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The utilisation of child support grant by caregivers : the case of Ba-Phalaborwa sub-district in the Limpopo Province of South Africa.

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2013-07-24
http://hdl.handle.net/10539/12898

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CHAPTER 1: INTRODUCTION

1.1. BACKGROUND

This chapter introduces the study. Specifically, the chapter presents the statement of the problem and rationale for the study, aim and objectives of the study and a brief overview of research methodology. The chapter concludes with the organisation of the report.

According to Samson, van Niekerk, and Mac Quene (2010), many countries around the world are increasingly adopting national social protection strategies in order to build a comprehensive social protection system that aims to tackle poverty, risk, vulnerability, exclusion, and other social problems. If implemented effectively, these strategies are likely to promote human security and development, and contribute to pro-poor and inclusive economic growth. Samson et al. (2010) further state that the success of such strategies, especially in the form of cash transfer programmes largely depends on the policy environment, the historical evolution, and institutional arrangements within the country.

Moreover, the identification, design, and implementation of cash transfer programmes within larger social protection strategies usually involves policy instruments that fall under the domain of different government ministries. Effective interventions usually require the involvement of several ministries, often including the relevant social welfare ministry; the ministry responsible for gender, women, children, older people and people with disabilities; the labour ministry; and ministries responsible for human capital services such as health and education. The finance ministry and the planning function within government also play a critical role (Samson, van Niekerk, and Mac Quene 2010).

Child Support Grant (CSG) is one of the policy strategies implemented by the South African government in order to address child poverty. The CSG is said to be a rare example in Africa of a comprehensive social grant programme for poor children. The grant was introduced in 1998 following a recommendation by the Lund Committee, which was established with the aim of exploring new alternative policy options targeting children and families as part of the ANC government's commitment to poverty reduction (Department of Social Development, 2011).

Mutshaeni (2009) states that the Department of Social Development has accordingly been delegated to administer the CSG. He further highlights that this function is assigned to the provinces as stipulated in Schedule 4 of the Constitution of the Republic of South Africa. Therefore, provinces such as Limpopo are required to ensure, among other things, effective and efficient services towards the child support grant. This implies that the province has to ensure that the CSG is administered in accordance with government legislation and policies. The Department of Social Development however works in collaboration with other departments and has formed partnerships with departments of Justice, Health, Home Affairs, Education, Labour, and Housing (Department of Welfare in Triegaardt, 2005). Triegaardt (2005 p. 252) noted that, 'Inter-sectoral collaboration has to be managed and coordinated so that all the sectors can promote the effective capacity and support of children to alleviate poverty.'

Section 28 of the South African Constitution has listed rights of children and among them is the right to basic nutrition, shelter, basic health care services, and social services. Mutshaeni (2009) argues that, 'some of these children's rights have in a way motivated the formulation of the Child Support Grant.' This grant is the major role-player in the efforts of the current government to make some of the children's rights a reality. This was done through the mandate by the United Nations Convention on the Rights of the Child (CRC), which the South African government signed in November 1993 and ratified in 1995 (Mutshaeni, 2009).

The CRC stated the following key rights of every child, which include the right to:

- Survival and development;
- an adequate standard of living;
- the highest attainable standard of health, and effective health services;
- special care, if he or she is disabled, that ensures dignity, promotes self-reliance and facilitates active participation in the community; and
- social security and childcare services and facilities.

It is further stated in the CRC that the social security benefits should be granted, taking into account the resources and the circumstances of the child and persons having responsibility for the maintenance of the child, as well as any other consideration relevant to an application for benefits made by or on behalf of the child (CRC, 1989 p. 8). Samson et al. (2010) are of the

view that it is also important to consider who in the household receives cash transfers. It is argued that there is a significant difference when women receive the transfers. They suggest that cash in women's hands leads to greater improvement in children's wellbeing. In addition, Case, Hosegood and Lund (2005) indicate that the CSG recipient is defined as the child's primary caregiver, although not exclusive to women, the majority of the recipients are women, especially mothers.

This grant is meant to supplement the income received in families so that children do not suffer from hunger. According to Triegaardt (2005), the intention of introducing this social grant was to target impoverished young children with the purpose of poverty alleviation and not prevention. The grant is allocated to poor households irrespective of the child's family structure. Thus, the CSG serves as an important means of poverty alleviation because it contributes to the main income of many impoverished families (Triegaardt, 2005).

The CSG started with an amount of R100 per child monthly. The amount currently stands at R280 per child per month (Department of Social Development, 2011). It initially targeted children up to the age of seven. The age has gradually increased to 18 years, which corresponds with the definition of a child as stipulated in the Children's Act. The CSG has the largest uptake among other social grants. In June 2010, the CSG recipients were approximately 9.8 million (SOCPEN system 2010) and in 2012 the number had increased to over 11 million recipients (SOCPEN system 2012). The grant is continuously reaching more people. This may be attributed to the increase in the age of eligibility. Another contributing factor could be because the CSG is one of the major grants that is typically paid to a healthy person of working age. Additionally, the CSG is paid to groups that are known to be vulnerable wherein 76.7 per cent of the CSGs are paid to African females of working age who are mostly under the age of 30. Nevertheless, the CSG is known to be the only grant with a means test that is stringent enough to be a binding constraint on many poor families, which might create a disincentive effect (Williams, 2007).

The Department of Social Development (2011) reports that previous impact evaluations on the CSG have found that the grant is associated with a range of positive outcomes for children, such as hunger reduction, improved nutrition wherein CSG beneficiaries were observed to be taller than other children of the same age and higher rates of school enrolment and attendance. Furthermore, the CSG also benefits mothers and other caregivers in several

ways, such as reducing poverty gaps, empowering women to manage cash and household budgets, and financing the costs of seeking and finding employment.

Kola et al. cited by Hunter and Adato (2007) report that in Limpopo, the CSG accounted for an average of 51 per cent of household income. The authors further stated that the majority of CSG recipients observed that the CSG improved their ability to care for children and buy necessities for them. Some recipients however said that there had not been an impact because of the grant's amount and because it was used for the whole household.

Moreover, Goldblatt (2006) identified the need for research on the social consequences of the CSG and specifically research on the spending of the grant. Hunter and Adato (2007) also confirmed that there is an increasing popularity of cash transfers and an interest in how they are used. Mutshaeni (2009) also believes that the utilisation of CSG is overlooked in the legislature and a need to focus on this area is relevant. Although some of the families depend solely on the grant, it is mainly targeted at children. Therefore, it is crucial that the grant be utilised in the best interest of children. Hence, the study sought to explore how caregivers utilise CSG in Ba-Phalaborwa community in the Limpopo Province.

1.2. STATEMENT OF THE PROBLEM AND RATIONALE FOR THE STUDY

According to Article 26(1) of the Convention on the Rights of the Child (CRC), every child has the right to social security benefits. Nkosi (2009, p. 410) states that 'the CRC further highlights that every child has the right to a standard of living adequate for his or her physical, mental, spiritual, moral and social development'. Section 9 of the Children's Act no. 38 of 2005 provides that in all matters concerning the care, protection and well-being of a child, the child's best interest is of paramount importance. In addition, all children have the right to have their basic needs met, not only for survival and protection but also to be able to develop to their full potential, to participate as members of society (according to their age and development), and to grow up to be caring and responsible citizens. However, some caregivers fail in ensuring that the basic needs of children are met. For instance, although the CSG is meant to alleviate poverty among children, some of the caregivers who receive the grant on behalf of the children are reported to be misusing the grant and not utilising it in the best interest of the children. When they fail to do so, childhood poverty will persist and it is strongly associated with less schooling, lower educational attainment, malnutrition, and low standard of living.

The researcher developed interest in conducting this study on the utilisation of the CSG due to her observation that caregivers were misusing the grant. As a social worker, the researcher was confronted by many cases of child neglect whereby a large number of children were reported to be neglected. Some were sleeping without food while their caregivers were receiving the CSG. Based on her assessment of the reported cases, it was discovered that the basic needs of most children are not met. The researcher therefore concluded that the CSG does not necessarily benefit the children who are in need. It appears that the utilisation of the CSG by caregivers has not been sufficiently documented. The findings of the study will therefore broaden an understanding of how caregivers utilise the CSG. It is envisaged that the study will assist policy makers in evaluating the impact of the grant and how the policy can be strengthened or improved in order to ensure that the targeted population is reached and the objectives of the policy are achieved.

1.3. AIM AND OBJECTIVES OF THE STUDY

Aim

The aim of the study was to explore the extent to which caregivers utilise the Child Support Grant in the best interest of children.

Objectives

The study's objectives were as follows:

- To investigate how caregivers utilise the Child Support Grant
- To establish perceptions about the use and abuse of the Child Support Grant
- To establish the views of caregivers on how the Child Support Grant can be utilised in the best interest of children

1.4. RESEARCH QUESTIONS

The study's objectives were guided by the following research questions:

- How is the Child Support Grant utilised?
- What are the participants' perceptions about the use and abuse of the Child Support Grant?
- How can the Child Support Grant be utilised in the best interest of children?

1.5. OVERVIEW OF THE RESEARCH METHODOLOGY

This study used a qualitative approach and was exploratory in nature. The study was conducted in Ba-Phalaborwa sub-district in the Mopani District of the Limpopo Province, wherein the sample of the study was drawn from a population of 27 945 recipients of the CSG in the sub-district. A non-purposive sampling technique was used to select a sample of 20 caregivers aged between 21 and 50 who were also the beneficiaries of social relief of distress. A semi-structured interview schedule was used to collect data. Face-to-face individual interviews were conducted with the respondents. The interviews were audio-recorded and transcribed to make retrieval easier. In analysing the data, the researcher evaluated the collected data for its usefulness. Thematic content analysis was used in analysing the data. The data were also presented in accordance with the research objectives.

1.6. ORGANISATION OF THE REPORT

This research report has five chapters. Chapter One provided an introduction to the study and specifically focused on the statement of the problem and rationale for the study, the overall aim, objectives, research questions and a brief description of the research methodology. Chapter Two provides the literature review and focuses on the conceptualisation of social security, the historical background of social security in South Africa, and examines the CSG. Chapter Three gives a detailed explanation of methodology adopted in the study. Chapter Four presents and discusses the research findings. A summary of the findings, conclusions, and recommendations are outlined in Chapter Five.

CHAPTER 2: CHILD SUPPORT GRANT IN SOUTH AFRICA

2.1. INTRODUCTION

This chapter reviews literature on Child Support Grant (CSG) in South Africa and begins by conceptualising social security; thereafter it discusses the South African social security system. The chapter also presents the historical background of the system looking at pre- and post-apartheid periods. It provides the history of the CSG as one of the social assistance programmes aimed at alleviating poverty. It explores the impact and reach of the grant. The question of how the grant serves as a strategy for poverty alleviation is also addressed. Finally, the chapter discusses the challenges being experienced in providing the CSG.

2.2. CONCEPTUALISATION OF SOCIAL SECURITY

International Labour Organisation (2000 p.29) defines social security as 'The protection which the society provides for its members through a series of public measures, to offset the absence or substantial reduction of income from work resulting from various contingencies (such as sickness, maternity, employment injury, unemployment, invalidity, old age and death of the breadwinner); to provide people with health care; and to provide benefits for families with children.' According to Patel (2005), this definition by ILO affords both government and the private sector to intervene in order to ensure the protection of individuals who are unable to provide for themselves and to mobilise resources to take care of themselves due to the contingencies they have experienced which are beyond their control.

Patel (2005) believes that there is no agreement on how comprehensive social security should be, especially in developing countries due to resource constraints, limited formal employment, and inadequate institutional capacity and administrative systems to deliver services effectively and efficiently. This means that, in developing countries social security cannot be conceptualized looking only at the formal wage economy, since the majority of the people are employed in the informal sector and not all of them benefit from the current formal social security system.

In the SADC region, for instance, Charter of Fundamental Social Rights in SADC indicates that each Member State shall create an enabling environment so that every worker in the Region shall have a right to adequate social protection and enjoy adequate social security benefits, regardless of status and the type of employment. It further indicates that persons who are unable to participate in the labour market and are without a means of support shall be

entitled to receive sufficient resources and social assistance (SADC quoted by Wright & Noble 2010). Every Member State is expected to maintain its social security system at a satisfactory level at least equal to that required for ratification of International Labour Organization (ILO) Convention 102. However, every Member State should seek to improve its social security system, bearing in mind the realities and level of development in the particular Member State (Wright & Noble 2010).

Tshoose (2010) concurs that the Western orientated concept of social security may also not be able to capture the characteristics of the African context sufficiently. It recognises that social security is not a fixed concept. Thus, social security cannot be defined with regard to the content of the intended scheme because it will leave insufficient room for the development of social security and to provide for new answers to any new social problems that may arise.

Social security systems in the developed countries are based on a nuclear family wherein a male is regarded as the head and the only provider in a household. These countries experience limited social assistance coverage because most people have employment and work related social benefits in accordance with their full employment policies. This is not the case in South Africa due to prevailing unemployment and poverty (Lund in Patel 2005). In South Africa, the majority of people are employed in the informal sector. The family structures have evolved over the years, with single parent-headed and child-headed families becoming dominant. Moreover, the country is also faced with a growing HIV and AIDS pandemic which continues to have devastating economic and social consequences for the country. For instance, HIV and AIDS related deaths are reflected in the growing number of AIDS orphans and the increasing number of households headed by children (Patel 2005).

