

POVERTY AND
DEPENDENCY
IN
CAPE TOWN

A Sociological Study of 3,300 Dependents
receiving assistance from the Cape Town
General Board of Aid

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DEDICATED TO MY FATHER,
AND IN MEMORY OF
MY MOTHER

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CHAPTER 1.

INTRODUCTION.

THE NEED FOR THE STUDY.

The Board of Aid, Capetown, is a statutory body created by Provincial Ordinance in 1919 to relieve the destitution of the aged, the chronic sick, and those who were otherwise incapable of supporting themselves. While the activities of the Board remained untypical, in the sense that incapacitation was the sole criterion of destitution used, the task was relatively simple. (Naturally it is not suggested that the problems associated with such natural dependency do not merit serious consideration.) When the world-wide depression first made itself felt in South Africa in 1929, it was inevitable that the functions of the Board, by virtue of the Board's unique statutory position, should be so widened as to include and make provision for *all* types of destitution. This change was brought about by Provincial Ordinance in 1930, when an already difficult task became complicated by other problems and wider issues. So, for instance, the Board had to deal with many cases of mal-adjustment arising out of commercial, industrial, and other forms of unemployment. With this widening of function there arose, more urgently than ever before in the history of the Board, the need for scientific and periodic investigation into the main directions of its activities. It is consequently surprising that in the course of its activities since 1930, and until this study had sufficiently progressed, the Board was unable to furnish information about the extent to which any particular type of dependency prevailed amongst its chief recipients.¹ The same unfortunate tendency persists amongst most other

¹ The terms "chief recipient" or "chief dependent" are used to designate the person in whose name the application is registered. This is the man or woman if the case is single, the father of the family in all cases where he is alive and living with his family, or the mother in the case of all families where there is no father in the home (e.g., in cases of divorce, desertion, etc.).

important charities, viz., to function from year to year without performing the duty of ascertaining properly (a) the type of persons they serve, and how these change from time to time; (b) changes in the social and economic conditions of their clients as well as of the community as a whole; (c) the effects of the methods of treatment employed, and (d) possible new methods of treatment.¹ This very often means that the organisation not only has no clearly formulated policy, but is unable to develop one—it strives blindly after the promotion of social welfare, without having studied the clients and their problems carefully. Valuable material is sometimes contained in the files; but the opportunity for using this was allowed to pass, with the result that, in all probability, defects which could have been avoided remained unremedied.

THE GENERAL CHARACTER OF THE INVESTIGATION.

Research work in connection with the activities of an organisation engaged in social welfare work may be a general survey, or an intensive, very often qualitative, investigation of a particular group of dependents. As far as possible it is desirable that the first type of research work should precede the second, the latter performing the main function of supplementing the limitations that must necessarily attach to the more general kind of enquiry.

The present study belongs to the first type of enquiry, although it is not a survey in the strict sense of the term. An effort is made to discover the various types of dependents; to describe the social and economic conditions, especially those relating to the poverty situation, under which the dependents of the Board of Aid live; and to ascertain, as far as possible, the causes which led to the development

¹ See in connection with the work of the Board of Aid the investigation of E. Perold: "Die Duur, Hoeveelheid en Geaardheid van Liefdadigheid verskaf deur die Onderstandsraad aan 'n monstergroep van teenwoordige Applikante tot die begin van 1933" (unpublished M.A. thesis circulated in mimeograph form in an English translation, financed by the Board of Aid, with the title "The Duration, Amount and Nature of the Relief given by the Board of Aid, up to the end of 1932, to a Sample Group of Applicants"); and L. Verwoerd: "Die Alleenlopende Moeder as 'n Ontvanger van Liefdadigheid." These investigations were carried out to supplement the present enquiry.

of their dependency. No attempt will be made to put forward details of treatment. This is a subsequent duty devolving on the Board itself.

A SHORT SUMMARY OF THE CONTENTS.

The financial circumstances of the recipients of relief and their spatial distribution over Capetown are first dealt with. Following this chiefly descriptive portion of the study an analysis is made of certain factors and conditions in order to discover their causal connection with dependency. This analytical portion of the study is concerned with seven groups of data, viz., the places of origin and previous residence; such personal factors as age, sex and race; family conditions (including marital status, size of family or household, etc.); housing and environment; health conditions; educational and occupational qualifications of the dependents and their children; and the influence of unemployment.

DATE OF THE RESEARCH.

The enquiry refers only to cases which were actually receiving assistance from the Board of Aid at the time of the investigation.

The data were obtained from three sources: (a) case papers of the Board, (b) a special card index system, and (c) a short survey.

The Board keeps in its possession all information it has received concerning each applicant in a separate file. This file is usually referred to as the case paper of the client. More than 2,000 such case papers were used.

The card index system was especially introduced for the purpose of the research, as there was no adequate system of recording the essential facts of each case according to a uniform schedule, when it was first decided to undertake the work. This was, however, recognised as indispensable for the purpose of summarising, classifying, and tabulating the principal details of the cases. Seven hundred European and 2,469 non-European cases were examined, a separate yellow card being used for each of them. The yellow cards were all

filled in by the investigators of the Board of Aid during the course of their daily visits. Most of the families and persons visited were well known to the visitors. The cases concerned were all visited between the 3rd January and the 30th June, 1933. A copy of the index card is given as Appendix I. This card index system will be referred to throughout the study as the yellow cards.

In addition, a special survey was undertaken during the first week in May, 1933, with the assistance of the students of the Department of Sociology, University of Stellenbosch. The survey lasted from the 1st to 7th May. Two hundred and ninety-five European and 872 non-European dependent families and individuals were visited with the object of obtaining data not ordinarily derivable from the case papers of the Board. A copy of the form used in this connection is given as Appendix II. Owing to various limitations—such as the number of field workers, financial resources, etc.—the survey was confined to the areas adjacent to the centre of the city, namely from Sea Point to Observatory. Twenty students assisted voluntarily, in addition to the five visitors on the regular staff of the Board. For various reasons not all the information contained in the Form S 1 has been used for this study. To some extent the cases covered by the case papers, the card index system, and the survey were identical. For these cases it simply meant that information was gathered by one method where it had to a large extent not been made available by other means. Other cases, however, were covered by two of these methods of approach, and still others by one method of approach only. Altogether information was available from slightly over 3,300 totally separate cases. The card index system contained information on nearly all of these.

These 3,300 cases received assistance from the Board of Aid during one or more periods of varying length between the 3rd of January and the 30th of June, 1933. If all the persons concerned in these cases (i.e. man, woman and child) are regarded as dependents sharing in the Board's charity, then the total number of persons concerned, both European

and non-European, was just over 15,000, i.e. approximately 5·7% of the entire European and non-European population in Capetown.¹

THE RELIABILITY AND STATISTICAL TREATMENT OF THE DATA.

Two questions could be asked, namely (i) is the information concerning the cases likely to be trustworthy? and (ii) to what extent does the information gathered refer to a sufficiently large portion of the group of dependents to allow valid deductions for the whole group?

The first question requires an indication of the care with which the information was gathered, the methods and possibility of checking information, and the conscientiousness of the visitors. The data on the yellow cards and in the case papers were filled in by the regular visiting staff of the Board of Aid. There were only five such visitors, so that they could easily be supervised and their work checked. Most of the cases were well known to these visitors, and, as they were paid employees, it was necessary for them to satisfy the writer as supervisor. No instances arose in which their care and conscientiousness in filling in the cards had to be questioned.

