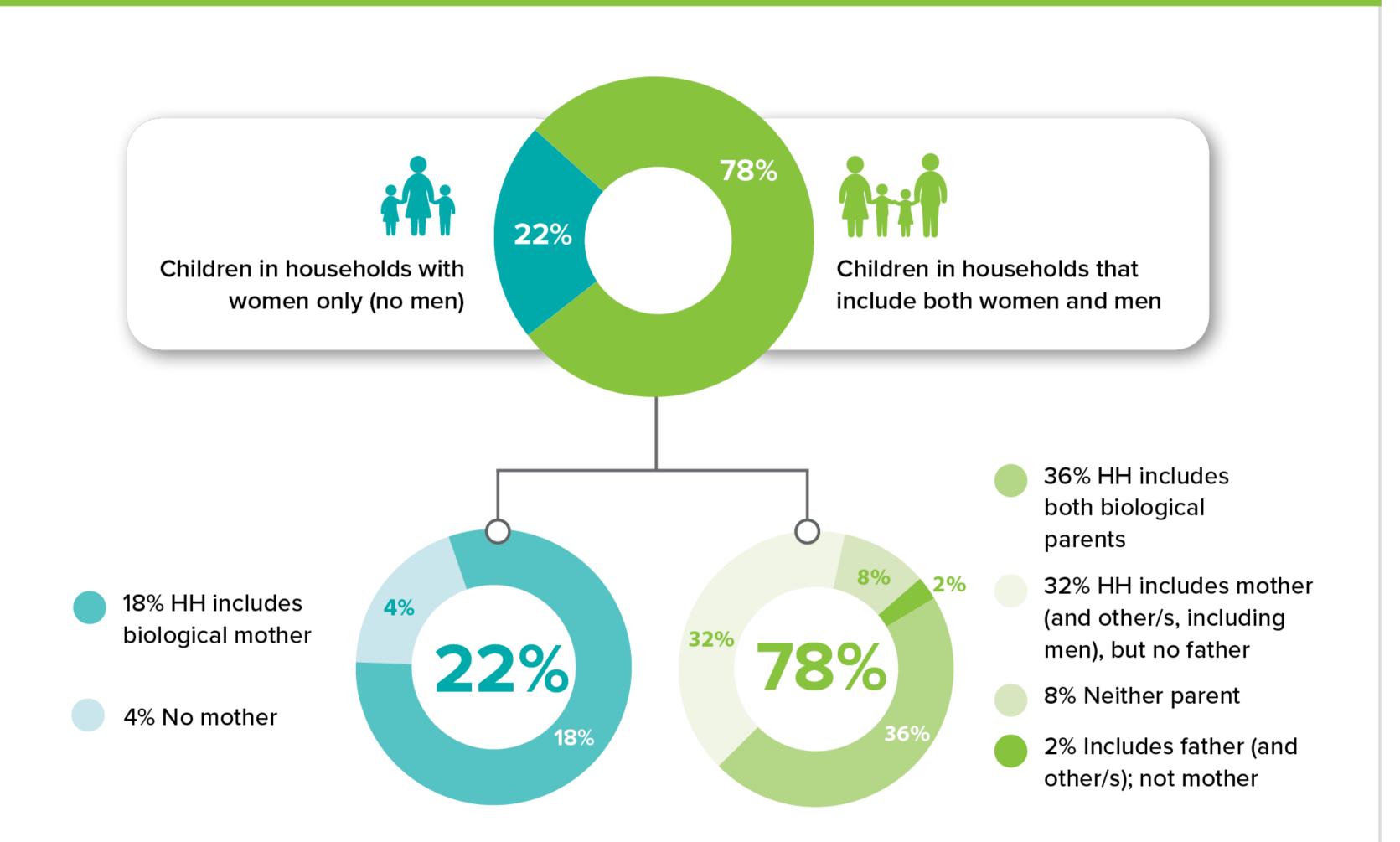


4. Support for primary caregivers

Hall K, Almeleh C, Giese S, Mphaphuli E, Slemming W, Mathys R, Droomer L, Proudlock P, Kotze J, and Sadan M. South African Early Childhood Review 2024. Cape Town: Children's Institute University of Cape Town and Ilifa Labantwana

Who are South Africa's primary caregivers?

- Women bear significant financial responsibility for children. Over 90% of adult beneficiaries of the Child Support Grant are women.
- Despite gains in women's labour force participation in recent decades, the **COVID-19 pandemic reversed progress**, leading to increased unemployment and childcare responsibilities for women, who have been slower to recover in comparison to men.
- 84% of children under the age of six years live with their biological mother, while only 38% have a biological father in their household.
- Marriage rates continue to decline, and many children are born outside of marital unions, often growing up without a co-resident father. Around 4.6 million children under six do not have a co-resident father.
- Children in poorer households are less likely to live with both parents compared to those in wealthier households. In the poorest 20% of households, only 19% of young children live with both parents, compared to 78% in the wealthiest 20% of households; and 79% of the poorest children do not have a coresident father, compared with 20% of the wealthiest.



