

## THE WELFARE SECTOR

Working paper for the ANC/ COSATU joint development committee workshop to be held on 4-5 September 1991.

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Note: Leila Patel was unable to share in the actual writing of this discussion paper, and will be unable to participate in the workshop. The paper was written following a meeting between the two of us, and I wish here to acknowledge her contribution. However the final interpretations given here are my own responsibility.

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### INTRODUCTION

We have been given standardised headings under which to submit our presentations on the five sectors. Before getting to the headings, I want to note some key features of welfare which either set it apart from, or make it similar to, the other sectors. I think that if these features are in people's minds before going into the specifics, it may help get some of the issues for boundaries and linkages clear as the paper goes along.

- 1 Welfare deals almost by definition with the poor and very poor in society. In health and education, a flourishing private sector can exist because there is the constituency that wants it, and will pay for it. This is not so for welfare.
- 2 Welfare is not a good that can be bought and sold in quite the same way that health and education (and housing? and land?) are. It is in the state and the private sector's interest to provide education for the future workforce; it is not in their interests in the same way to care for disabled people. In the last resort, a person with a serious injury will be cared for by the hospital services; a malnourished child or an emotionally stressed and abused teenager will go relatively unnoticed.
- 3 Which leads to the next point: a great deal of the caring in society (for dependent people like children, disabled people, elderly people) is not visible, and is not



measured in economic terms. It is done, unpaid, by family, relations, neighbours - outside of the formal welfare system.

- 4 Welfare formally, and the caring role informally, is mostly done by women. This in turn contributes to its invisibility.
- 5 South African welfare services have a very extensive infrastructure already in place, which a lot of people do not know about or understand. At the same time, there are vast inequalities within the sector, in racial terms and between rural and urban areas.
- 6 On the one hand, in terms of profession personnel, the welfare sector is tiny compared to the other 'helping professions', or those in the social sphere. What are the numbers? They are something like this (accuracy not vouched for at this stage):

nurses (all categories)	about 150 000
teachers	? about 200 000
doctors	a bit less than 20 000
social workers	about 8 000

On the other hand, the welfare sector itself mobilises a substantial band of voluntary helpers based in communities to help it in its work. Also, the number of professionals is larged compared with neighbouring countries, where there is a very tiny handful of trained social workers (in the case of Angola and Mocambique, literally a handful - four and six respectively).

Now on to the specific headings.

## 1 DEFINITION OF THE SECTOR

The difficulty of defining welfare, or getting a consensus on a definition, is the key to understanding the problems of boundaries and linkages between welfare and other sectors.



The social welfare system is usually taken to include what are known as the personal social services (what social workers and other welfare workers do), as well as the social security system.

Welfare is often defined in South Africa according to what are known as the 'fields of service':

... the welfare of children, youth and families; care of the aged; care of physically and mentally handicapped persons; care of people who abuse dependence-producing substances such as alcohol and drugs, and combating such abuse; ... the prevention of crime and the rehabilitation of offenders; and services which enhance the quality of life, such as housing, reducing social pathologies, such as prostitution, and aiding people in situations of financial need. (McKendrick, 1987:29)

A broader definition of welfare than that given above is this commonly used one:

...a system of laws, programs, benefits and services which strengthen or assure provision for meeting social needs recognised as basic for the welfare of the population and for the functioning of the social order. (Friedlander and Apte, 1980:4)

This is a usefully comprehensive definition. But what are the 'social needs'? They could include health, land and housing, education. And the word 'welfare' is used by the public, by the press and by politicians to mean all these things. So recently, we have been hearing from Minister Venter and others that "there will be more welfare spending". What they mean is that more of the budget will go to education, health and housing, while there is an actual cutting back on the budget for what is narrowly defined and meant by 'welfare'.

The point to note here is that there is an emerging consensus that in South Africa we need to move away from the narrower definitions of welfare, towards one that is more comprehensive, that is more developmentally oriented. When this happens, the boundaries between welfare and parts of the other sectors collapse.

So the concept welfare is an umbrella concept, which can be taken to mean a general state of social, psychological and emotional well-being. And if we don't integrate the well-



being of women and children into our notions of development, the concept of development we develop will be fundamentally flawed. But in the meantime, the welfare continues to be, for the most part, where people go to as a last resort, when they are on the skids, when ordered to by the courts. In reality it is the ragbag end of social provision.

## **2 DESCRIPTION OF NEEDS FOCUSSED ON GAPS AND INEQUALITIES**

Because so much of welfare deals with problems arising out of poverty, a description of needs, gaps and inequalities could read like a profile of South Africa in general.

