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# Responding to Poverty Through Community Development: The Role of Women in South Africa

By Junette Davids

## Introduction

In 1990 the World Bank reported that more than a billion people in the developing countries lived in poverty. The burden of poverty is spread unevenly within countries and regions - the poor are often concentrated in certain places including in urban and rural areas with high population densities. The weight of poverty also falls more heavily on certain groups particularly poor women. The future quality of the lives of children is compromised by factors such as inadequate nutrition, health care, and education. The World Bank defines poverty as "the inability of people to attain a minimal standard of living, where the minimal standard of living is measured on a consumption-based yard stick as well as factors such as nutrition, life expectancy, under 5-year mortality, and school enrolment rates."<sup>1</sup>

The World Bank reported that during the past three decades the developing world has made enormous economic progress. This is illustrated in the rising trend for incomes and consumption: between 1965 and 1985 consumption per capita in the developing world went up by almost 70%. Midgley,<sup>2</sup> also reported that developing countries have recorded high rates of economic growth, achieved high degrees of industrialization and made significant social progress. Given this scenario one would assume that poverty has also decreased markedly. However, even though some developing countries have recorded high rates of economic growth, achieved high degrees of industrialization, and made significant social progress in the last decades, poverty and underdevelopment still persist.<sup>3</sup> South Africa is an example of a country where poverty persists despite economic development in recent decades.

## Poverty: The South African Experience

Despite the formal abandonment of the apartheid policy, South Africa still remains a highly unequal society. Therefore, one of the critical questions facing the first democratically elected government which came to power in 1994, was to redress the profound inequalities which are the history of the "apartheid" regime, while at the same time fostering the conditions to enhance economic growth.

The apartheid regime's policies created and maintained tremendous inequalities in the social welfare of the country's citizenry. Social welfare services in South Africa were not aimed at addressing the structural inequalities which were factors in creating widespread poverty. Instead social welfare policies were geared towards the well-being and prosperity of the minority of the country, subsequently ignoring the mass poverty among the majority of South Africans. It is necessary to outline the macro-economic situation inherited by the new government in order to understand the background against which resulted mass poverty in South Africa. The country's annual Gross Domestic Product (GDP) growth rate fell rapidly during the 1970s and was only 1.5% by the second half of the 1980s, lower than the population growth rate. An even more pronounced decline in growth in manufacturing output was seen, from average growth rates of 8-9% in the 1950s and 1960s to 6% during the 1970s and only about 3% during the 1980s. Real GDP fell marginally in 1990 and 1991 and by 2% in 1992, partly because of the impact of drought on the agricultural sector. Private investment has been stagnant, and investment by the state and the parastatal sector has been falling since the early 1980s. South Africa has thus experienced a long-term decline during 1982-1993 in growth, a decline accentuated by a recent recession.

Unemployment, although difficult to measure accurately, has also been rising rapidly. Baker argued that more than 40% of the labor force does not have jobs in the formal sector of the economy, though up to half of those without formal employment may be working to a greater or lesser extent in the informal sector. In 1991, the population census reported an unemployment rate of 18%, but this proportion excluded those not actually seeking work, and did not cover the "independent" homelands (Transkei, Ciskei, Bophuthatswana, and Venda), which are now once again part of South Africa and contain some of the worst cases of rural poverty



and unemployment.

Fifty percent of the total population and 66% of Blacks live below the poverty line. In rural areas, 80% of the Black population lives below the poverty line. The poverty line (household subsistence level) for an average Black family in 1991 was R750 (US\$206) per month. The above figures point to the numbers of households that are living in poverty and are unable to provide their families with sufficient food to sustain themselves. The majority of households in this situation are Black and Colored, concentrated in the rural parts of the former homelands and in poor urban areas, especially in informal settlements.

Recent figures showed that more than a quarter of South African children experience stunted growth as the result of hunger and malnutrition. While only 4.9 percent of White children are stunted, the figure for Blacks is 28.3 percent. The country also displays a high infant mortality rate: 70 deaths per 1000 live births, against an average of 34 per 1,000 expected in the United States. Of the two other nations in Africa with comparable incomes, Mauritius has a death rate of 24 per 1,000 and Botswana 58 per 1,000. Infant mortality and low life expectancy are generally regarded as classic indicators of poverty, and in South Africa they reflect the fundamental inadequacy of basic health services and food assistance programs as well as the low standard of living experienced by most of the population.

