Introducing Children Count

South Africa's commitment to the realisation of socio-economic rights is contained in the Constitution, the highest law of the land. It includes provisions to ensure that no person should be without the basic necessities of life. These are specified in the Bill of Rights, particularly section 26 (access to adequate housing); section 27 (health care, sufficient food, water and social security); section 28 (the special rights of children) and section 29 (education).

Children are specifically mentioned and are also included under the general rights: every child has the right to basic nutrition, shelter, basic health care services and social services. These form part of what are collectively known as socio-economic rights. While these rights are guaranteed by the Constitution, the question is: how well is South Africa doing in realising these rights for all children? To answer this question, it is necessary to monitor the situation of children, which means there is a need for regular information that is specifically about them.

A rights-based approach

Children Count was established in 2005 to monitor progress for children and is an ongoing data and advocacy project of the Children's Institute, updated every year. It provides statistical information that can be used to inform the design and targeting of policies, programmes and interventions, and as a tool for tracking progress in the realisation of children's rights.

Child-centred data

Any monitoring project needs regular and reliable data, and South Africa is fortunate to have a reasonably good supply. There is an array of administrative data sets, and the national statistics body, Statistics South Africa (Stats SA), undertakes regular national population surveys that provide useful information on a range of measures. Most reports about the social and economic situation of people living in South Africa do not focus on children, but rather count all individuals or households. This is of limited use for those interested in understanding the situation of children.

'Child-centred' data does not only mean the use of data about children specifically. It also means using national population or household data and analysing it at the level of the child. This is important because the numbers can differ enormously depending on the unit of analysis. For example, national statistics describe the unemployment rate, but only a child-centred analysis can tell how many children live in households where no adult is employed. National statistics show the share of households without adequate sanitation, but when a child-centred analysis is used, the share is significantly higher.

Counting South Africa's children

Children Count presents child-centred data on many of the areas covered under socio-economic rights. As new data become available with the release of national surveys and other data sources, it is possible to track changes in the conditions of children and their access to services over time. This year, national survey data are presented the period 2002 to 2020, and many of the indicators in this issue compare the situation of children over this 19-year period.

The main household survey used as a data source for *Children Count* is the General Household Survey (GHS), a large nationally representative survey that Stats SA runs every year. We analyse the raw data to derive statistical estimates for the *Children Count* indicators. Usually, the survey is undertaken through face-to-face interviews at people's homes and fieldwork runs throughout the year. In 2020, data collection was stopped abruptly in March due to COVID-19 and lockdown. Stats SA revised the questionnaire so that interviews could be conducted telephonically and conducted the survey between September and December 2020. There were two important consequences of this change.

First, the survey only included households in the sample that were contactable by telephone, limiting the sample to those who had previously provided phone numbers in 2019 and whose numbers still worked in 2020. The response rate was unusually low (39.4% in 2020, compared with 87.2% in 2019). Although Stats SA adjusted the population weights to control for bias, the profile of people who have phones is different from those who do not (or those whose numbers change), and bias adjustment is unlikely to be able to correct adequately for the skewed sample. Stats SA acknowledges that because the GHS estimates are not based on a full sample, comparisons with previous years should be made with caution, especially when interpreting results at low levels of disaggregation.

Second, because the survey was adjusted to allow for telephonic interviews, it needed to be shortened. Some of the questions usually analysed for *Children Count* were excluded – notably the time taken to get to school and to health facilities, and the questions on pregnancy and birth. For these indicators we have used 2019 data.

The tables on the following pages give basic information about children's demographics, care arrangements, income poverty and social security, education, health and nutritional status, housing and basic services. Each table is accompanied by commentary that provides context and gives a brief interpretation of the data. The data are presented for all children in South Africa and, where possible, by province.

The indicators in this *South African Child Gauge* are a sub-set of the Children Count indicators. The project's website contains the full range of indicators and more detailed interactive data, as well as links to websites and useful documents. It can be accessed at www.childrencount.uct.ac.za.

Confidence intervals

Sample surveys are subject to error. The percentages simply reflect the mid-point of a possible range, but the true values could fall anywhere between the upper and lower bounds. The confidence intervals indicate the reliability of the estimate at the 95% level. This means that, if independent samples were repeatedly taken from the same population, we would expect the estimate to lie between upper and lower bounds of the confidence interval 95% of the time.

