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## (1) INTRODUCTION

The quantity of the provision of welfare services in any society is a sensitive indicator of the nature of that society. Societies with a long democratic tradition or a strong commitment to caring for all its citizens have extended State-funded social welfare or social security systems while those with a strong capitalist base or with limited democracy have privatised or rudimentary welfare services. Traditionally the provision of welfare benefits fulfils a number of purposes in that society, viz.:

- (i) Provide material assistance to the elderly, the disabled, the dependent and the indigent.
- (ii) Serve to ensure that the ideology and values of the ruling class remain dominant.
- (iii) Serve as a means of social control by ensuring allegiance to the State, fostering dependency and obedience and stifling the organisation of the poor and oppressed.
- (iv) Contribute to the development and consolidation of prevailing social and political policies and thereby to legitimise the existing social system.

Welfare services, together with other human or social services such as health, education, housing, media and communication make part of the ideological mechanism by which the ruling class ensures its domination and the smooth functioning of the 'system'. The other mechanism which the State uses to maintain control is the repressive state apparatuses, viz. the police, army and security forces.

During periods of crises such as the present, the social services become an important terrain of struggle. The popular mass organisations increasingly challenge their values and ideology and struggle to re-orient these services to truly meet their needs and aspirations. The State in turn is attempting to refine and sophisticate their ideological weapons and in collaboration with brute military force attempting to suppress or

re-direct the struggle for social justice.

This is the critical challenge that welfare services and social workers face during the current transitional period as we move from apartheid to democracy.

The purpose of this paper is three-fold to:

(a) Describe the existing welfare system in South Africa (SA) from a historical and welfare perspective.

(b) Analyse current trends and struggles in the welfare sector in relation to the ongoing demands and struggles in the broader society; and

(c) To attempt to identify the strategic approach and the critical issues in the welfare system so as to achieve a comprehensive social welfare/social security system for all South Africans.

## (2) HISTORY OF WELFARE IN SOUTH AFRICA

Prior to the 20th century, there were no organised welfare services in South Africa. The white pioneer families provided for their own needs and amongst Blacks, the extended family system within the tribal system cared for its people. Just prior to the 1920's, social assistance was available in a charitable kind of way through various organisations and mainly through church groups. During this period child welfare societies were formed for whites and the first Legislation for the protection of children was passed in 1913.

The 1920's and 1930's saw an upsurge of interest in welfare. This occurred mainly as a result of the Carnegie Inquiry into the Poor White Problem which emerged after the discovery of gold and diamonds. At the Kimberley Volkskongres in 1934, Doctor H. Verwoerd proposed the establishment of the State Department of Social Welfare. The problems of the poor whites in South Africa caused wide-spread concern and, therefore, a major welfare programme, with the State taking a leading role, was effected. The purpose of this concerted action was to eliminate the poor white problem in the 1930's. The State Department worked closely with private (voluntary) welfare groups and churches and since then the principle of joint responsibility for welfare was laid down. Welfare services by the authorities for Blacks was minimal, and left in the hands of their traditional social systems and families.

The State has repeatedly stressed that South Africa will not become a Welfare State. The principle upon which the South African social policy is based:

"Is that every citizen is responsible for his own welfare and social adjustment, that of his family and of the community. Only where the citizen fails to sustain his independence in these regards, does the State come to his assistance in co-operation with private effort. This is the principle which expresses the character of the nation and distinguishes the Republic of South Africa from a Welfare State."

This principle embodies the residual approach to welfare. Only once did the State depart from this policy and that was at the time of resolving the poor white problem when the State introduced 'institutionalised', i.e. national welfare programmes to eradicate the problem. For Blacks, the Government's policy of apartheid 'a formula for political and social separateness ... for the different population groups, to ensure the maintenance, protection and consolidation of the white race ... (de Kock, 1971, 43) and its application has resulted in severe mass poverty among the Black groups which contradicts the above policy. Official State policies have been directed against the stabilisation of urban African communities and have resulted in family and community disintegration. The churches and other religious groups, private educational trusts and labour organisations responded to the welfare needs of Blacks. Since the early 1970's there have been various grass-roots efforts at community development. Self-help and communal action projects are growing in spite of official policy with their focus on community-wide social problems and the economic realities of the Black communities. It is clear, therefore, that the social welfare needs and hence welfare services of the people of South Africa differ and contrast sharply. Whites show characteristics of the affluent West and, therefore, one can assume that residual social services, i.e. services to the individual would be appropriate. Blacks after decades of exploitation and fragmentation show features exhibited by the economically less-affluent peoples of the world. Therefore, institutionalised, i.e. Government's involvement and national welfare programmes are more urgently required. But the State's commitment to individual services, and its focus on the needs of white voters results in serious contradictions in welfare. These contradictions are made worse by the modified welfare policy recommended by the Department of Constitutional Development and Planning.

### (3) WELFARE STRUCTURE AND RESOURCES

South Africa has a residual welfare system based on a partnership between the State and the voluntary sector. The State is responsible for developing welfare policy within the framework of its philosophy of race discrimination and for a substantial financial allocation in the form of subsidies. This residual welfare system which differs from an institutional or welfare state model has evolved to meet welfare needs as they have been expressed by various groups. No objective criteria exists to measure welfare/social security needs in the community or work place - neither is there any national data to measure such needs.

