GLOBAL GOALS FOR EVERY CHILD: PROGRESS AND DISPARITIES AMONG CHILDREN IN SOUTH AFRICA



GLOBAL GOALS FOR EVERY CHILD: PROGRESS AND DISPARITIES AMONG CHILDREN IN SOUTH AFRICA

ACKNOWLEDGEMENTS

This publication is a follow-up to the 2011 report on *South Africa's Children: A Review of Equity and Child Rights* by the South African Human Rights Commissions (SAHRC) and the United Nations Children's Fund (UNICEF). Both draw their inspiration from UNICEF's Progress for Children series as well as a number of notable national monitoring exercises, most prominently the country reports on the Millennium Development Goals produced by Statistics South Africa and *Children Count*, released annually by the Children's Institute at the University of Cape Town.

The publication draws heavily from national surveys and administrative data, as well as international sources. Bjorn Gelders from Development Pathways conducted the technical collation and analysis of the data, and drafted the report. Specialists from UNICEF and SAHRC provided valuable inputs and feedback at various stages. Alejandro Grinspun from UNICEF South Africa was responsible for giving technical guidance and oversight, and for the overall management of the project.

Suggested citation: SAHRC & UNICEF, 2016. *Global goals for every child: Progress and disparities among children in South Africa.* Pretoria: UNICEF South Africa.

© South African Human Rights Commission/United Nations Children's Fund

This publication is intended to support everybody who works in the child rights field in South Africa. All care has been taken to ensure that the information provided is correct and original sources have been indicated for reference and verification. With an identification of the South African Human Rights Commission and UNICEF as source, the document may be freely quoted, reviewed, abstracted, reproduced and translated, in part or in whole, but not for sale nor for use in conjunction with commercial purposes. Original sources should be acknowledged where indicated in the publication.

ISBN 978-0-620-72680-1

Obtainable free of charge from:

South African Human Rights Commission. Website: http://www.sahrc.org.za UNICEF South Africa. Website: http://www.unicef.org/southafrica

Cover photograph © UNICEF/Williams

Design and typesetting Handmade Communications



FOREWORD	3
OVERVIEW	5
SUMMARY REPORT CARD ON PROGRESS AND DISPARITIES AMONG CHILDREN IN SOUTH AFRICA	12
01 SOCIO-DEMOGRAPHIC PROFILE OF CHILDREN	14
02 SOCIAL INCLUSION	22
03 NUTRITION	34
04 HEALTH AND HIV	42
05 EDUCATION -	52

04 HEALTH AND HIV 05 EDUCATION 06 WATER AND SANITATION 07 CHILD PROTECTION 22 TECHNICAL NOTE



FOREWORD



BY COMMISSIONER LINDIWE MOKATE, SOUTH AFRICAN HUMAN RIGHTS COMMISSION South Africa has made significant progress in fulfilling the rights of the child since the advent of democracy in 1994. The South African Constitution boasts a legislative framework that is world renowned for its advances on the rights of children, and the State has introduced many targeted legislative and policy advancements. Some of these include the Child Support Grant, which is credited with having substantially improved the financial situation of many indigent families, thereby positively contributing to the well-being of children in South Africa.

It is, however, concerning that given all the advancements and the initiatives that have been embarked upon, a great number of children are still left behind. High levels of inequality continue to pose a serious challenge to South Africa's expressed commitment to children's rights. Poverty remains a lived reality for far too many of our children. By providing updated statistical information, this publication promotes the understanding of the current status of children, particularly with regard to efforts aimed at addressing children who are trapped in poverty and, as a result, socially excluded.

The study focusses on areas that are pertinent to children's development. The statistical information provided here covers the important areas of social inclusion, nutrition, health, HIV, water, sanitation, education and child protection. This information will be useful not only to advocates of child rights but also to the State, as it reviews its performance in terms of the commitments made under the National Development Plan.

The report illustrates that while progress has been made as far as children's rights are concerned, much remains to be done, especially in the poorest sections of society where children are most likely to remain trapped in poverty. If sufficient attention is paid by the relevant authorities to addressing challenges in these areas, the lives of children in South Africa will vastly improve, in line with the goals of the National Development Plan and the United Nations's Sustainable Development Goals.

The South African Human Rights Commission is proud to be a part of the publication of *Global Goals for Every Child: Progress and Disparities among Children in South Africa.* As a nation, we all have to ensure that government, which has the primary responsibility to promote and protect children's rights, delivers on its obligations. Through its mandate, the South African Human Rights Commission continues to engage with government and other stakeholders to ensure that the rights of children are realised.

I have no doubt that this report will assist the Commission and other stakeholders in monitoring and tracking progress made towards the realisation of children's rights in South Africa.

OVERVIEW

This report presents an analysis of progress and disparities among children in South Africa. Data show significant progress during the past two decades in areas such as child poverty, child survival, mother-to-child transmission of HIV and primary school attendance, among others. These are impressive achievements, but they are only part of the story. Stark gaps in opportunity – between rich and poor households, urban and rural communities, Black African and White children – perpetuate intergenerational cycles of deprivation. Disadvantages based on gender, disability and other markers persist.

The structure of the report builds on the 2030 Agenda for Sustainable Development and the new Sustainable Development Goals (SDGs) adopted by world leaders in September 2015. It groups together child-related SDG goals and targets into six clusters: social inclusion, nutrition, health and HIV, water and sanitation, education and child protection. It uses selected indicators from the global indicator framework for which data are available to highlight critical gaps and challenges for children in South Africa. Data are derived from the latest nationally representative household surveys, such as Statistics South Africa's General Household Survey (GHS) and the Southern Africa Labour and Development Research Unit's (SALDRU's) National Income Dynamics Study (NIDS), census, administrative data from government departments and agencies, and United Nations inter-agency estimates.

Today there are 19.7 million children under the age of 18 in South Africa. The experience of childhood is increasingly urban. In fact, over 55 per cent of children live in cities and towns. Migration is an important demographic process in shaping the distribution of the population. Nearly one in 10 children nationwide, and one in five in Gauteng, have migrated from another province. Fluid caregiving arrangements are another common feature of childhoods in South Africa. Only one in three children live with both their biological parents and one in six has lost a parent. Population projections indicate that the overall number of children in the country is reaching its peak and will start to decline gradually. The proportion of children in the total population will go down from 36 per cent today to 29 per cent in 2035.

SOCIAL INCLUSION

END POVERTY, PROMOTE DECENT WORK AND ECONOMIC GROWTH, AND REDUCE INEQUALITY

The SDGs call for an end to poverty in all its manifestations, including extreme poverty, over the next 15 years. All people everywhere, including the poorest and most vulnerable, should enjoy a basic standard of living and social protection benefits. South Africa has made important progress and succeeded in nearly halving the share of children living below the food poverty line since 2003. However, almost seven out of 10 children are living in households below the upper-bound poverty line, which takes into account both food and non-food needs. Stark disparities persist between different population groups and across geographic locations, with child deprivations still heavily concentrated in the areas where the former homelands of the apartheid era used to be. Poverty also varies depending on a child's living arrangements: those who live in households headed by women or without coresident parents are poorer than other children.

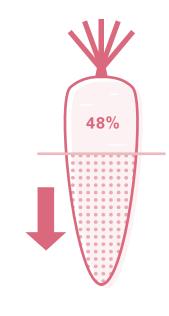
Child poverty could have been worse if the country had not made such impressive progress in fulfilling children's rights to social security. Today, 12 million children are receiving the Child Support Grant, 470,000 children are supported by the Foster Child Grant (of whom three in every four live with their grandparents or other relatives), and 130,000 children with severe disabilities are benefiting from the Care Dependency Grant. The existence of barriers to accessing child grants, however, remains a concern. For instance, an estimated 18 per cent of eligible children are not receiving the Child Support Grant. Uptake rates are especially low among eligible young children under age 1 and among those living in urban formal areas.

The goal on economic growth and employment calls for a global strategy to ensure decent work and opportunities for young people. Poverty and unemployment are inextricably linked, with over 60 per cent of South Africa's poorest children not having any working adults at home. As children themselves move into adulthood, many are also disconnected from the labour market and opportunities that promote employability. Nationwide, one in three young people aged 15–24 years are neither in employment nor in education or training. Racial inequalities remain pronounced, while youth with disabilities are nearly twice as likely to be inactive and not engaged in learning compared with their non-disabled peers.

The level of income inequality remains among the highest in the world. Reducing it will not be possible in the absence of inclusive growth. For the poorest 40 per cent of the population, the growth of household income has been lower than the national average. A different, more inclusive pattern of economic growth will be needed to redistribute income and wealth, reduce disparities and lift poor South Africans out of poverty.



1 IN 3 YOUNG PEOPLE ARE NEITHER IN EMPLOYMENT, NOR EDUCATION, NOR TRAINING



48% REDUCTION IN THE SHARE OF CHILDREN BELOW THE FOOD POVERTY LINE SINCE 2003

NUTRITION

END HUNGER, ACHIEVE FOOD SECURITY AND IMPROVED NUTRITION

The SDGs call for ending hunger and all forms of malnutrition, and achieving sustainable food production by 2030. The aim is to ensure that everyone everywhere has enough good-guality food to lead a healthy life. In South Africa, the share of children experiencing hunger because of a lack of food has declined considerably, from an estimated 30 per cent in 2002 to 12 per cent in 2014. The decline was particularly pronounced in the Eastern Cape and Mpumalanga. However, disadvantages based on location, wealth, race, gender and other markers persist. Reported child hunger ranges from a low of 4 per cent in Limpopo to a high of 19 per cent in KwaZulu-Natal, and is more than twenty times higher among the poorest children compared to the least poor. Children in female-headed households are nearly twice as likely to experience hunger as those living in male-headed households.

Despite gradual progress chronic undernutrition, or stunted growth, still affects over one in five children under the age of 5 across the country and 28 per cent of the poorest children. Left unaddressed at that point, chronic undernutrition can affect cognitive development, leading to learning difficulties and poor health in adolescence and adulthood. Undernutrition co-exists with overweight, leading to a double burden of malnutrition. Overall, around 14 per cent of young children under 5 are overweight. Rates of overweight increase rapidly with age, especially among girls: 29 per cent of females aged 15–19 years are overweight or obese-three times as many as males of the same age. The existence of micronutrient deficiencies among children and women is another concern. A guarter of women of reproductive age are anaemic, a condition that impairs health and well-being and increases the risk of maternal and neonatal adverse outcomes. The incidence of low birthweight remains relatively high, affecting for instance almost one in every five newborns in the Northern Cape.

CHILDREN SUFFERING FROM HUNGER DECLINED FROM 30% IN 2002 TO 12% IN 2014

1 IN 5 CHILDREN UNDER AGE 5 HAVE STUNTED GROWTH

HEALTH & HIV

ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

The goal on health aims to address risks across the life cycle by improving reproductive, maternal and child health; ending the epidemics of major communicable diseases; reducing non-communicable and environmental diseases: achieving universal health coverage; and ensuring access to safe, affordable and effective medicines and vaccines for all. In South Africa, the number of women who died each year due to complications of pregnancy and childbirth increased between 1995 and 2015, from 62 deaths to 138 deaths per 100,000 live births, according to United Nations inter-agency estimates. The country, however, started reversing the trend of rising maternal mortality during the last five years. The mortality rate of children under 5 fell by 46 per cent since 2005, but progress needs to accelerate to meet global and national targets. Most child and maternal deaths can be prevented, as evidenced by the huge disparities between different provinces and population groups. For instance, compared with a White child, a Black African child is almost five times more likely to die before his or her first birthday.

South Africa continues to have the largest HIV and AIDS epidemic of any country in the world. Nearly 30 per cent of pregnant women and an estimated 235,000 children under the age of 15 are living with HIV. Adolescent girls and young women are disproportionately vulnerable and at high risk. The country is making important strides though in addressing the epidemic. New HIV infections among children are declining at an impressive rate, largely due to scaled-up efforts to prevent mother-to-child transmission. The prevalence of HIV among children appears to be decreasing in all provinces, except in KwaZulu-Natal. Access to treatment is growing: nearly three-quarters of children living with HIV are now receiving antiretroviral therapy, up from 33 per cent in 2010.

The SDGs call for universal access to sexual and reproductive health-care services. Nationwide, less

than half of women of reproductive age are using modern contraceptive methods to prevent unplanned pregnancies. One in seven adolescent girls aged 15–19 years have already given birth, pointing to a need for strengthening access to reproductive health information and care. Rates of adolescent pregnancy are especially high in both urban and rural informal areas and among girls from the poorest households.

CHILDREN LIVING WITH HIV RECEIVING ANTIRETROVIRALS

33% ^{IN} 2010 74% ^{IN} 2015

DISTRICTS ACHIEVING THE NATIONAL IMMUNISATION TARGET

10 OF 52



WATER AND SANITATION

ENSURE AVAILABILITY AND SUSTAINABLE MANAGEMENT OF WATER AND SANITATION FOR ALL

The goal on water and sanitation continues unfinished development business, aiming for universal and equitable access, with special attention to the needs of women and girls and vulnerable people. Overall, South Africa has already attained high coverage of the use of improved drinking water sources, with well over 90 per cent of the population having access to water piped into their premises or other improved sources. Despite this accomplishment, troubling disparities persist by wealth and between provinces. For instance, almost one in five of the poorest children live in households that still rely on rivers, streams and other unimproved sources for their drinking water. Access to piped water is especially problematic in the mountainous areas of Eastern Cape and KwaZulu-Natal.

The country has made modest progress in improving access to sanitation, increasing the share of the population that uses improved facilities, such as flush toilets or ventilated pit latrines, from about half in 1990 to two-thirds of the population in 2015. Disparities by wealth persist, nonetheless: the poorest children are one third less likely to have access to an improved sanitation facility than are children in the wealthiest households.

Over the same period, open defecation rates declined from an estimated 14 per cent to 4 per cent. Again, the data reveal pronounced disparities, with the poorest and those living in rural and more remote areas least likely to use an improved sanitation facility. For example, in 13 municipalities, more than a quarter of children live in households still practising open defecation. Meanwhile, 29 per cent of schools in the country, and 55 per cent of schools in the Eastern Cape, only have an unimproved pit or no sanitation facilities at all.



OVER 9 IN 10 PEOPLE HAVE ACCESS TO IMPROVED DRINKING WATER



29% OF SCHOOLS HAVE AN UNIMPROVED PIT OR NO TOILET FACILITIES AT ALL

EDUCATION

ENSURE INCLUSIVE AND EQUITABLE QUALITY EDUCATION FOR ALL

The SDG on education addresses access to learning opportunities and the quality of schooling. It adds early childhood learning to the global development agenda and aims to ensure that education is accessible to all children, whether girl, boy, living with a disability or in a vulnerable situation.

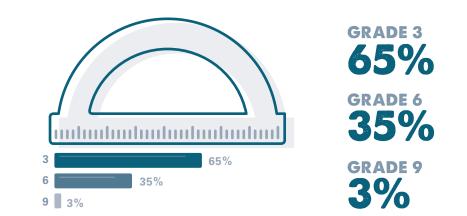
South Africa has made notable progress in expanding children's access to early childhood development and learning. The share of children under age 5 attending day-care or educational facilities outside their homes has grown from 7 per cent in 2002 to 50 per cent in 2014. Today, nine out of 10 pupils participate in some form of pre-primary education or the reception year programme (Grade R) before starting primary school. Still, disparities by wealth persist, with the poorest children being far less likely to be exposed to stimulation activities outside the home.

Children's access to primary education is near universal in all provinces and the number of children not in school has declined by one third since the early 2000s, but secondary school attendance is lagging behind. More than one in 10 pupils who are meant to be in secondary school are still attending primary school because they entered school late or repeated grades. The likelihood of repeating the same grade decreases the better off a child's household is.

Improving the quality of education remains a major challenge, and many children face serious learning difficulties. Data from national assessments indicate that less than 50 per cent of children who reach Grade 9 adequately master their home language, while nearly all fail to meet learning standards in mathematics. Large disparities persist in access to and completion of schooling, especially by wealth and disability status. For instance, youths with disabilities are on average less than half as likely to have completed secondary schooling as their non-disabled peers. There are also large differences in the availability of education facilities between the country's provinces.



NUMBER OF OUT-OF-SCHOOL CHILDREN



% OF PUPILS ACHIEVING ACCEPTABLE PROFICIENCY IN MATHS

CHILD PROTECTION

PROMOTE PEACE, JUSTICE AND GENDER EQUALITY

Violence threatens the lives and futures of children and shreds the social fabric of communities. Elevating protection against violence – including abuse, exploitation and trafficking – on the international agenda is one of the great achievements of the SDGs. Many children in South Africa have witnessed or experienced violence in their homes, schools and communities. Maltreatment and abuse of children is widespread.

Adolescence is a time of heightened risk, including the risk of death due to interpersonal violence. In a recent survey, one in three children aged 15–17 years reported having experienced some form of sexual abuse in their lifetime. Boys and girls are equally vulnerable to sexual abuse, although the types of abuse they experience tend to be different. The widespread fear of crime, moreover, restricts children's physical mobility and social interactions outside their homes.