There was ample opportunity of making certain direct observations over and over again on various visits. This was true, for example, with regard to the size of the family, and applies also to some extent to the marital status in so far as the actual living together and not the legal position was concerned. In most cases it was also possible to ascertain the race with a high degree of certainty. In connection with items such as occupation and illness, continual checking through other sources was essential; e.g. references from former employers, medical certificates, and telephonic communications with those issuing such testimonials or certificates were used. Communications with other charities were frequently used as a further control. Especially in the case of dependents who had been assisted by the Board for a long

¹ Should one desire to find out the exact percentage which all dependents form of the population of Capetown, then a co-ordinated survey of all the city's charities would be necessary.

period, fairly accurate information had been gradually acquired by the process of continual investigation and checking. Cross checking between cards and case papers could be carried out in regard to certain items. The visitors' duties frequently brought them in touch with neighbours and relatives, thus providing additional opportunity for checking information.

In connection with other items, such as age and the extent of education of the children, there were fewer attempts at intentional checking. Experience indicated that prevarication rarely took place with such items.

On the whole, therefore, as far as the information on the yellow cards is concerned, a high degree of reliance can be placed on the type of material mentioned above as checked, while the few items mentioned as unchecked can be regarded as having a fairly high degree of reliability.

All the material contained in the survey forms was obtained by means of interviews which the investigators had with the recipients during the course of the survey, when the forms were filled in. It was manifestly impossible to control the reliability of the data, and the statements received as answers were presumed to be correct, except where there was reason to doubt their authenticity. In such instances the material was discarded.

The investigators here were the previously mentioned five visitors and a number of students who, keenly interested in the problems of poverty and the methods of social work, voluntarily offered their services. No doubt about their care and conscientiousness can be entertained. They knew of the measures to be taken to obtain reliable testimony, and had had previous experience of case visiting. The chances of incorrect information due to investigators were therefore considerably minimised, especially as some of the information filled in in the forms was already present in the case papers and could be checked. Discrepancies were rarely found. Since the visitors were thus reliable, the chief source of unreliability of the survey information would be the fact that the recipients themselves might intentionally or unintentionally have made wrong statements. Only straightfor-

ward and simple questions on concrete conditions and facts were, however, put, and therefore the data collected should be near enough to the truth to be worth studying.

The second question was whether the sample used in this investigation was sufficiently large. There can be no doubt about the cases covered by the yellow cards, since one is scarcely dealing with a sample, both in the case of Europeans and non-Europeans. Over 95 % of all the dependents receiving assistance at that time were included. This certainly allows of generalisations in regard to all the dependents on the Board of Aid. Naturally it would be another matter if one intended to draw conclusions about all dependents in Capetown. In that case it would be necessary to know what percentage these Board of Aid cases formed of all the dependents in the city. Owing to the importance of the Board as a charitable organisation it is more than likely that these cases would form a very high percentage of all the dependents in Capetown. Since societies operate independently of one another the degree of overlapping is not known, and no certain calculation of the actual number of separate cases of dependency can be made. Therefore the conclusions are made only with regard to the Board's dependents, of whom the sample studied is highly representative. At the same time such conclusions will most probably be of value in understanding the position of dependents in Capetown generally.

As far as the survey group is concerned the number of cases is much smaller than in connection with the yellow cards. Even here, however, the sample forms 42 % of all the European cases dependent on the Board of Aid at the time, and 35 % of the non-European cases. Even such samples are fairly representative. Naturally the sample was a random selection of current cases.

Sometimes, however, owing to incompleteness or other limitations in connection with certain items, varying numbers of cases had to be eliminated during the manipulation of the cards and forms. This is indicated wherever the size of the sample was thus diminished.

The Standard Deviations were used to indicate the possible errors of the distributions in the tables, but this was done only for samples smaller than the group covered by the yellow cards. The Probable Error (P.E. = $\frac{.67 \text{ sigma}}{\sqrt{N}}$) was used to indicate the probable errors of averages. The Standard Deviations are approximate only, in the sense that they have been derived from a table.¹

¹ Taken from Hogg: "Incidence of Work Shortage," pp. 115-116.

CHAPTER II.

THE FINANCIAL CIRCUMSTANCES OF DEPENDENTS.

The economic circumstances of dependents usually receive the closest scrutiny from the investigating staffs of charitable organisations, since it is mainly upon a knowledge of the financial position of the individual cases that organisations decide to grant or withhold relief. No effort, however, is usually made to review in general the economic circumstances associated with the state of pauperism in which dependents almost continually find themselves. In this way an important duty is overlooked, since it is only on the basis of a general and accurate knowledge that a policy can be developed with the object of changing constructively the financial circumstances of dependents. For example, if one knows from what sources the recipients usually receive their income it would be possible to consider whether these sources should not be developed. The discovery may be made that certain types of unskilled work are paid so poorly that even full-time labourers of that type are in need of additional support. The organisation would then be doing its duty if it brought this fact to the notice of the public, and agitated for a reasonable wage policy in connection with the particular form of unskilled labour.

The value of accurate knowledge of the economic circumstances of the dependents is, however, not only confined to developing a constructive policy of a more or less general nature. It is a matter of common knowledge that charitable organisations are sometimes constrained to assist persons who are not entirely destitute in the sense that they have absolutely no income. But where this does happen, it is obviously of importance to know to what extent, and why organisations find themselves forced to help those who have some source of income.

With the object of attempting to find an answer to this and similar problems several facts were studied. For example, the sources and amounts of non-charitable and charitable income were investigated. Charitable assistance is here regarded as a form of income as far as the dependents are concerned. Furthermore, in connection with the study of the sources of income the question was raised of the duplication of assistance. A comparison was also made of the ultimate financial position of those who have no income, except what they receive from the Board of Aid, with that of those who are perhaps in the more fortunate position of enjoying an income from several sources, charitable and non-charitable. Besides considering the income, an investigation was made of the expenditure of dependents. In this connection the various items of expenditure are discussed with a view to ascertaining how the money which the dependent spends each week is allocated. Not only were the most important items of expenditure in the budgets of the dependents studied, but also the percentage of money spent on them. Furthermore, an investigation was made of the debts of those dependent on charity. Such debts were, however, not considered as something apart, but in connection with the relation between income and expenditure.

The data on the above points were collected by means of the special survey conducted in the first week in May, 1933.

THE SOURCES AND AMOUNT OF INCOME OF DEPENDENTS.

The data which were collected in connection with the sources and amount of income of dependents can be divided into two groups, according to whether the income was derived (i) from employment and other non-charitable sources, or (ii) from charitable sources. These groups of data can first be dealt with separately, and then discussed in conjunction.

(i) **Income from Employment and other non-charitable Sources.** (a) *Sources of Income.* The percentage distribution of European and non-European cases according to the sources of all kinds of income was first calculated (see Table No. I.).

The sample consisted of 295 European and 872 non-European cases, the sampling ratios being approximately 42 % and 35 %¹ respectively.

TABLE NO. I. THE PERCENTAGE DISTRIBUTION OF THE DEPENDENTS ACCORDING TO THE SOURCES OF INCOME.²

	<i>Europeans</i>	<i>non-Europeans</i>
With only charitable income . . .	64·4 ± 2·7	59·9 ± 1·6
With sources of non-charitable income :		
(i) Employment and no other source	21·4 ± 2·3	29·7 ± 1·7
(ii) Other sources (boarding, lodging, pensions, but not employment)	11·4 ± 1·8	5·2 ± .8
(iii) Employment supplemented by income from boarders and lodgers	2·8 ± 1·0	5·2 ± .8
	100·0	100·0

Of the number of European and non-European cases with sources of non-charitable income, approximately three-fifths of the former's and nearly one-quarter of the latter's main source of non-charitable income was from employment, i.e. a larger percentage of such non-Europeans than Europeans were dependents in employment.

A little less than one-third of the Europeans with non-charitable incomes and about one-eighth of such non-Europeans had no source of non-charitable income except that derived from the provision of boarding and lodging, and from non-charitable pensions.

