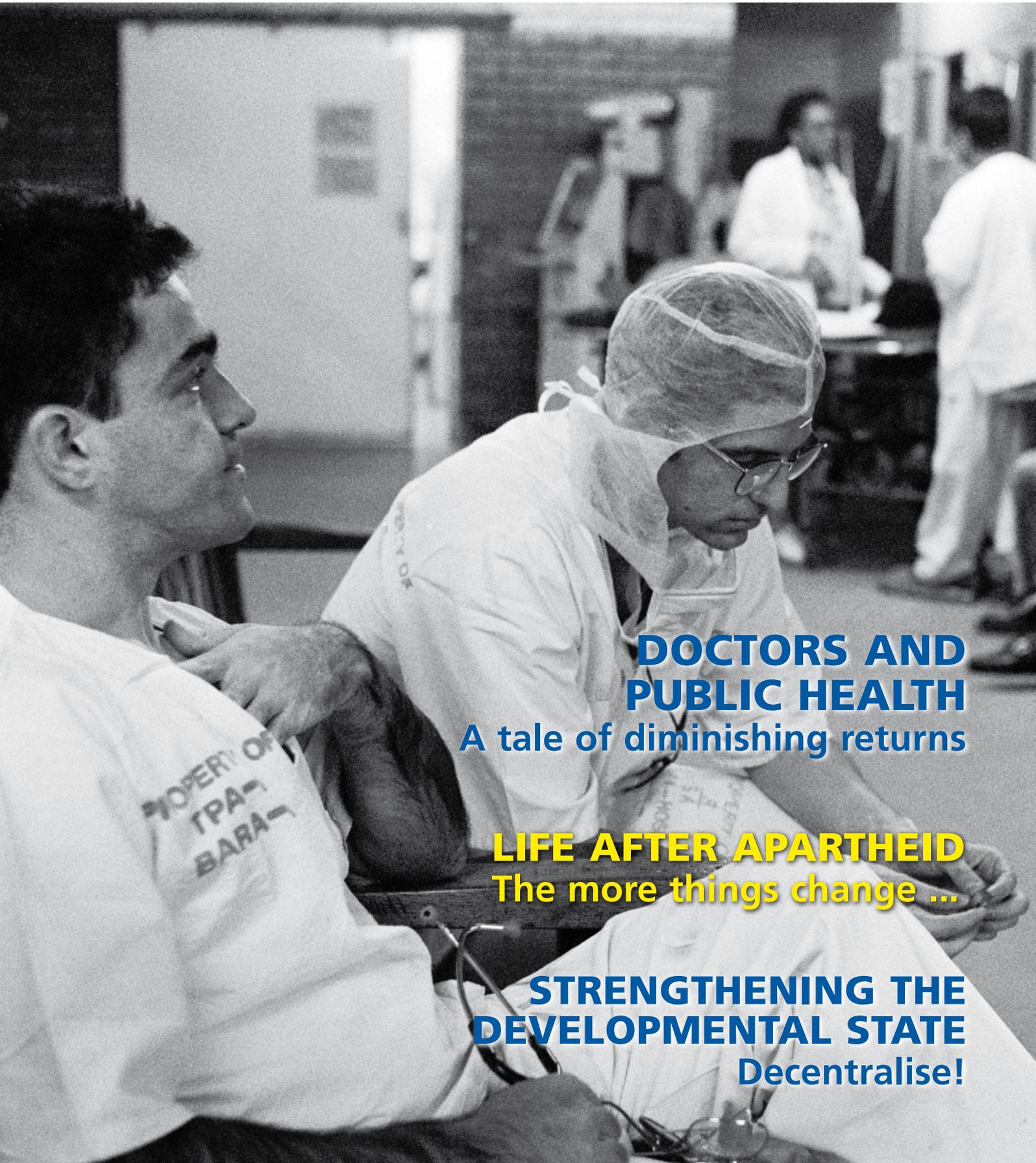




HSRC
Human Sciences
Research Council

review

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DOCTORS AND PUBLIC HEALTH

A tale of diminishing returns

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STRENGTHENING THE DEVELOPMENTAL STATE Decentralise!

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1 **Building African institutional and individual research capacity**

3 **SOCIAL SCIENCE IN AFRICA**

The social sciences in sub-Saharan Africa operate under conditions that are seriously under-resourced. The fact that there is still sustained and vibrant social sciences research in countries which, with a

few exceptions, have little government support, poor institutional facilities and many other challenges, says a great deal about the resilience and resolve of the scholars concerned.

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This analysis by Professor Johann Mouton of Stellenbosch University in the *2010 World Social Science Report* gives serious food for thought. It is an indication that many governments do not appreciate the role of social sciences in understanding and shaping our world and daily lives. But without the social sciences, most public policies would simply not exist and many individual and collective decisions would be difficult, as indicated clearly by the report, under the theme 'Knowledge Divides'.

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Mouton says the science institutions in many sub-Saharan countries have been systematically eroded and destroyed over the past three decades through international economic policies as well as by the devastating effects of domestic policies and events. State funding of social science research in sub-Saharan Africa is the exception rather than the rule.

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His study of the role of international funding in SADC countries indicates that the majority of social scientists in the region depend on international donors, and exactly how dependent academics in the region are on donor funding. The study, to which 600 academics responded, showed that 42% of all respondents (South Africa excluded) indicated that they source between 70% and 90% of their research funding from overseas, compared with only 6% of South African respondents. The HSRC, the premier social science research council in South Africa, seems to buck this trend, as about 28% of our total funding comes from international sources.

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The study also showed that significant proportions of scholars in all fields either agreed or strongly agreed with the statement that their research agendas were consistent with their countries' development goals. For scholars in the arts and humanities, this percentage was 75%, for the economic and management sciences 87%, and for the social sciences 83%, suggesting that donor funding was not driving their research agenda on a large scale.

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SOCIAL SCIENCE IN SOUTH AFRICA

When it comes to publishing in international peer-reviewed journals, South Africa produced about half of all output in the social sciences and more than three times more than Nigeria, the second most productive country. When output by universities is analysed, it reveals the domination of South Africa, where eight of the top ten and eleven of the thirty most productive universities are located.

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As for state funding, South Africa is an exception to the rule that state funding of social science research in sub-Saharan Africa is minimal. The department of science and technology (DST) identified the humanities and social sciences as one of five main priorities for the country. For the effort of government to put social sciences and humanities high on the agenda, social scientists in South Africa, and especially at the HSRC, which reports to the DST, can only be highly appreciative. Another sign of the importance the government places on social science research that contributes to the country's development was a proposal by Dr Phil Mjwara, director-general of the DST, to increase the proportion the government contributes to total funding of the HSRC from 50% of its income to 65%.

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This will go a long way in reducing dependence on external sources and will build on the government's grand challenge on humanities, as described in South Africa's national research and development strategy, for reducing poverty and boosting the country's competitiveness. As I said recently in response to Jonathan Jansen's critique of the HSRC on the issue of external funding, the HSRC is a key player in original social science research in South Africa, with its research output rivalling that of the very best among the universities as measured by the number and citation rates of articles published in international scholarly journals. HSRC researchers produced 144 peer-reviewed articles last year, of which 96 were published in internationally accredited journals. In addition, it published 86 books and book chapters. The vehicle for publication of books is the HSRC Press, which is the largest non-commercial academic press in our hemisphere, thus making it possible for us to contribute to local and global knowledge on social sciences.

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While I believe that the largest proportion of funding for social science and humanities research should come from government, I also think that it is crucial for social scientists to compete globally, and they can do so more easily if they compete for funding internationally. This competition generates energy to excel against peers in other

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countries and it encourages collaboration with scientists globally, which might not be possible with only government funding. Comparative studies often arise as a result of sourcing funding internationally. The HSRC has become a global research organisation partly due to undertaking research funded by leading international social science funding agencies.

With respect to the infrastructure to undertake research, the HSRC is well-endowed with several properly equipped buildings, good IT infrastructure, an excellent team of highly motivated scientists and support staff, and a government that regularly uses the results from studies we undertake. In a climate survey, one of the pull factors for scientists wanting to join the HSRC is that our work is high profile and a benefit to society. Each year, the HSRC trains up to 80 masters, doctoral and post-doctoral students to become social scientists.

As Mouton concludes, building an individual and institutional research capacity remains the main priority for the social sciences in the region, and at the HSRC, we do just that.

The *2010 World Social Science Report* is available on www.unesco.org.

Also read the article on page 20.

NEWSROUNDUP

INDICATORS FOR RESEARCH AND DEVELOPMENT

Since 2002, the HSRC's Centre for Science, Technology and Innovation Indicators (CeSTII) has completed six full research and experimental development (R&D) surveys on behalf of the department of science and technology (DST). The high-level survey results for 2007/08 indicated that although South Africa's R&D expenditure increased from R16.5 billion in 2006/07 to R18.6 billion in 2007/08, this did not keep pace with the growth of South Africa's GDP and R&D expenditure. As a percentage of GDP, it fell slightly from 0.95% of GDP in 2006/07 to 0.93% in 2007/08.

In terms of the number of full-time equivalent researchers per 1 000 total employment, South Africa scores a low of only 1.5 researchers per 100 total employment, compared to 1.9 for China, 2.9 for Argentina and 9.5 for South Korea. This is indicative of the general shortage of skilled workers in South Africa.

The R&D surveys have undergone the South African Quality Assessment Framework (SASQAF) with Statistics South Africa and the DST and its joint Quality Management Plan (QMP). Hence, the R&D surveys are now a component of South Africa's official statistics. The results of the surveys are also published internationally by the OECD and UNESCO.

The work informs government's strategic planning processes and provides inputs for policy-makers. Expenditure on R&D as a percentage of GDP and the number of researchers measured through the survey comprise Development Indicator number ten on future competitiveness in the Development Indicators 2009 produced by the presidency.

For more on the R&D surveys, go to www.hsrc.ac.za/CeSTii.phtml.



◀ **DR TEMBA MASILELA** (PhD, University of Iowa) has been appointed to a new position as deputy CEO for research. He will take on an oversight role in the HSRC's research programmes, improving the use and impact of our social science research.

Before joining the HSRC in July 2006, Dr Masilela worked for a number of years as a special adviser to the minister of social development in the government of South Africa. He has also worked in the areas of corporate citizenship and reputation management, in both commercial (Telkom SA Ltd) and academic settings (Centre for Corporate Citizenship, University of South Africa). In addition to a PhD from the University of Iowa, Dr Masilela is an alumnus of the senior executive programme run by Wits and Harvard Business Schools.



◀ **MR PETER PEDLAR** (BCom Hons, Stellenbosch University), who has been appointed deputy CEO for operations and capacity enhancement, also a new position, will be tasked to ensure high performing teams that provide overall support to the whole of the HSRC. His role at the HSRC will be to lead directorates of operations, finance, legal services, supply chain management, human resources, information services and information technology. He will also lead the capacity enhancement directorate, whose units are institutional collaboration, researcher trainees and staff development.

Before joining the HSRC, Mr Pedlar was involved in financial management for various corporations and held leadership positions in the government as a group executive at the department of science and technology for corporate services and governance, including as acting CEO for the State Information Technology Agency (SITA), and chief of Regulatory Affairs and Procurement.



◀ **PROFESSOR MARGARET MABUGU** (PhD in Economics, Gothenburg School of Economics and Law, Sweden), who teaches microeconomics, public sector economics, development economics, and economic modelling and mathematics for economists at the University of Pretoria, will take up the position of executive director of the research programme on Economic Performance and Development from 1 December 2010.

She will be responsible for leading and managing basic and applied research on job creation, enterprise culture, economic production processes, competitiveness, macro and micro economic indicators, and economic forecasting. This work aims to generate evidence for policy advice to the government and other interested parties.



◀ **DR MIRIAM ALTMAN** (PhD in Economics, University of Manchester), who currently holds the position of executive director of the Economic Performance and Development programme, will be stepping into a new role as a distinguished research fellow, coordinating the HSRC's contribution to planning, monitoring and evaluation and continuing her work on employment scenarios.

Dr Altman joined the HSRC as an executive director in 2002 and helped lead its early transformation. She established the HSRC's leadership in the field of employment policy analysis, working on evidence-based employment scenarios aimed at developing the capability to solve the very large unemployment and poverty challenges facing South Africa.

HSRC MAINTAINS RECORD OF GOOD MANAGEMENT

The HSRC enjoys a positive public image and credibility in the professional and public domains. Evidence of the high esteem the HSRC commands as a research institution is its ability to attract an increasing number of research commissions from a wide variety of clients within South Africa and internationally, said Ms Phumelele Nzimande, chair of the HSRC board at the launch of the organisation's 2009/10 annual report.

Contributing to the country's development, the HSRC's research is clearly aligned with development priorities of government and the Millennium Development Goals, Dr Olive Shisana, CEO of the HSRC, said. 'Our mandate requires of us to address developmental challenges in SA, Africa and the world through strategic basic and applied research in human sciences.'

BIGGER-PICTURE PROJECTS

Under the theme, 'the bigger picture', the annual report reflected on social science that focuses on the detail when conducting research, without losing the bigger picture of the effect the research has on the people of South Africa and Africa.

During the reporting year, some 155 projects were running at one time or another. Shisana highlighted some of the significant projects, all reported in previous editions of the *HSRC Review*, that served development priorities. These included studies on human trafficking; student retention and graduate destination; the national HIV/AIDS behavioural risks, sero-status and media impact survey 2008; a study on finding work for school leavers who are unlikely to go into tertiary education; and research and development surveys.

SCIENTIFIC EXCELLENCE

The HSRC has produced 1.52 international peer-reviewed publications per senior researcher, an achievement of which the organisation is especially proud. This shows that the HSRC researchers are increasingly being integrated into the world social science system.

GOOD FINANCIAL MANAGEMENT

Ms Nzimande expressed her appreciation of the 'competent and transparent manner in which the HSRC has managed its resources, with effective and efficient internal controls, and with the attention it has given to risk management through its risk management forum and the risk management committee'.

The HSRC has attained unqualified audits over the last decade, including the 2009/10 financial year, with a positive growth in total turnover over the past four years at an average rate of 12,15%.

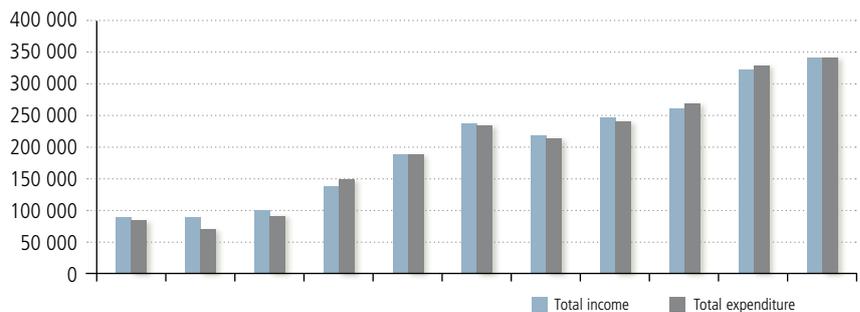
In terms of funding for 2009/10, the HSRC's total turnover was R340 million, the highest ever, made up of the parliamentary grant of R148 million and external

income of R193 million, mainly from international funders and donors.

