WHY IS FERTILITY DECLINING IN SOUTH AFRICA CASE STUDY OF MTOMBO, EASTERN CAPE

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ABSTRACT

The main goal of the paper is to put forward an explanation for the observed decline in the total fertility rate in South Africa using a case study of a village in the Eastern Cape. The paper argues that the existing theoretical frameworks which attribute high fertility among Blacks in Africa to low socio-economic development or to the existence of subsistence farming requiring labour intensive technologies, fail to explain the relatively recent fertility decline among Blacks of South Africa living in rural areas. The paper finds these explanations inappropriate because they do not correspond well with existing socio-economic and technological environments in the prevalent "migrant labour system" leading to the dearth of marriageable young men and low marriage rates, high rates of marriage dissolutions and incidence of extra-marital births. The paper has used a small questionnaire in a village to gather information from 225 women. In addition, and more importantly, the paper seeks explanations for observed trends in Blacks fertility through interviews with focus groups.

RÉSUMÉ

Le principal objectif de cet article est de donner une explication à la baisse relevée au niveau du taux global de fécondité en Afrique du Sud en utilisant une étude de cas portant sur un village situé dans l'Est du Cap. L'article soutient que les cadres théoriques existants qui attribuent le taux élevé de fécondité chez les Noirs d'Afrique à la faiblesse du
niveau de développement socio-économique ou à l'existence d'une agriculture de subsistance qui nécessite des technologies grandes utilisatrices de main-d'oeuvre, n'arrivent pas à expliquer la baisse relativement récente de la fécondité chez les Noirs d'Afrique du Sud vivant dans les zones rurales. L'article trouve que ces explications sont inappropriées parce qu'elles ne correspondent pas bien à l'environnement socio-économique et technologique dans le "système de main-d'oeuvre immigrante" dominant, débouchant sur la rareté des jeunes hommes en âge de se marier et sur de faibles taux de mariage, des taux élevés de divorce et la prévalence des naissances en dehors des liens du mariage. L'article a été réalisé sur la base d'un petit questionnaire dans un village pour collectionner des données auprès de 225 femmes. En outre, et c'est là un fait important, l'article cherche à fournir des explications aux tendances relevées au niveau de la fécondité chez les Noirs à travers des interviews avec des groupes pilotes.

INTRODUCTION

There is little advancement in the knowledge of the sociological determinants of fertility in South Africa despite the fact that, for the past three decades, it has been the only country in the whole of Africa with evidence of a declining national fertility level. Existing data indicate wide socio-economic, regional and above all, racial differences in fertility levels which have not been subject to rigorous sociological investigation. Indeed, although the fertility level of South African Blacks is low compared to that prevalent in Sub-Saharan Africa, it remained higher than that of other races in South Africa, i.e. Coloureds, Indians and Whites. The history of fertility rates of different races in South Africa appears, in fact, even more intriguing.

By the late 1930's the total fertility rate of Blacks was estimated to be 6.5. This was almost equal to that of the Coloureds (6.3), but lower than that of the Indians (7.3). However, it was more than double that of Whites (3.0). The fertility levels of Blacks went up slightly in the early fifties, until it levelled off at 6.8. But later it started to go down to 4.6 in the late 1980's. Indian fertility had since dropped much further than that of Blacks, to 2.5, while the Coloured fertility was at 2.9 and the Whites was at 1.9. (cf Grobbelaar 1984; Sadie 1973; Mostert et al. 1991). The fertility level of Whites is now below replacement level. Sadie (1970) has claimed that lower fertility rates of Blacks in the 1930's can be explained by the presence of traditional birth control among Blacks. But the drop in fertility levels of Blacks has lagged behind that of other races, to be 63% higher than that of Coloureds, which has the second highest. Nevertheless, the fertility levels of Blacks have dropped by approximately 28%, which is a higher drop than reported anywhere in Sub-Saharan Africa. Both the drop in fertility and the lag are largely unexplained. This paper provides some explanations for the reported drop in rural fertility in rural South Africa. It also explains why it has lagged behind that of other races in South Africa.

THEORETICAL FRAMEWORK
Most recent explanations of fertility changes have seen most changes happening within the established families. It has been felt that the change of fertility attitudes and behaviours of individual families will lead to reduction in the overall fertility trends of a society. Recent debates have centred around the factors which cause this change or the lack of it. The most common explanation, based on demographic transition theory, is that fertility patterns mirror the socio-economic development of a society. Slow fertility decline in Africa is therefore indicative of the general slow socio-economic development in the societies. This explanation has been carried over into South Africa by arguing that the fertility level of Blacks has lagged behind that of Indians, for instance, because the Indians after moving to the cities established themselves as successful traders, therefore raising their socio-economic status to be much higher than that of the Blacks (Caldwell 1994). The drawback to this argument is the fact that the fertility level in Sub-Saharan Africa is usually higher than that of societies in the same socio-economic level elsewhere (Faruqee et al. 1986). In South Africa, there is evidence that fertility patterns of Blacks have changed, in spite of fertility levels remaining relatively high. Another argument (Caldwell 1993) is that the culture of Africans is particularly resistant to fertility change. This is ascribed to large dependence on subsistence farming which is labour intensive and therefore necessitates large families. It is further postulated that this might be the same to Blacks in South Africa. This explanation, however, is not too convincing in South Africa for the following reasons:

a) It is well documented that the subsistence farming in rural South Africa constitutes a relatively minor portion of the means of subsistence in rural South Africa (Hey et al. 1989 Lliffe 1987). In fact Bundy (1979) proves conclusively that South African apartheid laws, together with stern competition from white commercial farmers, have led to dearth in subsistence farming.

b) Significant percentage of South African fertility happens outside the established sexual unions.

c) Polygamy is not widely practised in the region.