¹ The sampling ratio was calculated on the number of cases known to be dependent on the Board, according to the yellow card index system. This is true of all sampling ratios throughout this study. It is true that this system may have missed a very small number of cases dependent on the Board at the time, but the actual number covered by the system was certainly more than 95 % of the actual group assisted at the time. The sampling ratios, therefore, indicate not exactly but very nearly exactly the proportion the sample forms of the total number of cases dependent. This is true of all sampling ratios. It is quite likely that the averages and percentages obtained in such samples are fairly close approximations of what the correct figures would be for the whole group. Provided proper precautions are taken a sample of even 1 in 20 may be representative. In most instances the sample used in this study are larger than 1 in 20.

² In all cases of tables giving "percentage distribution" the continual repetition of the percentage sign is avoided in the table.

Some of the cases, namely, a little more than one-twelfth of the Europeans and about one-eighth of the non-Europeans, supplemented their income from employment by taking in boarders and/or lodgers, but were still dependent.

The dependents who were in possession of some non-charitable income derived from the sources indicated above formed, however, the smaller group. The European dependents with only charitable income constituted nearly two-thirds of the whole European group, and the non-Europeans about three-fifths of their group.

These results, based as they are on a fairly representative sample, can be taken as a fair indication of the characteristics in this respect of the whole group of dependents dealt with. *Most of the dependents, European as well as non-European, have no sources of non-charitable income, while the greater portion of those who have some income are engaged in a type of employment which does not sufficiently provide for their needs.*

(b) *The Amount of non-charitable Income.* In Tables Nos. II. and III. the percentage distribution of single and family cases are given according to the amount of non-charitable income or lack of it. It is interesting to note that, of those without any income whatsoever, about four-fifths of the European and approximately five-sixths of the non-European cases consist of families. The same proportions between family and single cases are found to obtain in both racial groups in connection with those in receipt of non-charitable income. These are, in fact, the proportions in which the single and the family cases were present in the whole group of dependents (see p. 67). While no special significance may accordingly be attached to these proportions in connection with the possession or not of non-charitable income, they may be accepted as an indication that the sample used here is representative of the whole group.

The average amount of weekly income from all non-charitable sources was calculated for those Europeans and non-Europeans¹ with such income. At the time of the enquiry

¹ For the Europeans there were 105 such cases and for the non-Europeans 348, i.e. 35·6 % and 40·1 % of the samples respectively.

TABLE NO. II. THE PERCENTAGE DISTRIBUTION OF EUROPEAN CASES ACCORDING TO THE AMOUNT OF NON-CHARITABLE INCOME.

<i>Amount of Weekly Income</i>	<i>Single Cases</i>	<i>Family Cases</i>
Nil	12·2 ± 3·3	52·2 ± 5·0
Under 10/-		5·8 ± 2·4
From 10/- but under £1 . . . . .	.7 ± .7	12·2 ± 3·3
From £1 but under £1 10	3·1 ± 1·7	6·4 ± 2·4
From £1 10 but under £2		4·4 ± 2·2
From £2 but under £2 10		1·0 ± 1·0
From £2 10 but under £3 . . . . .		.7 ± .7
From £3 but under £3 10		1·0 ± 1·0
From £3 10 but under £4 . . . . .		.3 ± .3
£4 and over		
<i>Total</i>	16·0 ± 3·6	84·0 ± 3·6
Average Weekly Income	21·5 ± .92 shillings.	

TABLE NO. III. THE PERCENTAGE DISTRIBUTION OF NON-EUROPEAN CASES ACCORDING TO THE AMOUNT OF NON-CHARITABLE INCOME.

<i>Amount of Weekly Income</i>	<i>Single Cases</i>	<i>Family Cases</i>
Nil	9·6 ± 1·7	50·3 ± 2·9
Under 10/-	2·1 ± .8	18·6 ± 2·2
From 10/- but under £1	1·2 ± .6	10·7 ± 1·8
From £1 but under £1 10 . . . . .	.2 ± .2	4·6 ± 1·3
From £1 10 but under £2 . . . . .	.1 ± .1	1·7 ± .8
From £2 but under £2 10 . . . . .		.2 ± .2
From £2 10 but under £3 . . . . .		.2 ± .2
From £3 but under £3 10 . . . . .		.3 ± .3
From £3 10 but under £4 . . . . .		.2 ± .2
£4 and over		
<i>Total</i>	13·2 ± 1·9	86·8 ± 2·1
Average Weekly Income	12·4 ± .37 shillings.	

the average amount of weekly income for these European dependents was 21·5 shillings, and for the non-Europeans it was 12·4 shillings. These averages seem fairly high for dependents on charity, especially in the case of the Europeans. A further analysis of the position is therefore necessary.

According to Table No. II. none of the single dependents with a non-charitable income are in receipt of an income over £1/10/-, though the greater portion of this small group

receives between £1 and £1/10/- . Though the incomes dealt with here are actually only those obtained during the week of the investigation they indicate that the potentiality for earning such incomes was present in these cases. Even though fluctuations of income may be the reason for granting assistance to these cases, the question must be raised whether there is not something wrong when single cases, forming 3 % of all the cases, and having the potentiality of earning at least £4 per month, as shown by actual achievement, receive relief. There is something similar noticeable in connection with the single non-European cases, but not in a sufficiently pronounced degree to warrant further attention.

Most of the cases with an income of their own, however, are families. The average size of the family for Europeans is 5·2 and for non-Europeans 5·6 (see p. 69). Here it is obvious that the average weekly income, and more especially incomes below the average, are by no means adequate. Where an organisation does not exert itself to explore avenues of employment to enable the recipients to provide fully for themselves, but seeks only to subsidise inadequate incomes by a relief grant, the result would be to encourage the acceptance of any form of employment.

The position, however, is apparently not quite as it should be, even in the case of families. Approximately 7½ % of the whole European group have an income above £6 per month. Of these dependents about 3 % of the whole group earned above £8 per month, while 1½ % of the whole group earned more than £12 per month. This certainly does seem to be a queer position for dependents to be in, even if allowances are made for the various kinds of family difficulties and the differences in the size of families, which would favour a relief grant, and even if the likelihood is taken into consideration that in most of these cases the incomes would fluctuate to such an extent that these totals, based on a particular week, present an exaggerated picture. At the very least these figures seem to indicate that families consisting of very nearly 7½ % of the whole group receive relief grants at times when they present clear evidence that they should be able to

support themselves. These appear to be cases where the right type of social service instead of relief would best meet the need. The non-European family cases show similar tendencies, e.g. about 7 % of the whole group were receiving more than £4 per month, and this included approximately 2½ % of the whole group with more than £6 per month, and this again included nearly ¾ % of the whole group with an income over £10 per month. The same precautions, however, must be taken in discussing these cases as were necessary in regard to the European group.

The analysis of the non-charitable income leads to the conclusion that *in both the European and non-European groups small but not negligible percentages of single cases can, and apparently do at times, earn an income which makes it doubtful whether they need ever become dependent if dealt with correctly. Similarly, although it is accepted that the non-charitable weekly income is in most of the other cases too low for an adequate subsistence of families, the desirability of assisting them just by means of relief grants instead of rehabilitative service must also be strongly doubted owing to the indications they give of a tendency towards self-support.*

(ii) **The Sources and Amount of charitable Income.** The entire group of which a survey was made, consisting of 295 European and 872 non-European cases, were, during the period of the survey, in receipt of assistance from at least one body, namely, the Board of Aid. Only 247 European and 757 non-European forms could be used for studying the details of the charitable income, owing to incomplete information of the remainder.¹

The extent of duplication of charitable relief may be gauged to a certain extent from Table No. IV., which shows the percentage of cases in this latter sample receiving help from one or more than one source during the week in May, 1933.

Approximately four-fifths of the European and non-European groups were dependent only on the Board of Aid; about one-sixth of each of the racial groups were drawing relief

¹ The sampling ratios are 35 % for Europeans and 31 % for non-Europeans.