It is in this context that the approach adopted is to examine the existing resources, analyse their key features and to develop a framework for an alternative welfare or social security system.

The main components of the welfare structure are:

3.1 Welfare Organisations : Voluntary, Statutory and Profit-making.

3.2 Social and Associated Workers.

3.3 Policy-making Structures : Statutory and non-Statutory.

3.4 Training and Research Institutes.

#### 3.1 Welfare Organisations

The bulk of the welfare services are provided by voluntary (private) welfare organisations, while the various Government Welfare Departments undertake statutory welfare services (both professional and non-professional) and Tasty, a small group of social workers and agencies provide services for a fee (profit-making) (Diagram T).

Many multi-national and national companies provide benefits to their workers - very little data is available about this sector. Finally, some local authorities have community social workers (preventive work) and certain religious groups who do relief work.

Historically, voluntary welfare organisations (private sector) emerged as part of religious, charitable and women's groups to help the poor

and needy. Initially, volunteers collected money and goods - as they grew they evolved into larger regional and national structures with full-time trained staff (social workers). Volunteers then moved mainly to management and fund-raising while services were provided by full-time professional staff.

At present there are ten categories of specialised voluntary welfare organisations operating at local, provincial and national levels, viz.:

- Child and family welfare.
- Marriage guidance.
- Care of the aged.
- The blind.
- The deaf.
- The crippled and physically handicapped.
- Crime prevention and rehabilitation of offenders.
- Mental health.
- Alcoholism and drug addiction.
- Epilepsy League.

In addition to these national councils, there are 23 registered co-ordinating bodies operating nationally and provincially. It is unclear whether similar structures exist in the Bantustans.

Local organisations serve particular geographic or magisterial districts - they have their own management committees, full-time staff and offer services usually without charge, and are affiliated to their respective national councils.

The national councils are non-statutory, non-Governmental bodies of volunteers, which co-ordinate the work of their affiliates, develop some guidelines and act as a channel of communication between the State and affiliates mainly on the issue of subsidies and policy directives. Increased subsidisation has increasingly forced the voluntary welfare sector to conform to the State's welfare policy. In 1966 there were 2,100 registered voluntary welfare organisations - by

1986 this number had grown considerably.

In 1976 there were 1,908 registered voluntary welfare organisations with 2,034 organisations operating in terms of transfer of delegated authority.

The child and family welfare movement is one of the oldest and most extensive network in South Africa. A total of 171 societies, mainly urban based provide services related to grants, pensions, marital problems, housing and health issues, physical and substance abuse, some statutory (children's court) work and other problems 'dumped' upon them by other services. The composition of the child welfare societies vary - there are 24 White, 37 Coloured, 20 Indian, 36 African and 54 mixed group agencies.

With the exception of the Indian Welfare Organisations which are partially representative of their communities - the Coloured and African societies are largely in the hands of whites. Many regional variations occur; In Natal there are separate societies for whites, Indians and African communities, in Cape Town a single large white dominated agency ostensibly provides services on a 'non-racial' basis to all groups, in Johannesburg the Johannesburg Child Welfare Society serves White, Coloured and African communities while the Johannesburg Indian Social Welfare Agency (JISWA) serves the Indian community. The inadequate welfare services for urban Africans and the underdevelopment of welfare organisations in these communities can be attributed to a number of factors. The pervasive influence of the church with its strong emphasis in meeting the physical needs of its adherents together with the traditional reliance of the African community on the extended, communal family systems to care and provide for its own people means that external aid in the form of public assistance or other welfare benefits have limited acceptance. Obviously, the deliberate policy of providing minimal resources for African development and harsh repressive conditions prevailing in the townships, especially those administered by the homelands, makes it difficult to establish welfare organisations. This is in stark contrast to the powerful community organisation with extensive street

committees which have been established and which address a broad range of issues including welfare needs. It is these structures with their democratically elected leadership and highly articulate network of volunteers, that are likely to form the basis for a future welfare system, or for the development of an alternate people's committee geared toward collective self-help. The Government or public sector also provide public assistance relief and handle statutory welfare problems in terms of the Childers Act and other laws. This is operated by their own welfare departments which have now been fragmented along ethnic lines in terms of the new constitution.

Prior to the early part of the century State involvement in welfare was handled by the Provincial Governments, in 1929 the State started to grant a non-contributory old age pension to white and Coloured men of 65 and women of 60. This was only extended to the African and Asian men and women in 1944. In the 1930's and 1940's the State's primary welfare role was the allocation of funds for grants and pensions - mainly race-based. The Welfare Organisation Act of 1947 marked the beginning of increasing State intervention. An all-white National Welfare Council was established with the other races playing peripheral advisory roles. The passing of three major laws in the 1970's dealing with national welfare, social and associated workers and fund-raising saw the State developing a coherent welfare policy consistent with its racial policies. This culminated in the 1985 modified welfare policy which totally fragments policy, administration and service delivery along ethnic lines.