Following these arguments, one may suspect that none of the established reasons for fertility decline explain the South African fertility trends. This paper, looks for causes beyond the decisions of married couples, and examines migration and neptuality trends as possible explanatory reasons. The South African fertility experience is linked to the labour migration and the resultant family trends. Labour migration system in South Africa is unique in the continent. It was designed and maintained as part of the grand apartheid design. It was maintained through legislations, and the building of limited family houses in urban areas which forced majority of workers to stay in single sex hostels. Moreover preference for jobs was given to labour that has been recruited on contract from rural areas. A web of legislations were enacted in order to keep women and children in rural
areas. But the men could be recruited to urban areas, as long as their labour was still needed. Men usually got a chance to visit their families once a year for about two weeks.

METHODS USED

a) Focus groups

The first source of data involved interviews with focus groups. The focus groups help to gain insights into the nature and determinants of fertility trends in Transkei. The focus groups were chosen in such a way that they consist of three participants each. The groups were pooled from the three respective social groups namely :- adolescents; married women; single women. There were separate sessions with each group, and the full discussions were tape-recorded and later transcribed. The transcripts served as a basis for data analysis.

b) Questionnaires

A short questionnaire was administered in a small settlement called Mtombo near Port St Johns. Port St John's is a small town in the Eastern Cape along the coastal area. Interviews were made with every household where a woman in the age group 15-49 could be found. A total of 225 women were interviewed. The questionnaire asked, among others, questions relating to the demographic and socio-economic characteristics of the household, contraceptive use, marital, fertility and contraceptive history of a woman. The questions were closed ended.

Mtombo is a poor settlement outside Port St John's. Most men from the settlement are migrant labourers. There are few breadwinners who work in the small town. There is a high unemployment rate in the area. This is partly due to the fact that the tourist industry, once booming, has since gone down drastically in recent years. This has made this community to be more dependent on migrant labour remittances, informal trading and indeed clandestine sexual activity as a way of survival. Sixty one percent of the women interviewed were unemployed, 15% were either primary or secondary pupils, and 19% were workers.

RESULTS FROM THE STUDY

The data collected reveal a sex ratio of the area is 65.01. This is not surprising since there is migration of labour of young men to the cities. About 45% of the people in the area are below 16 years. Forty four percent of the households are headed by women. And out of the women interviewed, 49.6% of them have, at one point in time, used contraceptives. The data also indicate that births occur under the following three conditions:
a) The unplanned births to teenagers.

b) Births to adult women outside stable sexual unions.

c) Marital fertility.

THE UNPLANNED BIRTHS TO TEENAGERS

Most children do not get guidance about sexual behaviour. Junior School pupils at Port St John's all voiced that they were too scared to discuss such a subject with their parents. Children get all their information on this subject from their peers. It is a common belief that any boy who does not engage in sexual intercourse will get sick. The impression given by the teenagers is that involvement in sexual activity is universal. In addition, the striking feature is the apparent lack of retribution from parents about this behaviour. As one pupil puts it, "We no longer go to the bushes, we do it at our homes, if our mothers find us, they will scold us, and do nothing else." This apparent *laissez faire* attitude among mothers is no doubt encouraged by the heavy burden on women's shoulders, whose primary task is that of economic survival. Many pupils have heard about contraceptives and AIDS. But because of lack of proper guidance, many of these pupils either do not use any form of contraceptive, or are not using them properly. For instance, there was a rumour in Port St John's that women tying their waists with a horse's tail while having sex will not get pregnant. Such superstitions led to many pregnancies. Fifty one percent of all female pupils interviewed have had babies. As Preston-Whyte (1978) have alluded to, there are no sanctions against those who get children in this way. Parents adopt the grandchildren as their own, and then send their children back to school. Indeed the major concern is an economic spin-off, rather than the morality of the act. One pupil who got pregnant said "My parents were very angry with me, when I got pregnant, they chased me away, but after the father of my baby promised to support me financially, they accepted me back."

Pensions which are obtainable by every one above sixty years of age have played a crucial role in supporting children of unmarried adolescents. The grandmothers have, in many cases, used their pensions as the major source of support of these grandchildren who, otherwise, might have no other means of subsistence. The mothers are in many cases at school, or around the homestead looking for a job.

