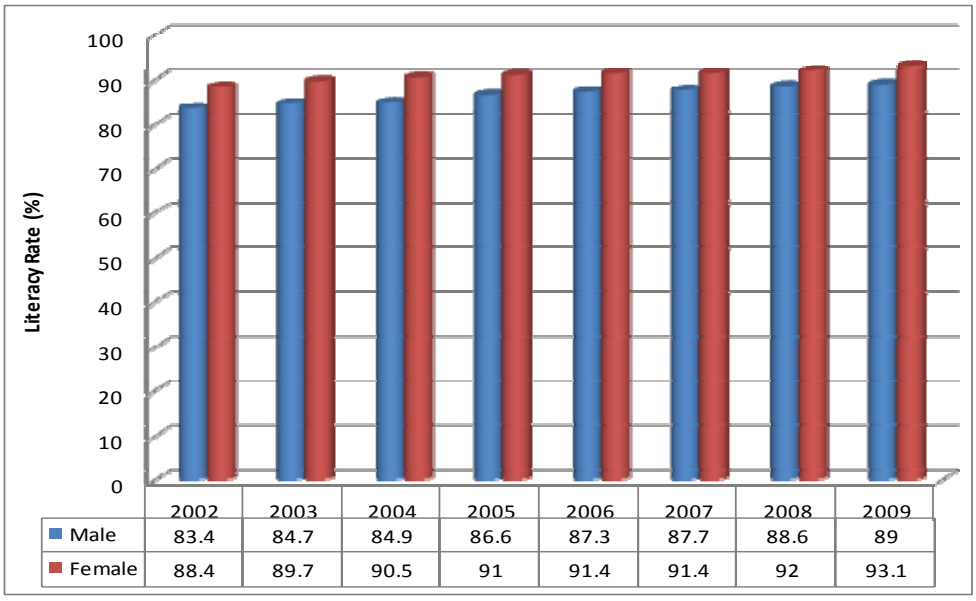
**Figure 2.1: Functional literacy levels of 15–24-year-olds, 2002–2009**




Source: *General Household Survey, 2002–2009, South Africa*

**Literacy:** In terms of age break down, the number of 15–24-year-olds that are not functionally literate has been decreasing steadily from 13% in 2002 to less than 10% in 2009. Completion rates of primary education and higher for those aged 18 years increased from 89.6% in 2002 to 93.8% in 2009. Evidence from the GHS indicates that the literacy rate among 15–24-year-olds (youth) has steadily increased in the past eight years. Figure 2.1 shows that the rate increased from 88.0% in 2002 to 91.0% in 2009.

**Figure 2.2: Literacy rates of 15–24-year-olds by sex in South Africa, 2002–2009**



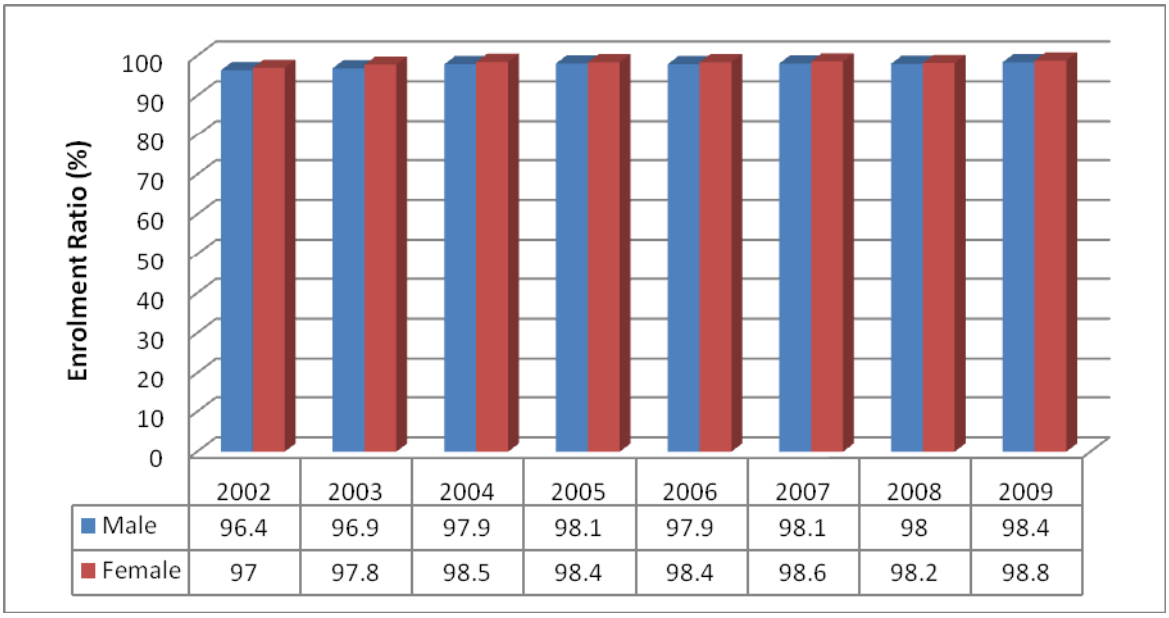

| | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
|---|---|---|---|---|---|---|---|---|
| Male | 83.4 | 84.7 | 84.9 | 86.6 | 87.3 | 87.7 | 88.6 | 89 |
| Female | 88.4 | 89.7 | 90.5 | 91 | 91.4 | 91.4 | 92 | 93.1 |

Source: Statistics South Africa, *General Household Survey, 2002–2009*

Functional literacy levels for male and female youths differ slightly as indicated by the sex disaggregated data in Figure 2.2, says that female rates are steadily higher than male rates over the eight year period.

**Age-specific over and under-subscription for level:** In South Africa, the appropriate age for primary education is 7–13 years, but some of the 13-year-olds may be enrolled beyond primary (in secondary school) and some other older children may still be in primary because of possible repetition of at least one class, whilst others who are not yet seven years of age are enrolled in primary. The Adjusted Net Enrolment Ratio used therefore considers all children in age group 7–13 regardless of the institution. School attendance of primary school pupils in South Africa also varies by sex, geographic location, disability and class repetition. Enrolment ratios are generally lower among boys (from 96.4% in 2002 to 98.4% in 2009) compared to girls (from 97.0% in 2002 to 98.8% in 2009). The difference, however, is not significant and overall there is a high degree of gender parity in terms of enrolment at this level of schooling.

**Figure 2.3: Enrolment ratios (adjusted) for 7–13 age group by sex: 2002–2009**




| | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
|---|---|---|---|---|---|---|---|---|
| Male | 96.4 | 96.9 | 97.9 | 98.1 | 97.9 | 98.1 | 98 | 98.4 |
| Female | 97 | 97.8 | 98.5 | 98.4 | 98.4 | 98.6 | 98.2 | 98.8 |

Source: Statistics South Africa, *General Household Surveys 2002–2009*

**Progression through the school system:** The proportion of pupils starting Grade 1 who reach Grade 7 may be regarded as a measure that could indicate whether a large number of pupils drop out of school before completing primary school. Class repetitions pose a greater threat to completion of primary education (Grade 7) in South Africa, particularly among boys, but the data indicates that the completion rate for Grade 7 and higher increases with age, from 15 to 17 years. This seems to indicate that children in South Africa complete primary schooling at an older age than expected. When those aged 18 years are considered, completion rates increase further for those who have completed Grade 7 and above, from 89.6% in 2002 to almost 94% in 2009 (Table 2.1). This is an indication that South Africa could be on the right track to achieving universal primary education by 2015, although some children complete primary education well beyond the recommended age.

**Table 2.1: Completion of primary school (Grade 7 and above) for 18-year-olds in South Africa, 2002–2009**

| Year | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
|---|---|---|---|---|---|---|---|---|
| **18-year-olds** | 89.6 | 90.2 | 90.0 | 90.2 | 91.7 | 93.2 | 92.1 | 93.8 |

Source: Statistics South Africa, *General Household Survey, 2002–2009*

**Policy incentives for participation:** The South African government's targeted initiatives of no-fees in poor communities, free transport and feeding schemes in selected schools located in poor areas seem to have benefited poor provinces. For instance, Limpopo recorded the highest school attendance in excess of 99% during some years. Research has shown that up to 22% of disabled children are not attending school (Statistics South Africa, Community Survey 2007).

## 2.4 DISCUSSION

South Africa has in effect achieved the goal of universal primary education before the year 2015, and its education system can now be recognised as having attained near universal access. However, if this achievement is to be translated into educational transformation in a meaningful way, serious interventions are needed to improve the quality and functionality of education. This is especially required within the historically black and chronically underperforming section of South Africa's schooling system. In this regard, government is currently scaling up already existing initiatives and developing new ones. Successive post-apartheid administrations are aware of the challenges and put in place a battery of initiatives to improve and strengthen the quality of basic education with the current government specifically focusing on the following:

| | |
|---|---|
| ➢ **Increased levels of progress by learners into tertiary education** | The number of Grade 12 learners who pass the national examinations and qualify to enter a Bachelor's programme at a university will increase from 105 000 to 175 000; |
| ➢ **Increased number of learners with maths and science** | The number of Grade 12 learners who pass mathematics and physical science will be 225 000 and 165 000 respectively; |
| ➢ **Increased levels of literacy and numeracy** | The percentage of learners in Grades 3, 6 and 9 in public schools who obtain the minimum acceptable mark in the national assessments for language and mathematics (or numeracy) will improve from between 27% and 38% to at least 60%. From 2010, standardised, independently moderated annual assessments will be administered in grades 3, 6 and 9 in November and the results will be reported to parents; |
| ➢ **Increased access to pre-school opportunities** | Universal access to Grade R for all age appropriate children; |
| ➢ **Increased access to good quality teaching and learning materials** | Adequate learning and teaching materials will be developed and distributed particularly to those schools that have been identified. |

The government, together with other development partners in both the private sector and civil society, is undertaking a range of initiatives aimed at improving and strengthening the quality of education that girls and boys receive, as well as strengthening the capacity of the educator cadre to deliver an enhanced range and quality of basic education. These initiatives include the following:

| | |
|---|---|
| **Expanding the provision of infrastructure, facilities and learning resources at primary and secondary schools** | As a result of this intervention more schools, particularly in disadvantaged urban and rural areas, are being provided with libraries and science laboratories to improve reading, writing and numeracy skills for Grade R to Grade 12. This is an effort to reduce the massive infrastructural inequities that were inherited from the apartheid schooling system |

| | |
|---|---|
| **Making Mathematics a compulsory subject through the National Curriculum Statement.** | As a result of this initiative increasing levels of resources and relevant support are being provided to the Mathematics and Science Learning Areas |
| **Developing a campaign focusing on literacy and numeracy** | This initiative is currently being implemented for the period 2010-2013 in the Foundation and Intermediate Phases, to ensure that all schools are able to offer quality teaching and learning |
| **Improving access of 6-year old children to Grade R** | This is an initiative designed to ensure that more pre-school children are adequately prepared, both socially and cognitively, for the first grade of schooling |
| **Adoption of a policy on 'no-fee ' schools** | Designed to support learners from poorer backgrounds this intervention has resulted in 40% of both primary and secondary schools not paying fees in 2008/09. During this period a target of 60% of learners nationally achieved a no-fee status |
| **Providing free transport to learners who live far away from schools** | In 2006, more than 200 000 learners in the country benefited from this service. The budgets of provincial education departments indicate an upward trend in allocations for the provision of learner transport |
| **The adoption of the National Schools Nutrition Programme (NSNP** | As a result of this initiative schools provide one meal a day to primary school learners. In addition to promoting the health status of learners, the Nutrition Programme also promotes school attendance by learners. In 2006, approximately 6 million learners (approximately 50%) benefited from the school nutrition programme. By 2009, the NSNP supported more than 6 million primary learners in 17,899 schools on a daily basis during school terms. This programme received an additional R4 billion in 2009/10 to enhance sustainability. There were also 6 503 food gardens in schools with about 26 408 food handlers working on the programme and receiving a monthly payment |
| **The Quality Improvement and Development Strategy and Upliftment Programme (QIDS-UP)** | This initiative was implemented in 2008/09. This is a strategy that puts learners' success first and includes teaching and learning aimed at addressing key content issues and academic skills, the continuation of initiatives directed at enhancing South Africa's performance in Science, Mathematics and Technology, as well as the provision of education infrastructure support in the form of libraries, laboratories and teaching material, to schools. During 2008/09 financial year the QIDS-UP initiative benefited more than 15,500 schools to develop and upgrade school infrastructure |
| **The adoption of the Quality Education Development and Upliftment Programme (QEDS-UP)** | This initiative is supporting the improvement of education quality through the provision of resources, improved infrastructure and teacher development in the poorest quintiles of schools |

| | |
|---|---|
| **The establishment of a programme directed at girls, the Girls Education Movement (GEM),** | This initiative is geared to enhancing the experience of girls in schools and to ensuring sustained access to and retention of girls in both primary and secondary schools |
| **The launching of Kha Ri Gude ('let us learn')** | This intervention is a mass literacy campaign that was initiated in February 2008. The government plans to spend R6,1 billion over five years to enable 4,7 million South Africans to achieve literacy by 2010 and beyond |
| **A national Basic Education Action Plan has been developed called the Schooling 2025.** | This initiative will ensure the effective monitoring of educational progress against a set of measurable indicators covering all aspects of basic education including amongst others, enrolments and retention of learners, teachers, infrastructure, school funding, learner well-being and school safety, mass literacy and educational quality |

## 2.5 CONCLUSION

Primary education in South Africa is characterised by very high rates of enrolment and retention. These rates show strong gender equity, and where small differences do exist, they are in the girl child's favour. Universal primary education is already effectively a reality. The adjusted net enrolment ratios show that primary education is hovering on 98% by 2009 up from 96% in 2002. At this level almost the same proportion of boys of school-going-age and similarly that for girls are in school. Completion rates of primary education have also improved from 89.6% in 2002 to 93.8% in 2009. These completion rates are also accompanied by improving literacy rates that reach 93%.

There can therefore be little doubt that South Africa has made remarkable progress since 1994 in addressing the huge educational disparities and inequities that were inherited from apartheid. Almost all the nation's children have been brought into a uniform and functional education system, accompanied by a concerted effort to ensure that the poorest and most marginalised of the country's children are provided with a range of additional support services to ensure their access to and retention in the schooling system. However, what remains worrisome is the quality of education and in particular the quantitative faculties and literacy as well. Furthermore major socio-economic obstacles continue, however, to retard progress on the provision of quality education. While education alone cannot erase the high level of poverty and inequality in society, it is evident that quality education underpins the entire set of MDGs with improved levels of education having a multiplier effect for key developmental outcomes such as lower morbidity and mortality, women's empowerment, access to better employment opportunities and increased participation in decision-making processes.

### Recommendations

- Whilst the girl child has an improved participation rate in school, an undesirable number of girls continue to drop out of school due to pregnancy. Therefore there is a need to address the primary causes of teenage pregnancy and entrenched poverty;

- Provide and improve sanitation facilities and infrastructure including access to safe transport;
- Address the needs of the young adults and the elderly as literacy levels at these age groups although improving remains lower than for younger generations. Intensify adult education and resource it adequately;
- Communities and teachers must take ownership and responsibility for the ongoing maintenance of schools;
- Open teachers' training colleges and reconceptualise the educators training so as to motivate, instil and inspire a culture and love for education and learning;
- Parents/guardians should be supported in raising the children in their care to prevent teenage pregnancies, risk-taking behaviour and abuse by their elders. This can be achieved through parent education programmes and community care networks; and
- Train a sufficient number of teachers who will be proficient in the delivery of mathematical and science subjects to learners.

# MDG 3: PROMOTE GENDER EQUALITY AND EMPOWER WOMEN

## 3.1 BACKGROUND

The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Beijing Platform for Action are the touchstones for realising the potential held out by the Millennium Development Goals (MDGs). The CEDAW and Beijing processes have generated a wealth of understanding and experience that illuminates the nature of gender-based discrimination and clarifies the steps needed to achieve gender equality. While the MDGs set out concrete, time-bound and measurable goals, targets and indicators for poverty reduction, this framework provides only the starting point for the work that must be undertaken. As the Millennium Declaration has emphasised, it is critically important that the gender equality obligations and commitments that have been made to the world's women are effectively implemented.

***Government of South Africa – Outcome Area 12: An empowered, fair and inclusive citizenship***

Gender equality is a constitutional imperative in South Africa. The Constitution provides for the establishment of one sovereign state, a common South African citizenship and a democratic system of government committed to achieving equality between women and men and people of all races by providing for the **prohibition of racial, gender and all other forms of discrimination.** The achievement of gender equality and women's empowerment is also supported by a framework of policies and mechanisms that include a national gender policy framework and a Ministry for Women, Children and People with Disabilities. Women's social, economic and political participation in national and local decision-making is an important step towards women empowerment. It is crucial that the needs and interests of women and girl children are given policy and implementation priority, both at the national political level and within the context of the community and the home. Education is essential in order for women and girls to know and claim their rights. It is of particular importance for women in terms of access to formal employment, and the consequent improvements in quality of life and standard of living. Indicators that provide information about women and girls in education, employment and the political sphere are essential tools for policy makers and planners in ensuring that progress made towards achieving gender equality and the empowerment of women is sustained.

**Information base:** Indicators and related information for discussing the goal is gender and race disaggregated data on education, employment and political life.

## 3.2 FACTS AND FIGURES

| GOAL 3: PROMOTE GENDER EQUALITY AND EMPOWER WOMEN | | | | | |
|---|---|---|---|---|---|
| Ratios of girls to boys in:<br>• primary<br>• secondary<br>• tertiary | <br>0.97:1 *(1996)*<br>1.13:1 *(1996)*<br>0.86:1 *(1996)* | <br>0.96:1 *(2009)*<br>1.05:1 *(2009)*<br>1.26:1 *(2009)* | 1:1 | <br>**Likely**<br>**Achieved**<br>**Achieved** | **MDG** |
| Share of women in wage employment in the non-agricultural sector (as a percentage) | 43<br>*(1996)* | 45<br>*(2010)* | 50 | **Likely** | **MDG** |
| Proportion of seats held by women in national parliament (as a percentage) | 25<br>*(1994)* | 44<br>*(2009)* | 50 | **Likely** | **MDG** |
| Ratio of literate females to males of 15-24 years of age | 1.1:1<br>*(1996)* | 1:1<br>*(2009)* | 1:1 | **Achieved** | **Domestic** |

### 3.3 INSIGHTS

**Parity in the school system:** The ratio of girls to boys in primary, secondary and tertiary education provides an appropriate indication of progress being made on achieving gender equality. The estimates in Table 3.1 reveal a somewhat higher gross enrolment ratio (GER) for boys than girls throughout the period at the primary level. The gender parity index (GPI) remains more or less constant over the period, at slightly less than unity.

**Table 3.1: Gross enrolment ratios and gender parity index at primary school, 1990-2009**

| Year | Female GER | Male GER | GPI |
|---|---|---|---|
| 1990 | 1.10 | 1.15 | 0.96 |
| 1993 | 1.17 | 1.23 | 0.95 |
| 1996 | 1.27 | 1.31 | 0.97 |
| 1999 | 1.26 | 1.29 | 0.98 |
| 2006 | 1.00 | 1.05 | 0.96 |
| 2009 | 0.95 | 0.99 | 0.96 |

Source: *Nated 02-215 (1990); RIEP (1993,1996); DoE Education Statistics (1999); General Household Survey (2006,2009)*

Table 3.2 shows that at secondary level female GER is higher than the male GER for all years, resulting in a GPI greater than unity. The GPI declines after 1996, but remains above unity.

**Table 3.2: Gross enrolment ratios and gender parity index at secondary school, 1990–2009**

| Year | Female GER | Male GER | GPI |
|---|---|---|---|
| 1990 | 0.74 | 0.66 | 1.12 |
| 1993 | 0.86 | 0.76 | 1.13 |
| 1996 | 0.94 | 0.83 | 1.13 |
| 1999 | 0.92 | 0.82 | 1.12 |
| 2007 | 0.93 | 0.88 | 1.06 |
| 2008 | 0.87 | 0.82 | 1.07 |
| 2009 | 0.86 | 0.82 | 1.05 |

Source: *Nated 02-215 (1990); RIEP (1993,1996); DoE Education Statistics (1999);General Household Survey (2007 - 2009)*

The pattern in respect of the GPI differs somewhat across the provinces. Limpopo is the only province with a GPI below unity at secondary level. The Western Cape has the highest relative preponderance of girls at secondary level (GPI of 1.20), while North West has the highest relative preponderance of boys at primary level (GPI of 0.90).

**Parity in the tertiary education system:** Comparison of trends over time at tertiary level has been complicated by reforms that have been made to the system – in particular the transformation of technikons into universities of technology, and the merger of institutions which resulted in a third category of so-called 'comprehensive' universities in cases where a former technikon and a university merged. In 1990 women already accounted for 47.8% of total university enrolment in South Africa. However, technikon enrolments were heavily male-dominated. In 1987 the overall gender breakdown for technikons was 71% male and 29% female. By 2008, the situation had changed markedly, with the overall female:male ratio at 1.29:1.00. The ratio differed across types of institutions, but was greater than unity for all three types – 1.05:1.00 for universities of technology, 1.36:1.00 for comprehensives, and 1.34:1.00 for the traditional universities. Table 3.3 gives the trend in GPI for the period 1996 to 2008 using the 19-25 year age group as the base. The table confirms the rapid shift in favour of women.

**Table 3.3: Gross enrolment ratios and gender parity index at tertiary level, selected years**

| Year | Female GER | Male GER | GPI |
|---|---|---|---|
| 1996 | 0.09 | 0.11 | 0.86 |
| 2001 | 0.11 | 0.10 | 1.10 |
| 2003 | 0.12 | 0.11 | 1.13 |
| 2008 | 0.13 | 0.11 | 1.26 |

Source: *RIEP (1996); HEMIS (2001 – 2008)*

**Parity in employment:** The share that women have in wage employment in the non-agricultural sector is another important indicator of progress made both on gender equality and women's empowerment in the labour force. Table 3.4 suggests that in both 1996 and 1999, the female share of wage employment was 43% if agriculture was excluded. The share showed a mild stepwise increased to 44% in 2005 and then 45% by 2010.

**Table 3.4: Employees by sex, excluding agriculture, 1996-2010**

| Year | Male | Female | Female share |
|---|---|---|---|
| 1996 | 4 191 155 | 3 226 789 | 43% |
| 1999 | 5 300 237 | 3 987 245 | 43% |
| 2005 | 5 359 657 | 4 138 220 | 44% |
| 2010 | 5 621 478 | 4 672 513 | 45% |

Source: *October Household Survey (1996, 1999); Labour Force Survey 2005; Quarterly Labour Force Survey 2010*

Provincial disaggregation reveals significant differences. Thus, for example, in 2010 women in the Northern and Eastern Cape accounted for more than half of employees in the non-agricultural sector, while in North West they accounted for 38.2%. In terms of population group, the overall share is highest for coloured females, at 48.2%, followed by white females at 47.5%. For Black Africans it is at 44.7%, while for the Indian/Asian group it is at 40.5%. The female share of wage employment increased for the Black African and Indian/Asian groups between 2004 and 2010, while for the coloured group it declined slightly.

**Parity in political life:** The proportion of seats held by women in national parliament is another significant indicator of women's increased participation in national decision-making processes. The representation of women in the South African Parliament has increased from 27.8% in 1994 to 44.0% in 2009. Similarly, the representation of women in Provincial Legislatures has increased from 25.4% to 42.4% respectively. The 2009 female representation in Parliament as well as in Provincial Legislatures puts South Africa amongst the leading countries in the world in terms of the number of women in important leadership positions. Local government is also showing good performance; after the 2006 local government elections, female representation in Local Government Councils was at 40%. One reason for the most recent increase is the fact that the African National Congress increased their quota of women on the party list from 33% to 50%. Provincially, Limpopo has the highest proportion of National Assembly members who are women (49%) followed closely by Gauteng (48%) and Mpumalanga (47%). KwaZulu-Natal, North West and Western Cape have the lowest proportions at 36% respectively. The situation in respect of permanent members of the National Council of Provinces (NCOP) is less encouraging. From a base of 15% in 1996, the proportion rose to above a third in the early 2000s, but currently stands at only 19% in the post-2009 parliament. The Northern Cape has no permanent female representatives, 2 out of the 6 representatives in Gauteng and Mpumalanga are women, and each of the other provinces has only one woman representative.

One of South Africa's domesticated indicators relates to the female share of seats in the nine provincial legislatures. For this indicator all provinces except the Free State have experienced an increase between 2004 and 2009. In Gauteng, the female share increased from 26% to 48%. Overall women currently occupy 42% of seats in provincial legislatures. The number of female premiers (the provincial equivalent of the president) has also increased from four out of nine after the 2004 elections, to the current five out of nine.

**Parity amongst races and the youthful:** The ratio of literate females to males of 15-24 years old is a key sex disaggregated indicator that points to the extent to which girls and young women have access to basic educational opportunities that provide functional

levels of literacy. Table 3.5 shows the number of men and women aged 15-24 years who had completed grade 7, a common measure of literacy, in 1996 and 2009. Women of this age group fared better than men in both years, but there was a small decrease in the extent of the advantage, revealed by the drop in the female:male ratio as a percentage from 1.1 in 1996 to 1.0 in 2009.

**Table 3.5: Grade 7 completion of population 15-24 years by sex, 1996 and 2009**

| Education level | 1996 | | | 2009 | | |
|---|---|---|---|---|---|---|
| | Male | Female | Total | Male | Female | Total |
| %Grade 7+ | 79.5 | 83.9 | 81.8 | 88.9 | 93.0 | 90.9 |
| F: M ratio | **1.1;1.0** | | | **1.0:1.0** | | |

Source: *October Household Survey 1996; General Household Survey 2009*

Table 3.6 reveals that the female:male ratio for the Black African and coloured groups decreased, while the ratios for the other groups remained the same over the period. In terms of the percentage of the population who have completed Grade 7, Indian/Asian and white youth fared far better than coloured and black African youth in 1996. However by 2009, there was a marked increase in the percentage of Black African and coloured youths who had completed Grade 7. Nevertheless white and Indian/Asian youth were still ahead of the other two population groups.

**Table 3.6: Grade 7 completion of population 15-24 years by sex/population group, 1996/2009**

| Race | 1996 | | | 2009 | | |
|---|---|---|---|---|---|---|
| | Male | Female | F:M Ratio | Male | Female | F:M Ratio |
| Black African | 76.3 | 81.9 | 1.1:1.0 | 87.6% | 92.0% | 1.1:1.0 |
| Coloured | 87.1 | 87.1 | 1.0:1.0 | 92.4% | 96.8% | 1.0:1.0 |
| Indian/Asian | 97.7 | 98.7 | 1.0:1.0 | 98.2% | 99.7% | 1.0:1.0 |
| White | 95.5 | 94.9 | 1.0:1.0 | 98.0% | 99.3% | 1.0:1.0 |

Source: *October Household Survey 1996; General Household Survey 2009*

### 3.4 DISCUSSION

The factors that have facilitated South Africa's improved performance towards gender equality include the African National Congress's quota in respect of political representation of women, as well as a widespread recognition since 1994 that South Africa has an obligation to address gender inequalities alongside those relating to race. This recognition is firmly grounded in the Constitution and reflected in a wide range of laws, policies, programmes and practices. The constitutional mandate on gender equality is clear, and the legislative process is providing the building blocks for a gender equitable society.

Eliminating violence is essential for achieving gender equality and the empowerment of women. The existing target, to eliminate the gender disparity in education, captures only one, albeit a key, dimension of gender inequality. Eliminating violence against women is a prerequisite for gender equality and empowerment of women. The follow-up by mothers and fathers on school and extracurricular activities of their children reinforces the family ties, favours socialisation at home and reduces the risk of violence and/or aggression in the streets.

The Government does, however, face major implementation challenges in ensuring that constitutional, legislative and policy imperatives on gender equality and women's empowerment are translated into substantive improvements in the lives of women and girls for especially those that live in disadvantaged environments.

The Government does, however, face major challenges in ensuring that constitutional, legislative and policy imperatives on gender equality and women's empowerment are translated into substantive improvements in the lives of women and girls. Key implementation issues that the Government, through the Ministry of Women, Children and People with Disabilities, are currently addressing include:

- Proactively addressing the unintended consequences of progressive legislation, policy and regulation to ensure that progress on gender equality remains on track;
- Strengthening the regulatory frameworks that have been put in place are effectively implemented, enforced, monitored and evaluated;
- Ensuring that sufficient and effective budgeting processes support the implementation of gender equitable processes;
- Aligning constitutional protection of religious and culture practices with the secular rights held by women and girls under the constitution and related legislation;
- Working with a broad range of community and interest groups on to address social, religious and cultural beliefs, assumptions and practices that remain as barriers to women's empowerment and gender equality.

While Government continues to take the lead in providing the rights-based legislative framework for achieving gender equality, there is an ongoing need to ensure that there is a critical mass within the broader South African society that supports and practices gender equality. These challenges require a continuing dialogue between the public, private and civil society sectors, in partnership with international agencies on awareness raising, advocacy, and education in support of the socio-economic and political rights and entitlements of women and girls.