Both the voluntary and the public sectors are full of discriminatory and differential services. Hansi Potlak has given an excellent account of this in a paper entitled 'State Social Pensions, Grants and Social Welfare' - which is part of a review of race discrimination in South Africa (Tables 1-7).

Grants and pensions are paid in a ratio of 4 : 2 : 1 for whites, Indians, Coloureds and Africans respectively - Table 1, gives the percentage of pensioners receiving the maximum pension (1974).

Likewise the salary subsidies are also differentiated by race  
(Table 2)

The Children's Act of 1937 provided for grants for children in need of care who had been committed to an institution, and also for foster-care grants. These were paid at the same rate, but differed according to the race of the child. Maintenance grants, to enable children to be brought up by their families, are subject to a means test. In 1979 the ratio of these grants were 100 : 43,2 : 16,2 for whites, Indian/Coloured and Africans (Table 3). Pensions and subsidies to the aged follow similar patterns.

Hare and McKendrick in their paper 'South Africa : Racial Divisions in Social Services' found that ... 'On a national basis, the majority of social welfare services, especially those of a sophisticated and specialised nature catering to a white clientele, are located in or near towns and cities.' This makes them inaccessible, especially to African communities. They note that in a 1972 analysis of the activities of the major community-sponsored mental health agency in Johannesburg, it was found that although black clients outnumbered whites, whites accounted for 86 percent of all attendances at the agency for service and for 75 percent of all home visits by agency personnel.

State welfare policy for Africans was always separate. In 1957 the Department of Native Affairs advised local authorities and all organisations providing services to Africans that it would approve the control of social welfare or recreational services for Africans by voluntary white bodies or by racially mixed committees. This forced many specialised African services which had operated in 'white' urban areas to close, others were re-constituted or forced into the bantustans.

In 1958, the new Department of Social Welfare and Pensions operated within the confines of the new emerging apartheid policies. It stated that ... 'This Department has largely limited its practical activities to promoting the social welfare of the white population.' (Official Year Book of the Republic of South Africa, 1974).

In the same book it was stated that the Government holds the view that:

"Among the Batak nations ... the traditional social system and family structures are such that a considerable amount of what is usually regarded as public welfare assistance and poor relief in Western societies is carried out on a customary basis by relatives and associates ... For this reason, inter alia, it has been found necessary and advisable to differentiate between these groups and others as regards the nature and scope of assistance provided."

In 1966 the Department issued Circular 29, which extended the principle of separate organisational and administrative control to Coloured and Indian voluntary social welfare.

The exact position in the bantustans is very unclear since no reliable data is available.

#### Social and Associated Workers

There are approximately 5,000 registered social and associated workers. They, like other social service workers, are highly skilled professionals, operate at the community level and enjoy a significant measure of legitimacy. The constraints they face are three-fold. Firstly, their training as in affluent capitalist societies is geared towards treatment of symptoms, providing hand-outs, and is case-work oriented. The worker-client relationship perpetuates the class and racial divisions of the broader apartheid society. They either tackle the skills or are unwitting to tackle the fundamental social, political and economic issues.

Secondly, the majority of workers are dependent on the State for their income and job security. Increased subsidisation has ensured that the current service attitude to State policies is ensured. This form of social control has almost made it unnecessary to use direct repressive measures against professionals. This ambivalence explains

their peripheral role in the current struggles. For the social workers to take their rightful place, a positive relationship must develop through concrete struggles.

Thirdly, the shield of professionalism is used to artificially divide the welfare and political aspects of client's problems, to justify non-involvement in political and mass struggles and to perpetuate the narrow case-work approach. A peculiar perversion of this tendency argues non-involvement on the grounds that such action may disrupt vitally-needed services to the clients. New initiatives are required to mobilise and organise social workers around both professional and political issues. In 1969 there were 1,200 practising social workers, in 1976 there were 3,690 and currently there are about 5,000 social workers.

Powerful objective forces related to greater repression of critics of apartheid coupled with an intensification by racial capitalism in its drive for profits have also influenced this professionalisation. Intensification of capitalist exploitation has taken a heavy toll among mine workers, production workers and service workers. The thousands who are killed, maimed or made redundant by the relentless capitalist motor require physical and moral sustenance if they're not to revolt or challenge the hegemony of the ruling class. It is this pivotal role that social workers must re-define - do they act as a safety valve for society.

### 3.3 Policy-Making Structures : Statutory and Non-Statutory

At present policy and financial control is in the hands of the State - while the non-statutory national councils and co-ordinating bodies provide services and engage in some educational activities.

(See diagram 2).

### 3.4 Training and Research Institutes

Social work training is essentially university-based degree courses (16 universities), mainly oriented to the needs of urban elites within the residual welfare model. In 1959 the separate Universities

Act fragmented tertiary education along racial lines. The underlying principles of the State's welfare policies, i.e. a partnership model with the State only assisting those who cannot help themselves, are largely unchanged. Hence the current status quo - with a focus on individuals and families - remains. Practice and research is academic, based on first world Euro-American models, attempts to change families to adjust to the system and perpetuates the professional approach that the social worker is the expert and is all powerful.