Registering children at birth is the first step towards securing recognition before the law and safeguarding individual rights and access to justice and social services. South Africa is well on track to achieve universal coverage of birth registration: 95 per cent of children under 5 have a birth certificate. Birth registration rates are only slightly lower among children from the poorest households. Good progress has also been made in improving the timeliness of registration. Today, over three-quarters of recorded births are registered within the year of birth.



1 IN 3 ADOLESCENTS HAVE EXPERIENCED SOME FORM OF SEXUAL ABUSE IN THEIR LIFETIME



95% OF CHILDREN UNDER 5 HAVE A BIRTH CERTIFICATE

		Province									
Selected key indicators	National average	Eastern Cape	Free State	Gauteng	KwaZulu- Natal	Limpopo	Mpuma- langa	North West	Northern Cape	Western Cape	Ratio of highest to lowest value
Social inclusion											
Children living below the food poverty line (%, 2014/15)	37	46	25	22	60	39	36	31	27	14	4.2
Children living below the upper-bound poverty line (%, 2014/15)	69	80	62	52	83	76	73	64	61	51	1.6
Eligible children not receiving the Child Support Grant (%, 2014)	18	10	15	35	12	13	16	18		33	3.5
Children living in households with no employed adults (%, 2014)	30	46	30	11	37	43	28	31	30	10	4.6
Youth aged 15–24 years neither in employment nor in education or training (%, 2014)	33	33	33	32	35	30	36	37	38	32	1.3
Nutrition											
Children experiencing hunger because of lack of food in the household (%, 2014)	12	11	12	8	19	4	11	15	18	14	4.3
School-going children benefitting from the National School Nutrition Programme (%, 2014)	83	90	83	71	81	96	92	89	88	69	1.4
Newborns weighing less than 2,500 grams (%, 2014)	13	14	13	13	12	10	11	14	19	15	1.9
Children under 5 who are stunted (%, 2014/15)	21	-	-	-	_	-	_	-	-	_	_
Children under 5 who are wasted (%, 2014/15)	3	-	-	_	_	_	_	-	_	_	_
Children under 5 who are underweight (%, 2014/15)	5	_	_	_	_	_	_	_	_	_	_
Children under 5 who are overweight (%, 2014/15)	14	_	_	_	_	_	_	_	_	_	_
Health and HIV											
Births taking place in public health facilities (%, 2014/15)	86	77	88	82	91	91	81	75	88	88	1.2
Children under 1 year who have received all their recommended vaccinations (%, 2014/15)*	90	81	90	108	90	82	80	82	85	91	1.3
Infant mortality rate (per 1,000 live births, 2010)	35	40	53	24	47	28	39	47	37	20	2.7
HIV prevalence among children 2–14 years (%, 2012)	2	1	2	2	4	3	2	2			6.3
HIV prevalence among youth 15–24 years (%, 2012)	7	6	5	6	12	3	10	8	4	4	3.9
Water and sanitation											
Children living in households with water piped onto premises (%, 2014)	66	33	91	93	57	44	68	60	79	93	2.8
Children living in households with RDP-standard sanitation facilities (%, 2014)	75	76	83	92	71	51	58	67	85	95	1.9
Ordinary operational school with no or an unreliable water supply (%, 2015)	22	38	7	4	28	21	13	17	10		38.0
Ordinary operational school with no sanitation or only an unimproved pit (%, 2015)	29	55	19	0	35	26	24	15	2	0	5,500
Education											
Children under 5 attending an ECD facility or day-mother (<i>gogo</i>) outside the home (%, 2014)	49	43	62	71	45	46	33	32	42	48	2.2
Primary school net attendance ratio (2014)	98	98	97	97	98	98	98	97	100	97	1.0
Secondary school net attendance ratio (2014)	78	71	81	82	78	83	76	72	72	77	1.2
Youths (20–24 years old) who have completed primary education (%, 2014)	95	92	96	98	95	96	95	92	94	95	1.1
Youths (20–24 years old) who have completed secondary education (%, 2014)	49	32	49	66	50	37	43	46	45	50	2.1
Pupils achieving proficiency in mathematics in Grade 6 (%, 2014)	35	23	44	52	36	21	27	27	28	51	2.5
Child protection											-
Children under age 5 with a birth certificate (%, 2014/15)	95	-	_	_	_	_	_	_	_	_	_
Children aged 15–17 years who ever experienced any sexual abuse (%, 2014)	35		_	_	_	_	_	_	_	_	_
Households who do not allow their children to play outside because of fear of crime (%, 2014/15)	25	16	24	34	23	6	16	7	29	44	7.3

* Data should be read with caution as several districts and provinces recorded values over 100%.

Summary	report	card
---------	--------	------

l	ncome quinti	le		Gender							
Poorest 20%	Richest 20%	Ratio of richest to poorest	Male	Female	Ratio of male to female	Black African	Coloured	Indian/ Asian	White	Ratio of White to Black	Source
		_	36	37	1.0	41	16	1	0	0.0	NIDS
			<u> </u>	69	1.0	75	51	13	0	0.0	NIDS
- 15	57	- 3.8		09	-	75 16	30	75	87	5	GHS
15							13				GHS
61	0	0.0	30	29	1.0	33		3	3	0.1	
42	12	0.3	30	36	0.8	35	36	25	10	0.3	GHS
22	0	0.0	12	12	1.0	14	8	2	1	0.1	GHS
94	26	0.3	83	83	1.0	89	68	11	15	0.2	GHS
_	-	_	_	_	-	-	_	_	_	_	DHIS
28	8	0.3	24	18	1.3	-	_	_	_	-	NIDS
4	5	1.4	4	3	1.3	-	_	_	_	_	NIDS
7	2	0.3	5	5	1.0	_	_	_	_	_	NIDS
17	15	0.9	15	12	1.3	-	_	_	_	_	NIDS
_	_	-	-	_	_	-	_	_	_	_	DHIS
-	_	-	-	_	_	-	_	-	_	-	DHIS
_	_	-	-	_	-	39	20	10	8	0.2	Census
_	_	-	-	_	-		_			-	SABSSM
_	-	-	3	11	0.3	8	1	1	0	0.0	SABSSM
48	96	2.0	66	66	1.0	60	96	99	95	1.6	GHS
66	97	1.5	75	75	1.0	71	97	100	99	1.4	GHS
_	_	_	-	_	_	-	_	_	_	_	DBE
_	_	_	-	_	_	-	_	_	_	_	DBE
39	76	1.9	50	48	1.0	48	39	56	72	1.5	GHS
97	98	1.0	97	97	1.0	97	98	98	97	1.0	GHS
74	85	1.1	75	80	0.9	78	73	72	79	1.0	GHS
93	99	1.1	94	96	1.0	95	96	97	99	1.0	GHS
32	85	2.7	45	54	0.8	46	49	79	89	1.9	GHS
_	_	-	-	_	_	-	_	_	_	_	DBE
91	100		95	95	1.0	94	97	100	100	1.1	NIDS
_	-	-	37	34	1.1	36	35	25	27	0.8	CJCP
_	_	_	_	-	_	22	34	43	46	2.1	VOCS

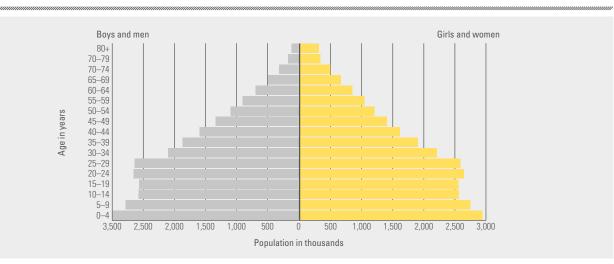
FILEN	
LLULINL	

	Better off than the national average						
	Equal or close to the national average (+/- 1 percentage point)						
	Worse off than the national average						
CJCP	Centre for Justice and Crime Prevention						
DBE	Department of Basic Education						
DHIS	District Health Information System						
GHS	General Household Survey						
NIDS	National Income Dynamics Study						
SABSS	M South African HIV/AIDS Behavioural Risks, Sero-Status and Mass Media Impact Survey						
VOCS	Victims of Crime Survey						

01 à SOCIO-DEMOGRAPHIC PROFILE OF CHILDREN

There are 19.7 million children 0–17 years old living in South Africa today

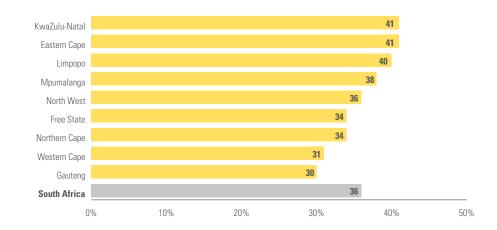
Population, by age group and by sex, 2015



Source: Statistics South Africa (2015). Mid-year Population Estimates, 2015. Pretoria: Statistics South Africa.

Children make up a large share of the population

Population of children 0–17 years old as a proportion of the total population, by province, 2015



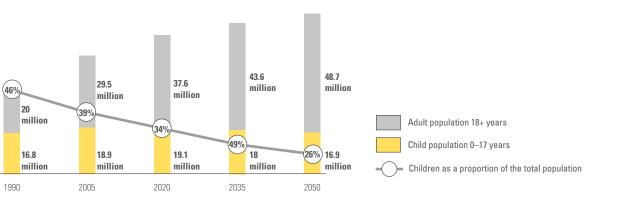
Source: Statistics South Africa (2015). Mid-year Population Estimates, 2015. Pretoria: Statistics South Africa.

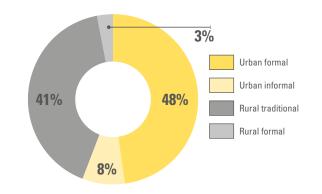
The total number of children in the country is starting to plateau, while their share in the population will continue to decline in the next decades

Population of children 0–17 years old as a proportion of the total population, 1990–2050

More than half of children live in urban areas

 $\label{eq:percentage} Percentage \ distribution \ of \ children \ 0-17 \ years \ old \ by \ geo-type, \ 2014$



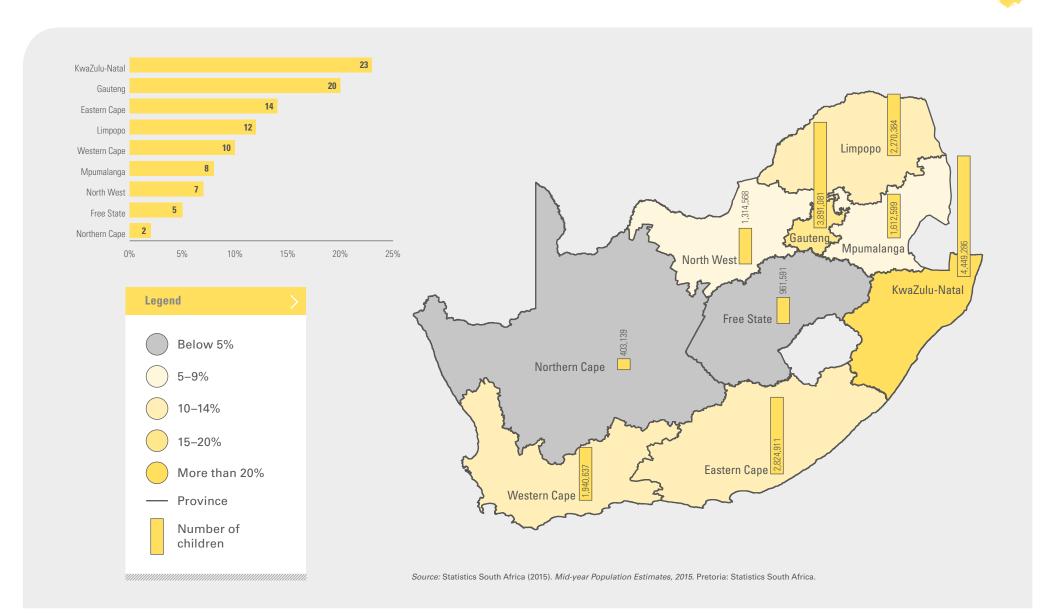


Source: Calculations based on data from the United Nations Department of Economic and Social Affairs (2015). World Population Prospects: The 2015 Revision. New York: United Nations.



The child population is spread unevenly across the country: five provinces accommodate nearly 80% of all children

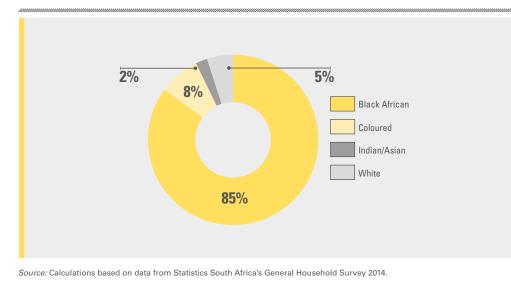
Numbers and percentage distribution of children 0–17 years old, by province, 2014



Aore than
half of
half of

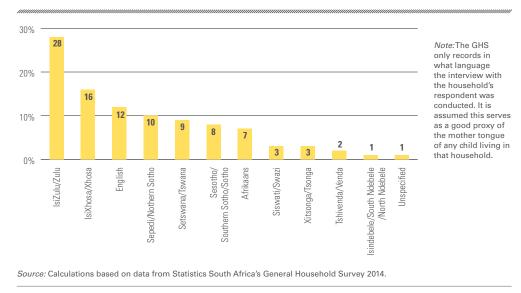
South Africa's children are diverse ...

Percentage distribution of children 0-17 years old by population group, 2014

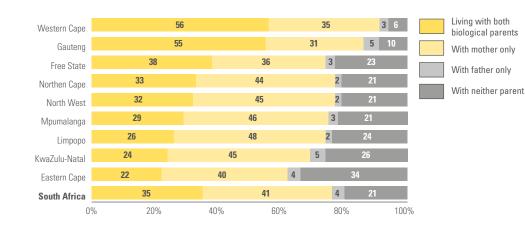


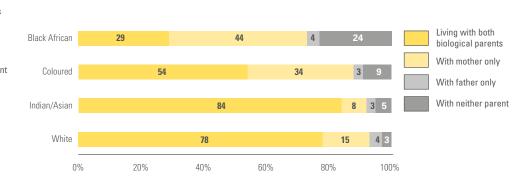
And speak a wide variety of languages

Percentage distribution of children 0–17 years old by mother tongue, 2014



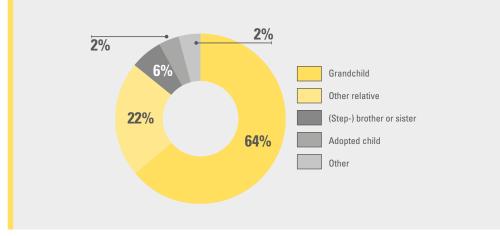
Nationwide, only one in three children live with both biological parents, with large differences between provinces and population groups Per cent distribution of children 0–17 years old by living arrangements, 2014





The vast majority of children not living with a parent reside with their grandparents or other relatives

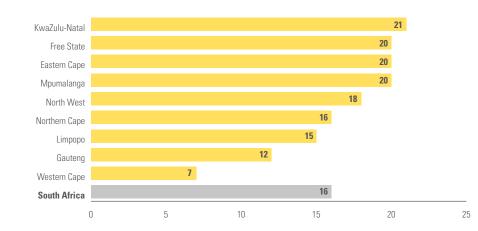
Child's relationship to head of the household when both biological parents are absent, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

One in six children have lost one or both parents

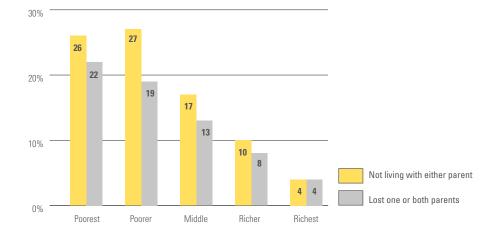
Percentage of children who have lost one or both parents, 2014

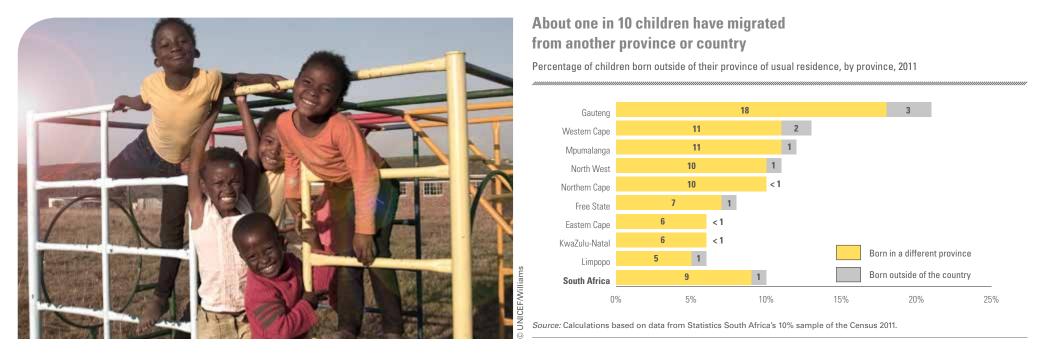


Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

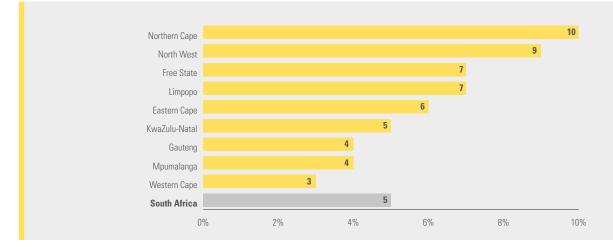


Children in the poorest households are most likely to be deprived of parental care Percentage of children who are orphaned or not living with either parent, by quintile of expenditure per capita, 2014





Survey data indicate that 5% of children 5–17 years old have a disability, though reliable and comprehensive statistics on childhood disability are lacking Percentage of children 5–17 years old with a severe disability, 2014



Note: In the GHS, persons with disabilities are identified using the Short Set of Disability Questions developed by the United Nations Washington Group (WG) on Disability Statistics. The questions are designed to identify those who are at greater risk than the general population of experiencing restrictions in performing tasks (such as activities of daily living) or participating in roles (such as working). They ask whether people aged 5 years and above have difficulties in functioning in six core domains: walking, seeing, hearing, remembering, self-care and communication. The questions will dientify many children with disabilities in the age range 5–17 years, but will miss many children with developmental or psychosocial disabilities.