The years of growth leading up to 1980 is a period when inequalities increased in every sphere and the great majority of the rural Black population was impoverished. Various surveys painted depressing pictures of the predicament faced by millions of South Africans in meeting their basic need for water, energy, food, housing, work, medical care and education. The problem of water is particularly revealing. In the Black townships in the east and west of Cape Province, it is not uncommon for several hundred residents to share the use of a single water-supply point. In rural areas the situation is even worse: a study of three Transkei villages showed that some members of each household spent an average of more than three hours a day fetching and carrying water. The same situation applies to energy. It is not surprising that the new government has prioritized electrification and the provision of piped water to all communities within the first five years.

The Carnegie papers<sup>4</sup> revealed some astonishing evi-

dence of poverty in South African rural and urban areas: 93% of the poverty in South Africa exists outside the major cities.<sup>5</sup> However, this does not mean that no poverty is experienced in the major cities. In fact, there is poverty all over South Africa, but it is in the rural areas that it is most evident. In some towns, up to 40% of grade 1 and grade 2 school children come to school without any food to eat and one third of the children under the age of 14 are underweight. Consequently, one of the Presidential projects launched by the new government aims to provide 50% of all primary school-going children with a meal at school.

### **Alternative Approaches**

There is a debate in the literature about the different strategies that governments pursue to alleviate poverty. Components of such strategies focus on increasing economic growth and opportunities for all people, redistributing wealth, ensuring the universal provision of basic needs and safety nets. Increasing studies examining developing countries suggest that balanced social and economic development will only take place if governments pursue economic growth strategies that have egalitarian redistributive results. Poverty can only be eradicated through an increase in economic growth that will generate income-earning opportunities for the poor, as well as the provision of basic social services for poor people. In addition, the government should also ensure improved access to education, health care, and other social services.

Some authors believe that effort should not be directed at reducing inequalities and poverty, but rather at enhancing economic growth and industrialization which will raise levels of living and significantly eradicate poverty.<sup>6</sup> This approach is referred to by Dreze and Sen as the "growth-mediated" strategy, which aims to promote economic growth and take the best advantage of the "potentialities released by greater general affluence."<sup>7</sup> Anand describes this approach as capacity expansion through economic growth. In this view, they argue, "as average incomes increase, the population has greater command over the relevant goods and services - food, health care, medical services, basic education, and so on - which in turn leads to improved health, nutrition, and lower rates of mortality and higher life expectancy."<sup>8</sup> Others argue that governments should deal with poverty by dealing with the problem of inequality, and that balanced social and economic development will only take place if governments combine economic growth



strategies with egalitarian redistribution measures. Dreze refers to this approach as the “support-led” strategy which is distinguished by the provision of basic public and social services by government without waiting for the country in question to promote economic growth.<sup>9</sup> This basically means provision of the basic aspects of life, i.e., housing, nutrition intervention, educational services, clean water, employment provisions and income redistribution.

The rationale of this approach is to provide direct support to raise the quality of lives of the poorest, rather than waiting for the possibility that economic growth may do this.<sup>10</sup> This argument is especially valid if one considers that not all countries experience rapid economic growth - some experience it, more so than others. But, is it possible to alleviate poverty without economic growth? Sri Lanka has for example reported some fundamental social changes spearheaded by the government and carried out primarily through redistributive policies rather than through dynamic economic changes. Following the strategy, Tilakaratna notes that, “on the one hand, the country has recorded substantial attainments in social spheres such as education and health ... But on the other hand, the average income of the population has continued to remain low.”<sup>11</sup> This is a good example of a process of social change in the absence of rapid economic growth. As a matter of interest, during the pre-elections in South Africa, when proposing its economic strategies, the African National Congress argued for a policy of economic growth through redistribution versus the National Party’s belief that redistribution can only be achieved following economic growth.

Countries, such as Brazil had high economic growth but did little to combine it with social services.<sup>12</sup> Similarly, the Philippines has recorded moderate to high rates of economic growth, and an improving degree of industrialization, but poverty still persists.<sup>13</sup> In these cases, one can therefore assume that the dilemma of poverty may be attributed to the inability of governments to more equally distribute the country’s wealth and income. Thus, the importance of growth lies in the way that its benefits are distributed among people, and the extent to which growth supports the provision of public services.