TABLE NO. IV. THE PERCENTAGE OF DEPENDENTS RECEIVING ASSISTANCE FROM ONE OR MORE CHARITABLE SOURCES.

<i>Source of charitable assistance</i>	<i>Europeans</i>	<i>non-Europeans</i>
From Board of Aid only . . .	82·6 ± 2·5	83·4 ± 1·4
From Board of Aid and one other charitable source ² . . .	16·2 ± 2·5	15·9 ± 1·4
From Board of Aid and two other charitable sources ¹ . . .	1·2 ± .7	.7 ± .3
	100·0	100·0

from two sources, one of which was the Board of Aid, while only a negligible proportion was being assisted from three different sources. *It seems likely² that by far the greater proportion of dependents, approximately 80 % of both racial groups, received assistance from one charitable body only.* At the same time it was definitely found that there was some measure of duplication of assistance. The extent of the duplication may possibly be greater, though the information indicates that assistances from more than one charitable organisation occurred in less than one-fifth of the cases, and even then was restricted mainly to two bodies.

It must not be thought, however, that duplication of assistance is necessarily unhealthy. Many societies, including the Board of Aid, are able to give only the smallest grants, and sometimes invite the co-operation of other institutions, and even relatives and families, especially in instances of large families. In order to judge whether there is undue duplication such factors as the weekly income from charitable and non-charitable sources, size of family, regularity of the duplication period of relief, etc., etc., would have to be taken into account before a considered opinion can be expressed as to the effect of duplication on the dependency of the recipient.

¹ This includes a very small number of cases also assisted by relatives.

² This information was gathered from the applicants themselves, and could not be controlled very well. Consequently any deductions made here have the disadvantage of relying on the statements of the applicants, whose trustworthiness in this particular respect is open to doubt.

It is interesting, however, to analyse the total average charitable income of the dependents in such a way as to indicate the influence of duplication of assistance. (See Table No. V.)

TABLE NO. V. THE AVERAGE WEEKLY AMOUNTS OF CHARITABLE ASSISTANCE.¹

	Europeans	non-Europeans
Total average income from all sources	8·3 ± .22	7·0 ± .09
From one source	6·4 ± .13	5·4 ± .01
Two sources	16·8 ± .62	11·9 ± .3

Confining the observations purely to the sample, the averages given certainly indicate that where duplication has taken place there is a big difference between the average weekly amounts of charitable income derived from two and three sources as compared with that obtained from one source only. For example, *in the case of both the Europeans and non-Europeans the average weekly assistance from two sources is, in each group, more than twice as large as that derived from one source.* (In fact, this is also true and even to a greater extent of the very few cases whose charitable income from three or more sources was known. Owing to the unreliability of an average based on an insufficient number of cases these averages, however, are not presented in the table, and do not merit further consideration.)

The process of duplication may lead to an actual increase of income, and may serve as an inducement to solicit charity from various sources. This would lead not only to serious dependency in the material sense, but also to the loss of self-respect and self-sufficiency. It would, in the light of this preliminary investigation, be interesting and important to study fully the extent of duplication in the city, but this would imply careful and full control over all information, as well as co-operation from all possible contributing bodies. Such an undertaking would enable a statistical calculation

¹ The amounts are given in terms of shillings.

to be made of the effect of duplication of assistance on the extent, type, and duration of pauperism.

If the facts in Tables No. IV. and No. V. are taken in conjunction they mean that just four-fifths of the Europeans and non-Europeans in the sample were given grants by the Board of Aid for an average weekly amount of about 6/6 and 5/6 respectively.¹ A little less than one-fifth of the two racial groups received on the average a charitable income of 16/9 and 12/- respectively per week from two sources.

(iii) **A Comparison of Incomes from charitable and non-charitable Sources.** There is, however, a further feature of the income position to which attention ought to be drawn. The averages for the combined weekly charitable and non-charitable income per case were found to 29·8/- for Europeans and 19·4/- for non-Europeans. *These averages are considerably above those based on incomes from purely charitable assistance even when the incomes were obtained from two sources (i.e. approximately 16/9 for Europeans and 12/- for non-Europeans).*

This suggests that on an average the amount of charitable assistance, even when it is derived from two sources, will not to any great extent be an inducement for dependents to neglect the task of providing their own income, even though the latter may be insufficient. In fact, the average charitable income of some dependents from two sources is less than the average weekly income of other dependents from purely non-charitable sources (c.f. Tables No. II., No. III., and No. V.), namely 21/6 in the case of Europeans and about 12/6 in the case of the non-Europeans. It might be argued that the smallness and inadequacy of the relief grants can be defended on the basis that they force dependents to seek at least some source of non-charitable income. Such a defence may or may not be valid, but the above is only a simple comparison of facts, and should not be taken as supporting or opposing this view. Too many other issues are implicated in

¹ Perold: op. cit. p. 46 footnote gives a slightly higher average.

the question of size of grants to admit a discussion of that at this stage.¹

In this connection it is also interesting to note that on the average the financial position of those Europeans who are in receipt of assistance but where there is also employment, etc., is better than that of the ordinary unskilled worker, whose average earnings, working full time on relief works, are 25/- per week. Usually the earnings of unskilled persons engaged on relief works vacillate between 20/- and 25/-, in which case the position of the person who is doing this type of work and not receiving anything from charity is very much worse than that of the dependent who also has other sources of income besides that which he gets from charitable institutions. The non-European who gets about 5/- per day on relief works (and sometimes 3/6) is exposed to the same position more or less. Even when the rate is 5/- per day the income vacillates from 20/- to 25/- per week, which is not very much above the average amount which the non-European dependent gets when he obtains a small non-charitable income by undertaking odd jobs. To judge whether the relief worker is really at a disadvantage or not, much more would have to be known about the regularity of the non-charitable incomes of dependents. The position as reflected here may be due to the fact that the charitable assistance was perchance augmented only during the time of the survey by a family income which was not regularly obtained. Then the self-supporting worker with a small but regular income from employment would be in a relatively favourable position, although his earnings may not exceed by very much the average income derived by another even from two charitable sources. This comparison indicates, however, the relationship between the average charitable income under fav-

¹ The argument could be adduced that if an average income of 21/6 is regarded as sufficiently inadequate to justify charitable assistance then, since the grants derived from two sources amount to less than the income considered insufficient, the amounts given by way of relief must be much more inadequate. Cf. however, Perold: op. cit. p. 54 et seq. for a discussion of the adequacy of grants, where further factors (such as family conditions) are rightly taken into consideration. Naturally in a discussion such as the above only the average position is taken into consideration, and circumstances differ from family to family.

ourable circumstances¹ and the low wage-rate that sometimes obtains.

THE USUAL EXPENDITURE OF DEPENDENTS.

The analysis of the expenditure of dependents was based on 153 of the European and 709 of the non-European cases of which a special survey was made. The sampling ratios are approximately 22 % and 29 % respectively. The various items of expenditure were arranged under the headings of rent, food, household,² clothing, insurance, illness, and other expenditure. Since some forms did not show the food and household expenditures separately, the combined totals of food and household expenditure were taken for those cases.³ Frequency tables were constructed for Europeans and non-Europeans separately, in order to show the distribution of the cases according to the percentage of income expended on the various items. The average percentages of expenditure under the respective items were calculated from these frequencies. (See Table No. VI.)

TABLE No. VI. THE PROPORTION OF EXPENDITURE BY DEPENDENTS ON VARIOUS NECESSITIES.

<i>Items of Expenditure</i>	<i>Average percentage of weekly expenditure</i>	
	<i>Europeans</i>	<i>non-Europeans</i>
Rent	53·5 ± ·71	50·85 ± ·31
Food	42·0 ± ·68	42·6 ± ·51
Household	7·8 ± ·28	8·4 ± ·17
Food and Household .	45·0	52·55

Owing to limitations of space the frequency tables themselves are not reproduced, though some of the more useful details from them are given.