'A small surplus of R229 000 was reported for 2009/10, indicating the HSRC's ability to spend the funds allocated to achieve its mandate. We can be proud of a pro-active management of cash flow and expenses during difficult economic times,' Shisana said.

'I want to assure you that your investment is giving excellent returns for the public.'

Download the HSRC Annual Report 2009/10 from www.hsrc.ac.za.



INTEGRATING THE PLANNING OF HOUSING AND TRANSPORT

A rigorous and shared understanding of development patterns and trends, and the driving forces that shape them, are crucial for planners and decision-makers to develop robust and sustainable plans that could better inform investment decisions for specific areas.

Redressing spatial development distortions and the fragmentation of human settlements lies at the heart of many of South Africa's major development challenges. These include stimulating vibrant economies and creating jobs; providing adequate shelter, infrastructure and services to improve the health and safety profile of communities; promoting sustainable livelihoods; and creating more sustainable, energy-efficient settlements.

As part of the drive to support the developmental state, in which spheres and sectors cooperate and coordinate to realise its development path, the department of science and technology (DST) identified the need for rigorous spatial and temporal evidence to promote a shared understanding of past, current and possible future development patterns and trends. The DST thus commissioned the Council for Scientific and Industrial Research (CSIR) and the HSRC to develop an information and modelling platform to support integrated planning, development and service delivery for the country.

This multi-year, multi-phase project focuses on developing three evidence-based technology platforms to support planning at various scales and a range of planning.

REGIONAL SPATIAL PROFILER

The profiler contains a collection of maps and tables that users can view and download for free from a web-based portal. This information is intended to strengthen regional special planning by providing accessible and comparable information (current and past) to planners in government.

URBAN SIMULATION PLATFORM

This component aims to develop and implement an urban simulation platform to model a series of possible urban growth patterns over a 30-year period. It will look at a range of scenarios on how the economic, demographic and spatial policy planning could play out. This will assist decisions on long-term planning, policy-making and infrastructure investments in the major metropolitan regions of South Africa.

DELIVERY DEMAND GUIDE CHARTS

This component of the project is to produce posters (delivery demand guide charts) to support the preparation of the housing and transport chapters of integrated development plans. It uses household survey based estimates of local housing and transport demand, and analyses patterns of national population flow within and between regions within the major migration corridors of South Africa.

The evidence generated by the three platforms will be distributed via a web-based portal to ensure that users can easily find and download relevant information to better inform their planning processes.

For more information, go to <http://tip.csir.co.za>.

FOOD BUYING PATTERNS in rural Eastern Cape and Limpopo

How rural households meet their food needs is shifting the food-security policy debate. This became clear from research collected from both female- and male-headed households in rural Eastern Cape and Limpopo. PETER JACOBS, MOGAU APHANE and ROBERT DZIVAKWI¹ report.

Food security covers multiple facets. One part covers the volume of food production – the availability dimension. Another component includes the quantity and quality of foods purchased – the access dimension. Food security also includes the diversity and nutrients of foods consumed – the nutritional adequacy dimension.

Even if a country produces enough food, it does not automatically mean that every household is able to access nutritionally adequate food. In contexts where households increasingly rely on purchased foods, they are more vulnerable to food inflation spikes and crises that cut household incomes.

DIFFERENCES IN HOUSEHOLD EXPENDITURE

Female-headed households in Limpopo and the Eastern Cape have lower food and total household expenditures than male-headed ones – in absolute money values – as reported in Table 1. Female-headed households in the Eastern Cape are ranked worse-off in terms of these indicators and they have the highest food spending share, calculated at 65%.

Following them are female-headed households in Limpopo, who spend 53% of total household spending on food. This confirms a stylised observation that poorer households – who are usually food insecure – spend a much larger share of overall household spending or income on food. This signals, coupled with the fact that they also spend the lowest absolute amount of money on food, an inability to afford sufficient food for the household.



Table 1: Household expenditure and farm incomes (average nominal monetary values) by gender of household head and province

	Limpopo		Eastern Cape	
	Female	Male	Female	Male
Household food expenditure (avg./month)	R 1 018	R 1 041	R 654	R 940
Total household expenditure (food and other items) (avg./month)	R 1 944	R 2 712	R 1 020	R 2 167
Household food expenditure share (avg. food spending/avg. total)	0.53	0.39	0.65	0.44

Table 2: Households buying food items from supermarkets by gender of head and province

	Limpopo		Eastern Cape	
	Female	Male	Female	Male
Households buying >50% from supermarkets (share)	65%	74%	80%	76%
Total households (N)	121	109	20	114
Average monthly expenditure on bulk groceries and fruit and vegetables from supermarkets				
Bulk food/groceries (avg. spend/month)	R521	R571	R523	R850
Fruits and vegetables (avg. spend/month)	R91	R125	R54	R83

¹ This research has benefited from a scientific cooperation grant (NRF UID: 64527) awarded by the National Research Foundation (NRF) and the Research Council of Norway (RCN) in the 2007–2010 funding cycle.

This confirms a stylised observation that poorer households – who are usually food insecure – spend a much larger share of overall household spending or income on food.

DIFFERENCES IN PURCHASING TRENDS

Rural households usually purchase bulk volumes of food items (especially cereal-grain staples and processed foods) once per month – which lowers the costs of multiple trips per month to retail outlets in nearby towns. One basic approach to help characterise the food-buying patterns is to estimate the shares of households that spend 50% or more of the monthly food bill at supermarkets. Results reported in Table 2 show that 65–80% of households buy most of their bulk food supplies from supermarkets – without any substantial gender-based differences.

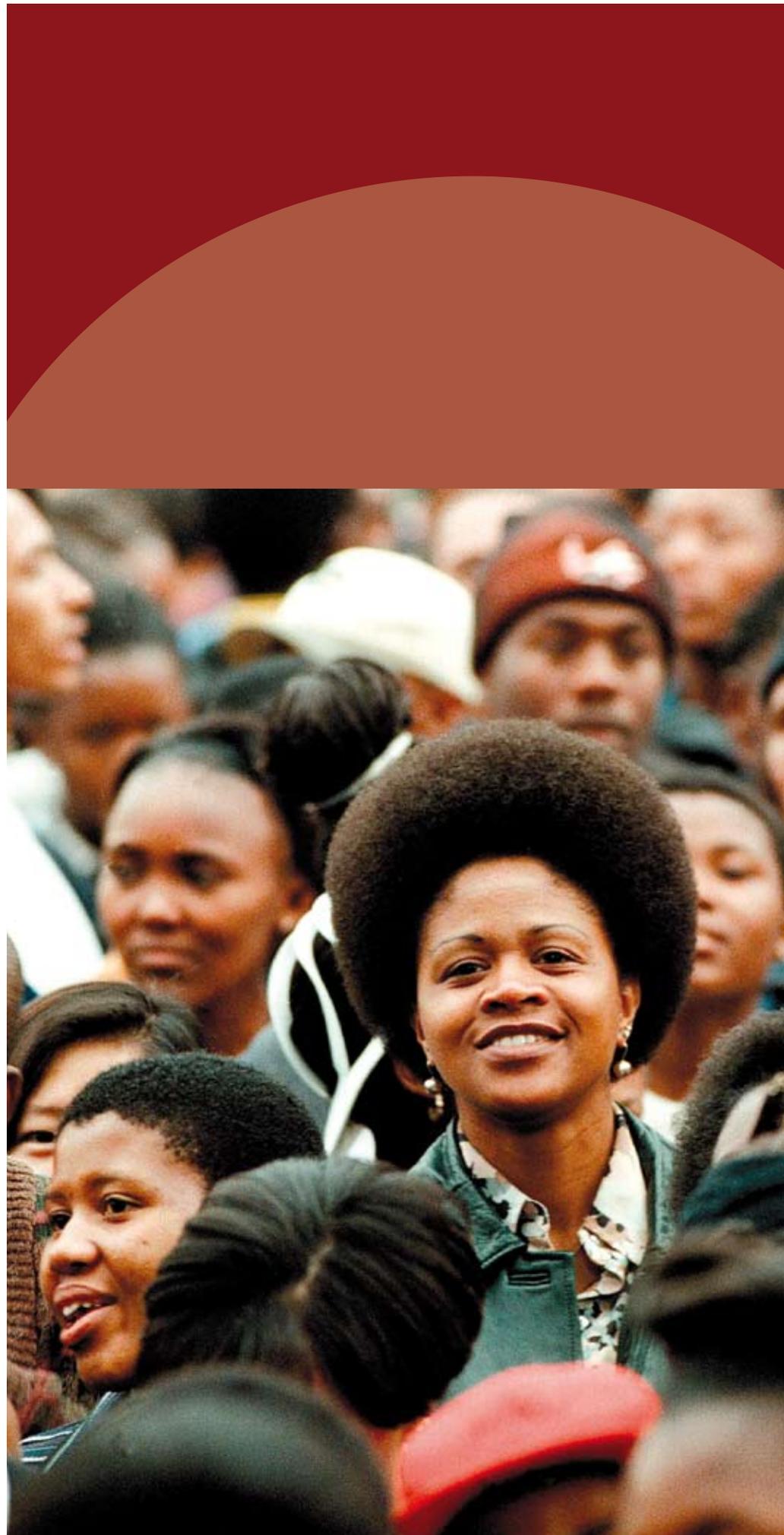
The average value of bulk foods plus fruits and vegetables procured from supermarkets is very revealing. Male-headed households in the Eastern Cape are an exception in terms of high-spending on bulk foods bought from supermarkets, the reasons for which we did not investigate as it fell outside the scope of the research.

Examined alongside the findings in Table 1, it seems foods purchased from supermarkets weigh heavily in total household food spending, which suggests that rural net consumers might be particularly vulnerable to food price inflation.

Supermarkets also sell fruit and vegetables to rural net consumers as shown in Table 2. The average rural family in Limpopo spends more on fruit and vegetables at supermarkets than those in the Eastern Cape, but in both provinces female-headed households spend less: R54 per household in the Eastern Cape compared to R91 for Limpopo. Whilst female-headed households spend 37% less than male-headed families in Limpopo, in the Eastern Cape this gap is slightly above 50%. Accounting for these inter-provincial and gender inequalities in supermarket procurement of fruit and vegetables requires further research. This is critical to explain whether a rural household can afford a nutritionally balanced food basket.

Food systems in developing countries are undergoing wide-ranging transitions with numerous rural farm households purchasing their foods from supermarkets. To understand the food system transition in rural South Africa, we need high-frequency information gathering tools to better track the implication for household food security.

Dr Peter Jacobs, chief research specialist, Economic Performance and Development, HSRC; Mr Mogau Aphane, junior researcher, Education and Skills Development, HSRC; Robert Dzivakwi, master's student in economics, University of the Western Cape.



COHESION, the CONSTITUTION, and LIFE in POST-APARTHEID SOUTH AFRICA



Don't be too sure that the 'dignity of life' and respect for the Constitution has been inscribed in the minds and the hearts of the people, says VANESSA BAROLSKY, following a series of group discussions across three provinces.

In the wake of the killing of the Afrikaner Weerstandsbeweging (AWB) leader Eugene Terreblanche – in the weeks after the ANC Youth League president Julius Malema was censured by the Johannesburg High Court for his use of the slogan 'Kill the Boer' – President Zuma sought to reassure the nation that despite concerns about social cohesion, 'South Africans remain united in their support for the Constitution, the values it enshrines, and the democratic institutions it has established.'

While President Zuma attempted to reassure the country, an ambiguity of South African citizens' engagement with constitutional values was reflected in our discussions with South African residents who participated in 24 focus groups in six townships across the three provinces of KwaZulu-Natal, the Western Cape and Gauteng.

DIGNITY AND REAL LIFE

What these focus groups reveal is an intense contestation over the conditions of life in post-apartheid South Africa, expressed particularly through the regime of rights and its impact on daily life in conditions of lack and deprivation. Post-apartheid South Africa has been characterised by significant amounts of death: in particular in relation to the HIV/AIDS epidemic but also in relation to violent crime. In this context the right to 'dignity of life' as enshrined in the Constitution appears highly problematic.

The government attempts to respond to these problems of life through the use of the concept of social cohesion, which it sees as both a means and an end to social stability, the 'glue' that holds society together.

The government report, *Social Cohesion and Social Justice*, acknowledges that 'Social cohesion and social capital are often called upon or recognised in times of crisis and emergency.' Exactly what is this crisis? What has been lost or is in decline in the South African context remains ambiguous, but is frequently expressed in terms of a decline of moral values as evidenced for example in the 'moral regeneration' initiative, and the often repeated lament about the loss or weakening of values such as 'Ubuntu' that ostensibly held society together in more positive ways in the past.

The author Jacob Dlamini has written in this light of a 'nostalgia' for the past, and the discourse of adults in many of the focus groups point to this 'nostalgia' for a time when values, hierarchies and identities were less fluid, more certain. Whatever the empirical foundation for this sense of lack or decline, what these assertions speak to is an anxiety about the changes brought about by the transition to democracy and the need to attempt to resurrect certainty in a social domain torn apart by past repression and the rapidity of contemporary changes.

Networks of sociability facilitate not social solidarity but crime, as perpetrators of crime living in the neighbourhood 'know your moves'.

FRAGMENTATION OR COHESION?

However, as Suren Pillay argues, 'practices of community' in the post-apartheid context, have 'shown tendencies to increasing fragmentation rather than unification', >



i.e. the ways in which people cohere are not necessarily 'positive' or inclusive. In fact the focus groups attest to increasingly parochial forms of cohesion, where people define themselves in defensive relation to an 'other', whether the other is the urban poor or affluent communities living in gated housing developments, or the 'foreign' other in the context of impoverished communities facing rapid in-migration.

The realm of the 'social' as it emerges in the focus groups reveals a world divided by fractures and 'too much competition' (woman, aged 25+, Atteridgeville). In this environment conditions of life are stark, violence and death are imminent, 'violent crime happen even at your gate, when you come out of your gate, you can see person bleeding out of robbery or a person carelessly lying in agony' (man, aged 25+, Nyanga).

Severe overcrowding in townships and informal settlement breeds suffocating forms of sociability: 'There is a lot of gossip and there is no privacy. Everyone knows about everyone's life. Houses here are built close to each other, so some don't get along because of gossip ... What you do in your own yard is known by everybody' (woman, aged 18–24, Shoshanguve).

Networks of sociability facilitate not social solidarity but crime, as perpetrators of crime living in the neighbourhood 'know your moves', (man, aged 18–24, Atteridgeville; man, aged 25+, Nyanga). In this context of intense competition, 'jealousy' flourishes. Neighbours don't get along because 'they are very jealous of what others have' (man, aged 18–24, Atteridgeville).