RELIABLE AND COMPREHENSIVE STATISTICS ON CHILDHOOD DISABILITY ARE LACKING.



SOCIAL INCLUSION



GOAL 1

END POVERTY IN ALL ITS FORMS EVERYWHERE

GOAL 8

PROMOTE SUSTAINED, INCLUSIVE AND SUSTAINABLE ECONOMIC GROWTH, FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL

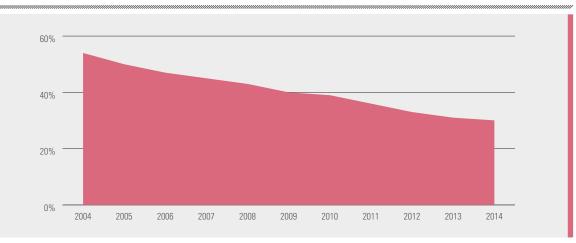
GOAL 10

REDUCE INEQUALITY WITHIN AND AMONG COUNTRIES

TARGET 1.2

BY 2030, REDUCE AT LEAST BY HALF THE PROPORTION OF MEN, WOMEN AND CHILDREN OF ALL AGES LIVING IN POVERTY IN ALL ITS DIMENSIONS ACCORDING TO NATIONAL DEFINITIONS South Africa has made good progress in reducing the share of children living in extreme poverty ...

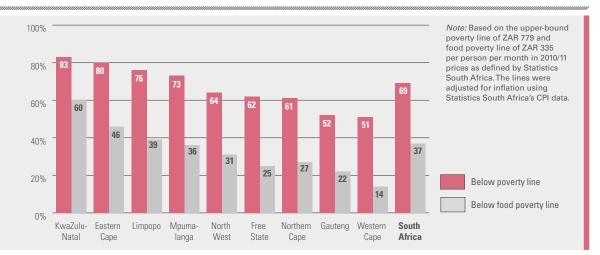
Percentage of children living in households below the national food poverty line, 2004–2014



Source: Hall, K. & Sambu, W. (2016). Analysis of Stats SA's General Household Surveys 2004–2014. Children's Institute, University of Cape Town.

But seven out of 10 children are still living below the national poverty line

Percentage of children living in households below the national upper-bound poverty line, by province, 2014–2015



Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.

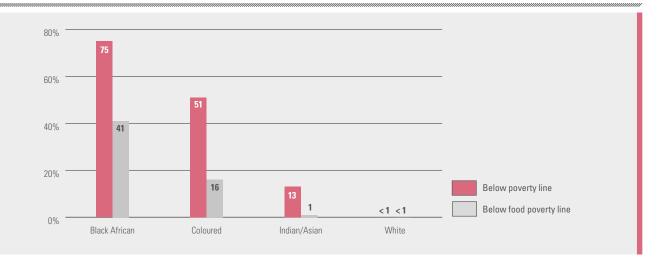
TARGET 3.2

BY 2030, END PREVENTABLE DEATHS OF NEWBORNS AND CHILDREN UNDER 5 YEARS OF AGE, WITH ALL COUNTRIES AIMING TO REDUCE NEONATAL MORTALITY TO AT LEAST AS LOW AS 12 PER 1,000 LIVE BIRTHS AND UNDER-FIVE MORTALITY TO AT LEAST AS LOW AS 25 PER 1,000 LIVE BIRTHS



Disparities in poverty rates between population groups remain extremely high

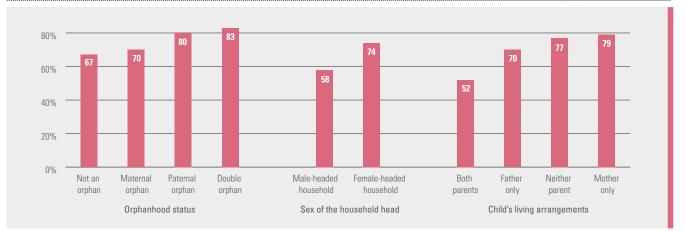
Percentage of children living in households below the national upper-bound poverty line and below the food poverty line, by population group, 2014–2015



Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.

Children living with their mother only, in female-headed households and those who have lost their father are more likely to live in poverty

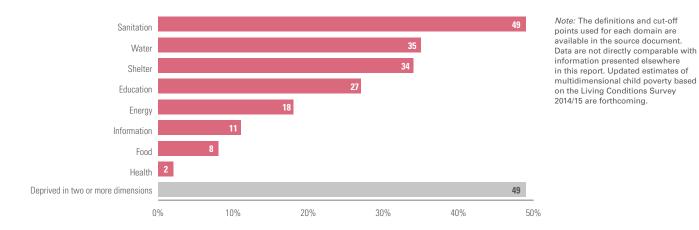
Percentage of children living in households below the national upper-bound poverty line, by orphanhood status and by sex of the household head, 2014–2015



Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.

Nearly half of all children experience multiple deprivations in non-monetary dimensions of poverty, especially sanitation, water and shelter

Percentage of children experiencing deprivation in non-monetary dimensions of poverty, by dimension, 2008/09



Source: Statistics South Africa (2013). Men, Women and Children: Findings of the Living Conditions Survey 2008/09. Pretoria: Statistics South Africa.

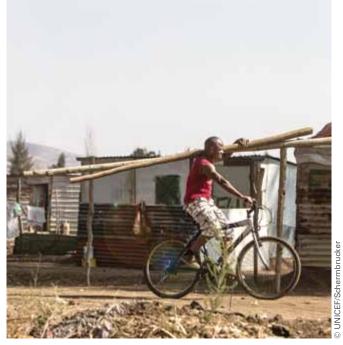


The spatial distribution of multiple child deprivation still overlaps with the location of the former homelands South African Index of Multiple Child Deprivation at municipal level, 2011 Source: Southern African **Former homelands** Multiple child deprivation >Social Policy Research Insights, 2016. Source: Adapted from Wikimedia Commons, Least deprived https://commons.wikimedia.org/wiki/ File:Bantustans_in_South_Africa.svg Less deprived Deprived Severely deprived Most deprived Swaziland Province Lesotho



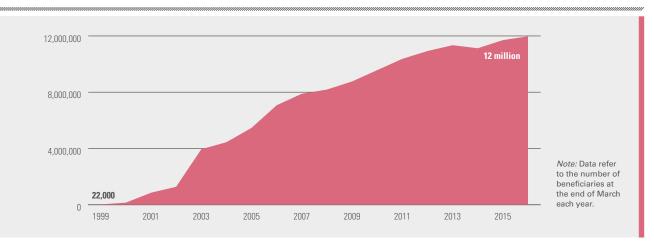
TARGET 1.3

IMPLEMENT NATIONALLY APPROPRIATE SOCIAL PROTECTION SYSTEMS AND MEASURES FOR ALL, INCLUDING FLOORS, AND BY 2030 ACHIEVE SUBSTANTIAL COVERAGE OF THE POOR AND THE VULNERABLE



12 million children benefit from the Child Support Grant, the largest cash transfer programme on the African continent

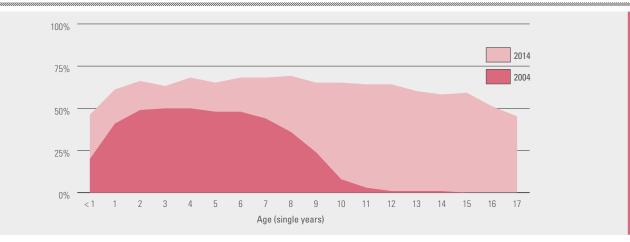
Number of beneficiaries of the Child Support Grant, 1999–2016



Source: South African Social Security Agency (SASSA) Statistical Reports.

Uptake of the Child Support Grant has risen among all age groups, due to efforts to better reach eligible children and the progressive extension to older children ...

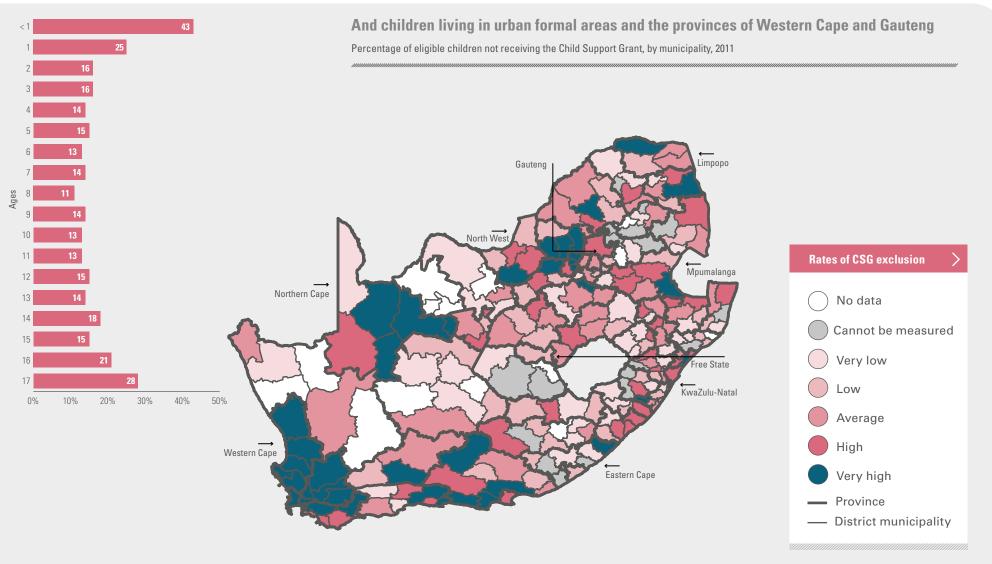
Percentage of children receiving the Child Support Grant, by age, 2004 and 2014



Yet, an estimated 18% of all eligible children are not accessing the Child Support Grant. Levels of exclusion are especially high... Among young children under the age of one ...

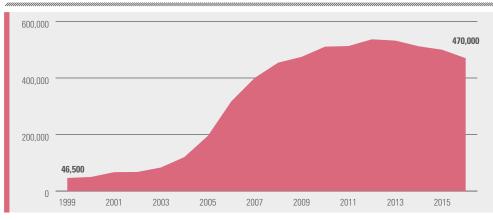
Percentage of eligible children not receiving the Child Support Grant, by age, 2014





Source: DSD, SASSA & UNICEF (2016). Removing Barriers to Accessing Child Grants: Progress in Reducing Exclusion from South Africa's Child Support Grant. Pretoria: UNICEF.

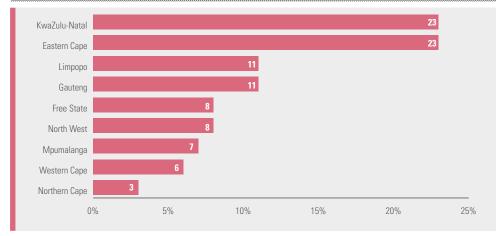
The number of beneficiaries of the Foster Child Grant grew sharply in the mid 2000s as children orphaned by HIV and AIDS entered the formal foster care system



Number of beneficiaries of the Foster Child Grant Grant, 1999–2016

Source: South African Social Security Agency (SASSA) Statistical Reports.

Nearly half of Foster Child Grant beneficiaries live in KwaZulu-Natal and Eastern Cape

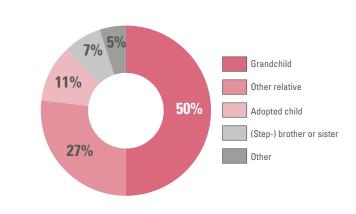


Percentage distribution of beneficiaries of the Foster Child Grant by province, 2016

Source: South African Social Security Agency (SASSA) Statistical Reports.

Three quarters of children benefiting from the Foster Child Grant are living with their grandparents or other relatives

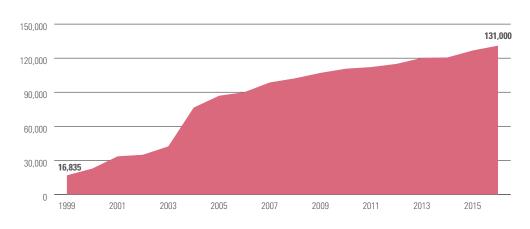
Percentage distribution of children receiving the Foster Child Grant by relationship to the head of the household, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

The Care Dependency Grant reaches 127,000 caregivers of children with severe disabilities in need of full-time and special care

Number of beneficiaries of the Care Dependency Grant, 1999–2016



Source: South African Social Security Agency (SASSA) Statistical Reports.





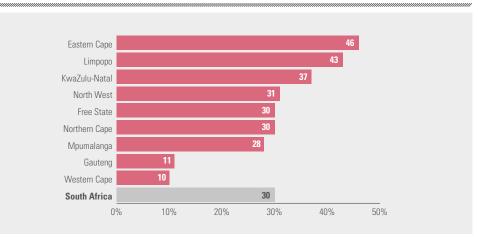
TARGET 8.5

BY 2030, ACHIEVE FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL WOMEN AND MEN, INCLUDING FOR YOUNG PEOPLE AND PERSONS WITH DISABILITIES



Unemployment remains a serious challenge: 30% of children live in families with no working adult, including almost half in the Eastern Cape

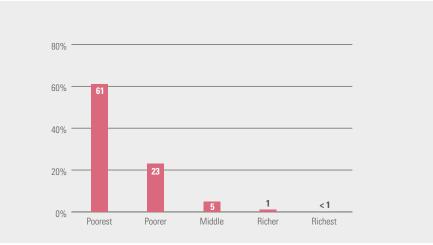
Percentage of children living in households with no employed adults, by province, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

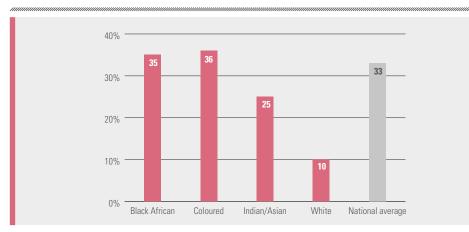
Unemployment and child poverty are strongly correlated

Percentage of children living in households with no employed adults, by quintile of expenditure per capita, 2014



One in three young people are neither in employment nor in education or training

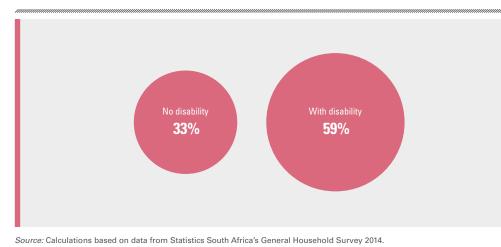
Percentage of youth aged 15–24 years neither in employment nor in education or training (NEET), by population group, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

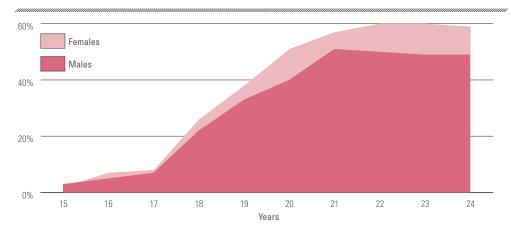
Youth with disabilities are nearly twice as likely to be inactive and not engaged in learning compared with their non-disabled peers

Percentage of youth aged 15–24 years neither in employment nor in education or training (NEET), by disability status, 2014



The gender disparity in youth inactivity becomes more pronounced with age

Percentage of youth aged 15–24 years neither in employment nor in education or training (NEET), by age and by sex, 2014







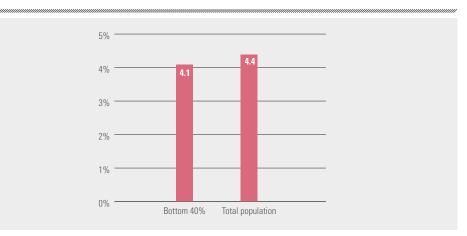
TARGET 10.1

BY 2030, PROGRESSIVELY ACHIEVE AND SUSTAIN INCOME GROWTH OF THE BOTTOM 40% OF THE POPULATION AT A RATE HIGHER THAN THE NATIONAL AVERAGE



Income growth of the bottom 40% of the population was lower than the national average

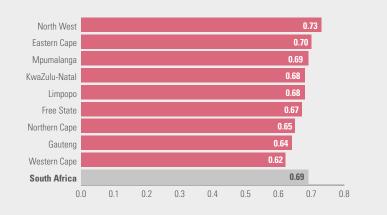
Annualised growth in mean consumption per capita, 2006–2011



Source: World Bank's Global Database of Shared Prosperity. Based on analysis of Statistics South Africa's Income and Expenditure Surveys in 2006 and 2011.