### 3.5 Constraints in the Residual Welfare System : A Summary

The following are the main constraints and deficiencies in the prevailing residual welfare system.

- (i) The system is closely linked to the philosophy and practice of apartheid and plays a significant role in consolidating this ideology.
- (ii) The administrative, service and policy-making structure are largely dominated by whites to serve urban white elites. Organised welfare services are only marginally involved in the current township crisis, at the work place with almost no involvement in rural areas.
- (iii) The modified welfare policy, proposed by the Department of Constitutional Development and Planning (1985) emphasises differentiation (neo-apartheid), privatisation and devolution (and devolutionisation) of service delivery from central Government to regional and local levels. This indicates that welfare services occupy a significant place in the Government's reform strategy.
- (iv) The residual welfare model is oriented primarily to respond to the human misery, hardship and disabilities produced by the apartheid system.

#### (4) CRITICAL ISSUES, CHOICES AND POLICIES IN THE CURRENT PERIOD

The welfare system differs from other social services (health, housing, education) in that it does not own or control extensive physical infrastructure or stock (except institutions); much of its services operate at individual and group levels and it is community based and potentially requires the community's support and legitimacy for it to operate effectively.

Issues relate to 7 broad areas, each of which will be briefly discussed.

- (1) Re-orientation of welfare organisations.
- (2) Struggles around welfare services and benefits to accelerate the move from apartheid to democracy.
- (3) Deprofessionalisation of welfare and development of alternative methods of meeting welfare needs.
- (4) Analysing and re-defining the ideological functions of any Welfare Policy in the present and future social systems.
- (5) Re-examining the role of training and research institutions.
- (6) The functions of the social workers and their professional associations require scrutiny; and
- (7) The relationship between the welfare and other sectors of society.

##### (1) Welfare Organisations

Social work is the only profession where non-professionals drawn from different communities constitute the management and policy-making structures at local, regional and national levels. This has profound implications, since theoretically it is possible for community-based mass organisations to democratise and re-orient welfare agencies,

make them responsive to community needs and to directly challenge the State and its Apartheid Welfare Policy. A contradiction emerges since the State through its Regulatory (policy-making) and financial (subsidisation of agencies and social workers) control of the welfare movement could withdraw its support or paralyse this initiative.

It is imperative that white community supportive agencies begin to challenge the State, it also develops alternative strategies to obtain material and human resources to continue functioning and to increase their legitimacy at a mass level away from that which derives from the State.

Thus, the task is for progressive welfare workers and agencies to assist the various community, worker, cultural and political organisations to develop a relevant practice and research agenda for the welfare sector.

The struggles within the South African National Council for Child and Family Welfare at its Biennial Meeting in August 1986 to adopt resolutions condemning the State of Emergency, detention of children and the racial fragmentation of welfare services are evidence of how this is possible.

#### Welfare Services and Benefits

At the community and factory level, the struggle for benefits and improved welfare services is a concrete issue for mobilisation. The gross racial disparities in pensions, grants and allowances, the inadequacy and inaccessibility of residential and other welfare services for township and rural communities and the virtual collapse of the Unemployment Insurance Fund (UIF) and the Workmen's Compensation Act (NCA) benefits in the face of massive unemployment and rampant inflation constitute burning issues of survival. The taking up of these issues by mass organisations with undoubted acceptance the move from apartheid and exploitation towards a non-racial democracy. It is these material conditions that have

contributed to the rise in mass consciousness and popular resistance. For professionals and their agencies it means a move from individual case work and relief measures to group and community methods of social intervention. The focus must shift from victim blaming within a 'narrow residual welfare system towards addressing more fundamental structural constraints to development within a wider social security system.

A more urgent issue in the current phase is the welfare needs of the victims of apartheid. In the current emergency, to date over 33,000 have faced varying periods of detention, thousands of young people have been displaced from schools and homes, millions have been relocated and thousands of workers are unemployed through redundancies or strike action while countless refugees flee from the vigilantes, security forces and bantustan authorities. The psycho-social and material needs of these victims of apartheid is a priority need - both because they have struggled and have sacrificed the most and because failure to accommodate them breeds discontent, frustration and are the potential roots for dissident and disorganising tendencies. Special programmes for refugees, casualties and demobilised persons are required to rehabilitate them. Likewise, the oppressors will also require re-orientation and assistance to adjust to the emerging democracy.

A potential contradiction and area for research emerges from these trends. During the current and transitional periods an expanded welfare and psycho-social support system is required while during the post-apartheid period as the structural constraints to human development are removed the residual welfare system may be dismantled or wither away.