Due to the challenges experienced by developing countries, the Taylor Committee saw a need for general social protection that supports the unemployed and the working poor (Committee of Inquiry into a Comprehensive Social Security System quoted by Patel 2005). The Taylor Committee broadened the vision of social security to integrate those people who are marginalised and excluded from coverage of the present social security system. For instance, the Taylor Committee recommended the introduction of a basic income grant (BIG). The proposed amount was R100 per person monthly for every South African citizen, regardless of age or income level (Samson et al. 2002 and Makino 2004). It was however debated if the amount of benefit paid under the comprehensive system will adequately meet the basic needs

of healthy working-age adults. In response, EPRI authors argued that a BIG represents an effective, economically affordable and economically beneficial policy instrument to reach the poor in South Africa. It was further suggested that much of the expenditure could be recovered through careful use of the tax system, which the opponents of BIG argued was not sustainable (Samson et al. 2002). According to Whitworth & Noble (2008), in terms of effectiveness, a BIG's ability to provide complete coverage and take-up was emphasised, although it may not be a guaranteed outcome, given the problems of delivery evidenced by the low take-up of other social grants such as a disability grant (DG). The committee's agenda was to locate social security within a human development and a social justice perspective, emphasising the relationship between social and economic development. It thus advocated for minimum standard of living for all citizens (Committee of Inquiry into a Comprehensive Social Security System cited by Patel 2005).

Tshoose (2010) believes that there is a close interrelationship between the concept of social security and several other related concepts that constitute the basis of specific fundamental rights, such as the right to have access to land, housing, health-care services and sufficient food and water. It can therefore be inferred that social security denotes programmes that ensure that people have a safety net in cases in which their earning capacity ceases to exist.

2.3. SOUTH AFRICA'S SOCIAL SECURITY SYSTEM

2.3.1 Historical Background

De Paoli, Mills, and Gronningsteaer (2012) believe that South Africa has one of the largest non-contributory social security systems. Its social security system has been however, influenced by European and British social security systems. South Africa, like most sub-Saharan countries was colonised for many decades. It was a Dutch colony from the 17th century to the 18th century. The colonisers looked down upon the manner in which Africans do things; they judged the African people, their customs and viewed their traditional social organisation as being inferior (Patel 2005). Patel further states that the colonisers were interested in economic activities not considering the impact these may have on whom she termed 'indigenous inhabitants'. Thus, citizens were expected to adapt to the technology, methods of production, forms of social organisation and welfare systems to meet the demands and worldview of the colonial powers (Patel 2005 p. 66).

According to Patel (2005), before colonialism, there was social cohesion in South Africa wherein people's needs were met through communalism and mutual aid. Members of the society were concerned about each other's welfare and strived to meet each other's needs cohesively. These traditional modes of social provision were disrupted by the colonial society. The welfare policies developed by the colonial masters were distorted and had racial discrimination. Whites were regarded as the elite group. Services that were rendered were in favour of the whites and discriminated against other racial groups, mainly blacks.

As a developing country, South Africa adopted some elements from the British social security system to its social security system in order to deal with the injustices of the past, particularly the racial discrimination endured by the majority of South Africans during apartheid (Patel 2005). Barrientos and DeJong (2006) believe that South Africa has made significant strides in developing a comprehensive social security system, particularly since the end of apartheid in 1994. Currently, South Africa has a fairly well developed social security system in place (Patel 2005). This is also provided for in section 27 of the constitution which states that everyone has a right to social security if they are unable to support themselves and their dependents.

According to Tshoose (2010), within the South African context, the concept of social security is viewed as an umbrella concept, which encompasses social assistance, social insurance, and a wide variety of private and public measures that provide cash or in kind benefits or both, in the event of an individual's earning power permanently ceasing, being interrupted and when a person cannot avoid poverty. Furthermore, the White Paper for Social Welfare (1997) defines social security as policies which ensure that all people have adequate economic and social protection during unemployment, ill health, maternity, child rearing, disability and old age, etc. This can either be by means of contributory and non-contributory schemes providing for their basic needs**.**

South Africa's social security system is aimed at reducing poverty among the vulnerable groups, namely: older people, those with disabilities, and children who are not expected to participate fully in the labour market. The system also intends to improve health, education and nutrition, so as to increase economic growth and development (Samson, et al. 2006). This is also reflected in the White Paper for Social Welfare (1997 p. 47) which states that 'a social security system is essential for healthy economic development, particularly in a rapidly

changing economy, and will contribute actively to the development process. It is important for immediate alleviation of poverty and is a mechanism for active redistribution.'

However, Samson et al. (2002) believe that the severity of South Africa's poverty persists in spite of the existing social security programme. This is because most of the poor live in households that receive no social security benefits at all, and the rest remain poor in spite of the benefits they receive. Nevertheless, South Africa's system of social security successfully reduces poverty, regardless of which methodology is used to quantify the impact measure. For instance, South Africa's social grants reduce the poverty headcount measure by 4.3 per cent, as measured against the Committee of Inquiry's expenditure poverty line (Department Social Development 2004). South Africa's social security consists of social assistance and social insurance which will be elaborated below.

2.3.2 Social Assistance

Patel (2005) states that social assistance refers to a range of benefits in cash intended to provide protection for the neediest people in the society. Social assistance benefits are non-contributory and they are means-tested. She further argues that South Africa's social assistance programme, commonly known as social grants is exceptional when compared to other developing countries. These social grants are aimed at ensuring that households meet their basic needs. They therefore play a significant role in alleviating poverty and improving access to food and education.

South African Social Security Agency (SASSA) was established in 2004 to act as the sole agent that will ensure the efficient and effective management, administration and payment of social assistance. Its purpose is to serve as an agent for the prospective administration and payment of social security and render services relating to such payments (SASSA Act No. 9 of 2004). Moreover, the Social Assistance Act addresses social security by regulating access to social grants namely; the Child Support Grant (CSG), Foster Child Grant (FCG) and Care Dependency Grant (CDG), State Old Age Pension (SOAP), Disability Grant (DG), Grant-in-aid, and War Veteran Grant.

Initially, women at the age of 60 and men at the age of 65 accessed the State Old Age Pension (SOAP). The age for men has been reduced gradually from 2009 in order to achieve gender equality (Kaseke 2010). Currently, all elderly persons at the age of 60 despite their gender are eligible for SOAP. The SOAP is the largest social assistance programme with over

2.5 million beneficiaries in 2010 (SOCPEN system 2010). In June 2012, the beneficiaries were 2 789 076 (SOCPEN system 2012). The important redistributive impact of this programme has been recognised by government, labour and academia. Patel (2005) and Samson et al. (2002) are both of the view that SOAP has a major impact in reducing poverty among poor households, especially those in rural areas. They both agree that households with pensioners are less poor than those without a pensioner. The amount for SOAP increases every year and currently stands at R1 200 per month.

Patel (2005 p. 129) states that 'disability grant is the second largest programme in rand terms.' Disability Grant beneficiaries were 1 232 502 in June 2010 (SOCPEN system 2010). The number has been reduced to 1 196 575 by June 2012 (SOCPEN system 2012). The beneficiaries have decreased by 15 per cent. This could be as a result of the medical model used currently to determine eligibility for access to disability grants which Tshoose (2010) argues is inefficient because it results in large numbers of people being marginalised from benefiting under the system of social security. Currently within the South African social assistance system, disability is measured and defined entirely by the medical profession. Its interpretation determines a person's eligibility to receive a grant**.** Eligibility for the grant is based on a medical diagnosis assessing the degree of disability, along with a means-test. Kaseke (2010) states that persons above the age of 18 who have a disability are eligible for the grant as determined by the medical board. He further indicates that the degree of the disability should be such that it would not be possible for the individual to be self-reliant. There is temporary and permanent DG. The temporary DG is paid for up to one year and an individual can reapply for further support. For individuals whose condition is on-going for a continuous period of more than 12 months duration, permanent DG is awarded; usually renewal is required every five years (Department of Social Development in Whitworth & Noble 2008).

In addition, in the context of South Africa's high rates of HIV and AIDS and tuberculosis, a potential moral hazard is created in that by gaining their health, individuals may lose eligibility to the DG. It is argued that some people opt to maintain a state of sickness as there are no other means by which they or their family can be provided for if they cannot find work (Whitworth & Noble 2008). However, a survey conducted by de Paoli, Mills and Gronningsteaer (2012) reveals that people living with HIV and AIDS would not choose poor health over grant loss. Although some of the participants did not take their treatment on times scheduled, indicating that it was difficult to take the drugs on an empty stomach**.**

Nevertheless, HIV and AIDS status alone does not give rise to entitlement to DG, entitlement is conferred if the condition becomes disabling and affects ability to work. This is, however, a vague requirement and variably interpreted. The situation is exacerbated further by the lack of a national framework or set of detailed guidelines and assessment procedures (Whitworth & Noble 2008).

In terms of beneficiaries, DG is smaller than the CSG. The Children's Act defines a child as any person below the age of 18. The main objective of the act is to protect children's rights, which include the right to basic needs such as food, shelter, safety, and health care. This will therefore enable them to survive and develop to their full potential, to participate as members of society (according to their age and development), and to grow up to be caring and responsible citizens. Meeting the children's needs will also ensure that children have a happy and fulfilled childhood.

In addition, section 28 of the Constitution makes provision for rights relating to children; including the right to social security which is also regulated by the Convention on the Rights of the Child (CRC). The CRC expects the government to take necessary measures to achieve the full realisation of this right in accordance with its domestic laws. The CRC further affords every child the right to a standard of living adequate for his or her physical, mental, spiritual, moral and social development (Nkosi 2009).

The CSG is provided for in sections 4 and 6 of the Social Assistance Act. It is payable to a needy primary caregiver of a child for the benefit of that child. The aim of the CSG is to support primary caregivers of children by making a contribution to supplement their resources to use towards providing for the adequate growth and development of children. The meaning of a primary caregiver is not restricted to the biological parent of a child. It includes a person related or not related to the child, who is responsible for meeting the daily needs of such child. Therefore, members of extended families who are primary caregivers of a child can apply for the CSG to help children in their care. To qualify for the grant, the primary caregiver is required to meet the income-based criteria set in the means test. Further, both the primary caregiver and the child must be resident in South Africa at the time of the application for the grant and they must both be South African citizens. The grant is payable to an unlimited number of one's biological children but it is limited to six non-biological children living with the primary caregiver (Nkosi 2009).

Section 8 of the Social Assistance Act 13 of 2004 stipulates that a foster child grant (FCG) is payable to a foster parent if the child is in need of care and protection. Thus, the child needs to be placed under foster care by a court order. Foster care is regarded as an alternative care for orphaned and vulnerable children. An increased number of orphans resulting from HIV/AIDS pandemic necessitate this type of alternative care. In terms of the Children's Act, if a child is found to be in need of care and protection, that is, if the child has no parent or caregiver or has a parent or caregiver but that person is unable or unsuitable to care for the child, the court may order that such a child be placed in foster care with a suitable foster parent. However, this is recommended after the social worker's investigation (Patel 2005). Once a child has been found to be in need of care and protection, a foster parent becomes eligible to apply for a Foster Child Grant (FCG) in terms of the Social Assistance Act. To qualify for a FCG, the foster parent and the child must be resident in South Africa at the time of the application. The FCG is payable until a foster child turns 18, however it can be extended in terms of section 176 of the Act if the child is still attending school up to the age of 21. In comparison to the CSG, the amount of money received under the FCG is much higher. The FCG amount is currently R780.

The Care Dependency Grant supports parents taking care of a child living with disabilities at home. The grant can also be accessed by other family members looking after a child with disability who requires care at home (Kaseke 2010). Patel (2005) observes that there has been a rapid increase of CDG beneficiaries which she believes is associated with the number of people infected and affected by HIV/AIDS. At the age of 18, the child living with a disability can then apply for a Disability Grant.

In terms of the Social Assistance Act, a person is eligible for a War Veteran's Grant if he or she has attained 60 years and unable to provide for his or her maintenance due to physical or mental disability which resulted from naval, military or air force service during the Great War of 1914-1918 as a member of any Union or British Force, or was a member of any Force of government during war. The person should however be a South African citizen on the date on which he or she applies for the grant. Patel (2005) is of the view that due to a decline in War Veteran Grants; they will be phased out gradually.

A person can apply for grant-in-aid if he or she has a physical or mental condition that requires regular attendance by another person (Social Assistance Act 2004). In most instances, this grant is added to the SOAP or DG for people who need on-going care so that they can afford to pay someone to care for them if the family is unable to do so.

Patel (2005) concurs with Kaseke (2010) in that social relief forms part of the social assistance that is short-term and assists people in cases of transient poverty or crisis situations such as flood. The state provides social relief of distress to needy people in the form of food parcels or a voucher. This assistance is supposed to be for a period of three months. However, due to monetary constraints it is not sustainable. Hence, some communities are receiving such services once or twice a year, or even none at all.

2.3.3 Social Insurance

Patel (2005 p. 125) defines social insurance as 'the benefits organised by the state through specific contribution schemes by employers and employees.' Patel further states that social insurance covers contingencies such as pensions, medical benefits, maternity benefits, illness, disability, unemployment, employment injury, and family benefits. It is also referred to as occupational insurance.

Unemployment insurance, the Compensation for Occupational Injuries and Diseases Fund and the Road Accident Fund are the main social insurance schemes in South Africa. According to Patel (2005), unemployment insurance covers employees when they are temporarily unable to perform their duties in cases such as illness, maternity, adoption, and termination of employment. It is mainly aimed at ensuring that employees are protected from financial burdens when they are involuntarily unemployed. Kaseke (2010) indicates that the unemployment insurance scheme is regulated by Unemployment Insurance Act 63 of 2001. It covers workers such as domestic workers against the risk of temporary unemployment, but excludes civil servants and employees who are not South African citizens. A contribution of 1 per cent of the employee's monthly payment is made by both the employee and employer. This is then paid into the Unemployment Insurance Funds.