Levels of income inequality are high in all nine provinces

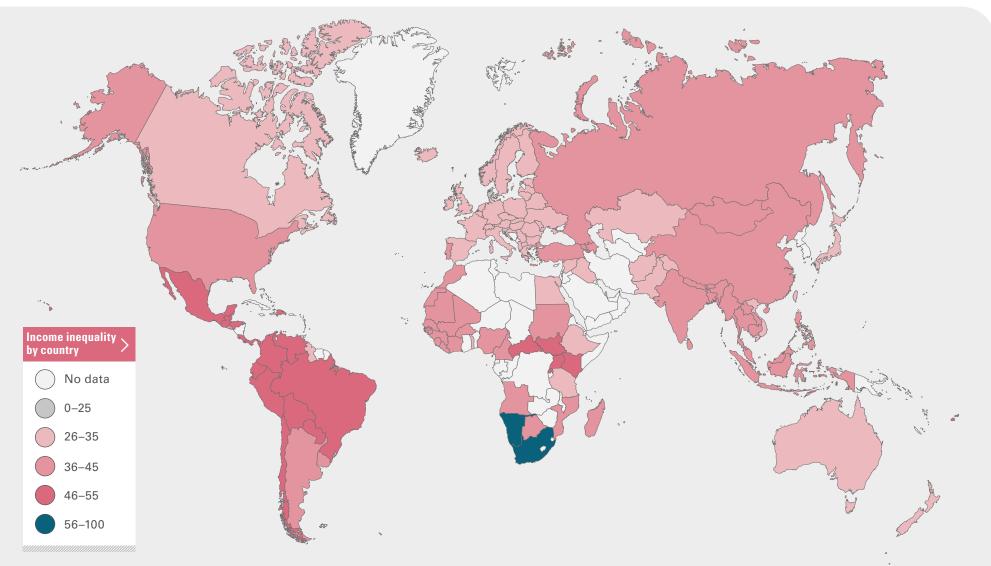
Gini coefficient (based on income per capita including salaries, wages and social grants), by province, 2011



Source: Republic of South Africa (2015). Development Indicators 2014. Based on Statistics South Africa's Income and Expenditure Survey 2010/11.

South Africa still ranks among the most unequal societies in the world Gini coefficient, latest available year





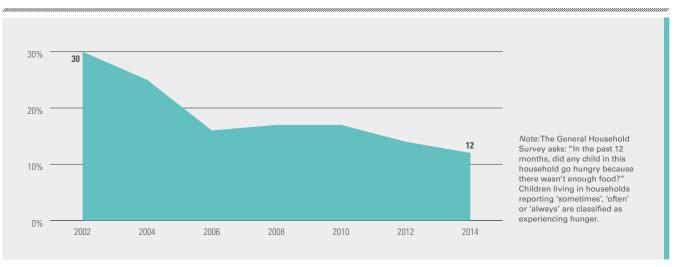
Source: UNU-WIDER's World Income Inequality Database (WIID3c, September 2015). Available from: www.wider.unu.edu/project/wiid-world-income-inequality-database.



TARGET 2.1

BY 2030, END HUNGER AND ENSURE ACCESS BY ALL PEOPLE, IN PARTICULAR THE POOR AND PEOPLE IN VULNERABLE SITUATIONS, INCLUDING INFANTS, TO SAFE, NUTRITIOUS AND SUFFICIENT FOOD ALL YEAR ROUND The share of children who experience hunger has declined significantly since the early 2000s ...

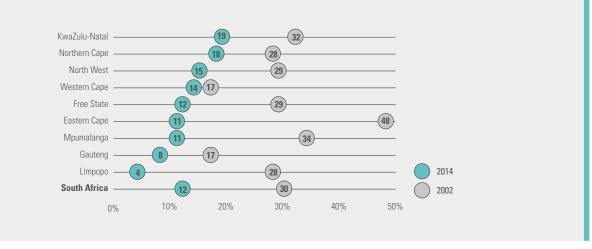
Percentage of children experiencing hunger because there was not enough food in the household, 2002-2014



Source: Calculations based on data from Statistics South Africa's General Household Surveys 2002–2014.

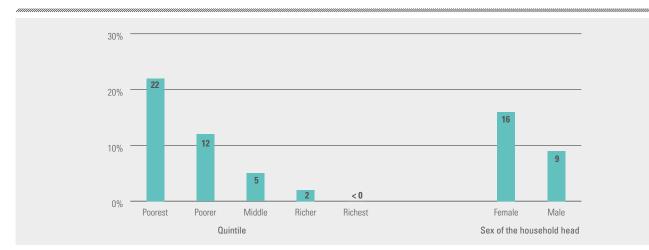
But there are large differences in reported child hunger among provinces

Percentage of children experiencing hunger because there was not enough food in the household, by province, 2002 and 2014



Children in the poorest and female-headed households are much more likely to experience hunger

Percentage of children experiencing hunger because there was not enough food in the household, by quintile of expenditure per capita and by sex of the household head, 2014



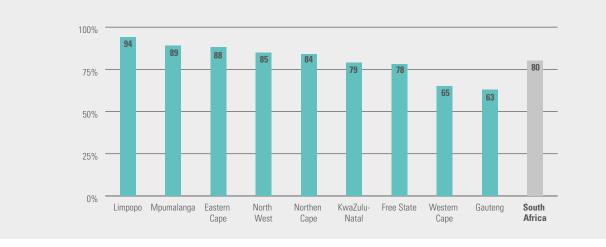
TARGET 2.2

BY 2030, END ALL FORMS OF MALNUTRITION, INCLUDING ACHIEVING, BY 2025, THE INTERNATIONALLY AGREED TARGETS ON STUNTING AND WASTING IN CHILDREN UNDER 5 YEARS OF AGE, AND ADDRESS THE NUTRITIONAL NEEDS OF ADOLESCENT GIRLS, PREGNANT AND LACTATING WOMEN AND OLDER PERSONS

Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Eight out of 10 pupils are receiving regular meals at school

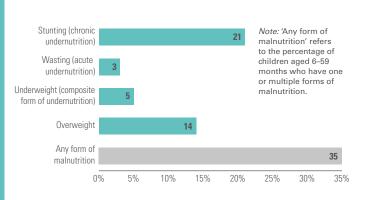
Percentage of learners benefitting from the National School Nutrition Programme, by province, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Nationwide, more than one in three children under the age of 5 have some form of malnutrition

Percentage of children aged 6–59 months who are stunted, wasted, underweight or overweight, 2014–2015



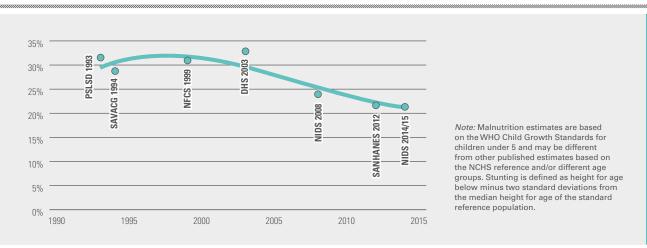
Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross sectional weights.

GLOBAL WORLD HEALTH ASSEMBLY NUTRITION TARGET

REDUCE BY 40% THE NUMBER OF CHILDREN UNDER 5 WHO ARE STUNTED

The national prevalence of stunting is gradually declining

Percentage of children under age 5 who are moderately or severely stunted, by data source, 1993–2015

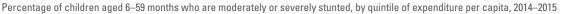


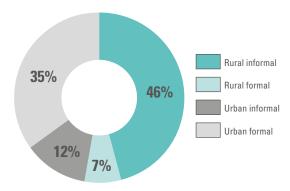
Both rural and urban areas have large numbers of stunted children

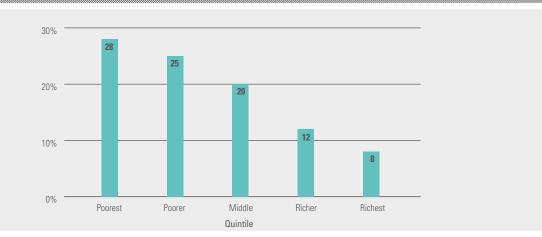
Percentage distribution of children aged 6–59 months who are moderately or severely stunted by geo-type, 2014–2015

Source: WHO (2012). Global Database on Child Growth and Malnutrition; HSRC (2013). SANHANES-1: Data analysis on anthropometry in children under 5 years of age. Own calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.

Children in the poorest households are more than three times as likely to be stunted as children in the richest households







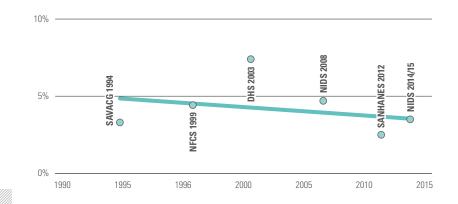
Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, crosssectional weights.

Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.



The national prevalence of wasting is below the global target of 5%

Percentage of children under age 5 who are moderately or severely wasted, by data source, 1994–2015



Note: Malnutrition estimates are based on the WHO Child Growth Standards for children under 5 and may be different from other published estimates based on the NCHS reference and/or different age groups. Stunting is defined as height for age below minus two standard deviations from the median height for age of the standard reference population.

REDUCE AND MAINTAIN CHILDHOOD WASTING TO LESS THAN 5%

GLOBAL WORLD

HEALTH ASSEMBLY

NUTRITION TARGET

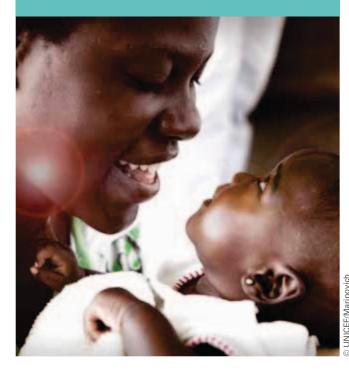
Source: WHO (2012). Global Database on Child Growth and Malnutrition; HSRC (2013). SANHANES-1: Data analysis on anthropometry in children under 5 years of age. Own calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.





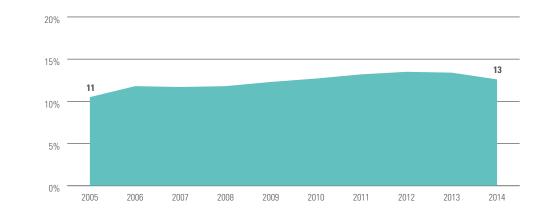
GLOBAL WORLD HEALTH ASSEMBLY NUTRITION TARGET

REDUCE BY 30% THE NUMBER OF INFANTS BORN WITH A WEIGHT LOWER THAN 2,500 GRAMS



The incidence of low birthweight has not reduced over the last decade

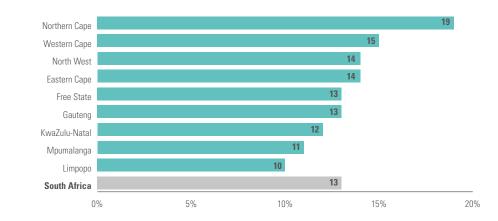
Percentage of live births weighing less than 2,500 grams, 2005–2014



Source: National Department of Health's District Health Information System (DHIS) Database, reported in: Padarath, A. et al. (eds) (2016). South African Health Review 2016. Durban: Health Systems Trust.

Northern Cape has the highest incidence of low birthweight, with nearly one in five newborns weighing less than 2,500 grams

Percentage of live births weighing less than 2,500 grams, 2005–2014



Source: National Department of Health's District Health Information System (DHIS) Database, reported in: Padarath, A. et al. (eds) (2016). South African Health Review 2016. Durban: Health Systems Trust.

INCIDENCE OF LOW BIRTHWEIGHT HAS NOT REDUCED **OVER THE** LAST DECADE.

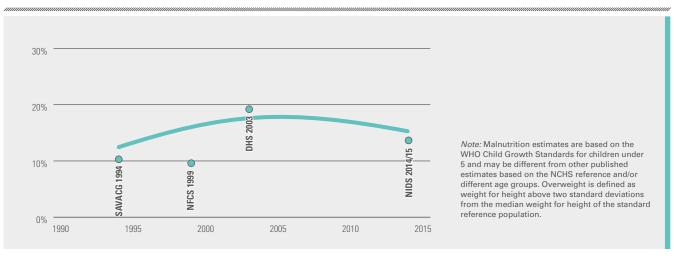


GLOBAL WORLD HEALTH ASSEMBLY NUTRITION TARGET

NO INCREASE IN CHILDHOOD OVERWEIGHT

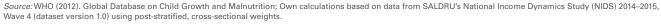
The prevalence of overweight during early childhood appears to have decreased since the early 2000s

Percentage of children under age 5 who are overweight, by data source, 1994–2015



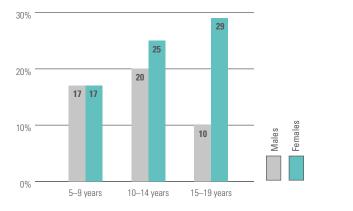
Adolescents girls are much more likely to be overweight than boys

Percentage of children aged 5–19 years who are overweight or obese (according to age-dependent BMI cut-off points), by age group, 2014–2015

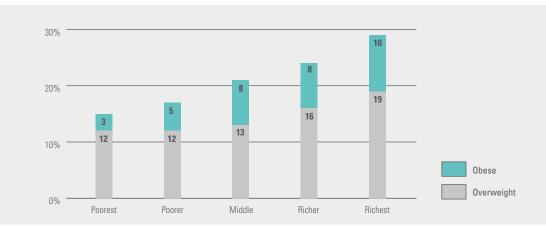


Childhood obesity is more prevalent among those from wealthier families

Percentage of children aged 5–19 years who are overweight or obese (according to age-dependent BMI cut-off points), by quintile of expenditure per capita, 2014–2015



Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.

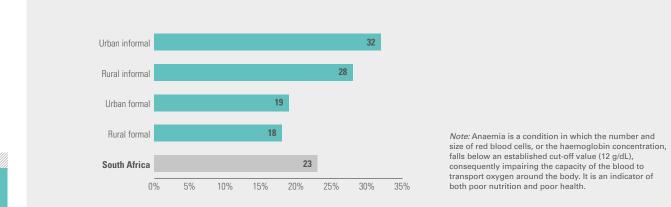


Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.



Nearly one in four women of reproductive age are anaemic, a condition that reduces their individual well-being and increases the risk of maternal and neonatal adverse outcomes

Prevalence of anaemia among women aged 16–35 years, by geo-type, 2012



GLOBAL WORLD HEALTH ASSEMBLY NUTRITION TARGET

ACHIEVE A 50% REDUCTION IN THE RATE OF ANAEMIA IN WOMEN OF REPRODUCTIVE AGE

Source: Shisana, O. et al. (2013). South African National Health and Nutrition Examination Survey (SANHANES-1). Cape Town: HSRC Press.







GOAL 3

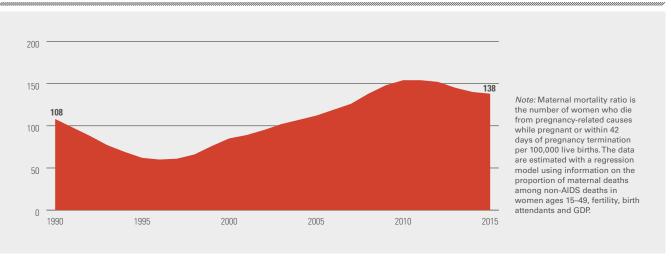
ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

TARGET 3.1

BY 2030, REDUCE THE GLOBAL MATERNAL MORTALITY RATIO TO LESS THAN 70 PER 100,000 LIVE BIRTHS

South Africa has started reversing the trend of rising maternal mortality

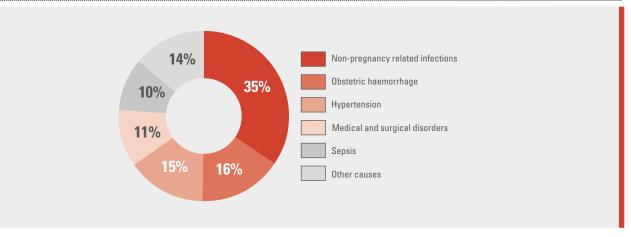
Maternal mortality ratio (modelled estimate, per 100,000 live births), 1990–2015



Source: WHO, UNICEF, UNFPA and The World Bank (2015). Trends in Maternal Mortality: 1990 to 2015. Geneva: WHO.