The most basic and inclusive point to make is the obvious one: there is a huge gap between the levels of living of the majority of black people and the majority of white people; there is a corresponding huge gap between levels of social provision. By the government's own admission, in its recent attempt to formulate a welfare policy (DNHPD, 1990) about 6 percent of welfare spending has gone to black people. Many of the figures in the report are suspect, but we are talking about the order of spending.

So a black disabled child is more disadvantaged by her/his disability than is a white disabled child.

Within that overall broad statement, the following more specific statements can be made:

- There is a relatively well-developed white and Indian welfare sector, with existing organisational structures and capacities. In coloured and African areas, the formal welfare sector is very undeveloped, with African welfare being way worst off. The key question is: how to restructure existing infrastructure to make sure more welfare resources are driven to where they are needed most?

This is an important point in the light of the fact that the energies of many welfare agencies are at present spent on looking at how to deracialise their services; this is important and necessary, but does not immediately address the deeper problem of resource distribution.



- There are inequalities in the **social security system**: the racially discriminatory pensions and grants. There have been some moves towards parity (War Veterans Pensions. Blind Persons Pensions are now equal) but there is a long way to go.

The most recent figures for Old Age Pensions and Disability Grants are (monthly amounts, as from 1 April 1991):

black	R225
coloured	R263
Indian	R263
white	R304

- There is lack of development of **institutional care**: relatively generous provision of institutional care for white elderly people; no subsidies at all for facilities for mentally ill or handicapped African people (hence almost no facilities; inadequate places for children in need of care (for all races, but worst for black people). As regards the unequal subsidization of institutional care, the most extreme case seems to be the monthly per capita subsidy to homes for the frail elderly: whites - about R960 per month, blacks - about R100 per month. One ironic side effect of the tricameral parliament is that Representatives and Delegates Administrations took advantage of the new 'freedom to move', and institutional facilities and subsidies improved significantly.
- There are seriously uneven levels of **manpower development** (sorry comrades but I can't do personpower): the ratio of white to black social workers about 1:6 whereas the needs are much greater in the black population. Apart from in the homelands and bantustans, which have been effective channels for professional black advancement, the top levels of welfare are still very much under the control of white people. There are also very strict, elitist and backward regulations controlling the ability to introduce different and more appropriate levels of personnel into the sector.

(I have just been advised that human resources development solves the awkward manpower/personpower problem.)



- There is an almost complete **neglect of welfare provision in the rural areas** except for:  
state-provided welfare services in the homelands and bantustans and the pensions and grants system which by now extends into pretty well every remote corner of the country.

### 3 EXISTING RESOURCES AND INSTITUTIONS

There are two important points to be made before going into detail:

- the welfare system is based on what is called a residual ('what's left over') approach: the government will come to the assistance of individuals only when individual, the family and the community has failed to be able to help. The state sees its role as a 'safety net', a carer of last resort, as opposes to the institution approach in which welfare services are seen as the right of citizens.
- Welfare is provided as a partnership between the state and the private voluntary welfare sector (through welfare organisations or w.o.'s). The state subsidises the w.o.'s - they have to be registered to receive subsidy, and have to abide by certain standards (their work is regulated by the state).

#### 3.1 Government welfare:

Welfare is an 'own affair'. There are eighteen government departments of welfare. They are usually attached to or in the same ministry as the departments of health.

- the **Department of National Health and Population Development** has a welfare division. This small division plays a central planning and policy-making role: it does not do any direct service provision
- the four TVBC states each has a welfare department. At 'independence', welfare was usually split off from health. As soon as there is a coup, Pretoria puts them back together again.
- the six homelands each has a welfare department
- welfare for black people in the RSA is delivered through the four provincial administrations; each has a welfare department
- the three tricameral administrations.



In 1990, the total amount of these transfer payments in the fields of old age, disability and child care was R3.6 billion (Lund, 1990:17).

### **3.2 Other government welfare structures**

There has been a recent shuffling and name-changing of policy-making and co-ordinating structures in welfare, and at the time of writing I am genuinely confused. Part of the problem is that the Afrikaans word Raad, used in all the documents which appear first because they are in Afrikaans, translates into both Board and Council in English, and sometimes there really are separate Boards and Councils, but sometimes the people doing the translating get it wrong, and there is really only one body, on one page called Board and on the next page called Council.