### **Community Development**

Poor people are generally underrepresented, socially marginalized, and politically powerless. Governments,

even if acting with the best intentions, often fail to meet this group’s needs. Therefore it is essential that poor people organize themselves to assume greater control over their lives as individuals and as members of society by improving their living conditions through community empowerment. They should collaborate to participate actively for change at the grassroots level through community-oriented projects and activities that require collective action. However, this does not mean that governments should have a lesser responsibility toward the well-being of the poor - only, through empowerment might the poor improve their living conditions and accelerate the poverty alleviation process. Moreover, it is important to realize that empowerment through community development should be seen as a strategy to be pursued, while not assuming that this approach alone can alleviate poverty.

Another widely used term for grassroots programs is “self-help” programs. Muller defines “self-help” groups as “voluntary, small group structures for mutual aid and the accomplishment of a special purpose. They are usually formed by peers who have come together for mutual assistance in satisfying a common need, overcoming a common handicap or life-disrupting problem, and bringing about desired social and or personal change. The initiators and members of such groups perceive that their needs are not, or cannot be, met by or through existing social institutions ...”<sup>14</sup> The concept of self-help leading to people empowerment, is an essential ingredient of social development. In addition, self-help groups give the individual an identity, membership, purpose, and direction - a beginning of binding together for empowerment.<sup>15</sup>

In 1953, the United Nations first referred to community development as the general description of self-help activities taking place in developing countries.<sup>16</sup> O’Gorman defines community development as the promotion of better living conditions for the whole community with active participation, and if possible, initiative of the community. Effective community development through self-help programs can make a crucial contribution towards government’s poverty alleviation endeavor. Self-help programs in developing countries are used as a strategy to bring rapid social development to the poor at the community level. The organization of such programs may differ from one country to another depending on the political atmosphere, cultural organizational structure, etc. Essentially, all self-help programs have several main features in common, as they all aim to pro-



vide direct benefit to the population concerned.<sup>17</sup>

There is some agreement about the need for community empowerment. Why? What prompts communities to engage in empowerment through grassroots strategies? The need for community empowerment particularly evolves when government intervention and social services do not yield meaningful results in terms of improving the poor's living conditions; when governments cannot deliver and this failure seriously affects citizens in terms of dislocation and alienation; and when it is clear that problems of widespread poverty and economic underdevelopment have not been solved through government intervention or through massive international grants and loans to governments. In short, when government sponsored development programs have not significantly improved the position of the poor the need for community empowerment becomes apparent. However, it would probably be the preferred method for dealing with most communities' issues at the outset, rather than the result of government failure.

Some research findings suggest that undesired and unattended social consequences as well as disgruntlement arising from residents whose needs are unmet, have prompted governments to direct significant resources to encourage the formation of grassroots organizations.<sup>18</sup> These grassroots organizations are established to provide solutions to deal with the effects of government's failures to meet the social and economic needs of its citizenry. Vasoo also argues that the primary goal of grassroots mobilization and citizen participation is the promotion of the collective efforts of citizens to better their communities and the provision of opportunities for them to be involved in various aspects of governmental decision and planning processes of issues affecting their lives. In the long run this should encourage poor people to become self-reliant in social and economic activities and be more participative in neighborhood community development.<sup>19</sup>

Various governments have also adopted an interventionist approach to establish grassroots organizations as channels for participation in community development. However, government sponsorship of grassroots organizations may produce some counter-effects to community development, particularly if the grassroots leaders rely heavily on government bureaucrats to design programs for their organizations. It is therefore important for community leaders to have the independence to define their own program objectives in relation to

their organizations' goals in order to improve the delivery of services or to participate in the design of government programs.<sup>20</sup> A viable approach to social development that helps the poor lift themselves out of poverty would therefore be one controlled by the poor themselves. The very existence of a plan that is "handed down" by experts is counter-productive to mobilizing effective grassroots leadership and management.<sup>21</sup>

In many nations, there has been widespread adoption of community development and basic needs grassroots programs which aim to stimulate production, raise incomes, and improve levels of health, nutrition, education, and well-being among the poor. In third world countries, grassroots self-help programs are normally the development projects that appear to be more effective in addressing poverty than loans and grants to governmental agencies. Foundations as international service agencies under the United Nations auspices, "are now seeking community-based non-governmental organizations rather than national governments as recipients for low interest loans and grants."<sup>22</sup> In the final analysis, people should be empowered to control their own destiny, to participate in decision making and planning, and to work together effectively.