In such a world poverty must not be allowed to show, an appearance of 'success' must be maintained, 'status' is critical. For young men in particular, consumer goods, gained either legally or illegally, are overt signs of success, providing access to 'status' and 'style'. As a young man in Atteridgeville explained, 'People here are very competitive they want to be seen [show off]. They like expensive brands' (man, aged 18–24, Atteridgeville).

CHANGING VALUES AND NOSTALGIA FOR THE PAST

In this 'uncaring' environment, adults look to the past with nostalgia. The post-apartheid context represents an 'opening' up, wracked with ambiguity. Previous networks of sociability have dissipated. The past, marked as it was by apartheid, is valorised: 'We must have hope Nyanga can go back to its old days' (woman, aged 25+, Nyanga). Apartheid itself generated unity in resistance: 'Before 1994, we had one common goal that bind us

'Before 1994, we had one common goal that bind us all which was to do away with apartheid government, after 1994 we were faced with challenges such as drugs and lack of infrastructure.'

all which was to do away with apartheid government, after 1994 we were faced with challenges such as drugs and lack of infrastructure' (man, aged 25+, Nyanga).

The regime of rights is seen as having created dangerous new avenues for the contestation of generational hierarchies, particularly in terms of the right to dispense punishment: 'Nowadays there is no discipline. Families in our times used to discipline children, but now children have rights. When we were growing up it was tough because of apartheid but at least there was order, discipline and respect' (woman, aged 25+, Atteridgeville).

On the other hand young people feel that parents do not provide the guidance and protection they need, 'even old people do not show us direction and we don't learn good things from them' (woman, aged 18–24, Langa). However, youth in the post-apartheid context appear significantly demobilised: 'Political organisations and SANCO are mainly made up of old people, involvement of the youth is lacking, and few members of the youth are involved'. Instead it is, as one young man put it, 'party days' (man, aged 18–24, Shoshanguve). Young men spend 'most of our time there at street corners, me and the guys!' (man, aged 18–24, Shoshanguve).

If rights have threatened generational relationships, they have also threatened gender hierarchies. As one focus group participant put it: 'We also have the problem in which women are in this affirmative action which results in a lot of problems because they think that they are bosses of the whole world' (man, aged 25+, Kwamashu).

Women are widely blamed for the loss of control over children: 'Mothers are the ones that spoil kids' (man, aged 25+, Shoshanguve). Women are accused of abusing the rights regime to make false claims of rape. Rape is not 'actual rape' (man, aged 18–24, Atteridgeville; man, aged 25+, Shoshanguve). 'Real rape is the one you read in the papers' (man, aged 25+ Shoshanguve).

HOLDING THE STATE TO BLAME

In this context of change and upheaval, the state is

experienced as a direct part of the problem; it appears in these narratives as utterly corrupt, antagonistic, lazy and drunk: 'Eish, the people working for the government there is something in them that is not good. They do not want to help ... eish there is poison [a problem] there' (woman, aged 18–24, Shoshanguve).

In response residents are increasingly turning to 'local' forms of violent justice. The law and the regime of rights is seen as 'interfering' in these processes of discipline: 'When gangs attack one of our friends we group ourselves and to discipline them, but according to South African Law we are regarded as people who are taking law into own hands' (man, aged 25+, Nyanga). The use of violence, ranging from beating to murder in these processes of discipline is widely acknowledged: 'Now, there are vigilante groups, they meet night times to look around for whoever is robbing night time, if they find one, they take their guns and shoot them' (man, aged 25+, Nyanga).

In response residents are increasingly turning to 'local' forms of violent justice. The law and the regime of rights is seen as 'interfering' in these processes of discipline.

What can we make of the social relations outlined above? How do they relate to government policy? While the picture painted by the focus groups may be a harsh one, there are mediating forms of social connection: 'Where I live we are very neighbourly; we love and help each other. We don't say you have a BMW and I don't, no, we just live nicely with one another' (woman, aged 25+, Shoshanguve). Networks of solidarity help to mitigate some of the effects of poverty: 'If one runs short of transport fare it is easy to ask the neighbour to help you' (man, aged 18–24, KwaMashu).

However, it is mainly older women who talk about these bonds of sociability: 'From our age group and upward when there is someone from Nyanga who passed away no matter where she or he stays we will go and support that family. This is not happening to the youth' (woman, aged 25+, Nyanga). What then of the youth? A group of young men asked about the future of the township Atteridgeville where they live, responded with astonishment: 'Future for Atteridgeville? There is no future here' (men, aged 18–24, Atteridgeville).

The challenge then is to 'make a future' through critical engagement with the conditions of life in which people struggle daily to negotiate the 'opening' up, the deprivation and the freedom of life in post-apartheid South Africa.

*Dr Vanessa Barolsky, chief researcher,
Democracy, Governance and Service
Delivery programme, HSRC.*

FACING THE NATION

South Africa's most important challenges

In this article BEN ROBERTS, JARÈ STRUWIG and STEPHEN RULE examine the relative ranking by the South African public of challenges facing our society, the extent to which these priorities have been changing in recent years, as well as differences among subpopulations.

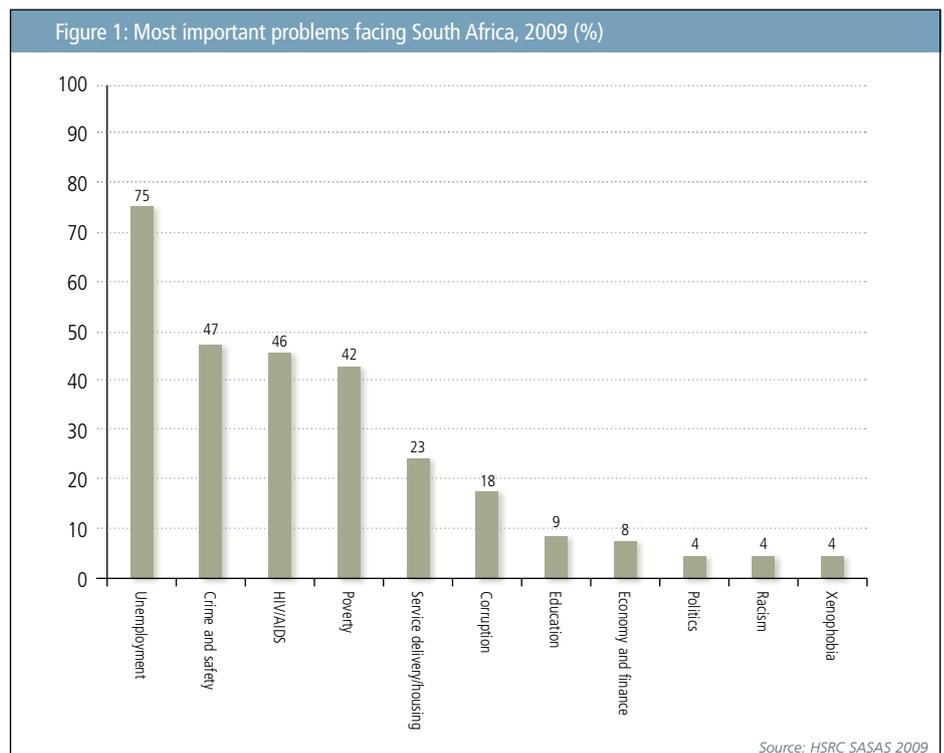
The issues that the public worries about are said to provide rich information on how a society views and understands a given point in its history. By scrutinising changes in the set of problems that the public identifies over time, one can appreciate the passage of South African history through the eyes of its citizens. Also, by disaggregating national-level priorities, we are able to investigate how different socioeconomic and demographic characteristics influence the manner in which South Africans evaluate and rank different challenges.

MEASURING NATIONAL PRIORITIES

This study draws data from the South African Social Attitudes Survey (SASAS), which has been conducted annually by the HSRC since 2003. The survey series consists of nationally representative probability samples of South African adults aged 16 years and over living in private households. Sample sizes for each of the seven survey rounds included in the analysis are as follows: 2003 (4 980), 2004 (5 583), 2005 (5 734), 2006 (5 843), 2007 (3 164), 2008 (3 321) and 2009 (3 305). In each survey round, respondents were asked, 'Please tell me what you think are the three most important challenges facing South Africa today?' The question refers to the country as a whole, so responses deal with national concerns rather than local-level or personal problems.

NATIONAL RESULTS

Analysis of the 2009 round of SASAS reveals that unemployment (75%) remains, by a considerable margin, the most salient problem identified by the South African public (Fig. 1). A second cluster of issues that were mentioned by approximately two-fifths and a half of respondents comprise personal safety, HIV/AIDS and poverty. Service delivery (including housing) and corruption are nominated as priorities by an estimated



fifth of the adult population, with other issues such as education, politics, racism and xenophobia being cited by fewer than 10% of respondents.

Drawing together trend data from IDASA and coupling it with the 2003–2009 SASAS data, we are able to place these results in a broader perspective and discern changes during the first 15 years of democracy (Fig. 2). While public concern over unemployment has remained entrenched over the period, there have nonetheless been some remarkable shifts in the relative position of other problems. Crime rose dramatically as a priority in the mid- to late-1990s, reaching a high of 65% in 1999, but this issue has declined somewhat in

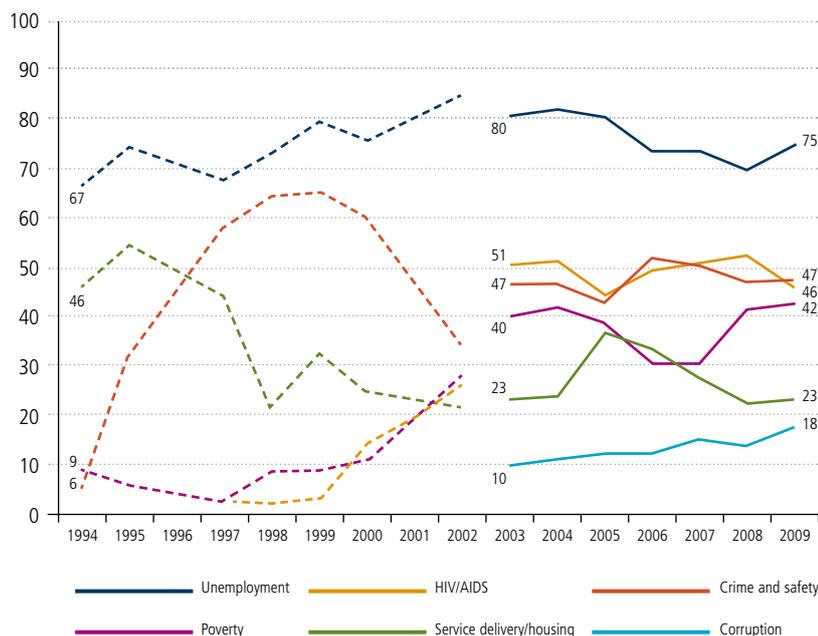
Analysis of the 2009 round of SASAS reveals that unemployment (75%) remains, by a considerable margin, the most salient problem identified by the South African public.

salience over the last decade. Between 2003 and 2009 close to half of South Africans listed it as a problem, with HIV/AIDS being listed as a more frequently cited problem in certain years.

With the mounting impact of the HIV/AIDS pandemic, this issue has progressively risen up the order of priorities after 1999, to the extent that it >



Figure 2: Trends in national priorities, 1994–2009 (%)



Sources: IDASA/Afrobarometer for 1994–2002 data; HSRC SASAS 2003–2009

Crime rose dramatically as a priority in the mid- to late-1990s, reaching a high of 65% in 1999, but this issue has declined somewhat in salience over the last decade.

replaces crime by a margin as the second most commonly mentioned national priority area in 2009. Poverty began escalating as a concern in the late 1990s, and although attention devoted to this issue did swing appreciably over the last decade, with the onset of the global economic crisis it again sits alongside crime and HIV/AIDS as a critical public concern. While service delivery/housing seem to have declined as a priority between 1995 and 2004, there was a short-lived increase in concern around the time the service delivery strikes intensified in 2005. Nonetheless, this issue has subsequently fallen in importance again and by 2009 it was mentioned by about a quarter of respondents. Finally, reference to corruption has steadily begun to climb, and while it was hardly mentioned in 1994, close to a fifth (18%) see it as an important problem in South Africa by 2009.

With the mounting impact of the HIV/AIDS pandemic, this issue has progressively risen up the order of priorities after 1999, to the extent that it replaces crime by a margin as the second most commonly mentioned national priority area in 2009.

ONE NATION, MULTIPLE AGENDAS?

When analysing the 2009 SASAS data on national priorities by demographic characteristics, virtually no sex differences of note were observed in relation to the frequency of mention and ranking of the top national priorities in 2009. For the most part, age group differences are also not especially pronounced. Corruption is marginally more likely to be mentioned by 35–49 year-olds and those older than 50 years relative to younger citizens.

It is not surprising that perceived national priorities differ by race, given the recent political history of South Africa (Table 1). Across all races, unemployment is either the most or the second most frequently mentioned priority issue. HIV/AIDS is second most mentioned among Africans (52%), the group among which HIV infections are most common. Crime and security issues

When examining the importance placed on different problems by living standard level, which is typically employed as a measure of class, one finds differences in both the evaluation and ranking of problems. While unemployment was commonly rated as the most pressing problem for those with low, medium and high living standards, it was mentioned by 86% of those with low living standards compared to 64% of those with high living standards. Similarly, poverty is the second highest rated concern for those with low living standards (62%), while it was a much less pressing issue among those with medium and high living standards (43% and 31% respectively) and ranked as only the fourth highest priority for these subgroups. Instead, crime and safety occupied second place for those with medium and high living standards. There is an inverse relationship between living standard and service delivery and housing issues, with those

There is an inverse relationship between living standard and service delivery and housing issues, with those with low living standards more than twice as likely to mention this as a societal challenge than those with high living standards.

dominance of this issue is slightly higher among residents of rural traditional authority areas and urban informal settlements. Poverty is mentioned by a greater proportion of rural than urban residents. Conversely, crime and security are far more prioritised in urban formal areas (56%) and to a lesser extent informal urban settlements (45%) than by those residing in rural areas. This trend reflects the vulnerability of urban residents to criminal victimisation, attributable to the much greater level of wealth in formal urban areas and the inability to afford target hardening measures in informal settlements. HIV/AIDS tended to be mentioned moderately more frequently in urban formal and informal areas than in rural environments. It was also ranked as the second highest priority after unemployment in informal settlements, which confirms statistics that indicate higher levels of incidence of HIV-positive testing in urban, and especially urban informal, settlements than elsewhere.

