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## 05. Child Support Grant Study Findings

**The Child Support Grant in Hlabisa :**

*ANNE CASE, Princeton University, VICTORIA HOSEGOOD, London School of Hygiene & Tropical Medicine, and FRANCIE LUND, University of Natal, are engaged in extensive research in Hlabisa, KwaZulu-Natal, on the reach of the Child Support Grant. This is a non-technical summary of their initial findings.*

In April 1998, the government introduced the Child Support Grant (CSG), as a monthly cash payment, payable to the primary caregiver of poor children up to their seventh birthday.

Through the application of a means test, the grant was designed to reach the very poor, especially the African population in rural areas. It introduced the idea that a 'primary caregiver' could be a beneficiary of a grant aimed at children.

It was one of the most significant postapartheid reforms in the field of social policy, and there is now much interest in its performance. Some important questions are:

- Who applies for the CSG on behalf of a child?
- Are the awards difficult to obtain?
- Are boys more likely than girls to get the grant?
- Are the grants going to poorer households?
- Who is not receiving the grant yet?
- How long is it taking between enquiry about and receipt of the grant?

In 2002, the Africa Centre offered the opportunity to address these questions in precisely the kind of area at which the grant was aimed. The Centre is a research institute that has a demographic surveillance area (DSA) in the Hlabisa district of KwaZulu-Natal. The area is mainly rural, the population is mainly African, is very poor, and there is a high burden of disease and ill health, much of which is associated with HIV/ AIDS.

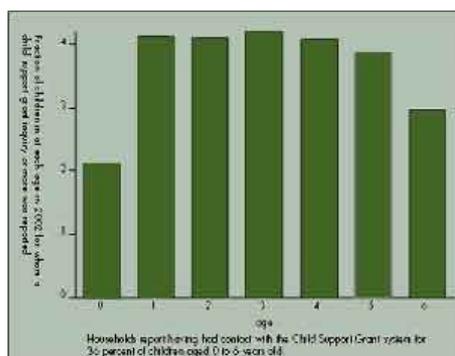


Figure 1. Fraction of resident children for whom an inquiry about a Child Support Grant is reported

In early 2002, we conducted a short questionnaire about all children up to seven years old, in all of the approximately 11 000 households in the DSA. From this we could then compare the situation of those who had applied for and received (or not) a CSG, with those who had not been involved with the CSG system. Before turning to the interesting results from this survey, we should explain some aspects of it.

Children who do not reside with their mothers are significantly at risk for not receiving the grant.

In an area this remote, and with this level of development, the speed of delivery of this new form of support for poor children has been creditable

First, the *CSG* questionnaire itself was quite short, but the Africa Centre Demographic Information System (ACDIS) allows us to link children to a bigger set of data about their households. In ACDIS, every 'bounded structure' (which can be a compound, house or living area used to define residency) is visited three times a year, and asked a set of basic demographic questions: has anyone been born, died, got married, moved away from here, moved into here? We were able to piggy-back our module about child grants onto this routine census.

Second, as will be seen below, there were a number of children for whom enquiries about grants had been made, but who had not yet obtained them; there were others who were actually receiving the grant. Because we are interested in both these groups, we use the term 'grant reported' for the first group, and 'grant received' for the second.

Third, we asked questions about the three different grants that children can receive: the *CSG*, Foster Care, and Care Dependency. Of those reporting any child-related grants, 94% were about the *CSG*, 3% Foster Care and only 1% Care Dependency. We therefore concentrate only on analysing the *CSG* at this stage.

Fourth, we were very interested to find out what the obstacles were to delivery of the *CSG*, so we constructed a time chart for the stages from first enquiry through to final award, or rejection. This part of the questionnaire was generally answered very poorly, especially by those respondents who were not themselves the primary caregivers - about half of the respondents. Thus we have information about the average length of time it took to get the grant, but not the details we were interested in, about blockages at different stages in the administrative process.