¹ Naturally there are deviations from the average position, namely, where the dependents receive much more from charitable income than the average calculated. Such cases are, however, few in number, for it was found that there is a clustering about the arithmetic means.

² Items of household expenditure include electric light, soap, paraffin, matches, candles.

³ The information was given only in the combined form by 55 European and 328 non-European cases, i.e. 36 % and 46 % respectively of this particular sample group.

The averages are given for certain items only, as most of the cases, European and non-European, spent very little or nothing on the others. Over 95 % \pm 1.9 of the Europeans and over 95 % \pm .8 of the non-Europeans spent nothing on clothing, relying on charities in this respect. The same applied to illness, more than 90 % of the Europeans and non-Europeans either had no illness or, in the event of ill-health conditions, were treated by the Free Dispensaries and Clinics. In regard to insurance 26 % \pm 3.7 of the Europeans and 43 % \pm 1.7 of the non-Europeans contributed or were supposed to contribute, when able to do so, weekly amounts of about 2/6, mostly towards Burial Societies.

One of the major items of expenditure was found to be rent. Both Europeans and non-Europeans allocate about the same average proportion of expenditure to rent, viz. in the vicinity of 50 %. 9.2 % \pm 2.4 Europeans and 11.14 % \pm 1.1 non-Europeans in the same sample group were, however, living rent free at the time of the enquiry. If they are not included in the calculation the average of actual rent outlay becomes slightly higher, namely 53.5 % in the case of the Europeans and 50.85 % in the case of the non-Europeans. This indicates in one way how largely the rent looms in the household budgets of dependents.

The significance of rent in the dependents' budget can, however, also be shown by comparing it with the average incomes. The average weekly rental is 13.1/- \pm 1.1 for Europeans and 10.1/- \pm .53 for non-Europeans for all types of dwellings.¹ This represents in the case of Europeans in employment and getting relief about 44 % of the average weekly charitable plus non-charitable income (see p. 18). For the non-Europeans in employment and getting relief the average rent was more than 50 % of the average weekly charitable plus non-charitable income (see p. 18). For the Europeans and non-Europeans who are dependent entirely on charity the above weekly rentals may be compared with

¹ The range of rentals and the accommodation obtained for such rents are not discussed in any detail here, but see Higgins: "Housing Survey: Interim Report (Wards 2, 3, 4, 5, and 6), City of Capetown," p. 16 et seq.

their incomes, which vary on the average from 6/6 to 16/9 per week in the case of Europeans, and from 5/6 to 12/-¹ in the case of non-Europeans. *The principal feature of the expenditure of dependents is, therefore, the large proportion which is allocated to rent.*

This deduction was made on the basis of averages. The frequency table shows, however, that this average is not deceptive. For instance, about 25 % of the Europeans and about 30 % of the non-Europeans paid a rent of not more than 40 % of their expenditure, while just over 50 % in the case of each racial group allocated between 40 % and 60 % of their expenditure to rent, and the remaining 22 % Europeans and just over 18 % non-Europeans allocated even more than 60 % of their expenditure to rent. These latter figures even included about 4 % Europeans and approximately 2 % non-Europeans among whom the allocation of expenditure for this purpose was more than 75 %.

The other major item of expenditure in the budgets of dependents was found to be food. Both Europeans and non-Europeans allocate on the average about the same proportion of expenditure to food, viz. 42 %. This means that a somewhat smaller proportion is allocated to food than to rent. On the whole, however, the averages for rent and food approximate so closely that the comparisons made in connection with income can equally well be repeated here to indicate how large a proportion of the incomes of the dependents is necessary for this item.

Naturally there was a fairly large variation in the extent to which food figured in the budgets of various cases. Approximately 25 % of both racial groups allocated less than 30 % of their total expenditure to food, over 50 % allocated between 30 % and 50 % of their expenditure in the same way, while approximately 16 % apportioned between 50 % and 75 % to food, and about 4 % of both racial groups allocated over 75 % to this item.

¹ It is not contended that rent or food, or both, should be covered by the charitable income, but the latter is simply taken as a means of indicating how largely rent must loom in the budget of the dependent family.

The expenditure incurred in connection with purely household requirements was below 10 % for each racial group. The item, "food plus household" expenditure, whether added together in the case of those portions of the sample from which information was gathered in a more detailed way or whether collected as one item from other portions of the sample, amounted to just below 50 % in the case of the Europeans, and to approximately 50 % in the case of the non-Europeans. In fact, if the variations in connection with both "rent" and "food plus household" expenditure are disregarded, and only the average position is taken into consideration, then these two items make up the whole expenditure in more or less equal proportions. The slight excess of rent over "food plus household," or even the equality of these two items is somewhat unexpected, as one would expect "food plus household requirements" to form the major item of expenditure in the budget of a poor family, e.g. in proportion to rent at least as 60 % is to 40 %.

An important problem, which cannot further be dealt with here, is whether or not the expenditure of dependents is correctly distributed by them over various items. It is significant, however, that the expenditure of dependents is devoted for the most part entirely to such items as food, rent, and household requirements, no provision indeed being possible for such social needs as recreation, newspapers, additional training, etc. Even the ordinary expenditure items that normally occur in connection with clothes and illness for families on a higher economic level do not, except in a few isolated cases, occur as items of expenditure among the dependents, since they cannot be provided for on the available income. Some Europeans and non-Europeans make provision by means of insurance, but this is all in the direction of avoiding pauper burials, of which the dependent appears to have an abnormal dread.

THE DEBTS OF DEPENDENTS.

Of the whole special survey group about 50 % of the European and about 55 % of the non-European cases were involved in debt. It is interesting to note that a fairly large propor-

tion of the dependents have not accumulated debt of any kind. The average debt per case was £10/18/- for Europeans and £4/18/- for non-Europeans. The deviations from this mean are not discussed, but will be analysed in connection with the average debts under each of the various items.

The Nature and Frequency of Debts. The first question is what are the various items in connection with which dependents owe money. The various items appear in Table No. VII. It should be noted that a case may have been counted more than once, according to the number of separate items under which debt was incurred by the same case, e.g., one owing on food as well as rent was counted twice.

TABLE NO. VII. THE PERCENTAGE FREQUENCY OF VARIOUS KINDS OF DEBT AMONG EUROPEAN AND NON-EUROPEAN DEPENDENTS.

Nature of Debt	Percentage among	
	Europeans	non-Europeans
(i) Rent	50·6 ± 3·2	55·1 ± 1·8
(ii) Hire Purchase		
(a) Furniture . . .	18·9 ± 2·5	8·5 ± 1·0
(b) Sewing Machines . .	1·2 ± .7	.6 ± .3
(c) Clothing . . .	3·5 ± 1·1	3·8 ± .7
(d) Photographs . .	.4 ± .4	.1 ± .1
(e) Watches . . .		.1 ± .1
(f) Stove . . .		.2 ± .2
(g) Gramaphone . .		.1 ± .1
(iii) Food	8·6 ± 1·8	13·0 ± 1·2
(iv) Insurance	7·9 ± 1·8	13·4 ± 1·2
(v) All other debts . . .	8·8 ± 1·8	4·6 ± .7
	99·9	99·5

There were 253 and 891 instances of debt under separate items among the Europeans and non-Europeans respectively. In Table No. VII. the distribution of these instances of debt relative to the various items is given in terms of percentages.

The type of debt which occurred most among both Europeans and non-Europeans was rent, which formed about half of the total number of instances of debt. Among the Europeans hire purchase debts are second in order of frequency

of occurrence. There were, in fact, 24 % instances of debt of this kind. Among the non-Europeans, however, hire purchase debts only occurred in 13·4 % of the instances, thus equalling in frequency of occurrence other classes of debt amongst non-Europeans, such as food and insurance. The type of debt which occurs most frequently under the hire purchase system is that incurred in connection with furniture, the frequency being much higher for Europeans than for non-Europeans. Other debts contracted under hire purchase apparently do not occur very often.