More than one in three maternal deaths are caused by non-pregnancy related infections such as HIV and tuberculosis

Percentage distribution of recorded maternal deaths by cause, 2011–2013

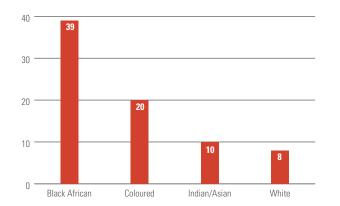


Source: National Department of Health (2015). Saving Mothers 2011–2013: Sixth Report on Confidential Enquiries into Maternal Deaths in South Africa.

TARGET 3.2

BY 2030, END PREVENTABLE DEATHS OF NEWBORNS AND CHILDREN UNDER 5 YEARS OF AGE, WITH ALL COUNTRIES AIMING TO REDUCE NEONATAL MORTALITY TO AT LEAST AS LOW AS 12 PER 1,000 LIVE BIRTHS AND UNDER-FIVE MORTALITY TO AT LEAST AS LOW AS 25 PER 1,000 LIVE BIRTHS

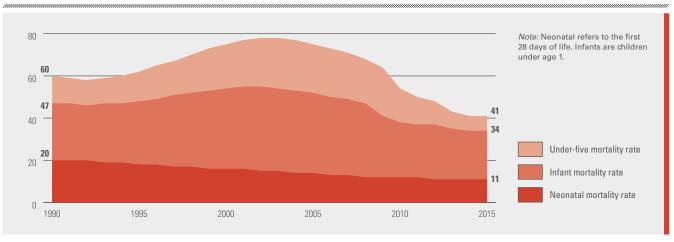
A Black African child is almost five times more likely than a White child to die before his or her first birthday



Infant mortality rate (per 1,000 live births), by population group, 2010

Source: Statistics South Africa (2015). Census 2011: Estimation of Mortality in South Africa. Pretoria: Statistics South Africa South Africa has already achieved the SDG target for neonatal mortality but it needs to accelerate progress in reducing infant and under-five mortality

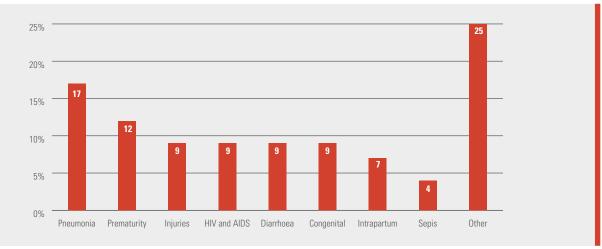
Estimated under-five, infant and neonatal mortality rate (per 1,000 live births), 1990-2015



Source: United Nations Inter-agency Group for Child Mortality Estimation (2015)

Most causes of under-five deaths are either preventable or treatable

Percentage distribution of deaths among children under age 5 by cause, 2015

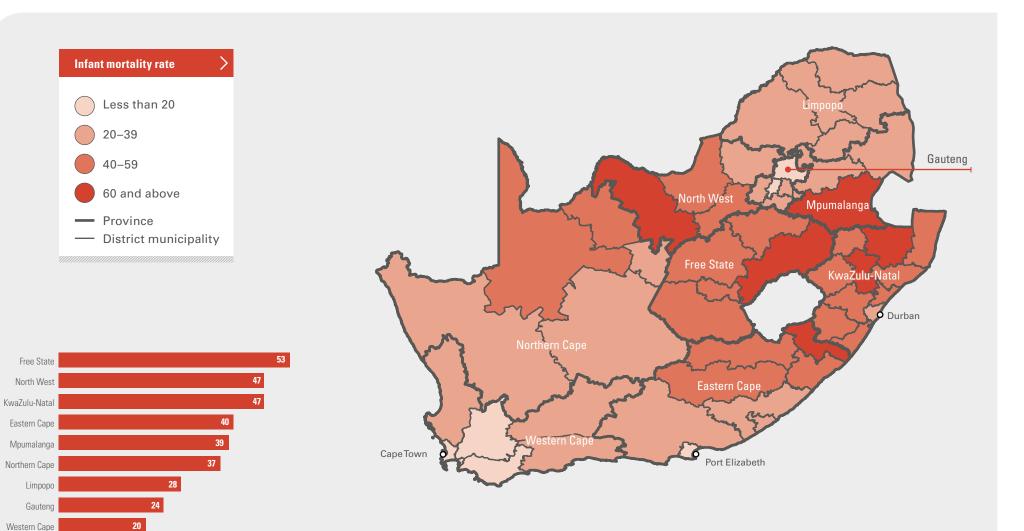


Source: Estimates for child causes of death by the WHO and Maternal and Child Epidemiology Estimation Group (MCEE) (2016).

Geographic disparities in child survival remain high

Infant mortality rate (per 1,000 live births), by province and by district, 2010





Source: Statistics South Africa (2015). Census 2011: Estimation of Mortality in South Africa. Pretoria: Statistics South Africa.



TARGET 3.3

BY 2030, END THE EPIDEMICS OF AIDS, TUBERCULOSIS, MALARIA AND NEGLECTED TROPICAL DISEASES AND COMBAT HEPATITIS, WATER-BORNE DISEASES AND OTHER COMMUNICABLE DISEASES

South Africa continues to have the largest AIDS epidemic of any country worldwide

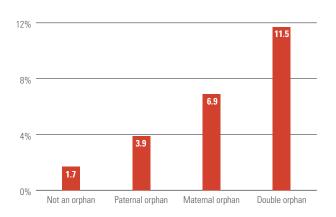
HIV and AIDS epidemiological estimates, global and South Africa, 2015

	GLOBALLY	SOUTH AFRICA	SHARE (%)		
	Number of people living with HIV in 2015				
Children 0–14 years	1.8 million	240,000	13%		
Adults 15+ years	34.9 million	6.7 million	19%		
Allages	36.7 million	7.0 million	19%		
	People newly infected with HIV in 2015				
Children 0–14 years	150,000	5,100	3%		
Adults 15+ years	1.9 million	370,000	20%		
Allages	2.1 million	380,000	18%		
	AIDS deaths in 2015				
Children 0–14 years	110,000	8,000	7%		
Adults 15+ years	1.0 million	170,000	17%		
Allages	1.1 million	180,000 16%			

Source: UNAIDS (2016). HIV and AIDS estimates, based on Spectrum modelling.

Orphaned children face a higher risk of contracting HIV compared with their non-orphaned peers

HIV prevalence among children 0–18 years, by orphanhood status, 2012

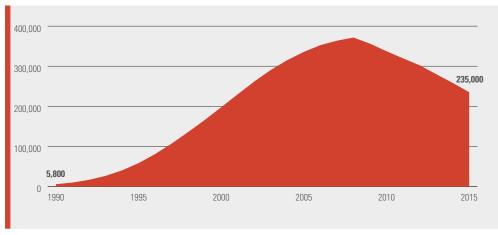


Source: Shisana, O. et al. (2014). South African National HIV Prevalence, Incidence and Behaviour Survey, 2012. Cape Town: HSRC Press.



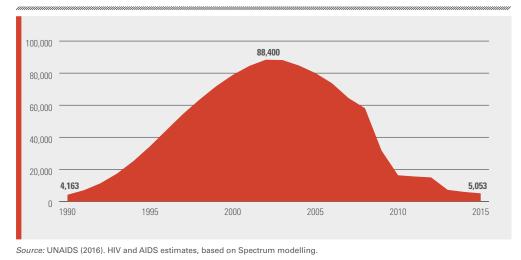
Some 235,000 children are living with HIV across the country

Estimated number of children 0-14 years old who are infected with HIV, 1990-2015



Source: UNAIDS (2016). HIV and AIDS estimates, based on Spectrum modelling.

New HIV infections among children are declining rapidly due to scaled-up efforts to prevent mother-to-child transmission



Estimated number of new HIV infections among children 0-14 years old, 1990-2015

The prevalence of HIV among children has decreased in nearly every province

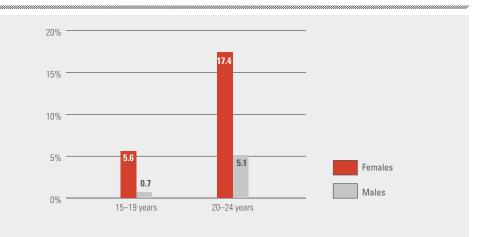
HIV prevalence among children 2–14 years, by province, 2002 and 2012



Source: Shisana, O. et al. (2014). South African National HIV Prevalence, Incidence and Behaviour Survey, 2012. Cape Town: HSRC Press.

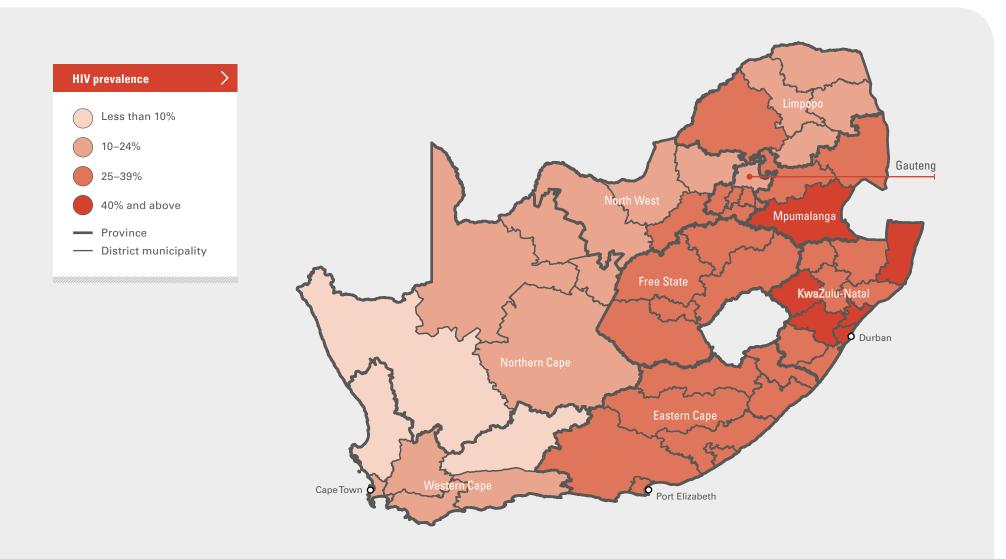
Adolescent girls and young women are disproportionately vulnerable and at high risk

HIV prevalence among youth, by sex and by age, 2012



Source: Shisana, O. et al. (2014). South African National HIV Prevalence, Incidence and Behaviour Survey, 2012. Cape Town: HSRC Press.

Nearly 30% of pregnant women in the country are HIV positive, with marked differences between districts HIV prevalence among pregnant women (15–49 years) attending antenatal public clinics, by district, 2013



Source: National Department of Health (2015). The National Antenatal Sentinel HIV Prevalence Survey, South Africa, 2013.

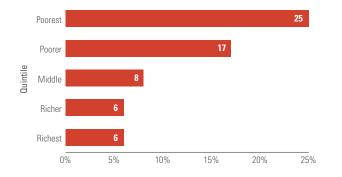


TARGET 3.7

BY 2030, ENSURE UNIVERSAL ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH-CARE SERVICES, INCLUDING FOR FAMILY PLANNING, INFORMATION AND EDUCATION, AND THE INTEGRATION OF REPRODUCTIVE HEALTH INTO NATIONAL STRATEGIES AND PROGRAMMES

Birth rates are significantly higher among adolescent girls from the poorest households

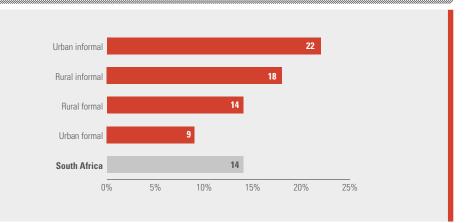
Percentage of women aged 15–19 years who are mothers or who have ever been pregnant, by quintile of expenditure per capita, 2014–2015



Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified weights that were calibrated to the 2015 mid-year population estimates.

One in seven adolescent girls have already given birth, pointing to a need for strengthening reproductive health services

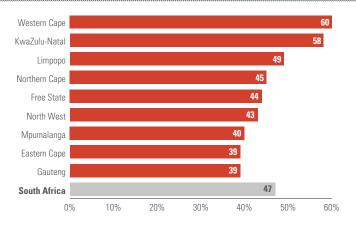
Percentage of women aged 15–19 years who are mothers or who have ever been pregnant, by geo-type, 2014–2015



Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified weights that were calibrated to the 2015 mid-year population estimates.

Less than half of women of reproductive age are using modern contraceptive methods to prevent unplanned pregnancies

Estimated percentage of women aged 15–49 years who are protected against unplanned pregnancies for a year using modern contraceptive methods (couple year protection rate), by province, 2014/15



Source: Massyn N. et al. (eds) (2015). District Health Barometer 2014/15. Durban: Health Systems Trust.

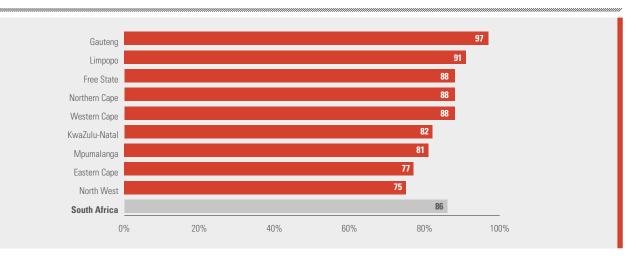
Close to nine out of 10 births take place in public health facilities

Estimated percentage of deliveries that take place in public health facilities under supervision of trained personnel, by province, 2014/15

TARGET 3.8

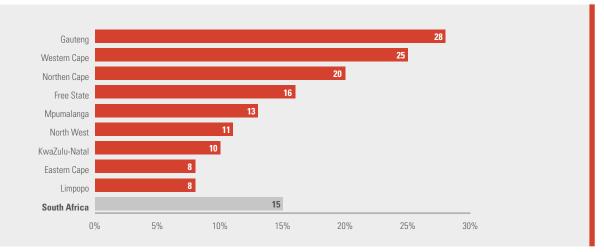
ACHIEVE UNIVERSAL HEALTH COVERAGE, INCLUDING FINANCIAL RISK PROTECTION, ACCESS TO QUALITY ESSENTIAL HEALTH-CARE SERVICES AND ACCESS TO SAFE, EFFECTIVE, QUALITY AND AFFORDABLE ESSENTIAL MEDICINES AND VACCINES FOR ALL





Source: National Department of Health's District Health Information System (DHIS) Database, reported in: Padarath, A. et al. (eds) (2016). South African Health Review 2016. Durban: Health Systems Trust.

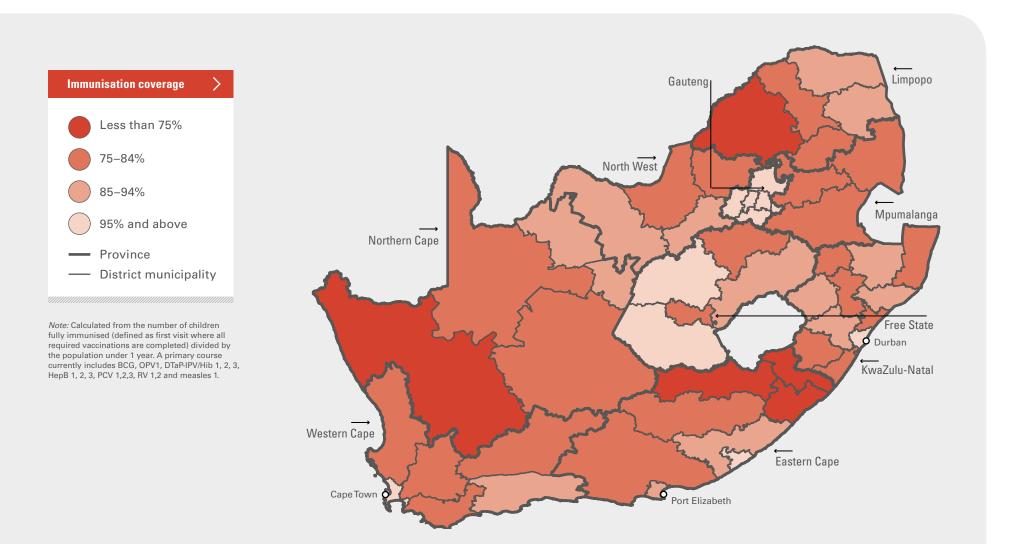
A relatively low share of children live in households with financial protection against health-care costs Percentage of children covered by a medical aid scheme, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Only 10 out of 52 districts have achieved the national target of 95% full immunisation coverage

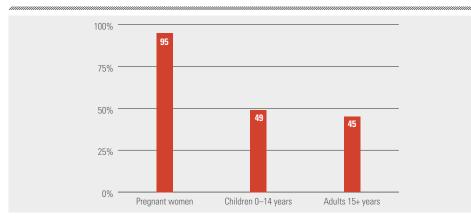
Estimated percentage of children under 1 year who have received all their recommended vaccinations, 2014/15



Source: Massyn N. et al. (eds) (2015). District Health Barometer 2014/15. Durban: Health Systems Trust.