However... The top body is the SAWC (South African Welfare Council) which reports to Minister Venter and Cabinet. It operates in isolation, and has no structured relationship with the National Councils (see 3.3) or with the Regional Welfare Boards (next paragraph). There is also a separate Advisory Council for Black Welfare Matters, instituted in 1988, possibly about to be dissolved and merged with the SAWC.

There are about 26 Regional Welfare Boards (RWBs), racially segregated, which are meant to plan and co-ordinate welfare at regional level. They are widely acknowledged to be useless, except for their inspection/registration function which they contract out to government departments anyway. But they are powerful interest groups in terms of regional allocation of welfare resources. It is rumoured that they will go non-racial in the near future - a pilot deracialisation will start soon in the Witwatersrand Regional Welfare Board.

Government welfare slots sideways into the Regional Development Structures from local through regional to national levels - this set of structures should be watched by all sectors for moves towards regional restructuring.



### 3.3 Private voluntary welfare organisations

According to the law, if you call yourself a welfare organisation, you must register as such. Depending on how the counting is done, there are between 2400 and 5000 registered voluntary welfare organisations in South Africa. The vast majority are urban-based.

Voluntary welfare organisations work according to fields of service or specialisation e.g. disability, rehabilitation of offenders, the aged, epilepsy. By far the largest field of service is child and family welfare, and there is often an overlap with other fields of service. For example, a typical case of a multi-problem family who will come to child and family welfare: a mother comes to the child and family welfare office. The father has become unemployed, is drinking and beating her up, a child is truanting from school, another mentally handicapped child needs institutional care, there is no money for groceries and rent.

Most w.o.'s are affiliated to one of the 22 National Councils of welfare e.g. South African National Council for the Aged, South African National Council for Child and Family Welfare. It is generally acknowledged (including by the government) that there are too many of these expensive Councils, and that they need rationalising. However there are powerful vested professional interests at stake which will resist this.

Social workers in the w.o.'s provide a wide range of services, from individual counselling to running therapeutic groups, to initiating community projects. While nearly everyone sees the need to move towards a community development approach, the reality for many social workers is simply trying to keep up with a big caseload, and trying to deal with the increasing requests for material assistance.

Three items of interest:

- Social workers in voluntary w.o.'s live and work at or close to grassroots level, and often closely alongside community-based organisations
- The w.o.'s rely a lot, and in future will increasingly have to rely, on volunteers from the community to help them in their work. This will especially pertain to the care of people with AIDS,



- W.o.'s have the potential (often not realised) for extensive community participation in and control of the management structures of the local branches and agencies.

### **3.4 Private social work practice**

Unlike in the other helping professions, there is a tiny privately practising sector - not more than two hundred or so, though it is growing slowly. They work mostly with middle class people with middle class problems.

### **3.5 Social work in industry**

A growing number of social workers are being employed in industry, mostly in management-initiated Employee Assistance Programmes (EAPs) in the mining and manufacturing sectors. There seems to be a growing trend to extend this service not only to the employee but also to his or her family. But so far this service has concentrated largely on early detection of alcoholism, and other problems which affect productivity in the workplace.

Very few social workers are employed by the unions.

### **3.6 Informal/ indigenous/ alternative welfare provision**

Above, we have been looking more at formal or mainstream structures and organisations. This misses two other important areas of welfare provision.

First, Leila Patel has done a study of the alternative/ progressive welfare sector, looking at welfare facilities and organisations which have been established by union or youth groups or civic associations and so on. She found that the approach of this sector-within-a-sector was different to that in mainstream welfare. It was characterised by, among other things:



- a multi-disciplinary approach, rather than a single-sector approach
- a flexible approach
- an approach that emphasised community participation and control
- an approach that understood that many social problems have been caused by racial capitalism, and thus cannot be solved by blaming the victim
- a development-oriented approach.

Second, there is a growing interest in this and other countries in the informal indigenous community structures and networks that support and protect people. A typical example would be stokvels and other borrowing and lending clubs. Also a lot of welfare provision and caring is done through the community activities of religious groups. The largest of these are registered as welfare organisations, but most are not.

### 3.7 Professional associations

There are three associations for professional social workers in South Africa:  
 SABSWA (South African Black Social Workers Association) - black (African)  
 SWASA (Social Work Association of South Africa) - white  
 SSW (Society for Social Workers) - sort of non-racial.

Some social workers belong to OASSSA; do any belong to SAHWCO?

The national controlling body for social workers is the **Council for Social Work**, a statutory body, through which social workers are registered, disciplined, and charged an extortionate fee for these services. It is a highly contentious and unpopular body with many social workers.