THE VALUE OF LONGITUDINAL SURVEYS

The most important problem questions that have been included in SASAS and other national attitudinal survey series enable us to chart how the concerns of South African society have been shifting since the country's transition to democracy. It also allows us to examine the influence of recent sociopolitical developments on the perceived salience of priority issues. Not only do these indicators convey a real sense of the state of the

		1	2	3	4	5
Black	2003	Unemployment (78%)	HIV/AIDS (49%)	Poverty (46%)	Service delivery (27%)	Crime & safety (17%)
	2009	Unemployment (82%)	HIV/AIDS (52%)	Poverty (42%)	Crime & safety (40%)	Service delivery (26%)
Coloured	2003	Unemployment (74%)	Crime & safety (61%)	HIV/AIDS (43%)	Poverty (34%)	Service delivery (21%)
	2009	Unemployment (73%)	Crime & safety (57%)	Poverty (37%)	HIV/AIDS (34%)	Service delivery (24%)
Indian	2003	Crime & safety (79%)	Unemployment (74%)	HIV/AIDS (58%)	Poverty (22%)	Racism (14%)
	2009	Crime & safety (71%)	Unemployment (70%)	HIV/AIDS (38%)	Poverty (35%)	Corruption (22%)
White	2003	Crime & safety (72%)	Unemployment (58%)	HIV/AIDS (37%)	Corruption (26%)	Poverty (24%)
	2009	Crime & safety (64%)	Unemployment (52%)	Corruption (37%)	HIV/AIDS (36%)	Poverty (23%)

Sources: HSRC SASAS 2003, 2009

emerge as the top priority among white and Indian respondents (64% and 71% respectively). Corruption was cited by more than a third (37%) of white respondents in 2009, placing it alongside HIV/AIDS, and approximately a fifth (22%) of Indian respondents. Corruption did not even feature in the top five priorities for black and coloured respondents, with service delivery (including housing) featuring instead.

with low living standards more than twice as likely to mention this as a societal challenge than those with high living standards (37% versus 14%). An opposite pattern is evident with respect to corruption, which appears to be a more salient issue for those with high living standards.

Unemployment emerges as the top national priority regardless of geographic location. However, the

More than fifteen years after the advent of democracy in South Africa, levels of wealth and poverty appear to play a major role in influencing the perceptions of South Africans about where government should be focusing and targeting its efforts.

nation during the time of surveying, but they suggest important lessons for policy-makers. More than 15 years after the advent of democracy in South Africa, levels of wealth and poverty appear to play a major role in influencing the perceptions of South Africans about where government should be focusing and targeting its efforts, and affirm the need for greater urgency in broadening the coverage of employment creation and for scaling-up interventions to address HIV/AIDS, crime and deprivation. The results also imply that the current emphasis on accountability and performance contracts for government officials is timely given the mounting public anxiety over corruption.

Ben Roberts and Jarè Struwig, coordinators, SASAS, Democracy, Governance and Service Delivery research programme, HSRC; Dr Stephen Rule, director, Outsourced Insight.

Local is LEKKER

Indigenous knowledge should be encouraged

Indigenous knowledge systems (IKS) have an important contribution to make to socioeconomic growth and sustainable development and should be promoted and encouraged, say AZIZA MOOS, JARÉ STRUWIG and BEN ROBERTS. But how aware are people of IKS, and should policies be implemented to foster awareness in South Africa?

According to the World Health Organisation, a large majority of the African population make use of traditional medicines for health, social-cultural and economic reasons. In Africa, up to 80% of the population uses traditional medicine for primary healthcare.

In South Africa specifically, studies have shown traditional medicine to play an important role in the management of certain ailments, while at the same time the sale of traditional and indigenous products has beneficial effects on poverty reduction and employment creation. It is also recognised that indigenous knowledge systems are a resource that provides a firm foundation for sustainable and environmentally sound approaches to agriculture, in particular, and natural resource management in general.

In Africa, up to 80% of the population uses traditional medicine for primary healthcare.

PUBLIC PERCEPTION OF IKS

In the 2009 round of the South African Social Attitudes Survey (SASAS), questions on IKS aimed to obtain baseline data on perceptions and attitudes towards various IKS and related issues. These issues include western science versus traditional knowledge, the role of IKS in formal curricula, women's roles in IKS, the government's role in IKS, and traditional agricultural and medicinal practices. A national sample of 3 307 respondents participated.



GENERALLY POSITIVE ATTITUDE

Overall, findings indicate a positive attitude towards IKS, which serves to support the idea that IKS can be a leading contributor to South Africa's progress and development. More than half of South Africans (53%) believe that modern science does more harm than good, two-thirds (66%) felt that IKS offers lessons that can benefit everybody, 71% felt we trust too much in science and not enough in indigenous knowledge and 72% stated we trust too much in science and not enough in cultural beliefs and practices.

Overall, findings indicate a positive attitude towards IKS, which serves to support the idea that IKS can be a leading contributor to South Africa's progress and development.

IKS IN THE EDUCATION CONTEXT

The inclusion of IKS in a formal education setting was explored during the survey and the majority of people agreed that IKS should be included at various educational levels. Just more than half (53%) of respondents agreed that children do learn to respect IKS practices at school. The majority of respondents wanted: the department of education to include IKS in the school curriculum (76%); traditional healers to receive formal qualifications for their skills (65%); indigenous skills to be offered at vocational training institutes (73%); and universities to offer degrees in IKS (69%).

When asked about traditional agriculture and traditional and medicinal plants, seven in ten people agreed (71%) that traditional agriculture plays an important role in providing livelihoods for South Africans, two-thirds (67%) agreed that traditional agriculture

plays an important role in reducing poverty and 74% agreed that traditional medicinal plants can lead to great medical discoveries.

WHO SUPPORTS IKS?

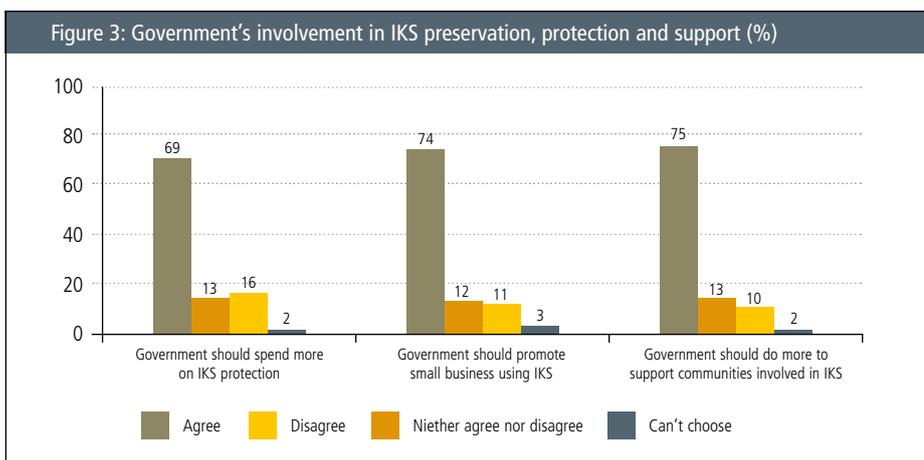
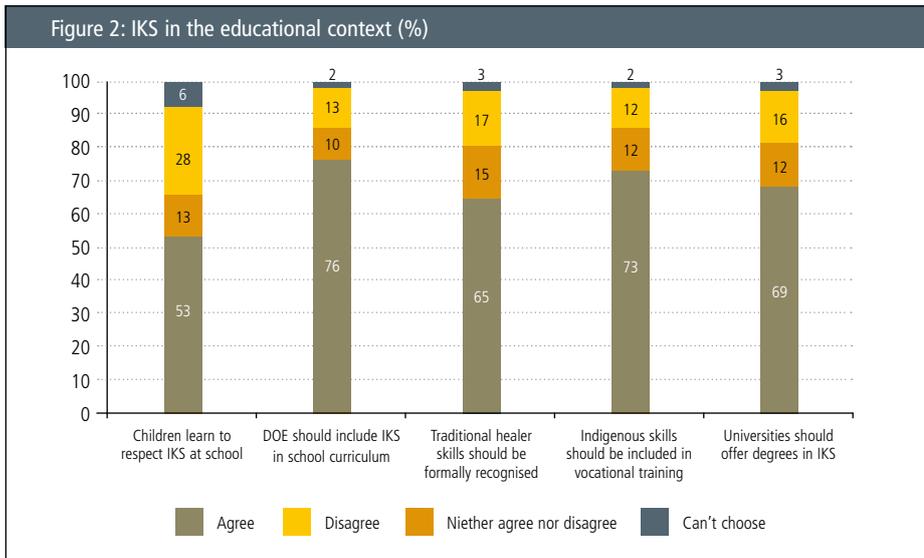
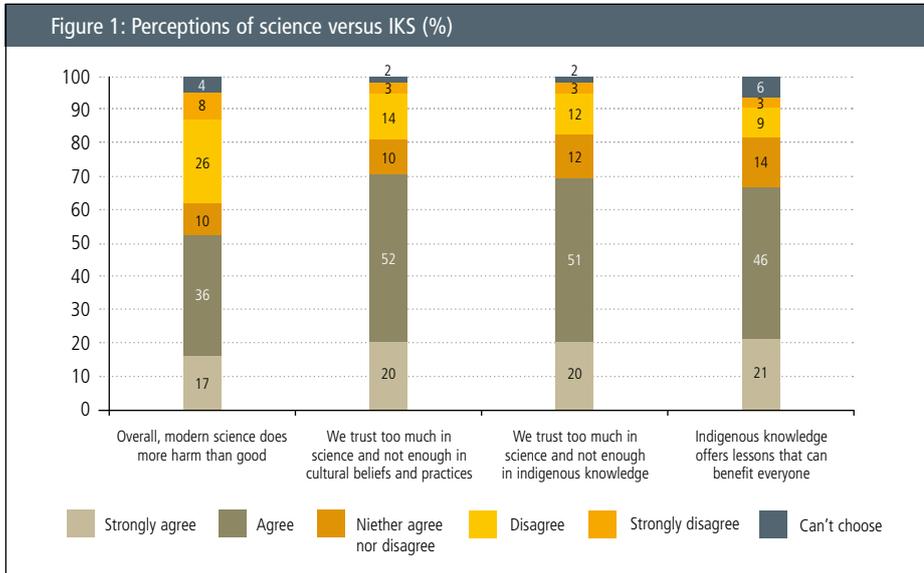
To understand support for IKS, an index was created that consisted of supportive statements. The analysis showed that males and females do not differ in their support for IKS, but the question is polarised by race.

Black South Africans are much more supportive of IKS and whites the least. Coloured respondents, in turn, were more supportive of IKS than Asians. People in tribal and informal urban areas are more inclined to support IKS. Provinces such as the Eastern Cape, Mpumalanga, Limpopo and KwaZulu-Natal are more supportive of IKS, and the Free State and Western Cape are least supportive. Encouragingly, younger people tend to be just as interested in IKS as older age groups.

GOVERNMENT'S INVOLVEMENT IN IKS PRESERVATION, PROTECTION AND SUPPORT

Three-quarters (76%) of South Africans feel that government should do more to document IKS in South Africa. The majority was in favour of the government doing more to support communities involved in IKS, to promote small business using IKS, and to spend more on protecting IKS.

Black South Africans are much more supportive of IKS and whites the least. Coloured respondents, in turn, were more supportive of IKS than Asians.



The majority (60%) felt that big businesses are exploiting the indigenous knowledge of communities and that government should be proactive in this respect.

Results from this survey clearly mandate government to implement policies that promote and protect IKS, and show that there is a place for a culture-derived and culture-driven development framework based on local knowledge of people and communities.

Aziza Moos, master's intern, Democracy, Governance and Service Delivery (DG&SD) programme, HSRC; Jaré Struwig, senior research manager, DG&SD, HSRC; Ben Roberts, coordinator, SASAS, DG&SD, HSRC.





Doctors in the public service TOO FEW FOR TOO MANY

In the global market for knowledge and the knowledgeable, health professionals are highly prized, leading to an international migration carousel – doctors offer their services or are actively recruited to countries that offer better conditions than their own. In South Africa, the migration of medical doctors has several dimensions, writes ANGELIQUE WILDSCHEUT, illustrated by the ongoing inequality in distribution between the rural/urban divide and public/private sectors.

This article draws on research conducted for two recent projects, one on professions and their professional education programmes, and the other, on skills shortages in selected professions in South Africa.

DO WE HAVE ENOUGH DOCTORS?

In 2006 a total of 33 220 medical practitioners were registered with the Health Professions Council of South Africa (HPCSA), although the actual number of practising doctors is lower than the total number registered because the register includes those that might have retired, are out of the country or are just inactive.

The most commonly used measure employed to ascertain whether a country has enough doctors is doctors per 10 000 population. With regard to our immediate neighbouring countries, South Africa is substantially better supplied with doctors (Table 1), but grossly undersupplied when compared to many developed countries, and even in relation to middle-income countries. South Africa ranks only slightly above those countries classified as low-income.

Table 1: Medical practitioners per 10 000 population in South Africa and neighbouring countries, 2004

Countries	Medical doctors per 10 000 population
South Africa	7.7
Botswana	4.0
Kenya	1.4*
Lesotho	0.5**
Malawi	0.2
Mozambique	0.3
Namibia	3.0
Swaziland	1.6
Uganda	0.8
Zambia	1.2
Zimbabwe	1.6

Source: WHO 2006
Notes: *2002, **2003

To illustrate further disparities in distribution within our country, we analysed the distribution and supply of registered doctors between provinces (Table 2). For instance, in the Western Cape and Gauteng, there are 14.7 and 12.6 physicians per 10 000 people respectively, ranking with middle-income countries, in contrast with the stark reality of Limpopo which has only 1.8 doctors per 10 000, placing this province only slightly above the average for sub-Saharan Africa.

Province	Medical practitioners per 10 000 population
Western Cape	14.7
Gauteng	12.6
Free State	5.4
Kwazulu-Natal	5.2
Northern Cape	4.2
Mpumalanga	3.0
Eastern Cape	2.7
North West	2.3
Limpopo	1.8
National average	6.7

Source: Breier, 2009

WHERE ARE DOCTORS NEEDED MOST AND WHERE ARE THEY WORKING?

The distribution of doctors between public and private sector practice exacerbates the inequality further. From numerous sources we know that 85% of the population do not have medical aid and are reliant on the public service. However, only about 41% of our medical doctors are working in the public sector. Conversely, 15% of the population do have medical aid and utilise the private sector, where approximately 59% of our medical doctors are working.

85% of the population do not have medical aid and are reliant on the public service. However, only about 41% of our medical doctors are working in the public sector.

South Africa's high HIV/AIDS prevalence and associated high rate of TB requires additional health human resources, and thus impacts on the need for doctors and nurses as well. Based on the department of health's Operational Plan for Comprehensive HIV/AIDS Care, Management and Treatment (2003), and the planned roll-out of antiretrovirals, it was estimated that a total of 21 824 new staff would have to be recruited between March 2004 and March 2008 – 975 doctors and 6 822 nurses.

Another factor impacting enormously on balancing

the demand and supply of doctors is emigration – the extent of which is difficult to establish. It is widely recognised that the available data are largely incomplete and inaccurate, representing a severe undercount of emigration from South Africa for the following reasons:

- Official figures are based on information provided by individuals leaving or entering the country, but compliance is not always enforced and not all individuals intending to emigrate indicate this.
- South Africans who leave to travel and then stay abroad are not captured.
- Only individuals leaving from the major South African airports are captured.
- The system only recently started capturing disaggregated occupation data, and StatsSA categories have changed over the years, making it difficult to formulate trend analyses.