The data provided confirms that South Africa has generally performed well against the international indicators for Goal 3. Indeed, South Africa could be considered to have reached most gender equality targets, if not exceeded them. South Africa's performance has also improved for several of the indicators over the period. While the country performs well on the international indicators, South Africa does face a range of socio-economic and cultural challenges that continue to underpin aspects of gender inequality. The following factors play an important role in the complex dynamics of assessing progress towards achieving gender equality:

| | |
|---|---|
| ➢ **The need to encourage a more equitable and non-gendered division of labour** | Women's share of non-agricultural wage employment remains below half, but realistically one would not expect it to reach half given the gendered division of labour in the home that is internationally pervasive. Nevertheless, limited participation of men in unpaid care work as well as limited provision of child care services for young children could be serving as obstacles to increasing the share. |
| ➢ **The need to develop measurements that better capture the complex dynamics of gender in South Africa** | The variable availability and quality of data suggests that the standard indicators are not adequate for capturing the complex nature of gender equality challenges in South Africa. |
| ➢ **The need to ensure equitable access to employment opportunities for women** | The fact that women continue to have a higher rate of unemployment than men and tend to earn less than men is, from a gender perspective, undesirable. This is even more undesirable given that, on average, women's attainment in respect of education is higher than that of men. These are some of the issues that South Africa needs to focus on if gender equality and equity is to be achieved. |
| ➢ **The need to address gender-based violence on all fronts** | Within the education, health and justice sectors more needs to be done to address the pervasively high levels of violence, including gender-based violence. |
| ➢ **The need to ensure that women and men have equal access to improved educational and employment opportunities** | Looking beyond gender differences, there is clearly also still a long way to go in addressing the high levels of unemployment, and poor quality of education and poor performance of both male and female learners. Further, differences persist at geographical level and between population groups. |

### 3.5 CONCLUSION

The ratio of girls to boys shows that on balance the country is quite close to gender parity. There is evidence of a somewhat higher gross enrolment ratio for boys than girls throughout the period at the primary level. In general, South Africa made a great deal of progress with more girls than boys at secondary level, and a total reversal of the trend at the tertiary level, as males dominated in 1996, but were taken over by females by 2009.

The share of women in wage employment in the non-agricultural sector is another important indicator of progress made both on gender equality and women's empowerment in the labour force. In 1996 the female share of wage employment was 43% if agriculture was excluded. The share increased at a snail pace to 45% by 2010.

The proportion of seats held by women in national parliament is another significant indicator of women's increased participation in national decision-making processes. The representation of women in the South African Parliament has increased from 27.8% in 1994 to 43.3% in 2009. Similarly, the representation of women in Provincial Legislatures has increased from 25.4% to 42.4% respectively. Local government is also showing improved performance; after the 2006 local government elections, female representation

in Local Government Councils was at 40%. One reason for the most recent increase is the fact that the African National Congress increased their quota of women on the party list from 33% to 50%.

It is clear that South Africa has reached most gender equality targets, if not exceeded them. South Africa's performance has also improved for several of the indicators over the period. A more serious challenge relates to other socio-economic concerns where women continue to have higher rate of unemployment than men, their share of non-agricultural wage remains below 50%, and a greater prevalence of violence against women.

In the context of this patriarchal society, there is a history of violence and gender inequality as women are perceived to be subordinate and inferior to men. In order to correct the report proposes the following:

**Recommendations**

- Draw women into local resource planning, management and monitoring
- Create specific programs to empower women such as
    - Provide access to credit for women
    - Ensure that unused land is available for production/farming
    - Engage traditional leaders for access to communal land for farming purposes
    - Women's rights to work should be protected regardless of Age and socio-economic status
    - Prioritise women run business and have special protective dispensation for them
    - Enforce the protection of women through the criminal justice system and effectively communicating the Domestic Violence Act
    - Train female police officers in order to provide victim support create a user friendly centre for reporting domestic violence and abuse
    - Use NGOs who work with trauma counselling and domestic violence as part of victim support infrastructure;
    - Eliminate harmful cultural practices that discriminate against women and young girls.
    - Women have a right to exercise choice over their sexuality and should not be discriminated against regardless of sexual orientation.
    - Women founded NGOs must be funded and focus their skills development.
- Address the special quality of life needs of rural, peri urban and urban women.
- Mobilise outreach and awareness programmes for men in order to bring them into a care net.
- Resource the ministry of women adequately in order for it to lead in equipping women and their programmes.
- Mainstream gender in all departments with sufficient resources;
- Mobilise young women for participation in political sphere.

# MDG 4: REDUCE CHILD MORTALITY

## 4.1 BACKGROUND

The overall level of the health of children is reflected in a number of indicators, such as infant and child mortality as well as immunisation coverage against preventable diseases such as tuberculosis, measles and polio. Healthy and equitable societies are characterised by an environment where children are able to grow into healthy, secure and productive adults. The reverse side of this is characterised by environments where poor current health profiles of children pose a threat to individual development as well as to the socio-economic development of countries in general. To prevent a vicious cycle of poverty, social marginalisation and chronic poor health and under-nutrition, it is essential that the health profile of South African children is adequately addressed and that their basic health needs are catered for through an equitable and effective public health system.

***Government of South Africa - Outcome Area 2: A long and healthy life for all South Africans***

**Information base:** This goal is informed by child and infant mortality data. The sources of information are census and survey information, including causes of death information, which in latter years had become more robust with improved coverage.

### 4.2 FACTS AND FIGURES

| GOAL 4: REDUCE CHILD MORTALITY | | | | | | |
|---|---|---|---|---|---|---|
| **Goal and Indicators** | **1994 Baseline (or closest year)** | | **Current Status 2010 (or nearest year)** | | **2015 Target** | **Target Achieva-bility** | **Indicator Type** |
| Under-five mortality rate | 59 *(1998)* | | 104 *(2007)* | | 20 | **Unlikely** | **MDG** |
| Infant mortality rate | 54 *(2001)* | | 53 *(2007)* | | 18 | **Unlikely** | **MDG** |
| Proportion of 1 year-old children immunised against measles | 68.5 *(2001)* | | 98.3 *(2009)* | | 100 | **Likely** | **MDG** |
| Immunisation coverage under 1 year of age | 66.4 *(2001)* | | 95.3 *(2009)* | | 100 | **Likely** | **Domestic** |
| Life expectancy at birth for males and females | 57.6 *(2001)* | 64.8 *(2001)* | 55.3 *(2007)* | 60.4 *(2007)* | 70 | **Unlikely** | **MDG** |
| Diarrhoea incidence under 5 years of age (per 1,000) | 138.0 *(2001)* | | 132.6 *(2009)* | | No target | **Not applicable** | **Domestic** |
| Pneumonia incidence under 5 years of age (per 1,000) | 21 *(2003)* | | 102.1 *(2009)* | | No target | **Not applicable** | **Domestic** |

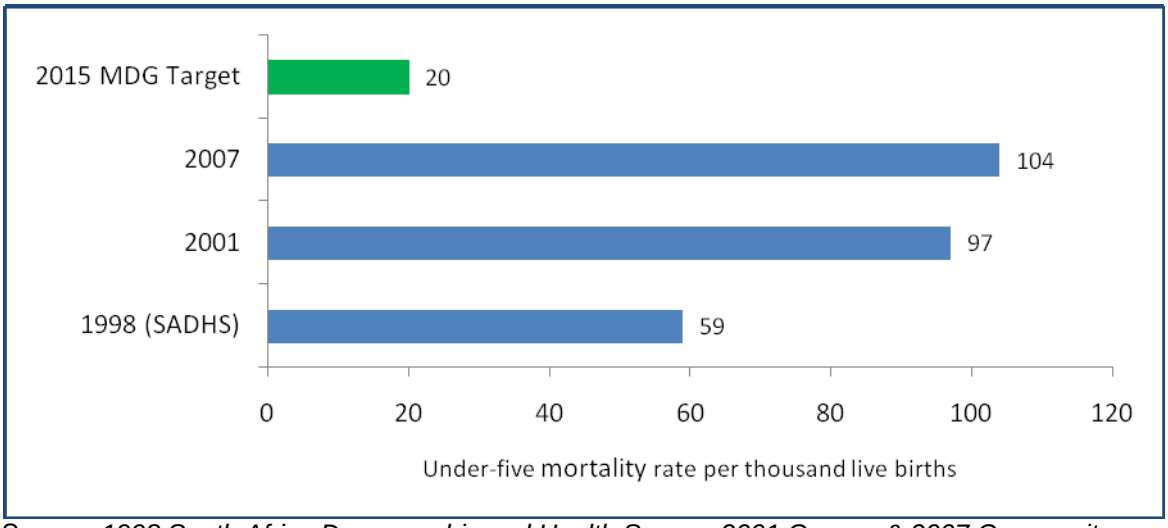
### 4.3 INSIGHTS

Internationally, infant and child mortality have been dropping in most countries. However, sub-Saharan Africa remains an exception to this trend. In this regard, child mortality is showing an increase, primarily due to the impact of HIV and AIDS as more and better data points out.

**Under five mortality:** According to the report on the 1998 South Africa Demographic and Health Surveys, the observed under-five mortality rates (not corrected for omission of deaths) were 59 per thousand live births during the period 1993 to mid 1998. Using the under-five mortality estimate from the 1998 South Africa Demographic and Health Survey as a bench mark, a reduction by two thirds implies that South Africa's under-five mortality is expected to be about 20 per thousand live births or less by 2015 if South Africa were to meet the internationally set target. Due to lack of recent data from the Demographic and Health Survey, current levels of under-five mortality rates based on the 2001 census and 2007 Community Survey which indicate under-five mortality rates of 104 per thousand live births in 2007 and 97 per thousand live births in 2001. The current level of under-five

mortality in South Africa is far higher than the international set target for South Africa (20 per thousand live births).

**Figure 4.1: Under-Five Mortality Rate in South Africa since 1998, and the 2015 MDG**

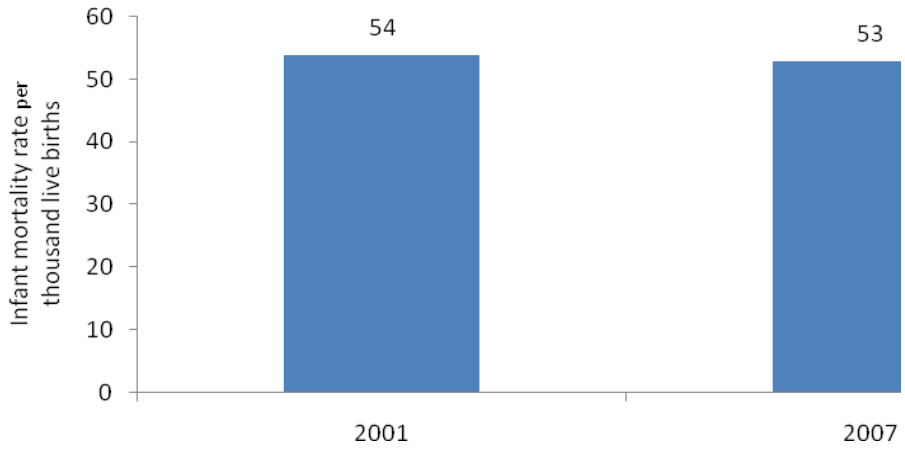



Source: *1998 South Africa Demographic and Health Survey, 2001 Census & 2007 Community Survey, South Africa*

**Infant mortality rate:** The infant mortality rate appears to have remained more or less the same despite the upward trend in the under-five mortality rate. Infant mortality rate is more correctly defined as the probability of a child born in a particular year dying before reaching the age of one year, expressed per thousand live births. Although there is no target set for infant mortality rate in the MDGs, it is useful to examine the level of infant mortality as it is an important component of under-five mortality. In some developing countries, infant mortality contributes a large proportion of mortality to overall under-five mortality relative to mortality between the age of one year and four years.

Infant mortality is influenced by a range of endogenous factors, such as congenital conditions in the first month of life, and exogenous factors that include social factors relating to child-rearing practices as well as adverse environmental factors. As seen from figure 4.2, the infant mortality rate appears to have remained more or less the same despite the upward trend in the under-five mortality rate.

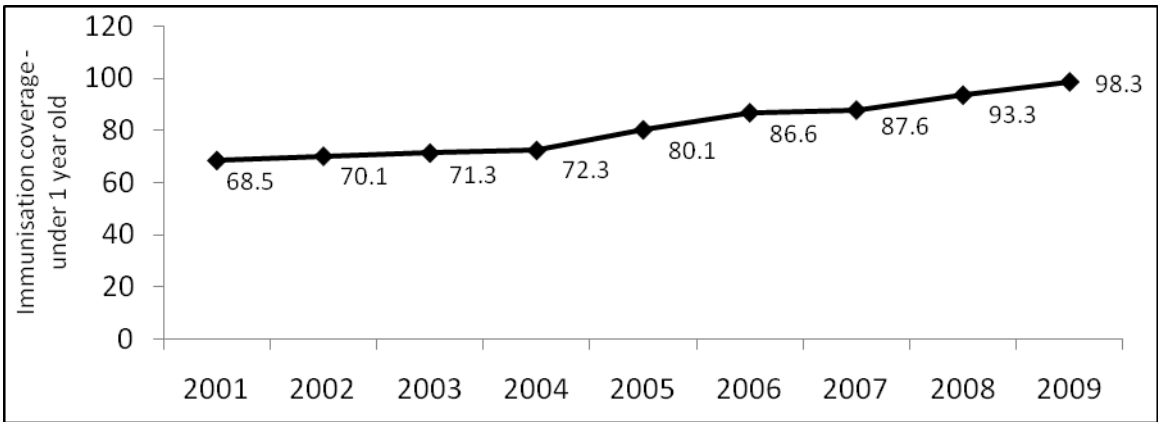
**Figure 4.2: Levels of Infant Mortality Rates in South Africa, 2001 And 2007**




Source of estimates: *2001 Census & 2007 Community Survey, South Africa*

**Immunisation:** Coverage of immunization is a significant element in the prevention of child mortality as it is associated with child survival and hence infant and under-five mortality rates. In the context of immunisation the two MDG indicators are (i) the proportion of under 1 year old children immunized against measles, and (ii) the proportion of under 1 year old children who received all their primary vaccines for tuberculosis (TB), diphtheria, whooping cough, tetanus, polio, measles, hepatitis B and haemophilus influenza. Immunisation coverage against measles is almost universal in South Africa. Figure 4.3 indicates that immunization against measles in South Africa has increased between 2001 and 2009. Coverage for measles vaccination improved from 68.5 % of children aged under 1 year in 2001 to 98.3 % of children of the same age in 2009.

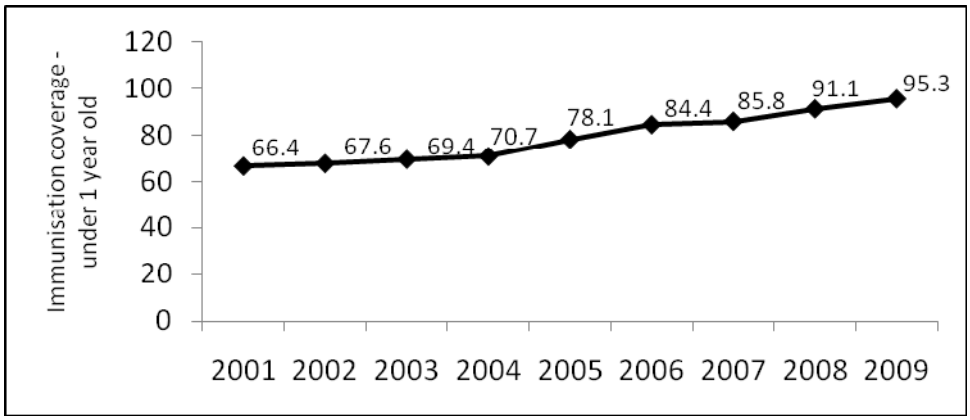
**Figure 4.3: Proportion of 1 year old children immunised against measles, 2001 – 2009**




Source: *District Health Information Health System (DHIS), South Africa*

Figure 4.4 indicates that there has been a marked increase in the proportion of children under 1 year of age who have received all their primary vaccines for tuberculosis, diphtheria, whooping cough, tetanus, polio, measles, hepatitis B and haemophilus influenza in South Africa from 2001 to 2009. The immunization rates for primary vaccines increased from 66.4 % in 2001 to 95.3 % in 2009.

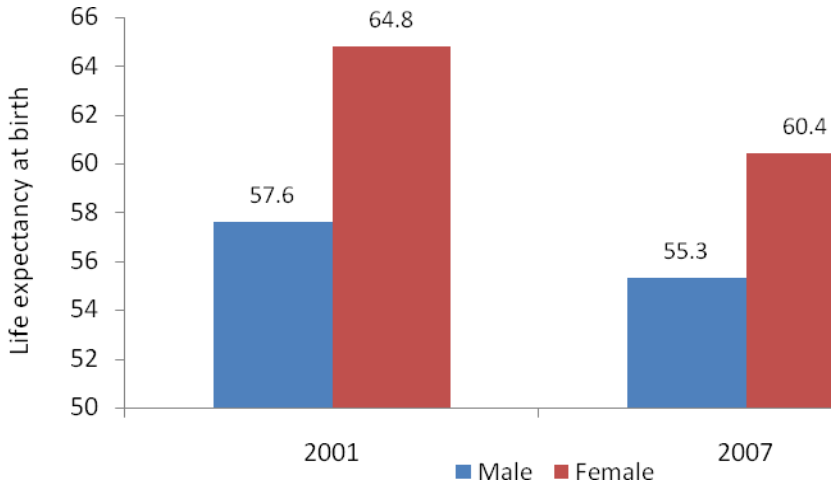
**Figure 4.4: Proportion of children under 1 year who received all primary vaccines, 2001-2009**




Source: *District Health Information Health System (DHIS), South Africa*

**Life expectancy at birth:** Since 2000, there is a trend of increasing mortality, especially of the young. This could be attributed to HIV prevalence rates that increased significantly after 1998 but have slowed or stabilised in recent years. Amongst other factors this has undoubtedly led to a decline in life expectancy in South Africa. Combining both sexes, it would appear that life expectancy at birth in South Africa declined from about 61 years in 2001 to about 58 years in 2007.

**Figure 4.5: Life expectancy at birth in South Africa, 2001 and 2007**




Source: *Census 2001 & Community Survey 2007*

Trends show a decrease from 2001 to 2008 in the number of children with a weight less than 60% of their estimated 'normal' weight for age. Furthermore, the underweight for age incidence rates are generally higher than the severe malnutrition incidence rates.

Diarrhoea and pneumonia are significant contributing factors to child mortality. However, the incidence of diarrhoea is declining in most provinces in South Africa. KwaZulu-Natal appears to have had the highest incidence of diarrhoea up to 2008. However, the incidence rates appeared to have either stagnated or adopted a declining trend from 2008 to 2009. With the exception of KwaZulu-Natal, North West and Eastern Cape provinces,

the incidence of pneumonia also appears to have followed a declining trend from 2008 to 2009. The prevention of mother to child transmission (PMTCT) of HIV in South Africa is a priority intervention in the public primary health facilities. Furthermore, South Africa achieved the National Strategic Plan for HIV and AIDS and Sexually Transmitted Infections (STIs) 2007-2011 (NSP) target of >95% coverage in the public sector antenatal service sites in 2008.

### 4.4 DISCUSSION

Internationally, infant and child mortality have been dropping in most countries. However, sub-Saharan Africa seems to be an exception to this trend with child mortality showing an increase, primarily due to the impact of HIV and AIDS as better data and reporting suggests. (Infant mortality is defined as the number of infants dying before their first birthday per 1 000 live births. Under-five mortality is deaths before the fifth birthday, again, per 1.000 live births. Infant mortality is an important component of under-five mortality.)

South Africa has done extremely well since the turn of the century in increasing the proportion of 1 year-old children immunised against measles, and the general immunisation coverage of infants (under one year of age). Projecting current trends, both of these initiatives will reach their respective MDGs by 2015. In addition, trends show a decrease from 2001 to 2008 in the number of children with low birth weight (a weight less than 60% of their estimated 'normal' weight for their age).

From a policy perspective South Africa has been proactive in ensuring that the necessary policies and implementation strategies are in place to reduce under-five mortality in the form of prevention of malnutrition and intensification of immunisation coverage, as well as access to free health care facilities. However, while the interventions in health are strong and hold promise for stabilising infant mortality, they are not sufficient to reduce under-five mortality rates. Consequently evidence point to near doubling of under-five mortality rate in a space of nine years and a constant, albeit at a high plateaux, infant mortality rate over a six year period. The target set for South Africa of 20 deaths per thousand live births or lower by 2015 compares adversely with the current level of 104.

In order to reverse this trend the Government will need to address the following challenges:

| | |
|---|---|
| ➢ **Enhancing the depth and quality of child-related health data** | The District Health Information System (DHIS) must be supported to continue collecting data in healthcare facilities conducting births, as well as in its endeavours to improve the quality of data collected |
| ➢ **Improving the key socio-economic factors that impact on the health status of children** | The key challenges in the achievement of the MDGs (including the under-five mortality) in South Africa are the improvement of the environment for children such as water, nutrition, sanitation and household food security |

| | |
|---|---|
| ➢ **Strengthening and enhancing the quality and reach of primary health care for children** | The key challenges in reducing under-5 morbidity and mortality lie in combating the main causes of deaths among children - diarrhoea, lower respiratory tract infections, peri-natal deaths associated with TB, HIV and AIDS, and malnutrition. South Africa will have to strengthen primary health care as many children die at home even though they may have had some contact with the health care system |
| ➢ **Expanding the reach of PMTCT, ARV treatment and nutrition programmes** | Strengthening the health care system to prevent mother to child transmission of HIV, as well as the provision of life-long nutrition and antiretroviral therapy which remain key to reducing associated deaths among children |
| ➢ **Prioritising the implementation of the Integrated Management of Childhood Illnesses** | The primary Health Care (PHC) system needs to be strengthened in order to ensure the effective implementation of the Integrated Management of Childhood Illnesses (IMCI) and other initiatives aimed at reducing child morbidity and mortality |
| ➢ **Strengthening the capacity of health care providers to ensure effective implementation of national health interventions** | The use of the Road to Health Chart and improved patient care by primary health care providers (private practitioners) must be improved and aligned with national health priorities |
| ➢ **Improving and expanding immunisation coverage** | The improvement and expansion of immunisation coverage would serve to prevent many unnecessary deaths amongst children under 5 years |

## 4.5 CONCLUSION

Although South Africa has the necessary policies in place to reduce under-five mortality, evidence indicates a rising trend in child mortality in recent years in South Africa. At the same time substantial progress has been made in South Africa in the prevention of malnutrition, mother to child transmission of HIV, immunisation coverage and access to free health care facilities. However, current levels of under-five mortality in the country are still far higher than the set target for South Africa of 20 deaths per thousand live births or lower by 2015. A key concern for Government is how to optimally use current health resources to achieve better health outcomes for children, taking into account the impact of the socio-economic environment both on the health of children and on the quality and effectiveness of implementation. Greater efforts are being made to provide quality care with human dignity, including improvements to the clinical management of care at all levels of the healthcare delivery system.

### Recommendations

- Improve access, outreach and awareness on immunization and nutrition and food security in rural and peri urban areas, and more interventions targeting men
- South Africa must implement real primary health care as agreed upon in Alma Ata declaration.
- Public/private partnership not happening in reality

# MDG 5: IMPROVE MATERNAL HEALTH

## 5.1 BACKGROUND

Thousands of women throughout the world experience pregnancy and childbirth not as the joyful events that they should be, but as times of suffering, and sometimes even experiences that result in death. In developing countries in particular, maternal deaths constitute a tragedy of vast proportions. Of the estimated 536 000 maternal deaths worldwide in 2005, developing countries accounted for more than 99 per cent of these. About half the maternal deaths occurred in sub-Saharan Africa alone[1]. Despite the fact that South Africa's reproductive health policies and the laws that underwrite them are among the most progressive and comprehensive in the world in terms of the recognition that they give to human rights, including sexual and reproductive rights, it is of serious concern that the current level of maternal mortality in South Africa is far higher than the MDG target of 38 per 100 000 live births by 2015. Good maternal health reflects on the quality of and access to maternal (sexual and reproductive) health care, while also offering evidence regarding the health status of women at reproductive age and that of their children. To policymakers, therefore, maternal health can be a very useful barometer for reflecting the health status of the female population, the level of gender equality in health care, and also of socio-economic conditions in general.

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**Information base:** Information for this goal is based on processes associated with giving birth and child rearing. Indicators are facility based as well as population based.

[1] Udjo, E 2010, UNDP Commissioned study

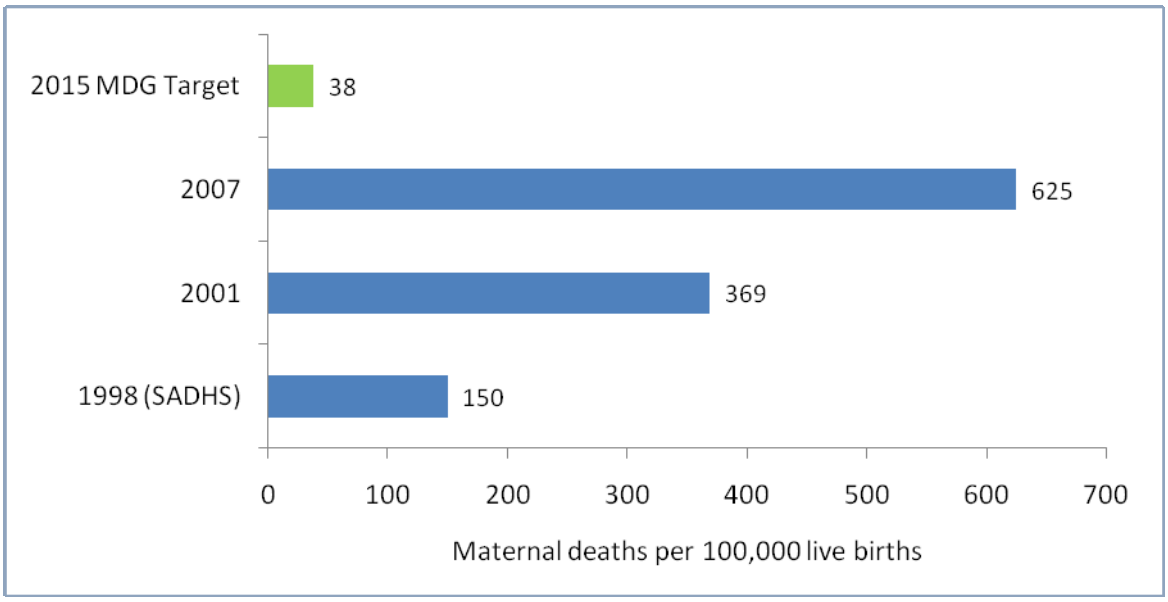
### 5.2 FACTS AND FIGURES

| GOAL 5: IMPROVE MATERNAL HEALTH | | | | | |
|---|---|---|---|---|---|
| **Goal and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achieva-bility** | **Indicator Type** |
| Maternal mortality ratio | 369 *(2001)* | 625 *(2007)* | 38 | **Unlikely** | **MDG** |
| Proportion of births attended by skilled health personnel | 76.6 *(2001)* | 94.3 *(2009)* | ≈100 | **Possible** | **MDG** |
| Contraceptive prevalence rate (Couple year protection rate) | 25.2 *(2001)* | 33.4 *(2009)* | ≈ 100 | **Unlikely** | **MDG** |
| Adolescent birth rate | No data | No data | No target | **Unknown** | **MDG** |
| Antenatal care coverage (at least one visit and at least four visits) | 76.6 *(2001)* | 102.8 *(2009)* | ≈100 | **Achieved** | **MDG** |
| Unmet need for family planning | No data | No data | No target | **Unknown** | **MDG** |
| Use of modern contraceptive methods by sexually active women | 61.2 *(1998)* | 64.6 *(2003)* | 70 | **Unlikely** | **Domestic** |

### 5.3 INSIGHTS

**Causes, levels and trends of maternal mortality:** Data indicates that the maternal mortality ratio (MMR) in South Africa is high, and increasing. The MMR based on the 1998 South Africa Demographic and Health Survey was 150 per 100,000 live births for the approximate period of 1993-1998. It is noted that although maternal mortality questions were included in the 2003 South Africa Demographic and Health Survey, maternal mortality estimates were not provided in the full report of the survey. Thus, the benchmark estimate of the MMR in South Africa is that based on the 1998 South Africa Demographic and Health Survey. Using this benchmark, South Africa should attain a level of maternal mortality ratio of 38 deaths per 100 000 live births by 2015 if the country were to meet the internationally set target for this goal. It can however be concluded that the current level of maternal mortality is far higher than the MDG target of 38 per 100 000 live births by 2015.