The Compensation for Occupational Injuries and Diseases Fund pays compensation for work-related injuries and diseases. This compensation is in terms of the Compensation for Occupational Injuries and Diseases Act (COIDA) 130 of 1993. The scheme is funded out of employers' contributions, which vary from employer to employer depending on the risk

inherent in their businesses. Domestic workers, those employed in informal sector and those who are self-employed are not covered by this scheme.

The Road Accident Fund is regulated by the Road Accident Fund Amendment Act of 2005. This scheme in not employment-based, rather it is financed out of fuel levy. The scheme provides protection against the risk of road accidents. Thus, it pays compensation to victims of road accidents. However, the benefits are low and not guaranteed (Kaseke 2010).

Occupational retirement insurance in South Africa is not available to those who are in informal employment. Many workers who are doing casual labour are not covered by this scheme. Due to the low wages they receive, they are unable to pay for private insurance (Patel 2005).

Social insurance is also relevant for poverty alleviation. It ensures that individuals who may be exposed to a social risk are not impoverished. However, this scheme is limited by the fact that only unemployment and employment injury are covered. Kaseke (2010) believes that the South African social insurance system is not comprehensive enough which therefore limits its impact on the prevention of poverty. He states that the system falls short when considering the branches of social security provided by ILO Security (Minimum Standards) Convention No. 102 of 1952 which include unemployment benefit, old age benefit, employment injury benefit, maternity benefit, sickness benefit, invalidity benefit, medical benefit, survivors' benefit and family benefit.

2.3.4 Informal and traditional social security systems

Tshoose (2010) defines informal social security as self-organised family, community, or informal sector coping mechanisms. She argues that informal social security represents a way of life within traditional Black African communities and it incorporates values that promote togetherness and a sense of belonging. Furthermore, within communities, informal social security is usually distinguished by informal social arrangements that can be divided into traditional support systems and self-organised systems. Self-organised informal social security comprises a particular group of people within the community, including families and neighbours. Examples of self-organised informal social security include *stokvels*, burial societies and rotation money schemes. The African traditional support system is based on the principles of solidarity and reciprocity. Under the traditional support system, the family serves as the line of defence to members who are unable to provide for themselves. The

support provided may be in the form of cash or in kind. These informal safety nets have proven to play a significant role in mitigating the impact of HIV/AIDS at family and community levels (Tshoose 2010).

Tshoose (2010) states that South Africa has the largest number of HIV/AIDS infections in the world. The HIV/AIDS pandemic continues to undermine the institutions and human capital development strategies on which future health, security and progress depend. An estimated 5.7 million people were living with HIV/AIDS in South Africa in 2009, which is more than in any other country in the world. It is believed that in 2008, over 250 000 South Africans died of AIDS. These households are often left to assume the primary role of taking care of members who are infected by the epidemic. Their vulnerability is linked in many instances to lack of income, poverty, unemployment, access to basic necessities of life, and social assistance. These households rely heavily on the informal social security as a safety net (Tshoose 2010).

The traditional and informal systems of social security have arisen mainly in developing countries. They were developed in response to economic and social hardships experienced in these countries. Inaccessibility of formal social security systems was another reason why a need for informal social security system has grown. Mukuka, Kalikiti & Musenge; Ardington & Lund 1995 (as cited by Patel 2005), Triegaardt (2007) and Tshoose (2010) have referred to the critical role played by these informal systems in providing a safety net. These informal systems are based on personal reciprocity, social solidarity, social networks of trust and direct face to face interaction between individuals, households and communities. They are aimed at poverty reduction, especially in rural areas (Patel 2005).

Kaseke cited by Patel (2005) states that ‘in Africa, the extended family was an important social security institution providing support to its members based upon culturally determined patterns of mutual assistance’. Due to industrialization and urbanization, the role of the extended family as a social security institution has been eroded. This paved a way for the development of mutual aid societies which are currently viewed as an effective mode of social security (Patel 2005). According to Kasente in Patel (2005) these informal social security arrangements have ensured the survival of people in adverse conditions. They are flexible and oriented towards meeting both immediate and future needs offering the best possibilities for both men and women.

These systems, however, have a tendency of exploiting women for the benefit of other members of the extended family. This means that there is a trend to depend heavily on women to care for children, the sick and other members of the household (such as the elderly). Women also continue being community and home based carers due to an increased HIV and AIDS pandemic (Triegaardt 2007). There are a number of serious gender concerns with implications for social security. Documented evidence suggests that an absence of gender awareness in social security policy reform will contribute to significant efficiency, equity and welfare costs that could have been avoided (Kasente in Triegaardt 2007). These modes of social security should not be ignored by social security policies. They cannot replace social assistance or social insurance but they do contribute in alleviating poverty.

2.4. THE HISTORY OF THE CHILD SUPPORT GRANT IN SOUTH AFRICA

The White Paper for Social Welfare was seen as the strategy most likely to increase welfare resources and services to previously marginalised sectors of the population and to achieve a just and equitable system of welfare provision (Gray as cited in Triegaardt 2005). The White Paper recognised that poverty alleviation could only be addressed by extending resources and opportunities to the poor. However, there were tensions between the White Paper's stance on poverty alleviation and the Constitutional human rights framework, particularly in the case of the CSGand the right for every child to have basic nutrition, shelter and basic healthcare services. The tension was mainly raised by the restriction of the CSG to children up to the age of 7 years due to fiscal constraints, which was regarded as unacceptable to service providers within the NGO sector at the time of its launch in 1998 (Triegaardt 2005).

Udjo (2009) indicates that in South Africa, non-income and low-income earners who were single parents were eligible for the State Maintenance Grant (SMG) until 1997. Udjo argues that historically access to the grant was racially biased; but even after the removal of such restrictions, uptake by African parents, especially in rural areas, was low. He continues by stating that in 1996 the Lund Committee recommended that this grant be replaced by the CSG. The CSG was then introduced in 1998 to cover children below the age of seven. However, Triegaardt (2005) argues that the introduction of the CSG aggravated a great deal of controversy. The controversy which related to phasing out the SMG stemmed from the benefit level of the CSG per child.

The grant was also perceived to be limited due to age restriction. It was debated that recipients of SMG would no longer qualify for the new grant, and would not have access to developmental programmes after cessation of the SMG. Stellenbosch University in the Western Cape conducted research on the effects of phasing out the State Maintenance Grant (SMG). Their findings revealed that the SMG was the only source of income in many poverty-stricken households, and was helpful in alleviating poverty (Vorster et al. in Triegaardt 2005).

Nkosi (2009) believes that the SMG had three major shortcomings. Firstly, it was accessible mainly to white people; secondly, the family model upon which it operated did not represent the meaning of family as understood in indigenous African communities; thirdly, it was not aligned with the needs of African children and the conditions in which they live.

Triegaardt (2005) argues that the intention of introducing CSG was to target impoverished young children. It was aimed at poverty alleviation rather than poverty prevention. Even though the intention was rooted in eliminating inequality and racism in the form and allocation of a social grant, the introduction of the CSG came at a time when South Africa was still a divided society in terms of race, class and gender. Thus, its introduction was greeted with mixed reaction because it also heralded the phasing out of the SMG on which many single-parent families, particularly coloured women, depended (Vorster & Rossouw cited by Triegaardt 2005). Triegaardt believes that the continued existence of the SMG would be an anomaly in the context of the fledgling democracy and its pursuit of social justice and equity. Political pressure from the ruling party, the African National Congress (ANC), was the major force in eliminating the SMG. With the launching of the CSG, the SMG was phased out over a 3-year period, ceasing to exist from April 2001.

Triegaardt (2005) further states that in 1996 the Lund Committee was formed with the then Department of Health and Welfare, now the Department of Social Development, to explore policy options regarding social security for children and families. The purpose of introducing a social grant for children was primarily to provide support for children in poverty. The principle behind this social grant was to ‘follow the child’, which means that the grant would be allocated irrespective of the child’s family structure. The main objectives of the policy were to contribute to the costs of raising children; redistribute income over the life-cycle; influence the birth rate; provide a degree of equity in taxation; relieve child poverty; enable parents to care for children independently of the labour market; boost low earnings; reduce

demands for a minimum wage; increase incentives to work; and relieve unemployment or low income traps.

According to Lloyd (cited by Triegaardt 2005), the CSG has four immediate objectives. They are to: (i) ensure greater access for poor children to an integrated and sustainable security system in the country; (ii) provide a child grant on an equitable basis to those in need regardless of family structure, tradition or race; (iii) prevent children from unnecessarily entering or remaining in statutory substitute care; and (iv) keep children off the streets and out of juvenile detention centres. Therefore, it was designed to give the poorest children the opportunity to access resources.

According to Case et al. (2005), by early 2002, if the total income of the child's caregiver did not exceed R1 100 per month; the primary caregiver could receive a monthly amount of R110 per eligible child. The programme was extended gradually each year from children younger than seven years of age. Due to the reasons of administrative capacity, coverage of the grant was expanded in stages: to children aged 7 and 8 in 2003, 9 and 10-year-olds in 2004, and 11-to-13-year- olds in 2005. The age was extended to 17 years in 2010 and the state was able to reach its goal of reaching children of 18 years in 2012. The age restriction to the CSG has been amended in the Social Assistance Act and made accessible to the caregivers of children born after 31 December 1993 while at the same time prolonging their eligibility until the age of 18 years (Hall, 2010).

2.5. THE IMPACT OF THE CHILD SUPPORT GRANT

Lombard (2008) argues that the contribution of social grants in addressing poverty cannot be ignored. Results of the study on the social and economic impact of South Africa’s social security system provide evidence that the household impacts of South Africa’s social grants are developmental in nature. The study yielded positive impacts which include the reduction of poverty, addressing the problem of hunger, providing greater household access to piped water, promoting job searches and increasing school attendance (Department of Social Development, 2004).

2.5.1 Reduction of hunger

Cash grants targeted on children directly reduce poverty and vulnerability of children living in poor households. The impact on child poverty is much larger, with the percentage of children in poverty falling from 42.7 per cent to 34.3 per cent and those children in ultra-

poverty from 13.1 per cent to 4.2 per cent. Thus, cash grants address the underlying causes of poverty, by enabling poor households to invest in physical, social, and human capital assets (Pauw and Mncube 2007).

Within the transformed welfare policy based on a social development approach, the CSG became an important means of poverty alleviation since social grants constituted the main income of many impoverished individuals and families. Therefore, the CSG may be the sole source of income for many poor families, and thus essential for their survival. This is primarily because research conducted on the CSG indicated that the grant is spent mainly on food (Lombard 2008). This increased spending on food is associated with improved nutritional outcomes. Each CSG a household receives is associated with a decrease of 8-14 per cent in the probability that any child goes hungry. These households are therefore likely to have lower prevalence rates of hunger for young children as well as older children and adults (Social Development 2004).

Patel and Hochfeld (2011) concur that the CSG provides a valuable safety net to poor households, with significant benefits for both women and children. Since the majority of beneficiaries spend the grant on food, it contributes to household food security, and provides some financial security to women independent of their partners. The grant also provides women with the flexibility and choice in how the money is spent. This confirms previous assertions that money directed to women beneficiaries has had a positive multiplier effect on women's status and the well-being of the children in their care.

2.5.2 School Attendance

Many poor children cannot attend school due to the costs associated with education. Poor communities which lack resources provide lower quality educational services. As a result, this affects school enrolment rates in such communities. Social security grants counter these negative effects by providing households with more resources to finance education. It has been found that children in households that receive social grants, particularly SOAP and CSG are more likely to attend school (Social Development 2004). Although the grant's impact on school attendance is the same for boys and girls, the effect is decidedly larger for children that are living with their mother (Williams 2007). Lund (2011) indicates that primary school enrolments have been increased to 90 per cent in South Africa. This reveals the remarkable impact of the CSG which has improved this even further**.**

Case et al. (2005) believe that the grant appears to be reaching those children living in the poorer households of the demographic surveillance area (DSA). They argue that children who received the grant are significantly more likely to be enrolled in school in the years following grant receipt than are equally poor children of the same age. However, they also allude to the fact that older brothers and sisters of grant recipients, when they were observed at younger ages, were less likely than other children to be enrolled in school. This perhaps reflects the greater poverty in grant-receiving households. The CSG increases primary school enrolment by roughly 2.4 percentage points from a base of 95.6 per cent, decreasing non-attendance by 54 per cent (Williams 2007). In addition, CSG is used to pay for ECD services and children are the recipients of pocket money from the CSG. Hence, the grant appears to help overcome the impact of poverty on school enrolment

In the study conducted by Case et al. (2005) in KwaZulu-Natal, data on children's school enrolment in the years after the grant were received was used to assess whether the grant appears to affect children's schooling. It was found that children who received the grant are significantly more likely to be enrolled in school in the years following grant receipt than are equally poor children of the same age. To evaluate whether the CSG plays a causal role in helping children get to school, outcomes across maternal siblings were compared. Older children who would never have been eligible for the grant, because it was not yet introduced in KwaZulu-Natal offered a counterfactual for what would have been true for younger siblings, if the CSG had not been introduced. The longitudinal data made it possible to reflect back on the time when older siblings were themselves reaching school age. It was found that older siblings of current grant recipients were significantly less likely to be enrolled in school than other children of the same age when these older siblings were 7 and 8 years old.