The number of instances of debt as the result of the purchase of food appears among Europeans less frequently than in connection with the purchase of furniture. There are scarcely half as many instances of the former as of the latter type. The non-Europeans, on the other hand, incurred debt for food almost as often as they did for all types of hire purchase.

The occurrence of debt in connection with insurance is an item which, among the non-Europeans, ranks equal in importance with food and hire purchase. As far as the rate of occurrence is concerned, among the Europeans debts for insurance occur almost as often as for food. The insurance debts mostly represented arrear premiums owed to burial societies, and usually refer to small amounts.

Under the category "all other debts" was included a variety of items not occurring very often, e.g. medical fees,¹ funeral expenses,² light, school fees, etc. Such debts occur as frequently among the Europeans as those for food and insurance, but not to the same degree among non-Europeans.

The Amount of the Debts. The frequency of occurrence of the various types of debts means very little, however, unless it is taken in conjunction with the amounts. Table No. VIII. shows the actual amounts of debt incurred by the dependents under the various items.

¹ In spite of the existence of Free Dispensaries.

² In spite of being able to obtain pauper burials.

TABLE NO. VIII. THE AMOUNTS OF VARIOUS KINDS OF DEBT INCURRED BY DEPENDENTS.

Nature of Debt	Amount		
	Europeans	non-Europeans	
Rent	£877 12 6	£1820 18' 0	
Hire Purchase	£630 9 6	£372 9 0	
Food	£76 19 0	£82 19 0	
Insurance	£8 13 6	£18 2 0	
All other debts	£38 19 0	£59 2 0	
Total . . .	£1632 13 6	£2353 10 0	

Rent. Of the total amounts of the various kinds of debt, rent clearly ranks the highest. This is especially true of non-Europeans, the total rent debt being by far the largest amount incurred by this racial group as a whole. The significance of this type of debt, however, cannot be judged merely from the totals, but rather from (i) the number of cases indebted for rent, and (ii) the average amount of rent debt per case. In the sample there were 128 out of 295, or 43 % \pm 2·8 of the Europeans, and 491 out of 872, or 56 % \pm 1·8 of the non-Europeans, owing money in this connection. On an average the Europeans owed £6/17/2 per case, and the non-Europeans £3/14/2 per case. These facts show that *the incidence of rent debts is somewhat higher among the non-Europeans, but that the average debt per case is much larger among the Europeans, although for both racial groups the average amounts per case are not in themselves large.* Since the average weekly rental is approximately 13/- and 10/- for Europeans and non-Europeans respectively (see p. 21), it is possible to ascertain the approximate number of weeks in arrears for the two races by dividing the average rent debt by the average weekly rent payable. When this is done it is found that the Europeans are in arrear approximately 10·6 weeks per case, and the non-Europeans 7·41 weeks per case.

The chief difference between the Europeans and the non-Europeans, that the former's rent debt is higher, may perhaps be accounted for by the higher average rental of the European group.

Hire Purchase. Debts incurred through the facilities offered by the hire purchase system constituted the next highest total amounts for both racial groups. Here again the significance of this type of debt depends on the number of cases having such debts and the average amount of debt per case. There were 61 out of 295 Europeans or $20\% \pm 2.3$, and 121 out of 872 or $13\% \pm 1.2$ of the non-Europeans, owing money on hire purchase. The actual average amounts owing per case were £10/6/9 for Europeans and £3/1/7 for non-Europeans. A slightly larger proportion of the Europeans than the non-Europeans owed money in this connection, but they owed on the average more than three times as much per case. These average amounts per case are not very large, especially as far as the non-Europeans are concerned. Apparently the hire purchase system does not affect the actual dependents as much as is sometimes thought. It may, however, increase to a greater extent the difficulties of another class of poor not investigated here, namely, those just above the dependency line. Nevertheless, *it cannot be denied that the hire purchase debts do affect the position of the dependents to a certain extent, especially the Europeans.* When the above averages are compared with those owing in connection with rent, it is seen that the Europeans owe on the average much more for hire purchase items than for rent, i.e. £10/6/9 as compared with £6/17/2 for rent. At the same time there were twice as many Europeans owing for rent as for debts incurred through hire purchase. The position is different in the case of the non-Europeans, of whom those owing for hire purchase formed only one-quarter of the number owing for rent, the average amount for the former item being lower than that for rent. Of course, if there is a tendency, as there appears to be on the part of the Europeans, to buy furniture on the hire purchase, items bought in this way are usually expensive.

Food. The total amounts owing on food are comparatively small. The number of cases owing in this respect were: Europeans 22 out of 295 or $7.5\% \pm 1.5$, and non-Europeans 116 out of 872 or $13.3\% \pm 1.2$. The average amounts owing

were £3/10/- per case for Europeans and 14/4 per case for non-Europeans. The average for the Europeans exceeds considerably that for the non-Europeans. The proportion of European cases owing for food, however, is very small. On the other hand the proportion of non-Europeans owing is much larger, but the average amounts per case are very small. *It is quite clear that both racial groups of dependents owe fairly little for food*, presumably because (i) the credit allowed by shopkeepers is small, and (ii) food is the first item for which charity makes provision.

Insurance. There were 19 Europeans out of 295, or 6·4 % \pm 1·4, and 122 non-Europeans out of 872, or 13·9 % \pm 1·4, owing various amounts. The average debts were: Europeans 9/2 per case and non-Europeans 2/11 per case. The average amounts here are small and negligible, and therefore the number of cases in debt does not merit much consideration. These debts usually meant 1-4 months of arrear premiums for burial societies. It seems that the non-European is more careful about keeping his payments up to date.