### 3.8 Training institutions

Social work training is offered at nearly all the universities. The trend is towards a four year rather than a three year training. The curriculum is rigidly defined (according to regulations laid down by the Council for Social Work); there is little subject choice; there is a large practical component to the training.



Efforts by Transkei, for example, to introduce a more appropriate, rural-oriented, organisationally-based curriculum came to nought - the curriculum would not have passed the CSW, so Transkei social workers could not register with the CSW, so their occupational mobility would have been limited.

Some social work schools have in the past few years moved, despite the regulations, towards a more developmentally-oriented training. What is lacking so far are certificated training courses, and PSC-accepted posts, for many different levels of welfare personnel.

#### **4 CURRENT APPROACHES OF KEY ACTORS**

Before going into different actors, a broad statement: there is broad consensus in government and private welfare that there is a need for a unitary non-racial welfare system; that the backlog in black welfare services must be a priority; that the provision of welfare must be more efficient and properly managed. There is also a very strong anti-handout, anti-charity approach across the spectrum which I am beginning to find highly problematic (more later if there is time).

##### **4.1 Government:**

All the language is of the free market milieu: the state continues only as a safety net to pick up casualties; privatisation; liberalisation of the economy; self-help; more calls for volunteers

BUT

yes to national programme of nutrition; yes to the principle of parity in pensions (over time); yes to the review of some legislation which makes it difficult for welfare agencies to operate.

ALSO

allocation of money for two funds which have to do with reaching the poor/ redistribution and so on: the IDT money, and the Poverty Committee money (to offset the effects of VAT, ho hum).



#### **4.2 National Councils and other dominant professional forces in welfare:**

The National Councils have been the major actors, in partnership with the state, who have implemented apartheid welfare policy. Now they are under pressure to change.

There is a pretty naive and uncritical acceptance of privatisation in welfare (mostly through lack of understanding as far as I can make out); though non-racial, they are still powerfully white, conservative, urban-oriented; the UK/USA model of social work practice is the goal to be pursued

BUT

acknowledgement of the need to deracialise and to reallocate resources;

acknowledgment of neglect of rural provision. There are some small but powerful proactive forces in there who are pushing for more dynamic changes, and who are in influential positions in the welfare field.

#### **4.3 Progressive welfare sector**

More detail will be given in the next section on alternative approaches. In sum, there is an insistence on one welfare department, acceptance of a mixed economy of welfare (actually I am not sure how widespread this acceptance is), but with a much stronger role for the state than at present. There is a more holistic and developmental approach to welfare.

#### **4.4 Urban Foundation/ corporate social responsibility types**

Welfare as narrowly defined is low on their agenda, justifiably in their terms - they are into education and training, housing, increasingly pre-school. They are not into care of disabled and elderly people, and so on.

The Independent Development Trust (IDT) has specifically excluded welfare as a sector. I think it is a matter of definition - if welfare organisations submitted robust developmentally-oriented proposals for funding, they would not in principle be excluded from consideration.



#### **4.5 The NGO sector**

The non-governmental organisation sector has grown rapidly (and I do not include registered welfare organisations in it at present). I am thinking of organisations, especially in rural development, who have a comprehensive, development approach, as well as urban-based service organisations.

It is hard to generalise, but formal welfare has not been high on their agendas at first glance. But then you look closer and you see, in their integrated approach, a concern with pre-school care, a concern with getting pensions to people, workshops for disabled people. So welfare is there, but it isn't called 'welfare'.

#### **4.6 Labour**

? ....Hunches: welfare is seen as stopgap and reformist; social workers are people employed by management; more welfare-related matters are being included in the bargaining process. Insofar as COSATU is informed by the work of the Economic Trends Group, the emphasis is moving towards production and growth, and away from redistributive issues.

#### **4.7 ANC**

The ANC tabled a welfare policy document at the National Conference in Durban last month, but this has been hard to get hold of. Until that document, policy in the field of welfare from the ANC had been pretty broad and general; people have been waiting to see what form the flesh will take that will fill out the skeletal prescriptions of the Freedom Charter. Presumably, the welfare policy will be closely linked to the overall economic policy.

#### **4.8 PAC**

No known policy. I haven't seen anything written down.



#### 4.9 Inkatha

I haven't seen anything written down. If we take the activities of the KwaZulu Department of Welfare and Pensions as surrogate or proxy for what Inkatha policy would be, we see a strong emphasis on pension delivery via the tribal authorities and community committees; and a stronger emphasis here than in other homelands on a community development approach.