**Figure 5.1: Maternal mortality ratio in South Africa since 1998, and 2015 MDG**




Source of estimates: *1998 South Africa Demographic and Health Survey, 2001 Census, 2007 Community Survey*

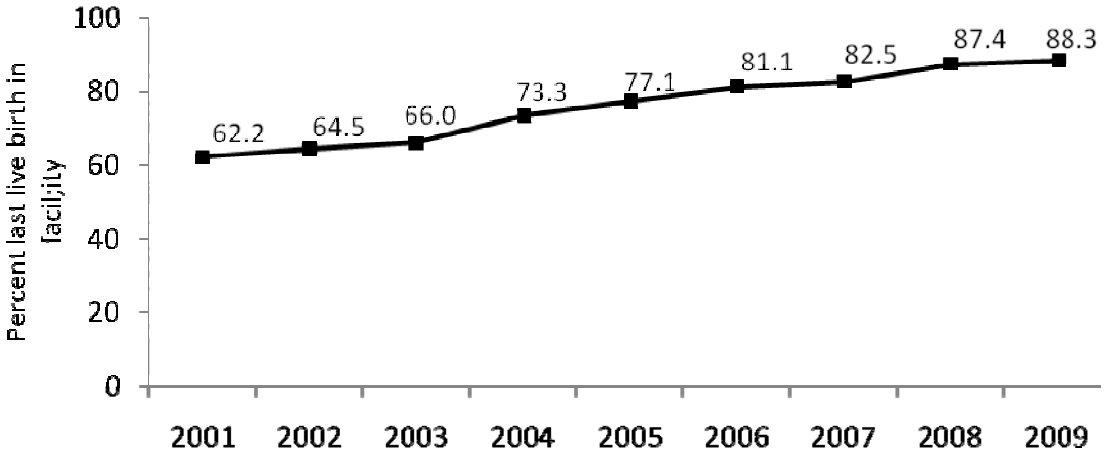
The 200–-2007 Saving Mothers Report indicated that the five major causes of maternal death remained the same during 2002-2004 and 2005-2007. These five causes are:

- Non-pregnancy related infections - mainly resulting from AIDS (43.7%);
- Complications of hypertension (15.7%);
- Obstetric haemorrhage (ante partum and postpartum haemorrhage (12.4%);
- Pregnancy-related sepsis (9.0%); and
- Pre-existing maternal disease (6.0%).

**Infrastructure for maternal care and utilisation:** The proportion of births attended to by skilled health personnel is an important indicator for maternal health. The type of medical assistance provided during delivery has an impact on reproductive health and hence on maternal mortality. The percentage of women whose live birth occurred in a health facility provides an indication of the percentage of births attended by skilled health personnel.

The data based on reported live births from the District Health Information System (2010) shows that the percentage of women in South Africa whose live birth occurred in a health facility increased from 76.6 % in 2001 to 94.1 % in 2009. This indicates a significant improvement in the extent of services provided at health care facilities in South Africa.

**Figure 5.2: Percentage of last live birth in health facility in South Africa, 2001-2009, by province**

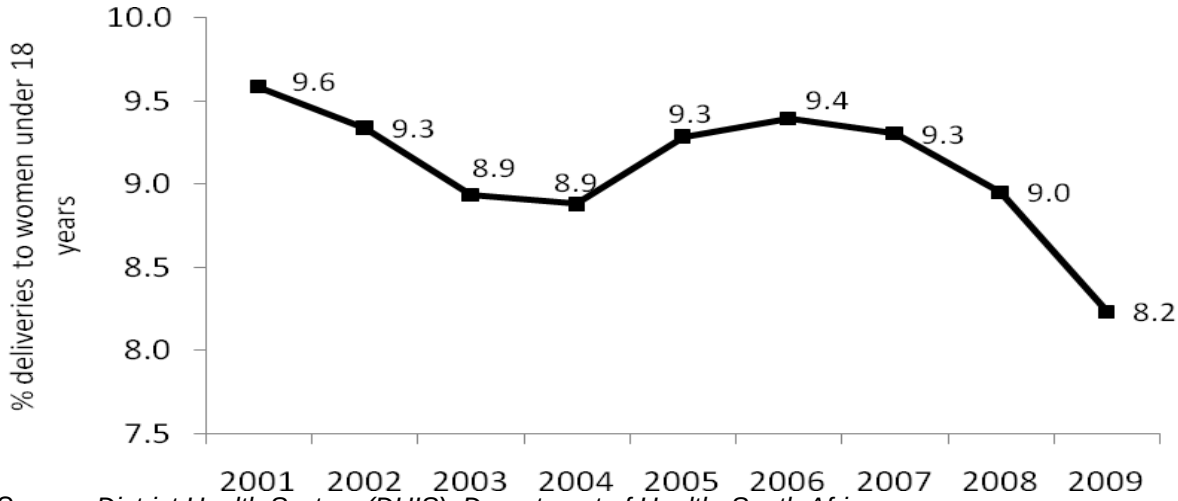



Source: *District Health System (DHIS), Department of Health, South Africa*

To augment information on this indicator, data from the South African Demographic and Health (SADHS) Surveys conducted in 1998 and 2003 is also used. According to the 2003 SADHS report 89% of women had their last live birth in a health facility in 2003, an increase from 83% in 1998. However, a substantial percentage of women (17%) are not attended to by skilled personnel during delivery.

Antenatal care coverage (at least one visit and up to four visits) is an important factor in the health status of pregnant women.

**Figure 5.3: Deliveries to women under 18 years in health facilities, 2001-2009, by province**

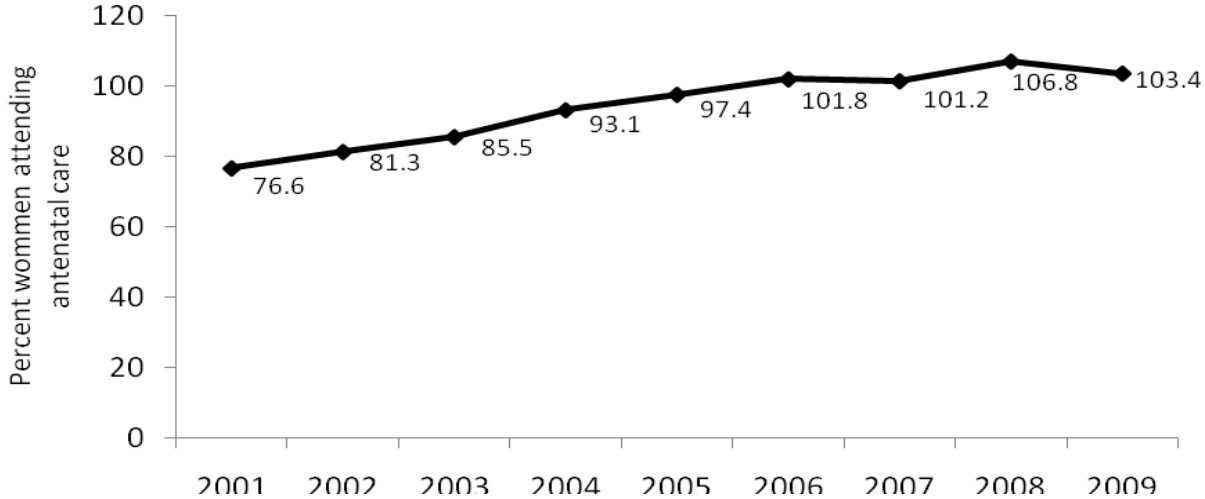



Source: *District Health System (DHIS), Department of Health, South Africa*

Access to and utilization of antenatal care (ANC) services has an impact on pregnancy outcome, child survival and maternal health. It is encouraging that the use of antenatal care during pregnancy is currently high in South Africa.

According to the District Health Information System, 97% of pregnant women utilized antenatal care during 2009 (Department of Health, 2010). However, it should be noted that the data show antenatal coverage of above 100% for some of the provinces. This may have been caused by an underestimate of the population of potential ANC clients in the catchments' area.

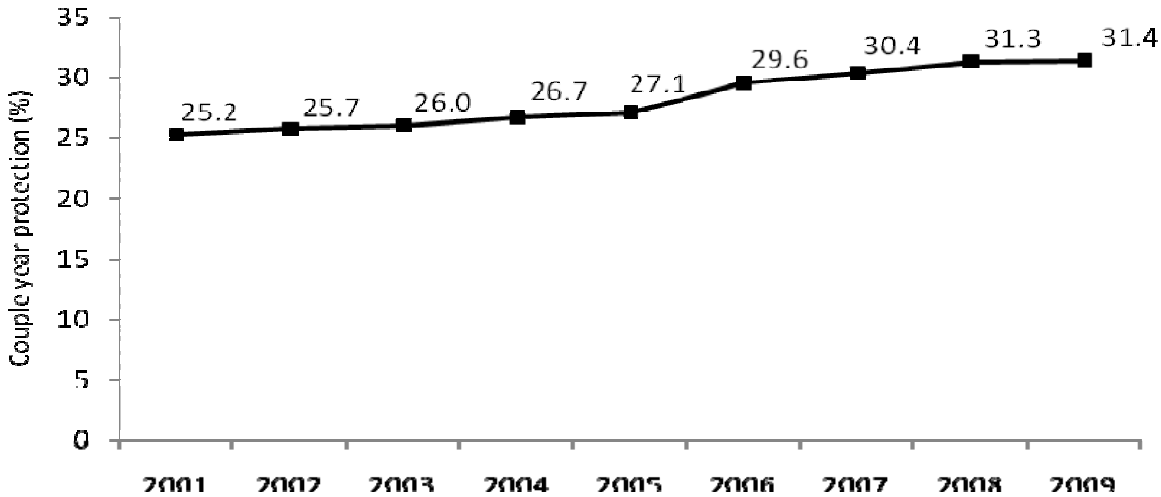
**Figure 5.4: Percentage of women who attended at least one visit for antenatal care during pregnancy, 2001-2009, by province, South Africa**




Source: *District Health System (DHIS), Department of Health, South Africa*

**Sex safety practices:** Contraceptive use is an important element in the promotion of sexual and reproductive health. Contraception promotes reproductive health as contraceptive use mitigates against unwanted as well as high risk pregnancies. High risk pregnancies are detrimental to women's health and can exacerbate maternal mortality in a population. The couple year protection rate is a proxy for the contraceptive prevalence rate.

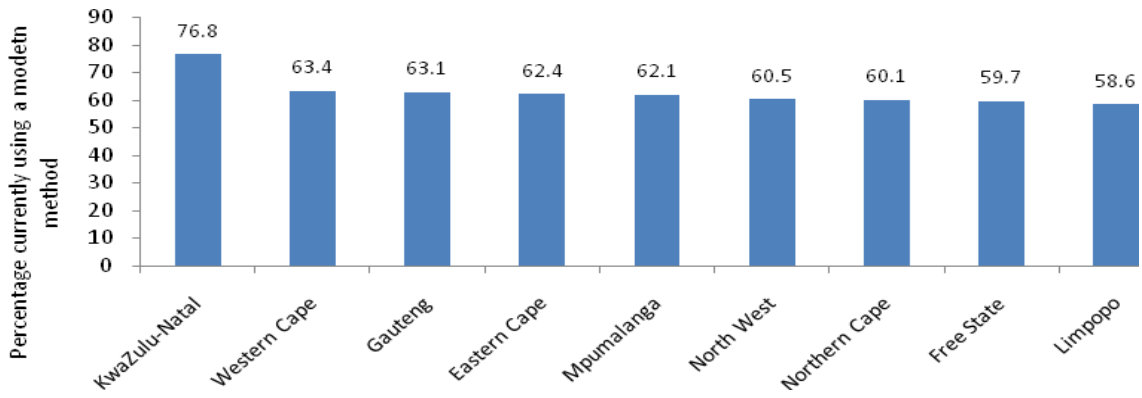
**Figure 5.5: Couple year protection rates by province, 2001-2009, South Africa**




Source: *District Health System (DHIS), Department of Health, South Africa*

Figure 5.5 provides for the couple year protection rates in South Africa by province for 2001 to 2009. The couple year protection rates in South Africa have been fairly stable, averaging close to 30% since 2001. The exception to this pattern has been the Western Cape where these rates increased sharply to 57% in 2007. Furthermore, the 2003 South Africa Demographic and Health Survey report indicates that the modern contraceptive prevalence rate among sexually active women increased from 61% in 1998 to 65% in 2003.

**Figure 5.6: Percentage of sexually active women using a modern contraceptive method by province in South Africa, 2003**




Source: *2003 South Africa Demographic and Health Survey reports*

## 5.4 DISCUSSION

The data shows that South Africa has demonstrated commitment to reducing maternal morbidity and mortality. It is evident that expanded health infrastructure, enhanced access and increased usage are beginning to translate into improved health outcomes for women. This is, however, inhibited on the one hand by environmental factors such as epidemics, socio-economic conditions and access to other services affecting sexual and reproductive health; and on the other hand by issues of management of the centres of delivery such as hospitals and clinics. In this regard many of the recommendations contained in the *Saving Mothers 2005-2007 Fourth Report on Confidential Enquiries into Maternal Deaths in South Africa* should be carried forward in an effort to reduce maternal mortality in South Africa. This will require a comprehensive, integrated approach to sexual and reproductive health within the context of improved socio-economic conditions and enhanced performance of the primary health care system.

| | |
|---|---|
| ➢ **Ensuring that standardised protocols are in place to manage the causes of maternal death** | There should be standardized protocols for managing the important causes of maternal deaths. Doctors and midwives should be trained to use these protocols in an effective manner |
| ➢ **Improving obstetrical and surgical skills** | Training in practical obstetrical and surgical skills should be imparted to all health professional working in maternity units. Anesthesia skills should be improved, especially at level 1 hospitals |
| ➢ **Enhanced management of pregnant women** | Pregnant women should be informed, screened and appropriately managed for diseases, including HIV, sexually transmitted infections, TB, pneumonia and other conditions that may impact on the their health |
| ➢ **Improving and strengthening the referral system** | The referral process between hospitals and other health care facilities must be clarified, regularised and used properly across all provinces in order to ensure a seamless and effective system of referrals |
| ➢ **Strengthening post-natal care and support** | Post-natal care for women and their children must be strengthened to ensure the continued health of mother and child following childbirth |
| ➢ **Improving staffing and infrastructure as health care facilities** | The quality and performance of health care staff must be optimized, with clear staffing and equipment norms established for every health facility caring for pregnant women |
| ➢ **Ensuring the availability of blood transfusion facilities** | Blood for transfusion must be available at every clinic where caesarian sections are performed to obviate childbirth emergencies and possible complications or even death for the mother and/or the child |
| ➢ **Ensuring quality provision of contraception** | The provision of modern contraceptives should be a readily available service, and health care workers should be enables to provide adequate education on contraceptive methodologies and usage |
| ➢ **Eliminating death from unsafe abortions** | Deaths from unsafe abortions must be reduced through enhanced termination of pregnancy services and improved education and counselling services on pre- and post-termination of pregnancy processes |
| ➢ **Enhanced community health awareness and mobilisation** | Women, families and communities must be made aware of the full range of sexual and reproductive services available, and mobilized to participate actively in programmes to improve reproductive, maternal and neo-natal health |

## 5.5 CONCLUSION

Despite this investment in public health there is a high and increasing level of maternal mortality in South Africa. Notwithstanding the fact that over 90% of pregnant women currently have access to antenatal care, and the fact that with a contraceptive prevalence of over 60%, South Africa has relatively high contraceptive prevalence rate. Of concern remains the current level of maternal mortality ratio which is far higher than the 2015 MDG 5 target of 38 maternal deaths per 100,000 live births. It is evident that maternal mortality is both a multi-dimensional health and broader developmental challenge, and that improved sexual and reproductive health is also dependent on a range of other factors including education, decent work, safety, clean water and sanitation, and adequate transport facilities.

**Recommendations**

- Appoint qualified midwifes and apply the 6x6x6 post natal care system
- Supply equipment in all maternity units across the country
- Expand and implement extended Primary Health Care (PHC) programs across all health care delivery facilities
- Link all the home-base care-givers to the local clinic for training and registration for community health workers (those currently seen as volunteers)
- Link the child minders to the local schools for training, registration and community educators. Implement community health care system( re-introduce community mid-wives) with special focus on mother and child care

# MDG 6: COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

## 6.1 BACKGROUND

Dealing with the challenges of HIV and AIDS continue to be a major global and regional health priority. The adult prevalence rate of HIV and AIDS in 2008 for sub-Saharan Africa was 5.2% compared to a global total prevalence of 0.8%. HIV and AIDS are negatively impacting on economic and social development across the region, and South Africa is no exception. The epidemic is affecting health, livelihoods, economic growth, demographic futures, as well as impacting on the lives of individuals, families and workplaces. HIV and AIDS have had a significant negative impact on life expectancy in South Africa, and has left many families and children economically vulnerable and often socially stigmatized. It continues to leave South Africa with a legacy of young adult deaths, AIDS orphans and socially and economically vulnerable children. HIV and tuberculosis are also closely inter-related, and a high proportion of HIV positive people are also TB infected. Accurate monitoring of the HIV epidemic is therefore particularly important in providing the data and informing policymakers of the challenges and policy responses required to address the epidemic in a comprehensive and effective manner.

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**Information base:** data and information for Goal 6 relates to HIV and AIDS prevalence disaggregated by age and sex. It is derived from institution based clinical information, as well as population survey based information.

## 6.2 FACTS AND FIGURES

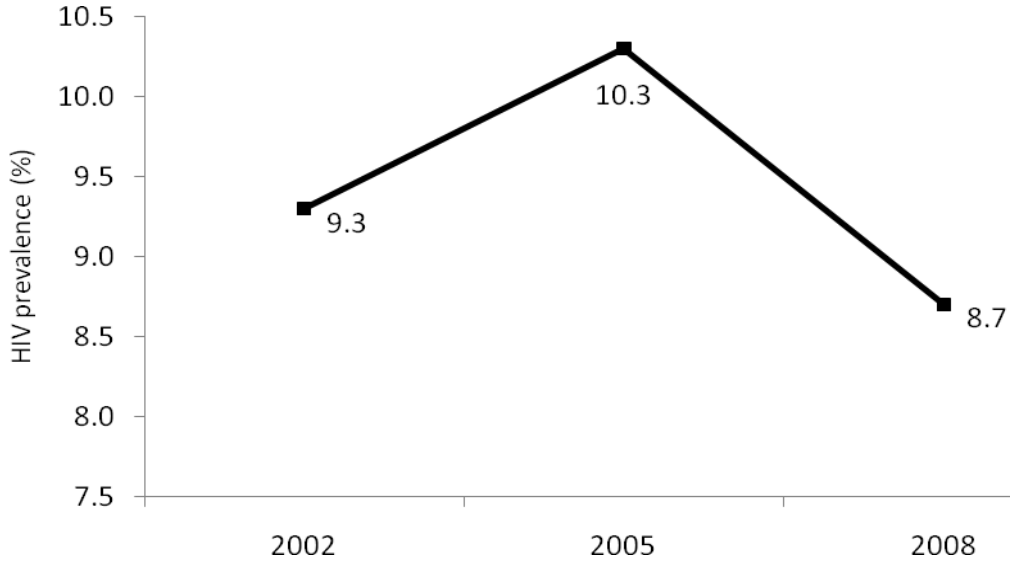
| GOAL 6: COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES | | | | | |
|---|---|---|---|---|---|
| **Goal and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achieva-bility** | **Indicator Type** |
| HIV prevalence among population aged 15-24 years | 9.3 *(2002)* | 8.7 *(2008)* | < 9.3 | **Possible** | **MDG** |
| Condom use at last high-risk sex | 27.3% *(2002)* | 62.4% *(2008)* | ≈100 | **Unlikely** | **MDG** |
| Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS | Data deficient | Data deficient | No target | **Unknown** | **MDG** |
| Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years | 1:1 *(2002)* | 1:1 *(2008)* | 1:1 | **Achieved** | **MDG** |
| Proportion of population with advanced HIV infection with access to antiretroviral drugs | 13.9 *(2005)* | 41.6 *(2009)* | ≈100 | **Unlikely** | **MDG** |
| Incidence of malaria | 64 600 *(2000)* | 6 800 *(2008)* | < 6 800 | **Likely** | **MDG** |
| Death rates associated with malaria | *2.0 (2002)* | *0.6 (2007)* | < 2.0 | **Achieved** | **MDG** |
| Proportion of children under 5 sleeping under insecticide-treated bed-nets | Not applicable | Not applicable | Not applicable | **Not applicable** | **MDG** |
| Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs | No data | No data | Unknown | **Unknown** | **MDG** |
| Number of cases of children under 5 years of age with fever who are treated with appropriate anti-malarial drugs | 9513 *(2000)* | 603 *(2009)* | < 9513 | **Achieved** | **MDG** |
| Number of households sprayed with insecticide | 888 965 | 1 757 832 | No target | **Not applicable** | **Domestic** |

| | | | | | |
|---|---|---|---|---|---|
| | *(2000)* | *(2009)* | | | |
| • Incidence of tuberculosis | 253 *(2004)* | 283 *(2009)* | < 253 | **Unlikely** | **MDG** |
| • Prevalence of tuberculosis | 134 000 *(2004)* | 144 000 *(2008)* | < 134 000 | **Unlikely** | **MDG** |
| • Death rates associated with tuberculosis per 100 000 population | 147 *(2002)* | 179 *(2007)* | < 147 | **Unlikely** | **MDG** |
| Proportion of tuberculosis cases detected and cured under directly observed treatment short course | 65.5 *(2004)* | 76.4 *(2008)* | 100 | **Possible** | **MDG** |
| Percentage of people that received an HIV test in the past 12 months and know their status | 11.9 *(2005)* | 24.7 *(2009)* | No target | **Not applicable** | **Domestic** |
| HIV prevalence among pregnant women aged 15 – 24 years | 22.8 *(2002)* | 29.3 *(2008)* | 22.8 | **Unlikely** | **MDG** |
| HIV prevalence in men and women aged 15-49 | 15.6 *(2002)* | 16.9 *(2008)* | 15.6 | **Unlikely** | **MDG** |

### 6.3 INSIGHTS

**Trends and levels of HIV and AIDS:** HIV prevalence in South Africa appears to be stabilising after peaking in the 1990s and early 2000s. South Africa now has the largest Anti-Retroviral Therapy programme in the world and may have contributed towards stabilizing HIV prevalence. It is observed that the spread of HIV prevalence in South Africa may have stabilized as the HIV prevalence rate among persons aged 2 years and above has changed very little since 2002. Key to the success of national HIV and AIDS initiatives has been the effective scale-up of implementation of voluntary counselling and testing, the prevention of mother to child transmission services provided in more than 95% of health facilities, the distribution of condoms, the increase in provision of antiretroviral therapy, and the introduction of a dual therapy policy in 2008 for the prevention of mother to child transmission. Despite these successful initiatives the prevalence rate of 11% among persons aged 2 years and above since 2002 is still high even in comparison with other countries on the African continent. Trends in HIV prevalence among persons aged 15-24 years is a good indicator of the course of new infections in the population. The evidence from population-based HIV prevalence surveys in South Africa indicates that the spread of HIV among persons aged 15-24 years overall has declined in the country since 2005.

**Figure 6.1: HIV Prevalence Among Population Aged 15-24 Years, South Africa, 2002, 2005 and 2008**




Source: *Shisana et al 2009*

The results of PCR tests indicate that the number of HIV infected babies in South Africa are declining. The overall national transmission rate of HIV to babies born to HIV-infected mothers is 11%. According to the 2010 South Africa Country Progress Report on the Declaration of Commitment on HIV and AIDS, the scale-up and uptake of PMTCT has increased since the introduction of the programme in 2004.

PMTCT is almost universally available in public primary facilities in South Africa, with the country having achieved the NSP for HIV and AIDS and Sexually Transmitted Infections (STIs) 2007-2011 (NSP) target of 95% coverage in the public sector ante-natal sites in 2008. Civil society however feels sidelined as regards the NSP, with little funding and support allocated to civil society organisations. The PMTCT guidelines were recently revised and adopted to include the introduction of the dual therapy regimen of Nevirapine and AZT (Zidovudine). The Polymerase Chain Reaction (PCR) is a major scientific advance for the diagnosis of HIV and AIDS. The proportion of HIV positive babies in 2009-2010 is 9.4% which shows a decline from the estimated 15.2% in 2008-2009.

**Table 6.1: Polymerase Chain Reaction (PCR) tests for diagnosis of HIV among children under 18 months of age, South Africa**

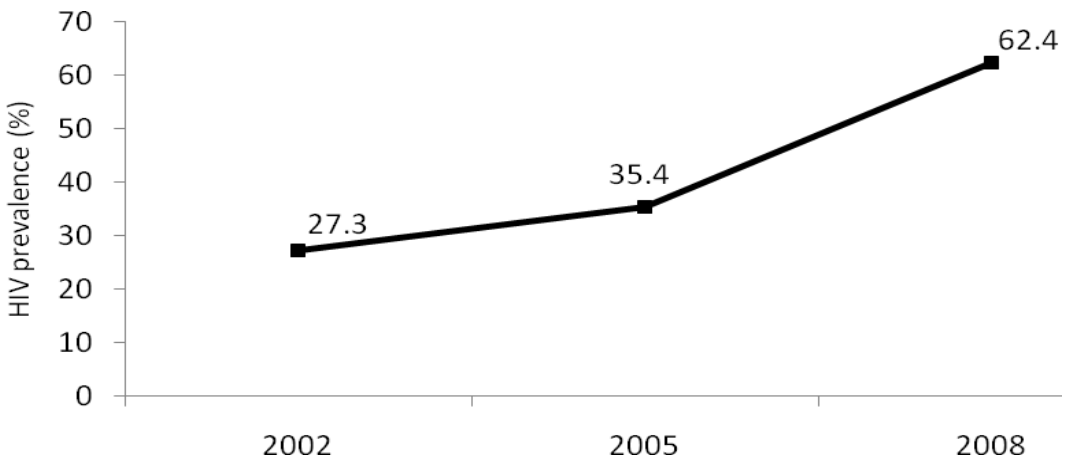
| | 2008 -2009 | | | | 2009 – 2010 | | | |
|---|---|---|---|---|---|---|---|---|
| | 1ST quarter | 2nd quarter | 3rd quarter | 4th quarter | 1ST quarter | 2nd quarter | 3rd quarter | 4th quarter |
| **Estimated number of HIV - exposed infants** | 66872 | 66872 | 66872 | 66872 | 66872 | 66872 | 66872 | 66872 |
| **Percentage of PCR tests conducted** | 78.4 | 87.0 | 77.8 | 91.4 | 91.6 | 96.0 | 93.9 | 103.4 |
| **Percentage of HIV positive children** | 15.2 | 13.7 | 13.5 | 11.9 | 9.8 | 9.7 | 10.0 | 9.4 |

*Source: District Health Information Health System (DHIS) & National Health Laboratory Services*

**Knowledge and safety practices:** HIV and AIDS awareness education has been a major component of the strategy to address the pandemic in South Africa. Knowledge about HIV and AIDS transmission accompanied by an appropriate reduction of behavioural risks is important in combating and reversing the spread of HIV and AIDS. Results from the 2009 National Communication Survey in South Africa further suggest that awareness and knowledge of HIV prevention methods is high. The results indicate a knowledge level of 87% on average for condoms across age groups. Knowledge of other HIV prevention methods such as faithfulness, partner reduction and abstinence is lower, but has improved since the 2006 National Communication Survey. The 2009 National Community Survey also indicates that knowledge of treatment that allows people living with HIV to be healthy is high in South Africa and has significantly increased. Of those who knew about treatment, 87% (85% male and 88% female) identified antiretroviral therapy (ART) as a treatment, and 73% knew that ART is for life (in 2006, 42% identified ART and 40% knew that it was for life).

Condom use at last high-risk sex is a critical indicator for understanding sexual behaviour patterns in the context of HIV and AIDS. Risky sexual behaviour is one of the factors that fuel s HIV infection. The results from the 2009 National Communication Survey in South Africa indicates that condom use is lowest in stable (married or living together) relationships and highest among people with less stable relationships. Only 15% of married men and women reported use of condoms at last sex as compared to 74-83% of men and 56-66% of women with other partners (casual, friends and one-night encounters).