(3) Deprofessionalisation and Alternative Approaches to Welfare  
The emergence of capitalism within an institutionalised framework of apartheid has resulted in the concentration of power, privilege and wealth in the hands of the white minority while the black majority face racial discrimination, economic exploitation and lack of basic political rights. The consequences of this social system

is the emergence of 'social welfare' problems - poverty, marital and family disintegration, alcohol and drug abuse, teenage pregnancies and other forms of behaviour which by capitalist norms are deviant. The response of the ruling class is to depoliticise these issues and to separate them from the fundamental inequality of power relations between the two groups. This is done by developing an entire institution of 'welfare' - with its own professional workers, norms, values and methods of intervention. This professionalisation of human problems is the key ideological function of welfare in capitalist societies - and serves to ensure the reproduction of racial, class and sex divisions in society.

Functional welfare services breed dependency, attempt to diffuse popular anger and disorganises the oppressed, blur or mystifies class contradictions and; its pre-occupation with the maintenance of family life ensures reproduction of the prevailing social system. From a reformist perspective committed and dedicated welfare professionals can do much to mobilise and organise the poor and the abused. Provided that the limits of this approach within the institutional welfare system are clearly understood the potential is considerable. Progressive welfare organisations and workers, on the other hand, by forming alliances with mass based organisations outside of the welfare movement can make the leap from a narrow, sectarian welfare perspective and move towards democracy and social justice.

During the current period welfare services constitute a terrain for struggle - in the post-apartheid society, with the withering away of these 'welfare needs' the entire institution of welfare would require major revision.

As indicated earlier the prevailing residual welfare system is either inaccessible or incapable of responding to the current crisis. The deprofessionalisation of welfare implies the sharing of skills in counselling, social work interventions and crisis management to alternative community based workers. Innovative methods will have to

be devised to provide psycho-social support services to the victims of apartheid and to obtain access to the cordoned townships. These alternative approaches must link up with other support networks to build self-reliance and human dignity. Vertical top-down programmes must be replaced by horizontal programmes linking welfare inputs to other developmental efforts.

#### Welfare Policy

The preceding section has clearly outlined the ideological and service roles of the welfare system within the existing social system. The publication of the modified Welfare Policy (1985) by the Department of Constitutional Development and Planning - with its emphasis on differentiation, ethnically based fragmentation, privatisation and devolution of welfare responsibility to local authorities suggests that the State sees the welfare service as an important tool in its reform strategy. Hence the development of a relevant, non-racial, community supportive welfare policy is a major challenge facing the welfare movement.. Two contradictions emerge in this debate.

Firstly, the structural versus the institutional approaches. Much of the current 'welfare' needs are due to the structure of apartheid. Should the focus be on dismantling these structural constraints or should it be on developing an extensive welfare institution which will provide more resources to meet them. The structural approach - whereby the State guarantees employment, housing, food, education, health and other human services - will significantly alter the current welfare needs profile. It is difficult to speculate whether other 'welfare' needs will arise in the new society and whether these needs can best be met by a re-organised welfare system or by a restructuring of other social and human services.

Secondly, for the foreseeable future - the oppressed masses will demand a welfare state or more extensive social security system to facilitate the transfer of resources by the State and to compensate for centuries of exploitation and subjugation. The extent of distortion and devastation will depend on the protracted nature of the

struggle. In a dual economy, the productive forces are unlikely to reach such heights as to redistribute resources in a short space of time to meet the people's aspiration. Hence the ideological functions of welfare and its administrative and service delivery structures would require major changes to support the emerging democratic and egalitarian social relation.

A third area of debate is the roles and tasks of the professionals (social workers), the people's organisation and the policy makers (State) in developing welfare policies. Progressives within the welfare movement face a number of tasks:

(i) To place the issues of welfare policy and struggle for benefits on the agendas of mass-based community and worker organisations.

(ii) Strengthen the links between the welfare organisations and the (client) communities and to reduce their dependence on the State.

(iii) Expose the fraudulent and racist nature of the new modified welfare policy proposed by the State; and

(iv) Critically examine the educational and research programmes of training institutions and to make them relevant to the people's needs.

#### Training and Research Institutions

The universities and other training institutes have largely been geared towards university-based, first world type of training to meet the needs of urban, affluent whites. Their focus on individual case work as a method of intervention, reluctance to utilise community work or social action methods, the escape behind a petty bourgeois professionalism which insulates them from the reality of apartheid all indicate that this is a major area for change and restructuring.

Alternative approaches to meeting human needs, training of community workers and other para-professionals in these skills and a comprehensive system of data collection to establish priority needs are areas of research and action by these institutions.

Role and Direction of Social Workers and their Associations

The re-definition of the roles of social workers has been identified in earlier sections. The profession itself is fragmented into three different social worker associations. Potentially, these associations while catering for their own needs and interests could also play other roles.

While the objective reality of poverty, disorganisation and brutal repression is crying out for urgent intervention, the following subjective issues must be addressed for this potential to be realised:

- (i) A clear commitment must be made to support the struggle of the oppressed, i.e. the ideology of professionalism and the neutrality of social workers must be discarded.
- (ii) This alliance must be concretised in a programme of action that addresses the issues confronting the mass organisations.
- (iii) Within the welfare sector, these associations can play the leading role in dismantling the apartheid welfare system, opposing the modified racial welfare policy and developing creative, community supportive alternatives within the existing social system.
- (iv) Finally, professionals individually and collectively must clearly define their relationship with the democratic movement.

