



# News-bytes on Children's Rights

Children's Rights Centre 30 September 2008

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## ACTION CALL:

**Support the petition to extend the Child Care Grant to age 18**

**CRC joins with Black Sash & ACESS in a call to support the fight to EXTEND THE CHILD SUPPORT GRANT TO 18 by helping gather signatures for a petition to Finance Minister Trevor Manuel.**

**The petition will run until 17 October 2008.** The Black Sash and ACESS will then present it Mr Manuel during his Mid Term Budget Policy Statement on 21 October 2008.

**They already have over 5000 signatures!**

## HOW CAN YOU HELP?

1. Click on this link and sign the petition online - <http://wiegai.notlong.com>

1. Click on <http://apaez.notlong.com> to download the petition and collect signatures, returning them by mail to the National Office, c/o Ratula Beukman, Black Sash, PO Box 1282, Cape Town, 8000

Add this link to your website or Face book page to promote the campaign:

<http://apaez.notlong.com>

## DID YOU KNOW?

- Many thousands of children drop out of school at 15.
- More than two and a half million teenagers in South Africa are living in terrible poverty. They go to bed hungry and go to school without breakfast.

**The South African government provides money to young children to buy food and get to school, but there is no income support for older teenagers as the grants are stopped at 15!**

## Why have a Child Support Grant?

"Everyone has the right to have access to social security, including, if they are unable to support themselves and their dependants, appropriate social assistance. The state must take reasonable legislative and other measures, within its available resources, to achieve the progressive realisation of each of these rights" - Section 27 of the SA Constitution

**The Black Sash believes that the South African government has failed to recognize the constitutional rights of all our children by limiting the extension of the child support grant to 15 years.**

## HOW MUCH IS THE CHILD SUPPORT GRANT?

From April 2008, the Child Support Grant is R210. It is due to be increased to R220 in October 2008—an increase of less than 10%!

## Comments from some who signed the petition:

*I support you wholeheartedly. Viva Black Sash, viva! -- Archbishop Emeritus Desmond Tutu*

*Our government needs to DO more to ensure that South Africans' constitutional rights mean more than just the words on paper. -- Emma Darch*

*Children should not go to bed hungry and sent to school on an empty stomach!... Give our future adults a fair chance at life. --Robyn Hadley*

*Feed the children, Minister Manuel -- Lesego*

To find out more visit

The Black Sash website. [www.blacksash.org.za](http://www.blacksash.org.za)

OR

Contact ACESS (call Patricia Martin— 021 4613096) or visit the ACESS website:

[www.aces.org.za](http://www.aces.org.za)



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*Thank you for helping us make human rights real for all our children!*

*Access Team*

## GRANDMOTHERS - 7 DEADLY MYTHS

SUMMARY of an article by MAY CHAZAN in the journal *Ageing & Society* 28, 2008, 935–958.

### *Seven 'deadly' assumptions: unravelling the implications of HIV/AIDS among grandmothers in South Africa and beyond*

Certain prevailing myths or assumptions about the problems grandmothers face in southern Africa may prevent effective identification and addressing of these problems.

**Assumption 1: HIV and AIDS are fundamentally changing grandmothers' roles** in South Africa and beyond and if it were not for the epidemic, grandmothers in high-prevalence African countries would be 'enjoying a restful retirement'.

**Counter view:** The role of the grandmother is the same as it has been for many decades, because of migrant labour. The difference is now that the financial position of grandmothers is worsening because migrant parents who fall ill and die can no longer help to provide for their children.

**Assumption 2: AIDS is an exceptional force in southern Africa** and it is the primary stress in grandmothers' lives.

**Counter view:** The pressure on grandmothers is due to the cumulative effects of, among other things, unemployment, poverty, displacement, stigma and chronic illnesses. The HIV and AIDS pandemic feeds into these problems and makes them worse, but is not the primary stress in their lives.

In South Africa, grandmothers have mitigated many of the epidemic's negative consequences by caring for growing networks of dependants on shrinking incomes. They are also supporting other families in their communities.

**Cushioning the epidemic's impacts has come at a high personal cost; however, for many women are struggling to survive as they do grow older and more and more frail. They are often physically unwell, emotionally distraught, and in fi-**

**Assumption 3: most households consist of "skipped-generation" households** with only grandparents and grandchildren, or only children, and no middle-generation members, as a result of HIV and AIDS.