Even though the South African government seems committed to effect change in poor and marginalized communities, it is also clear that it has only limited resources to do so. In addition, with particular reference to the Cape Town area which has a National Party provincial and local government, local Coloureds' and Blacks' needs might not rank as priority. For this reason, as well as others mentioned earlier, these poor communities must organize themselves to change their own lives. The role of women is of particular importance in ensuring this kind of response. The next section highlights a program that seeks to empower poor women in terms of economic and community development.

### **Empowerment in the Philippines: Lessons for South Africa**

In 1987 the municipality of Makati and the non-governmental organization (NGO) called the Young Women's Christian Association (YWCA) set up a community-based malnutrition ward for children because of a growing number of children residing in slum areas who were moderately and severely malnourished. During phase one, the main objective of the project was to provide treatment and rehabilitation for ten malnour-



ished children and their families. A part-time social worker and a physician were contracted to carry out the plan. However, upon implementation of the plan, various problems were encountered including recurrent infections as a result of poor environmental sanitation, congested housing, and lack of safe water. Difficulties also occurred when complying with prescribed treatment because mothers had very little knowledge of health care. Above all, resources for medical services were depleted quickly.

Based on the weaknesses of the previous phase, the importance of a community diagnosis to address acute health and environmental problems was emphasized. It was thus recommended that a community diagnosis be carried out with the help of those mothers who had shown interest in the nutrition project and who were willing to involve themselves as volunteers. The scope of services for the malnourished children was also extended to include all preschool children in the poorest section of the community. The new phase therefore required more employees. With the financial assistance of UNICEF, a full-time nutritionist, a child development worker and a public health worker were employed by the NGO. The new service plan consisted of a staff-managed day care program with play activities, nutrition education and feeding, free clinics and mother's classes. The objective of the expanded services, combined with a stronger support system among women, was to encourage other mothers with malnourished children to join the nutrition program, and to improve nutritional status.

Through their various activities, the team had a chance to interact with more mothers and develop deeper insights into those problems of the community that contributed to malnutrition. During this phase, the team discovered various problems such as the type of food mothers bought for their children - soft drinks and junk food which have little nutritional value and aggressive marketing of infant products by milk companies which discouraged breast feeding. It was obvious that the planned interventions of the team were not achieving their objective of improving the nutritional and health status of the children. However, the new activities had improved the team's knowledge about the community's health care habits and had allowed the team to work with more women and children. At the end of this phase, the team (self-help group) reassessed its role in the community and questioned the effectiveness of its participation in the delivery of basic services that were

supposed to be the responsibility of the government.

At the beginning of phase three, the project emphasis began to shift as some members favored developmental strategies over the more curative type of approach. This shift in emphasis obviously altered the objective of the program to address issues such as an increased income for women; improvement of primary health care skills of mothers; and less expensive and indigenous sources of food for children. To address the first problem, the team decided that the mothers who were conscious of and trained in serving nutritious food, run a co-operative community kitchen called *Lutong nanay* which means "mother's cooking." These women would then prepare special servings of food for malnourished children and sell the rest to the community at a low cost. At the same time a series of training workshops were also designed and held to help the mothers run the co-operative. These workshop sessions also included leadership training, communication, trust-building, team-building and group dynamics. In addition, the mothers were trained in the technical part of food preparation, meal planning and food handling. Meanwhile the physician conducted simultaneous training programs in herbal medicine, first aid, rational drug use and maternal and child care.

Just like in the previous two phases, numerous problems accompanied this phase. It became impossible for mothers who were operating the kitchen to work the 7 am to 7 pm daily schedule they had committed themselves to. The team's obsession to make the community kitchen succeed as a viable and self-supporting project, resulted in little time to pursue and monitor health related activities. These were only some of the problems experienced. During the assessment of the program, the team concluded that a more appropriate approach to empowerment was to extend the training and organization process to other members of the community as it realized that it demanded a time schedule that was impractical for women who had young children.