**Figure 6.2: Percentage of adults aged 15 years and over who used condom at last sex, South Africa, 2002, 2005 and 2008**

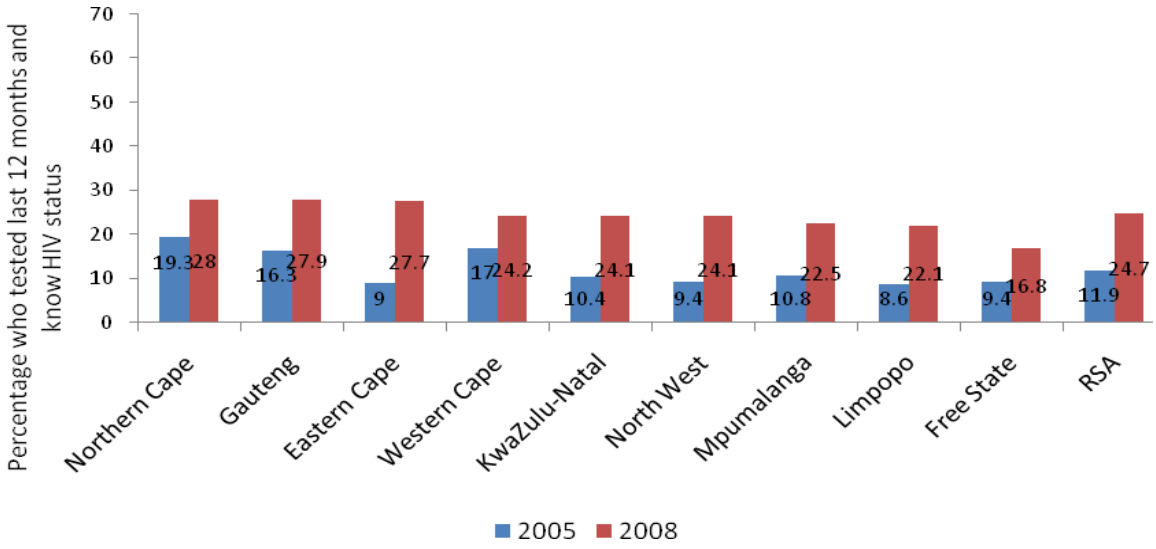



Source: *South African national HIV prevalence, incidence, behaviour and communication survey 2008*

Personal knowledge of HIV status is an important factor in combating HIV and AIDS. According to the 2009 National Communication Survey (NCS) conducted in South Africa, a total of 61% of all sexually active people had ever been tested for HIV (4% of men, and 74% of women). The percentage of both young men and women (aged 15-24 in the 2006 NCS, 16-24 in the 2009 NCS) who had ever been tested for HIV increased dramatically – in 2006, 17% of men and 38% of women had been tested; in 2009, 31.8% of men and 71.2% of women had ever been tested.

Figure 6.3 shows that in South Africa as whole, and in each of the provinces, there is an increasing tendency for people to test and to know their HIV status. As shown in figure 6.3, the percentage of persons who know their HIV status in South Africa and in each of the provinces is low (less than 30%), but the percentages need to be interpreted with caution. The reference period for the question from which the percentages were computed was in the last 12 months. It is possible that a substantial percentage of people may have tested during a time period exceeding 12 months and hence knew their status. These persons would not have been captured in the two surveys in which the question was asked. In view of this, the percentages of those who know their HIV status in figure 6.3 are probably an underestimate.

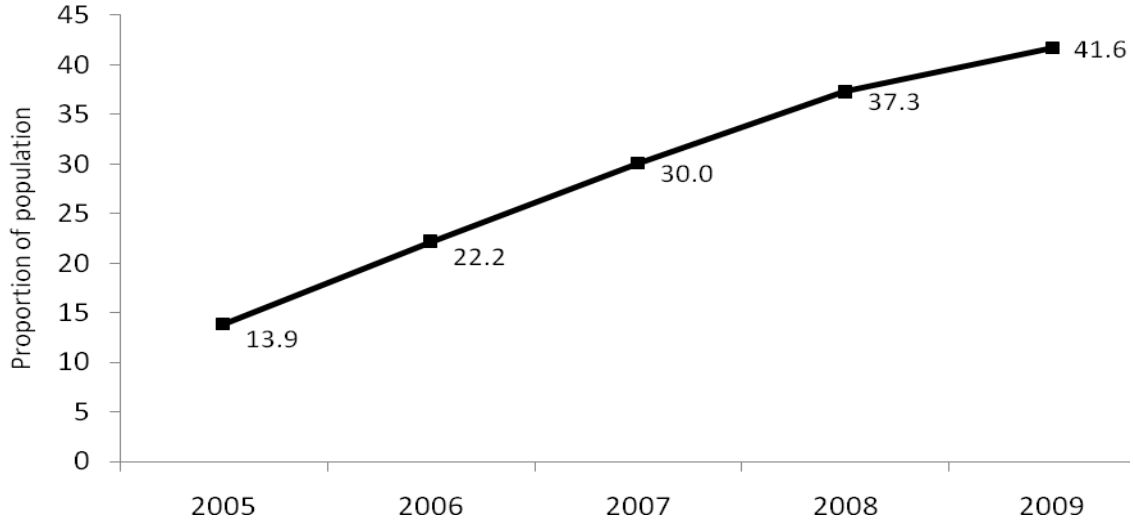
**Figure 6.3: Percentage of people aged 15-49 that received an HIV test in the past 12 months and know their status, 2005 and 2008**




Source: *South African national HIV prevalence, incidence, behaviour and communication survey 2008*

Increased access to antiretroviral drugs is a key factor in ensuring long-term health and increased life expectancy. There were wide disparities among persons with HIV infection who had access to antiretroviral drugs in South Africa in the past, but it is evident that the disparities have started to reduce since 2009. There has also been a marked increase in all the provinces from 2005 to 2009 in the proportion of people with HIV who have access to antiretroviral drugs. In South Africa as a whole, this proportion increased from 13.9% in 2005 to 41.6% in 2009.

**Figure 6.4: Proportion of population with advanced HIV infection with access to antiretroviral drugs, 2005-2009, South Africa**




Source: *National Department of Health, South Africa & ASSA Model 2003*

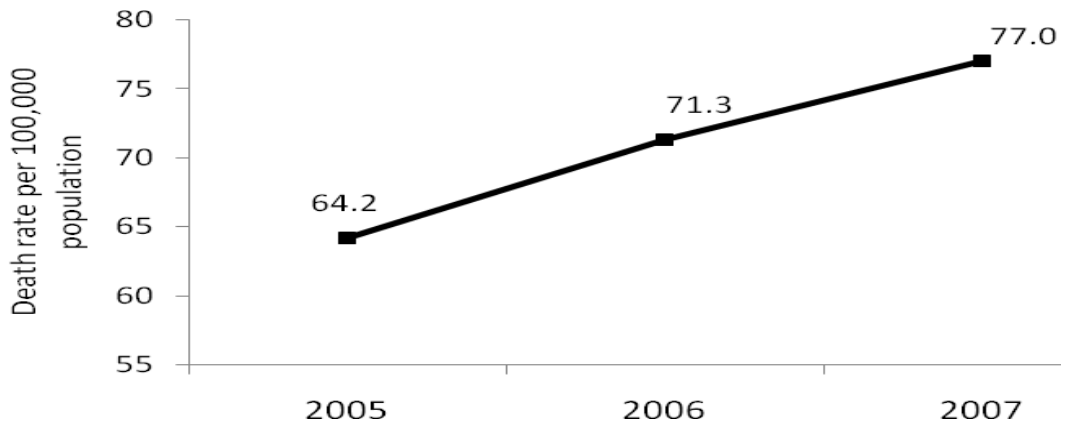
**Implications for child rearing:** One of the most complex outcomes of HIV and AIDS in South Africa has been the high number of children orphaned through losing one or both parents to the illness. The school attendance ratio: orphans to non-orphans is an indicator of the ongoing social impact of HIV and AIDS. According to the General Household Surveys conducted from 2002-2008, the ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years is almost 1, which suggests that there is very little difference in school attendance of orphaned children aged 10-14 compared to non-orphaned children in South Africa since 2003.

**Correlates of HIV and AIDS:** A characteristic of AIDS in South Africa is closely inter-linkage with the prevalence of tuberculosis. Current HIV/TB co-infection rates exceed 70%, with TB being the most common opportunistic infection among them. Due to late detection, poor treatment, management and failure to retain TB patients on treatment, drug-resistant forms of TB, DR-TB (multi-drug resistant - MDR TB - and extensively drug resistant - XDR TB) have increased significantly, with about 5,000 and 500 diagnosed respectively in 2009. Although the current policy by the Department of Health is that all DR-TB patients should be hospitalised until they are cured, there are about 2,000 beds available for DR-TB treatment and management.

The Electronic TB Register of the Department of Health indicates that deaths associated with TB in South Africa have stagnated at around 7%. Stats SA has also reported that TB was the highest reported condition in the deaths recorded in 2008. The results from the 2009 National Communication Survey in South Africa indicate that the majority of respondents know what the duration of TB treatment is (75% male and 80% female). However, knowledge of the curability of TB in people living with HIV needs to be addressed (49% of men and 45% of women believe people with HIV cannot be cured of TB). Successful completion of TB treatment increased from 65.5% in 2004 to 76.4% in 2008. Although South Africa still lags behind the stated MDG target of at least 85%

successful completion of TB treatment, there is a positive trend that has developed over the past few years.

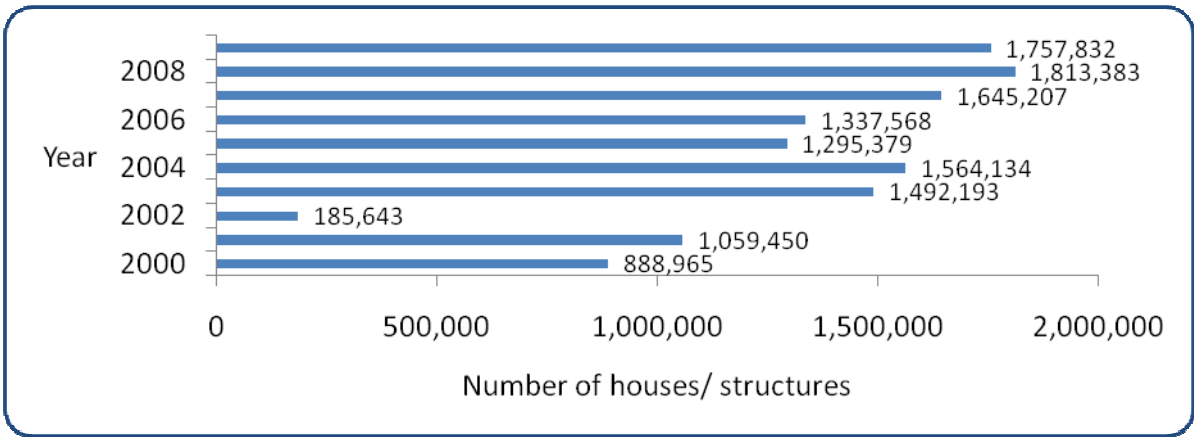
**Figure 6.5: Death Rate Associated with TB by Province, 2005 – 2007, South Africa**




Source: *TB Electronic Register, Department of Health, South Africa*

**Malaria prevalence:** Malaria is not endemic in South Africa, and does not therefore pose a major health risk except in some of the country's northern areas. Most cases of malaria in South Africa are found in parts of the Limpopo, Mpumalanga and KwaZulu-Natal provinces. The death rate due to malaria in South Africa has remained very low at 4-10 per thousand since 1999. The number of deaths due to Malaria decreased from 360 per annum in 1999 to 54 in 2008, which represents a decrease of 85% over the period. Figure 6.6 shows the number of houses or structures sprayed with insecticide as a prevention practice between 2000 and 2009. The trend is generally incremental, particularly from 2004 to 2009. An increase of 12.4% in the number of houses or structures sprayed with insecticide was witnessed during this period.

**Figure 6.6: Number of Houses or Structures Sprayed at Least Once, 2001-2009**




Source: *Malaria Cases and Fatalities, Department of Health, South Africa*

## 6.4 DISCUSSION

Government has intensified the implementation of policies, strategies and programmes aimed at combating HIV and AIDS. However, there is wide recognition that the Government cannot be expected to combat the spread of HIV and AIDS, malaria and other diseases (including TB) without broad-based support from all sectors of South Africa. Given the complexity of the health challenges required to address these problems there is a need for ongoing concerted efforts by Government, civil society, the private sector and individuals to work in a collaborative and integrated manner.

Individuals also need to take responsibility for combating the spread of HIV and AIDS and TB by minimizing risky sexual behaviour that fuels infection and the spread of the conditions. HIV prevalence levels are still high in South Africa in comparison to other countries in Northern, Western and Middle Africa. However, it would appear that the prevalence of HIV may have stabilized in the country. With regard to Malaria, the national malaria programme will be redirected towards malaria elimination and the Department of Health will work with countries like Swaziland, Mozambique, Zimbabwe and Botswana to ensure that this is achieved.

Some of the key recommendations for combating the spread of HIV and AIDS and other communicable diseases in South Africa include:

| | |
|---|---|
| ➢ **Reducing the stigma and marginalisation associated with HIV and TB** | Reducing the stigma attached to people who reveal their HIV status, the prevalence of intergenerational sex, the level of concurrent sexual partnerships and violence against women |
| ➢ **Intensifying current HIV and AIDS strategies and programmes** | Intensifying the implementation of policies and programmes in place aimed at combating HIV and AIDS |
| ➢ **Reducing the vulnerability of young women to HIV infection** | The vulnerability of young women to HIV is a disturbing trend, with HIV prevalence peaking at in the 25 to 29 age group. In males, prevalence peaks are at a lower level in age groups 30 to 39, indicating that younger women are more vulnerable to HIV than their male counterparts |
| ➢ **Strengthening prevention and treatment literacy** | Strengthening and sustaining communication efforts on prevention and treatment literacy to ensure that the majority of people in South Africa are more aware of safe sex practices and that ART is a treatment for HIV and that it needs to be taken to sustain life |
| ➢ **Significantly reducing the prevalence of malaria** | Strengthening efforts in the mitigation of malaria through education, prevention and treatment literacy |
| ➢ **Ensuring that TB patients complete their treatment** | Sustaining the recent trend in the successful completion of TB treatment in South Africa that has developed over the years. |
| ➢ **Intensifying efforts to mitigate** | Co-infection with HIV compounds the severity of TB and makes its prophylactic and curative treatment more |

| | |
|---|---|
| **the severity of TB** | costly and problematic. This has been compounded by the emergence of multidrug resistant (MDR) and extreme drug resistant (XDR) strains, which are more costly to treat and have a longer duration. |

## 6.5 CONCLUSION

HIV prevalence levels are still high in South Africa compared to other countries in Northern, Western and Middle Africa. However, it would appear that the prevalence of HIV has stabilized in the country. Encouraging as the decline might be, the differential infection rates point to predominance in rural provinces attributed to gender power relations. Even more worrisome are the emergent relationships that expose young girls to HIV because of gender power inequalities with older male sexual partners.

On the other hand a range of coordinated Government and civil society HIV and AIDS initiatives have strengthened national prevention, treatment care and support efforts. The majority of people in South Africa are aware that ARV is a treatment for HIV and that it needs to be taken for life. These developments have been a boost for communication efforts on prevention and treatment literacy over the past few years, and these initiatives need to continue.

Efforts towards the mitigation of malaria should be strengthened. Government has declared TB a top national health priority, and in this context the recent trend in the successful completion of TB treatment in South Africa that has developed over the years should be sustained.

### Recommendations

The report recognises that women and girls are the most vulnerable because of biological factors and structural inequalities in society like culture and tradition.

- Improve access to basic health care with specific focus on improving - health issues impacting on women.
- Improved sexual and reproductive health. This includes comprehensive health issues such as greater access to safer sex practices by making female condoms and new technologies.
- Provide guidance and support to young girls in order to take decisions about their bodies, sexuality and their life especially against predatory older men.
- Intensify and coordinate community home-based-care to arrest the prevalence of immunisation defaulters.

# MDG 7: ENSURE ENVIRONMENTAL SUSTAINABILITY

## 7.1 BACKGROUND

The inclusion of environmental rights in the South African Constitution, the development of a plethora of new environmental management policies committed to sustainable development, and a marked increase in donor funding for environmental management are positive changes in the South African political context. These changes have arisen from both national and international drivers, and are impacting on redirection of resources within the country from traditional conservation to people-centred sustainability management.

> ***Government of South Africa – Outcome Area 10: Environmental assets and natural resources that are well protected and continually enhanced;***

Environmental sustainability underpins the achievement of the majority of the other seven goals. Analyses reveal that environmental preservation is an essential foundation for sustainable development and poverty alleviation. Failure to achieve biodiversity stability for instance will undermine social and economic development efforts. Similarly, poor environmental management practices impact on food security. However, current indications suggest that the timetable for implementing the indicators of MDG 7 will not be met in South Africa. To reverse the situation, greater effort is required to deal with the complex environmental issues to achieve the broader sustainability goals. The key role of environment in achieving all the MDGs calls for the need for South Africa to integrate the principles of sustainable development into its national policies and programmes. The International Community should encourage action towards sustainable biodiversity management as a vehicle for sustainable development. In that regard the commitments made by developed countries in the Copenhagen Accord of December 18, 2009 to provide resources amounting to USD 30 billion for the period 2010-2012 with balanced allocation between adaptation and mitigation should be concretized. Another additional commitment by developed countries which relates to the mobilization of USD 100 billion a year by 2020 to address the need of developing countries is an opportunity for South African to speed up the implementation of MDG 7.

**Information base:** Information for this goal relate to sustaining the environment and the population's access to housing water, energy and sanitation amongst others. The data relates to consumption of marine resources, energy and the scope for protecting threatened species and lands. The information is based on measuring the state of the environment as well as service delivery.

## 7.2 FACTS AND FIGURES

| GOAL 7: ENSURE ENVIRONMENTAL SUSTAINABILITY | | | | | |
|---|---|---|---|---|---|
| **Goal and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achieva-bility** | **Indicator Type** |
| Proportion of land area covered by forest | No data | No data | No target | **Unknown** | **MDG** |
| Proportion of land area covered by forest:<br>• Natural forests | No data | 0.41<br>*(2008)* | No target | **Not applicable** | **Domestic** |
| • Savannah woodlands | | 32.77<br>*(2008)* | | | |
| • Albany Thicket | | 2.39<br>*(2008)* | | | |
| • Commercial plantations | 1.04<br>*(2007)* | 1.03<br>*(2008)* | | | |
| $CO_2$ emissions:<br>• total | 358 930<br>*(1994)* | 433 527<br>*(2007)* | 34 | **Possible** | **MDG** |
| • per capita | 8.86<br>*(1994)* | 8.82<br>*(2007)* | | | |
| • per $1 GDP (PPP) | 1.29<br>*(1994)* | 0.98<br>*(2007)* | | | |
| Consumption of ozone-depleting substances (ODP tons) | 205.1 (HCFC)<br>*(1994)* | 209.2 (HCFC)<br>*(2008)* | Freeze by 2013 and phase out by 2040 | **Likely** | **MDG** |
| | 14.4 (BCM)<br>*(2003)* | 0 (BCM)<br>*(2009)* | | | |
| | 601.2 (MeBr)<br>*(1994)* | 225.9 (MeBr)<br>*(2008)* | Phase out by 2015 | | |
| Proportion of fish stocks within safe biological limits | No data | No data | No target | **Not applicable** | **MDG** |

| | | | | | |
|---|---|---|---|---|---|
| Proportion of total water resources used | 26.61 *(1990)* | 25.03 *(2000)* | No target | **Unknown** | **MDG** |
| Proportion of area protected (as a percentage of total)<br>• terrestrial<br>• marine | 5.18 *(1994)* | 6.20 *(2010)* | 9 | **Possible** | **MDG** |
| | 0 *(1994)* | 6.54 *(2010)* | 14 | | |
| Number of species (vegetation) threatened with extinction | 676 *(1990)* | 2458 *(2010)* | 676 | **Unlikely** | **MDG** |
| Proportion of population using an improved drinking water source | 61.1% *(1996)* | 92.4 *(2009)* | 81 | **Achieved** | **MDG** |
| Proportion of population using an improved sanitation facility | 58.5 *(2001)* | 72.2 *(2009)* | 79.2 | **Likely** | **MDG** |
| Proportion of urban population living in slums | 13.0 *(2002)* | 13.4 *(2009)* | 0 | **Unlikely** | **MDG** |
| Proportion of households with access to electricity | 76.8 *(2002)* | 82.6 *(2009)* | ≈100 | **Possible** | **MDG** |
| Proportion of population using solid fuels as primary source of energy | 35.7 (Heating) *(1996)* | 19.8 (Heating) *(2009)* | < 35.7 | **Achieved** | **MDG** |
| | 27.6(Cooking) *(1996)* | 15.7 (Cooking) *(2009)* | < 27.6 | | |
| Number of legally designated landfill sites | No data | 817 *(2010)* | No target | **Not applicable** | **Domestic** |

### 7.3 INSIGHTS

**Forest cover:** The proportion of land area in South Africa in forest is 36.6 % with the vast majority (32.7%) of the total being in Savannah woodlands. Natural (indigenous) forest covers only 0.4% of the land area. Of these, 37% occur in formally declared protected areas. The main reasons for deforestation are conversion of forests for agriculture and harvesting for construction, timber, and fuel wood.

**Table 7.1: Proportion of land area covered by forest**

| Province | 2007 | | 2008 | |
|---|---|---|---|---|
| | Hectares | % | Hectares | % |
| Limpopo | 48096 | 3.8 | 47982 | 3.8 |
| Mpumalanga | 514831 | 40.7 | 510263 | 40.6 |
| North West | 126 | 0 | 126 | 0 |
| Free State | | 0 | | 0 |
| KwaZulu Natal | 486967 | 38.5 | 486020 | 38.7 |
| Eastern Cape | 155079 | 12.2 | 153380 | 12.2 |
| Western Cape | 61097 | 4.8 | 59570 | 4.7 |
| Total | 1266196 | 100 | 1257341 | 100 |

Source: *Cadastral Dataset, Department of Agriculture, Forestry and Fisheries*

**Greenhouse gases:** Carbon dioxide ($CO_2$) is the most significant of the three main greenhouse gases that South Africa emits, the others being methane ($CH_4$) and nitrous oxide (N2O). Carbon dioxide contributed more than 80% of total emissions in 1990 and 1994. Total carbon dioxide emissions have risen from 359 million metric tons in 1994 to 434 million metric tons in 2007.

The analysis for the period June 2004 to June 2009, highlights the fact that hydrochlorofluorocarbons (HCFCs) dominate consumption at approximately 25 759 tons which is 81.4% of total ODS consumed during the past five years. This is followed by hydrofluorocarbons (HFCs) at 3 439 tons or 10.9%. Hydrofluorocarbon blends (HFC blends) are in third place with 1 089 tons or 3.4%. Methyl bromide (MeBr) follows with 747 tons or 2.4% and bromochloromethane (BCM) at 624 tons or 2%.

**Aqua and marine resources:** Several other observations from the table show the following. First, South Africa is a water-stressed country and the proportion of total water resources used is key indicator in developing appropriate and equitable water conservation strategies. The proportion of total water resources used in 1990 was 26.61% compared to 25.03% in 2000. Second, we are a country with significant biodiversity and a number of unique ecosystems and biomes. In this context the proportion of terrestrial and marine areas protected is a critical conservation and economic concern. The proportion of total area protected has increased from 4.91% to 6.22%. Third, linked to the issue of terrestrial and marine

areas protected is that of the proportion of species threatened with extinction. The number of species (vegetation) threatened with extinction increased from 676 in 1990 to 2 458 in 2010.

### 7.4 DISCUSSION

South Africa's progress as measured by the indicators for target 7A, B, C and D is encouraging, but there is cause for concern in a number of areas such as $CO_2$ emission levels, overexploitation of fish stocks, access to basic sanitation and the persistence of a large number of people living in informal dwellings.

The proportion of land area covered by forest is a key indicator for environmental sustainability. South Africa has about 1.5 million hectares of forest plantations, i.e. 1.16% of total area of South Africa (121.91 million hectares). The forestry area decreased from 1.266 to 1.257 million hectares from 2007 to 2008, which represents a decrease of 9,000 ha. It is estimated that the country only has 330,000 hectares of indigenous forest, of which 54,000 hectares are privately owned. South Africa is experiencing limited deforestation because most of the indigenous forests have been cleared over the past 100 years. The main reasons for deforestation are conversion of forests for agriculture and harvesting for construction, timber, and fuel wood.

Levels of carbon dioxide emissions are integrally linked to national and global concerns around climate change. Carbon dioxide ($CO_2$), one of the three main greenhouse gases ($CO_2$, $CH_4$, and $N_2O$), is the most significant of these emissions in South Africa since it has contributed more than 80% of the total emissions of these three gases for both 1990 and 1994. The main source of $CO_2$ emissions has been from the energy sector, which generated 89.7% of the total $CO_2$ emissions in 1990 and 91.1% of the total $CO_2$ emissions in 1994. Such high emission levels from this sector are due to the energy intensity of South Africa's economy, which depends on large-scale primary extraction and processing in the mining and minerals beneficiation sector. The three source groups contributing most significantly to the energy sector $CO_2$-equivalent emissions are: energy industries (including electricity generation for the national grid - about 57%); industry (about 18%); and transport (about 15%). From all three groups, $CO_2$-equivalent emissions increased from 1990 to 1994, with transport emissions increasing the most (by 38%), followed by industry (by 13%) and then energy (by 5%). Road transportation contributed more than half of the transport sector's emissions. Residential fuel-burning contributes a relatively small amount to total greenhouse gas emissions (around 2.5% of energy-sector $CO_2$-equivalent emissions and less than 2% of the total national $CO_2$-equivalent emissions).

**Table 7.2: $CO_2$ Emissions, Total**

| Type | Greenhouse Gas Emissions (without LULUCF) | | Total Greenhouse Gas Emission in South Africa in 2000 | |
|---|---|---|---|---|
| | % change from 1990 | % change from 1994 | GHG source category | $CO_2$ |
| **Sector** | | | Total (Net Emissions) | 332 054.67 |
| **Energy** | 42.6 | 25 | 1. Energy | 324 599.85 |

Source: *Carbon Dioxide Information Analysis Center*

The consumption of ozone-depleting substances is a major global environmental concern. The thinning of the stratospheric ozone layer is caused by ozone-depleting substances, including chlorofluorocarbons (CFCs), halons, and other chemicals that are used in refrigerators, spray cans, air conditioners, and as foam blowing agents and solvents. The use of ozone-depleting substances has been almost completely phased out. The Montreal Protocol was signed in 1987, followed by the London (1990), Copenhagen (1992), Vienna (1995), another Montreal (1997), and Beijing (1999) amendments. The effect of these agreements was that by 2003, the total annual global fluorocarbon production came down to below the production levels of 1969. The latest synthesis report of the Intergovernmental Panel on Climate Change predicts that the ozone layer will slowly recover over the next 50 years, and the Antarctic hole will slowly recover.

South Africa acceded both to the Vienna Convention for the Protection of the Ozone Layer and the Montreal Protocol on Substances that Deplete the Ozone Layer in 1990, and to the London Amendment to the Montreal Protocol in 1992. The Montreal Protocol controls the use of ozone-depleting substances (ODS) for the protection of the ozone layer and the London Amendment restricts the use of CFCs and halons. South Africa's current (2005) development of an Ozone Layer Protection strategy indicates an appropriate response measure necessary to mitigate ozone layer depletion. The Department of Environment Affairs (DEA) has started the process of developing a national strategy for phasing out ozone-depleting substances and is formulating a full phase-out plan for methyl bromide

The analysis for the period June 2004-June 2009, highlights the fact that hydrochlorofluorocarbons (HCFCs) dominate consumption at approximately 25,759 tons (81.4%) of total ODS consumed during the past five years. This is followed by hydrofluorocarbons (HFCs) at 3,439 tons (10.9%). Hydrofluorocarbon blends (HFC blends) are in third place with 1,089 tons (3.4%). Methyl bromide (MeBr) follows with 747 tons (2.4%) and bromochloromethane (BCM) at 624 tons (2%). Since the previous DEA report on this issue, HFC blends have overtaken MeBr consumption as a result of consumers exploring alternatives to HCFCs. It is anticipated that the consumption of both HFC and HFC blends will continue to rise due to the above mentioned reason. From the climate change point of view, this has serious environmental implications as these substances have a high global warming potential (GWP). A list providing the most consumed substances is also provided showing that HCFC-22 is the most consumed ODS in South Africa.

**Table 7.3: Consumption of ozone-depleting substances**

| Indicator values (unit = tons) | | |
|---|---|---|
| **Substance** | **Year** | **Sum** |
| **CFC** | 2009 | - |
| **HCFC** | 2005 | 2410.6 |
| | 2006 | 4840 |
| | 2007 | 8640.6 |
| | 2008 | 4149.3 |
| | 2009 | 5718.2 |
| **BCM** | 2005 | 160 |
| | 2006 | 0 |
| | 2007 | 153.9 |
| | 2008 | 310.1 |
| | 2009 | 0 |
| **MeBr** | 2005 | 132 |
| | 2006 | - |
| | 2007 | - |
| | 2008 | 615 |
| | 2009 | - |
| **HFC** | 2005 | 648 |
| | 2006 | 546.4 |
| | 2007 | 750.6 |
| | 2008 | 716.3 |
| | 2009 | 777.9 |
| **HFC blends** | 2005 | 20 |
| | 2006 | 522.6 |
| | 2007 | 138 |
| | 2008 | 195.9 |
| | 2009 | 212.7 |

Source: *Pollution Carbon Emission*

Overfishing and reduction in fish stocks carries both environmental and economic consequences. The indicator on the proportion of fish stocks within safe biological limits can be considered to reflect progress or deterioration with regard to Target 7A, as well as measuring progress towards Target 7B on reducing biodiversity loss. There are currently no statistics, however, to properly measure this indicator. Studies carried out have found that the growth of industrial fishing and aquaculture, changes in habitats and increasing pollution are placing heavy pressure on hydro-biological resources, and this is exacerbated by climate change, which could potentially lead to biodiversity loss. Sustainable management principles have been incorporated into management practices for some species, but have yet to be applied universally or on a scale that could lessen the pressure on resources. There is no obvious solution to these problems in the short and medium terms. The main obstacle to appraising progress in relation to the protection of fish stocks is the lack of systemic data compilation.