Using the available figures in an effort to establish a trend over time, we find that in the period 1988–1994 South Africa experienced a gain in doctors, peaking at 296 in 1992. By 2002, the country began to experience a net loss, beginning with 33 doctors in 1996 and increasing to a loss of 156 doctors in 2003 (Table 3). The most reliable calculations are probably those of Clemens and Petterson (2008), who use census data on African-born doctors who are actually working abroad and at home. Added together, these data show that South African-born doctors working in the eight countries specified (Australia, Belgium, Canada, France, Portugal, Spain, the UK and USA) constitute 21% of the total potential African-born workforce. Nevertheless, although South Africa is losing health professionals, it has over the years also benefitted from the services of foreign doctors.

WHY ARE DOCTORS LEAVING?

Salary levels were not the primary motivation for doctors to leave the country. They also left because of deteriorating work conditions, increase in workload due to wider access to healthcare, uneven distribution of resources between private and public sectors and

Two studies show that the motivations for migration are very complicated, and although it is possible to have a list of reasons, it is difficult to ascertain in which circumstances each might carry more weight.

between urban and rural contexts, exposure to AIDS and other endemic infectious diseases like TB, insecurity resulting from delinquency, the lack of suitable equipment, and social and racial factors.

In four sub-Saharan Africa countries (Cameroon, South Africa, Uganda and Zimbabwe), according to the World Health Report, 2006, the main reasons for migration were better remuneration, followed by safer environment, living conditions, lack of facilities, lack of promotion, no future, heavy workload, to save money, work tempo, declining health service, economic decline, poor management, to upgrade qualifications. Two studies (OECD, 2004 and WHO, 2006) show that the motivations for migration are very complicated, and although it is possible to have a list of reasons, it is difficult to ascertain in which circumstances each might carry more weight.

WHAT IS GOVERNMENT DOING TO ADDRESS SHORTAGES?

Measures include allowances (scarce-skill and rural) and specific legislation designed to boost other forms of healthcare and to control the geographical distribution of newly registered doctors.

The introduction of a 15% scarce-skill allowance recognises the shortage of doctors and tries to compensate accordingly. Additionally, the rural allowance of 18% and 22% was introduced in 2004 for doctors and specialists (and other selected health

There has been a substantial decrease in the numbers of foreign doctors, which is not surprising given the department of health's increasingly restrictive policies on the employment of foreign doctors.

Year	Immigration	Emigration	Net gain/loss
1988	68	73	-5
1990	135	30	105
1992	327	31	296
1994	163	93	70
1996	70	103	-33
1998	28	105	-77
2000	22	105	-83
2002	67	128	-61
2003	54	210	-156

Source: Adapted from Hall & Erasmus 2003 (1988–1998); StatsSA (2003)



professionals) who work in rural and other 'inhospitable' areas within the public service.

A critical measure is legislation aimed at correcting the imbalance between the rural/urban divide and the public/private provision:

- The Pharmacy Amendment Act (No. 88 of 1997), which extends ownership of pharmacies to ensure adequate distribution in rural and under-served areas.
- The National Health Act (No. 61 of 2003), which specifies that private practitioners must obtain a certificate of need to practice in a particular area.
- The Traditional Health Practitioners Act (No. 35 of 2004), which most importantly provides for registration, training and practices of traditional health practitioners.

Government-to-government importation of foreign doctors has been one of the measures put in place to alleviate shortages of doctors in various areas in South Africa. There has been a substantial decrease in the numbers of foreign doctors, which is not surprising given the department of health's increasingly restrictive policies on the employment of foreign doctors. Given that most of these doctors work in the public service and many in rural areas, the effect on the rural public health service will be devastating.

Another measure is compulsory community service instituted in 1998, which requires that newly graduated medical practitioners, pharmacists and dentists who have completed their internship should undertake a year's paid community service. This was put in place to alleviate staff shortages in rural and under-served areas, but whether it encourages young doctors to remain after completion is a moot point.

WHAT IS THE ROLE OF MEDICAL EDUCATION?

The National Health Human Resources Plan (2006) recognises that 'significant shortages and extreme

Attempts to double graduation numbers are further complicated by the pressure on medical schools to transform racially and to target not only black students, but those black students from disadvantaged or rural backgrounds.

mobility of medical doctors necessitate that production is increased'. The proposal is to double production from approximately 1 200 per year to 2 400 per year by 2012. This target may be unrealistic.

Between 1999 and 2005, graduation numbers increased from 1 195 to 1 511, an average annual growth rate of 4%. Assuming this growth rate continues unchanged, the target of 2 400 doctors will only be reached in 2018. There is a serious question of infrastructure and human resources to be considered both in terms of maintaining, or improving this growth rate.

Attempts to double graduation numbers are further complicated by the pressure on medical schools to transform racially and to target not only black students, but those black students from disadvantaged or rural backgrounds. The strategy is not only driven by equity concerns, but also based on the premise that students from such backgrounds will be willing to go back to their communities to work. Indications are that this is not necessarily so. Transforming the intake of students is a challenge, given that the school system continues to produce insufficient Africans with the appropriate matriculation passes.

WHAT MORE CAN BE DONE?

There is little doubt that there is a shortage of medical doctors in South Africa, concentrated mainly in the public and rural service. Nowhere in the country do we achieve the doctors-per-population norms of even

Much hope is being pinned on the education system to alleviate the shortage of doctors by producing more graduates who are likely to stay in the country and work where needed most, but there are constraints on what is possible in the short term.

middle-income countries internationally. We might compare favourably with our African neighbours but they are the most under-served countries in the world. Many thousands of our doctors are working abroad in countries classified as high-income, with physician-to-population ratios that are many times more favourable than ours.

Much hope is being pinned on the education system to alleviate the shortage of doctors by producing more graduates who are likely to stay in the country and work where needed most, but there are constraints on what is possible in the short term.

Angelique Wildschut, senior researcher, Education and Skills Development programme, HSRC.

KEY POLICY RECOMMENDATIONS

- Although it is understandable that government has a policy banning the recruitment of doctors from other African countries, other provisions to limit foreigners' contracts and the total number of foreign doctors are misguided. This policy needs to be amended urgently to distinguish between countries that have more than enough doctors for their own needs and those that do not. This category of doctors should also be included in the department of labour's scarce-skills list for immigration purposes.
- Government-to-government agreements, which are already favoured but have so far produced very small numbers of doctors, should continue to be pursued.
- There needs to be greater realisation that uncontained health threats in developing countries also have implications for the developed world (illustrated by the HIV/AIDS pandemic and global influenza outbreaks), and thus it is in the interest of the entire global community that the health workforces of poorer nations should be sustained.

TOWARDS A MULTI-LEVEL DEVELOPMENTAL STATE

The developmental state must harness the power of government at every level to ensure that each part of the country builds on its strengths and develops to its potential, IVAN TUROK argues. However, current institutional capacity is weakest where support is needed most. Development strategies need to be decentralised and strengthened if the full powers of government are to be brought to bear effectively.

The renewed interest in the developmental state idea in South Africa is partly a reaction to the unemployment crisis and concerns about the resilience of the economy to volatile global conditions. Progress has also been slow in tackling the economy's concentrated pattern of ownership, its narrow base of mining and financial services, and the historic marginalisation of the black population from opportunities of all kinds. Recent economic performance has been modest by international standards, with growth skewed towards low value consumer services such as retail, security and health.

The post-2009 government is seeking to develop a more strategic approach to these challenges, based on long-term planning and coordination, evident in the National Planning Commission.

The creation of decent work is the first of five cross-cutting national priorities. Yet there is great uncertainty as to how to steer the growth path in a more dynamic and yet labour-absorbing direction. Centralised systems of coordination have been emphasised, to the neglect of provincial and local systems. Such arrangements could enable the national development agenda to be more responsive to diverse local circumstances – this is a big and varied country. Decentralised solutions could realise the potential of particular territories through detailed local knowledge and close relationships with vital role-players.

The first key attribute of a developmental state is its ability to make long-term strategic decisions.

WHAT IS A DEVELOPMENTAL STATE?

The first key attribute of a developmental state is its ability to make long-term strategic decisions in the national interest and resist pressures to satisfy sectional interests. It needs the technical competence and political autonomy to favour activities that create value over opportunistic, 'rent-seeking' behaviour that lobbies for special privileges, or extracts value from others without contributing to overall productivity. Sustained economic success comes from linking financial rewards to productive activity and long-term performance, not from enriching a narrow section of the population through administrative or legal mechanisms.

Second, for the government to shift the established growth path requires concerted effort. Different parts of the state need to be aligned so that its full powers as an investor, employer, regulator and provider of services are brought to bear consistently. Otherwise, the agenda is undermined by contradictory actions and speculative tendencies in the private sector looking for easy returns. Developmental states invest to release latent economic potential and make better use of neglected resources such as labour and land. They improve or develop the market by building human capabilities and stimulating productive activity in places that may not occur spontaneously. This requires localised action.

Third, developmental states are democratic in the sense that different actors and interests are brought together to define a common purpose. Partnerships with business, labour and community organisations help to share ideas and resources, and build support and mutual commitment to activities that enhance value, encourage hard work and self-improvement, and increase employment. Cohesive institutions can instil confidence in the future and help to draw in wider

Partnerships with business, labour and community organisations help to share ideas and resources, and build support and mutual commitment to activities that enhance value, encourage hard work and self-improvement.

investment, effort and energy, thereby stretching resources further.

WHAT IS THE ROLE OF REGIONS AND LOCALITIES?

There is a tendency to see localities and regions as inert containers for economic activity, and unimportant to national prosperity. Yet places are the locus of land and labour markets, supply chains, and markets for many products and services. These interactions can influence economic outcomes in helpful or harmful ways, affecting productivity, innovation and long-term growth. Places also have distinct economic needs and possibilities, depending on a wide range of factors. Local and provincial policies can develop the knowledge, skills and all-round capabilities of firms and related organisations to sell their products in wider markets.

In practice, there is ambiguity about the specific economic roles and responsibilities of the three spheres of government. The nine provinces have some constitutional autonomy, but are also obliged to work within national legislation and policies. They are also required to assist the capacity-building efforts of local municipalities. The overlap between the three spheres weakens policy coherence, creates gaps and omissions, causes duplication of effort, and generates uncertainty among external stakeholders.

A stronger national economy depends on better functioning local economies and labour markets, based



on a broader foundation of resourceful people and competent enterprises. A centralised approach cannot respond with sufficient flexibility to the dynamic conditions in each locality and region, and exploit their specific ideas and opportunities for development. Empowered provincial and local organisations could complement the capabilities of the national state by providing additional energy, initiative and expertise to build place-specific productive assets and distinctive sectoral strengths, not all replicating one standard approach.

WHAT DOES THE EVIDENCE REVEAL?

An analysis of provincial economic policies undertaken during the last year reveals that useful experience has been gained, although practices are uneven. Some strategies seem to be based on limited analysis of what drives and constrains economic development. There is an emphasis on generalised investment attraction and business support, and inadequate coverage of skills issues, physical infrastructure and the spatial economy.

The scale of funding in most regions is modest considering the challenges faced and the national priority of job creation. Resource allocation also shows no obvious relationship to the distribution of social

There is a case for giving economic development a higher priority across provincial government, with their technical and organisational capabilities strengthened accordingly.

need or economic potential across the country, and the tangible impacts and outcomes are sometimes unclear.

Organisational capacity is severely constrained in many places, and shortages of professional staff are widespread. There are concerns about the accountability of external agencies and duplication of effort. The commitment to involve business and other role-players seems very uneven. Some national departments appear unsupportive of provincial agendas, and many provinces in turn seem insufficiently engaged with local municipalities.

IS THERE ROOM FOR IMPROVEMENT?

All this suggests scope for improvement. There is a case for giving economic development a higher priority across provincial government, with their technical and

organisational capabilities strengthened accordingly. The responsibilities of different government spheres should be clarified, including explicit guidelines for problem analysis, strategy formulation, resource allocation, capacity building, monitoring and evaluation, and learning from experience.

Stronger backing from government and its agencies, and more dialogue within and between spheres would help to align policies and actions. Uneven capacity across the provinces means they could learn much from each other by sharing knowledge, skills and experience through twinning arrangements and peer-review mechanisms. A stronger evidence base would improve understanding of local economic constraints and distinctive opportunities, and help to spread the learning from good practice.

Professor Ivan Turok is deputy executive director, Economic Performance and Development, HSRC. iturok@hsrc.ac.za

This paper summarises some of the arguments of a paper published in *Development Southern Africa*, 27(4), pp.497–516.

RACE, CLASS AND HOUSING

in post-apartheid Cape Town

The current housing policy may be faulted for paying disproportionate attention to recent migrants living in informal settlements whilst falling short of adequately addressing the housing needs of coloureds and Africans who were born and bred in the apartheid-era townships, says ROBERT MONGWE, following research conducted in the Cape Town area.

Owing to significant growth in urban migration since the end of apartheid in the 1990s, Cape Town has experienced an upsurge in a housing shortage, especially for African and coloured people. The estimated housing backlog in Cape Town is between 360 000 and 400 000, and growing at a rate of 16 000–18 000 units per year. This begs the question of whether this situation can be ascribed to housing policies pursued in the City of Cape Town.

The claim is often made that housing policies have tended to benefit one population group (Africans) at the expense of another (coloureds). However, our research shows that the current housing policy could be blamed for not adequately addressing the needs of citizens who lived all their lives in the apartheid-era townships, both coloureds and Africans. This perception of bias in the current housing policy has resulted in intense political discontent among established residents.

The estimated housing backlog in Cape Town is between 360 000 and 400 000, and growing at a rate of 16 000–18 000 units per year.

POLITICAL DISCONTENT WITH PUBLIC HOUSING POLICY

In the post-apartheid era, housing policy has tended to attract criticism rather than praise. For instance, as soon as a public housing project is announced or undertaken,

local communities usually express dissatisfaction with various aspects of the housing allocation process, including the slow pace of housing delivery, the unreliability of the housing waiting lists, and corrupt housing officials who take advantage of the situation in order to put their friends near the top of waiting lists. However, one must acknowledge that the waiting lists are extremely long partly due to the legacy of apartheid housing policies.

On the other hand, the middle classes in the townships and the affluent suburbs are opposed to the construction of public housing adjacent to their own neighbourhoods. The latter are concerned public housing and informal settlements will negatively affect the market value of their homes. Others associate informal settlements and public housing projects with crime, lack of security and other social ills.

The attitude of the middle classes towards public housing programmes has had two main consequences. Firstly, the authorities in Cape Town have ensured that the construction of informal settlements in middle-class areas is prevented, often through court authorised evictions. Secondly, so far the middle classes have lobbied successfully against the construction of low-cost housing near their own suburbs. Consequently, public housing projects for the poor are located far away from places of social and economic opportunities.