#### **Numbers getting the *CSG***

In the first quarter of 2002, 12 865 children age 0-7 were resident in the area being surveyed. The *CSG* was 'reported' on behalf of 4 684 of these children. Just over a third - 3 754 or 34% - were actively receiving the *CSG*. About 400 more *CSGs* were 'reported' for children who were household members, but they were not resident at that time and are not included in this analysis.

When the *CSG* was introduced, the government said that it wanted to reach 50% of all children. It is likely that the poverty rate is higher than 50% in this rural area. Thus, when the grant 'matures', that is, after the seven years it was estimated it would take to get to most of the targeted group, it should be expected to reach more than half of all the children, rather than the third it was reaching at the time of this survey. We nevertheless think that it is impressive that it reached so many children, so soon after introduction, in this remote and under-serviced area.

#### **Age and sex of children**

More than 80% of children over a year old who have had an enquiry about the grant made on their behalf ('grant reported'), were getting it ('grant received').

Table 1 shows that the average age of children for whom a grant was reported was slightly older than for non-reporting children - 3.18 years compared to 3.08 years.

Figure 1 shows that children in their first year, and children in their sixth year, were less likely to be getting the *CSG*. About 20% of children in their first year have a 'grant reported', and this rises to 40% for those who have passed their first birthday. For the infants this may signify that the caregivers were still getting their ID papers in order, or did not yet know of the *CSG*. For the six year olds, for about 30% of whom the grant is 'reported', it is likely that some caregivers thought it was not worthwhile applying, given the age limit of the seventh birthday.

There was no difference between boys and girls in obtaining a grant.

#### **The primary caregivers - mostly mothers**

The Child Support Grant is one of the few instances of social support nationally and internationally where the idea of a 'primary caregiver', rather than a biological parent, is written down in law as being an appropriate person to receive a form of support on behalf of a child. Those who designed the grant hoped that it would indeed go to mothers, but acknowledged the fact that many children in South Africa are looked after by grannies and aunties.

In this area of KwaZulu- Natal, who were the primary caregivers? It is remarkable that 87% of primary caregivers were resident mothers (not shown in the table). Only 10% were grandmothers, and 1% aunts of the child. Although men can apply as a primary caregiver, only 0.2 % were fathers in this DSA, and no other men (for example, grandfathers or uncles) applied.

The data allow us to compare the ages of mothers who had applied for the CSG and those who had not. The average age of mothers receiving the CSG was slightly higher than those who were not - 31 years compared to 29.3 years, a small but statistically significant difference. Widows (not shown in the table) are more likely to apply for a CSG than women who are married, who in turn are more likely to apply than women who are not married.

Some people fear that the CSG will 'cause teenage pregnancy'. It is always difficult to prove causal relationships; it is certainly too early to think about proving this with respect to such a new form of support. However, this study does provide a useful benchmark. Only 3.7% of the mothers of children in the grant system were less than 20 years old, while 8.7% of the mothers of children who were not in the system were teenaged. This is a statistically significant difference.

Children for whom a grant was 'reported' were much more likely to be living with their mothers than those who were not getting the grant - 82% compared to 67%. We return to this point later.

#### **Informal 'rationing'**

We wanted to establish whether officials may be unofficially 'rationing' the numbers of CSGs per household or per caregiver. In households where there was one reported CSG, we asked whether there were other ageeligible children in the household. Where there was more than one ageeligible child, and where there was at least one grant, there was a high likelihood that other children would be getting the grant as well. This could reflect household need (which we discuss below) and also the presence of a caregiver who has the energy and the appropriate information to enable her to get the grants for eligible children.

Multiple grant holders	
Many people were holding grants for more than one child:	
Grantholder	Number of grants
2338	1
796	2
174	3
12	4
Sixty-two women who held more than one grant were the mother of at least one child and the grandmother of at least one other child with a grant. One woman was grantholder for four children: she was the grandmother of two of them, and the aunt of two others.	

#### **Children and their parents**

One of the most striking findings of the study is that children who do not reside with their mothers are significantly at risk for not receiving the grant. We used four categories to classify the vital status of a parent: whether they were resident, nonresident, known to be dead, and 'missing' (none of the previous three categories).