**Table 7.4: Southeast Atlantic (FAO area 47)**

| Fish Species | Fish Status |
|---|---|
| Cape hakes, Merluccius capensis & M. paradox | Fully exploited to overexploited |
| Geelbeck Croaker, Atractoscion aequidens | Depleted |
| Red Steenbras, Petrus rupestris | Depleted |
| Kingklip, Genypterus capensis | Overexploited |
| Bigeye Tuna, Thunnus obesus | Overexploited |
| Southern Bluefin Tuna, Thunnus maccoyii Trachurus trecae | Overexploited |
| Cape Rock Lobster, Jasus lalandii | Overexploited or recovering from depletion |
| Southern Spiny Lobster, Palinurus gilchristi | Overexploited |
| Perlemoen Abalone, Haliotis midae | Overexploited |
| Cape Hope Squid, Loligo reynaudi | Fully exploited to over exploited |

Source: *Food and Agricultural Organization*

In a water-stressed country like South Africa the proportion of total water resources used is key indicator in developing appropriate and equitable water conservation strategies. Progress in this area is hindered by a number of factors associated with highly unequal distribution of water and pressures on water resources, including excessive extraction by agriculture and mining, the depletion of aquifers, increasing water pollution, deforestation and the destruction of catchment basins and replenishment areas. South Africa is relatively poorly endowed with water resources and is exposed to significant risks associated with water quality and availability over time and space. Climate change and rising demand will worsen water availability problems. In the face of these challenges, progress towards the target requires more effective management of South Africa's limited water resources.

**Table 7.5: Total Water Resources Used (%)**

| | 1990 | 1995 | 2000 | 2005 |
|---|---|---|---|---|
| South Africa | 26.6 | - | 25.0 | - |

Source: *Department of Environmental Affairs*

South Africa is a country with significant biodiversity and a number of unique ecosystems and biomes. In this context the proportion of terrestrial and marine areas protected is a critical conservation and economic concern. Some progress is evident in relation to the proportion of terrestrial and marine areas protected, inasmuch as the total area protected has increased steadily in the past decade. There is evidence in the region of habitat loss as a result of deforestation, often associated with large-scale economic activities, the introduction of non-native species and climate change. As well as protecting specific areas, other conservation techniques must be employed and changes made to national and international financial and regulatory structures in order to ensure that agents internalize the social and environmental cost of biodiversity loss or the benefits of conservation. The proportion of total area protected has increased significantly, from 4.91% to 6.22%.

**Table 7.6: Protected Terrestrial and Marine Areas (%)**

| | 1994 (ha) | 2010 (ha) |
|---|---|---|
| Marine areas | 0.00 | 440 269.86 |
| Terrestrial sites | 6 312 850.57 | 7 561 418.59 |
| TOTAL | 6 312 850.57 | 8 001 688.45 |
| Area of South Africa | 121 909 000.00 | 121 909 000.00 |
| Inland waters (marine component) | 930 807.35 | 930 807.35 |
| Territorial waters (up to 12 nm) | 5 798 623.47 | 5 798 623.47 |
| Marion & Prince Edward islands | 33 588.61 | 33 588.61 |
| TOTAL territorial area | 128 672 019.43 | 128 672 019.43 |
| Total area protected | 4.91 | 6.22 |
| Total marine area protected | 0.00 | 6.54 |
| Total terrestrial area protected | 5.18 | 6.20 |

Source: *Spatial data on protected areas*

Linked to the issue of terrestrial and marine areas protected is that of the proportion of species threatened with extinction. One of the most direct manifestations of biodiversity loss is the rising proportion of species threatened with extinction. In this area, information about species threatened with extinction is still precarious. Despite the lack of historical data series, there is evidence of biodiversity loss and the reversal of this loss depends on the consolidation of mechanisms for internalizing the benefits of biodiversity preservation, including different conservation techniques (including protected areas) and an equitable regime for participation in the benefits of exploitation

**Table 7.7: Species Threatened With Extinction (%)**

| Monitoring Category | Previous Assessment 1994 | Current Assessment 2009 |
|---|---|---|
| Not threatened | 20 601 | 16 716 |
| Threatened | 676 | 2 458 |
| Not Evaluated | 0 | 1 765 |
| Extinct | 58 | 40 |
| Insufficient Data | 1 023 | 1 379 |
| Total | 22 358 | 22 358 |

Source: *SANBI Database*

The number of legally designed landfill sites is indicative of a country's commitment to effectively managing the full range of waste produced. As indicated by the census 1996 and 2001 findings, municipal waste collection has improved, but more than 50 % of the population is not receiving a regular municipal waste collection service. The metropolitan municipalities deliver an almost 100% service, while the local municipalities in some cases deliver no service at all. General landfills sites accept domestic waste, commercial and industrial non-hazardous wastes, building waste and garden waste. These sites are more often owned and operated by the local authority. Because many of these landfills do not have records of incoming waste, due to the lack of funds and capacity, up-to-date information is not readily available. According to the baseline studies published in 1998 however, there could be up to 15,000 unrecorded communal sites in the rural areas. Crucial to effective waste disposal is the availability of well designed landfill sites which meet all legal requirements. The table below indicated the current (2010) situation in respect to legal landfill sites in South Africa.

**Table 7.8: Legal landfill sites by province, 2010**

| Provinces | Legal landfill sites |
|---|---|
| Western Cape | 97 |
| Eastern Cape | 120 |
| Northern Cape | 103 |
| Free State | 67 |
| KwaZulu-Natal | 119 |
| North West | 35 |
| Gauteng | 160 |
| Mpumalanga | 72 |
| Limpopo | 44 |
| South Africa | 817 |

Source: *Authorisation and Waste Disposal Management Database*

Access to improved water sources and adequate sanitation are key elements in improved quality of life. There was a progressive increase (4%) in the percentage of households with access to water supply from a safe source between 2002 (88.7%) and 2007 (92.7%), with slight dip in 2008 (92.0%), and then a rise in 2009 (92.4%). The percentage of households with access to water infrastructure above or equal to the Reconstruction and Development Programme standard increased from 61.7% in 1994 to 91.8% in March 2009. Using these data sources, it is estimated that 93% of the population has access to an improved drinking water supply in the year 2010. The Department of Water Affairs acknowledges that the supply backlog has been reduced from 41% in 1994 to only 7% in 2010. This means that South Africa has surpassed the Millennium Development Goal (MDG) of halving the proportion of people without sustainable water by 2005.

The right of access to basic sanitation services is enshrined in the Constitution of South Africa (1996). Section 24(a), states that 'everyone has a right to an environment that is not harmful to their health or well-being, and municipalities have an obligation to ensure the realisation of this right. ' As at April 2008, the sanitation backlog was put at an estimated 3.3 million homes, down from approximately 4 759 709 at the time of the 2001 Census. In 1994, 609 675 households used the bucket system, while in March 2009, 9 044 households were using the bucket system. The target date for universal access to sanitation is 2014. At this rate, South Africa has made demonstrable progress in terms of sanitation and has met the MDG sanitation goal, although going by data in this report, the goal of eliminating the full sanitation backlog by 2014 may seem too ambitious. The percentage of households with access to sanitation at RDP levels or higher rose from 61.9% in 2002 to 70.1% in 2007. In 2008 there was a decline to 69.7% and this went up to 72.2% in 2009. As at March 2009, more than 10 million households (77%) had access to sanitation compared to about five million (50%) in 1994. Between 2001 and 2008, approximately 73% of the population had access to basic sanitation services and the basic sanitation backlog was reduced to 27%. By 2010, the sanitation backlog is estimated to have been reduced to 21% from a high of 52% in 1994. This represents significant progress in the eradication of the basic sanitation infrastructure backlog. In addition, the government has also moved significantly closer to attaining its objective of eradicating the bucket system in formally established settlements. There is recognition, however, that the bucket system may continue to be used in informal settlements.

**Table 7.9: Access to services by households**

| YEAR | Water Supply from a safe source (%) | Sanitation at RDP std or higher (%) | Living in informal dwelling (%) | Solid fuels for cooking (%) | Solid fuels for heating (%) | Connection to the mains electricity (%) |
|---|---|---|---|---|---|---|
| **2009** | 92,4 | 72,2 | 13,4 | 15,7 | 19,8 | 82,6 |
| **2008** | 92,0 | 69,7 | 14,1 | 16,4 | 21,8 | 81,7 |
| **2007** | 92,7 | 70,1 | 15,0 | 14,4 | 19,0 | 81,8 |
| **2006** | 92,2 | 68,2 | 14,7 | 19,7 | 19,4 | 80,7 |
| **2005** | 91,7 | 66,7 | 15,7 | 15,8 | 19,6 | 80,8 |
| **2004** | 90,8 | 66,0 | 11,9 | 18,6 | 23,3 | 80,6 |
| **2003** | 89,8 | 64,0 | 12,8 | 19,5 | 23,6 | 78,4 |
| **2002** | 88,7 | 61,9 | 13,0 | 20,0 | 24,4 | 76,8 |

Source: *General Household Survey, 2002-2009*

The continued use of solid fuels such as coal, wood, wood pellets, grains, charcoal, and dung for the purposes of cooking and heating among the poor in South Africa is a marker of the inequalities that continue to persist sixteen years into democracy. It is likely that the use of solid fuels such as coal and charcoal for cooking and for heating for instance will continue, given that these are very low cost options for the poor.

Between 2002 and 2009 the percentage of households using solid fuels for cooking dropped from 20% to 15.7%. The percentage of households using solid fuels for cooking went down considerable between 2002 and 2007 (14.4%). In 2007 the percentage was at

its lowest only to resume an upward trend in 2008 to 16.4%. The marked drop in years up to 2007 can be attributed to the RDP electrification which increased new connections in those years. This shows the necessity of new connections in eradicating the use of solid fuels especially at household level. In terms of the percentage of households using solid fuels for heating, the percentage dropped from 24.4% in 2002 to 19.8% in 2009. There was a slight drop in the percentage of people using these fuels in the year 2003 (23.6%) and in 2004 (23.3%). The percentage further dropped to 19.6% in 2005, 19.4% in 2006 and 19% in 2007. In 2008 – a year marked by regular power cuts – the percentage went up to 21.8%, but there was a marked decline to 19.8% in 2009.

The energy sector is critical to South Africa's economy, contributing about 15% to the country's gross domestic product (GDP). Eskom, which is the national power supplier, has been playing an integral role in making sure that there are new electricity connections in the country. However, the rate of new electricity connections is slowing down considerably as it now has to be preceded by the establishment of bulk infrastructure. New infrastructure investments are especially crucial in areas which were only partially served or did not have service at all during the previous dispensation. The construction and improvement of energy infrastructure forms an important element of government's focus on infrastructure development, particularly in rural areas. In the long term, better planning of generation, distribution and maintenance is critical for the achievement of the 2014 goal of universal access to electricity.

Between 1991 and 2005, Eskom made over 3.2 million new connections and an additional 1.7 million connections were made by local government. Eskom and the Government also managed to reach the RDP target of 2.5 million connections by 2000. 6 324 schools were also connected by 2000. There has been an increase in electricity connections which translates into an increase in the proportion of households with access to electricity from 32% in 1996 to 70% by 2001. The percentage of households with connections to the electricity mains increased from 76.8% in 2002 to 82.6% in 2009. In the years 2004, 2005 and 2006 connections seem to have slowed down at, 80.6%, 80.8% and 80.7% respectively. The connections rose again in 2007 (81.8%), 2008 (81.7%) and in 2009 (82.6%). These connections will have to keep pace with population increases and will also have to take place together with infrastructure investments and maintenance. At the same time there is an urgent need to ensure the provision of free basic electricity to the indigent, many of whom continue to use solid fuels for cooking and heating, which has a negative impact on their health and quality of life.

The disintegration of the apartheid legacy of social engineering after 1994 has resulted in a steady process of urbanisation at a rate that has surpassed the capacity of the state to provide adequate housing. As a result the South African urban and peri-urban landscape is characterised by significant informal settlements. As at March 2009, the national housing programme is estimated to have delivered 2.8 million houses providing shelter to over 13.5 million people. Of the 2.8 million houses, over 1.2 million were built from 2004 after the launch of the Breaking New Ground Policy (BNG), a government programme that has the specific aim of eradicating informal dwellings. This is a notable milestone which is increasingly acknowledged as one of the most expansive in the post apartheid period and it has led to the delivery of more subsidized houses than in any other country in the world.

As noted in table 7.9 the percentage of people living in informal dwellings declined in 2004 to 11.9%, in all likelihood as a result of the BNG programme delivering housing - the percentage rose again in 2005 to 15.7% and dropped in 2006 to 14.5%. In 2007 the percentage resumed an upward trend to 15% but dropped to 14.1% in 2008 and further down in 2009 (13.4%). The data on informal dwelling has to be especially considered in the context of increasing number of households leading to increasing demand for private household and family space.

The response to informal settlements has largely been informed by national and provincial housing policies and programmes. Policies such the Upgrading of Informal Settlements Programme (Chapter 13 of the National Housing Code) (2004) and Breaking New Ground (2004) (also known as the Sustainable Human Settlements Programme) indicate a significant policy shift in respect of the approach to informal settlements and their upgrading.

Achieving the *Environmental Millennium Development Goals* (MDGs) holds the promise of protecting both the human and natural environment in South Africa. Investing in the MDGs and promoting the private sector are critical steps in charting a course towards environmental sustainability. While progress towards achieving environmental sustainability remains inadequate, but there are a number of clear opportunities that are available:

| | |
|---|---|
| ➢ **Developing effective policy frameworks** | Continuing to develop sound environmental and social policies and investments for achieving the MDGs and accelerating economic growth |
| ➢ **Facilitating economic growth and social development** | Fully engaging the private sector as the engine of innovation and growth, and tapping into its potential for providing incomes for rural and urban populations |
| ➢ **Strengthened public private partnerships** | Strengthening public private partnerships (PPPs), drawing on the private sector to complement government in designing, delivering and financing interventions to achieve the MDGs. |

The challenge of meeting the eight MDGs in Southern African countries is compounded by the grave long-term risk that climate change poses. Additional resources are required for adaptation since South Africa is particularly vulnerable to the effects of climate change and the growing risk of natural disasters. At least some of these additional resources will be needed to ensure that all projects and policies intended to achieve the MDGs and to strengthen the resilience of communities and the environment to the effects of natural disasters take climate change concerns into consideration. Threats posed by climate change and natural disasters further increase the need for regional cooperation and integration in areas of economic policy, infrastructure (e.g., power pools, transport and communications infrastructure), research, and the management of trans-boundary river basins. Key environmental challenges for South Africa include:

| | |
|---|---|
| ➢ **Reducing $CO_2$ emissions** | Reduce carbon dioxide emissions by 30% over next 5 five years |
| ➢ **Improving water utilisation** | Improved resource water utilisation |
| ➢ **Reducing pollution** | Rising pollution |
| ➢ **Mitigating soil degradation** | Soil degradation (including rapid desertification) |
| ➢ **Reducing deforestation** | Deforestation |
| ➢ **Protecting coastal and freshwater fisheries** | Destruction of coastal and freshwater fisheries |
| ➢ **Reducing water scarcity** | Rising water scarcity |
| ➢ **Protecting biodiversity** | Declining biodiversity |
| ➢ **Mitigating the impact of climate change** | Anthropogenic climate change that is projected to threaten agricultural productivity, spread vector borne diseases, and leads to a higher incidence of natural disasters |

Environmental degradation and the effects of climate change are therefore major development issues. The degradation of the environment threatens the very basis of sustained economic growth. Achieving environmental sustainability will require interventions at the national, regional, and international levels. Unfortunately, the concept of environmental sustainability does not provide clear operational guidance for choosing policies, strategies and outcome targets. A number of critical steps can, however, be taken:

| | |
|---|---|
| ➢ **Prioritising key environmental objectives** | Decide which environmental objectives South Africa want to achieve by 2015 and beyond; |
| ➢ **Stabilising greenhouse gas concentrations** | Urgent action is required to stabilize greenhouse gas concentration by reducing emissions and promoting carbon sequestration. |
| ➢ **Integrating environmental strategies into all sectoral policies** | South Africa needs to concentrate on integrating environmental strategies into all sectoral policies and more specifically on promoting direct investments in environmental management, |
| ➢ **Improving environmental monitoring to reduce environmental degradation** | South Africa needs to consider the effect on the environment when designing sector strategies, promoting regulatory and market reforms to reduce environmental degradation, and improving environmental monitoring. |

| | |
|---|---|
| ➢ **Aligning agricultural practices with environmental priorities** | These effects need to be factored into changes in agricultural practices, improved disease monitoring and reporting systems and investments in climate modelling and projections. |
| ➢ **Increasing investments in environmental management** | Direct investments in environmental management could include planting trees to combat deforestation, improving farming and land management practices to combat desertification, treating wastewater to reduce nutrient loads and ecosystems, and preserving critical ecosystems to protect biodiversity. |
| ➢ **Strengthening sectoral investments in issues related to environmental sustainability** | Targeted sectoral investments are instrumental to improving the environment, such as investing in modern cooking fuels to shift away from biomass thereby lowering ambient and indoor air pollution, and reducing pressure on fragile ecosystems; |
| ➢ **Improving access to water and sanitation** | Improved access to water and sanitation will lead to improved environmental quality |
| ➢ **Improving agricultural practices to ensure sustainability** | Improve agricultural practices and investments in soil health and sustainable water management for agriculture, as a means to stem soil degradation and biodiversity loss. |
| ➢ **Capacitating agricultural extension workers to promote sustainable practices** | Agricultural extension workers should be trained to promote environmentally friendly practices that can raise yields while minimizing the use of environmental resources. |
| ➢ **Strengthening integrated water resource management systems** | South Africa should implement strategies to meet the Johannesburg goals by initiating the design of strategies for integrated water resources management. |
| ➢ **Strengthening the regulatory environment** | Reforms to land tenure regimes and an improved regulatory environment to combat pollution are required to minimize the adverse impacts of sectoral policies on the environment. |
| ➢ **Strengthening environmental protection agencies** | South Africa will need to invest in strengthening the capacity of environmental protection agencies or equivalent government bodies, primarily through a substantial scaling up of human resources, equipment, and operating budgets. |

### 7.5 CONCLUSION

Two important messages from a review of goal 7 are as follows. South Africa does have significant environmental challenges, specifically its dependence on environmentally harmful coal based energy production. Second, it clear that there have been significant improvements in improving to basic services and this must be assessed in relation to Goal 1.

No strategy for environmental sustainability can be successful without better monitoring. Currently, however, monitoring systems for water flows and quality, air quality, deforestation, and other land degradation are inadequate. Sustained investments in strengthening environmental monitoring systems will thus be essential. An important mechanism for implementing national strategies is the set of multilateral environmental agreements and conventions, such as the Convention on Biological Diversity, the UN Convention to Combat Desertification, the RAMSAR Wetland Convention, and the UN Framework Convention on Climate Change. More funding and targeted technical support need to be made available to implement these agreements.

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**Recommendations**

- Use Arbor week to promote planting of indigenous trees that are not detrimental to our water resources
- pace of delivery of portable water especially to rural women
- Measure the levels of access to clean water by indigents and female-headed households and prioritise service delivery to these
- Increase the pace of delivery of sanitation facilities, particularly in rural areas and informal settlements
- To form partnerships for basic free services so as to ensure availability of water & sanitation in rural areas & informal settlements
- Deliver with speed access to clean, renewable energy in order to resolve the negative consequences on their health and that of their children
- Civil Society should establish formal link with the Department of Water Affairs and Environment

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# MDG 8: DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT

## 8.1 BACKGROUND

South Africa has chosen to customise its targets for Goal 8 in order to track the country's performance against a wide range of macroeconomic variables, such as income and investment, as well as to highlight some key microeconomic constraints to growth and development. As such, many of these indicators may not be regarded as explicit MDG targets and no specific targets have been set. Rather, they provide an economic context to South Africa's MDG report and help to explain South Africa's performance against Goal 1 through to Goal 7.

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Whereas the Goal 8 indicators do not come with specific numeric targets, it is possible to derive some broad objectives from other South African policy and planning documents and the country's progress against these particular indicators are discussed within this framework. In some instances, it has been necessary to provide additional data series in order to provide a more complete assessment of the health and robustness of the South African economy.

**Information base:** Goal 8 addresses trade and international relations and transfers, which in the main include trade, aid and global obligations.

## 8.2 FACTS AND FIGURES

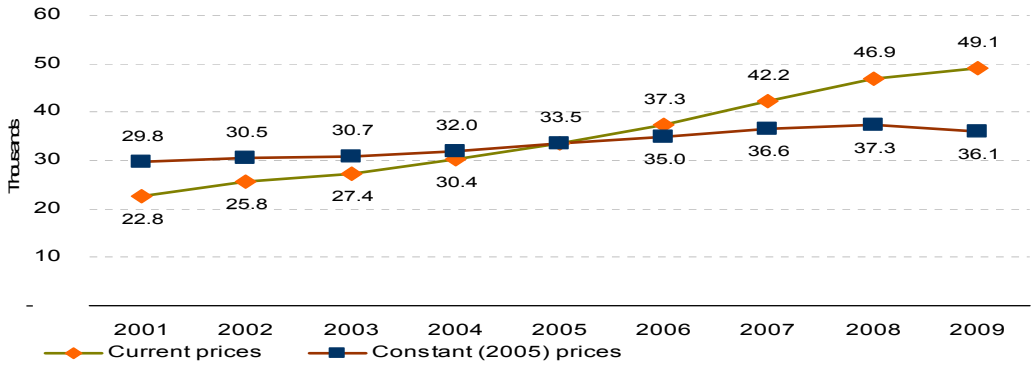
| GOAL 8: DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT | | | | | |
|---|---|---|---|---|---|
| **Goal and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achieva-bility** | **Indicator Type** |
| Gross domestic product per capita (current prices) | 22,758 *(2001)* | 49,134 *(2009)* | Income growth ≥ Inflation | **Likely** | **MDG** |
| Percentage investment share in GDP | 15.1 *(2001)* | 19.3 *(2009)* | ≈25 | **Likely** | **MDG** |
| Debt to GNI ratio | 44.4 *(2000)* | 28.4 *(2008)* | <44.4 | **Achieved** | **MDG** |
| Labour productivity | 100.0 *(2003)* | 111.6 *(2008)* | Labour produc-tivity > Inflation | **Possible** | **MDG** |
| Current account balance as percentage of GDP | - 0.3 *(2001)* | 4.0 *(2009)* | No target | **Not applicable** | **Domestic** |
| Official development assistance received as percentage of GNI | 0.2 *(2005)* | 0.3 *(2009)* | No target | **Not applicable** | **Domestic** |
| Official development assistance given as percentage of GNI | No data | No data | 0.7 | **Not applicable** | **Domestic** |
| Gross saving as percentage of gross disposable income (GDI) | 15.9 *(2001)* | 15.8 *(2009)* | >0 | **Likely** | **MDG** |
| Inflation rate (CPI) | 5.8 *(2001)* | 7.1 *(2009)* | 3 - 6 | **Possible** | **Domestic** |
| Gross domestic expenditure on R&D as percentage of GDP | 0.6 *(2002)* | 0.9 *(2007)* | 1.5% by 2014 | **Possible** | **Domestic** |
| Foreign direct investment net inflows and net outflows as percentage of GDP | 8.4 *(2001)* | 1.4 *(2009)* | >0 | **Possible** | **MDG** |
| Share of imports from developing countries (DC) and least developed countries (LDC) | 1.0 (LDC)<br>32.1(DC) | 4.3 (LDC)<br>46.9 (DC) | No target | **Not applicable** | **MDG** |

| | | | | | |
|---|---|---|---|---|---|
| | *(2002)* | *(2009)* | | | |
| Fixed telephone lines per 100 population | 11.1 *(2001)* | 9.7 *(2007)* | ≥50 | **Unlikely** | **MDG** |
| Cellular telephone subscribers per 100 population | 18.5 *(2001)* | 85.9 *(2007)* | | **Achieved** | **MDG** |
| Internet access per 100 population | 7.2 *(2007)* | 8.9 *(2009)* | ≥ 50 | **Possible** | **MDG** |

### 8.3 INSIGHTS

**Levels and trends of growth and GDP and GDP per capita:** Figure 8.1 shows the trend in GDP per capita in South Africa over the past nine years. The indicator of GDP per capita income based on constant 2005 prices rises at a much slower rate than the nominal indicator, and in fact declined over the last year. Still, over the period 2001 to 2009, South Africans have experienced a 20% increase in real incomes. This is a reflection of the relatively strong and extended growth in GDP recorded by South Africa up until the global economic crisis in 2008. With the economy now on the road to recovery, total GDP and per capita income is likely to rise further over the next few years, though at a more modest pace.

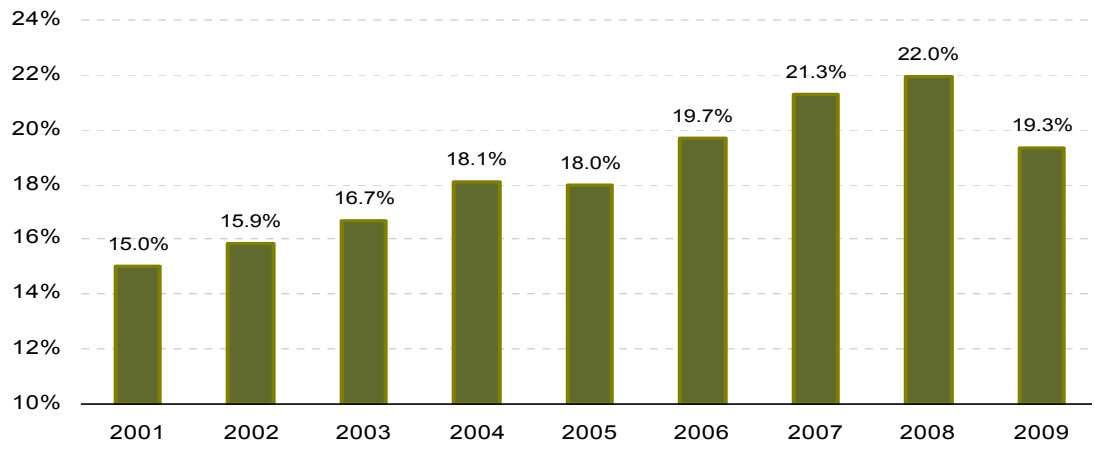
**Figure 8.1: Gross Domestic Product per capita (Rands)**




Source: *GDP Release, Population mid-year estimates*

**Levels and trends in investment:** as a Percentage investment share in GDP reflects the share of investment in GDP for South Africa, given by Gross Capital Formation (i.e. change in capital stock). For South Africa this indicator has shown a positive trend, increasing from 15% of GDP in 2001 to 22% in 2008, before declining in 2009 to 19%, a likely result of the Global Financial Crisis. South Africa's share of investment in GDP is lower than high-performing developing countries such as China (44%) and India (40%) but similar to that of Egypt (22%), Turkey (22%) and Brazil (19%)

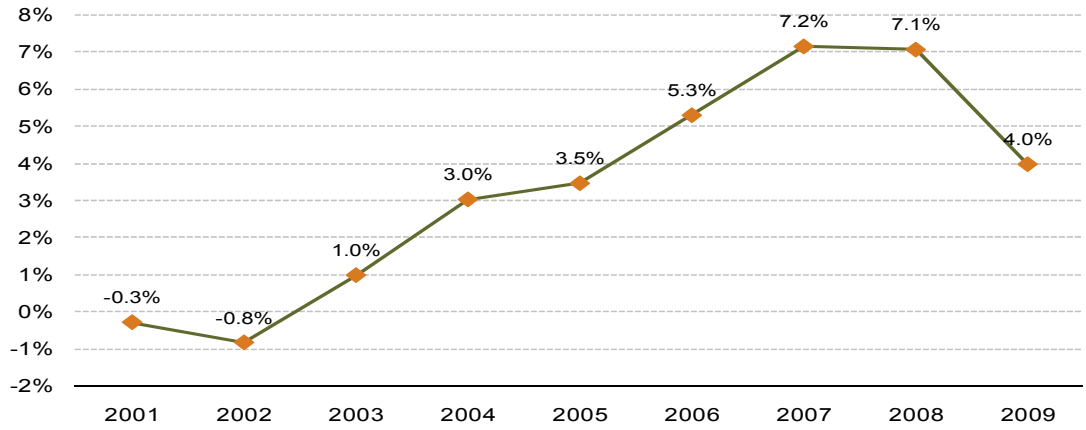
**Figure 8.2: Investment share in GDP (Percentage)**




Source: *SARB Quarterly Bulletin, GDP release*

Using foreign investment as a percentage of GDP indicator, it appears that foreign investment in South Africa has increased over the last decade from -1% in 2002 to 7% in 2008, before declining in 2009 to 4%, as a result of the Global Financial Crisis. While a useful measure, this indicator includes changes in official reserves as well as net portfolio flows to South Africa, both of which are highly liquid and can fluctuate widely as global risk aversion increases. Moreover, portfolio flows do not necessarily result in direct investment in the South African economy

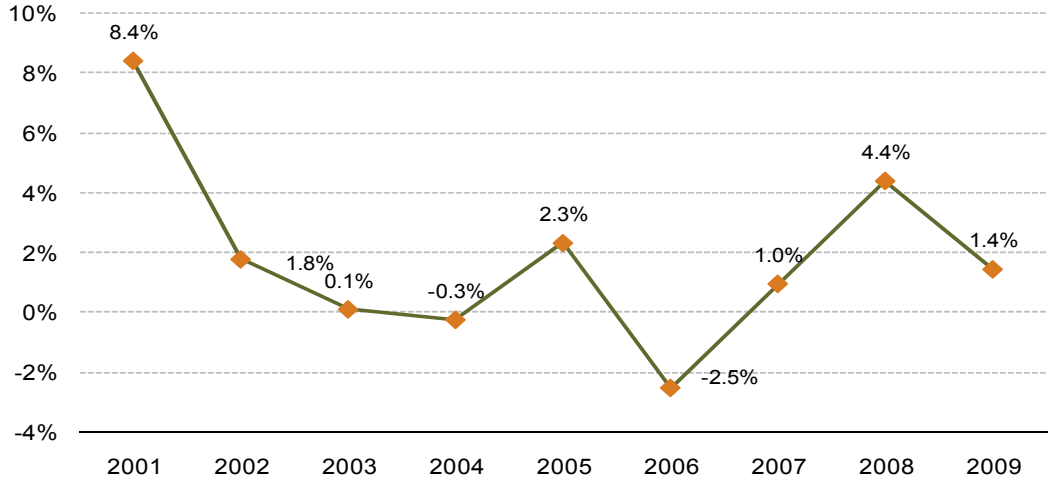
**Figure 8.3: Foreign investment as a percentage of GDP**




Source: *SARB Quarterly Bulletin, GDP release*

Rather than focus on total inward investment, it may be useful to strip out and target net foreign direct investment (FDI) as a percentage of GDP, as shown in figure 8.4. This second indicator provides a completely different picture and clearly illustrates the strong influence of short term investment in overall investment flows. Looking specifically at FDI, foreign investment has in fact declined substantially from 8% in 2001 to just under 2% in 2009, with net outflows recorded in some years.