RESPONSES FROM TOWNSHIP COMMUNITIES

One of the most stinging criticisms of the current



Others associate informal settlements and public housing projects with crime, lack of security and other social ills.

housing policy from the residents of Langa and other similar apartheid-era townships is that the government is providing housing to migrants living on illegally occupied urban land, yet law abiding citizens, who have waited for many years for housing, are being overlooked. In other words, the winners in the current government housing dispensation are the migrants from the rural areas, whereas the urban born, especially those living in Langa, consider themselves the losers.

A serious complaint among the coloured community in Ravensmead is that the government has turned a blind eye to the fact that many of them are impoverished backyard dwellers who are looking to the state for housing assistance. In addition, coloureds indicate many



of their community members also live in overcrowded conditions in private homes. Consequently, backyard dwellers associations have emerged among the coloured population to campaign for the rights of those who feel disadvantaged by the shortcomings of the current housing policy.

These challenges regarding housing delivery should be seen against the background of the current massive rural to urban migration. Furthermore, it is important to remember that these afore-mentioned challenges in housing policy are the result of distorted apartheid housing policies, which were focused on catering for the housing needs of the white minority.

WHAT THEN DO THESE FINDINGS SUGGEST?

Firstly, these research findings suggest that concerns with the slow pace of housing delivery and related problems are common among coloureds and Africans. Secondly, that the policy of coloured preference,

These challenges regarding housing delivery should be seen against the background of the current massive rural to urban migration.

passed in the 1960s, did not succeed in meeting its objective of adequately catering for the housing needs of the coloured population.

The status quo presents policy-makers with a number of policy challenges. Firstly, there is a need to find politically sensitive criteria for addressing the housing backlogs. Secondly, the conflicts over housing allocations in Cape Town and elsewhere suggest housing policies have to be tailored flexibly to respond to the local environment, and at the same time balancing the interests of competing groups. In that manner housing policy could be turned into an instrument for promoting nation building and thus overcoming divisions based on class, race and ethnicity.

IN CONCLUSION

This short review of housing policy has exposed the challenges that policy-makers face as well as the unforeseen or unintended consequences of certain policy decisions, such as the decision to target mainly informal settlements as the major beneficiaries of housing development initiatives in the post-apartheid period. The tensions between populations that resulted from recent policies suggest housing delivery is not merely about the number of housing units constructed, but also about how housing affects political ideals of entitlement and citizenship in South Africa.

Robert Mongwe, PhD intern, Democracy, Governance and Service Delivery programme, HSRC.

STUMBLING BLOCKS

on the road to

SOCIAL SCIENCE RESEARCH

International academic journal publishing and the trend to increasingly use consultancies to do problem-orientated research to shape practice and policy are to the disadvantage of social science in developing countries. These topics were highlighted at a seminar on the *2010 World Social Science Report*, hosted by the HSRC. INA VAN DER LINDE reports.

THE LIMITATIONS OF CONSULTANCIES IN SEEKING RESEARCH SOLUTIONS

Professor Richter, a distinguished research fellow at the HSRC, addressed the tendency of governments, inter-governmental organisations, aid agencies and donor groups to increasingly make use of problem-orientated research, focused on a specific context to shape their practice and policy.

Although this form of research is attractive because of its immediate relevance to real-world challenges and complex social problems, it has turned out to be a double-edged sword.

Reductions in public funding for research in Africa have crippled the capacity of academic institutions. Instead, independent consultants, consisting of academics, programme officers from aid and development agencies and recent graduates, were drawn by financial incentives to do problem-orientated research. Because they tend to work on their own instead of via established institutions, they come at a much lower price than institutions with overhead costs, training commitments and the like.

'Many of these individuals had relevant practical experience, but limited and fairly narrow research expertise. The consequent growing reliance on consultant-led research in social science in Africa is now evident in professional associations and networks,



Dr Heide Hackmann (right), secretary-general of the International Social Sciences Council (ISSC), presented the findings of the 2010 World Social Science Report at an HSRC seminar. Professor Adam Habib, deputy vice-chancellor, University of Johannesburg (left) challenged the international academic publishing industry during his presentation.

Reductions in public funding for research in Africa have crippled the capacity of academic institutions.

particularly regarding monitoring and evaluation, and in the growing roles played by market research companies in the social policy and development domains,' Richter said.

LACK OF QUALITY CONTROL AND PEER REVIEW

And while social science has certainly gained enormous visibility and popular legitimacy as a result of these

developments, making findings more acceptable and the field more attractive to graduates, it has a clear downside.

The growing role of consultants creates problems regarding quality control and the development of a reliable body of knowledge.

'To become a good researcher takes many years of training. They need doctoral degrees and multiple, peer-reviewed publications, criteria that help build skills and ensure quality. In contrast consultants, particularly in the African context, are not necessarily equipped with the training or inclination to review existing literature thoroughly and build on existing work.

'Peer review is not required, and consultants



Professor Linda Richter, distinguished research fellow, HSRC, addressed the development of consultancies in South Africa.

frequently move between topics, resulting in limiting the research to a small area instead of looking at the broader context.'

Richter said the combination of the practices and pressures shaping consultant-led research makes it particularly vulnerable to the generation and repetition of ill-informed and even incorrect ideas, often with substantial implications for policy and practice.

The idea of AIDS orphans as the primary face of the epidemic's impact on children, shaping the use of so much of this funding, became increasingly difficult to challenge.

CASE STUDY OF 'AIDS ORPHANS'

A case in point was the emergence and concentration of global attention on the 'AIDS orphan crisis'. Through what Richter called 'grey literature', estimates were drawn up through consultancy review and meeting reports of estimates of millions of AIDS orphans.

The result? Discussion of the impact of HIV and AIDS on children narrowed to an almost exclusive focus on orphans, understood as children who had lost their parents and were dependent on a charitable world for assistance.

'In retrospect, it is perplexing that a complex, long-term and global phenomenon, with multiple ramifications for children and families, could be reduced to such simplistic ideas. But these complexities were lost in the sheer size of the projected orphan numbers bandied around and constantly recycled through reports produced by consultants. Concerns about child-headed households flourished, followed by dramatic increased financial support,' Richter said.

The very success of the AIDS orphan image in fundraising and advocacy, together with the near

absence of stringent, discipline-informed research resulted in increasingly rigid perceptions and practice.

The idea of AIDS orphans as the primary face of the epidemic's impact on children, shaping the use of so much of this funding, became increasingly difficult to challenge.

RESHAPING RESEARCH ON CHILDREN AFFECTED BY HIV AND AIDS

It took nearly 20 years for these simplistic ideas to be questioned by a systematic review of academic work, critical appraisal of estimates and careful re-examination of these often-quoted data, according to Richter.

This re-evaluation guided substantial revisions of the ideas that had long shaped policy, programmes and research on children affected by the epidemic.

It became clear that children are affected in multiple ways by their experience of HIV and AIDS and by the impoverishing effects of the epidemic on their families and communities.

'We have also learned that children who lose parents are unlikely to become de-socialised threats to society. Furthermore, the vast majority of so-called AIDS orphans actually have a surviving parent. To be effective, assistance needs to reach not only orphans, but many other affected children. Interventions need to target vulnerable families and address the poverty that lies at the heart of the deprivation associated with HIV and AIDS,' Richter said.

So, while the work of consultants helped bring children and AIDS into the public view, generating widespread interest and support, it also led to the acceptance of underdeveloped ideas and data, and caused resistance to change in response to new evidence.

HUGE PROFITS TO DETRIMENT OF ACADEMIC STUDY

'The world of the international academic journal publication industry reminds one of 'colonial imperialism at its best', said Professor Adam Habib, deputy vice-chancellor of research innovation and advancement, University of Johannesburg.

These publishers, who tend to be European and North American, take the work of scientists, subsidised by public money, and then sell it back at huge profits to the very public institutions that paid for the research. Their products are priced in Euros or US Dollars at the cost of beleaguered national budgets of institutions, especially those of the developing world.

He quoted a profit figure for UK-based Reed Elsevier for 2008 of £1 379bn, and for its competitors, Informa and Springer, who made smaller but 'similarly

The world of the international academic journal publication industry reminds one of colonial imperialism at its best.

obscene profits' of £305.8m and €285m, respectively.

But there are huge social costs to these profits. It's a given that for students to succeed they need to have access to academic journals, books and papers published by other scholars in leading journals.

Poorer universities that service the poorest of South Africa's citizens cannot afford quality academic journals, and this affects even better-off universities in South Africa.

'Every Rand that gets handed to multinationals is a Rand taken away from a scholarship for a poor South African student to succeed,' Habib maintains.

FINDING SOLUTIONS

In search for solutions, the department of science and technology (DST) commissioned the Academy of Science of South Africa (ASSAf). The Academy has proposed a set of measures to encourage and facilitate the publication of academic books in and from South Africa, and the development of a cost-effective, high-quality indigenous journal platform to serve as an outlet for the free online dissemination of research results worldwide. The platform is called SciELO South Africa, and is embedded in the growing multi-country SciELO system originally created in Brazil.

To develop cost-effective access to Western European and North American journals, the DST has requested ASSAf to investigate how other countries have been able to do this, with a view to making recommendations for a suitable local approach.

Instead of proposing that indigenous journals be supported by author fees paid by academic institutions, such a platform should be subsidised directly by the DST, Habib suggests.

At a higher level of national policy, parliament should pass legislation making it mandatory for South

Parliament should pass legislation making it mandatory for South African universities to make scientific articles published by their academics available free online within six months to a year of appearing in international journals.

African universities to make scientific articles published by their academics available free online within six months to a year of appearing in international journals.

'After all,' Habib asserts, 'it is the money of South African taxpayers that enabled the research for, and the writing of, the article in the first place.'

Download the 2010 World Social Science Report from www.unesco.org/new/en/social-and-human-sciences/resources/reports/world-social-science-report/.

Ina van der Linde, editor, HSRC Review.

ENGAGING the industry

INNOVATION IN SOUTH AFRICA'S MOTOR MANUFACTURING SECTOR

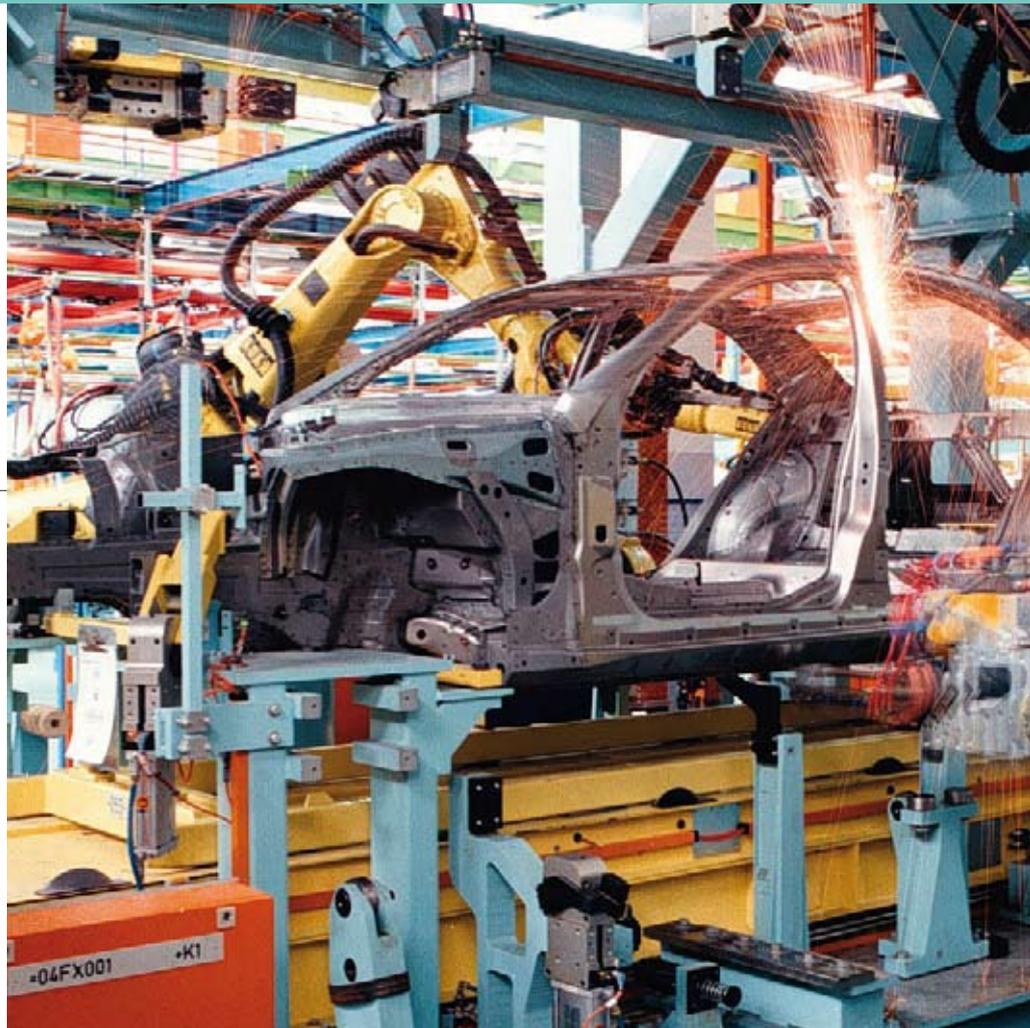
Automotive manufacturing is South Africa's largest manufacturing sector and contributes substantially to our GDP and exports. Since 1995 the sector has been integrated into global value chains, and has had to become more productive, more competitive, and more technologically intensive. MICHAEL GASTROW studies the factors that determine competitiveness in this sector.

At the global level, key determinants of competitiveness in the automotive sector are capabilities for technological upgrading and innovation. The study of these factors is therefore of particular interest to stakeholders, including firms, government and researchers.

RESEARCHING INNOVATION AND TECHNOLOGICAL CHANGE

The HSRC is engaged in two projects that examine innovation and technological change in the automotive manufacturing sector. The first, INGENEUS, is a global research project funded by the European Commission that aims to understand the dynamics of emerging Global Innovation Networks. INGENEUS encompasses 11 countries and 14 institutions from Europe, China, India, Brazil and South Africa; one of the key outcomes of the project has been a deepening of research relationships with our fellow BRIC¹ countries.

INGENEUS looks at three key economic sectors, one of which is the automotive sector. Our research into innovation in the South African automotive sector looks at how this innovation is positioned relative to other parts of global networks. Although the results are not available yet, the mid-term review conference of the project, hosted by the HSRC in Cape Town, successfully brought together researchers from all over the world to discuss work in progress and preliminary findings. These include investigations into the dynamics of Global Innovation Networks in relation to regional factors, human resources, firm strategies, university-industry linkages, and policy.



At the global level, key determinants of competitiveness in the automotive sector are capabilities for technological upgrading and innovation.