SURVIVAL STRATEGY OF OLDER WOMEN

The rise in the number of women who are married is quite evident. In addition to women who never marry, there is a large number of women who have lost contact with their migrant husbands. Most of the women who have lost their husbands move back to their parental home (if parents are still alive), while some start an independent homestead. This
explains the large number of women headed families in rural areas. From the survey, 42.4% of the households are headed by women, 37.7% households are made up of extended families, and only 19.9% consist of nuclear families having both the father and the mother. Most of the extended families are three generation type which have been extended by children of daughters. Some of the women are lucky, they become professionals like nurses, teachers or government clerks after having the babies. These women are able to support the whole family, together with their children. This is usually not without a price since these daughters are supporting the family financially, they also supersede the instructions of parents, which is the basis of traditional control. Parents cede their family control to their children in return of financial support. The women carry their love affairs publicly within the homestead, thereby influencing the attitudes of younger children. The greater number of women are not, however, so lucky. They are usually unemployed. If their parents are getting pensions, they use those pensions to support their children. In addition, they might be involved in informal trading as a way of augmenting the money they get from their parents. One of the common ways of supporting themselves is through sexual relations with men. As Hilda's story tells, her husband absconded to Johannesburg, leaving her with two children. After that, she decided to go back to her parents' home. Her parents' use their social pensions to support her two children. As a way of augmenting the support she started a sexual relationship with a man working at Port St John's. But she complained that this support is not enough, if ever she can get a better deal, she will take it. It is from such deals that many children are born.

Significantly, the study confirms that women who are not in stable unions have significantly less children. About 26% of single mothers have five or more children as against 45% of married women. In addition, the overall number of children to single women were significantly less (chisq used). Women who are thirty five years or older were classified according to whether they have ever got married or not. Women who were never married tended to have fewer children ever born to them, than those who were ever married (significant at 95% level of confidence).

**MARITAL FERTILITY**

The total fertility rate for married women is 5.1. An approximate 50% of all women have used contraceptives. Most of them reported that they used contraceptives for terminal purposes. This is the stage most women feel that it is safer to use contraceptives since most of them felt that earlier use might lead to sterility. The fertility rate might also be affected by periods of absence of husbands. Many married women reported some long spells of husband absence, together with a short period of stay at home during work vacations. No doubt, the long periods of husband's absence have contributed to independence of some women in the use of contraceptives. To these women, having many children is of no advantage, since they benefit very little from subsistence farming, which has often been cited as the major reason for high fertility in rural areas. For instance, Jane, after giving birth to four children, says that her husband was giving her little support, at
irregular intervals. In addition, she has received reports of her husband's love affairs in Johannesburg. In order to cope with her meagre resources, she decided to insert intrauterine device on herself, since it was not going to be easy for anyone to detect its use. Consequently, whenever her husband came back from Johannesburg, he always complained suspiciously about the fact that she was not conceiving. One day her husband came from Johannesburg without giving a prior notification. Incidentally, the wife had just reinserted the IUD, and should abstain from sex for a number of days. The wife told the husband that she was sick, and asked her doctor to convince her husband that her "sickness" required that she abstained from sexual intercourse. Women who are more educated are likely to be more assertive. They are more likely to look for ways of going round the barriers.

CONCLUSION

Two major forces which influence fertility trends among Black South Africans are the lengthening of time women spent outside stable sexual unions and the changes in sexual behaviour of the women outside formal sexual unions. Emergent family trends which are likely to have a downward effect on fertility are:

a) Decrease in neptuality rates.

b) High rate of marital instability.

c) Decrease in married women's sexual encounters with their husband.

d) Women' independent means of limiting birth rate. This happened in most cases without the consent of their husbands and families.

e) Dearth in subsistence farming removed one of the major incentive for having a large family in the rural communities.

This downward movement of fertility is countered by the following factors:

a) The low woman's status which encourages many women to resort to casual sexual relationships with men as a means of economic and social survival. This increased births.

b) A drop in traditional birth control.

c) Pensions played a crucial role in supporting children born without the support of their fathers.

The high number of women who are never married is astounding. This no doubt can be
ascribed to low sex ratio resulting from high emigration of young men from the rural areas. This has led to acceptance of the fact that most of them will have children, hence the acceptance of "illegitimate" births. Adolescents at schools have also got into the bandwagon of having children. Lack of real sanctions against young women who get babies, and an absence of parental (or alternatively, school) guidance has contributed to this practice.

For women who got married, many of them experience desertion by husbands. These women are likely to go back to their parental home, and continue sexual relationships in order to supplement parental support. Do these women want to give births? Some of them do. They see children as a source of long term security. Some would not like to have children, but use contraceptives with extreme caution, in case they may cause infertility. Getting pregnant is regarded as a lesser evil than becoming infertile.

Although women do get children outside marriage, these women get, on the average, less children than married ones. The greater part of the drop in fertility rates could be explained by the drop in occurrence and duration of neptuality. Within marriage, fertility has also been affected by the absence of husbands for a long spell. If there was no resurgence of non-marital fertility, the fertility level of Blacks in rural South Africa would have not lagged far behind that of other races.

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