**Figure 8.4: Foreign direct investment (FDI) as a percentage of GDP**




Source: *South African Reserve Bank Quarterly Bulletin*

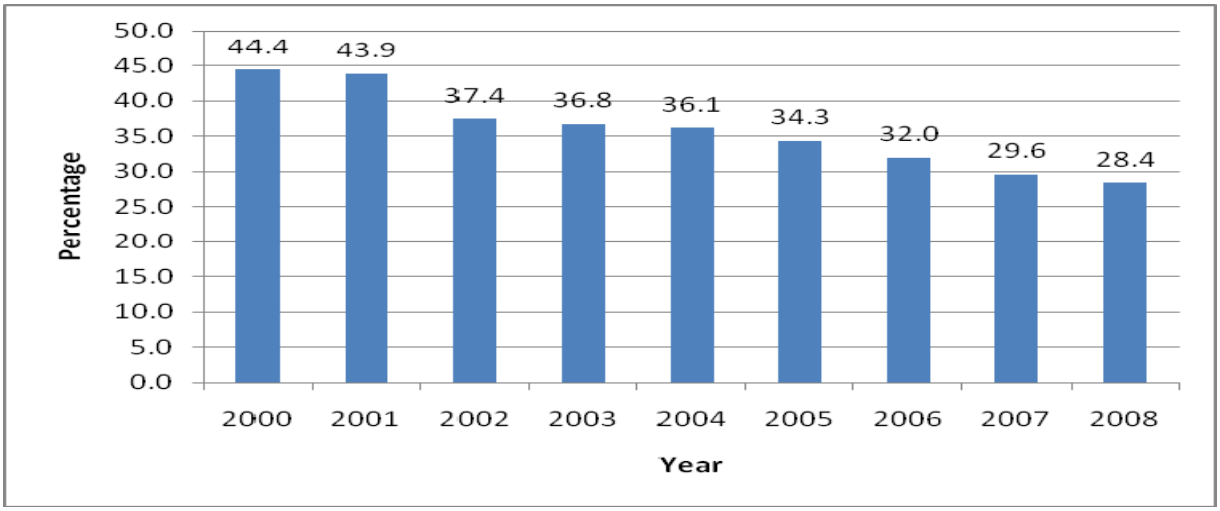
The ability to attract foreign investment is important given South Africa's savings rate, which is low compared to some other developing countries, especially those of Asia. South Africa's gross savings as a percentage of gross domestic product (GDP) was 14.8% in 2007, compared to countries such as China (54.1%), India (37.8%), Thailand (32%) and Mexico (25.5%). Gross savings, as a percentage of gross disposable income (GDI), indicates that South Africa's rate of saving has declined steadily for most of the last decade, before improving slightly in 2008 and 2009.

**Figure 8.5: Gross savings as a percentage of GDI**

Source: *SARB Quarterly Bulletin, GDP release*

**Levels and trends in savings:** While South Africa has struggled to maintain a high savings rate, the Government has succeeded in reducing public debt (as a percentage of Gross National Income), shown by indicator 8.19. Total gross government debt as a percentage of GNI has fallen by a significant 15% between 2000 and 2008, to just over 28% of GNI in 2009. This has largely been a result of prudent fiscal policies aimed at producing a balanced budget in boom years.

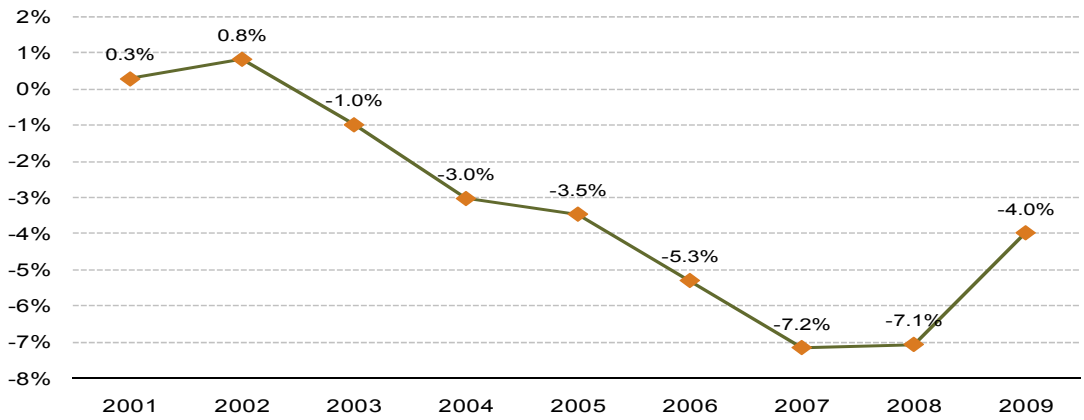
**Figure 8.6: Debt as a percentage of GNI**




Source: *South African Reserve Bank Quarterly Bulletin*

**Balance of payments:** South Africa's current account balance has deteriorated significantly between 2003 and 2008, recovering slightly in 2009 to -4% of GDP. It should be noted that the current account balance can be interchangeably seen as the difference between South Africa's exports and imports of goods and services, or as the difference between South African gross saving and investment (or gross capital formation). As we have seen above, South Africa's rate of investment has increased over the last decade, while the rate of savings has declined. It is thus not surprising that South Africa's current account balance has deteriorated over the last decade – though it is disconcerting that it is largely financed by short-term capital inflows.

**Figure 8.7: Current account balance as a percentage of GDP**




Source: *South African Reserve Bank Quarterly Bulletin*

**Levels and trends of trade:** One of the main targets of Goal 8 is the opening up of trade, especially to LDCs and developing countries. This is reflected in

Figure 8.8, which shows South Africa's share of imports from these two country groupings. On first inspection it is clear that South Africa's imports from both LDCs and developing countries have increased, with the LDC share of imports rising from less than 1% in 2002 to just under 6% in 2008 (before falling to 4% in 2009), while imports from developing countries increased to a high of 47% in 2009.

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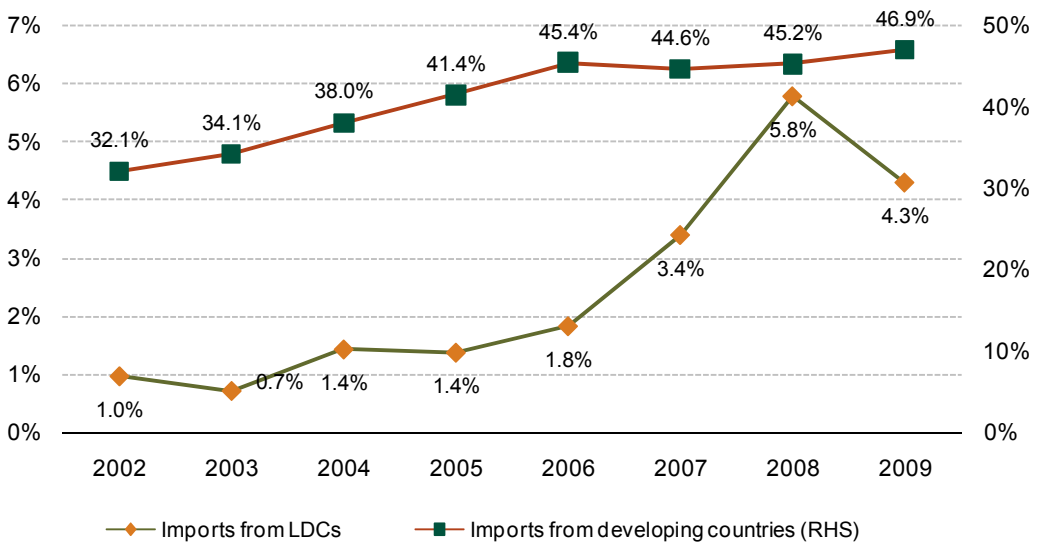
**Figure 8.8: Share of imports from LDCs and Developing countries**




Source: *Department of Trade and Industry (COMTRADE database)*

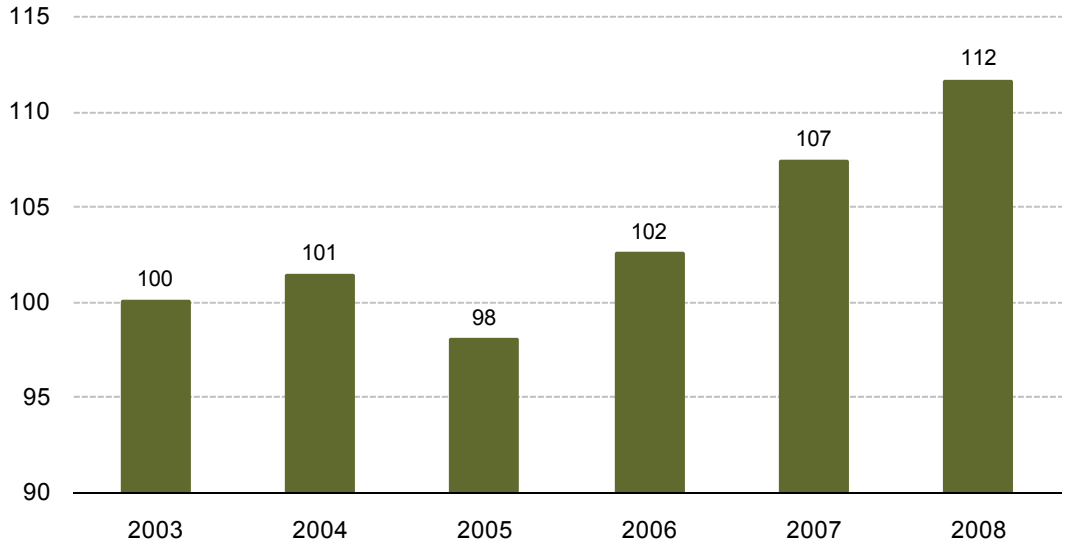
**Price levels and trends:** In South Africa, changes in interest rates generally have an impact on inflation only 18 to 24 months later. Thus, despite significant increases in interest rates in the early 2000s, the specified measure of inflation was brought down to within the target range for the first time in September 2003. Headline CPI inflation (which has more recently been adopted as the official measure for targeting purposes, in preference to CPIX), fell to a low of 0.1 per cent in early 2004, and remained within the target band until March 2007. The rapid rise in inflation from a post-1945 record low in 2004 to a peak of 13.7% in mid-2008 was driven by a number of largely external factors, most notably rising food, oil and other commodity prices over a period of strong global demand and economic growth. The substantial depreciation of the rand from early 2006 to January 2009 contributed to a further increase in imported prices. Conversely, the turnaround in inflation over the last year and a half can be attributed to an unwinding of these same factors – with commodity prices falling and the rand strengthening dramatically over this period.

**Figure 8.9: Inflation rate – Consumer Price Index (%)**

Source: *Consumer Price Index release, Stats SA*

**Labour productivity:** The strong rise in labour productivity over the last three years is another symptom of South Africa's employment problem. Whereas output increased strongly from 2005 to 2008, at an average real rate of around 5%, employment increased at half this rate over this period. This is largely because traditionally labour intensive sectors, such as mining, light manufacturing and agriculture, have shed labour in favour of machinery for most of the last decade, with output and jobs growing fastest in more capital and skills intensive sectors, mostly in the services industry (finance, construction and community services).

**Figure 8.10: Labour productivity (2003(Base year) = 100)**




Source: *Labour Force Survey, Quarterly Labour Force Survey and Gross Domestic Product release*

**Innovation investments:** Recognising the key role that investment in science, research and technology plays in ensuring a well-developed, competitive economy, the Government has targeted a gradual increase in South Africa's national investment in R&D from 0.6% of GDP in 1997 to 1% of GDP by 2008 and 1.5% by 2014. Gross Expenditure Research and Development as a percentage of GDP indicator reflects on this target, showing the gross expenditure on R&D (GERD) as a percentage of GDP for South Africa. By 2007 South Africa had grown its GERD from R4.1 billion in 1997 to R18.6 billion, which more than doubled GERD in real terms. GERD as a percentage of GDP[2] reached 0.93% in 2006 and then 0.92 in 2007. The slight decline in this ratio is explained by a higher increase in nominal GDP compared to the increase in nominal GERD.

[2] GERD as a percentage of GDP is based on the 2005 revised GDP estimates produced by Stats SA

**Figure 8.11: Gross Expenditure Research and Development as a percentage of GDP**

Source: Research and Development Survey, HSRC

**Global partnerships:** Official Development Assistance (ODA) is not a significant source of funding for South Africa, as illustrated in Figure 8.12, and net ODA in-flows have remained at below 0.3% of Gross National Income between 2005 and 2009. In terms of South Africa's government budget, net ODA accounted for approximately 0.9% of national budget expenditure in 2008. It is however important to note that the South African indicator of net ODA reflects donor funds received by the National Treasury only, and excludes ODA received by other departments and tiers of government and the civil society sector (NGOs / CSOs).

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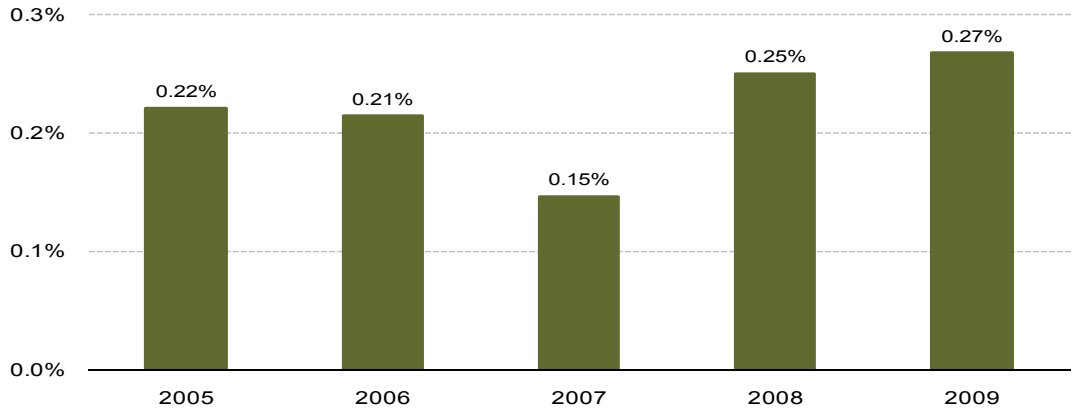
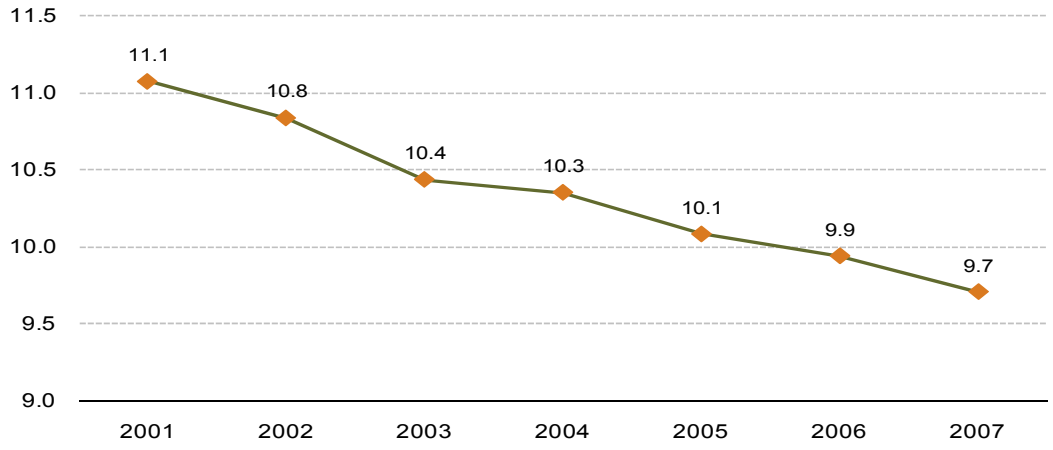
**Figure 8.12: Overseas Development Aid received as a percentage of Gross National Income**




Source: *National Treasury*

**Communications:** Access to fixed line telephony has been declining over the past several years, rather than increasing. On a per capita basis, the number of fixed telephone lines has declined 12% from 2001 to 2007, as shown in Figure 8.13. To some extent this reflects a switch by consumers from fixed line to mobile telephony. Cell phones not only have the advantage of being mobile, but were also quicker to implement prepaid billing, which is more compatible with the earnings pattern of low income consumers. However, the decrease in the number of fixed lines does not only reflect pull factors to mobile telephony, but also problems with the fixed line market.

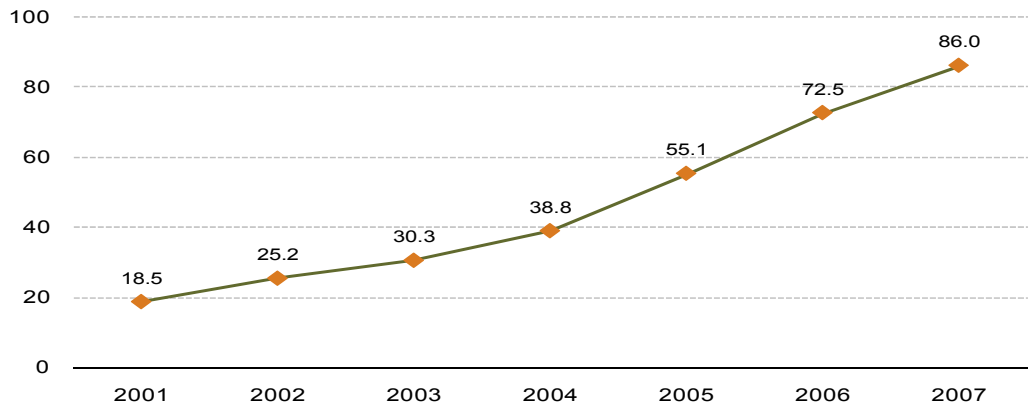
**Figure 8.13: Fixed telephone lines per 100 population**




Source: *Development Bank of Southern Africa 2008 Infrastructure Barometer*

Although the performance of fixed line telephony penetration rates has been poor, growth rates in mobile telephony have been very strong, which has probably contributed to a net improvement in access to telephony over the period. As shown in Figure 8.14, over the period 2001 to 2007, per capita cellular subscriptions increased 364%. Mobile ICT methodologies are also commonly used to provide other forms of ICT services. ITU statistics suggest that in 2008, approximately 6 out of every 7 South African broadband subscriptions was via mobile rather than fixed technologies.

**Figure 8.14: Cellular subscribers per 100 population**




Source: *Development Bank of Southern Africa 2008 Infrastructure Barometer*

Progress in increasing access to the internet has been less successful than progress in access to mobile telephony. As shown in

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**Figure 8.15: Proportion of homes with internet f**

**acilities (per 100 population, 2007)**

**Figure 8.16: Proportion of households with internet connection (per 100 population, 2009)**

8.15 and 8.16, the proportion of homes/households with access to the internet has risen from only 7.2% in 2007 to 11.1% in 2009. The highest levels of access are clustered in areas of high per capita GDP, in particular the Western Cape and Gauteng. Homes/households in these provinces are around 8 times more likely to have internet access than those in Limpopo, the province with the lowest internet access levels.

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**Figure 8.15: Proportion of homes with internet f**

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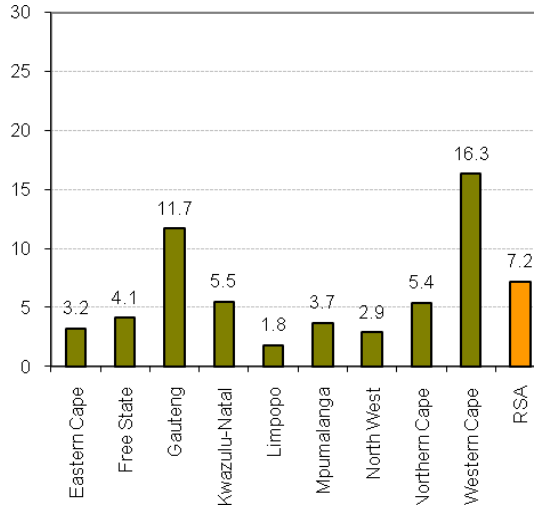
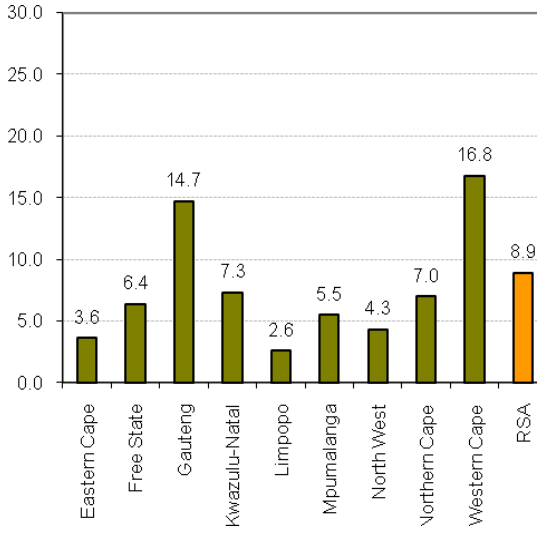



**Figure 8.16: Proportion of households with internet connection (per 100 population, 2009)**




Source: *Community Survey - 2007 and General Household Survey – 2009*

## 8.4 DISCUSSION

In 2004, the South African Government undertook to halve poverty and unemployment by 2014, in its Accelerated and Shared Growth Initiative (Asgisa). To meet its Asgisa targets, the Government estimated that the level of economic growth would need to average 4.5% or higher during the period 2005 to 2009, and 6% or higher during the period 2010 through 2014. So far, on a real basis the economy has grown at an average annual rate of 3.2% between 2005 and 2009, and thus Asgisa growth targets have not been met. The Asgisa document furthermore identified the following six binding constraints to the achievement of these overriding economic goals:

- The volatility and level of the currency, which was felt to deter investors and, during periods of systematic over-valuation, result in sustained current account deficits;
- An inadequate national logistics system. The limited capacity, lack of competitiveness and high prices of the transport sector were felt to be of concern given South Africa's status as a long-haul destination;
- Shortages of skilled labour;
- A highly concentrated domestic economy with little evidence of competition;
- A high regulatory burden on small and medium businesses, constraining their ability to act as an engine of growth; and
- Deficiencies in state organisation, capacity and leadership, particularly in economic services and policy.

Progress in overcoming these binding constraints has been mixed. In the area of competition policy, for example, great strides have been made in establishing the Competition Commission and Tribunal as effective economic regulatory bodies. However, the volatility of the domestic currency remains a concern and the costs of infrastructure, skills and doing business in South Africa remain relatively high. Such factors continue to hold back economic growth and employment in South Africa.

The selected indicators do not focus explicitly on Asgisa constraints and targets. They do, however, share a common purpose which is to raise income, investment, trade, savings, efficiency and employment in South Africa. South Africa's Goal 8 targets can be contextualised within the framework of these over-riding national objectives:

| | |
|---|---|
| ***Growth and employment*** | |
| ➢ **Increasing GDP per capita** | As regards GDP per capita, South Africans have experienced a 20% increase in real incomes from 2001 to 2009, despite a slight fall in per capita GDP between 2008 and 2009. This is a reflection of the relatively strong and extended growth in GDP recorded by South Africa up until the global economy |
| ➢ **Reducing income inequality** | The gap between the rich and the poor has increased over this period, and according to some measures, South Africa is now the most consistently unequal society in the world |
| ➢ **Improving skills and generating employment** | More needs to be done to raise the incomes of the poor in South Africa – and perhaps the only sustainable way to achieve this is through a massive and concerted effort to improve skills and generate employment |
| ➢ **Improving labour absorption rates** | Although the labour absorption rate improved significantly between 1994 and 1996, it has since turned downwards and the country has lost more than 1 million jobs over the last few years. The apparent rise in labour productivity over this period is in fact yet another indication of a shift away from labour to more capital intensive production in the South African economy |
| ***Investment and savings*** | |
| ➢ **Creating an enabling environment for economic growth** | The Government has a critical role to play in creating an economic environment that is conducive for more rapid and labour intensive growth. This can be done directly – by investing in critical infrastructure needed for development, such as roads, ports and electricity |
| ➢ **Increasing foreign investment** | Data shows that the public sector has already played a significant role in raising investment from 15% of GDP in 2001 to 22% in 2008. It can also make an indirect contribution – by making it easier and more attractive for foreign and local firms to invest. Here, the data reveals that South Africa has performed poorly, with foreign investment falling to 4% of GDP and most of this explained by short-term portfolio flows |

| | |
|---|---|
| ➢ **Increasing South Africa's gross savings** | South Africa's gross savings as a percentage of gross domestic product (GDP) has also declined, and in 2007, was far lower than other developing countries, especially those in Asia |
| ➢ **Reducing government and household debt** | The government has succeeded in reducing government debt from 43% of gross national income in 2000 to 28% in 2009. This has largely been a result of prudent government policies during an expansionary phase of the economy. National debt, however, continued to rise over this period as households accumulated higher amounts of debt |
| ***Trade*** | |
| ➢ **Improving the current account balance** | Given South Africa's low savings rate and high levels of infrastructure expenditure, it is not surprising that the current account has deteriorated over the last decade |
| ➢ **Reducing reliance on imports** | Imports have consistently outstripped exports over this period |
| ➢ **Increasing trade with LDCs and developing countries** | Trade with LDCs and developing countries have growing particularly fast, but imports from LDCs remain largely confined to primary goods (most notably crude petroleum), while China accounts for most of the increase in imports from developing countries |
| ***Inflation*** | |
| ➢ **Ensuring economic stability** | Inflation in South Africa is one of the few indicators with a fixed target and a dedicated mandate. To this end the Reserve Bank pursues a target range of 3% to 6% in support of economic stability and to guide public expectations and decisions around prices |
| ➢ **Reducing the inflation rate** | South Africa has seen relatively high inflation between 2004 and 2008, largely as a result of rising fuel and food costs and a significant depreciation of the currency. All of these factors have reversed over the last few years and inflation has recently fallen to within the Reserve Bank's target range |
| ***Research and development and ODA*** | |
| ➢ **Increasing investment in research and development** | Research and development (R&D) investment is a key component of any national policy that seeks to raise economic efficiency, innovation and growth |
| ➢ **Increasing gross expenditure on R&D** | Gross expenditure on R&D (GERD) as a percentage of GDP has increased in South Africa, from less than 0.7% in 2002 to just over 0.9% in 2007 |
| ➢ **Improving human resources** | While still well below many developed countries, the South African government has set ambitious targets for future investment in R&D and improvements in human resources |

| | |
|---|---|
| ➢ **Reducing reliance on ODA** | ODA remains an insignificant source of funding for South Africa |
| ***Information & communications*** | |
| ➢ **Providing reliable and affordable access to ICT** | While South Africa has performed well in terms of overall R&D spend, the country lags behind the rest of the world in terms of providing affordable and reliable access to telecommunications and the internet |
| ➢ **Improving levels of internet usage** | While mobile usage has increased dramatically, access to fixed line telephony has declined over the last few years while internet usage remains extremely low |
| ➢ **Ensuring the provision of broadband infrastructure** | Given recent developments in the provisioning of broadband infrastructure, and continued improvements in regulation and legislation, it is likely that future improvements in this area will be more significant |

## 8.5 CONCLUSION

In relation to strengthening global partnerships, South Africa has rapidly opened up trade, especially to LDCs and developing countries. Her trade and in particular imports from both LDCs and developing countries have increased, with the LDC share of imports rising from less than 1% in 2002 to just under 6% in 2008 (before falling to 4% in 2009), while imports from developing countries increased to a high of 47% in 2009.