#### Relationship between the Welfare Sector and Other Sectors

Welfare services are often used as 'dumping grounds' by other social services (health, education, employment agencies) for human problems which the latter are either unwilling to confront or from a narrow professional perspective are perceived to be 'welfare'-related. One way to tackle this problem is for all professionals and social service agencies to come together, re-define their value systems, examine each one's strengths and limitations and to adopt a multi-disciplinary approach.

A more fundamental crisis of survival grips South Africa's townships and rural communities. International sanctions and isolation of the apartheid system, unprecedented economic recessions resulting in rising cost of living, unemployment, deterioration of the material conditions, coupled with renewed militancy and organisation of the masses has provoked a massive military and security onslaught from the State. The State of Emergency and the militarisation of civil society has rent asunder the social, economic and political fabric of society - support networks and social services in these areas have been paralysed or destroyed.

While the organised welfare system (welfare organisations, social workers and national councils) has remained peripheral to the developing crisis - the welfare movement as a whole, (and the professional associations) has yet to develop any effective strategies. On the other hand the mass organisations have begun to develop an alternate community based support network of co-operatives, self-help groups, education, health and welfare committees and training programmes for activists to equip them with skills necessary to prepare for survival. Professional and service groups must make a concerted effort to make a practical contribution to these initiatives - they need to deepen their ideological will and strengthen their organisational muscle.

## THE TRANSITIONAL PERIOD

During the transitional period the deepening crisis could affect the welfare movement in a number of ways. Firstiy, welfare services could be paraiysed, disrupted, dismantled and become inaccessible or inoperable as a result of disorganisation/dislocation at a community level. Secondiy, professionnais in general and social workers in particular, together with sections of the administrative hierarchy could promote or defend their own ciass/race interests. In aiiiance with the ruling class they could either block progressive initiatives or vacillate on critical issues. Only a minority support community organisations, mainiy in their personal capacities. Thirdiy, the State, Governmental organisations (Council for Social and Associated Workers, Regionai Neifare Boards, South African Weifare Council) and non-Governmental organisations (Nationai Councils, Welfare Organisations) may piace restrictions, e.g.:

- On the actions of social and associated workers.
- Withdraw subsidies, registration or fund-raising authorities from agencies.
- Or directly interfere in individual societies with or without the assistance of the security forces.

The impact on the target groups (pensioners, grantees, indigent, disabled and dependent persons) would be to exacerbate poverty, hardship and even result in death.

A practise/research programme of alternatives need to consider the following:

- (i) Reduction of dependency en the State and the development of efforts aimed at seif-reiiance.
- (ii) Development of an alternative support network as discussed above to care for these target groups, e.g. extended families, neighbourhood groups, workers associations and co-bperative endeavours, andv
- (iii) An extended programme of education and re-orientation.

While the democratic movement is addressing the central question of political power, sections within it, concerned with social policy issues need to consider the following specific areas for research and action.

Firstly, research is required into ways of dismantling or restructuring the present State Welfare Department's ('General Affairs'), 'own affairs' welfare departments, home and welfare departments, the several thousand employees of these bureaucracies who require re-education and the dependent client populations who have been colonised to accept the old methods of ruling.

Secondly, the voluntary welfare organisations are dominated by the petty-bourgeoisie jealously guarding their welfare terrain and independence, and are confined to the racially defined group areas. How can these societies, some of which have been in existence for decades, keep pace with changing material needs and objective social conditions. How can the 7 child welfare societies in greater Durban, viz. Durban (white), Durban African, Durban Indian, Chatsworth, Phoenix, Kwa Mashu and Umhlati; move towards a non-racial constitution, non-racial management, staff and administrative structures and service delivery which is based on need rather than race. A recent Welfare Policy Workshop held in Durban (September, 1986) while noting the importance of objective factors (State's Welfare Policy) - identified subjective factors, such as fear of the new, reluctance to change old, comfortable attitudes and unwillingness to fully identify with client communities; as the major constraints.

Lastly, a gap is developing between the non-statutory welfare communities and the State and its welfare departments. The former is trying to move in a non-racial direction and is set on a collision course with State policy. The potential and limits of this contradiction needs to be explored. Methods of drawing the voluntary and other sectors closer to the democratic movement need to be identified while negating or dismantling the State sector.

ISSUES IN POST-APARTHEID SOCIETY :  
FROM STATE SECURITY TO SOCIAL SECURITY

To a considerable extent the form of the welfare system in the post-apartheid society will be determined by a number of factors:

- The social and economic policies of the new society.
- The system of redistribution of resources.
- The welfare needs of the oppressed at that point in time.

The social and economic policies of the new Government will reflect its philosophical and political values. A commitment to achieving security and comfort for all will require the establishment of a socialised welfare system with an increased proportion of the GNP being spent on welfare. Workers and rural communities will be priorities. The shift in the pattern of distribution and consumption of welfare resources away from urban elites would require strong political action at the centre and well-organised structures among the oppressed.

Related to these policies will be methods of redistribution of resources - this will be an urgent demand. Fee-for-service, profit-making services are unlikely to thrive. A number of approaches are possible.