Lund (2011) argues that an attempt by the government to impose conditionality in the field of education is a policy issue which needs further attention. She believes that given the history of the South African primary and secondary school systems, many poor children, especially CSG recipients attend schools in which both personnel and material resources are sorely lacking. She further states that even though school attendance rates are high, the quality of education provided in poorer schools is very low. The conditionality related to proof of school attendance, which will have to be provided by the schools, will be an unnecessary waste of time and other resources.

2.5.3 Labour force participation

According to Williams (2007), most beneficiaries of CSG tend to participate in the labour force, following receipt of the grant. It is however not clear why receiving a CSG should increase the recipient's willingness to accept a job. It might be expected that the grant will decrease labour participation, in contrary, the grant yields positive effects by increasing job search and employment. This could be because the CSG may give the beneficiary some income stability to meet subsistence needs, enabling them to hold a job. In addition, (Williams 2007) believes that grants enable poor households and carers to participate in productive economic activity.

While economic theory suggests that social grants may undermine labour-force participation, by reducing the opportunity cost of not working, evidence on South African social grants demonstrates otherwise. Samson et al. (2004) concur that persons in households receiving social grants have a higher success rate in finding employment when compared to non-beneficiaries. They argue that individuals in households receiving social grants have increased both their labour-force participation and employment rates faster than those who live in households that do not receive a social grant. It can therefore, be inferred that social grants provide beneficiaries with the resources and economic security necessary to invest in high-risk or high-reward job search, while also improving the likelihood of finding employment.

According to Surender et al. in Lund (2011), many people, senior government officials included, believe that social grants - particularly CSG - create dependency and encourage people to leave work, or not to work at all. However, participatory research with beneficiaries shows that they would rather work than depend on CSG (Lund 2011). Furthermore, with regard to the CSG, there are widely held beliefs that the grant causes teenage pregnancy, (Makiwane and Udjo cited by Lund 2011), however, point out that teenage pregnancies peaked before the introduction of the CSG.

Guthrie (2002) concludes that the CSG increases household incomes among lower-income families which has a positive effect on the wellbeing of children. It must therefore not be doubted that the CSG does contribute to an increased income for poor families and that it is indeed used for the well-being of the children and provides for their basic needs.

2.6. CASH TRANSFERS AS STRATEGY FOR POVERTY ALLEVIATION

Deaths caused by AIDS and the high rate of unemployment in the country have negative impacts in the lives of children. Most children become poor as a result of parents dying of AIDS. One other factor which leads to children living in poverty is the high rate of unemployment. It is therefore not surprising that six out of ten children grow up in poverty (Nkosi 2009).

The central question which needs to be addressed here is whether cash transfer programmes that are targeted at children can be effective in reducing childhood poverty. Barrientos and DeJong (2006) argue that the CSG in South Africa, family allowances in the transition economies, and targeted CCT programmes in Latin America are an effective tool in reducing child poverty. This therefore, suggests that different models of arranging cash transfer to children can have similar effects on poverty reduction; in this sense, cash transfers targeted on children in poor households seems to be effective. Statistics reveal that there has been a 9 per cent drop in child poverty because of CSG (Department of Social Development 2011). This is not to say that cash transfers can always be effective on their own. They require a significant investment in the provision of basic services such as water, education, housing, health, and transport to ensure that the supply is able to respond to the increased demand supported by cash transfers. Thus, cash transfers and the provision of basic services to the poor are complementary (Barrientos & DeJong 2006).

In the absence of income data, Case et al. (2005) relied on other measures to assess the success of CSG in alleviating poverty. They used the parents' education, employment and household asset ownership to make conclusions. They thus gathered that children for whom the grant is being obtained have parents who are less well educated, and parents who are less likely to be employed. They live in households that own fewer assets generally and fewer luxury items in particular. This could be because in most cases, cash programmes cannot raise the consumption of children directly, but instead supplement the incomes of families with children, with the assumption that the standard of living of children in these households will also improve. The impact of cash transfers on poverty among children therefore depends on the response of the household (Alderman et al. in Barrientos & DeJong 2006). Barrientos and DeJong (2006) are of the opinion that it is important to understand how households allocate resources internally.

Barrientos and DeJong (2006) focused on two different models of the household to assess how resources are allocated within these households. In the unitary model, the household is assumed to make decisions as if it was a single unit, pursuing a common set of objectives. In unitary households, household resources are assumed to be allocated independently of the identity of the source or the recipient. If resources are equally distributed within the household, cash transfers aimed at children, or any other member of the household for that matter, will benefit all household members equally. If the objective is poverty reduction, it matters little whether the cash transfer is targeted at the adults or the children.

In the collective model, decision-making is taken to be the outcome of the interaction of individual household members who have different interests, preferences and power, stratified, for example, by gender and age. In a collective household, decisions about intra-household resource allocation are the outcomes of a bargaining process, with the strength of negotiating positions arising in part from the income which members contribute to the household. In this case, the impact of cash transfers will depend on who receives the benefit, because it will strengthen the individual's bargaining position (Barrientos & DeJong 2006).

2.7. THE REACH OF THE CHILD SUPPORT GRANT

The CSG has become institutionalised in South Africa as a poverty alleviation mechanism within a social development paradigm. Cash transfers of this nature are of importance and crucial for the survival of impoverished families and children. The government is to be commended for having achieved the target of reaching 3 million impoverished children in 2003 (Department of Social Development, 2003). However, given the country's deep-seated poverty, structural unemployment and continuous retrenchments leading to poverty, social grants and in particular the CSG will continue to be a requirement for poor children to survive (Triegaardt 2005).

The CSG, as a strategy for alleviating childhood poverty faces a fundamental difficulty in its implementation, particularly when taking into cognisance the context of poverty, disempowerment and lack of infrastructure. For the grant to reach the most vulnerable households, simultaneous attention to three issues is required: access to government offices in rural areas; efficient coordination of services, particularly provision of official documents; and creative methods of communication targeting community members with low literacy levels. A promising mechanism for addressing these challenges could be collaboration between government and non-governmental partners promoting access to the application

process. Coordinated action between relevant government departments, including the Departments of Social Security and Home Affairs, would go a long way towards promoting access to the Child Support Grant for those most in need (Twine et al. 2007).

The CSG system identifies a child's primary care giver as the person who has primary responsibility for the child on a daily basis. It may not be the child's mother nor be a woman. However, in the DSA, 87 per cent of primary care givers are mothers; 10 per cent are grandmothers; and 1 per cent is an aunt of the child. Fathers are designated as primary care-givers only 0.2 per cent of the time. Despite the way the system identifies a primary caregiver, the chances of a child receiving CSG depends largely on the presence of a child's mother. Moreover, a child is likely to receive the grant even when the father is deceased, but this cannot be said to be true for children who have lost a mother. This could be because when a mother is absent, the child's primary care giver may be less able to access the relevant documents necessary for registering the child's birth (Case et al. 2005). Men therefore have very limited access and control over the CSG.

The income eligibility criteria for the grant have been steadily relaxed, which allows for the inclusion of a large sector of the population of poor children in South Africa. There has been a very good uptake of the CSG nationally, and it is generally acknowledged that the grant is well targeted, with an excellent reach of poor children (Voster and de Waal 2008 cited by Patel & Hochfeld 2011). A study conducted by Patel and Hochfeld (2011) in Soweto shows that a total of 560 children received the CSG in 274 households out of the total of 344 Doornkop households surveyed. Thus, 80 per cent of households with children 15 years and younger receive a CSG, which is a very high uptake of the grant. Despite those challenges, the number of children receiving the CSG has increased dramatically since it was introduced in 1998; increasing from 150,336 to 336, 000 by 2011 (Department of Social Development 2011).

2.8. CHALLENGES REGARDING THE CHILD SUPPORT GRANT

Barrientos and DeJong (2006) argue that in common with other countries in the region, South Africa has a rapidly rising number of orphans, street children and child-headed households, in many cases a direct consequence of the spread of HIV and AIDS. The CSG recognises the rights of children and therefore targets poor children, regardless of household arrangements. However, in practical terms, it requires an adult to apply for, and collect, the grant. There is thus some concern that these vulnerable groups, because of the absence of an adult, fall

outside the conditions for entitlement to the grants. There are also concerns that the value of the grant is insufficient to cover the basic costs of child care (Department of Social Development, 2011).

Despite interventions to reach as many children living in poverty as possible, Nkosi (2009) indicates that there are still children who cannot adequately benefit from social assistance grants owing to specific qualifiers in legislation which determine when a child may benefit from such grants. She adds that African indigenous child-care structures are not adequately recognised in the legal system and as a result, children who live within these indigenous structures cannot fully enjoy social assistance benefits as stipulated in legislation**.**

One of the major causes of the social security system's inability to secure adequate social protection is the low rate of take-up of these programmes. Only an estimated 43 per cent of eligible individuals actually succeed in receiving the grants for which they are qualified. The take-up rate is relatively high for the State Old Age Pension, approximately 85 per cent. For the CSG, however, the take-up rate is very low, approximately 20 per cent with negative consequences for the effectiveness of the social security system. The low take-up rate is in part a consequence of system failure (Nkosi 2009).

A key obstacle in the implementation of the social security system since 1994 has been the means-test. SASSA has identified contradictory interpretations of the means-test, undermining efforts at uniform delivery standards. The administrative requirements associated with the means-test are also generally thought to be the main barrier to greater take-up of social grants among poor households. This is particularly so in the poorest rural areas, where the poor have the least access to the official identification documents necessary to access social grants. It has also been argued that the means-test discriminated against households with a large number of dependants (Samson et al. 2006).

Lund (2011) indicates that the Department of Social Development has adopted an evidence-based approach to policy reform, introducing conditional entitlement to the CSG. She argues that this is the initial attempt in South Africa to impose conditionality on any of the non-contributory social assistance benefits. If accepted, it may open the door to future attempts to change the requirements needed for the other benefits, such as those for older people and people with disabilities.

The condition of seeking a school attendance report for CSG eligibility is a challenge because the education system which has co-responsibility in this is under stress. Its actions in confirming that a child is not attending school will disadvantage both the child and the school. The most disadvantaged areas in South Africa continue to be those that were most disadvantaged during the apartheid era. They have the highest numbers of both children receiving the CSG and schools most likely to have little administrative capacity (Lund 2011).

Lund (2011) further states that the new South African CSG regulation will disadvantage the needy when they need support the most. This will not only inflict transaction costs in terms of time and money on those in severe poverty, but also place considerable strain on the poverty-stricken schools, many in acute administrative and educational crisis, that are attended by most CSG beneficiaries.

Generally, the history of social security in South Africa is fraught with poor administration, an inefficient payment system, lack of infrastructure and insufficient human resources. The introduction of a national social security agency in 2003 with the task of administering the grants is a creative attempt by government to improve service delivery to social grant beneficiaries, but it has yet to be proven to be a successful mechanism. However, despite the administrative problems, CSG has had a significant impact on poor children and poverty-stricken families. It is used mainly for food, clothes and education (Triegaardt 2005).

2.9. CONCLUSION

In conclusion, the South African comprehensive social security system plays a major role in combating poverty. Despite the challenges and shortcomings of the system, literature reveals that there has been a wide reduction of poverty among the poor, particularly those receiving a CSG. Thus, children in families receiving a CSG, have less chance of suffering from hunger. Additionally, their school attendance improves.

CHAPTER 3: RESEARCH METHODOLOGY

3.1. INTRODUCTION

This chapter outlines the research methodology, which encompasses the research design, study population, sampling procedures, research instruments, method of data collection and data analysis. Ethical considerations and the limitations of the study will also be discussed.

3.2. RESEARCH DESIGN

This study used a qualitative approach and was exploratory in nature. According to de Vos, de Vos, Strydom, Fouche, and Delport (2005), qualitative research stems from an interpretive approach that aims mainly to understand social life and the meaning people attach to everyday life. In addition, qualitative research produces descriptive data in the participants' own written or spoken language (De Vos et al. 2005). Therefore, this type of research allows participants to express themselves in their own words. It was significant that this type of research design be applied in this study in order to achieve the study's objective without any barriers since the respondents were permitted to express themselves fully and in their own words.

Holliday **(**2002) as cited in de Vos et al. (2005, p. 102) is also of the view that 'rather than controlling variables, qualitative research is open-ended and sets-up research opportunities designed to lead the researchers into unforeseen areas of discovery within the lives of the people being investigated.' This therefore results in new discoveries and insights, which is the key purpose of exploratory research. Exploratory research design was relevant to this study because the study's aim was to explore how caregivers utilise the CSG. It was anticipated that insight into how the grant is utilised to benefit children would be developed. Moreover, exploratory research provides a commencement in the relatively unknown research area (de Vos et al. 2005). Based on the literature review, there has not been a study conducted specifically on the utilisation of CSG by caregivers in Ba-Phalaborwa community. Thus, this study yielded new insights and understanding on the phenomena of the Child Support Grant.

3.3. POPULATION OF THE STUDY

The population of the study consisted of care-givers who were recipients of the CSG in Ba-Phalaborwa sub-district in the Mopani District of the Limpopo Province. There were 27 945 recipients of the CSG in the sub-district in the year 2012.

3.4. SAMPLING PROCEDURES

A non-purposive sampling technique was adopted to select a sample of 20 caregivers. This technique was appropriate for this study because the researcher was able to apply her judgment in selecting the sample based on the study's aim and significance. The participants were aged between 21 and 50. The respondents had school-going children as well as children who were still too young to attend school. The caregivers were also beneficiaries of poor relief rendered by social workers in Ba-Phalaborwa sub-district.