At the commencement of the fourth phase, the team decided to become more involved in the community organization process, and take a less prescriptive role. It decided to assist in the formation and development of different groups, with those groups determining what they wanted to learn and do. These changes however shifted the emphasis to the consolidation of empowerment strategies for small groups. By the second year



of the project, the team had adopted a more participatory approach to project planning and implementation. Three groups had also emerged as offshoots of the earlier training program. They are the community health organizers (CHOs); the Mother's club; and the co-operatives.

The community health organizers consisted of women who were recognized for their qualities and expressed willingness to serve the community in addressing health problems on a voluntary basis. Apart from being able to help in nutrition-related activities, these CHOs were also trained in community mobilization and primary health care activities such as immunizations, maternal and child health care, and sanitation. The Mother's health club emerged from the community kitchen initiative. These women were determined to generate income and therefore decided on taking up sewing after identifying a ready market within the community. With the help of other people's organizations, the CHOs also initiated a co-operative for rice and other dry goods. Rice was cheaper when purchased in bulk from agricultural co-operatives that sold rice below the retail market price. Thus, resources were pooled to buy food in bulk and sold at discount prices to members of the food co-operatives.

Finally, phase five involved the social mobilization of the community representatives at the municipal level. During this phase, representatives from government, private medical centers in Makati, the City Health Office, local government officials, NGOs as well as the CHOs, worked together at workshops and in discussions which aimed to consolidate efforts to provide piped water for the town's residents. The new organization was called GO-NGO (government organization - non-government organization).<sup>23</sup>

Despite the various problems encountered in this project, there is clear evidence of success in terms of empowerment and capacity building. This can be seen in the final establishment of a broad-based government and community collaboration, where the community could eventually participate in the decision-making process and plan around issues such as the provision of piped water for the residents. This success provides evidence for O'Gorman's assertion that the intervention at the community level without reaching the level of development decision-making structures may inhibit real change.<sup>24</sup> What is particularly captivating about this program, is the persistence of the team and the com-

munity to succeed in their endeavor. The goal of each phase was basically to overcome the weaknesses and build on the strengths of the previous one.

The Makati community can easily be identified with most poor communities in South Africa and elsewhere around the world where marginalized women face difficulties with the lack of food for their children, poor housing and sanitation conditions, and the lack of clean water. In addition, illiterate mothers have limited knowledge of health care and have difficulty complying with prescribed treatments.

The lessons that poor communities can learn from the project outlined above are significant. First, the community and a local government agency identified a particular need for a community-based program to be implemented that would help the malnourished children. Later the community took responsibility and illustrated a sense of responsibility to do something about their own poverty conditions. Given the similarities with regard to poverty conditions of this community and most poor communities, this program can serve as a model for such communities, particularly if programs are adopted with similar program dynamics, processes, and strategies to enhance maximum participation.

## Conclusion

While recognizing the potential of these community development efforts, it is also important to be realistic, and acknowledge their limits. This short essay has attempted to analyze the significance, and processes of participatory development through an examination of the experiences of some initiatives in developing countries. The analysis presented notable achievements of these participatory initiatives. Many difficulties, setbacks and frustrations are normally accompanied with the initiation, implementation, and sustenance of grassroots programs and efforts. It is necessary to point out that these movements had to overcome a wide variety of problems at some stage or another, and continue to face difficulties of organization, finance, know-how, staff and opposition or indifference from certain vested interests. Moreover, people are skeptical about group effort significantly altering their poverty situation. For instance, they may not consider malnutrition and the health of their malnourished children as a priority issue. Even the concept of self-help raises a number of questions, for example; is it reasonable to expect poor people who need to muster every ounce of their energy at their



disposal to apply themselves voluntarily to communal development?

Despite these drawbacks, grassroots development should be, and is often regarded as a symbol of hope to lift the poor out of despair and to empower them to liberate themselves. It is important to realize that there is no quick strategy for poverty alleviation - but surely community development through grassroots efforts definitely serves as a "blink of hope" for many poor people. Communities must organize in order to collectively assert their rights, and insist on genuine participation in planning and decision-making processes. Only then can the poor hope to break the chains of powerlessness, live decently as human beings should, deal directly with problems that affect them, and become empowered in the process. Most importantly, poor communities must be empowered to move beyond the project focus to policies. The lessons of successful experimental projects need to reach policy makers and become integrated into internal policy documents.