It is important to look at the confidence intervals when assessing whether apparent differences between provinces or subgroups are real: the wider the confidence interval, the more uncertain the estimate. Where confidence intervals overlap for different subpopulations or time periods, it is not possible to claim that there is a real difference in the estimates, even if the mid-point percentages differ. In the accompanying bar graphs, the confidence intervals are represented by vertical lines at the top of each bar (]).

Data sources and citations

Children Count uses a few data sources. Most of the indicators are analysed by our team using data from the General Household Survey while some draw on administrative databases used by government departments (Health, Education, and Social Development) to record and monitor the services they deliver.

Most of the indicators presented were developed specifically for this project. Data sources are carefully considered before inclusion, and the technical notes and strengths and limitations of each are outlined on the project website.

Here are a couple of examples of how to reference *Children Count* data correctly:

When referencing from the *Demography* section in this publication, for example:

Hall K (2020) Demography of South Africa's children. In: Tomlinson M, Kleintjes S & Lake L (eds) *South African Child Gauge 2021*. Cape Town: Children's Institute, University of Cape Town.

When referencing from the Housing and Services online section, for example:

Hall K (2022) Housing and Services – Access to adequate water. Children Count website, Children's Institute, University of Cape Town. Accessed on 20 May 2022: www.childrencount.uct.ac.za

Each domain is introduced below, and key findings are highlighted.

Demography of South Africa's children
(pages 164 – 168)
This section provides child population figures and gives a profile of South Africa's children and their care arrangements, including children's co-residence with biological parents. There were 20 million children in South Africa in 2020 and 20% of children do not live with either of their biological parents.

Income poverty, unemployment and social grants
(pages 169 – 176)
Job loss due to lockdown had a direct effect on children. Unemployment increased and in the latter part of 2020, 36% of children lived in households where nobody was earning income through employment or self-employment (up from 30% in 2019). Alongside the rise in unemployment, income poverty rates increased. Income poverty rates are calculated in two ways: with

and without disaster relief grants and top-ups. In the absence of disaster relief, the child poverty rate at the upper bound poverty line was 63%, while 39% of children (8 million) were below the food poverty line. In a scenario for the months where the full disaster relief programme was in place, strong protective effects are evident, with the upper bound poverty rate among children reduced to 60% and the food poverty rate to 34%. Social assistance grants are therefore an important source of income for caregivers to meet children's basic needs and to protect children and their households from income shocks. In March 2022, 12.9 million children received the Child Support Grant (a slight drop from the previous year); 252,000 children received the Foster Child Grant (a substantial and consistent decline in numbers over the past decade). The Care Dependency Grant has remained stable, with about 150,000 child beneficiaries in 2022.

Child health
(pages 177 – 183)
This domain monitors child health through a range of indicators. Over 2 million children (11%) live in households where children are reported to experience hunger. Under-five mortality has decreased from 39 deaths per 1,000 live births in 2015 to 28 deaths per 1,000 live births in 2020. The infant mortality rate has also declined and is estimated at 21 deaths per 1,000 live births in 2020. The neonatal mortality rate, however, has remained stable at 12 per 1,000 live births over the six-year period. A fifth (19%) of children travel far to reach their primary health care facility and 83.5% of children are fully immunised in their first year.

Children's access to education
(pages 184 – 191)
South Africa has made significant strides in improving access to education with a reported attendance rate of 97% in 2020. Access is also increasing in the preschool years, with 93% of 5 – 6-year-olds attending some kind of educational institution or care facility. However, this does not necessarily translate into improved educational outcomes or progress through school. A third of young people aged 15 – 24 (35%) are not in employment, education or training, and there has been no improvement in this measure since 2002.

Children's access to housing
(pages 192 – 195)
This domain presents data on children living in rural or urban areas, and in adequate housing. The latest available data show that, in 2020, 57% of children were living in urban areas, and 85% of children lived in formal housing. Nearly one in ten children (1.6 million) lived in backyard dwellings and shacks in informal settlements, and one in fie children (21%) lived in overcrowded households.

Children's access to basic services
(pages 196 – 198)
Without water and sanitation, children face substantial health risks that also compromise their nutritional status. In 2020, 70% of children had piped drinking water at home, and 78% have an adequate toilet on site – an improvement from 47% in 2002.