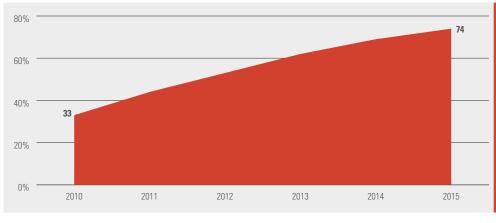
Nearly all pregnant women living with HIV receive treatment to stop HIV transmission to their babies, but less than three in every four children living with HIV are on antiretroviral medications

Estimated percentage of pregnant women living with HIV who received ARVs for PMTCT and percentage of children (aged 0–14) and adults (aged 15+) living with HIV receiving antiretroviral therapy (ART), 2015



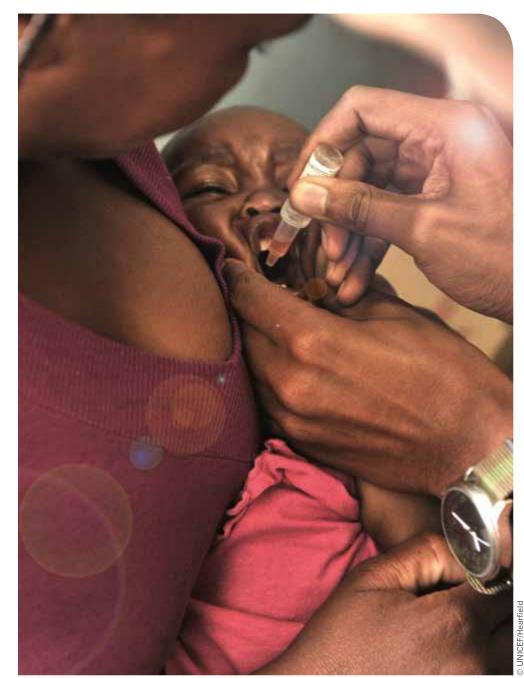
Source: UNAIDS (2016). HIV and AIDS estimates, based on Spectrum modelling.

The share of children living with HIV receiving antiretroviral therapy has more than doubled in the last five years



Estimated percentage of children (aged 0–14) living with HIV receiving antiretroviral therapy (ART), 2010–2015

Source: UNAIDS (2016). HIV and AIDS estimates, based on Spectrum modelling.







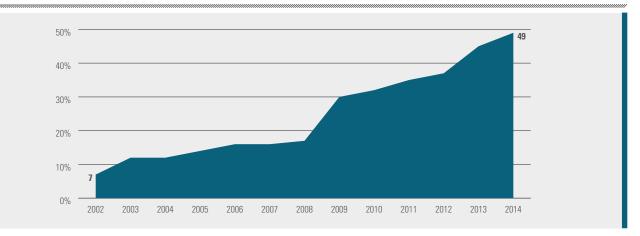
GOAL 4

ENSURE INCLUSIVE AND EQUITABLE QUALITY EDUCATION AND PROMOTE LIFELONG LEARNING OPPORTUNITIES FOR ALL

TARGET 4.2

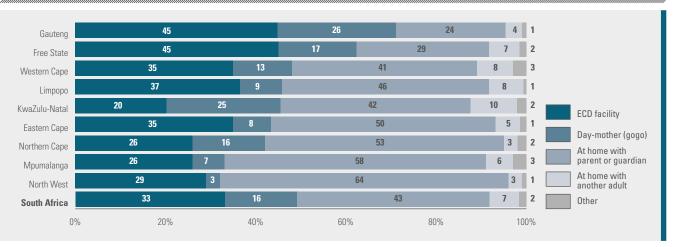
BY 2030, ENSURE THAT ALL GIRLS AND BOYS HAVE ACCESS TO QUALITY EARLY CHILDHOOD DEVELOPMENT, CARE AND PRE-PRIMARY EDUCATION SO THAT THEY ARE READY FOR PRIMARY EDUCATION The share of children under 5 attending day-care or educational facilities outside their homes has grown to nearly 50%

Percentage of children under age 5 attending an early childhood develpment facility or day-mother (gogo) outside the home, 2002–2014



Source: Department of Basic Education (2015). General Household Survey (GHS): Focus on Schooling 2014. Pretoria: Department of Basic Education.

There are marked differences in early childhood care arrangements between South Africa's provinces Percentage distribution of children under age 5 by main child care arrangements, by province, 2014



Note: Early childhood development facility includes pre-school, nursery school, crèche, edu-care centre and Grade R. *Source:* Calculations based on data from Statistics South Africa's General Household Survey 2014.

Children in the poorest households are least likely to be exposed to stimulation activities outside the home

Percentage distribution of children under 5 by main child care arrangements, by quintile of expenditure per capita, 2014



Note: Early childhood development facility includes pre-school, nursery school, crèche, edu-care centre and Grade R. *Source:* Calculations based on data from Statistics South Africa's General Household Survey 2014.

Around nine out of 10 pupils participated in some form of pre-primary or Grade R before starting primary school

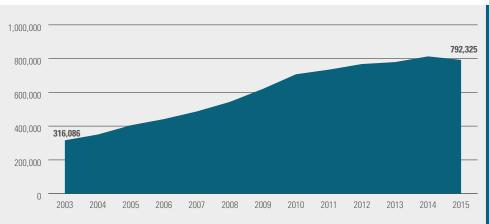
100% 80% 60% 40% 20% 0% 6 7 8 9 10 11 12 13 14 Age (single years)

Percentage of children who attended pre-primary or Grade R before starting primary school, by age, 2014–2015

Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.

The reception year programme (Grade R) has expanded dramatically since the early 2000s

Number of learners enrolled in Grade R in ordinary schools, 2003–2014



Source: Department of Basic Education (DBE) EMIS Reports.





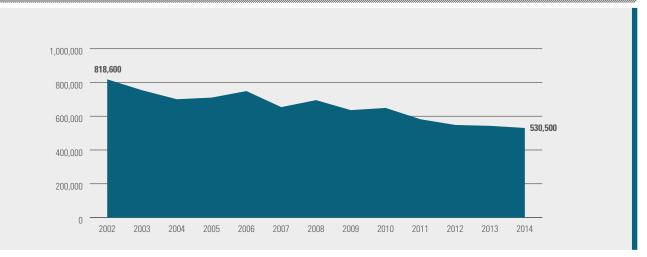
TARGET 4.1

BY 2030, ENSURE THAT ALL GIRLS AND BOYS COMPLETE FREE, EQUITABLE AND QUALITY PRIMARY AND SECONDARY EDUCATION LEADING TO RELEVANT AND EFFECTIVE LEARNING OUTCOMES



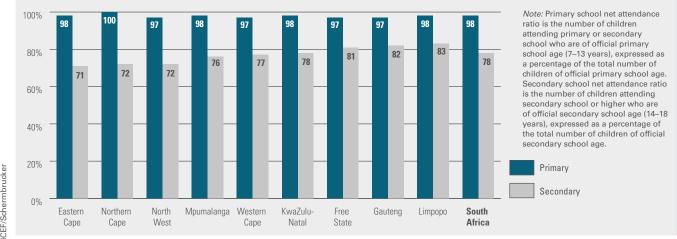
The number of out-of-school children has fallen by one third since the early 2000s

Number of children 7–18 years old not attending an educational institution, 2002–14



Source: Department of Basic Education (2015). General Household Survey (GHS): Focus on Schooling 2014. Pretoria: Department of Basic Education.

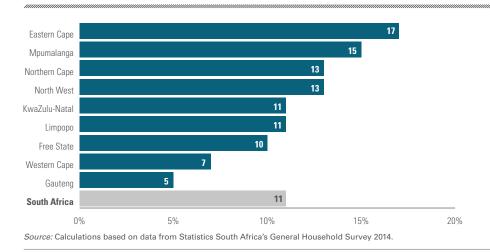
Access to primary education is near universal, but secondary school attendance is below 80% Primary and secondary school net attendance ratio, by province, 2014





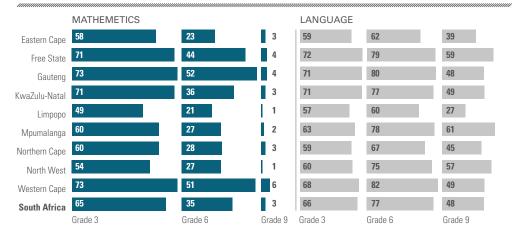
Over one in 10 pupils of secondary school age are still in primary school, because they entered school late or repeated grades

Percentage of pupils of secondary school age (14–18 years) attending primary school (Grade 1–7), by province, 2014



Many children across the country face serious learning difficulties

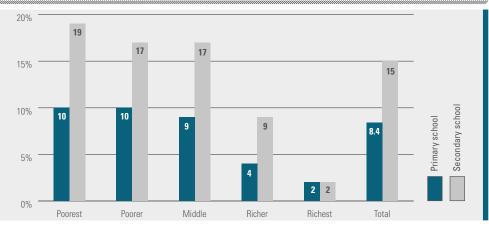
Percentage of pupils achieving acceptable proficiency in mathematics and language, by province and by grade, 2014



Source: Department of Basic Education (2015). Report on the Annual National Assessments of 2014. Pretoria: Department of Basic Education.

Children in the poorest households are up to nine times more likely to repeat the same grade compared with children in the richest households

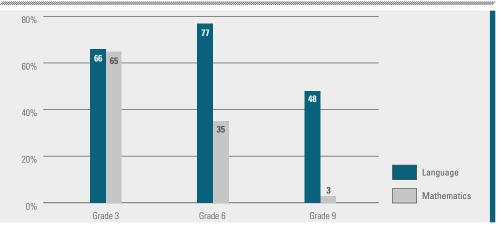
Percentage of learners in primary or secondary school who are repeating the same grade, by quintile of expenditure per capita, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Less than half of children who reach Grade 9 adequately master their home language and nearly all fail to meet learning standards in mathematics

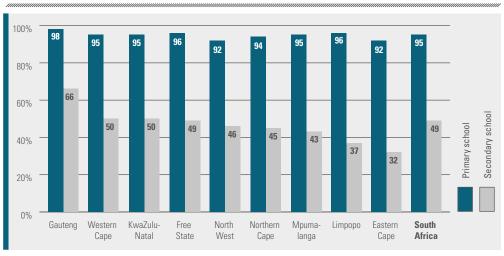
Percentage of pupils achieving acceptable proficiency in mathematics and language, by school grade, 2014



Source: Department of Basic Education (2015). Report on the Annual National Assessments of 2014. Pretoria: Department of Basic Education.

Despite high levels of access to education, only half of young people have completed secondary schooling

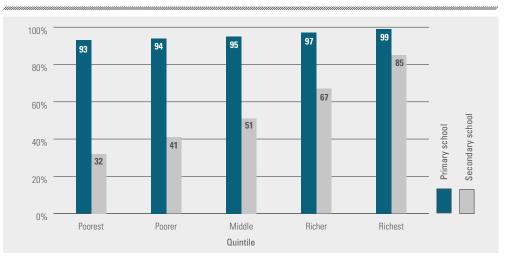
Percentage of youth aged 20–24 years who have completed primary/secondary education, by province, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Completion of schooling is markedly lower among children in the poorest households

Percentage of youth aged 20–24 years who have completed primary/secondary education, by quintile of expenditure per capita, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.



56

COMPLETION OF SCHOOLING **IS MARKEDLY** LOWER AMONG CHILDREN IN THE POOREST HOUSEHOLDS.

TARGET 4.5

BY 2030, ELIMINATE GENDER DISPARITIES IN EDUCATION AND ENSURE EQUAL ACCESS TO ALL LEVELS OF EDUCATION AND VOCATIONAL TRAINING FOR THE VULNERABLE, INCLUDING PERSONS WITH DISABILITIES, INDIGENOUS PEOPLES AND CHILDREN IN VULNERABLE SITUATIONS

	School attendance		School completion		
	Primary	Secondary	Primary	Secondary	
Female	97	80	96	54	
Male	97	75	94	45	
Ratio of females to males	1.00	1.07	1.02	1.19	
Rural	97	76	93	35	
Urban	97	79	97	57	
Ratio of rural to urban	1.00	0.96	0.96	0.61	
Poorest 20%	97	74	93	32	
Richest 20%	98	85	99	85	
Ratio of poorest to richest	0.99	0.87	0.94	0.37	
Orphaned	96	74	94	40	
Non-orphaned	97	79	96	55	
Ratio of orphans to non-orphans	0.99	0.94	0.98	0.73	
With disability	90	43	63	22	
Without disability	98	78	96	50	
Ratio of disabled to non-disabled	0.92	0.55	0.66	0.43	

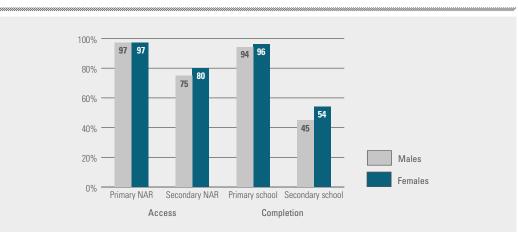
Parity: 0.97–1.03

Near parity: 0.95–0.96 or 1.04–1.05

Disparity: < 0.95 or > 1.05

Gender parity has been achieved in primary education, while girls are more likely than boys to attend and complete secondary education

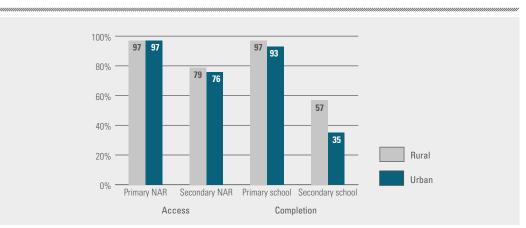
Net attendance ratios (NAR) and percentage of youth aged 20–24 years who have completed schooling, by level of education and by sex, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Disparities between urban and rural children are small, except for completion of secondary schooling

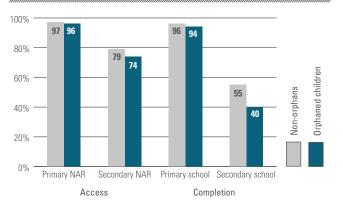
Net attendance ratios (NAR) and percentage of youth aged 20–24 years who have completed schooling, by level of education and by residence, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Children who have lost a parent have equal access to education, but are less likely to complete school

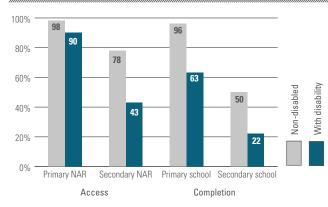
Net attendance ratios (NAR) and percentage of youth aged 20–24 years who have completed schooling, by level of education and by orphanhood status, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Children with disabilities lag furthest behind and are the most marginalised group

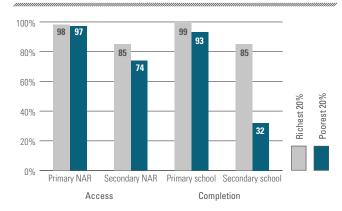
Net attendance ratios (NAR) and percentage of youth aged 20-24 years who have completed schooling, by level of education and by disability status, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Despite the no fee school policy, children from the poorest households are less likely to complete their education

Net attendance ratios (NAR) and percentage of youth aged 20-24 years who have completed schooling, by level of education and by wealth status, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.



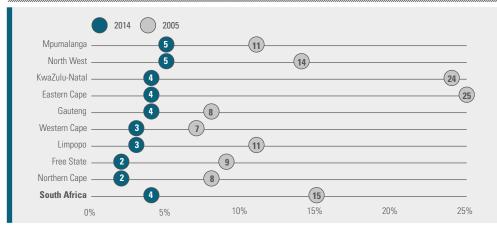


TARGET 4.A

BUILD AND UPGRADE EDUCATION FACILITIES THAT ARE CHILD, DISABILITY AND GENDER SENSITIVE AND PROVIDE SAFE, NON-VIOLENT, INCLUSIVE AND EFFECTIVE LEARNING ENVIRONMENTS FOR ALL

Good progress has been made to ensure that learners have access to textbooks

Percentage of learners who indicated experiencing a lack of books at school, 2005 and 2014



Source: Department of Basic Education (2015). General Household Survey (GHS): Focus on Schooling 2014. Pretoria: Department of Basic Education.

