

Debacle over child malnutrition rates belittles suffering

Recently, our country's leaders and medical representatives have publicly debated the effect of the lockdown on the malnutrition rates of our most vulnerable populations. Before Covid-19, a significant number of South Africans did not have access to sufficient food and were going hungry on a daily basis. Today, the Human Sciences Research Council¹ reports an upward trajectory in hunger experienced by these populations, particularly children.



Child malnutrition is well documented in South Africa and, unfortunately, is progressively getting worse. Reflecting this deteriorating situation, stunting rates – an indicator for chronic undernutrition and lack of food – have increased from 21% in 2008 to 27% in 2016² according to the Demographic and Health Survey (DHS), a report compiled by the National Department of Health (NDoH), Statistics South Africa (Stats SA), South African Medical Research Council (SAMRC), and ICF.

“The intensity and visibility of hunger have been catapulted into the spotlight during Covid-19. Long winding queues for food parcels will be a feature of the pandemic that will stay with us for years to come. What is not in the eye of the public, however, are the malnutrition rates that underlie child deaths in South Africa,” says Chantell Witten from the South African Civil Society for Women’s, Adolescents’ and Children’s Health (SACSoWACH).

Food parcels don’t cater for children

“While this is heartening to witness, many of the household food packs have, unfortunately, not been tailored for the nutritional needs of children,” says Witten. Severe acute malnutrition remains a significant underlying cause of child mortality. It is still associated with one-third of all child in-hospital deaths according to the 2018 interim report from the Committee for the Morbidity and Mortality of Children (COMMiC). More worrisome, and possibly a factor under-estimating this figure, is that just under 50% of under-five-year-old deaths occurred outside the health sector.

“Covid-19 is a threat to health and a major global disrupter; however, hunger has shown itself to be a more tangible threat. We need to ensure sufficient and sustainable food supplies are made available to vulnerable communities. At this time, demand still exceeds supply despite the multiple systems put in place to address our country’s hunger problems. If South Africa is to survive Covid-19 and its ensuing hunger pandemic, government, civil society, and the private sector will need to work together,” concludes, Precious Robinson, Chairperson of SACSoWACH.

Coordinated approach

SACSoWACH calls on government for a coordinated approach at the national, provincial and local level (ward level) that is communicated to all sectors and stakeholders, especially ground-level service providers. SACSoWACH understands that there is a Food & Nutrition Security Coordination Committee/ Technical Working Group under the leadership of the Presidency and calls on this coordinating structure to:

Secure a funding mechanism for the procurement of food supplies (from the National School Nutrition Programme, Department of Social Development social relief programmes, retailers, and the Solidarity Fund).

Provide a standardised household food package with adequate nutrition (containing 80% of the Recommended Daily Allowance) for children and adults.

Include mid-upper arm (MUAC) screening of all children under five years old in the Covid-19 household screening operations.

Target the most in need to ensure they are serviced first – efficiently drawing on local ward councillors, ward committees and municipalities to guarantee food reaches those most in need.

Directly monitor and verify food collection with beneficiaries via a USSD platform that can be mapped with GPS location.

Package, sanitise and distribute food parcels via retailers or existing service providers currently providing food supplies to schools across the country. Schools could also serve as points for food collection.

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