The second project is supported by the department of science and technology under the South Africa–Argentina Science and Technology Bilateral Agreement. This project's collaborative research team, consisting of researchers from both South Africa and Argentina, is undertaking comparative reviews of science policy and innovation in the two countries. In addition to gaining valuable insights from these comparisons, the project aims to foster south–south cooperation in the field, in

which southern countries learn from similar southern countries, rather than from their northern counterparts.

COMPARING SOUTH AFRICA AND ARGENTINA

Preliminary findings of this project compare innovation in the South African and Argentine automotive manufacturing sectors. It consists of a paper written in collaboration with Centro Redes, an innovation research institute in Buenos Aires.

This comparative review explores the means by which technological upgrading and innovation in the South African and Argentine automotive manufacturing sectors evolved over time, and highlights how policy interventions shaped this evolution.



While South African policy oriented the sector towards global markets, Argentine policy supported regional integration, primarily with Brazil.

It found that differing policies affecting export orientation in turn affected technological trajectories in each case. While South African policy oriented the sector towards global markets, Argentine policy supported regional integration, primarily with Brazil. This resulted in technological trajectories that aimed towards meeting the specifications of developed countries and developing countries respectively. While economic integration between Argentina and Brazil

created competition for knowledge-intensive activities in which Brazil had an advantage due to its larger scale, South Africa does not face such regional competition.

Although innovation expenditure has been higher in South Africa, both countries perform relatively little R&D in the global context. These findings have suggested areas for further research, with a focus on understanding the position of medium-sized developing countries with respect to knowledge-intensive activities in the global value chains of the automotive sector.

ENGAGEMENT WITH INDUSTRY

In both the INGENEUS and the South Africa–Argentina bilateral projects, engagement with industry is crucial. Fieldwork interviews with executives from automotive manufacturing firms are critical for research. At the same time, research benefits firms by providing additional insights into the nature of innovation in the sector. In recognition of the importance of this interaction, the Wits Business School's Strategic Management of Innovation Research Group arranged a meeting between researchers and industry, followed by a seminar presenting research findings to a broader group of representatives from government, academia and industry.

Researchers from the HSRC and Wits Business School met with representatives from the National Association of Automotive Component and Allied Manufacturers (NAACAM), including Roger Pitot, the organisation's executive director.

Previous research findings in the area of automotive innovation were presented, as well as preliminary findings of current projects. The NAACAM members commented that the continued survival of the South African automotive manufacturing sector depended not only on controlling costs (such as wages and raw materials) but in remaining technologically competitive through continued skills development, knowledge creation, and knowledge transfer from abroad.

The engagement ended with a commitment on the part of NAACAM to assist HSRC researchers where possible, for example in identifying suitable firms for research and assisting in gaining access to these firms. This has already paid off, as highly innovative firms were identified for inclusion as case studies for the INGENEUS project, and access to these firms was facilitated. These case studies have already made a valuable contribution to the project's fieldwork.

Following this meeting, a seminar was held for a wider audience from government, universities, science councils and the private sector, as well as MBA students, including representatives from the University of Pretoria, the department of science and technology, Sasol, ARMSCOR, Angloplatinum, the Technology Innovation Agency, Mintek, Standard Bank, and the Council for Scientific and Industrial Research, among others. The

A key outcome of this seminar was the establishment of important networking links between researchers, firms, government departments, and science councils to lay foundations for further research and cooperation.



presentation of research findings sparked a lively discussion about the future of the industry and the role that technology could play in its development. A key outcome of this seminar was the establishment of important networking links between researchers, firms, government departments, and science councils to lay foundations for further research and cooperation.

Michael Gastrow, chief researcher, Education and Skills Development research programme, HSRC.

¹ In economics, BRIC is a grouping acronym that refers to the countries of Brazil, Russia, India and China, which are deemed to all be at a similar stage of newly advanced economic development.

Controlling HIV/AIDS in Il Ngwesi, Kenya

A success story



In the conservative Maasai community of Il Ngwesi, talking about sex is no longer taboo, writes KATHARINE HAGERMAN. How come that in this Maasai area located about 300 km northeast of Nairobi, traditional leaders, women and youth have started taking control of HIV/AIDS? The answer lies with 'Olosho le'maa ematonyok araae bittia', an innovative community-led Il Ngwesi Afya programme, which translates as, 'Maasai people coming together to fight HIV/AIDS'.

CULTURE AND ENVIRONMENT

Il Ngwesi is remote. The population, who practise traditional Maasai culture, are socially, politically and economically marginalised from mainstream society. Nearly 9 500 people live in a 50 km² area around a collectively owned group ranch. Official leadership is all male, most families are polygamous, and women and youth have less power in decisions on household matters than older men. Strong cultural traditions make talking about sexual health and HIV between ages and genders taboo.

Rising populations and environmental degradation place pressures on traditional pastoral livelihoods. Poverty and illiteracy rates are high; there are no developed roads in and out of the area and little access to water or markets for commercial goods. There are two partially equipped nursing stations but little access to HIV/AIDS prevention or treatment. All of this paints a bleakly familiar picture common to rural communities across the subcontinent. Socioeconomic, cultural, environmental and political inequalities increase the risk and vulnerability of marginalised populations.

But when it comes to HIV/AIDS, Il Ngwesi has a different story to tell.

In 2006, HIV/AIDS knowledge was low, stigma was pervasive, few people knew about HIV testing, fewer

All of this paints a bleakly familiar picture common to rural communities across the subcontinent. Socio-economic, cultural, environmental and political inequalities increase the risk and vulnerability of marginalised populations.

still had been tested and no one was living openly with HIV. A widespread belief existed that HIV/AIDS was a 'town' disease and didn't affect the community. Four years later, nearly 72% of the general population has received HIV counselling at least once; 56% have used HIV testing services within the community (31% more than once); and over 200 volunteers have been trained as HIV/AIDS peer educators. Furthermore, community members were employed as project coordinators and HIV counsellors; an anti-stigma declaration was put up in public spaces; young men talked about HIV/AIDS with their friends over beer; and a mobile primary healthcare and HIV testing unit regularly visited the most remote corners of the region.

How, in light of deeply rooted social norms, has HIV taken precedence and caused a shift in the ability of people to talk about HIV prevention across gender and age groups?

We were in a meeting and an elder said, 'According to Maasai culture, the only time you can talk sexual matters to you daughter is when she is getting married. When you tell her, you will go to this man, and I want this man to be your husband and no other husband. So they said, the second day should be talking about HIV. If my daughter dies of AIDS I will cry. What is the need of me waiting until I cry, rather than saying today we're going to speak about HIV openly, because I want you to be safe.' So, I also got that concept. I can talk to people about HIV/AIDS, we share together, we talk about it freely, we believe if you are my daughter or whatever you are, if I love you, then I should tell you. (Interview participant)

COMMUNITY OWNERSHIP THE KEY TO SUCCESS

Locally, there is a really strong pride that we were doing it ourselves, the idea that it was 'our project' was critical to making it work. (Interview participant)

The programme enabled community members to address the HIV/AIDS risks they face. With a strong body of



2

1: Young warriors, called moraans, participating in traditional dance
 2: Female condom demonstration by community volunteer to a women's group.
 3: Volunteer peer educator theatre troupe (on left, in red) performs educational plays about risk behaviours to community members.



3

committed community members and partnering stakeholders who supported the idea that local people knew the solutions to their problems, an HIV/AIDS intervention that addressed the specific needs of this community has been developed. And it's working.

HOW AND WHY THE PROGRAMME WORKS

A recent participatory study evaluated the impacts of the Il Ngwesi Afya programme on a comprehensive set of indicators related to 'getting HIV/AIDS under control'. Additionally, by asking what contributed to programme success, the study articulated a model of how to develop a 'sense of community ownership'.

This study was undertaken in partnership with stakeholders, including community leaders, programme staff and volunteers, the Institute of Cultural Affairs (ICA) Canada and the University of Toronto. The data were triangulated: a community-wide survey was completed with 100 households, in-depth interviews were held with 15 stakeholders and ten focus groups were held with staff and volunteers.

The programme aimed to control HIV/AIDS in Il Ngwesi and to build a model to inform the development of community-led HIV/AIDS initiatives that were sustainable, comprehensive and enhanced regional and national strategies to make a lasting impact in communities underserved by government and other agencies. Activities were organised into four main areas: mobilisation, education and awareness; access to core services (PMTCT, MVCT, Care and Follow-up); community building and participation; and sustainability, replication and expansion.

By developing this 'sense of community ownership', local people addressed their own needs, resulting in an effective and sustainable intervention.

Indicators to measure success were drawn from the relevant literature and existing programme models. They provided a comprehensive assessment of the social and psychosocial determinants of 'getting HIV/AIDS under control' in Il Ngwesi, both at individual and collective levels.

By involving community members in programme design, HIV educational strategies included cultural traditions and values. A 'sense of community ownership' decreased stigma and encouraged widespread participation in programme activities and a spectrum of volunteers to become peer educators. This increased the reach and uptake of HIV education and core services to the community.

By developing this 'sense of community ownership', local people addressed their own needs, resulting in an effective and sustainable intervention.

The lifestyle of the people and culture must be understood. Because whenever you take new things, which might be conflicting with culture, you'll always be met with resistance. And they'll be saying, 'this is their project, not ours'. So, project initiators must understand people's lives, their needs, and that projects must be planned with the people who it is going to affect. People actually have solutions to their problems, and

when they provide the solutions, they will take it up themselves, not the solutions being given by others. (Interview participant)

IMPLICATIONS FOR APPLICATION

The lessons learned from the Il Ngwesi experience can inform public health initiatives in communities across the subcontinent. Further critical study is needed to assess how the 'Il Ngwesi approach' could be applied to different settings. For example, the 'pre-existing conditions' and the involvement of traditional leaders were integral to the programme's success in Il Ngwesi. These indicators may look different in new contexts, and should be assessed and included in strategies for working with local communities. This approach to community-led development fosters broader social change by strengthening solidarity or 'collective efficacy' (the idea that 'we can') to fight HIV/AIDS and by addressing its broader determinants:

In meetings, people use our example 'yeah we can do it like the HIV/AIDS programme' – people think anything can be possible, if talking of this life-taking disease is possible, why not other things like creating water, which is a positive thing from the beginning? (Interview participant)

Katharine Hagerman, research associate, HIV/AIDS, STIs and TB research programme, HSRC.

LIPSTICK & HIV/AIDS prevention



Constance Mamogobo (right), a MAFLI Fellow from Cohort 1, is managing director of the Makhuduthamaga Umbrella, which assists emerging NGOs working in 150 villages in Limpopo. Through her HIV prevention plan, Mamogobo uses existing family-oriented values in the rural South African context to promote HIV prevention among women, girls and boys.

Globally, experts agree that gender equality is critical to effective HIV prevention. However, despite some pockets of success, efforts to advance gender equality in the context of HIV prevention have been hindered by a range of factors. Then enters a cosmetics house, and a unique project gets on the road. KATHLEEN PITHOUSE-MORGAN and VASU REDDY et al. tell us more.

Ineffectual leadership, lack of community ownership of top-down interventions, and widespread reluctance to openly discuss matters of gender and sexuality are some of the factors hindering HIV prevention efforts. Research shows that there is no quick fix for these problems and that there is no single best intervention that suits all contexts and communities.

THE LIPSTICK CONNECTION

In a new approach to tackle these complex issues, the MAC AIDS Fund, established by MAC Cosmetics in 1994, raised over US\$ 135 million with a new product called 'Viva Glam' lipstick. All profits of the lipstick go into the Fund, which supports people affected by HIV and AIDS.

From this grew the MAC AIDS Fund Leadership Initiative (MAFLI) – a one-year fellowship designed to respond to the complex challenges of promoting gender equality in the context of HIV prevention in South Africa. This unique and pioneering programme is underpinned by the vision to build the capacity of emergent leaders to support and sustain HIV prevention efforts throughout the country, at the same time as advancing gender equality.

The Initiative was launched in April 2007 in collaboration with the HIV Center for Clinical and Behavioural Studies (Columbia University, New York City) and the UCLA Programme in Global Health (University of California, Los Angeles). In January 2009, the HSRC joined the programme as the South African partner.

The fellowship provides training, support and pilot funding for participants to develop and implement context-appropriate HIV prevention projects in their communities and organisations.

Four cohorts of fellows (46 in all) have so far completed the programme. Fellows are based in a variety of urban and rural locations across South Africa and come from various disciplines and fields, including education, psychology, social work and medicine.

HARD WORK IS NOT ALWAYS GLAMOROUS

For the first two months of the programme, the MAFLI fellows were immersed in a daily, intensive, in-residence training. For cohorts 1 and 2, the bulk of this training was completed at the HIV Center in New York City, while the training of cohorts 3 and 4 took place in South Africa, under the direction of the HSRC and UCLA.

The training aims to expand the fellows' knowledge

The training aims to expand the fellows' knowledge of HIV and AIDS research, policy and programming, as well as to provide comprehensive, evidence-based information on HIV transmission and prevention, focusing on the links between gender inequality and the spread of HIV.

of HIV and AIDS research, policy and programming, as well as to provide comprehensive, evidence-based information on HIV transmission and prevention, focusing on the links between gender inequality and the spread of HIV. It also aims to develop leadership skills, promote gender empowerment and advocacy, and provide skill-building in designing, implementing and sustaining HIV prevention programmes. Additionally, the training provides opportunities for fellows to network with local leaders, advocates, media and service providers in the field of HIV prevention, as well as with previous cohorts of MAFLI Fellows.

The training is led by MAFLI programme staff from the HSRC, UCLA and Columbia University. A range of other expert speakers and trainers also participate. A key outcome of the training is that, under the guidance of MAFLI programme staff, each fellow designs a unique HIV prevention plan with concrete goals, objectives and evaluation components. At the conclusion of the two-month training period, the programme provides pilot funding for fellows to carry out their HIV prevention plans. Fellows receive ten months of mentorship, advice, and feedback to support the successful implementation of the prevention plan.

THE FELLOWS

Fellows from the first two cohorts have implemented a range of innovative, context-responsive HIV prevention plans. Fellows from cohorts 3 and 4 are at various stages in the implementation of their prevention plans.

The prevention plans of the MAFLI Fellows are available on the MAFLI website (http://www.hivcenternyc.org/training/leadership_initiative.html).

Based on the encouraging preliminary findings from an independent impact evaluation of the MAFLI programme commissioned by Columbia University, the MAC AIDS Fund provided funding to HIVOS-South Africa, a local NGO specialising in community development. The funding supports the scale-up and expansion of selected plans of MAFLI fellows. Thus far, five fellows from cohorts 1 and 2 have been selected for scale-up support, which is a key indicator of the lasting impact of the MAFLI programme at the community level. An additional round of scale-up funding will be made available in early 2011.

In February 2011, Columbia University, UCLA and the HSRC will bring together all fellows for a Capstone Conference to profile their HIV prevention work, with the possibility of identifying those plans that might be supported by future funding. In addition to providing an opportunity for fellows to network amongst themselves and with MAFLI programme staff, expert speakers and technical advisors to the MAFLI programme will be in attendance to interact with and learn about the fellows' programmes and plans. Poster sessions and thematic discussions will allow for a focused review of the fellows work while technical updates and a panel on leadership will reinforce the skills gained through their MAFLI experience.