There are large differences in the availability of education facilities between South Africa's provinces

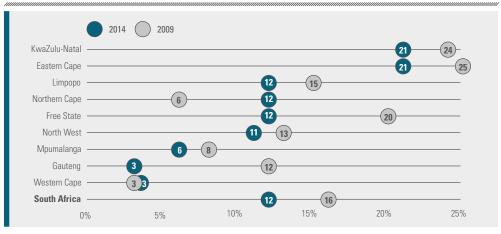
Percentage of schools with access to different types of infrastructure, by province, 2015

	Communication			Computer	Laboratory
	Sports facilities	facilities	Libraries	centres	facilities
Eastern Cape	41	99	8	11	6
Free State	67	99	35	35	27
Gauteng	78	100	63	80	33
KwaZulu-Natal	45	99	24	33	11
Limpopo	68	99	7	15	6
Mpumalanga	71	99	19	40	12
North West	73	100	22	40	19
Northern Cape	70	99	28	55	17
Western Cape	75	100	55	59	33
South Africa	65	99	29	41	18

Source: Calculations based on data from the Department of Basic Education's National Education Infrastructure Management System (NEIMS) Standards Report May 2015.

The use of corporal punishment by teachers is declining but remains high, especially in KwaZulu-Natal and Eastern Cape

Percentage of school-going children who experienced corporal punishment by teachers, by province, 2009 and 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2009 and 2014.



06 6 WATER AND SANITATION



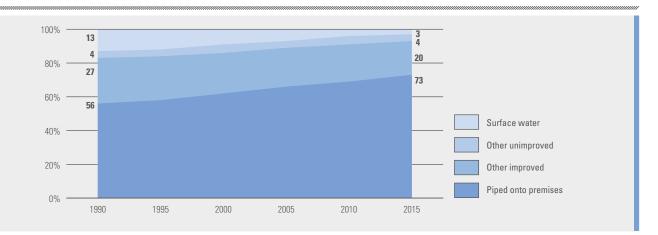
GOAL 6

ENSURE AVAILABILITY AND SUSTAINABLE MANAGEMENT OF WATER AND SANITATION FOR ALL

TARGET 6.1

BY 2030, ACHIEVE UNIVERSAL AND EQUITABLE ACCESS TO SAFE AND AFFORDABLE DRINKING WATER FOR ALL South Africa has achieved high coverage of the use of improved drinking water sources

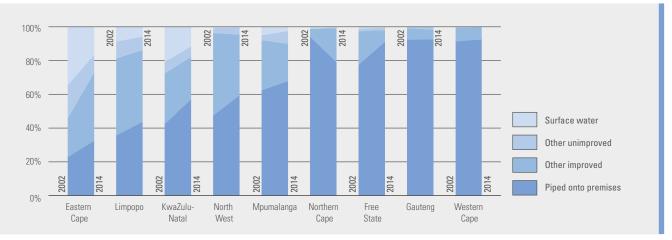
Percentage distribution of the population by drinking water source in the home, 1990–2015



Note: Estimates are based on data from South Africa's censuses and national household surveys, including the October Household Surveys, General Household Surveys, Demographic and Health Surveys, Income and Expenditure Surveys, World Health Survey, Study on Global Ageing and Adult Health and National Income Dynamics Study. *Source:* WHO/UNICEF JMP (2015). *South Africa: Estimates on the Use of Water Sources and Sanitation Facilities.*

Geographic disparities have decreased, but children's access to adequate water still lags in Eastern Cape, KwaZulu-Natal and Limpopo

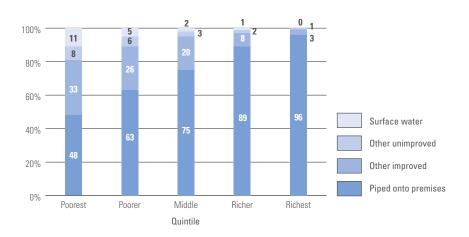
Percentage distribution of children 0–17 years old by source of drinking water in the home, by province, 2002 and 2014



Source: Calculations based on data from Statistics South Africa's General Household Surveys 2002 and 2014.

Nationwide, nearly one in five children in the poorest households drink water from rivers, streams and other unimproved sources

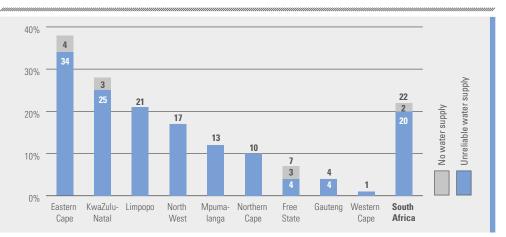
Percentage distribution of children by source of drinking water in the home, by quintile of expenditure per capita, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

More than one in five schools across the country do not have a reliable water supply

Percentage of ordinary operational schools with no or an unreliable water supply, 2015



Source: Calculations based on data from the Department of Basic Education's National Education Infrastructure Management System (NEIMS) Standards Report, May 2015.



Legend

Less than 5%

25% and above

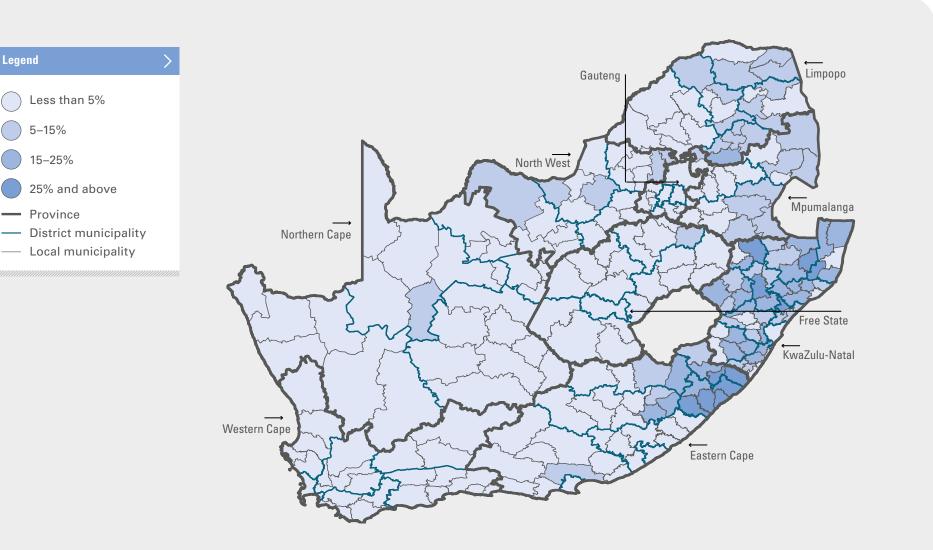
5–15%

15–25%

- Province

Access to piped water is especially problematic in the mountainous areas in Eastern Cape and KwaZulu-Natal

Percentage of children living in households with access to piped water on-site or from communal taps, by municipality, 2011



Source: Calculations based on data from Statistics South Africa's 10% sample of the Census 2011.

South Africa Has made moderate progress in improving access to adequate sanitation.



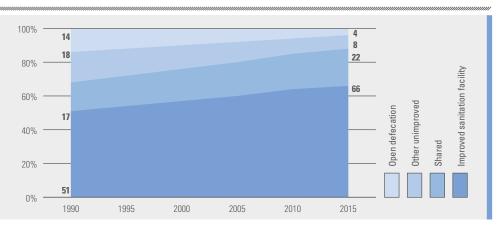
TARGET 6.2

BY 2030, ACHIEVE ACCESS TO ADEQUATE AND EQUITABLE SANITATION AND HYGIENE FOR ALL AND END OPEN DEFECATION, PAYING SPECIAL ATTENTION TO THE NEEDS OF WOMEN AND GIRLS AND THOSE IN VULNERABLE SITUATIONS



South Africa has made moderate progress in improving access to adequate sanitation

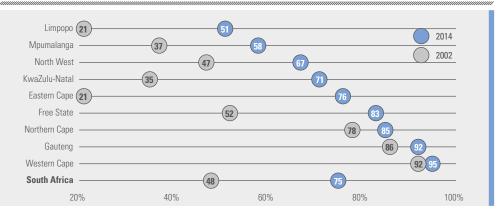
Percentage distribution of the population by sanitation facilities, 1990–2015



Note: Estimates are based on data from South Africa's censuses and national household surveys, including the October Household Surveys, General Household Surveys, Demographic and Health Surveys, Income and Expenditure Surveys, World Health Survey, Study on Global Ageing and Adult Health and National Income Dynamics Study. *Source:* WHO/UNICEF JMP (2015). *South Africa: Estimates on the Use of Water Sources and Sanitation Facilities.*

The rate of progress varies between provinces: children's access to sanitation has increased nearly fourfold in the Eastern Cape since the early 2000s

Percentage of children living in households with access to RDP-standard sanitation facilities, 2002 and 2014

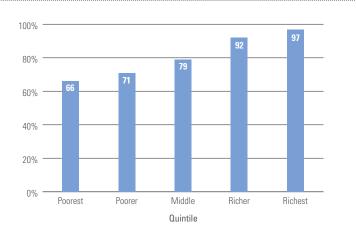


Note: RDP standard toilet facilities refers to flush toilets connected to a public sewerage system or a septic tank, and a pit toilet with a ventilation pipe.

Source: Calculations based on data from Statistics South Africa's General Household Surveys 2002 and 2014.

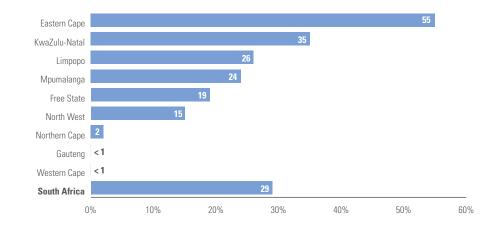
The poorest are least likely to use an improved sanitation facility

Percentage of children living in households with access to RDP-standard sanitation facilities, by quintile of expenditure per capita, 2014



Source: Calculations based on data from Statistics South Africa's General Household Survey 2014.

Nearly 30% of schools only have an unimproved pit or no sanitation facilities at all



Percentage of ordinary operational schools with no sanitation or only an unimproved pit, 2015

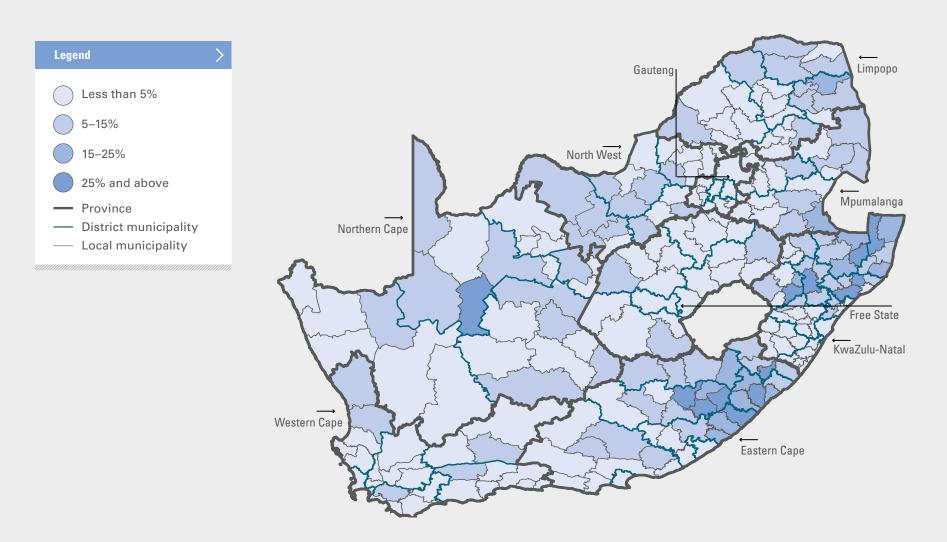
Source: Calculations based on data from the Department of Basic Education's National Education Infrastructure Management System (NEIMS) Standards Report, May 2015.



In 13 municipalities, more than a quarter of children live in households still practising open defecation

Percentage of children living in households with no toilet facility, by municipality, 2011





Source: Calculations based on data from Statistics South Africa's 10% sample of the Census 2011.

MUNICIPALITIES ORE THAN A QUARTER OF CHILDREN LIN HOUSEHOLD PRACTISING OPE DEFECATION





GOAL 5

ACHIEVE GENDER EQUALITY AND EMPOWER ALL WOMEN AND GIRLS

GOAL 16

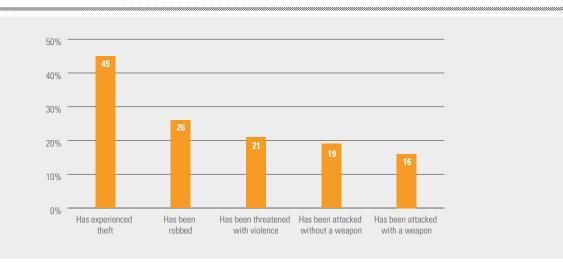
PROMOTE PEACEFUL AND INCLUSIVE SOCIETIES FOR SUSTAINABLE DEVELOPMENT, PROVIDE ACCESS TO JUSTICE FOR ALL AND BUILD EFFECTIVE, ACCOUNTABLE AND INCLUSIVE INSTITUTIONS AT ALL LEVELS

TARGET 16.1

SIGNIFICANTLY REDUCE ALL FORMS OF VIOLENCE AND RELATED DEATH RATES EVERYWHERE

Many children have experienced violence or threats of violence in their lifetimes

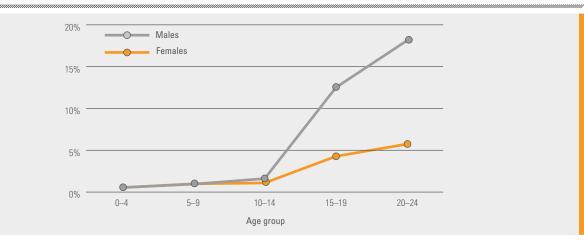
Percentage of school-going children aged 15–17 years who ever experienced victimisation as a result of conventional crime, by type of crime, 2014



Source: CJCP (2015). Research Bulletin: The Optimus Study on Child Abuse, Violence and Neglect in South Africa. Cape Town: Centre for Justice and Crime Prevention.

The share of deaths due to interpersonal violence increases as children enter adolescence, especially among boys

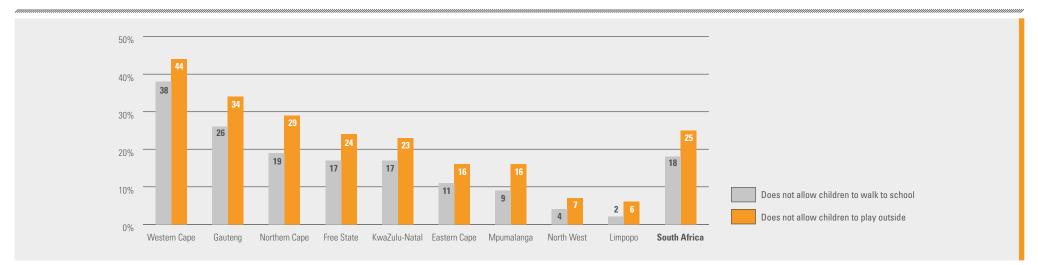
Percentage of deaths due to interpersonal violence, by age group and by sex, 2013



Source: IHME (2015). GBD Compare. Seattle, WA: Institute for Health Metrics and Evaluation, University of Washington, 2015. Available from: vizhub.healthdata.org/gbd-compare.

A large share of families do not allow their children to walk to school or to play outside the home because of fear of crime

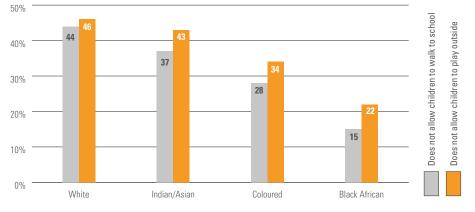
Percentage of households with children who do not allow their children to walk to school or to play outside because of fear of crime, by province, 2014/15



Source: Calculations based on data from Statistics South Africa's Victims of Crime Survey 2014/15.

There are marked differences in fear of crime between South Africa's population groups

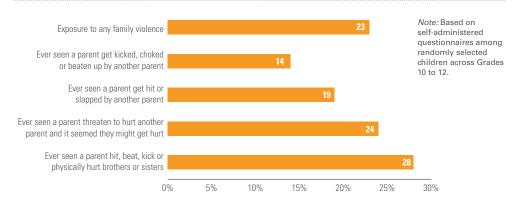
Percentage of households with children who do not allow their children to walk to school or to play outside because of fear of crime, by population group, 2014/15



Source: Calculations based on data from Statistics South Africa's Victims of Crime Survey 2014/15.

Nearly a quarter of children have been exposed to violence within their families

Percentage of school-going children aged 15–17 years who have ever been exposed to violence in the home, by type of violence, 2014



Source: CJCP (2015). Research Bulletin: The Optimus Study on Child Abuse, Violence and Neglect in South Africa. Cape Town: Centre for Justice and Crime Prevention.