### 5 ALTERNATIVE APPROACHES AND POLICIES IN THE PROGRESSIVE SECTOR

The last few years have seen a number of initiatives being taken in and by the progressive welfare sector - indeed, these have been the years in which a progressive sector became tangible and identifiable for the first time, in any numbers, and in organisational form. What follows isn't in chronological order or order of importance:

- AGOSS: the small but influential Action Group on Social Services comprised people in leadership positions in the voluntary welfare sector and the academic world in the Witwatersrand. They formulated an alternative policy - rather, a set of progressive guidelines upon which any future policy should be based.
- The Welfare Charter: SABSWA and Concerned Social Workers in Joburg have formulated a Welfare Charter, which is at present being circulated in the welfare and other sectors for feedback.
- The National Council for Mental Health is doing a study with the HSRC on policy formulation for the welfare sector.
- The HSRC's sub-programmes Affordable Social Security, and Affordable Material Provision, are funding research that will explore ways of reaching appropriate, affordable welfare services.
- Leila Patel, in association with Concerned Social Workers and the School of Social Work at Wits, recently held a conference to discuss a document arising from her research into alternative welfare, based on a study of work done by progressive organisations. The background document is informally known as "the green book" (Patel 1991), and is the most comprehensive alternative policy that there is at this point (see section 6).



- Three organisations have been formed specifically to deal with, educate around, promote, and generally tackle alternative welfare policy. They formed about five years ago as a response to government attempts to introduce a 'new' but reactionary welfare policy. In Cape Town: the Social Workers Forum. In Joburg: Concerned Social Workers. In Durban: previously the Durban Welfare Policy Committee, in July 1991 formally constituted as the Natal Welfare Policy Association. Talks are going ahead to explore the possibility of forming a united group nationally.
- Other research in the area of macro policy is being done by individuals and organisations - Lund (state financing and structuring), Kotze, September, Weekes, le Roux (pensions), Nattrass (redistribution issues) for example; also the welfare policy project being done by Meharchand under the auspices of CHeSS in Durban. Compared to policy research in the health and education fields, welfare research is on the whole in a parlous position.

## 6 PROPOSED POLICIES FOR CONSIDERATION AND FURTHER DISCUSSION

Given the nature of the workshop, and the attempt to demarcate boundaries and linkages between different sectors, I am putting down some things as starting points. I have chosen things which either relate easily to, or potentially clash with, policies in other sectors. If it at the wrong level of generality, it can be re-thought.

I will start with themes and extracts from Leila Patel's "green book", from the elements of an alternative welfare policy framework:

- A mixed economy of social welfare... private provision of welfare for a small sector (roughly 20 percent) of the population (p. 8).
- The application of selective and targeted social policies to achieve maximum redistributive effects, with the development of universal provision as a long term goal (p. 8)
- Social policies and programmes which will maximally impact on mass poverty and inequality will be advocated in areas such as land reform, social security, education, health, housing, urban and rural development programmes and



community development, social work services, progressive taxation policies, the subsidization of goods and services which are considered to be socially desirable, such as food, transport among others.... (p. 9)

Do these fit in broad terms with discussions going on in the other sectors?

Other policy proposals which are in the air, and which need to be considered in terms of their economic implications, or implications for other sectors:

- a national insurance scheme
- how to integrate such a scheme with existing social security provision, and tie it to an improved and adequate unemployment insurance scheme
- how to shift welfare towards a more developmentally oriented approach, when there is such a lot of "curative" work to be done with the casualties of racial capitalism.

## **7 FURTHER SPECIFIC RESEARCH REQUIRED**

The problem in this sector is that the research has barely started - we need more at the different levels - from micro to macro issues, as well as in terms of fields of service and how they relate to each other. But for a start, and in general:

- 7.1 Research that concentrates on the economics of welfare - that makes the cost to individuals of present informal caring roles (by women especially) more visible. Without this, it is difficult to argue for a strong role for state subsidisation, let alone ownership.
- 7.2 Research on the financing of social security; on different fiscal measures and models which have been used internationally in the welfare field; what advantages accrue to whom as a result of which kinds of measures.
- 7.3 Research which would lead us to understand potential models for joint workplace-community welfare programmes, for negotiation between management and unions.



- 7.4 Research which would show how existing welfare infrastructure can be expanded, enabled to develop. What are the regulations and the organisational and professional cultures that exist which get in the way of this? What would an enabling legislative environment look like?
- 7.5 Research which would reveal, point the way forward to how existing welfare infrastructure can be used, modified, adjusted to be a more effective vehicle for promoting citizen participation. The potential is there, without a doubt.

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