3.5. RESEARCH INSTRUMENTS

The researcher utilised a semi-structured interview schedule that was organised around key areas of interest. It was aimed at guiding the interview rather than dictating it. It provided the researcher with predetermined questions that were used as an instrument to engage the participants. This type of interview gives freedom to the guide in making on-going adjustments in response to the way the interview is progressing. This means that the interviewer modifies the order in which the questions are asked, changes the wording of questions, clarifies the meaning of questions, adds or omits questions according to their relevance to the particular interviewee. 'The interviewer needs to probe and prompt for more detailed responses, specific examples, and clarification' (Becker & Bryman, 2004, p. 269).

The questions on the interview schedule were open-ended which allowed the respondents to be flexible in their responses. This type of interviews yielded positive outcomes since the study was exploratory in nature with the purpose of developing new insights in the phenomena of the CSG. This was made possible because in-depth information was gathered during the interviews.

3.6. PILOT STUDY

Denzin and Lincoln in de Vos et al. (2005, p. 331) state that, 'the pilot study in qualitative research allows the researcher to focus on specific areas that may have been unclear previously or to test certain questions.' Thus, the researcher is able to make modifications in order to conduct quality interviews during the main investigation. A pilot study also assists in

estimating time and cost that may be involved as well as pre-empting the problems that may arise during the actual study. In order to test the data collection tool, only one caregiver who did not form part of the real study was pre-tested. The pre-test revealed that the data collection tool was appropriate and no changes were made.

3.7. METHODS OF DATA COLLECTION

Face to face interviews were conducted with the respondents in order to gain a detailed picture of how caregivers utilise the CSG. This type of interview gives the researcher and the participant flexibility. The researcher is able to follow up particular interesting avenues that emerge in the interview and the participant is able to present a fuller picture. The participant is perceived as the expert on the subject and should therefore be allowed maximum opportunity to tell their story (de Vos et al. 2005). Permission was sought from the participants to audiotape the interviews, which simplified retrieval. Observation was also utilised to collect data. The home circumstances of the participants were observed and linked with their responses to the questions.

3.8. DATA ANALYSIS

According to Babbie (2004) the key process in the analysis of qualitative social research data is coding. This means that data is classified and categorized with some form of retrieval system. On the other hand, Gibbs (2007) is of the view that the most common form of qualitative data used for analysis is text. Consequently, the researcher took notes during the interviews in order to keep track of dates, names, titles as well as important information gathered. Key concepts, ideas, and short phrases that occurred to the researcher were noted for data retrieval and analysis. After taking notes the data was organised and labelled properly to make retrieval manageable. Thematic content analysis was used in analysing the data. The data were presented narratively and linked to the research objectives.

3.9. METHOD OF DATA VERIFICATION

For the purpose of data verification and trustworthiness of the study; credibility, transferability, dependability and conformability were observed as outlined by de Vos et al. (2005). The purpose of credibility is to demonstrate that the research findings are valid and believable. To achieve credibility of the findings, open-ended questions were asked in order to get detailed information and also make follow ups on the participants' responses for verification. The interviews were conducted at the participants' place of residence which

made them more comfortable, relaxed and open in their responses. The researcher was also able to observe the respondents' home circumstances and compare it with their responses. This therefore increased the trustworthiness of the findings. Literature was also reviewed in order to verify if the information obtained from the interviews was similar to what other scholars have established.

According to Mohammed (2011, p. 38), 'dependability of the study relates to the reliability of the indicator or measure'. Neuman cited by Ngalo (2011) concurs that dependability means reliability which suggests that the same thing reoccurs under similar circumstances. In this study, dependability was ensured by openly and honestly discussing the methods for data collection, data analysis and sampling procedures which will enable future researchers - who are interested in this type of study - to use the same research instruments in order to yield the same results.

In addition, the researcher also observed the two major principles of dependability as outlined by Neuman in Mohammed (2011), which were to conceptualise all concepts and to use a pilot study. The literature review was able to conceptualise social security, give a historical background of social assistance in South Africa and also focus on the CSG. This was relevant because similarities and differences were linked with the research findings. The study was also pre-tested in order to ensure its feasibility as well as reliability, although no changes were made to the interview schedule. It was applied as initially drawn which reflected the relevancy of the questions in meeting the study's objectives.

According to De Vos et al. (2005), conformability addresses the question of whether the research findings can be confirmed by another. Mohammed (2011) also states that conformability aims to ensure that the research findings are not biased to the researcher, instead they are based on the true data and the process of data analysis was properly applied. Themes were identified when analysing the data in order to confirm the research results. The researcher has also kept the records of the interview schedule, audio-tapes, and transcripts in a safe place for further references.

3.10. ETHICAL CONSIDERATIONS

Ethical consideration assists researchers in understanding their responsibilities as ethical scholars. According to Bless, Higson-Smith and Kagee (2006, p. 140) research ethics place an emphasis on the humane and sensitive treatment of research participants who may be

placed at varying degrees of risk by research procedures. They further state that it is the researcher's responsibility to ensure that research is ethically conducted.

The following ethical considerations were taken into cognisance throughout the study:

Voluntary Participation – Babbie (2004) emphasises that the basic ethical rule of social research is that participation should be voluntary. Voluntary participation was encouraged in the study. Neuman in de Vos et al. (2005, p. 59) argue that 'nobody should be coerced into participating in a research project because participation must always be voluntary.'

Informed consent - Participants were informed about the intention of the study as well as possible risks involved in the study. De Vos et al. (2005, p. 60) argue that 'the researcher is obligated at all times to give a complete explanation of the total investigation.' The authors are also of the view that informed consent ensures the full knowledge and co-operation of subjects, while also resolving any possible, aggression, resistance or insecurity of the subjects. Furthermore, they state that when subjects are involved without their consent, their right to self-determination is impaired**.** A consent letter was given to the respondents to sign as a way of acknowledging that they were fully informed about the research procedures.

Confidentiality and Anonymity – Participants of the study were assured of their confidentiality and privacy with regards to the information provided for purposes of the study. Participants were labelled respectively in terms of the number of the interview instead of using their names. Though some of the participants revealed information about others relevant to the study and their names, it was not easy to link the people with the participants since the respondents themselves remained anonymous. The data will be kept in a safe place for a period of two years if there is any publication, and six years if it is not published. Participants were not forced to disclose things which they were not comfortable with. However, self-disclosure was encouraged.

Avoidance of harm – Babbie (2004) and de Vos et al. (2005) are of the view that subjects in social science research can be harmed emotionally or psychologically. This is due to the fact that in social science research, subjects being studied are often asked to reveal deviant behavior, attitudes they feel are unpopular, or personal characteristics that may be demeaning, such as low income and receipt of social grants. Revealing such information usually makes subjects feel uncomfortable. However it is the responsibility of the researcher to protect subjects from any harm. Although Babbie (2004) believes that avoiding harm is

easy in theory but difficult in practice, the researcher was sensitive in dealing with personal information disclosed by the participants. Hence the risks involved in the study were made known to the respondents and their right to self-determination was respected.

3.11. LIMITATIONS OF THE STUDY

In qualitative research, a small sample is often used for data collection and the sample is not a representation of the larger population**.** In this study, a sample of 20 caregivers was used. Since the sample is small, thus the research findings may not be generalised. The study was also limited by the fact that some of the participants may have given socially acceptable answers during the interviews in fear of the grant being terminated because they knew the researcher as a social worker. However, observations through home visits were done so that the researcher could adopt the role of an objective observer and link the participants' responses with what was observed.

3.12. CONCLUSION

Comparisons of the research methodology were done and the selected methodology was relevant to this research study based on the purpose of the study. The study applied the qualitative type of research and used an exploratory research design in order to achieve the objectives of the study. Sampling procedures, research instruments, methods of data collection and data analysis relevant to qualitative research were adopted.

CHAPTER 4: PRESENTATION AND DISCUSSION OF FINDINGS

4.1. INTRODUCTION

In this chapter, the findings of the study are presented and discussed. The aim of the study was to explore the extent to which caregivers utilise the CSG in the best interest of children. The findings will be presented and discussed according to the study's objectives. The chapter will begin with the presentation of demographic data, before the presentation and discussion of findings.

4.2. DEMOGRAPHIC DATA OF THE PARTICIPANTS

All the participants were females. This is because the majority of CSG recipients are females. All the participants were mothers and the primary care-givers of the children. The participants were diverse in terms of age, marital status, employment status, religion and their level of education.

Table 1: Age of the participants

Age	Frequency	Percentage
21-25	3	15%
26-30	5	25%
31-35	4	20%
36-40	5	25%
Above 40	3	15%
Total	20	100%

The majority of the participants (70%) were aged between 26 and 40. The youngest participant was aged 22 years and the oldest 49 years.

Table 2: Marital status of participants

Marital status	Frequency	Percentage
Married	3	15%
Single	15	75 %
Divorced	1	5%
Widowed	1	5%
Total	20	100%

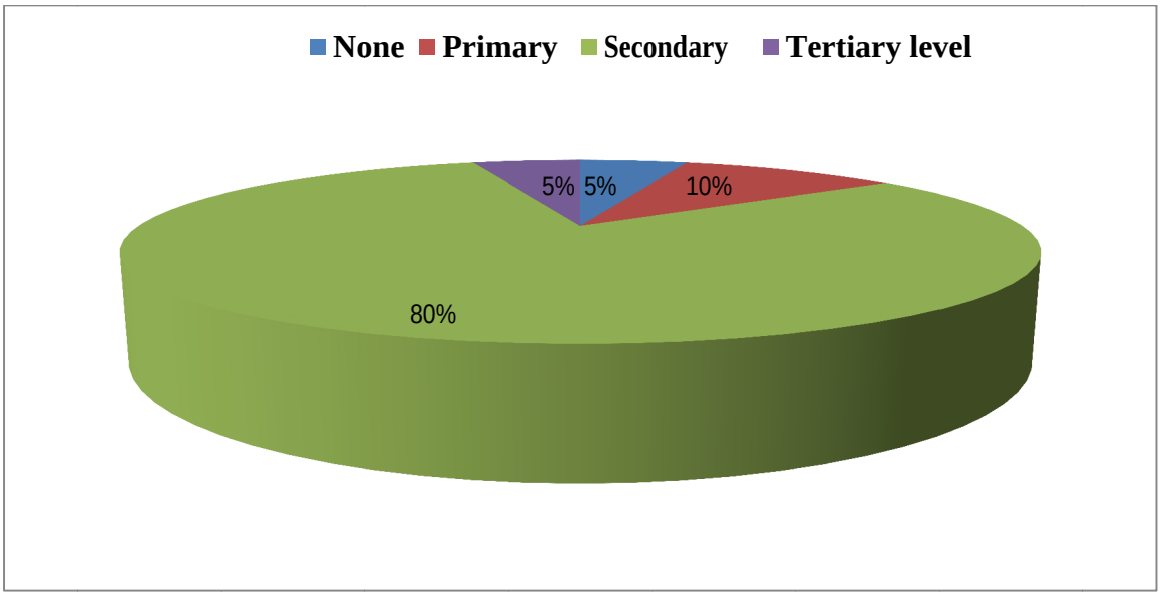
Table 2 reveals that 75 per cemt of the participants were single. In South Africa, almost 28 per cent of women are single parents (All Media Products Survey, 2008). According to this survey, more than half (53%) of these women have never been married and are not living with their partners. Out of this segment, 50 per cent are unemployed. The table shows that 85 per cent of the participants have full parental responsibilities to ensure the welfare of their children. This includes procuring CSG and utilising it in the best interest of the children.

Table 3: Employment status of participants

Employment status	Frequency	Percentage
Unemployed	17	85%
Temporary Employment	3	15%
Total	20	100%

The table reveals that 85 per cent of the participants were unemployed and the majority of the participants depended on CSG due to their unemployment status.

Figure 1: Participants' Level of Education



The majority of the participants, totalling 80 per cent, had secondary education. Among the 80 per cent, 25 per cent reached Grade 12 but could not proceed to tertiary level mostly due to financial constraints. Only one participant managed to obtain tertiary qualification. It has been found by Hunter and Adato (2007) that mothers who have less education are more likely to receive a grant than mothers who had completed at least grade 12.

4.3. THE UTILISATION OF A CHILD SUPPORT GRANT

The first objective of the study was to investigate how caregivers utilise the CSG. The following themes were identified and linked with this objective:

- The utilisation of a CSG by caregivers
- The perceived impact of appropriate CSG utilisation on school attendance

4.3.1 The utilisation of CSG by caregivers

The CSG was introduced in 1998 with the purpose of supporting primary caregivers of children by supplementing their resources to ensure for the adequate growth and development of children (Nkosi 2009). This grant is targeted at impoverished children. Thus, it is of paramount importance that the grant be utilised in the best interest of children.

In order to reach the study's objective, participants were asked how they utilise the CSG. The majority of the participants reported that they spend the grant on food, clothes for children, contributions to burial societies and for the children's school needs. This finding confirms the

observation by Lombard (2008) that the CSG is spent mainly on food. In a study conducted by Mutshaeni (2009) at Vhembe district of the Limpopo Province, it was also found that the CSG is spent on food and clothes for children. The study further revealed that the majority of CSG recipients are of the view that the grant is meant to buy clothes for children, ensure that children do not starve and also meet children's educational needs (Mutshaeni 2009).