South Africa is seen as a country characterised by a remarkably stable macro-economic framework. Its major challenge is to increase its economic growth potential. Failure to do so, will limit its ability to address many of the goals set out by the MDG process, major amongst them, the creation of jobs, drastic improvements in the quality of especially technical education, and reversal of the necessary to date, but rapidly ballooning social assistance programme.

Her growth experience can be characterised as modest, at least when compared to countries such as Brazil, India and China. Several indicators are instructive. For example, percentage investment share in GDP has shown a positive trend, increasing from 15% of GDP in 2001 to 22% in 2008, before declining in 2009 to 19%, a likely result of the global financial crisis. South Africa's share of investment in GDP is lower than high-performing developing countries such as China (44%) and India (40%) but similar to that of Egypt (22%), Turkey (22%) and Brazil (19%).

South Africa, has struggled to attract foreign direct investment (FDI). FDI in fact declined substantially from 8% in 2001 to just under 1.5% in 2009, with net outflows recorded in some years. .The ability to attract foreign investment is important given South Africa's savings rate, which is low compared to some other developing countries, especially those of Asia. South Africa's gross savings as a percentage of gross domestic product (GDP) was 14.8% in 2007, compared to countries such as China (54.1%), India (37.8%), Thailand (32%) and Mexico (25.5%). Gross savings, as a percentage of gross disposable income (GDI), indicates that South Africa's rate of saving has declined steadily for most of the last decade, before improving slightly in 2008 and 2009.

One of the key structural constraints in the South African economy is the current account balance (difference between exports and imports of goods and services). South Africa's current account balance has deteriorated significantly between 2003 and 2008, recovering slightly in 2009 to -4% of GDP.

South Africa has made great progress in telecommunications for the masses. The percentage of South Africans with access to a cell phone is rapidly approaching 9 out of 10.

**Recommendations**

- Government needs to have a programme for funding NGOs

- Ensure that governments, NGOs, and the private sector work together in partnership in order to ensure the complete implementation of the MDGs

- Civil Society and Government should engage international partnerships to support the development and implementation of gender-responsive rights-based policies and programmes, including accessing technical assistance to improve gender-responsive and sex-disaggregated data.

- Create means and strategies for strengthening Partnership between Government and Civil Society

- Identify the essential drugs required in the South African context. Then develop the necessary partnership with pharmaceutical manufacturers on making them readily available in the country at an affordable price.

- Reporting on ODA must include development aid received by all stakeholders, including CSOs

- The state to have an oversight function (not regulatory) on all funds for development assistance entering the country

# REFERENCES

## MDG 1


Aliber M, 2002, Poverty-eradication and Sustainable Development, HSRC press

Statistics South Africa and UNDP, (undated) Concept Paper for the MDG 2010 Final draft

Karen Peters, 2009, 'Are the MDGs relevant to South Africa? ', National Welfare Forum, 2009, http://www.ngopulse.org/article/are-mdgs-relevant-south-africans (accessed 28/06/2010)

Department of Health, Annual Report 2007, http://www.doh.gov.za/docs/report07-f.html, (accessed 28/06/2010)

District Health Information System in the Department of Health, 2001-2010

Statistics South Africa, Labour Force Survey, 2001-2009

Statistics South Africa, Quarterly Labour Force Survey, 2009-2010

Statistics South Africa, Income and Expenditure Survey, 2000 and 2005

Steyn, N. 2000, A South African perspective on pre-school nutrition, South African journal of clinical nutrition, vol 13, No. 1

UN Development Group, Addendum to 2nd Guidance Note on Country Reporting on the Millennium Development Goals, November 2009.


## MDG 2


Bracey, G. (2009). The Bracey Report on the Condition of Public Education. Boulder and Tempe: Education and the Public Interest Center & Education Policy Research Unit. Retrieved [07/28/2010] from http://epicpolicy.org/publication/Bracey-Report

Centre for Evaluation and Assessment, 2006, 'PIRLS Of Wisdom: The What, Where, When And How Of The International Reading Literacy Study In South Africa ', Pretoria. p.8

Department of Education: Education Statistics in South Africa, School Realities 2009, www.education.gov.za

Fleisch B, Shindler J, Perry H, 2010, 'Who is out of school? Evidence from the Community Survey 2007, South Africa ', International Journal of Educational Development (2010), doi:10.1016/j.ijedudev.2010.05.002

Ina V.S. Mullis Michael O. Martin Ann M. Kennedy Pierre Foy, 2007, PIRLS 2006, International report, IEA TIMMS and PIRLS International Study Centre, Boston College

Motshekga Angie, MP, Minister of Basic Education: Budget Vote Speech, 23 March 2010, http://www.education.gov.za/dynamic, accessed on 12/07/2010.

Nicola Branson and David Lam, Education: Analysis of the NIDS Wave 1 Dataset, Discussion paper #3. Sourced on 28 /07/2010 at http://www.nids.uct.ac.za

Peters, K. National Welfare Forum, 2009.

Statistics South Africa, Community Survey 2007

Statistics South Africa, Community Survey, 2007: Interactive data, www.statssa.gov.za

Statistics South Africa, General Household Survey, 2002–2009

Statistics South Africa, General Household Survey 2007–2009

UN Development Group, Addendum to 2nd Guidance Note on Country Reporting on the Millennium Development Goals, November 2009

UNDP, 'UNDP Supports the MDG process in South Africa ' Pretoria, March 15 2010, www.undp.org.za/index.php/mdgs-news

Taylor Stephen and Yu Derek, 'Socio economic status and educational achievement, does education provide a stepping stone out of poverty in South Africa? ' in Jan Hofmeyr ed, Recession and Recovery, 2009 Transformation Audit, Institute for Justice and Reconciliation, Cape Town, p.66-76

## MDG 3

Budlender D. 2002. *Women and Men in South Africa: Five years on*. Statistics South Africa: Pretoria.

Budlender D, Chobokoane N & Mpetsheni M. 2001. *A Survey of Time Use: How South African women and men spend their time*. Statistics South Africa: Pretoria.

Central Statistical Service. 1996. *October household survey 1995*. Statistical release P0317. Pretoria.

Centre for Applied Legal Studies. *African Gender and Development Index: South African report; 2003-2004*. Draft prepared for United Nations Economic Commission for Africa. University of Witwatersrand: Johannesburg.

Department of Education. June 2003. *Education Statistics in South Africa at a Glance in 2001*. Pretoria.

Department of National Education. 1993. *Education in the RSA 1990*. NATED 02-215 (93/01). Pretoria.

Department of National Education. 1994. *Education in the RSA 1991*. NATED 02-215 (94/04). Pretoria.

Department of Education. *Annual Report 1998*. Pretoria, DOE, 1998

Department of Education. 2001. *Education statistics at a glance 1999*. Pretoria.

Department of Education. 2002. *Education statistics at a glance 2000*. Pretoria.

Department of Education. 2003. *Education statistics at a glance 2001*. Pretoria.

Department of Education. 2008. *Education statistics at a glance 2003-2007.* Pretoria

Govender P, Budlender D & Madlala N. 1995. *Beijing Conference Report 1995*. Office of the President: Pretoria.

Grown K, Gupta GR & Kes A. 2005. *Taking Action: Achieving gender equality and empowering women*. UN Millennium Project Task Force on Educaiton and Gender Equality. Earthscan: London & Sterling.

Kabeer N. 2003. Gender Mainstreaming in Poverty Eradication and the Millennium Development Goals: A handbook for policy-makers and other stakeholders. Commonwealth Secretariat, International Development Research Centre & Canadian International Development Agency: London, Hull & Ottawa.

Ministerial Committee on Learner Retention in the South African Schooling System. 2007. Progress report to the Minister of Education Mrs GNM Pandor, MP.

Morna CL, Rama K & Mtonga L. 2009. Gender in the 2009 South African Elections: Gender Links: Johannesburg.

Office on the Status of Women. 2004. *Celebrating 10 Years of Freedom: Women Building a Better South Africa and a Better World: A review of South Africa's progress in achieving its commitments to the United Nation's Beijing Platform of Action: A discussion document*. The Presidency: Pretoria.

Parliament of the Republic of South Africa. 4 April 2009: Special Report: Full List of Members of the 4th Democratic Parliament. In Session 9(4).

Policy Coordination and Advisory Services. October 2003. *Towards a Ten Year Review: Synthesis Report on Implementation of Government Programmes Discussion Document*. Office of the President: Pretoria.

Republic of South Africa. 1998. *Convention for the Elimination of All Forms of Discrimination Against Women: First South African report*. Prepared for the nineteenth session of the Committee on the Elimination of All Forms of Discrimination Against Women 22 June-10 July 1998. Pretoria.

Research Institute for Education Planning. 1993. *Education and Manpower Development*, 1992, no. 13. University of the Orange Free State: Bloemfontein.

Research Institute for Education Planning. 1994. *Education and Manpower Development*, 1993, no. 14. University of the Orange Free State: Bloemfontein.

Research Institute for Education Planning. 1995. *Education and Manpower Development*, 1994, no. 15. University of the Orange Free State: Bloemfontein.

Research Institute for Education Planning. 1996. *Education and Manpower Development*, 1995, no. 16. University of the Orange Free State: Bloemfontein.

Research Institute for Education Planning. 1997. *Education and Manpower Development*, 1996, no. 17. University of the Orange Free State: Bloemfontein.

Research Institute for Education Planning. 1998. *Education and Manpower Development*, 1997, no. 18. University of the Orange Free State: Bloemfontein.

Shepherd Debra. 2008. Post-Apartheid Trends in Gender Discrimination in South Africa: Analysis through Decomposition Techniques. Stellenbosch Economic Working Paper No 6. University of Stellenbosch: Stellenbosch.

Statistics South Africa. 1999. *October household survey 1997*. Statistical release P0317. Pretoria.

Statistics South Africa. 2000a. *October household survey 1999*. Statistical release P0317. Pretoria.

Statistics South Africa. 2000b. *Discussion paper 1: Comparative labour statistics. Labour force survey: first round pilot*. Pretoria.

Statistics South Africa. 2002. *Labour force survey February 2002*. Statistical release P0210. Pretoria.

Statistics South Africa. 2004. *Labour force survey March 2004*. Statistical release P0210. Pretoria.

Statistics South Africa. 2005. *Labour force survey March 2005*. Statistical release P0210. Pretoria.

Statistics South Africa. 2008. Quarterly *Labour force survey 2008*. Statistical release P0317. Pretoria.

Statistics South Africa. 2009. *General household survey 2009*. Statistical release P0317. Pretoria.

Statistics South Africa. 2010. Quarterly *Labour force survey March 2010*. Statistical release P0317. Pretoria.

Steinberg M, Johnson S, Schierhout G, Ndegwa D, Hall K, Russell B & Morgan J. October 2002. *Hitting Home: How households cope with the Impact of the HIV/AIDS epidemic: A survey of household affected by HIV/AIDS in South Africa*. Henry J Kaiser Family Foundation & Health Systems Trust: Durban

Wilson Felicia. 2009. Gender Based Violence in South African Schools. Direction in Education Planning: Symposium to honour the work of Francoise Caillods. International Institute for Educational Planning. United Nations Educational Scientific and Cultural Organisation.

Wolpe A, Quinlan O & Martinez L. October 1997. Gender Equity in Education: A report by the Gender Equity Task Team. Department of Education: Pretoria.

United Nations Educational, Scientific and Cultural Organisation. 2003. *Gender and Education for All: The Leap to Equality. Summary Report*. EFA Global Monitoring Report 2003/4. Paris.

## MDG 4

Beltman JJ, Stekelenburg J & van Roosemalen J. 2010. *Crisis in Human Resources for Health: Millennium Development Goals for Maternal and Child Health Threatened*. Nederlands Tijdschrift Voor Geneeskunde, 154(5):A1159.

Black RE. 1984. Diarrheal diseases and child morbidity and mortality. *Population and Development Review*, *Supplement to Vol. 10*, pp. 141-161.

Bryce J, Gilroy K, Jones G, Hazel E, Black RE & Victora CG. 2010. *The Accelerated Child Survival and Development Programme in West Africa: a Retrospective Evaluation*. Lancet. Feb 13;375(9714):572-82.

Department of Health, Medical Research Council & ORC Macro. 1999. *South Africa Demographic and Health Survey, 1998*. Pretoria: Department of Health.

Department of Health, Medical Research Council & ORC Macro. 2007. *South Africa Demographic and Health Survey 2003*. Pretoria: Department of Health.

Department of Welfare. 1998. *Population Policy for South Africa*. Ministry for Welfare and Population Development, Pretoria.

Human Sciences Research Council. 2007. *Proposal on Indicators for monitoring and evaluating the implementation of the children's ACT in South Africa*. HSRC. Monograph.

Mosley WH & Chen LC. 1984. An Analytical framework for the study of child survival in developing countries. *Population and Development Review, Supplement to Vol. 10*, pp. 25-45.

Partnership for Maternal, Newborn and Child Health. 2009. *Consensus for Maternal, Newborn and Child Health*. Nov (1).

Programme for Appropriate Technology in Health (PATH). 2009. *Diarrheal Disease: Solutions to Defeat a Global Killer.* Washington, D.C., PATH.

OECD. 1998. *Core set of indicators of development progress*. DCD/DAC(98)6.

OECD. 2000. *Indicators for the international development goals: a suggestion for some qualitative indicators.* DCD(2000)7.

South Africa. 2005. Millennium Development Goals Country Report.

Udjo EO. 2005. An examination of recent census and survey data on mortality within the context of HIV/AIDS. In: Zuberi T, Sibanda A, Udjo E. (Eds). *The demography of South Africa*. New York, ME Sharpe; pp. 90-119.

Udjo EO. 2008. A re-look at recent statistics on mortality in the context of HIV/AIDS with particular reference to South Africa. *Current HIV Research*, vol 6, pp143-151.

Udjo E. O., Simelane S., & Booysen D. 2000a. *Socio-economic indicators of development progress within the OECD framework in South Africa*. Paper presented at the Millennium Conference of Commonwealth Statisticians, Gaborone, Botswana, 1-5 May.

Udjo E. O., Orkin M., & Simelane S. 2000b. *Levels of social indicators in South Africa in relation to international goals of development*. Paper presented at the Forum 2000 Seminar on Statistics for Social Progress, Geneva, Switzerland, 27 June.

UNICEF. (2008) UNICEF, The State of the World's Children Special Edition: Celebrating 20 Years of the Convention on the Rights of the Child

United Nations, 2003. *Indicators for monitoring the millennium development goals*. United Nations, New York.

United Nations Development Programme. 2005. *South Africa Millennium Development Goals Country Report*.

United Nations Development Programme. 2010. *MDGs in South Africa*. http://www.undp.org.za/mdgs-in-south-africa

WHO Statistical Information System (WHOSIS), available at: http://www.who.int/whosis/en/ and WHO, World Health Statistics. 2009. Available at: http://www.who.int/whosis/whostat/2009/en/index.html

## MDG 5

Adekunle C, Filippi V, Graham W, Onyemunwa P, & Udjo E. 1990. *Patterns of maternity care among women in Ondo State, Nigeria*. In, Hill AG. (ed): Determinants of health and mortality in Africa.

Cooper D, Morroni C, Orner P, Moodley J, Harries J, Cullingworth L & Hoffman M. 2004. Ten years of democracy in South Africa: documenting transformation in reproductive health policy and status. Reproductive Health Matters 12(24): 70-85. http://goliath.ecnext.com/coms2/summary_0199-3557620_ITM

Demographic and Health Surveys Further Analysis Series, no. 10, pp1-45.

Department of Health, Medical Research Council & ORC Macro. 1999. *South Africa Demographic and Health Survey, 1998*. Pretoria: Department of Health.

Department of Health, Medical Research Council & ORC Macro. 2007. South Africa Demographic and Health Survey 2003. Pretoria: Department of Health.

Department of Health. 1999. South Africa Demographic and Health Survey, 1998. Pretoria: Department of Health.

Howard D. 1987. *Aspects of maternal morbidity: the experience of less developed countries*, In, Jeliffe, DB & Jeliffe EFP (eds) Advances in Maternal and Child Health vol 7, 1-35. Oxford: Clarendon.

Human Sciences Research Council. 2007. Proposal on Indicators for monitoring and evaluating the implementation of the children's Act in South Africa. HSRC. Monograph.

MOSAIC. 2008. *Your guide to sexual and reproductive health and freedom from abuse*.

www.moasic.org.za/SRH1.pdf
Rosenfield A, & Maine D. 1985. The coverage of maternity care: A critical review of available information. *World Health Statistics Quarterly*, 38(3), 267-273.

Stevens M. 2008. The 4th Public Health Association of South Africa Conference, 2-4 June, Cape Town.

UNFPA. 1997. The State of the World Population Report 1997.
http://www.unfpa.org/swp/1997/chapter1.htm

UNICEF. 2008. The State of the World's Children Report 2008.
http://www.unicef.org/sowc08/

## MDG 6

Boerma JT, Ghys PD, Walker N. 2003. *Estimates of HIV-1 prevalence from national population-based surveys as a new gold standard*. Lancet, 362, pp 1929-1931.

Cooper D, Morroni C, Orner P, Moodley J, Harries J, Cullingworth L & Hoffman M. 2004. Ten years of democracy in South Africa: documenting transformation in reproductive health policy and status. *Reproductive Health Matters* 12(24): 70-85. http://goliath.ecnext.com/coms2/summary_0199-3557620_ITM

Higher Education South Africa. 2010. *HIV and AIDS in the higher education sector: Findings of the study on HIV seroprevalence and related factors in South Africa*. Pretoria: HEAIDS.

Shisana O, Rehle T, Simabayi LC, Zuma K, Jooste S, Pillay-van-Wyk, Mbelle N, Van Zyl J, Parker W, Zungu NP, Pezi S & the SABSSM III Implementation Team. 2009. *South African national HIV prevalence, incidence, behaviour and communication survey 2008: A turning tide among teenagers?* Cape Town: HSRC Press.

Udjo EO. 2008. A re-look at recent statistics on mortality in the context of HIV AND AIDS with particular reference to South Africa.

UNAIDS and WHO. 2009. AIDS epidemic update: 2009. Geneva.

## MDG 7

African Development Bank (1993) *African development review,* African Development Bank, Abidjan, Cote d'Ivoire

Allan, D.G., Harrison, J.A., Navarro, R.A., Van Wilgen, B.W., & Thompson M.W.(1997) *The Impact of Commercial Afforestation on Bird Populations in Mpumalanga Province, South Africa: Insights*, from Bird Atlas Data. Biological Conservation 79; 173-185.

Buissinne, R. (2009) *Accelerated Phase-Out of Ozone-Depleting Substances,* Thursday, 03 September 2009 IMD Interact, http://www.interactmedia.co.za/index.php?option=com_content&view=article&id=169:accelerated-phase-out-of-ozone-depleting-substances&catid=121:raca-exhibitions&Itemid=143

Burns M, Connell Dr A, Makhaye S, Monteiro Dr P, Morant P, Taljaard S (2010), *Marine Eco systems,* Division of Water Environment & Forestry Technology DEA (2010b) , CSIR, http://www.environment.gov.za/soer/nsoer/issues/coast/index.htm

Constable (2010) *National Inventory of Greenhouse Gases: 2000 GHG Inventory Chapter - Input to South Africa's Second National Communication to the UNFCCC*, Lisa Constable, February 2010

Cowling R.M. and Hilton-Taylor C. (1994) *Patterns of Plant Diversity and Endemism in Southern Africa: An Overview. In B.J. Huntley (Ed.) Botanical Diversity in Southern Africa,* pp. 31-52. National Botanical Institute, Pretoria.

Cunningham A.B. & Davis G.W. (1997) *Human Use of Plants. In R.M. Cowling, D.M. Richardson & S.M. Pierce (Eds) Vegetation of Southern Africa***,** pp. 474-506. Cambridge University Press, Cambridge.

DAFF (2010) *Greenhouse Gas Emission Inventory and Capacity Building for the Agricultural Sector in South Africa,* Department of Agriculture, Forestry and Fisheries, 21 May 2010, http://www.daff.gov.za/)

DEA (2010a) *Terrestrial Eco systems*, http://www.environment.gov.za/soer/nsoer/issues/land/state3.htm

DEA (2010b) Greenhouse Gas Emissions: Carbon Dioxide Emissions, State of the Environment, Department of Environmental Affairs, http://soer.deat.gov.za/172.html, (Downloaded 4 July 2010)

DEA (2010c) *Impacts on terrestrial ecosystems, Sustainability of terrestrial Ecosystems: State of the Nation Report, Department of Environment Affairs*, Downloaded 2 July 2010) http://www.environment.gov.za/soer/nsoer/issues/land/impact.htm

DEA (2010d) *General Waste*, *State of the Environment, Department of Environmental Affairs,* http://soer.deat.gov.za/369.html, (Downloaded, July 2010)

DEAT (1997) *White Paper on the Conservation and Sustainable Use of South Africa's Biological Diversity***.** Government Gazette No. 18163. Government Printer, Pretoria.

DEAT (2010c) *Stratospheric ozone depletion, State of the Environment, Department of Environmental Affairs,* http://soer.deat.gov.za/44.html

Du Toit, P.F., Aucamp, A.J., Bruwer, J.J. (1991) *The National Grazing Strategy of the Republic of South Africa: Objectives, Achievements and Future Challenges*, Journal of the Grassland Society of southern Africa 8:126-130

DWAF (Department of Water Affairs and Forestry) (1997a) *Report on Waste Generation Sub-Project. Report No. 3064/1505/4/S*, DWAF, Pretoria.

DWAF (Department of Water Affairs and Forestry). (1997b) *Disposal Sites for Hazardous and General Wastes in South Africa. Baseline Studies. 2nd Draft*, DWAF, Pretoria.

Ellis C.G. 1986 *Medicinal Plant Use – A Survey*, Veld & Flora 72(3), 72-74.

Enviropaedia (2010) *Sustainable Development ~ South Africa's National Strategy for Sustainable Development,* http://www.enviropaedia.com/topic/default.php?topic_id=252 , Downloaded 5 July 2010

Fourie S.P. & Boyd W.M. (*1995) the Distribution and Conservation Status of the Genus Encephalartos in the Transvaal, South Africa. In P Vorster (Ed.) Proceedings of the Third International Conference on Cycad Biology*, The Cycad Society of South Africa, Stellenbosch.

FSA (2008) Primary Processing Statistics 2007/08, Abstracts 2008:FOA - Abstracts 2001 13/8/09 11:10 Page 1, Forestry South Africa, http://www.forestry.co.za/uploads/File/home/abstracts/FSA%20-%20Abstracts%202008.pdf

Hall A.V. and Ashton E.R. (1983) *Threatened Plants of the Cape Peninsula*, Threatened Plants Research Group, University of Cape Town, Cape Town.

Hall A.V., De Winter B & Van Oosterhout S.A.M. (1980) *Threatened Plants of Southern Africa.* South African National Scientific Programmes Report 45, Csir, Pretoria.

Hilton-Taylor C (1996) *Red Data List of Southern African Plants*, Strelitzia 4: 1-117.

Hilton-Taylor C and Le Roux A (1989) *Conservation Status of the Fynbos and Karoo Biomes. In B.J. Huntley (Ed.) Biotic Diversity in Southern Africa: Concepts and Conservation*, pp. 202-223. Oxford University Press, Cape Town.

Hoffman M.T. 1997 *Human Impacts on Vegetation*, In R.M. Cowling, D.M. Richardson & S.M. Pierce (Eds) Vegetation of Southern Africa. Pp. 507-534. Cambridge University Press, Cambridge.

Hoffman, M.T. and Cowling, R.M. (1990) *Vegetation Change in the Semi Arid Eastern Karoo over the Last 200 Years: an Expanding Karoo - Fact or Fiction?* South African Journal of Science 86:286-294

Hoffman, T. & Todd, S. (1999) *Causes of Degradation,* Chapter 9.1 the Role of Climate. In Hofmann Et Al Land Degradation in South Africa : 164 - 165.

Hoffman, T., Todd, S., Ntshona, Z. & Turner, S. (1999) *Land Degradation in South Africa*, Prepared for Department of Environmental Affairs and Tourism. 245 Pp.

Huntley B.J. (1994) (Ed.) *Botanical Diversity in Southern Africa*, Huntley B.J. (Ed.), pp. 259-274, National Botanical Institute, Pretoria

Hutchings A (1989) *A Survey and Analysis of Traditional Medicinal Plants As Used by the Zulu, Xhosa and Sotho*. Bothalia 19, 111-123.

IDRC (2010) *Chapter 12. Agriculture, Forestry, and Fisheries*, The International Development Research Centre, http://www.idrc.ca/en/ev-82688-201-1-DO_TOPIC.html,

Lewington A (1993) *Medicinal Plants and Plant Extracts: A Review of the Importation Into Europe.* Traffic Network Report, Traffic International, Cambridge.

Macdonald I.A.W. & Richardson D.M.1986 Alien Species in Terrestrial Ecosystems of the Fynbos Biome. In I.A.W. Macdonald, F.J. Kruger & A.A. Ferrar (Eds) the Ecology and Management of Biological Invasions in Southern Africa. Pp. 77-91. Oxford University Press, Cape Town.

Macdonald I.A.W. 1989 Man's Role in Changing the Face of Southern Africa. In B.J. Huntley (Ed.) Biotic Diversity in Southern Africa: Concepts and Conservation. Pp. 51-77. Oxford University Press, Cape Town.

Mander M, Mander J, Crouch N, Mckean S, Nichols G (1995) *Catchment Action: Growing and Knowing Muthi Plants*. Institute of Natural Resources, Scottsville.

Meadows (1999) *Growing the Forest in South Africa*, *TAPPI Journal July 1999, Donald G. Meadows* http://www.donmeadows.com/PDF/SAf-trees99JUL60.pdf

MDG Africa Steering Group (2008) *Achieving the Millennium Development Goals in Africa: Recommendations of the MDG Africa Steering Group* June 2008, New York 2008

MNB Momba*, Z Tyafa, N Makala, BM Brouckaert and CL Obi (2006) Safe drinking water still a dream in rural areas of South Africa. Case Study: The Eastern Cape Province, Water SA Vol. 32, No. 5 (Special Ed. WISA 2006)

Newton D.J. & Chan J (1998) *South Africa's Trade in Southern African Succulent Pl*ants. Traffic International, Cambridge.

Oldfield S (1993) *International Trade in A*loes. Traffic Bulletin 14(1), 25-32.

Rebelo A.G. (1997) *Conservation*. In R.M. Cowling, D.M. Richardson & S.M. Pierce (Eds) Vegetation of Southern Africa. Pp. 571-590. Cambridge University Press, Cambridge.

Richardson D.M., Bond W.J., Dean W.R.J., Higgins S.I., Midgley G.F., Milton S.J., Powrie L.W., Rutherford M.C., Samways M.J. & Schulze R.E. (In Press) Invasive Alien Species and Global Change: A South African Perspective. In H.A. Mooney & R Hobbs (Eds) the Impact of Global Change on Invasive Species. Island Press.

Richardson D.M., Macdonald I.A.W., Hoffman J.H. & Henderson L (1997) Alien Plant Invasions. In R.M. Cowling, D.M. Richardson & S.M. Pierce (Eds) Vegetation of Southern Africa. Pp. 535-570. Cambridge University Press, Cambridge.

Sachs J. D. (2005) *Investing in Development: A Practical Plan to Achieve the Millennium Development Goals.* UN Millennium Project, 2005, New York

Scott-Shaw R, Hilton-Taylor C, Kasseepursad B & Church B (1998) *The Conservation Status of the Pepper Bark Tree*. Sabonet News 3(2), 73-75.

Siegfried W.R. (1989) *Preservation of Species in Southern African Nature Reserves*. In B.J. Huntley (Ed.) Biotic Diversity in Southern Africa. Concepts and Conservation. Pp. 186-201. Oxford University Press, Cape Town.