The democratic state could embark on a programme of establishing an extensive welfare state in which significant benefits are available to all persons who are in need of assistance. The young, elderly, pregnant, dependent persons would all benefit while workers would receive generous unemployment relief, sickness and disability benefits. During 1984/5 the State had budgeted R1,4 billion for social welfare and nearly twice that amount for defence. Thus, changes in the allocation of budgetary funds within the existing financial system could release significant funds for welfare.

Another way of distributing welfare resources is to link it to economic production rather than redistribution of income or State revenue. As production increases so the welfare support will expand. In this way dependency may be reduced, scarce resources are not consumed by unproductive activity and welfare incentives for workers will stimulate production.

A third area for debate is whether - in a dual economy both socialised (State subsidised) and privatised (fee-for-service) welfare services could exist and their implications for the emerging social relations. From a national democratic perspective all social and class forces should be allowed to make their contribution to development - provided they do not undermine social democracy.

A related area for research and policy is the future role of the welfare benefits and services provided by multi-national and national corporations. Both provide generous welfare benefits - sickness and disability, pensions, maternity, housing, education and transport subsidies and unemployment or severance benefits. Currently these are heavily tax deductible, i.e. they are indirectly subsidised by the tax payer. In comparison with workers in other sectors of the economy, they are better off, more skilled and accustomed to a higher standard of living - hence they are likely to be more articulate in defending their privileges. Like the above mentioned groups, both the victims of apartheid and the oppressors will have needs that would require special consideration by the welfare sector.

## (7) CONCLUSION

The current phase of the struggle demands that we go beyond the concepts of democracy, social justice and security and comfort for all. The subjective and objective forces which influence them must be analysed and the material conditions for their achievement must be created. This paper has attempted to paint a broad picture of the welfare sector and identified a number of areas for further research and practice.

## TABLE 1

## . PENSIONS BY RACE IN SOUTH AFRICA

## MONTHLY OLD-AGE PENSIONS IN SOUTH AFRICA, 1980-1985 (RANDS)

## I(a) DATE EFFECTIVE WHITE COLOURED/ASIAN AFRICAN AFRICAN : WHITE

From 1/10/80 109 62 33 30,3%

1/04/81 122 71 40 32,8%

1/10/82 138 83 49 35,5%

1/10/83 152 93 57 37,5%

1/10/84 166 103 65 39,2%

1/10/85 180 117 79 43,9%

Increase: 1980-85 65% 89% 139%

## I(b) DISCRIMINATION IN SOCIAL PENSION BY RACE AND DOMICILE, 1960

## MAXIMUM SOCIAL PENSION

## RAND PER ANNUM RATIO

## RECIPIENT AND DOMICILE

White (urban and rural) 276 100

Coloured (city) 138 50

Coloured (non-city) 114 41,3

Indian (city) 115 41,7

Indian (non-city) 101 36,7

African (city) 40,50 14,7

African (town) 34,50 12,5

African (rural) 28,50 10,4

## I(C) PERCENTAGE OF PENSIONERS RECEIVING THE MAXIMUM PENSION, 1974

## WHITE COLOURED AFRICAN 1

## Maximum monthly

social pension R57 R29,50 R11,25

## TYPE of pension: % % %

Old age 92 77 34

Disability 88 92 40

## I(d) RATIO OF SOCIAL PENSIONS BY RACE

## SOCIAL PENSION PLUS

## SOCIAL PENSION FREE MEANS

## WHITE COLOURED INDIAN AFRICAN WHITE COLOURED INDIAN AFRICAN

1929 100 60 - - 100 60 - -

1948 100 46,4 39,3 17,9 100 54,2 54,2 33,3

1960 100 40,2 35,9 14,9 100 45,1 37,50 14,3

1970 100 47,7 14,3 100 34,5 9,5

1975(Oct) 100 53,1 23,4 100 51,9 20,1

1980(Oct) 100 55,9 30,3 100 54,9 28,8

Sources: Table 1(a) The Political Economy of State Welfare Provision  
in South Africa - H. Hamre (1986)

I(b-d) State Pensions, Grants and Welfare - H. Pollack (1980)

## TABLE 2

SALARY SUBSIDIES, 1978

RAND RATIO

White (male and female) 3 813 100

Coloured and Asian

(male and female) 3 117 81,7

African male 2 496 65,5

African female 2 376 61,5

## TABLE 3

MAXIMUM MAINTENANCE GRANTS FROM OCTOBER, 1980  
 RATES PER MONTH (RANDS)  
 WHITE COLOURED AFRICAN  
 & ASIAN

(a) Maximum parents' grant and  
 supplement : single parent 119 67 30,75  
 Ratio (100%) (56,3%) (25,8%)  
 (b) Maximum childrens' grant 28,50 15,25 7,15  
 Ratio (100%) (53,5%) (25%)  
 (1) Each schoolgoing child 9 - -  
 (ii) Maximum number of No limit 4 4  
 eligible children

## TABLE 4

## ALLOCATION OF FINANCIAL RESOURCES (BILLIONS)

(1986/87 BUDGET)