Community development projects should aim not just to meet the needs of the poor, but to establish models of development for the country as a whole. The values of society as a whole must be tuned towards eradicating poverty through imaginative thinking so as to enable the poor to participate in organizing and controlling their own lives. Various authors propose that for program efforts to be sustained over time, broad-based coalitions around specific poverty problems should be built. Establishing coalitions is also the key to rallying support, providing advocacy, synthesizing research, and maintaining the visibility of livelihoods issues.<sup>25</sup> These activities focus attention on services that are invested in small-scale grassroots efforts and promotion, which may not be immediately profitable in monetary terms, but, like investment in education, ultimately expand national wealth and income.

## Notes

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<sup>1</sup> World Bank, *World Development Report* (Oxford University Press, New York, 1990), 26.

<sup>2</sup> J. Midgley, "Inequality, The Third World and Development," *International Journal of Contemporary Sociology*, Vol. 25, Nos. 3-4, 1988.

<sup>3</sup> S. Anand and M. Ravallion, "Human Development in Poor Countries: On the Role of Private Incomes and Public Services," *Journal of Economic Perspectives*, Vol. 7, No.1, 1993.

<sup>4</sup> Carnegie Inquiry into Poverty and Development in Southern Africa, Carnegie Conference Papers, Capetown, April 1984.

<sup>5</sup> F. Wilson, "South African Poverty: Major Issues," *Social Dynamics*, Vol. 10, No. 2, 1984.

<sup>6</sup> J. Midgley, "Inequality, The Third World and Development."

<sup>7</sup> J. Dreze and A. Sen, *Hunger and Public Action* (Clarendon Press, Oxford, 1989), 183.

<sup>8</sup> S. Anand and M. Ravallion, "Human Development in Poor Countries: On the Role of Private Incomes and Public Services," *Journal of Economic Perspectives*, Vol. 7, No.1, 1993, 189.

<sup>9</sup> J. Dreze and A. Sen, *Hunger and Public Action*.

<sup>10</sup> Ibid.

<sup>11</sup> S. Tilakaratna, "Some Aspects of Local Social Development in Sri Lanka," *Regional Development Dialogue*, Vol. 10, No. 2, 1989, 5.

<sup>12</sup> J. Dreze and A. Sen, *Hunger and Public Action*.

<sup>13</sup> J. K. Boyce, *The Philippines: The Political Economy of Growth and Impoverishment in the Marcos Era* (Honolulu: University of Hawaii Press, 1993).

<sup>14</sup> J. Muller, "The Soup Kitchen: A Critique of Self-Help," *Community Development Journal*, Vol. 22, No.1, 1987.

<sup>15</sup> A. Kahn and E. I. Bender, "Self-Help Groups as a Crucible for People Empowerment in the Context of Social Development," *Social Development Issues*, Vol 15, No.2, 1993.

<sup>16</sup> F. O'Gorman, "Some Reflection on Community Development Experiences in Brazil," *Community Development Journal*, Vol. 25, No.4, 1990.

<sup>17</sup> C. K. Omari, "Self-Help Programs and Social Development in Tanzania," *Social Development Issues*, Vol. 15, No.1, 1990.

<sup>18</sup> A. Prigoff, "Women, Social Development, and the State in Latin America: An Empowerment Model," *Social Development Issues*, Vol. 14, No. 1, 1992.

<sup>19</sup> S. Vasoo, "Grass-Root Mobilisation and Citizen Participation: Issues and Challenges," *Community Development Journal*, Vol 26, No.1, 1991.

<sup>20</sup> Ibid.

<sup>21</sup> A. Prigoff, "Women, Social Development, and the State in Latin America: An Empowerment Model."

<sup>22</sup> Ibid., 64.

<sup>23</sup> J. Dineros-Pineda, "Beyond Nutrition: Empowerment in the Philippines," *International Social Work*, Vol. 35, 1992.

<sup>24</sup> F. O'Gorman, "Some Reflection on Community Development Experiences in Brazil."



<sup>25</sup> C. A. Grown and J. Sebstad, "Introduction: Toward a Wider Perspective on Women's Employment," *World Development*, Vol 17, No.7, 1989.

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