Furthermore, the increased spending on food is associated with better nutritional outcomes that reduce the chances of CSG beneficiaries to suffer hunger. For example, it has been found that there is a decrease of 8-14 per cent in the probability of any child going hungry in households receiving the CSG (Department of Social Development 2004). This view was confirmed by one participant who noted that the grant assists many families in the community because they do not suffer hunger. The participant further indicated that most families can afford to buy food with the grant, although she felt that it is insufficient. Another participant observed that, '*The grant assists the children with food. They do not suffer from hunger due to the grant.'*

Other participants however did not specify whether the food is for children or for adults. It can be assumed that the food purchased with the CSG is not only meant for the children benefiting from the grant, but also other members of the family, since the majority of the participants rely on CSG to support their families. One participant commented that, '*many families depend on the grant.'* Another participant indicated that, '*Even though the grant is little, it's helpful because it's the only source of income.'* Samson et al. (2008) also confirmed that some families relied solely on the grant as their source of income and that the grant improved their ability to care for their children, particularly in terms of purchasing food.

Only a few participants specified the type of food they can afford to buy and mentioned bath soap, toothpaste, and washing powder as some of the major items that are included in their grocery lists. For instance, one participant said, *'We buy maize meal, canned fish and bath soaps…'*. The Department of Social Development (2011) also highlighted some of the food expenses purchased with the grant which included eggs, biscuits, maize-meal, polony, yoghurt, as well as child-specific food, such as formula milk, baby food and food for lunch boxes. Pampers and soap were also reported to be some of the items mainly purchased with the grant (Department of Social Development 2011).

Spending on clothing for both children and adults was mentioned, but not frequently. Similarly, the Department of Social Development (2011) found that clothing was one of the items rarely purchased with the grant. Some of the participants in this study were concerned about their inability to purchase winter clothes such as jackets, tracksuits, jerseys and school shoes for their children. One participant said that, '*I struggle with their clothing as well as their school needs such as warm tracksuits in winter'.*

Another expenditure item was electricity. This item was rarely mentioned because some of the participants resided in areas where electricity had not yet been connected. They therefore relied on other alternatives for energy such as firewood and candles. The Department of Social Development (2011) reported that a large amount of the grant is not used for electricity, though possible reasons were not mentioned. One of the participants remarked that '*my husband has piece jobs, when he gets paid he adds to the grocery and buys electricity.'*

Some of the participants expressed relief that they are no longer expected to pay school fees. This therefore reduces their financial burden and they are able to direct the money to other needs of their children. Crèche fees payment was mentioned by only few of the participants. For instance, one participant said, '*I pay for the child's day care centres' fees and also pay for her transport.'* Although transport costs to school were rarely mentioned, one participant observed that, '*I buy food and school uniform for the children and also pay for transport to crèche for one child.'* In the CSG evaluation report by the Department of Social Development (2011), some of the primary caregivers mentioned school-related expenses to include crèche fees, pre-school fees, pens, bags, calculators, transport, soccer trips and clothes. This was confirmed by one participant who reported that, *'I buy food, clothes and also pay school trips …'*

The majority of the participants mentioned school uniforms as a priority. Some even added that they make sure that their children have pocket money to school. One of the participants pointed out that, '*I buy school uniform, school stationery, clothes for the children and also ensure that they have pocket money when they go to school.'*

Another key aspect which was mostly pointed out was contributions to burial societies with the grant. One of the participants specifically said that she pays two burial societies which amount to R200.00. This however put pressure on her expenditure because she fails to buy other things which she regards as important, such as bath soap, washing powder and sugar. Another participant stated that, *'I'm unemployed, so I'm able to buy food and pay burial societies with the CSG.'* According to Tshoose (2010), a burial society is classified as a self-organised informal social security system in which a particular group of people within the community, including families and neighbours incorporates values that promote togetherness and a sense of belonging. Other forms of self-organised informal social security include *stokvels*, societies at church and rotation money schemes. This type of informal social security represents a way of life within traditional Black African communities (Tshoose 2010). In the majority of Black African communities, there is poverty, unemployment, and lack of access to necessities of life. These communities are left to rely heavily on the informal social security as a safety net (Tshoose 2010).

In addition, the Department of Social Development (2011) also noted that grants are frequently used for payments to burial societies, especially in the Limpopo Province. The area of this research study was a black community in the Limpopo Province and this type of system is commonly practiced. It was therefore not surprising that some of the participants utilised a large amount of the grant to contribute to these burial societies. These contributions are made to enhance solidarity within communities and in return for a support system which can be provided in the form of cash or in kind.

Only two participants indicated medical health treatment in their expenditure. This could be due to the fact that medical care is freely provided in government health care facilities such as clinics which are easily accessed within the community. Section 28(1) (c) of the Bill of Rights provides that all children have a right to basic health care services. The South African government has made sure that children have free access to these services. Some of the CSG recipients however prefer to utilise private health care services. The reason is that, better quality services are provided in private facilities and the queues are not long. The CSG is sometimes utilised to pay for private health care, although it may be expensive (Department of Social Development, 2011).

Moreover, a positive relationship has been observed between the CSG and health care services. The CSG is used to access health care due to the fact that children are prone to childhood illnesses and injuries. One of the participants was quoted saying that, '*The youngest child is sick most of the time, so some of the money I use it for her medical treatment.'* This signifies the role of the grant in protecting the health of poor children (Department of Social Development, 2011).

Through the researcher's observation during the interviews, it was found that the majority of the participants' children were in a good state of health and there was no malnourishment observed. This was also discovered by Hunter and Adato (2007) that receiving the CSG during the first 36 months of life gives a large and significant boost to child health. The participants' children were also tidy and appeared to be well taken care of by their caregivers. There was however one child who was found to be chronically ill. The child is on chronic treatment and the grant is mainly utilised for his special diet and transport to health care facilities. Meanwhile, the child's mother was unemployed; the grant enables the child to access health facilities and have food in order for his health to improve. Therefore, the grant allows poor children the opportunity to access resources.

Some of the participants did acknowledge that they do not always utilise the grant to benefit children, instead they sometimes use it for their own needs because they do not have any other source of income. Mutshaeni (2009) concurred that, although the recipients know the purpose of the grant, some are not using it for its purpose. For instance, one of the participants commented that '… *even myself it assists me because I'm unemployed. I sometimes create my own debts such as ordering shoes which I pay with the grant.'* The participant was however aware that the grant is meant to benefit children. According to Lombard (2008), the CSG is the sole source of income for many poor families, and is thus essential for people's survival. Perhaps this could be a contributing factor to why some of the caregivers utilise the grant for their own needs. Nevertheless, parents have a responsibility to provide for their children and ensure that the needs of their children come first. This is also emphasised in the Children's Act section 18(2), which states that parents have a responsibility to care and contribute to the maintenance of their children.

4.3.2 The perceived impact of appropriate CSG utilisation on school attendance

School attendance was one of the identified themes which was deemed significant and needed to be explored further so that it can be linked to the CSG expenditure. The majority of the participants reported that they spend the grant mainly to meet their children's educational or school needs. One of the participants said that, '*I'm also able to buy whatever they need for school.'* Another participant stated that, *'I buy school uniform for the child and make sure the child has pocket money to school'*. It was added by one participant that, *'it is helpful because I'm able to take my child to crèche and pay for her fees and transport. If it was not for the grant she would not be attending crèche.'* According to the Child Support Grant Evaluation Report, school-related expenses were frequently mentioned by CSG recipients as one of the major uses of the grant (Department of Social Development 2011). Utilising the grant, especially on school related items was perceived to have a positive impact on the children's schooling.

It has been found that children in households that receive social grants, particularly State Old Age Pension (SOAP) and Child Support Grant (CSG) are more likely to attend school (Department of Social Development, 2004). Although the grant's impact on school attendance is the same for boys and girls, the effect is decidedly larger for children that are living with their mother (Williams 2007). Thus, from this study it was anticipated that the children's school attendance should be high since the participants were mothers. For instance, one participant reported that, *'The children are enrolled at school and attend school regularly.'* Additionally**,** another participant confirmed that, *'All the children attend school.'*

Lund (2011) indicates that primary school enrolments have increased to 90 per cent in South Africa. The CSG increases primary school enrolment by roughly 2.4 percentage points from a base of 95.6 per cent, decreasing non-attendance by 54 per cent (Williams 2007). The grant also appears to help overcome the impact of poverty on school enrolment. Previously some children did not attend school because their families could not provide food for them, buy school uniform and others could not afford to pay school fees. This is despite the fact that learners cannot be denied admission because of their parents' failure to pay fees.

According to Sayed and Motala (2009), it is difficult to argue that school fees keep children out of school due to rising enrolment in South Africa. These authors however do acknowledge that fees have affected the pattern of enrolment, in that fees constitute a social class benchmark by which parents sort themselves in terms of their willingness to pay and their selection of schools. Some of the factors which were found to be negatively affecting school attendance are poverty, lack of support from families and inability to access transport to and from school (Alliance for Children's Entitlement to Social Security 2006).

The school fees policy which came into effect in 2007 and aimed at making at least 20 per cent of the poorest schools fee free has reduced the tendencies of absenteeism and has increased school enrolment. In terms of this policy, resource allocation differs from province to province based on rates of income, unemployment and illiteracy within the school area (Sayed & Motala 2009). Sayed and Motala (2009) further state that poor provinces such as the Eastern Cape and Limpopo have 56 per cent of their learners in poorer schools which are now being declared no-fee schools.

The introduction of a school feeding scheme project also has an impact on increased school attendance. According to the Friends of Chintsa (2010), this initiative was set up to address the needs of children attending rural schools in South Africa. In addition, the school feeding scheme was aimed at fostering better quality education by alleviating short-term hunger; providing an incentive for children to attend school regularly and also address certain micro-nutrient deficiencies. Friends of Chintsa (2010) further report that some of the school children from underprivileged communities rely on the provision of food at school for their nutritional needs. The feeding scheme is therefore designed to ensure a daily, hot and nutritious meal for every learner who attends school. The feeding scheme reaches many poor children and relieves poor caregivers from worry when they are unable to provide enough food for their children. The respondents are therefore assisted with some of their responsibilities by these government initiatives. They are able to channel the CSG amount received to other needs such as a school uniform, which has a positive impact on regular school attendance.

Potts (2012) found a positive correlation between grant receipt and enrolment in school amongst the poorest families. When asked if children attend school, one of the participants replied that, *'The child attends school regularly and she is in Grade 1.'* Some of the participants reported that they make sure that their children do not go to school hungry and

they have pocket money when they go to school. The grant is also used to buy school uniform. One of the participants commented that, '*I hardly see children go to school on a bare foot, unlike previously when there was no CSG.'* Another participant stated that, *'It assists the child because she does not go to school with an empty stomach. She also has pocket money to school….'*

In addition, one participant said that, *'I'm able to buy clothes for them (children) so that they go to school being neat.'* These show that, when the grant is utilised to benefit the children directly, positive outcomes such as regular school attendance are likely to be observed. When children are fed, cleaned and cared for, chances of absenteeism and poor attendance are limited.

Among the children of the participants who received CSG, there were children of school-going age as well as those who were still too young to attend school. Some of the children also qualified to attend crèche. It was reported by one participant that, '*Only one child goes to school. The other one is young to attend, but goes to crèche.'* During the interviews, it was found that all children who qualified to go to school did attend school. This shows 100 per cent school attendance from the participants' school-going children. Lund (2011), however argues that even though school attendance rates are high, it does not guarantee the quality of education, particularly in poorer schools. This could be traced back to the South African history of primary and secondary school systems, whereby many poor children, particularly those benefitting from CSG attend schools in which both personnel and material resources are lacking.

Some of the participants' children attend day care centres which was made possible through the CSG. According to Williams (2007), CSG is used to pay for Early Childhood Development (ECD) services and pocket money for children who are the recipients of the CSG. Department of Social Development (2011) reported that Early Childhood Development (ECD) services are highly valued by parents and caregivers in South Africa. This was also confirmed by some of the participants. For example, one participant said that, '*The grant assists the child because I'm able to pay crèche fees for him.'* Another respondent added that *'... I am able to take my child to crèche and pay for her fees and transport. If it wasn't for the grant she would not be attending crèche*.' This certainly confirms that the CSG plays a vital role in securing access to ECD services for young children from low-income households.

These ECD services prepare children for primary school. ECD services also promote interaction among children, which enables them to acquire social skills. Furthermore, crèches and day-care centres provide a secure environment for children and provide child-care during the day, which is helpful for working mothers (Department of Social Development 2011). One participant highlighted that *'...I can afford to take my child to crèche like other children and she gets stimulated by crèche activities.'* Therefore, ECD services are vital in promoting the welfare of children and are also beneficial to children. If an amount of the grant is channelled to these services as reported by some of the participants, it will indeed be in the best of interest of children.

4.4. PARTICIPANTS' PERCEPTIONS ON THE USE AND ABUSE OF CSG

The second objective of the study was to establish the participants' perceptions on the use and abuse of CSG. The majority of the participants were of the view that some of the caregivers misuse the grant and do not utilise it in the best interest of children. One of the participants remarked that; '*There are also those who utilise the grant for their own benefit and buy clothes for themselves instead of buying food for children.'* According to Potts (2012), there is inappropriate use of the grant. Mutshaeni (2009) found that most recipients know the purpose of the CSG, but are often just ignorant, careless and selfish in their use of it. He further reports that sometimes the grant is not spent on the things it is intended for. When respondents were asked about their perceptions on the use and abuse of CSG, some of the respondents expressed feelings of disappointment, anger and shame towards the caregivers who misuse the grant.

Participants identified the following as examples of abuse of the grant:

Gambling

The majority of the participants argued that some of the CSG recipients use the money for gambling. One of the participants pointed out that '*Some recipients of the CSG gamble with the grant and leave their children without food.'* Another participant agreed that, *'Some of the people use the grant to gamble…'* Certain religious groups regard gambling as sinful. On the other hand, some people may view it as morally neutral, that is, neither good nor bad (Bulwer 2003). Money which should have been spent on necessities is often spent on gambling. According to Bulwer (2003), gambling causes harm to society, especially when individuals

display impaired control on their gambling behaviour and as a result experience severe negative personal, financial, and social consequences due to emotional distress.