South Africa Online (2010) *Environment: Marine protected areas (MPAs), South Africa Online, Downloaded 4 July 2010,* http://www.southafrica.co.za/about-south-africa/environment/

Stats SA (2010) *List of Forest Wilderness Areas*, Statistics South Africa, Personal Communication, June 2010

SRO-WA (2010) *Ensuring Environmental sustainability in West Africa (MDG 7)*, United Nations Economic Commission for Africa, Sub-Regional Office for West Africa (SRO-WA), January, 2010

Taviv R., Mwakasonda S and Witi J. (2008) *Developing the GHS Inventory for South Africa*, http://researchspace.csir.co.za/dspace/bitstream/10204/2502/1/Taviv1_2008.pdf (downloaded
4 July 2010)

Todd, S.W. (1997) *The Effects of Heavy Grazing on Plant Species Diversity and Community Composition in a Communally Managed, Semi-arid Shrubland, Namaqualand, South Africa*. Unpublished M.Sc. thesis, University of Cape Town, Cape Town

Todd, S.W. and Hoffman, M.T. (1999) (in press) *a Fence Line Contrast Reveals Effects of Heavy Grazing on Plant Diversity and Community Composition in Namaqualand South Africa*. Journal of Plant Ecology

UN (2009) *Addendum to 2nd Guidance Note on Country Reporting on Millennium Development Goals*, United Nations Development Group, United Nations, November 2009

UNDP (2003) *Sustainable Development In Southern Africa: Mobilising Partnerships and Capacity for Achieving MDGs*, Southern Africa MDG Forum, Johannesburg, UNDP Southern Africa Sub-Regional Resource Facility, 2 – 4 July 2003

Van Der Merwe, A.J. and De Villiers, M.C. (1997) *South Africa: Integrated Soil Management for Sustainable Agriculture and Food Security*, Country Paper Presented At Expert Consultation, Harare, Zimbabwe, December 1997. 39pp

WCMC (1994) *Biodiversity Data Sourcebook*. WCMC Biodiversity Series No. 1. World Conservation Press, Cambridge, UK

Wood J, Low A.B., Donaldson J.S. & Rebelo A.G. (1994) *Threats to Plant Species Diversity Through Urbanization and Habitat Fragmentation in the Cape Metropolitan Area, South Africa*. In Huntley B.J. (1994) (Ed.) *Botanical Diversity in Southern Africa*, Huntley B.J. (Ed.), pp. 259-274, National Botanical Institute, Pretoria

## MDG 8

Altman, M. 2007. *Employment Scenarios to 2024*. HSRC. Available from www.hsrc.ac.za

Baily, M.N., Lund, S., Atkins, C. (2009), *Will US consumer debt reduction cripple the recovery?*¸McKinsey Global Institute, McKinsey & Company.

Bhorat, van der Westhuizen and Jacobs. 2009. *Income and Non-Income Inequality in Post-Apartheid South Africa: What are the Drivers and Possible Policy Interventions?* DPRU Working Paper 09/138 August 2009, DPRU.

Business Leadership South Africa, 2007. *South African telecommunications prices.* Occasional paper number 3, November 2007.

De Lange, J. 'SA's Wage Anomalies ' in Fin24.com, 8 February 2010. Available from: http://fin24.com/Companies/SAs-wage-anomalies-20100208

Department of Communications, 2008. *Strategic Plan 2009-2012.* Available from www.doc.gov.za

Department of Science and Technology (2007*). Innovation towards a Knowledge Economy; the Ten Year Plan for South Africa (2008 to 2018)*. Department of Science and Technology.

Edwards, L. and S. Golub. 2003. 'South African Productivity: An International Comparative Perspective, ' Trade and Industry Monitor.

HSRC (2010), *2007/2008 National Survey of Research and Experimental Development,* Centre for Science, Technology and Innovation Indicators (CeSTII) for the Department of Science and Technology.

International Telecommunication Union, 2009. *ITU Yearbook of Statistics: Telecommunication/ICT Indicators 1999-2008.* Available from www.itu.int

National Treasury (2010), *Budget Speech 2010, Minister of Finance, Pravin Gordhan.* 17 February 2010.

National Treasury (2010 a), *Budget Review 2010, Chapter 2, Economic Policy and Outlook*.

OECD (2007), *OECD Reviews of Innovation Policy: South Africa*. OECD.

SASI (2007), *Savings presentation*. Presentation. Available online: http://www.savingsinstitute.co.za/PDFs/Presentation31July2007.ppt

South Africa Foundation, 2005. *Telecommunications prices in South Africa: An international peer group comparison.* Occasional Paper No 1/2005.

South African Government (2002), *South Africa's National Research and Development Strategy*, August 2002, Department of Science and Technology.

South African Government (2010), *2010/11 – 2012/13 Industrail Policy Action Plan*, February 2010. Economic Sectors and Employment Cluster.

South African Reserve Bank (SARB). 2010. *Statement of the Monetary Policy Committee*. 13 May 2010. Available from: www.resbank.co.za

Statistics South Africa. 2010. *Quarterly Labour Force Survey*. Quarter 1, 2010. Available from: www.statssa.gov.za

The World Bank (2010), *Doing Business 2010,* Available online: http://www.doingbusiness.org/ExploreEconomies/?economyid=172.

The Heritage Foundation and Wall Street Journal (2010), *2010 Index of Economic Freedom, South Africa*, Available online: http://www.heritage.org/index/Country/SouthAfrica.

Van der Merwe, E.J. 2004. *Inflation Targeting in South Africa*, SARB Occasional Paper No 19, July 2004. Available from www.resbank.co.za

Image on education obtained online: www.mydreamcourse.co.za

Image on child mortality obtained online from: www.womenlikeusseries.com

# ANNEXURE 1: FACTS AND FIGURES

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| **1. ERADICATE EXTREME POVERTY AND HUNGER** | | | | | |
| Proportion of population below $1[3] (PPP) per day | 11.3[4] *(2000)* | 5.0[5] *(2006)* | 5.7 | **Achieved** | **MDG** |
| Proportion of population below $1.25[6] (PPP) per day | 17.0[7] *(2000)* | 9.7[8] *(2006)* | 8.5 | **Likely** | **MDG** |
| Proportion of population below $2[9] (PPP) per day | 33.5[10] *(2000)* | 25.3[11] *(2006)* | 16.8 | **Possible** | **MDG** |
| Proportion of population below $2.50[12] (PPP) per day | 42.2[13] *(2000)* | 34.8[14] *(2006)* | 21.1 | **Unlikely** | **MDG** |
| Poverty gap ratio ($1 (PPP) per day) | 3.2 *(2000)* | 1.1 *(2006)* | 1.6 | **Achieved** | **MDG** |
| Poverty gap ratio ($1.25 (PPP) per day) | 5.4 *(2000)* | 2.3 *(2006)* | 2.7 | **Achieved** | **MDG** |
| Poverty gap ratio ($2 (PPP) per day) | 13.0 *(2000)* | 8.1 *(2006)* | 6.5 | **Possible** | **MDG** |
| Poverty gap ratio ($2.5 (PPP) per day) | 18.0 *(2000)* | 12.5 *(2006)* | 9.0 | **Possible** | **MDG** |
| Share of poorest quintile in national consumption | 2.9 *(2000)* | 2.8 *(2006)* | 5.8 | **Unlikely** | **MDG** |
| Percentage growth rate of | 4.7 | 1.9 | 6.0 | **Possible** | **MDG** |

[3] Conversion rates used for USD to ZAR in 2000 R86 per month; for 2006 it is R105 per month.
[4] Population below the poverty line is 4.9 million people
[5] Population below the poverty line is 2.4 million people
6 Conversion rates used for USD to ZAR in 2000 R107 per month; for 2006 it is R133 per month
7 Population below the poverty line is 7.3 million people
8 Population below the poverty line is 4.6 million people
9 Conversion rates used for USD to ZAR in 2000 R167 per month; for 2006 it is R208 per month
10 Population below the poverty line is 14.5 million people
11 Population below the poverty line is 12 million people
12 Conversion rates used for USD to ZAR in 2000 R215 per month; for 2006 it is R269 per month
13 Population below the poverty line is 18.3 million people
14 Population below the poverty line is 16.5 million people

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| GDP per person employed | *(2002)* | *(2009)* | | | |
| Employment-to-population ratio | 41.5 *(2003[15])* | 42.5 *(2009[16])* | 50 - 70[17] | **Unlikely** | **MDG** |
| Proportion of employed people living below $1 (PPP) per day | 5.2 *(2000)* | No data[18] | ≈ 0 | **Unlikely** | **MDG** |
| Proportion of own-account and contributing family workers in total employment | 11 *(2001)* | 9.9 *(2010)* | ≈ 5[19] | **Possible** | **MDG** |
| Prevalence of underweight children under-five years of age (as a percentage)[20] | 9.3 *(1994)* | 10.2 *(2005)* | 4.7 | **Unlikely** | **MDG** |
| Incidence of severe malnutrition in children under 5 years of age (rate per 1,000)[21] | 1.4 *(1994)* | 1.0 *(2005)* | 0.7 | **Possible** | **Domestic** |
| Proportion of population below minimum level of dietary energy consumption | No data | No data | No target | **Unknown** | **MDG** |
| Percentage children below minimum level of dietary energy consumption[22] | 46.3[23] *(1999)* | No data | 23 | **Unknown** | **Domestic** |
| Gini Coefficient (including salaries, wages and social grants[24]) | 0.70 *(2000)* | 0.73 *(2006)* | 0.3[25] | **Unlikely** | **Domestic** |
| Gini Coefficient (total income including free services[26]) | 0.69 *(2000)* | 0.71 *(2006)* | | | |

[15] Annualized figure
[16] Ibid
[17] The range applies adopted by developed nations
[18] The Labour Force Survey and Income and Expenditure Survey were not run concurrently.
[19] Maximise the notion of decent work
[20] Using Weight for age 2 standards below the median. Source: The South African Vitamin A Consultative Group (SAVACG). Children aged 6 to 71 months in South Africa (1994). National Food Consumption Survey (2005),
[21] Using Weight for age 3 standards below the median. Source: The South African Vitamin A Consultative Group (SAVACG). Children aged 6 to 71 months in South Africa (1994). National Food Consumption Survey (2005),
[22] Consumption is less than 67% of the recommended daily allowance
[23] The value is for children 1 to 5 years of age
[24] Includes salaries and wages, income from business and /or professional practice and social grants
[25] The value of 0.3 for developed nations includes social transfers by government. In South Africa the Gini coefficient does not include those who receive social assistance in the form of free basic services such as water, primary healthcare, schooling, and housing.
[26] Free services refer to free electricity, water, sanitation as well as grant/non refundable bursaries for educational purposes and subsidies

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| Gini Coefficient (excluding social grants) | 0.70 *(2000)* | 0.74 *(2006)* | | | |
| Gini coefficient (per capita expenditure[27] including taxes) | 0.67 *(2000)* | 0.69 *(2006)* | | | |
| Gini coefficient (per capita expenditure excluding taxes) | 0.65 *(2000)* | 0.67 *(2006)* | | | |
| Proportion of households with access to free basic services: • Water[28] | 66.0 *(2002)* | 60.6 *(2008)* | No Target | **Not applicable** | **Domestic** |
| • Electricity[29] | 41.0 *(2002)* | 34.8 *(2008)* | | | |
| • Sewerage and Sanitation | 31.2 *(2002)* | 32.7 *(2008)* | | | |
| • Solid waste | 18.4 *(2002)* | 21.8 *(2008)* | | | |
| Percentage of indigent[30] households receiving free basic services[31] • Water | 61.8 *(2004)* | 73.2 *(2007)* | No Target | **Not applicable** | **Domestic** |
| • Electricity | 29.2 *(2004)* | 50.4 *(2007)* | No Target | **Not applicable** | **Domestic** |
| • Sewerage and Sanitation | 38.5 *(2004)* | 52.1 *(2007)* | No Target | **Not applicable** | **Domestic** |

[27] Expenditure excludes investments and transfers to other household.
[28] An amount of water determined by government that should be provided free to poor households to meet basic needs, currently set at 6kl per month per household within 200 meters from each dwelling
[29] An amount of electricity determined by government that should be provided free to poor households to meet basic needs, currently set at 50kWh per month per household
[30] These are poor households as defined by municipalities. The basis on which a municipality determines if a household is indigent (and the criteria used for such determination) can vary.
[31] The indicator is expressed as a percentage of total indigent households in the country

| FACTS AND FIGURES | | | | | | |
|---|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | | **Current Status 2010 (or nearest year)** | | **2015 Target** | **Target Achievability** | **Indicator Type** |
| • Solid waste | 38.7 *(2004)* | | 52.6 *(2007)* | | No Target | **Not applicable** | **Domestic** |
| Number of beneficiaries of Income Support (millions) | 2.6 (1997) | | 14.1 (2010) | | No Target | **Not applicable** | **Domestic** |
| **2. ACHIEVE UNIVERSAL PRIMARY EDUCATION** | | | | | | | |
| Net enrolment ratio[32] in primary education | Data deficient[33] | | Data deficient | | 100 | **Unknown** | **MDG** |
| Proportion of pupils starting grade 1 who reach last grade of primary | Data deficient[34] | | Data deficient | | 100 | **Unknown** | **MDG** |
| Literacy rate of 15 – 24 year-olds, male and female | 83.4 *(2002)* | 88.4 *(2002)* | 89 *(2009)* | 93.1 *(2009)* | 100 | **Likely** | **MDG** |
| Adjusted net enrolment ratios primary education, male and female | 96.4 *(2002)* | 97.0 *(2002)* | 98.4 *(2009)* | 98.8 *(2009)* | 100 | **Achieved** | **Domestic** |
| Completion rate of primary education for 18 year olds | 89.6 *(2002)* | | 93.8 *(2009)* | | 100 | **Likely** | **Domestic** |
| **3. PROMOTE GENDER EQUALITY AND EMPOWER WOMEN** | | | | | | | |
| Ratios[35] of girls to boys in: | | | | | 1:1 | | **MDG** |
| • primary[36] | 0.97:1 *(1996)* | | 0.96:1 *(2009)* | | | **Likely** | |
| • secondary[37] | 1.13:1 *(1996)* | | 1.05:1 *(2009)* | | | **Achieved** | |
| • tertiary[38] | 0.86:1 *(1996)* | | 1.26:1 *(2009)* | | | **Achieved** | |
| Share of women in wage employment in the non- | 43 | | 45 | | 50 | | **MDG** |

[32] South Africa reports on Adjusted Net enrolment ratio as recommended by UNESCO Institute of Statistics. The problems with NER emanates from the incorrect reporting of age in the administrative records. Compounding the problem is the admissions policy that allows for ages 5 or 6 to qualify for enrolment in grade 1.
[33] While the indicator can be computed from administrative records, the latter carries inherent deficiencies impeding this activity. Computing NER results in values that are greater than 100%.
[34] While the indicator can be computed from administrative records, the latter carries inherent deficiencies impeding this activity. Administrative records do not track individual learners in the education system, making cohort analysis impossible
[35] Gender Parity has been factored into the computation of the ratios.
[36] Research Institute for Education Planning for 1996 (University of the Free State) and General Household Survey 2009 (Stats SA)
[37] Research Institute for Education Planning for 1996 (University of the Free State) and General Household Survey 2009 (Stats SA)
[38] Source is from the Higher Education Management Information System (HEMIS). In addition, the notion of the empowerment of females is reflected in this indicator.

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| agricultural sector (as a percentage) | *(1996)* | *(2010)* | | **Likely** | |
| Proportion of seats held by women in national parliament (as a percentage) | 25 *(1994)* | 44 *(2009)* | 50 | **Likely** | **MDG** |
| Ratio of literate females to males of 15-24 years of age | 1.1:1 *(1996)* | 1:1 *(2009)* | 1:1 | **Achieved** | **MDG** |
| **4. REDUCE CHILD MORTALITY** | | | | | |
| Under-five mortality rate | 59 *(1998)* | 104 *(2007)* | 20 | **Unlikely** | **MDG** |
| Infant mortality rate | 54 *(2001)* | 53 *(2007)* | 18 | **Unlikely** | **MDG** |
| Proportion of 1 year-old children immunised against measles | 68.5 *(2001)* | 98.3 *(2009)* | 100 | **Likely** | **MDG** |
| Immunisation coverage under 1 year of age[39] | 66.4 *(2001)* | 95.3 *(2009)* | 100 | **Likely** | **Domestic** |
| Life expectancy at birth for males and females | 57.6 *(2001)* 64.8 *(2001)* | 55.3 *(2007)* 60.4 *(2007)* | 70[40] | **Unlikely** | **MDG** |
| Diarrhoea incidence under 5 years of age (per 1,000) | 138.0 *(2001)* | 132.6 *(2009)* | No Target | **Not applicable** | **Domestic** |
| Pneumonia incidence under 5 years of age (per 1,000) | 21[41] *(2003)* | 102.1 *(2009)* | No Target | **Not applicable** | **Domestic** |
| **5. IMPROVE MATERNAL HEALTH** | | | | | |
| Maternal mortality ratio[42] | 369 *(2001)* | 625 *(2007)* | 38 | **Unlikely** | **MDG** |

[39] Data source is the District Health Information System (DHIS) of the Department of Health
[40] UN Indicators on sustainable development; guidelines and methodologies – methodology sheets (2007)
[41] By 2003 not all provinces were recording incidence of pneumonia: Western Cape and Northern Cape started in 2006 and 2004 respectively.
[42] UN Millennium Indicators series metadata (2009) produced by the United Nations Statistics Division (UNSD). The Benchmark figure is 150 based on the South African Demographic and Health Survey of 1998.

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| Proportion of births attended by skilled health personnel | 76.6 *(2001)* | 94.3 *(2009)* | ≈100 | **Possible** | **MDG** |
| Contraceptive prevalence rate (Couple year protection rate) | 25.2 *(2001)* | 33.4 *(2009)* | ≈ 100 | **Unlikely** | **MDG** |
| Adolescent birth rate | No data | No data | No target | **Unknown** | **MDG** |
| Antenatal care coverage (at least one visit and at least four visits) | 76.6 *(2001)* | 102.8 *(2009)* | ≈100 | **Achieved** | **MDG** |
| Unmet need for family planning | No data | No data | No target | **Unknown** | **MDG** |
| Use of modern contraceptive methods by sexually active women | 61.2 *(1998)* | 64.6 *(2003)* | 70[43] | **Unlikely** | **Domestic** |
| **6. COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES** | | | | | |
| HIV prevalence among population aged 15-24 years | 9.3 *(2002)* | 8.7 *(2008)* | < 9.3 | **Possible** | **MDG** |
| Condom use at last high-risk[44] sex | 27.3% *(2002)* | 75.2 *(2009)* | ≈100 | **Unlikely** | **MDG** |
| Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS | Data deficient[45] | Data deficient | No target | **Unknown** | **MDG** |
| Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years[46] | 1:1 *(2002)* | 1:1 *(2008)* | 1:1 | **Achieved** | **MDG** |
| Proportion of population with advanced HIV infection[47] with access to antiretroviral drugs | 13.9 *(2005)* | 41.6 *(2009)* | ≈100 | **Unlikely** | **MDG** |

[43] Target set by the Department of Health

[44] In South Africa high risk is defined as more than 1 sexual partner in the last 12 months with the target population of the survey adults aged 15-49 years of age

[45] The 2008 results are anomalous to the 2005 results. By 2008 there is a decline in the proportion of 15-24 year olds with a comprehensive correct knowledge of HIV/AIDS (Source: South African national HIV prevalence, incidence, behaviour and communication survey 2008: A turning tide among teenagers?).

[46] This ratio is to be interpreted as the likelihood of an orphan attending school as compared to that of a non-orphan

[47] The number of adults with advanced HIV infection who should start treatment is estimated on the assumption that, without access to antiretroviral therapy, the time from eligibility to death is approximately three years. It estimated that more than 50% of infants

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| Incidence of malaria[48] | 64 600 *(2000)* | 6 800 *(2008)* | < 6 800 | **Likely** | **MDG** |
| Death rates associated with malaria[49] | *2.0 (2002)* | *0.6 (2007)* | < 2.0 | **Achieved** | **MDG** |
| Proportion of children under 5 sleeping under insecticide-treated bed-nets | Not applicable | Not applicable | Not applicable | **Not applicable** | **MDG** |
| Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs | No data | No data | Unknown | **Unknown** | **MDG** |
| Number of cases of children under 5 years of age with fever who are treated with appropriate anti-,malarial drugs[50] | 9513 *(2000)* | 603 *(2009)* | < 9513 | **Achieved** | **MDG** |
| Number of households sprayed with insecticide | 888 965 *(2000)* | 1 757 832 *(2009)* | No Target | **Not applicable** | **Domestic** |
| Incidence of tuberculosis | 253 *(2004)* | 283 *(2009)* | < 253 | **Unlikely** | **MDG** |
| Prevalence[51] of tuberculosis | 134 000 *(2004)* | 144 000 *(2008)* | < 134 000 | **Unlikely** | **MDG** |
| Death rates associated with tuberculosis per 100 000 population[52] | 147 *(2002)* | 179 *(2007)* | < 147 | **Unlikely** | **MDG** |
| Proportion of tuberculosis cases detected and cured under directly observed treatment short course | 65.5 *(2004)* | 76.4 *(2008)* | 100 | **Possible** | **MDG** |

with HIV infection will need antiretroviral therapy by their second year of life, based on data available from demographic studies. (UN MDG Metadata 2009)

[48] Also referred to as morbidity of malaria. For additional information consult UN Indicators of Sustainable Development: Guidelines and Methodologies – Methodology Sheets

[49] Does not appear in the top 25 causes of death

[50] Reported case are for three provinces (Mpumalanga, KwaZulu Natal and Limpopo) where malaria is prevalent

[51] TB prevalence can be expressed in absolute number of cases whilst TB incidence can be expressed as the number per 100 000 people in a year (UN indicators for monitoring the Millennium Development Goals (2003))

[52] To compile the indicator the numerator requires data from death registration systems and the denominator population data from Censuses or other related sources (UN Indicators of sustainable development: Guidelines and methodologies – methodology sheets 3rd edition (2007)).

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| Percentage of people that received an HIV test in the past 12 months and know their status | 11.9 *(2005)* | 24.7 *(2009)* | No Target | **Not applicable** | **Domestic** |
| HIV prevalence among pregnant women aged 15 – 24 years[53] | 22.8 *(2002)* | 29.3 *(2008)* | 22.8 | **Unlikely** | **MDG** |
| HIV prevalence in men and women aged 15-49[54] | 15.6 *(2002)* | 16.9 *(2008)* | 15.6 | **Unlikely** | **MDG** |
| **7. ENSURE ENVIRONMENTAL SUSTAINABILITY** | | | | | |
| Proportion of land area covered by forest | No data[55] | No data | No Target | **Not applicable** | **MDG** |
| Proportion of land area covered by forest:<br>• Natural forests | No data | 0.41 *(2008)* | | | **Domestic** |
| • Savannah woodlands | | 32.77 *(2008)* | | | |
| • Albany Thicket | | 2.39 *(2008)* | | | |
| • Commercial plantations | 1.04 *(2007)* | 1.03 *(2008)* | | | |
| $CO_2$ emissions:<br>• total[56] | 358 930 *(1994)* | 433 527 *(2007)* | 34[59] | **Possible** | **MDG** |
| • per capita[57] | 8.86 *(1994)* | 8.82 *(2007)* | | | |
| | 1.29 *(1994)* | 0.98 *(2007)* | | | |

[53] Applicable indicator until 2009 now replaced by HIV prevalence in men and women aged 15-49
[54] The 'National HIV prevalence, incidence, behaviour and communication survey ' (2008) does not provide figures disaggregated by sex.
[55] Data collected by South Africa does not conform to the definitional requirements of 'land spanning mmore than 0.5 hectares with trees higher than 5m and a canopy cover of more than 10%, or trees able to reach these thresholds in situ. ' (UN MDG Metadata 2009)
[56] Expressed in Gigagrams
[57] Expressed in metric tons
[58] Expressed in Kg
[59] 34% reduction of 'Business as Usual ' by 2020 and 42% by 2025

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| • per $1 GDP (PPP)[58] | | | | | |
| Consumption of ozone-depleting substances (ODP tons)[60] | 205.1 (HCFC) *(1994)* | 209.2 (HCFC) *(2008)* | Freeze by 2013 and phase out by 2040 | **Likely** | **MDG** |
| | 14.4 (BCM) *(2003)* | 0 (BCM) *(2009)* | | | |
| | 601.2 (MeBr) *(1994)* | 225.9 (MeBr) *(2008)* | Phase out by 2015 | | |
| Proportion of fish stocks within safe biological limits | No data[61] | No data | No target | **Unknown** | **MDG** |
| Proportion of total water resources used | 26.61 *(1990)* | 25.03 *(2000)* | No target | **Unknown** | **MDG** |
| Proportion of area protected (as a percentage of total) • terrestrial[62] | 5.18 *(1994)* | 6.20 *(2010)* | 9 | **Possible** | **MDG** |
| • marine[63] | 0 *(1994)* | 6.54[64] *(2010)* | 14 | | |
| Number of species (vegetation) threatened with extinction[65] | 676 *(1990)* | 2458 *(2010)* | 676 | **Unlikely** | **MDG** |
| Proportion of population using an improved drinking water source | 61.1% *(1996)* | 92.4 *(2009)* | 81 | **Achieved** | **MDG** |
| Proportion of population using an improved sanitation facility | 58.5[66] *(2001)* | 72.2 *(2009)* | 79.2 | **Likely** | **MDG** |
| Proportion of urban population living in slums[67] | 13.0 | 13.4 | 0 | **Unlikely** | **MDG** |

[60] ODP means Ozone Depleting Potential
[61] There are no South African data sources on this indicator. The only data available is modelled data produced by the Food and Agricultural Organisation.
[62] The indicator is expressed as a percentage of total terrestrial area.
[63] The indicator is expressed as a percentage of total marine area.
[64] The latest target for marine protected areas is 20-30% of an ecological region. (UN Indicators of sustainable development: Guidelines and methodologies – methodology sheets 3rd edition (2007)). Currently 12% of the coastline is protected and the target is 14% by 2015.
[65] There is no stipulated target. The indicator is replaced with **(1)** Change in threat status of species **(2)** abundance of selected key species and **(3)** abundance of alien invasive species (UN Indicators of sustainable development: Guidelines and methodologies – methodology sheets 3rd edition (2007)).
[66] Census 1996 data combines flush and chemical toilets and thus cannot be used for this indicator

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| | *(2002)* | *(2009)* | | | |
| Proportion of households with access to electricity | 76.8[68] *(2002)* | 82.6 *(2009)* | ≈100 | **Possible** | **MDG** |
| Proportion of population using solid fuels as primary source of energy | 35.7 (Heating) *(1996)* | 19.8 (Heating) *(2009)* | < 35.7 | **Achieved** | **MDG** |
| | 27.6(Cooking) *(1996)* | 15.7 (Cooking) *(2009)* | < 27.6 | | |
| Number of legally designated landfill sites[69] | No data | 817 *(2010)* | No target | **Not applicable** | **Domestic** |
| **8. DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT** | | | | | |
| Gross domestic product per capita (current prices) | 22,758 *(2001)* | 49,134 *(2009)* | Income growth ≥ Inflation | **Likely** | **MDG** |
| Percentage investment share in GDP | 15.1 *(2001)* | 19.3 *(2009)* | ≈25 | **Likely** | **MDG** |
| Debt to GNI ratio | 44.4 *(2000)* | 28.4 *(2008)* | <44.4 | **Achieved** | **MDG** |
| Labour productivity | 100.0 *(2003)* | 111.6 *(2008)* | Labour productivity > Inflation | **Possible** | **MDG** |
| Current account balance as percentage of GDP | - 0.3 *(2001)* | 4.0 *(2009)* | No target | **Not applicable** | **Domestic** |
| Official development assistance received as percentage of GNI | 0.2 *(2005)* | 0.3 *(2009)* | No target | **Not applicable** | **Domestic** |
| Official development assistance given as percentage of GNI | No data | No data | 0.7[70] | **Not applicable** | **Domestic** |
| Gross saving as percentage of gross disposable income (GDI) | 15.9 *(2001)* | 15.8 *(2009)* | >0 | **Likely** | **MDG** |

[67] A slum household dwelling is one which lacks one or more of the following (1) access to improved water (2) access to improved sanitation (3) sufficient living area (4) durability of housing and (5) security of tenure (UNSD Millennium Indicators Series Metadata(2009))

[68] Census 1996 data for electricity depends on the usage: heating, lighting and cooking and thus cannot be used.

[69] Domesticated indicator without a defined target

[70] The target applies to OECD nations who committed themselves to providing financial support to developing nations

| FACTS AND FIGURES | | | | | |
|---|---|---|---|---|---|
| **Goals and Indicators** | **1994 Baseline (or closest year)** | **Current Status 2010 (or nearest year)** | **2015 Target** | **Target Achievability** | **Indicator Type** |
| Inflation rate (CPI) | 5.8<br>*(2001)* | 7.1<br>*(2009)* | 3 - 6 | **Possible** | **Domestic** |
| Gross domestic expenditure on R&D as percentage of GDP | 0.6<br>*(1997)* | 0.9<br>*(2007)* | 1.5% by 2014 | **Possible** | **Domestic** |
| Foreign direct investment net inflows and net outflows as percentage of GDP[71] | 8.4<br>*(2001)* | 1.4<br>*(2009)* | >0 | **Possible** | **MDG** |
| Share of imports from developing countries (DC) and least developed countries (LDC) | 2.0 (LDC)<br>32.1(DC)<br>*(2002)* | 4.3 (LDC)<br>46.9 (DC)<br>*(2009)* | No target | **Not applicable** | **MDG** |
| Fixed telephone lines per 100 population | 11.1<br>*(2001)* | 9.7<br>*(2007)* | ≥50 | **Unlikely** | **MDG** |
| Cellular telephone subscribers per 100 population | 18.5<br>*(2001)* | 85.9<br>*(2007)* | | **Achieved** | **MDG** |
| Internet access per 100 population[72] | 7.2<br>*(2007)* | 8.9<br>*(2009)* | ≥ 50 | **Possible** | **MDG** |

[71] Foreign direct investment derived according to UNCTAD methodology
[72] The indicator is household based.