Regardless of the vital status of the father, children whose mothers are non-resident, or dead, or who are 'missing', are significantly less likely to get the CSG, than are children who are living with their mothers - 82% compared to 67%.

This finding is very important, as it is inconsistent with the popular belief - indeed, the popular fear - that mothers apply for the grant and then leave their children in someone else's care. It is consistent, however, with other international evidence that children living apart from their mothers - in both poorer and richer countries - face special risks.

Why are more grannies and aunties not applying for this modest, yet materially significant, form of support? One explanation may be that it is not yet widely known that you do not have to be the biological mother to be the primary caregiver. Perhaps, in the absence of the mother, it is more difficult to get the child's birth registered, and thus more difficult to access the grant. The CSG is currently being extended to children aged 7 to 12, who are even less likely than younger children to be residing with their mothers. This makes a better understanding of this phenomenon essential.

An important finding was the high numbers of children whose father's vital status is not known at all (not in the table) - 52% of children for whom a grant was reported, and 60% of children for whom a grant was not reported. While some fathers would have been present at some time of the child's life, some would not ever have been known. This lack of close paternal relationships is of great concern. The number of parents who were 'missing' in this way was much lower for mothers than for fathers, and very much lower - though still of great concern - for children reporting the grant (6%) than for children not reporting the grant (16%).

Much policy confusion is sown by automatically equating orphanhood with the formation of child-headed households. We know from elsewhere in the ACDIS data that there are effectively none of these in the DSA. In this area, as in other rural areas, being orphaned does not necessarily mean being abandoned, and has not yet led to the formation of child-headed households. The capacity of these mainly rural, extended families to absorb children into their care is truly remarkable. Attention should focus as much on how to support families in doing this (one means being the CSG itself) as on how to cater specifically for child-headed households.

#### Poverty targeting

Is the CSG reaching children in poorer households, as intended? Only 16 of all the applications that had been made for the CSG were rejected. Was it possible that officials were processing the grant for all who applied, without administering the means test? At that stage, the means test was that the parents' or caregivers' income should not exceed R1100 a month in rural areas, or R800 a month in urban areas.

There are at present no reliable income figures for these households. However, we have data from another part of ACDIS about three things that are known to be closely associated with poverty in South Africa: parents' employment status, parents' education status, and the number and types of assets owned by households. We can compare grant-reporting and non grant-reporting parents and households with respect to these three variables. The results show very clearly that the CSG is indeed going to children in poorer circumstances.