**Counter view:** 'Skipped generation' and 'child-headed' households are not yet common in South Africa. The most common household configurations (defined narrowly) include two (non-elderly) adults or multi-generational members. Over 83 per cent of households in 2005 were not 'skipped', 'child headed', 'young-adult headed' or 'single-adult headed'.

**Assumption 4: Most grandmothers are old and frail.**

**Counter view:** There are many women aged from the late thirties to the fifties who are already grandmothers in South Africa. The category of 'grandmother' is defined not by old age, but by the increase in financial and care-taking responsibilities that comes with having grandchildren. Younger grandmothers are often struggling with these responsibilities, even though they are not 'elderly'.

**Assumption 5: In South Africa, grandmother-headed households survive because of old-age pensions.**

**Counter view:** Most women become grandmothers long before they are eligible for pensions. However, there is substantial evidence that pensions can ease the stresses on older people and their extended families. Pensions once aimed at reducing poverty among older people have been transformed into a lifeline for younger household members and broader access to social security could mitigate some of the epidemic's impacts.

**Pensions are crucial and greatly increase the security and wellbeing of many families, but most grandmothers are too young to be eligible. If state support is going to assist the majority of grandmothers struggling to support large families, it should be based on care responsibilities rather than age.**

**Assumption 6: Grandmother-carers tend to be isolated and live in remote rural areas.**

**Counter view:** Many grandmothers have extensive social networks, and some are urbanites who use the latest communications technologies. The myth of the rural granny surrounded by squadrons of young children, while their dying mother suffers, isolated in a mud hut, hides the needs of large and growing number of grandmothers who live and work in urban areas.

**Assumption 7: The worst of the epidemic's impacts in South Africa are evident at present,** when young adults are dying and leaving behind orphans.

**Counter view:** It appears evident that an even worse crisis will take place in the future when today's grandmothers die.

**Is the 'next generation' of grandmothers disappearing while grandmothers are shouldering today's burdens?**

More and more women have been dying in their twenties, thirties and forties. The trend is likely to continue, as it is predicted that it will be at least another five years before prevalence peaks, and another 10 before mortality rates and orphan numbers stop rising.

While we do not know the long-term answers, it is clear that we should provide financial assistance, counselling and health-care to keep ageing caregivers healthy as long as possible [as well as the parents of children and the children themselves – Ed].

## We join TAC in welcoming the Appointment of New Health Minister

" The Treatment Action Campaign (TAC) welcomes the appointments of Ms Barbara Hogan as the Minister of Health and Dr Molefi Sefularo as the Deputy Minister of Health.

We congratulate President Motlanthe for making these excellent appointments.

We are confident that Hogan has the ability to improve the South African health system. She has been one of the few Members of Parliament to speak out against AIDS denialism and to offer support to the TAC, even during the worst period of AIDS denialism by former President Thabo Mbeki and former Health Minister Manto Tshabalala-Msimang. On 14 February 2003, she received the TAC memorandum to President Mbeki for a treatment plan. She was removed as Finance Portfolio Chairperson by Mbeki in part for her stand on HIV/AIDS. She has a reputation for being hard-working, competent and principled.

Hogan has a long record of struggle for human rights. Twenty-seven years ago, she was detained and tortured by the apartheid security Police. She was tried for treason as an ANC member and spent eight years in prison.

Dr Sefularo, during his tenure as MEC for Health of North West Province, supported ARV rollout and the implementation of the Prevention of Mother to Child Transmission (PMTCT) in the province.

**There are tremendous challenges ahead for Hogan and Sefularo. The inequalities of the apartheid system, the HIV epidemic and the utterly disastrous reign of Tshabalala-Msimang have left the health system in a parlous state. Hogan's biggest challenges will be to meet the treatment and prevention targets of the HIV/AIDS National Strategic Plan, integrate TB and HIV treatment, develop a feasible human resources plan for health workers and undo the considerable legacy of AIDS denialism left by her predecessor. The TAC will do all that it can to assist her and the Department of Health to meet these challenges.**

**Over two million South Africans died of AIDS during the presidency of Thabo Mbeki. At least 300,000 deaths could have been avoided had the president merely met the most basic constitutional requirements. Instead Mbeki and his health minister pursued a policy of politically supported AIDS denialism and undermined the scientific governance of medicine. Many more people would have died had it not been for the campaign for treatment and the independence of our courts, which ultimately forced Mbeki and Tshabalala-Msimang to implement an HIV treatment plan. We believe that the period of politically supported AIDS denialism has ended with the appointment of the Minister of Health.**

**We congratulate Hogan and Sefularo and wish them the best. Aluta continua!**

For more comment, contact Zackie Achmat via Gavin Silber on 083 777 9981 Lesley Odendal on 072 174 1205 "

TAC newsletter 25 September 2008

### LOBBY FOR LIBRARIES

#### DEAR COLLEAGUES and FRIENDS -

Your simple letter will help save our future! I have just written to *Mr. Trevor Manuel's Tips* at <http://www.treasury.gov.za/tipsfortrevor.asp> and I invite you to do the same.