Constellation of services to support caregivers and children



Affordable, available and enriching childcare and education spaces for young children near to where they live

CAREGIVERS +

CHILDREN



Easy access to quality, timely and relevant parenting information, targeted at women and men, through multi-channel public communications:

- · Print e.g. Road to Health Booklet
- Radio Shows
- · Digital e.g. Facebook, **MomConnect**
- · Maternal child health call centre
- Television



LINKAGE TO SERVICES

Quality home-visiting by community health workers to all vulnerable households

- · Maternal and child healthcare (linkage)
- · Social Grants / Birth Reg / IDs (linkage)
- Nutrition counselling (direct)
- Parenting counselling (direct)



INCOME SUPPORT

- Maternal support grant for vulnerable pregnant women
- · Increased coverage of Child Support Grant (CSG) from birth
- · Increased value of CSG to food poverty line
- · Linkage to job opportunities
- · Reduce cost of highly nutritious basic foodstuffs



RESPONSIVE AND SENSITIVE SERVICES

- · Primary clinic-based healthcare workers support parents/caregivers
- Provision of nutrition and health promotion at
- · Antenatal support (and support groups) for pregnant women



- Evidence based individual/group parenting programmes targeted at most vulnerable households
- Tech-enabled parenting programmes



FIGURE 14: CO-RESIDENCE OF BIOLOGICAL PARENTS WITH CHILDREN UNDER SIX



Source: K Hall analysis Stats SA GHS 2022

Men as co-carers

- With almost 80% of children living in homes where men are present, there is potential for men to take on childcare roles. The antenatal stage and first two years of the child's life are a pivotal time to consciously involve male partners as caregivers, potentially setting them up for a continued care role across the life course of their child.
- Antenatal and postnatal clinic visits are relatively well-attended by pregnant and post-partum women. 76% of pregnant women attend at least four antenatal visits, and 75% of women access postnatal services six days post-delivery. They are important points of opportunity to include and involve fathers from the start of their child's life.



The public health sector can promote male partner-friendly maternity clinics by sensitising healthcare workers to the maternal and child health and wellness benefits of father involvement so that they enable and encourage male partners to join their pregnant partners at antenatal clinic visits. The health system needs to make it possible for fathers to accompany women for antenatal visits.

Care for parental mental health

- Perinatal depression and anxiety can have intergenerational ramifications associated with pre-term birth, low birth weight, malnutrition and suicide. In South Africa, the rate of perinatal depression is approximately 40%.
- Despite improving mental health policies to include routine screening, serious implementation challenges remain.
- Teenagers and young women are at a higher risk for perinatal depression and anxiety. South Africa has relatively high rates of childbearing among women under 24 years. The reported rate remained fairly stable for over a decade, with less than 3% of teenage girls aged 15-17 giving birth each year. The rates rise to around 8% of young women aged 18-20 and 10% in the 21-24 age group.
- The babies of teenage mothers may also need additional monitoring and support to ensure that they develop healthily and are adequately provided for, including being cared for in safe environments if the mother needs to return to school after birth.



Caregiver mental health support needs to be differentiated to cater to the needs of particularly vulnerable caregivers, such as teenagers and young adults without adequate family support.

Income support and nutrition for caregivers



The share of children under six years living in a home where no adults are employed increased from 29% in 2018 to 32% in 2022.

- The share of children under six living in food-poor households has increased from 33% in 2018 to 39% in 2022.
- Over the same period, the share of children under six years living in a home where no adults are employed increased from 29% to 32%.
- In 2022, 26% of children under six lived in households that had to **reduce the range of foods in their diet due to lack of money**, and 20% lived in households that had months when they **ran out of money for food.** The effects of poverty and food insecurity are not only reflected in child malnutrition and high stunting rates, there are also likely to exacerbate stress and poor mental health among their mothers.
- A maternity support grant for pregnant women has been proposed as a
 feasible and effective intervention that could be implemented within
 existing social support programmes. The grant would help to ensure healthy
 pregnancy, mitigate the risks of child stunting and other childhood
 illnesses, likely improve the mental well-being of mothers, and address
 the persistently low uptake of the CSG for infants by ensuring a seamless
 transition to the CSG immediately from birth.

TABLE 6: INDICATORS OF SUPPORT FOR PRIMARY CAREGIVERS, BY PROVINCE

	3 Year hange	Indicator	SA	EC	FS	GT	KZN	LP	MP	NW	NC	wc	Data year	source
Population	+	Children with co- resident mothers Children under-6 who live with their biological mother in the same HH	84%	73%	85%	91%	77%	85%	84%	85%	88%	93%	2022	b
	+	Children with co- resident fathers Children under-6 who have their biological father in the same HH	38%	24%	46%	56%	24%	33%	33%	30%	41%	56%	2022	b
	+	Female care burden Children under-6 who live in women-only HHs	1 512 000 22%	193 000 24%	80 000 24%	243 000 15%	337 000 24%	249 000 29%	152 000 25%	158 000 30%	25 000 16%	75 000 10%	2022	b
	+	Babies with young mothers Infants <1 whose mothers were teens (<20 years) when they were born	97 000 8%	20 000 14%	4 000 7%	24 000 9%	17 000 7%	13 000 10%	1 000	9 000	1 000 3%	9 000	2022	b
Service access	?	Breastfeeding education % of mothers (15-49 years) who reported receiving information on breastfeeding	82%	86%	88%	72%	92%	94%	70%	79%	88%	86%	2016	h
	?	Follow-up ante-natal visits % of pregnant women attending facilities who had at least 4 ante-natal visits	76 %	82%	78%	62%	77%	82%	73%	89%	75%	89%	2016	h





numbers have increased or decreased since the pre-COVID baseline on significant change between pre-COVID baseline and most recent data



worsening / negative improving / positive no significant change no discernible change due to lack of comparative data

Data gaps

- There is a need for nationally representative data on perinatal services to support mothers, such as follow-up antenatal visits and breastfeeding education.
- There is a need for reliable national data on the prevalence of mothers who **struggle with poor mental health.**