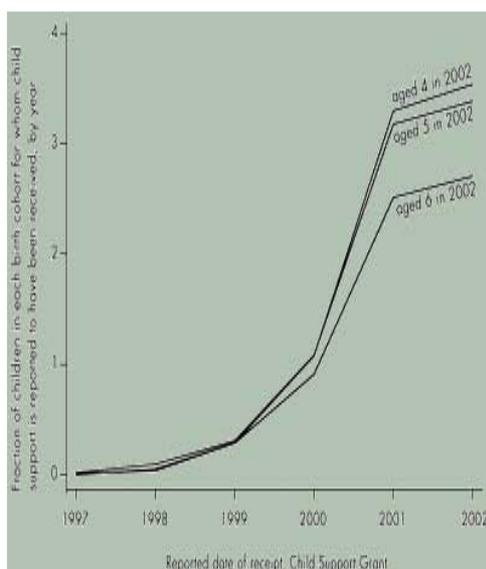


Figure 2. Child Support Grant status, by age, Resident children aged 0 to 5

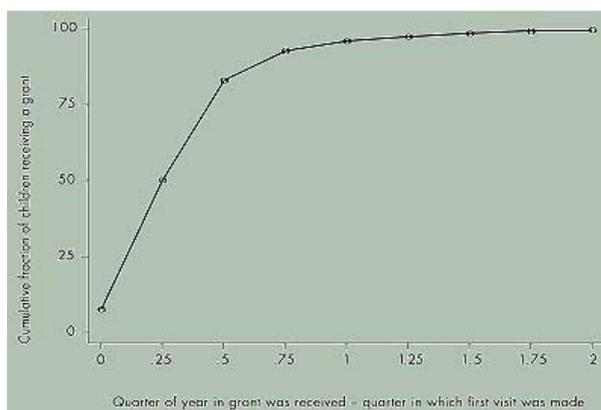


Figure 3. Time to receipt of a Child Support Grant for resident children

Both the mothers and the fathers of the children for whom a grant was being reported were more likely to be unemployed and, if they were employed, were more likely to be in part-time rather than full-time employment. With regard to education levels, the fathers and mothers of grant-reporting children had fewer years of completed schooling than those for whom grants were not reported.

On average, children with a grant lived in households that owned significantly fewer assets as a whole. The ownership of luxury items, such as a car, hot water geyser, or computer, was negatively and significantly related with reporting a CSG. This suggests that a form of self-selection in targeting was taking place: wealthier people were not bothering to apply for the R120 a month, the amount of the CSG at that time.

#### Take-up pattern and time to receipt

The CSG is obviously not yet reaching everyone it should. However, it is going as expected, and as projected by the Department of Social Development. Figure 2 shows the fractions of children aged 4, 5 and 6 years old who received the CSG in different years. For all the age cohorts, a slow beginning was followed by a dramatic rise in 2000.

The pattern reflects the usual 'Sshaped curve' of implementation of a new programme. There was an initial delay with implementation while the mechanics of the means test were being designed. Then officials had to learn how to apply the new regulations and how to administer the means test. The first set of regulations, which were poorly drawn up, had to be amended to be more in line with the initial policy intent. Also, the public had to learn about this form of support and get their papers in order. Hlabisa has a dire under-provision of home affairs offices and of welfare officials, including social workers. By any standard, in an area this remote, and with this level of development, the speed of delivery of this new form of support for poor children has been creditable.

Figure 3 shows the length of time that it took between initial enquiry and receipt of the grant. Fifty percent of those who applied and received it did so within three months; more than three-quarters did so within six months.

We can speculate that new strains will now be put on the system by the combination of increasing applications for Care Dependency Grants and Foster Care Grants, as well as the extension of the age of eligibility of the Child Support Grant to children aged 12. Using the ACDIS data, 587 children under age 18 can be identified as double orphans (both parents dead). Of these, only 10% were reported with a Foster Care Grant. Social workers in the area report large backlogs in Foster Care processes, owing to the demands of administering the CSG. We know that without a birth certificate for both parents, there is little chance of securing a Foster Care Grant.

#### Conclusion

This paper and a fuller report on the research results present the first round of analysis of the research in Hlabisa. We will be doing further work on the characteristics of the households and on things that place children's development at risk.

The advantage of doing this research in Hlabisa is that it is a signal site - it is exactly the kind of area that the CSG was intended to reach. Being able to piggyback it on the Africa Centre's routine data collection meant that a large number of households could be

reached. The disadvantage, of course, is that results are only true for Hlabisa. We do not know whether the speed of uptake was because of the presence or lack of different kinds of officials, or presence or lack of particular publicity campaigns, for example.

At the time of writing (October 2003), the Child Support Grant amount has been increased to R160 per month and the number of grants awarded nationally has reached three million. As this new form of social provision extends, it will be important that rigorous research is done about both its reach and its impact, in different parts of the country.

Endnote: Further research results are available in a Working Paper called: The Reach of the South African Child Support Grant: Evidence from KwaZulu-Natal, by Anne Case, Princeton University; Victoria Hosegood, Africa Centre for Health & Population Studies, and London School of Hygiene & Tropical Medicine; Francie Lund, University of Natal, Durban, October 2003. The working paper is posted at <http://www.childrenfirst.org.za/www.nu.ac.za/csds> as CSDS Working Paper No. 38, and <http://www.childrenfirst.org.za/www.wvs.princeton.edu/~rpds/papers.htm> as RPDS Working Paper No. 223.

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