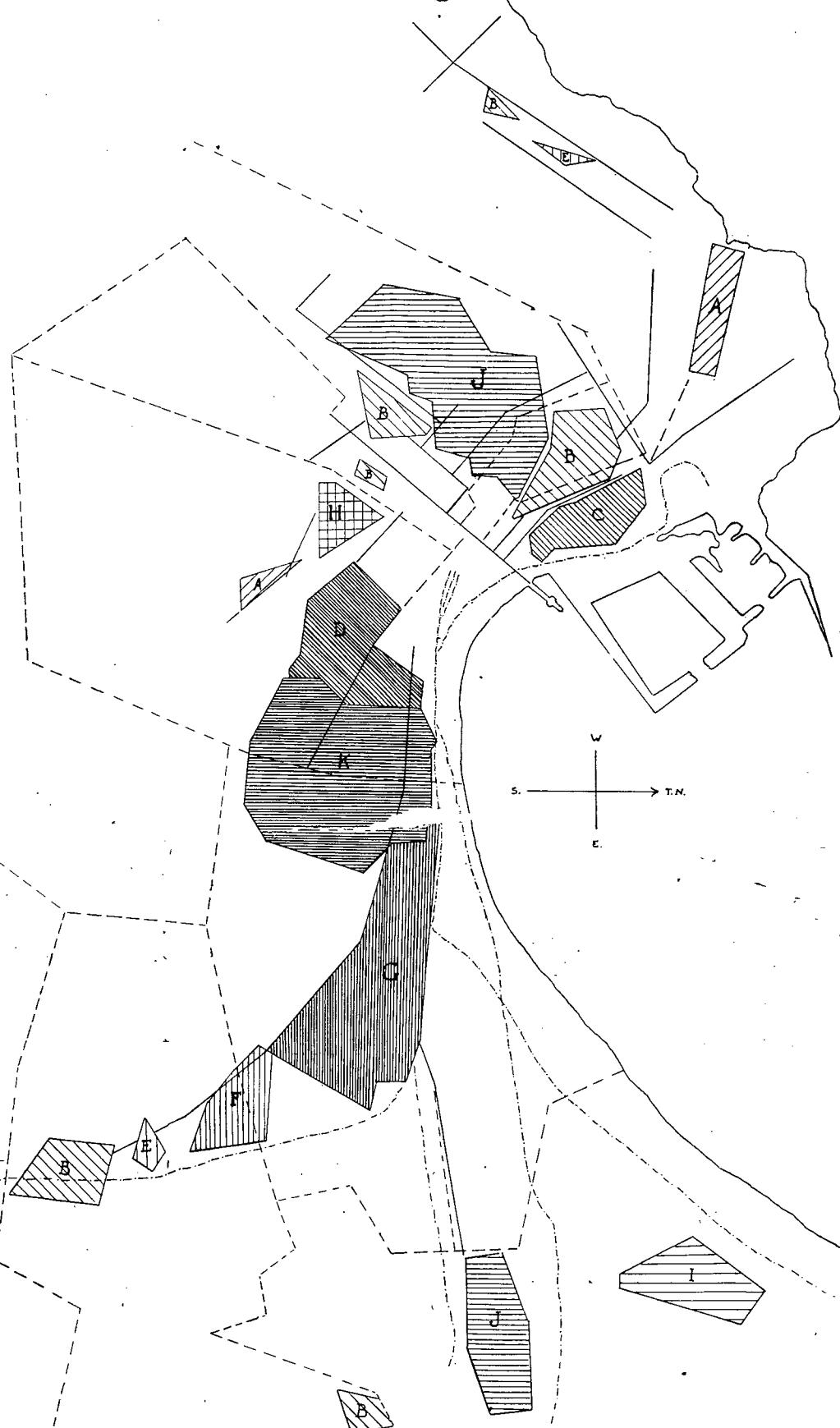
All other debts. There were very few cases of other debts, so that the averages would be meaningless as far as any indication of a tendency is concerned.

Generally speaking, the average debt per case in each of these categories is not exceptionally high, yet the smallness of the income of dependents makes even a small debt relatively important. The importance of the debt lies in the fact that it can only be reduced very slowly, thus remaining a burden for months and even years.

When both the amounts and the proportion of cases in which such debts occur are taken into consideration, this investigation shows that *the major item of debt is rent*. The only other item of any consequence is debt incurred through the facilities of the hire purchase system. There are evidently factors in the lives of Capetown dependents which make it difficult for them to incur other debts. In so far as the debt position is less favourable in the case of the Europeans, and this is true only to a limited extent, the higher standard of living that is generally expected of Europeans, even if they are paupers, would presumably be the cause.

DISTRIBUTION MAP OF POVERTY IN CAPE TOWN

- [A] Only Europeans in small numbers.
- [B] Practically only non-Europeans present in small numbers.
- [C] Practically only non-Europeans present in fair numbers.
- [D] Practically only non-Europeans present in large numbers.
- [E] Europeans and non-Europeans in equal proportions, both present in small numbers.
- [F] Europeans and non-Europeans in equal proportions, both present in fair numbers.
- [G] Europeans and non-Europeans in equal proportions, both present in large numbers.
- [H] More Europeans than non-Europeans, the Europeans being present in small numbers.
- [I] More non-Europeans than Europeans. The whole dependent group being present in small numbers.
- [J] More non-Europeans than Europeans, the whole dependent group being present in fair numbers.
- [K] More non-Europeans than Europeans, the whole dependent group being present in large numbers.



CHAPTER III.

THE DISTRIBUTION OF DEPENDENCY IN CAPE TOWN.

To the casual observer to whom the city is well known, there are certain areas through which he frequently passes and with which he associates poverty and squalor and filth. One of the tasks in a general study of this nature would be to supply concrete and definite information about the parts of the city where dependents on charity live. It is not sufficient to have a general impression that this or that area predominates as extremely poor, but it is necessary, by the systematic collection of data, to ascertain more precisely and accurately the parts of the city where paupers reside, and the sort of urban environment in which they are constrained to live. Such a study should also indicate certain conditions, e.g. whether and to what extent Europeans and Coloured live in the same poorer class areas.

Knowledge of this kind should be in the possession of charitable organisations. For example, if the Board of Aid should want to establish a new branch office or a crèche, or if an organisation had plans for developing a settlement house, it would naturally be wise to select a situation in the locality in which it is most needed. Sometimes, of course, more detailed information than that of the general distribution of dependents is necessary, e.g. in the case of a crèche it would be essential to know the distribution of a particular type of dependent, namely, of European or Coloured working women with small children. At present, however, situations are usually selected in Capetown on the basis of general and vague impressions as to pauper localities. Sometimes other but scarcely relevant reasons form the basis of the selection.

The data in this chapter were collected by means of the yellow cards, and refer to more than 95 % of the European and non-European cases respectively.

THE DISTRIBUTION OF DEPENDENCY IN CAPETOWN.

A fairly large scale map (2 ft. 9 in. \times 2 ft. 5 in.) of the City of Capetown and immediate suburbs was used. The Europeans were indicated on the map by means of crosses, and the non-Europeans by means of dots. Only the main and more important streets were shown, the names being omitted as it was thought that the insertion of these might disturb the graphic effect, which depended principally on the degrees of clustering. The municipal wards were indicated by heavy black lines. The insertion of the main streets and wards was meant to assist the recognition of the exact position of the various areas, but quite by chance happened to serve another purpose. It was found more useful for graphic presentation to replace this original map¹ by a much smaller spot map (see Map No. 1). The areas on this spot map are not official ones, but were determined solely by the type of distribution of dependents actually found on the original map. It is in this connection that ward boundaries and main streets were found useful in outlining distribution areas.

The kinds of areas shown are (i) those where there are practically only European paupers in small numbers (there were no areas in which only European dependents were found in large numbers or even to a fair extent); (ii) those where there are practically only non-European dependents: (a) in small numbers, (b) to a fair extent, and (c) in large numbers; (iii) those where Europeans and non-Europeans are about equally represented, but are present (a) in small numbers, (b) to a fair extent, and (c) in large numbers; (iv) those where there are more Europeans than non-Europeans, the numbers of both groups of dependents being, however, small (in no area where Europeans predominated over non-Europeans was there a large or even a medium number of dependents); (v) those where the non-Europeans form the greater part of the mixed population, but where the whole dependent group is present (a) in small numbers, (b) to a fair extent, and (c) in large numbers. The blank portions of the map

¹ The original map is in the possession of the Department of Sociology, University of Stellenbosch.

indicate those parts of Capetown in which none of the dependents of the group investigated were found to live.

The main tendencies can be ascertained from the map, e.g. the Sea Point—Green Point area contains very few cases; Capetown Central (towards Signal Hill) shows a comparatively heavy grouping; in District Six and the Woodstock—Salt River area the clustering is at its heaviest, but thins out considerably towards Mowbray and Rondebosch, while it thickens in the south and south-easterly confines of Claremont, Kenilworth and Wynberg. In regard to the Wynberg area and beyond, it may be pointed out that many of the cases had to be omitted as no suitable map of a convenient size for reproduction could be procured. The omitted areas will be briefly discussed. The fact that these areas are not included in the map is not a very serious defect of the graphic presentation, since, as will be seen, the outlying areas did not exhibit any exceptional traits with regard to either the number or the constitution of the dependent population.

A convenient starting point for the detailed consideration of the tendencies would be the top end of Sea Point, where there are only a few instances of dependents, the majority of whom are Coloured. Sea Point, as a whole, is not a Coloured area, and the few cases of this racial group resident there are mostly in and around the vicinity of Tramway Road. Dependent persons are clearly the exception in Sea Point as a whole, as the inhabitants are practically solely European, and either wealthy or able to manage well on their own resources. The same applies to Three Anchor Bay and Green Point, where the few instances of pauperism can be passed over without further comment. Like Sea Point, these areas are practically entirely European. For the most part Green Point consists of playing-fields and parks. On a Sunday afternoon these are crowded with Coloured persons, it is true, but they mostly come from the central part of Capetown, where there are no recreation facilities.