The type of gambling which was observed to be dominant in this community was playing cards. This is a common practice among unemployed females in this community. This was confirmed by one of the participants who stated that, *'Some recipients gamble with the grant by playing cards.'* This participant believes that it is due to gambling that the amount of the CSG is only increased with R10-00 annually. She added that, *'Myself I don't gamble but I'm still failing to meet all the family's basic needs.'*

Utilisation for own benefits

It was observed by many participants that some of the recipients of the grant utilise the grant for their own benefit. This is however, not surprising because the majority of the people depend on CSG. Therefore, it is likely that they will also use the grant for their own benefit. This is also exacerbated by the fact that South Africa's unemployment rate is high.

Additionally, the existence of poverty in many communities and households means that households use the grant for general household budgets, rather than for child-specific needs. Therefore, there are instances wherein the grant is not spent specifically on children, but shared among other family members. This as a result does not always represent misuse of the grant (Department of Social Development, 2011).

One participant said that, *'...there are also those who utilise the grant for their own benefit and buy clothes for themselves instead of buying food for children. There are a lot of people doing that which I believe it's a disgrace for women who use the grant for their own benefits because they should be appreciating government for having implemented the CSG policy in order to assist children.'* Another participant shared the view that, *'Some caregivers utilise the grant to buy their own clothes, meanwhile the grant is supposed to benefit children.'*

Furthermore, one participant remarked that, *'It's very painful that some utilise the grant for their own benefit and not in the interest of children. Many children are suffering because of caregivers who misuse the grant.'* Another participant pointed out that, '*Others misuse the grant by giving it to their boyfriends.'* This was also established by Mutshaeni (2009) who suggested that recipients of CSG, especially young mothers should be encouraged to inform the Social Development Authorities of any difficulties they encounter due to their receiving the grant, such as pressure to share it with their spouses or boyfriends.

Accumulation of debts

Participants argued that some recipients accumulate debts. One participant observed that, 'Some *recipients create their own debts and gamble with the grant and not utilise it in the best interest of children.'* This was also confirmed by one of the participants who said *'...I sometimes create my own debts such as ordering shoes which I pay with the grant.'* This is despite the fact that CSG is the only source of income for many people and recipients are aware that children are the main beneficiaries. This was also highlighted by one participant who said '…*some recipients create their own debts even if they depend on the grant.'*

In addition, it was argued by one participant that some of the recipients leave their SASSA cards with loan sharks. This happens in cases where a recipient borrows money from loan sharks and fails to repay them. The loan sharks keep the card until all the money, including interest is paid-up. This is a common habit practiced, although it is not lawful. This therefore leaves the recipient indebted and as a result, children are likely to suffer.

In 2011, the Minister of Social Development, Ms Bathabile Dlamini said in a MINMEC meeting held in East London that 'the department is looking at enhancing regulations with regards to financial institutions or loan sharks that are preying on the vulnerability of the social grant beneficiaries.' The Department has noticed that many beneficiaries have their identity document and bank cards confiscated by the loan sharks to ensure repayment of loans. Moreover, due to the rifeness of this practice, it is reported that SASSA officials have had to act as police officers to limit these tendencies.

Purchase of Alcohol

It was also argued by some of the participants that there are those who purchase alcohol with the grant. One participant indicated that, *'... some they utilise it to buy alcohol meanwhile children are without food.'* The participant added that, *'Actions should be taken against those abusing the grant.'* One of the participants remarked that, *'one of community members was arrested last week because she has been utilising the CSG and FCG to buy alcohol and the children did not have food.*'

In the study conducted by Niehaus and Shapiro (2010) on the Effects of Cash Transfers on Low-Income Households in Developing Countries, it was found that in developing countries such as Lesotho, Colombia and Mexico, conditional cash transfers were not spent on alcohol or cigarettes. On the other hand, in Western Zambia, it was found that less than 0.5 per cent

of the transfers were misspent on e.g. alcohol and tobacco. It was also established that 1.8 per cent of a cash transfer to Mexican households was spent on alcohol (Niehaus and Shapiro 2010). In South Africa, the Department of Social Development (2011) reported that the grant is sometimes utilised to purchase alcohol, visits to hairdressers by caregivers, spending on boyfriends, gambling, cell phones, clothes for caregivers and luxury foods (such as KFC). In the study conducted by Surender, Ntshongwana, Noble and Wright (2007), it was also established that some of the caregivers spent the money on liquor or clothing for themselves. This is a clear indication that the grant is not always utilised in the best interest of children.

According to Mutshaeni (2009), the purpose of the CSG is clear and specific. It is intended for those who cannot otherwise support their children, to enable them to give their children a decent life. However, there is reason to believe that not all children who should be the beneficiaries of this grant are in fact benefiting. Some of the caregivers use the grant for things contrary to the purpose of thereof. Although children are not direct recipients of the grant, recipients (caregivers) are expected to be using the grant for their benefit. While certain recipients abuse the grant by purchasing drugs and alcohol, gambling, fancy clothes for themselves and other irrelevant items, other parents do use the grant well and for the intended purpose.

That being said, none of the participants admitted to misusing the grant themselves. They only referred to people whom they know and others specifically said they do not misuse the grant, but always make sure that their children are a priority. One participant stated, *'Many people misuse the CSG but I myself use it to support the dependent children's and I'm able to buy things they want.'*

Regarding the usage of the grant, in most cases, the female caregiver who receives the grant is the person who has control of the cash in terms of decision making on its use and distribution within the household. Many teenagers are aware of their rights to the grant, but very few control grant use and decision-making (Department of Social Development, 2011). In contrary, one of the participants reported that, *'The grant does assist the children. I am open with them about the grant and draw a budget with them so that they know how the grant is utilised. They are also able to see what the family can afford and what they cannot afford with the budget.'*

4.5. PARTICIPANTS' VIEWS ON HOW THE GRANT CAN BE UTILISED IN THE BEST INTEREST OF CHILDREN

The last objective of the study was to establish the views of caregivers on how CSG can be utilised in the best interest of children. The participants were asked how the grant can be utilised to benefit children. The majority of the participants indicated that food should be the major item purchased with the grant. One participant observed that, 'T*he grant should be utilised to buy food and clothes for children.'* In addition to food and clothes, one participant stated that the grant should also be used to pay school fees for children. This however can only be applicable to a few children because the majority of children are not expected to pay school fees due the government policy on school fees-exemptions.

Another participant pointed out that the grant should be utilised to buy school uniform. She stated that, *'food is the greatest priority to me.'* Some of the participants reported that they can only afford to buy food with the grant. They further observed that not all their children's needs are met through the grant. For instance, it was said by one of the participants that, '*The only need which is met through the CSG is food.'* None of them however complained that their children were living without food. Therefore, it can be inferred that food is the most basic need that the grant should be utilised for in order to benefit children.

Some of the participants stated that educational needs should be a priority. These participants were of the view that a small amount of the grant should be saved on a monthly basis to help the children in future, especially when they go to tertiary institutions. One of the participants observed that, *'An amount of R50 has to be saved per month which could be used for tertiary fees.'* Another participant added that, *'Some of the grant's amount should be saved in order to assist the children in future on their educational needs, since the grant gets terminated at 18 years.'*

The Department of Social Development (2011) found that many adolescents think the grant should be spent on their clothes and school, while others are of the opinion that the money should be saved in the bank to pay for university education. Other participants however said that it is desirable to save money, but it is not always possible. One participant commented that *'…the amount we receive is not sufficient. I cannot save some of the money for the children; I only afford food and clothes.'* These participants therefore believe that it is in the best interest of children to invest in their future through savings so as to enable them to have a brighter future.

Moreover, another factor that could contribute to future investment as highlighted by one of the participants would be 'to *ensure that children have a lunch box when they go to school and that they also carry pocket money to school, in that way the children will be benefitting.'*

Another participant had a different opinion that *'... those who have additional income despite the CSG, they should at least save an amount of R100.00 from the grant'.* According to this participant, it is only possible to save money if there is another source of income other than the grant.

Some of the participants raised concerns that even if they try to utilise the grant in the best interest of children, with the amount of CSG they fail to ensure that their children's needs are met. Similarly, Surender et al. (2007) also realised that the majority of CSG recipients felt that the CSG grant was used for subsistence needs only. While acknowledging the efficacy of the grants, Surender et al. (2007) found that most recipients of the grant complained about the fact that the grant was not enough to meet basic needs or to cover the costs of even the child on whose behalf the grant was received.

They said that the only way the grant can be utilised effectively and benefit children is if the government increases the CSG amount. A variety of increased CSG amounts was proposed. Some suggested that the amount be increased by R20.00 annually rather than R10.00 as compared to the current amount of R10.00. Some of the suggestions ranged from an amount of R350 to R600 per month. These participants argued that an increase in the CSG amount will make a huge difference in their lives. For example, one participant indicated that, '*Government should increase the CSG to R500.00. This will make a huge difference and impact positively to many families which depend on the grant.'* Another participant was of the view that, *'Government should at least increase the CSG with R20.00 instead of R10.00.'* Another participant had a similar view that the CSG amount should be increased even though she believes that, *' when it increases even the price of food and goods increases.'*

In addition, these participants pointed out that the increased amount will be spent mainly on children who are the primary beneficiaries of the grant, but also on the recipient and on household needs. Specifically, some indicated that the money would be spent on the educational needs of the children, food or groceries for the household, clothes for the children and also on the future needs of the children. It is not surprising that almost half of the participants suggested an increased grant amount, seemingly because most of them are

unemployed and have the grant as their only source of income. Hunter and Adato (2007) argue that an increase in the CSG amount generates a greater impact on poverty reduction.

Despite the amount increment, one of the participants even suggested that the age be extended up to 21 years. This particular participant believes that in most cases, children become independent at the age of 21 and not 18. Therefore, the grant should support them until they are independent. One respondent, however, showed caution in the fact that whatever the government distribute depends on fiscal resources. She supported the suggestion that the CSG amount be increased, but with awareness that there might be financial constraints and that it may not always be to the recipients' satisfaction.

In contrast, some of the participants stated that they do not want the amount of the CSG to be changed. These participants appreciate what the government has done thus far regarding the CSG. One of the respondents said '*I am happy with what the government has done. The grant has helped a lot of people, so what the government has done its enough.'* Another participant also said '*I don't promote that the grant be increased…'* According to this participant, the more the grant is increased the more people misuse it. In addition, one of the participants claims that the reason the grant is only increased by R10.00 each year is because there are others who misuse the grant and do not utilise it in the best interest of children.

Mutshaeni (2009) argues that recipients are given the grant with the assumption that they will exercise all the necessary responsibility to ensure that children, who are the beneficiaries do benefit from the grant. He believes a gap exists between the recipient and beneficiary which may bring about failure in the exercise of responsibility. Such failure seems not to be fully addressed in the legislation. He further indicates that placing emphasis on qualifying criteria is not enough, rather policy makers should also take cognisance of the fact that the grant is not always utilised in the best interest of children.

When the participants pointed out their perceptions on the abuse of the grant, they also suggested ways on how those misusing the grant can be dealt with. The participants' suggestions are discussed hereunder:

Food vouchers initiation

One of the participants suggested that a solution to those misusing the grant would be to initiate food vouchers. Similarly one participant added that *'Those abusing the grant should be given food and clothes vouchers instead of cash.'* Another participant said that, '*I think the*

government should initiate vouchers and draw boundaries that the voucher can only be used to buy food. This will limit the tendency of those playing cards with the money and will benefit children instead.' It was added by a participant that, if the grant is in the form of food it will reduce instances wherein children are found to be without food, even though they are CSG beneficiaries.

Potts (2012) was also of the view that the CSG should be provided in the form of food stamps and cash-transfer, which affords the recipients discretion to use the funds for the intended purpose, but with the addition of conditionality. Potts believes that the transition to a shared system of in-kind and cash-transfer will improve the government's ability to direct the use of grants, increase transparency, and decrease misuse of funds. Mutshaeni (2009) concurred that, rather than giving money to recipients - that they could spend on inappropriate things - vouchers should be introduced that allow the recipients to purchase only what is needed for children.

One participant was also of the same opinion that, '*The government should implement a system whereby the grant is given in cash together with food parcels. This will reduce the tendency of those abusing the grant because at least there will be food for children. The cash will then assist the children with their school needs.'*

There is a continuous debate on whether the grant should be paid in the form of vouchers rather than cash. Those in favour of vouchers argue that vouchers retain their value even in the face of rising prices. On the other hand, those who oppose vouchers highlight that they are not flexible and therefore do not allow recipients to meet their non-food needs, such as education and transport (Department of Social Development 2011).

Change of recipient

Some of the participants argued that changing the recipient would be a better solution to dealing with those misusing the grant. This was confirmed by one participant who indicated that, *'For those abusing the grant, the recipient should be changed. The community also has a role to play in identifying those who do not utilise the grant in the best interest of children because the grant is meant for children. The government may also avoid giving the recipients the grant in cash rather give them food and clothes for the children.'* In addition, another participant noted that, *'For those abusing the grant, there should be a change of beneficiary to someone who can be able to buy food for children.'*

This suggestion made by the participants is possible, in that the Social Assistance Act 13 of 2004 provides that if it is suspected that the primary care-giver is abusing the social grant, such suspected abuse can be investigated. If it is found that such abuse has taken place, the Agency must appoint a person to receive the social grant on behalf of the beneficiary and to use it for the benefit of that beneficiary subject to any prescribed conditions. This is also applicable in cases wherein caregivers are found to be incapable of using a grant for the benefit of the child in respect of whom he or she received it.