I thanked him for the increase in budget for Libraries and asked him to extend this support!

I would appreciate it if all of us and all our friends and their friends could make this call to him. It only needs a few minutes of your time and engage in lobbying for Libraries especially in rural areas and in townships.

I maintain that the provision of these services will not only improve the quality of education of our people, but would surely improve the quality of life as well, including lifelong learning. I view libraries and other information resources as fundamental in building a New South Africa.

For your information some Local Municipalities in the Eastern Cape did not even have Library Services in their IDPs, I managed to get it put in, in at least three municipalities (that was part of my previous job).

Do something! Have a good day! Xolani Notshe

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### FREQUENTLY ASKED QUESTIONS FROM YOUNG PEOPLE ABOUT *THE RIGHT TO DECIDE FOR ONESELF* AND WHAT CHANGES THE CHILDREN'S ACT WILL BRING WHEN IT IS FULLY OPERATIONAL?

- **When do I become an adult, in law?**

At 18 - OR if you have entered into a valid marriage with your parents' consent.

- **When can I get married?**

When you are 18 you can get married without the consent of your parents. If you are a girl under 18, but over 15, then the new Children's Act, which is coming into effect soon, says that you can get married with your parent's consent. But boys under 18 and over 15 will need the consent of the Minister of Home Affairs as well as the consent of their parents. No child under 15 can get married.

- **When can I choose which parent to stay with?**

Children under 18 cannot choose which parent to stay with. It is decided by the parents or a Court. But children should be consulted and have their opinions taken into account.

- **When can I leave home?**

At the age of 18 you can leave home and choose a 'domicile' or permanent home. Every person is by law compelled to have one, and only one, domicile at a time.

- **When can I change my name—first name or second (family) name?**

Only at age 18.

- **When can I kiss and cuddle? Is it a crime now?**

It depends! The new laws under the Children's Act will protect children under 16 from sexual bullying by older teenagers. If an older teenager threatens or uses strong persuasion on a younger child to allow sexual touching then it IS a crime. This is called 'sexual violation', even though there was no full or 'penetrative' sex (which would be 'rape').

If a charge is brought against a child between the ages 12-16, for kissing or fondling another child, the decision to prosecute may only be made by the Director of Public Prosecutions. This is to prevent 'unnecessary and frivolous' cases. Among other circumstances, he will take into account the age difference between the children—a difference of 2 years or more makes it more likely that the younger child was coerced, and did not consent freely.

- **When can I open and run a bank account?**

When you are 16 you can deposit money in a bank and enjoy all its privileges or responsibilities as if you were a 'major' (adult in law).

- **When can I leave school?**

At age 15 or the end of Grade 9, whichever comes first.

- **When can I work full-time and earn money?**

At age 15 or when you have completed Grade 9 and no longer have to attend school. Up until then you can work part-time if it does not interfere with your schooling and does not put your well-being at risk.

- **When can I earn money by modelling or performing dances and singing? Or competing in sport?**

If certain conditions are followed, you can earn money this way even if you are under 15 and still at school. The law (Basic Conditions of Employment Act) sets rules—that your education must not be disrupted, that you must be kept safe from physical or emotional harm, that you have time for recreation and so on.

- **Can I work underground at a mine?**

You can work underground—if it is part of your training or vocational education—when you are over 16. But for ordinary underground work you need to be 18.

- **When can I donate blood?**

At age 14.

- **When can I get condoms or 'the Pill'?**

At age 12 for condoms, but for the Pill or other contraceptives the consent of your parents is needed (and a medical examination to make sure there is no health risk to you).

- **When can I buy cigarettes?**

At age 16 until the new law comes into effect and then it will be 18—and note that adults will not be allowed to smoke in a car if a child under 12 is in the car too!

These answers have been adapted from Mahery P & Proudlock P (2008) 'Legal guide to age thresholds for children'. Edition 4. September 2008 Children's Institute (UCT) and the Centre for Child Law (UP) - where there is a wealth of information on this topic.