TARGET 5.2

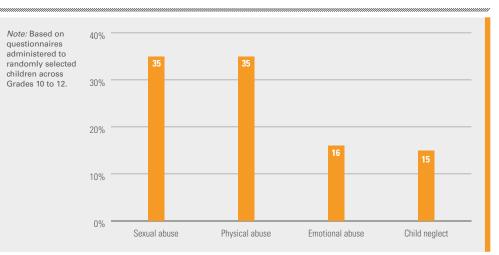
ELIMINATE ALL FORMS OF VIOLENCE AGAINST ALL WOMEN AND GIRLS IN THE PUBLIC AND PRIVATE SPHERES, INCLUDING TRAFFICKING AND SEXUAL AND OTHER TYPES OF EXPLOITATION

TARGET 16.2

END ABUSE, EXPLOITATION, TRAFFICKING AND ALL FORMS OF VIOLENCE AGAINST AND TORTURE OF CHILDREN

Maltreatment and abuse of children is widespread in South Africa

Percentage of school-going children aged 15–17 years who have ever experienced abuse, by type of abuse, 2014

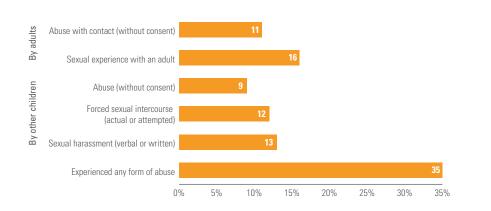


Source: Artz, L. et al. (2016). Sexual Victimisation of Children in South Africa. Final Report of the Optimus Foundation Study: South Africa. Zurich: UBS Optimus Foundation.



One in three adolescents report having experienced some form of sexual abuse in their lifetime

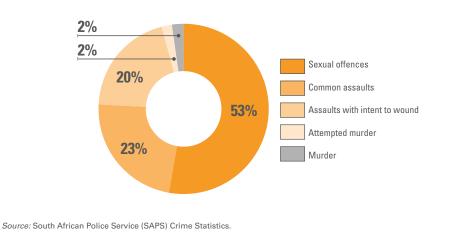
Percentage of school-going children aged 15-17 years who ever experienced any sexual abuse, by type, 2014



Note: Based on self-administered questionnaires among randomly selected children across Grades 10 to 12. Source: Artz, L. et al. (2016). Sexual Victimisation of Children in South Africa. Final Report of the Optimus Foundation Study: South Africa. Zurich: UBS Optimus Foundation.

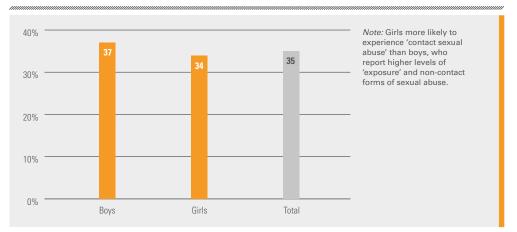
More than half of all reported crimes against children are sexual offences

Percentage distribution of reported contact crimes against children by type, 2013/14



Boys and girls are equally vulnerable to sexual abuse, although the types of abuse they experience tend to be different

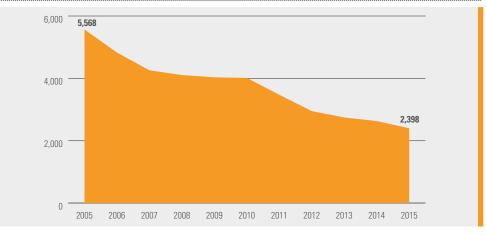
Percentage of school-going children aged 15–17 years who ever experienced any sexual abuse, by sex, 2014



Source: Artz, L. et al. (2016). Sexual Victimisation of Children in South Africa. Final Report of the Optimus Foundation Study: South Africa. Zurich: UBS Optimus Foundation.

The number of cases of child neglect and ill-treatment is decreasing, but data are plagued by under-reporting

Number of cases of neglect and ill-treatment of children reported to the police, 2004/05–2014/15



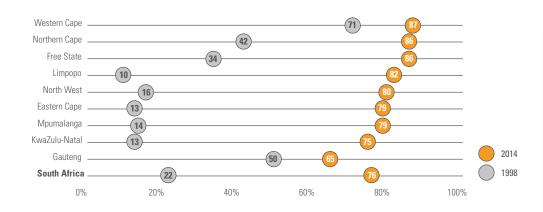
Source: South African Police Service (SAPS) crime statistics. Available from: www.issafrica.org/crimehub.



BY 2030, PROVIDE LEGAL IDENTITY FOR ALL, INCLUDING BIRTH REGISTRATION

Significant progress has been achieved in improving the timeliness of birth registration in all provinces

Percentage of recorded births that were registered within the year of birth, by province, 1998 and 2014

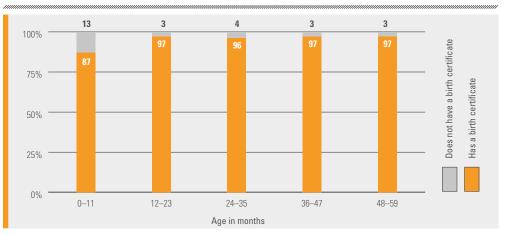


*Note:*The relatively low figure for Gauteng is mainly attributed to the centralisation of the processing of late birth registrations from 15 years of age in the City of Tshwane district municipality.

Source: Calculations based on data from Statistics South Africa's recorded live births 1998 and 2014 datasets.

South Africa is on track to achieve universal coverage of birth registration: 95% of children under 5 have a birth certificate

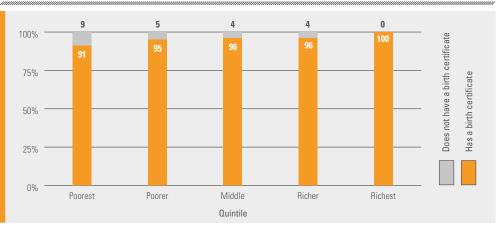
Percentage of children under age 5 with a birth certificate, by age (in months), 2014-2015



Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.

Birth registration rates are somewhat lower among children from the poorest households

Percentage of children under age 5 with a birth certificate, by quintile of expenditure per capita, 2014–2015



Source: Calculations based on data from SALDRU's National Income Dynamics Study (NIDS) 2014–2015, Wave 4 (dataset version 1.0) using post-stratified, cross-sectional weights.



TECHNICAL NOTE



ABOUT THE DATA

Data presented in this publication are derived from a wide range of national and international sources. This note provides a brief description of the datasets that were consulted and analysed to compile information on progress and disparities among children in South Africa.

CENSUS AND SURVEYS

- *Population and housing census:* South Africa's latest census was conducted in 2011. It collected information on household characteristics, including dwelling type, home ownership, household assets, access to services and energy sources, and individuals' characteristics, including age, population group, language, religion, citizenship, migration, fertility, mortality, employment status, employment activities, and health and functioning. Secondary data analysis was carried out of the 10% sample database released by Statistics South Africa in 2015.
- General Household Survey: The GHS is a national household survey that has been conducted annually by Statistics South Africa since 2002. It is designed to measure multiple facets of the living conditions of South African households and covers six broad areas, namely: education, health, social development, housing, household access to services and facilities, food security and agriculture. The target population of the survey consists of all private households in all nine provinces of South Africa and residents in workers' hostels. The survey does not cover other collective living quarters such as students' hostels, old-age homes, hospitals, prisons and military barracks, and is therefore only representative of non-institutionalised and non-military persons or households in South Africa. Secondary data analysis was carried out of the GHS 2014 dataset and selected previous years.
- National Income Dynamics Study: The NIDS is a longitudinal survey of individuals and their households
 implemented by the Southern Africa Labour and Development Research Unit (SALDRU) based at the University
 of Cape Town's School of Economics. It examines changes in poverty and well-being; household composition
 and structure; fertility and mortality; migration; labour market participation and economic activity; human
 capital formation, health and education; vulnerability and social capital. The study began in 2008 with a
 nationally representative sample of over 28,000 individuals in 7,300 households across the country. The survey
 was repeated in 2010–2011 (Wave 2), 2012 (Wave 3) and 2014–2015 (Wave 4). Secondary data analysis was
 carried out of the Wave 4 dataset (version 1).
- *Income and Expenditure Survey:* The IES is conducted every five years by Statistics South Africa, most recently in 2010/11. The main purpose of the survey is to determine the average expenditure patterns of households in

different areas of the country. This survey forms the basis for the determination of the 'basket' of consumer goods and services used for the calculation of the Consumer Price Index (CPI).

- Living Conditions Survey: The LCS is a periodic survey conducted by Statistics South Africa to identify and
 profile poverty in the country, and to give policy-makers information on who is poor, where the poor are located
 and what it is that drives poverty. The information collected is also used to update the CPI basket of goods and
 services which is used to track inflation.
- South African National Health and Nutrition Examination Survey: The SANHANES collects data on the health and nutritional status of South Africans with respect to the prevalence of non-communicable diseases (specifically cardiovascular disease, diabetes and hypertension) and their risk factors (diet, physical activity and tobacco use). It was conducted in 2012 by the Human Sciences Research Council (HSRC).
- National Antenatal Sentinel HIV Prevalence Survey: This annual survey by the Department of Health collects data from 24 cross-sectional antenatal sentinel points to monitor HIV infection trends, at national, provincial and district levels in South Africa, using the standard unlinked and anonymous methodology (WHO/UNAIDS).
- *National HIV, Behaviour and Health Survey:* This HSRC-led survey collects data on the HIV status of individuals and information on socio-demographic and behavioural factors. It was conducted in 2002, 2005, 2008 and 2012.
- Victims of Crime Survey: The VOCS is a regular country-wide household survey by Statistics South Africa
 that focuses on people's perceptions and experiences of crime, as well as their views regarding access to and
 effectiveness of the police and justice system. Households are also asked about community responses to crime.
 Secondary data analysis was carried out of the VOCS 2014/15 dataset.
- Optimus Study on Child Abuse, Violence and Neglect: The Optimus Study provides the first-ever representative data in South Africa on child maltreatment and exposure to other forms of violence. It was conducted by the Centre for Justice and Crime Prevention (CJCP) and the University of Cape Town (UCT). The study forms part of a larger programme on comparative research on the subject, with studies conducted in Switzerland and China.
- Survey of Activities of Young People: The SAYP is a household-based sample survey that collects data on the
 activities which children aged 7 to 17 years get involved in, including market production activities, production
 for own final consumption and household chores, as well as school activities. It was implemented as a
 supplement to the Quarterly Labour Force Survey (QLFS) in Q3 in 2010.
- Other surveys that were used for trend analysis in this publication include: the Community Survey 2007; the National Food Consumption Survey (NFCS) 1999 and 2005; the Demographic and Health Survey (DHS) 1998 and 2003; the National Youth Risk Behaviour Survey 2008; and the Living Standards and Development Survey 1993.

ADMINISTRATIVE DATA SOURCES

- *Education Management Information System:* The EMIS is maintained by the Department of Basic Education and contains data on a wide range of indicators related to education.
- *National Education Infrastructure Management System:* The NEIMS contains data about the condition of infrastructure and facilities at each of public schools across the country.
- SOCPEN: The South African Social Security Agency (SASSA) releases monthly SOCPEN reports with updated statistics on the coverage of different social assistance grants.
- *Recorded live births:* This dataset, released annually by Statistics South Africa, contains information on all births recorded on the National Population Register and can be used, for example, to explore timely and late registration of children's births.
- *Causes of death:* This dataset, released annually by Statistics South Africa, contains information on mortality and causes of death based on death notifications registered at the Department of Home Affairs, including child deaths.
- *District Health Barometer:* Funded by the National Department of Health, the annually published DHB tracks a wide range of health indicators at the district level.
- *Crime statistics:* The South African Police Service (SAPS) maintains a database with crime statistics. Statistical reports are released into the public domain annually.

OTHER DATA SOURCES

- *Mid-year population estimates:* The annual mid-year population estimates released by Statistics South Africa contain data at national and provincial level, disaggregated by age groups.
- United Nations Inter-Agency Group for Child Mortality Estimation: The UN IGME publishes annual estimates of child mortality using a common statistical approach to reconcile estimates from different national sources.
- United Nations Maternal Mortality Estimation Inter-Agency Group: The UN MMEIG publishes annual estimates of maternal mortality using a common statistical approach to reconcile estimates from different national sources.
- *WHO/UNICEF estimates of national immunisation coverage:* WHO and UNICEF release annual estimates of the coverage of immunisation, based on surveys and administrative data submitted by countries.
- UNAIDS estimates of HIV prevalence: The UNAIDS Secretariat releases annual estimates of HIV prevalence and related indicators. The estimates are based on national Spectrum files that are developed and maintained by a country team of experts.

REFERENCES

Artz, L. et al. (2016). *Sexual Victimisation of Children in South Africa. Final Report of the Optimus Foundation Study: South Africa.* Zurich: UBS Optimus Foundation.

CJCP (2015). *Research Bulletin: The Optimus Study on Child Abuse, Violence and Neglect in South Africa*. Cape Town: Centre for Justice and Crime Prevention.

DBE. Education Management Information System (EMIS) reports.

DBE (2015). General Household Survey (GHS): Focus on Schooling 2014. Pretoria: Department of Basic Education.

DBE (2015). *National Education Infrastructure Management System (NEIMS) Standards Report.* Pretoria: Department of Basic Education.

DBE (2015). Report on the Annual National Assessments of 2014. Pretoria: Department of Basic Education.

Department of Social Development (DSD), SASSA & UNICEF (2016). *Removing Barriers to Accessing Child Grants: Progress in Reducing Exclusion from South Africa's Child Support Grant*. Pretoria: UNICEF.

Hall, K. & Sambu, W. (2016). *Analysis of Stats SA's General Household Surveys 2004–2014*. Children's Institute, University of Cape Town.

HSRC (2013). SANHANES-1: Data Analysis on Anthropometry in Children Under 5 Years of Age. Unpublished report prepared for UNICEF South Africa.

IHME (2015). *GBD Compare*. Seattle, WA: Institute for Health Metrics and Evaluation, University of Washington. Available from: vizhub.healthdata.org/gbd-compare.

Massyn N. et al. (eds) (2015). District Health Barometer 2014/15. Durban: Health Systems Trust.

National Department of Health (2015). Saving Mothers 2011–2013: Sixth report on Confidential Enquiries into Maternal Deaths in South Africa.

National Department of Health (2015). The National Antenatal Sentinel HIV Prevalence Survey, South Africa, 2013.

National Department of Health District Health Information System (DHIS) database, reported in: Padarath, A. et al. (eds.) (2016). *South African Health Review 2016*. Durban: Health Systems Trust.

Republic of South Africa (2015). *Development Indicators 2014*. Based on Statistics South Africa's Income and Expenditure Survey 2010/11.

SASSA. Statistical reports.

Shisana, O. et al. (2013). South African National Health and Nutrition Examination Survey (SANHANES-1). Cape Town: HSRC Press.

Shisana, O. et al. (2014). *South African National HIV Prevalence, Incidence and Behaviour Survey, 2012.* Cape Town: HSRC Press.

South African Police Service (SAPS). Crime statistics. Available from: www.issafrica.org/crimehub.

Southern Africa Labour and Development Research Unit (2016). National Income Dynamics Study 2014–2015, Wave 4 [dataset]. Version 1.0. Cape Town: Southern Africa Labour and Development Research Unit.

Southern Africa Labour and Development Research Unit (2016). National Income Dynamics Study 2012, Wave 3 [dataset]. Version 2.1. Cape Town: Southern Africa Labour and Development Research Unit.

Southern Africa Labour and Development Research Unit (2016). National Income Dynamics Study 2010–2011, Wave 2 [dataset]. Version 3.1. Cape Town: Southern Africa Labour and Development Research Unit.

Southern Africa Labour and Development Research Unit (2016). National Income Dynamics Study 2008, Wave 1 [dataset]. Version 6.1. Cape Town: Southern Africa Labour and Development Research Unit.

Statistics South Africa (2002–2014). General Household Surveys. Statistics South Africa.

Statistics South Africa (2013). *Men, Women and Children: Findings of the Living Conditions Survey 2008/09*. Pretoria: Statistics South Africa.

Statistics South Africa (2015). Census 2011: Estimation of Mortality in South Africa. Pretoria: Statistics South Africa

Statistics South Africa (2015). Mid-year Population Estimates, 2015. Pretoria: Statistics South Africa.

Statistics South Africa. Recorded live births 1998–2014 dataset.

Statistics South Africa. Victims of Crime Survey 2014/15.

UNAIDS (2016). HIV and AIDS estimates, based on Spectrum modelling.

United Nations Department of Economic and Social Affairs (2015). *World Population Prospects: The 2015 Revision.* New York: United Nations.

United Nations Inter-agency Group for Child Mortality Estimation (2015), www.childmortality.org.

UNU-WIDER's World Income Inequality Database (WIID3c, September 2015). Available from: www.wider.unu.edu/ project/wiid-world-income-inequality-database.

WHO (2012). Global Database on Child Growth and Malnutrition.

WHO and Maternal and Child Epidemiology Estimation Group (MCEE) (2016).

WHO, UNICEF, UNFPA and The World Bank (2015). Trends in Maternal Mortality: 1990 to 2015. Geneva: WHO.

WHO/UNICEF JMP (2015). South Africa: Estimates on the Use of Water Sources and Sanitation Facilities.

World Bank's Global Database of Shared Prosperity. Analysis of Statistics South Africa's Income and Expenditure Surveys in 2006 and 2011.