1985/86 1986/87 PRESENT

SECTOR EXPENDITURE BUDGET INCREASE

Education R5,09 R6,06 19,1

Health and Welfare R4,29 R4,73 10,2

Civil Pensions R0,85 R1,24 46

Transport R1,62 R1,72 6

Defence R4,4 R5,25 19,3

Police and Prisons R1,59 R1,81 13,8

Constitutional De-

velopment &amp; Planning R2,32 R2,91 25,4

Foreign Affairs R0,19 R0,24 26,3

Others R9,38 R9,67 3,1

TOTAL R29,73 R33,63 13,1

TABLE 5  
CHILD WELFARE SERVICES IN SOUTH AFRICA  
1985/86  
APPROVED POSTS3  
SOCIETIES COUNCIL  
AFFILIATED

ATI 1  
POPUL ON SOCIETIES:  
GROUPS SUBSIDIES3 1  
R34 752 (7%)  
R132 246 (28%)  
R212 664 (44%)  
R100 650 (21%)  
15 162 840 (65%)  
4 568 739 (20%)  
2 832 705 (  
821 361  
African  
White  
Coloured  
Indian  
Mixed2  
R480,312

## NOTES.

1. Figures based on the March 1985 Population Census conducted by the Central Statistical Services (Pretoria). They exclude the homeland areas.
2. Mixed - these are 54 welfare societies which serve more than one race group.
3. Figures based on the Biennial Report of the South African National Council for Child and Family Welfare (September 1986).
4. The subsidies are part contribution from the welfare sectors of the Department of Constitutional Development and Planning. House of Assembly. House of Representatives and House of Delegates to the respective welfare society.

TABLE 6

## BUDGETTED SOCIAL WELFARE PROVISION IN SOUTH AFRICA

1980/1 - 1984/5

(R000)

SOURCE 1980/1 1981/2 1982/3 1983/4 1984/5

Department of Health and

Welfare -

- white 345 373 383 693 396 345 497 828 554 804

Department of Internal

Affairs -

- coloured 155 873 189 344 256 373 287 019 325 524

- indian 42 927 54 051 67 099 76 992 87 197

Department of Co-Operation

and Development

- africans- "white" areas 110 644 150 172 165 069 228 432 263 611

"Non-independent homelands" 86 690 108 391 138 165 188 209 214 220

---

741 507 885 651 1023 060 1278 480 1445 356

Percentage increase 19.4 15.5 24.9 13.1

Spending as % GDP1k 1.20 1.25 1.28 1.43 1.37

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3 gross domestic product at market prices.

Source - Hans Hamre - "The Political Economy of State Welfare Provision in South Africa". Paper presented at the Conference on Macroeconomic Policy and Poverty in South Africa: The Crucial Issues; at SALDRU University of Cape Town (August 1986).

LOCAL

STATE VOLUNTARY GOVERNMENT RELIGIOUS SELF-HELP PRIVATE

FINANCES Tax payer - Subsidy - Rates Donations Community Fee for service

- Public - Subsidy

CONSTRAINTS -- meit mOtive

Whites only Group based Community \$010 or group

supportive practice

Build self-

reliance and

dignity

- Residual model

- Dependence on State

Residual model

STRUCTURE Democratic management

Professional staff

Racial Departments:

1 General Affairs

3 Own Affairs

10 Bantustans

Preventive Material and

Community work moral help

Health related

FUNCTIONS - Policy making Capitalist

and planning

- Co-ordination

- Control

Subsidisation

Service provision and

implementation of

- case, group and

community work

SERVICE Professional: Generalised and Community Members Volunteers Individual

DELIVERY - Probation specialised services social work provide relief clients

- Courts

- Psychological

support

- places of safety

Non-Professional

(Admin):

- administer grants

pensions and

subsidies

DIAGRAM 2: WELFARE SERVICES: STRUCTURE, FUNCTION AND NATURE

ZS

STATUTORY  
 STATE PRESIDENT  
 Whites  
 (Delegates)  
 (Own Affairs)  
 Dep . of National Health  
 & Population Development  
 (NHPD)  
 Minister of NHPD  
 (Health & Welfare)  
 (Policy-making,  
 Co-ordination, Control)  
 Others: Local Authority  
 Administration  
 Boards  
 DIAGRAM 1  
 (General Affairs)'1  
 33  
 Minister of  
 (Assembly) Health & Welfare  
 xx  
 CABINET Coloureds Minister of 11  
 (Representatives) Health & Welfare 1x  
 11  
 Indians Minister of 1  
 Health & Welfare MNx  
 /'  
 Dept. of Constitutional  
 Development and Planning  
 Minister (African Affairs)  
 WELFARE POLICY AND SERVICE STRUCTURES  
 -----  
 NON-STATUTORY  
 ;9 NATIONAL COUNCILS (10)  
 1  
 (Welfare Liaison Com-  
 mittee)  
 Regional Bodies  
 Local general and  
 specialised agencies  
 Others:  
 Religious  
 groups  
 Private social  
 workers  
 Company welfare  
 services  
 Self-help groups