Dr Kathleen Pithouse-Morgan, former senior research specialist, HSRC, now with the University of KwaZulu-Natal and Professor Vasu Reddy, chief research specialist, Human and Social Development, HSRC.

CONTRIBUTORS: Professor Relebohile Moletsane, a former research director, HSRC, now with the University of KwaZulu-Natal; Lisa Wiebesiek, MAFLI coordinator, Human and Social Development, HSRC; Professor Raymond A. Smith, director of communications, HIV Center for Clinical and Behavioural Studies, New York State Psychiatric Institute and Columbia University, New York City; Professor Diane di Mauro, programme director, MAC AIDS Fund Leadership Initiative, HIV Center for Clinical and Behavioural Studies, Columbia University; Laurie Bruns, the Africa regional co-director, UCLA Programme in Global Public Health; and Mushambi Mutuma, programme coordinator (Africa), UCLA Programme in Global Health.

In SICKNESS and in HEALTH

It seems to be common sense that in relationships, the health of one partner is linked to the health of the other. But couples struggle to get access to reproductive health and HIV/AIDS services together, ZIPHO PHAKATHI, HEIDI VAN ROOYEN, NUALA MCGRATH and VICKY HOSEGOOD found during a pilot study conducted in Vulindlela, KwaZulu-Natal.

Given that the health of couples are intricately linked, it is reasonable that partners should be concerned and actively involved in ensuring the health of the other as it will also eventually translate to their own wellbeing. Relationships, after all, are associated with enjoying togetherness and companionship, caring and love, and being there for each other.

So why do couples struggle to access services of reproductive health, HIV/AIDS and also relationship support services together?

The Couples Pilot Study was conducted as a sub-study of the larger Project Accept in Vulindlela, KwaZulu-Natal. Project Accept is an ongoing trial testing the efficacy of a community-based voluntary counselling and testing (CBVCT) intervention.

Interestingly, both men and women regarded family planning as a service for women only.

The Couples Pilot Study described the engagement of couples with existing services and investigated the feasibility and acceptability of enhanced couples-focused services for male and female partners. We conducted interviews with each partner separately, followed by an interview with the couple jointly. Couples were asked about their use of family planning, reproductive health and HIV/AIDS services individually and as a couple.

The study shows that couples were seeking family planning and HIV/AIDS services at primary healthcare centres, such as hospitals and clinics. Interestingly, both men and women regarded family planning as a service for women only.

Importantly, the findings show that men rely on their women to access the services of reproductive health and family planning, rather than accompanying their women when they consult these services.

COUPLES AND FAMILY PLANNING

Several reasons were provided for why men did not accompany their partners to access reproductive health and family planning services, including lack of time because of work commitments; the perception that current health facilities are women-centred/-focused; and the fact that couples are not living together in this community, making it difficult to go to services together. Importantly, the findings show that men rely on their women to access the services of reproductive health and family planning, rather than accompanying their women when they consult these services.

In addition, most couples reported that they have never discussed reproductive health and family planning related issues in their relationships, or doing so very cursorily. They reported that these discussions only occurred in times of ill health, but not when thinking through and planning for the relationship.

COUPLES AND HIV

Similarly, people do not go as a couple for HIV testing and other HIV-related services; they prefer to do it individually. Both men and women added that females are the ones who are taking the lead in getting HIV testing and education, because they make more use of clinics and hospitals.

This finding is also supported by the view from the community stakeholders who expressed that 'men have a big problem of not wanting to hear about HIV/AIDS

issues'. Men rather suggested that the focus of HIV prevention services should be women because they were familiar with the healthcare services and could then educate their male partners.

As a result, it was suggested by both men and women that community-based services operating outside formal health institutions were needed in order to reach couples with HIV/AIDS and reproductive health related services. This also confirms the notion that men use women as their means of accessing services for the couple as a whole.

Of great concern, given that it had been established that couples need to access health services together, we identified no programmes currently ongoing in the community which were specifically assisting couples with their reproductive health, family planning and HIV prevention needs. The few couples who sought

This finding is also supported by the view from the community stakeholders who expressed that 'men have a big problem of not wanting to hear about HIV/AIDS issues'.

to access services together were reliant on the clinic-based and hospital-centred services, which are perceived to be women-centred and present various challenges for men to access them.

In summary, this current health-seeking pattern among couples is problematic because, amongst other reasons: women tend to be blamed for HIV disease if their status is positive, and this results in gender violence; sexual reproductive health is dependent on both partners' behaviours; and men need to acknowledge their own risk and take responsibility in health matters.

Supporting couples to support each other

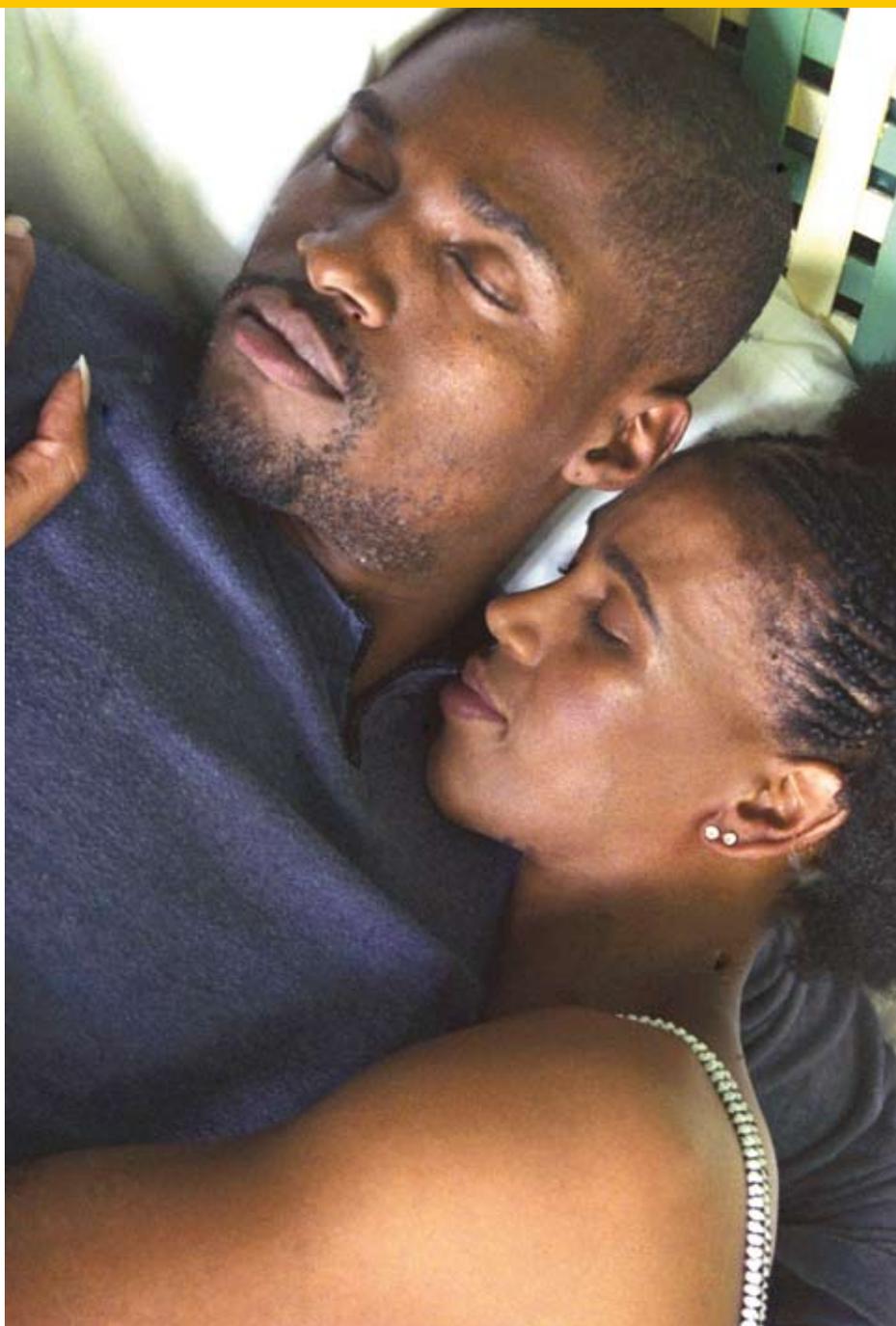
COMMUNITY-BASED, INTEGRATED SERVICES

There is a strong belief that if these services can be centred in the community as a community-based, couples-focused programme, it would facilitate both women and men in couples to access services.

In addition, most couples felt that services for couples would be best delivered and received if they were integrated, including services for reproductive health, family planning, HIV prevention, HIV education, and HIV treatment. Interestingly, there is a view that integrating these services would in turn increase people's access to a range of information and services that affect HIV outcomes. Integrating services can benefit couples by: more people getting tested for HIV; reducing stigma and discrimination; increasing access to and use of services; and by contributing to reduce unintended pregnancy and perinatal transmission, as well as mortality from HIV/AIDS.

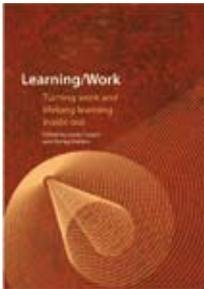
Integrated services would be ideal for attracting men in the community as they would be offered at convenient times; have a welcoming atmosphere (unlike clinics and hospitals which are women-centred); and would contribute in changing men's minds about using women as proxies to access the services of a couple, and thereby support couples to improve their communication generally and their health specifically.

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LEARNING/WORK: TURNING WORK AND LIFELONG LEARNING INSIDE OUT

Linda Cooper & Shirley Walters (eds)

The global economy is increasingly challenging the accepted dichotomies between home-life and work-life, between employment and unemployment, paid work and unpaid work. This calls for serious analysis of how knowledge is generated in workplaces as diverse as the factory, the field, or the street. It raises questions about what forms of learning and training are involved; how they articulate with one another and what implications this has for our societies. In this book, 34 leading

scholars from ten countries challenge established understandings of lifelong learning and work, with several arguing that 'work' and 'lifelong learning' need to be 'turned inside out' through a rigorous critique of underlying social relations and practices so that we understand the power relations that shape learning/work possibilities. In various ways, all of the 25 chapters that make up this impressive volume are infused with imaginings of alternative futures which prioritise social justice and sustainability for the majority in the world.

Learning/Work will appeal to scholars and practitioners who are grappling to understand and implement learning/work critically within the demanding conditions of our times.

Soft cover, 384pp, ISBN 978-07969-2283-0, R240.00



AN OVERVIEW OF RESEARCH, POLICY AND PRACTICE IN TEACHER SUPPLY AND DEMAND, 1994-2008

Linda Chisholm

In 2008, South Africa had 400 953 educators, which included school teachers and principals. Were they adequate in number and quality for the 12 239 363 learners in ordinary public and independent schools? Is the country's teacher education system sufficiently geared up to produce the teachers that are required and are sufficient numbers of students being attracted to teaching? How successful have government and union

attempts to address specific teacher shortages since 1994 been? What has the contribution of research been in these areas? These are the questions this book addresses. It does so by providing an overview and synthesis of the interventions, research and consequences of initiatives related to the demand for and supply of teachers since 1994. What the study shows is that in order to deal with shortages, a bold vision for sustained investment in teacher education is a first priority. This needs to be supported with measures that will not only attract young graduates to the teaching profession, but also retain them and their developed expertise.

Soft cover, 56pp, ISBN 978-07969-2293-9, R65.00



AMBITIONS REVISED: GRADE 12 LEARNER DESTINATIONS ONE YEAR ON

Michael Cosser with Sekinah Sehlola

This monograph is the sequel to *Studying Ambitions: Pathways from grade 12 and the factors that shape them*, which investigated the aspirations for future study and/or work of 20 659 grade 12 learners across South Africa in 2005. *Ambitions Revised: Grade 12 learner destinations one year on* tracks the same cohort of learners into their destinations one year later. Of particular interest

to the research team was the sub-set of those who enrolled in teacher education programmes. The extremely low levels of interest in teaching first observed in a similar 2002 HSRC study

are confirmed here – a finding which has implications for sustainable teacher supply and for the health of an education system upon which the future of the country depends.

The study is the first in South Africa to reveal the post-matric destinations – including the labour market outcomes – of a nationally representative cohort of learners. As such it will be of interest to policy-makers and planners in various fields across the public and private sectors.

Soft cover, 152pp, ISBN 978-07969-2289-2, R150.00



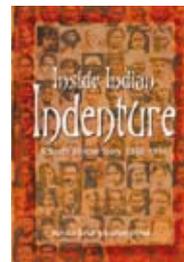
STUDENT RETENTION AND GRADUATE DESTINATION: HIGHER EDUCATION AND LABOUR MARKET ACCESS AND SUCCESS

Moeketsi Letseka, Michael Cosser, Mignonne Breier & Mariette Visser (eds)

Student attrition has been a perennial theme in South African higher education throughout the past decade. In its National Plan for Higher Education (2001), the department of education attributed high dropout rates primarily to financial and/or academic exclusions. Four years later, it reported that 30% of students dropped out in their first year of study and a further

20% during their second and third years. Against this backdrop, the erstwhile HSRC research programme on Human Resources Development initiated a research project to investigate more thoroughly why students dropped out, what led them to persist in higher education to graduation, and what made for a successful transition to the labour market. The chapters in this volume variously address these issues in relation to one or more of seven institutional case studies conducted in 2005. Although the data analysed pertain to the 2002 cohort of graduating/non-completing students and to institutional data for 2004/5, their currency is confirmed by the recent interest expressed by the new ministry of higher education and training in exploring ways for 'continuously improving the access and success, particularly of black students, at all levels of the system' (Budget Speech, Minister of Higher Education and Training, June 2009).

Soft cover, 144pp, ISBN 978-07969-2309-7, R140.00



INSIDE INDIAN INDENTURE: A SOUTH AFRICAN STORY, 1860-1914

Ashwin Desai & Goolam Vahed

Inside Indian Indenture is a timely and monumental work which makes a significant contribution to our understanding of South African Indian history. It tells a story about the many beginnings and multiple journeys that made up the indentured experience. The authors seek to trespass directly into the lives of the indentured themselves. They explore the terrain of the everyday by focusing on religious and cultural expressions, leisure activities,

power relations on the plantations, the weapons of resistance and forms of collaboration that were developed in conflicts with the colonial overlords. Fascinating accounts brimming with desire, skulduggery and tender mercies, as much as with oppression and exploitation, show that the indentured were as much agents as they were victims and silent witnesses.

Inside Indian Indenture is a special commemorative edition published by the HSRC Press which marks the 150th anniversary of the arrival of the first ship of indentured Indian labourers in South Africa in November 1860.

Soft cover, 512pp, ISBN 978-07969-2144-1, R295.00

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