Social workers are key role-players when it comes to the change of a CSG recipient. They are in a position to investigate any reported case of CSG abuse and to identify a suitable primary caregiver who may receive the grant on behalf of the beneficiary (child).

Monitoring of CSG utilisation by recipients

It was indicated by one participant that social workers should monitor the utilisation of the CSG in order to ensure that the grant benefits children through the assessment of children's needs, and ensure that their basic needs are met. This participant further stated that families who are unable to manage their finances should be assisted by social workers in drawing up their budgets. Another participant shared a common view that, *'the social workers have to monitor the utilisation of CSG continuously to ensure that the grant is used in the best interest of children.'* Social workers assist many in applying for the Child Support Grant, and they intervene to ensure that grants are correctly used to meet the needs of the intended beneficiaries (Department of social development, 2011).

Additionally, some participants argue that the government should monitor how the grant is utilised. For example, one participant said that, '*Government should monitor the utilisation of CSG, this way they will be able to identify people abusing the grant.'* The participants who suggested this did not specify which segment of the government should be responsible for monitoring. Since the grants are administered by the Department of Social Development, the department therefore has a responsibility for monitoring CSG recipients in order to ensure that the CSG is appropriately utilised. The participants acknowledged that since there are some who misuse the grant, the government has a responsibility to assess children's basic needs such as shelter, food and educational needs through monitoring and make sure that these needs are met. Hopefully, through monitoring, those abusing the grant will be identified and the grant will then serve its purpose of supporting children.

Potts (2012) argues that the CSG should continue to be means-tested, but additional conditions need to be attached to the continued recipients of the grant. Currently, primary care-givers are responsible for ensuring that the child is fed, clothed, and immunised. Furthermore, Potts (2012) indicates that the CSG recipients should be responsible for verifying their child's acquisition of medical care, enrolment and attendance in school. According to Potts (2012), these responsibilities are not monitored. The author thus emphasises monitoring of CSG recipients to ensure that children are effectively benefiting from the grant.

Punishment

Some participants believe that there should be punishment for those misusing the grant. Some respondents indicated that the misuse of a CSG should be regarded as child abuse; consequently, those misusing the grant should be arrested. This type of punishment is implemented though not frequently. A case scenario was mentioned by one of the respondents who said that '*...one of community member was arrested last week because she has been utilising the CSG and FCG to buy alcohol and the children did not have food.'*

It was also indicated that the grant should be terminated for those abusing the grant because children are struggling even when they are beneficiaries of the grant. One participant commented that, *'For those abusing the grant, it should be terminated because children are struggling even when they receive the grant.'* Terminating the grant would put children at risk because the majority of children live in poverty, which is why the grant was introduced in the first place. Mutshaeni (2009) stated that the existence of widespread poverty in South Africa led to Child Support Grants being introduced as a means of assisting in poverty alleviation programmes. Terminating the grant will therefore impact negatively on the welfare of children. Remedial actions should rather be taken against those misusing the grant, not total CSG termination. Surender, Ntshongwana, Noble, and Wright (2007) discovered in their study on attitudes towards the labour market and social grants that, the majority of participants who were concerned about the perceived misuse of the CSG suggested vouchers, tokens or food parcels and not for the grant to be stopped.

Drawn from these participants' comments, it can be inferred that a common feeling exists regarding the misuse of the grant. Since there is financial mismanagement, giving food vouchers instead of cash might work and benefit the children directly.

4.6. CONCLUSION

The CSG is the main source of income in many families. This is attributed to the high unemployment rate in South Africa as well as the existence of chronic poverty. When the grant was introduced in 1998, children living in poverty were the main targeted group. The grant was also intended as a supplement to income in families, but in actual sense the grant benefits the entire household and not children per se. This therefore, raises a debate of whether the grant is utilised effectively in the best interest of children or not. This study has revealed that there are caregivers who misuse the grant. Some of these caregivers or recipients gamble with the grant, use it for their own benefit and some purchase alcohol with the grant. This represents the misappropriation of the grant which places children in a disadvantaged position.

Remedial ways on how those misusing the grant could be dealt with were highlighted in this chapter and they included the introduction of vouchers, change of CSG recipient, monitoring and punishment. The type of suggested punishment included arrest and CSG termination. Termination is however not desirable given the fact that children are a vulnerable group and will suffer should the grant be terminated.

Nevertheless, despite the fact that there are caregivers who fail to utilise the grant to benefit children, there are those who do their level best at all times to ensure that their children's needs are met. These caregivers utilise the grant with integrity, e.g., for food, clothes, and educational needs; children therefore benefit directly and a reflection of this would be improvement on school attendance, improved health care as well as the reduction of hunger.

CHAPTER 5: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1. INTRODUCTION

The aim of the study was to explore the extent to which caregivers utilise the CSG in the best interest of children. This chapter presents a summary, conclusions and recommendations of the study. A summary of the key findings is presented according to the objectives of the study.

5.2. SUMMARY OF THE FINDINGS

Objective 1: To investigate how caregivers utilise the Child Support Grant

The study revealed that the CSG is spent mainly on food, clothes for children, and contributions to burial societies. The findings further revealed that most families can afford to buy food with the grant, which serves to ensure that children do not suffer from hunger. Some of the items that were likely to be purchased with the grant included bath soap, toothpaste, washing powder, maize meal, and canned fish. The findings further showed that a positive relationship exists between the CSG and improved health care among children. This was also confirmed by the researcher through observation during the interviews wherein it was found that the majority of the participants' children were in good health and there was no malnourishment observed. Therefore, the grant allows poor children the opportunity to access resources.

The grant was also used to purchase clothes. There were however concerns presented by some of the participants that they fail to purchase winter clothes such as jackets, tracksuits, jerseys and school shoes for their children with the grant due to the fact that the money received its not enough. The findings revealed that another expenditure item was electricity, though it was not mentioned by the majority of the participants since some of them resided in areas where electricity had not yet been connected. They therefore relied on other alternatives for energy, such as firewood and candles.

Another key aspect which the grant was utilised for was contributions to burial societies. This is a common practice in Black African communities. It was therefore not surprising that some of the participants utilised part of the CSG amount to contribute to burial societies. These contributions are done to enhance solidarity within communities and in return for a support system which can be provided in the form of cash or in kind.

The study revealed that a portion of the CSG amount is spent on medical treatment, although this was found to be negligible. This could be attributed to the fact that medical care is freely provided in government health care facilities such as clinics which are easily accessed within the community.

The findings revealed that the grant was utilised for the children's educational needs. Utilising the grant, especially on school related items was perceived to have a positive impact on the children's schooling. Furthermore, the findings showed when the grant is utilised to benefit the children directly; positive outcomes such as regular school attendance are likely to be realised. When children are fed, cleaned, and cared for, chances of absenteeism and poor attendance are limited.

The findings revealed that some of the participants utilise the grant to pay crèche fees and transport for school-going children. The majority of the participants mentioned school uniforms as another major priority on their expenditure list. Some even added that they make sure that their children take pocket money to school. This certainly confirms that the CSG plays a vital role in securing access to ECD services for young children from low-income households.

Some of the participants acknowledged that they do not always utilise the grant to benefit children. Instead, they sometimes use it for their own needs because they do not have any other source of income. The CSG is the sole source of income for many poor families, and this explains why some of the caregivers utilise the grant for their own needs.

Objective 2: To establish the participants' perceptions on the use and abuse of the CSG

The findings revealed that some of the caregivers misuse the grant and do not utilise it in the best interest of children. Thus, the grant is sometimes not spent on the things it is intended for. Instead, it is utilised for gambling, and for purchasing alcohol. As a result, participants end up accumulating debts. Money which could have been used to meet basic necessities is spent on gambling and alcohol. The findings showed that playing cards is the dominant form of gambling observed in the area and it is common among unemployed females.

Objective 3: To establish the views of caregivers on how the CSG can be utilised in the best interest of children

The findings revealed that the majority of the participants argued that food, clothes, and school related necessities should be the major items purchased with the grant. The findings also revealed that the participants were of the view that a small amount of the grant needs to be saved on a monthly basis so that it will help the children in future, especially when they go to tertiary institutions. Other participants argued that although the idea of saving was desirable, it was not always possible.

The participants complained about the inadequacy of the grant. Most of them observed that the CSG amount was insufficient to meet basic needs or to cover the costs of even the child on whose behalf the grant was received. They suggested that the grant amount be increased regularly and not at a scale of R10.00 as it currently is. The participants argued that an increase in the CSG amount would make a huge difference in their lives. However, participants were very aware that the increase in the CSG amount depended on fiscal resources and not on what recipients want.

5.3. CONCLUSIONS

The South African government made a wise decision in introducing the CSG as a strategy for poverty alleviation because the results are magnificent. The CSG serve as the main source of income in many families. Most families would have been unable to meet their basic needs if it was not for the grant.

When the grant was introduced in 1998, it was targeted mainly at impoverished children. The grant was also meant to supplement income in families, but in actual sense the grant benefits the entire household and not children per se. However, it is of paramount importance that it be used in the best interest of children since they were the intended beneficiaries.

Based on the research findings, it is concluded that the grant is utilised directly to benefit children by purchasing food, clothes for children, school related needs such as school uniforms, paying ECD centres and transport. Indirectly, the grant benefits other family members as well.

5.4. RECOMMENDATIONS

The section discusses the recommendations arising from the study.

Given the fact that there are recipients who misuse the grant, the following recommendations were proposed on how this matter can be dealt with:

- Vouchers should be introduced that enable the recipients to purchase only what is needed for children. For example, if food vouchers are initiated it will reduce instances wherein children are found to be without food althlough they are CSG beneficiaries.
- If it is found that the recipients misuse the grant, someone should be appointed to receive the grant on behalf of the child and to use it for the benefit of that child. This should be done in collaboration with social workers and SASSA officials.
- Social workers should monitor the utilisation of CSG in order to ensure that the grant benefits children. Given the fact that the caseload for social workers is high, hiring other personnel (e.g. Auxiliary Social Workers) to deal specifically with the monitoring of the grant could be a solution. The Auxiliary Social Workers can also assist families who are unable to manage their finances, to draw budgets with the CSG.
- There is need for South Africa to develop a comprehensive system of social protection which will enable caregivers to receive support in their own right. This would serve to ensure that the CSG is used specifically to meet the needs of children.

The following recommendations are proposed for future research:

- A larger sample of the population may produce more findings that are interesting and increase generalisations.
- The study should be duplicated in other sub-districts of the Limpopo Province in order to establish how the grant is utilised to benefit children in the whole province.
- An in-depth study, which will cover the children who are the beneficiaries of the grant, SASSA officials, teachers, and social workers as participants may yield more information on the utilisation of the grant.
- There is need for a study that assesses the impact of the grant.

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APPENDIX A

INTERVIEW GUIDE (SEMI-STRUCTURED INTERVIEW)

Section A: Demographic/ Biographical Data

1. Age

2. Marital status

3. Occupation

4. Level of education

5. Religion

Section B: Information on CSG

1. When did you start to receive CSG?
2. How many children do you receive for?
3. How do you utilise the grant?
4. Is the CSG helpful to you?
5. How was life before CSG?
6. Do you see the difference after you received CSG?
7. Are the children in school?
8. How does CSG assist your children?
9. Are their basic needs met through CSG?
10. What are your views regarding the impact of CSG in Ba-Phalaborwa sub-district?
11. What are your views about the use or abuse of CSG?
12. How can the grant be utilised in order to benefit children?
13. How can the government improve the policy of CSG?

APPENDIX B

PARTICIPANT INFORMATION SHEET

Greetings

My name is Khosa Priscalia. I am a social worker employed by the Department of Social Development and placed in Maphutha L. Malatji Hospital serving Ba-Phalaborwa community. I have registered for Master's degree in Social Work at the University of Witwatersrand. As part of the requirements for the degree I am expected to conduct a research study. My research topic is the utilisation of Child Support Grant by caregivers in Ba-Phalaborwa. The study will explore how caregivers utilise Child Support Grant in the best interest of children. The study will make suggestions about how the CSG can be utilised to benefit children. It will also assist policy makers in evaluating the impact of CSG.

You are kindly invited to participate in the research study. Your participation in the study is voluntary. You will not be coerced to be part of the study. There will be no negative consequences if you refuse to participate. However, if you agree to participate, arrangement for interviews in time and place suitable for you will be made. You may withdraw from the study at any time and you may also refuse to answer any questions that you feel uncomfortable with answering. The interview will take approximately the duration of an hour and your identity will be kept confidential and not be included in the final research report.

Due to the fact that sensitive issues will be discussed in the interview, you might be at risk of experiencing emotional distress. Should a need for counselling arise after the interview, my colleagues are willing to offer the service at Maphutha L Malatji Hospital. Please do not be reluctant to ask questions regarding the study. You can contact me on 0736579395.

Your participation in the study will be highly esteemed.

Yours sincerely

……

APPENDIX C

CONSENT FORM FOR PARTICIPATION IN THE STUDY

I …….. give consent to participate in the research study. The aim and objectives of the study have been explained to me and I understand them.

Date:……..

Signature:…….

APPENDIX D

CONSENT FORM FOR AUDIO-TAPING OF THE INTERVIEW

I……. hereby give the researcher permission to tape-record the interview. I fully understand that the tapes and interview schedules will be kept for two years following any publications or for six years if not published.

Date: ……..

Signature:……

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