A somewhat different picture, however, is presented on the right and left hand sides of Somerset Road (going towards the City). In this vicinity, consisting principally of Loader,

Jarvis, Dixon and De Smit streets on the right, and an area bounded by Buitengracht Street, the railway and Ebenezer Road on the left, is a fairly dense population of Coloured persons, with a sprinkling of Europeans. The buildings here, by no means inviting as a whole, are frequently interspersed with dilapidated and untidy structures, which convey the impression that they were originally business premises used for storage purposes, but are now to some extent occupied as dwellings, in most of which live hordes of Coloured persons.

Proceeding along Somerset Road and Waterkant Street into Bree Street and along the latter, one is in an area bounded by Carisbrook Street, Signal Hill and Long Street itself, where there is an even heavier clustering of dependents, both European and Coloured, living in the same streets and buildings. The upper parts of Church, Wale, Longmarket, Shortmarket, Hout, Castle Streets, etc., are to be found here. These last-mentioned, which, in their lower ends (i.e. towards Adderley Street) are important business centres, tend to be of slum appearance as they approach towards Signal Hill, e.g. off the very top end of Longmarket Street, which extends to the foot of Signal Hill, where there are a number of streets (Ella, August, Frederik, etc.) which are good examples of slum areas in this part of the city, most of the dwellings being badly neglected and occupied by Coloured persons. The whole area under discussion here includes such well-known poverty areas as Chiappini Street, Rose Street and Buitengracht Street, as well as Bloem, Pepper, Orphan, Jordaan and Bryant Streets, in which Europeans and Coloured live together, even in the same buildings.

The areas (Kloof) further south (towards the mountain side) are residential, and occupied mostly by a relatively prosperous European class. The same applies to the part known as the Gardens and Oranjezicht. Practically no dependency was found here.

In the angle formed by Hope and Roeland Streets are a few dependent cases, mostly European. This vicinity right up to the mountain side, is definitely European, and includes Devil's Peak and Vredenhoek Estates. In the Devil's Peak

Estate are a few European dependents, but none was found in the Vredenhoek Estate, which is in the process of being built up.

Adderley Street and its surrounding environs in the central part of Capetown consist almost entirely of business premises, the map showing, of course, no instances of pauperism here. This applies mostly for the vicinity from Long Street (in which there are only a few pauper cases) approximately up to Buitenkant Street (near the Castle).

From Buitenkant Street up to about Horstly, Arundel and Reform Streets is a heavy clustering of Coloured dependents, with hardly any dependent Europeans living there. The residential part of this vicinity is mostly occupied by the Coloured community, and includes the worst part of District Six. Some of the worst instances of slum areas are to be found here, e.g. in Ayre Street (off Tennant Street). The part known as Winter Gardens is particularly overcrowded, filthy, evil-smelling and dark. Horstly Street (also off Hanover Street) contains rows of untidy and dilapidated cottages. Tennant Street (off Sir Lowry Road, near the market) contains the well-known Mocke's Buildings, in which a very rough and dirty type resides. The street is a long business area and contains a cosmopolitan crowd, and usually groups of men are seen standing about: Eaton Place (off De Villiers Street, which is really a continuation of Tennant Street) consists of a row of houses which are usually filthy and overcrowded, and so also Prospect Avenue (off Stone Street), where a type of Coloured person with a very disreputable appearance resides. Perhaps one of the dirtiest and most undesirable streets in District Six is Albert Street (also off Stone Street). Taken at random, such places as Reform Street, Muir Street, Gore Street, Oak Street, and almost any other street in this vicinity represent areas in which the most appalling conditions prevail. The lower portion of Hanover Street, which is one of the principal business centres of District Six, is very narrow; many of the buildings are dirty and untidy of appearance. Horsburg Lane (off Hanover Street) is also a filthy place, housing a socially deficient Coloured element.

It is in the approximate vicinity of Horstly and Stuckeris Streets that the clustering of dependents becomes even thicker, with a heavier interspersing of Europeans. The population in this area as well as in the former adjacent one from De Waal Drive in the south and Sir Lowry Road in the north, is almost unbelievably overcrowded. The houses in this area are, however, mostly single-storey. Crowds of European and Coloured children are to be seen playing in the dirty, narrow streets on terms of great familiarity and friendship. These conditions are found to obtain approximately up to Mountain Road in the east. There are, however, certain exceptions, e.g. an area in the south from about Hey Street to Worcester Street, which solely contains non-European dependents, and a similar area further north, from about Pine Road to Victoria Walk. Stuckeris Street also contains some particularly bad instances of overcrowding, some of the buildings requiring the attention of the Health Department; the municipal stables are situated at the lower end. Eckard Street (parallel with Hanover Street) at the lower end is dirty and neglected, while some of the dwellings are inhabited by a poor type. Aspelng Street, of which the upper portion falls in this area, is a relatively important one, in which is situated a mission, a Malay mosque, and the municipal clinic. There many children are to be seen running wild, and in parts there is room for considerable improvement.

Between Sir Lowry Road, Victoria Road and the sea front are a number of streets where there is also a heavy clustering of dependents. The European recipients tend to predominate in the neighbourhood of Salt River, but nearer the city the Coloured dependents are in the majority. This represents an old part of the city which is as densely populated as District Six, the buildings consisting mostly of double-storey structures, the majority of which house large numbers of Europeans. Frequently European and Coloured are to be found dwelling in the same building. Towards the city end of Sir Lowry Road are such well-known quarters as Rosen Lane, Dormehl Lane and Dormehl Street, etc. Every place in this vicinity is easily reached, and is definitely of the slum

type—the houses are neglected, dirty, and untidy in appearance. Nelson Street at the lower end makes a similarly bad impression.

Still further south, in the vicinity between Albert Road and the railway line, are to be found such well-known poverty-stricken and congested areas as Foundry Road, London Road, and Junction Road. Here only Europeans were found.

The area between Albert Road, east of Salt River Road and Main Road, has a fairly dense population. Here European and non-European dependents were found in more or less equal proportions. The clustering is quite heavy. The nature of the environment is entirely different from that already described above. In this vicinity are no factories, as a rule, such as are found in practically each of the areas already described, while the type of dwelling is mostly single-storey. The surroundings are on the whole cleaner, and the impression one gains is that this is a better residential quarter. The possibility suggests itself that these dependents were persons who were earning good wages, but were hard hit by the depression. Adjoining this area towards the east, i.e. between Scott Street and Collingwood Street, there is apparently a relatively prosperous area, with practically no dependents. To the south of the upper portion of Victoria Road and its continuation as Main Road, there is also an adjoining prosperous residential area, where no dependents were found.

From Collingwood and Milton Streets to Wrensch Road is to be found a well populated area of Europeans, with a sprinkling of Coloureds. Here were a fair number of European dependents, with a smaller number of non-European dependents interspersed.

From here to Kenilworth is an area which may be described as, on the whole, relatively prosperous, although there is a continuous distribution of isolated cases of chiefly Coloured dependents.

Kenilworth itself, which may be described as a fairly good residential area, nevertheless contains an amazingly large number of Coloured dependents spread over the whole area.

Only in a small portion of Kenilworth, namely, between Second Avenue and Third Avenue, were a few European cases found.

In certain part of the northern and more crowded confines of Wynberg are also many Coloured dependents, as well as between Prospect Hill Road and Main Road. On both sides of the railway, namely in the vicinity of Batts Road and Constantia Road, are to be found a group of dependent Europeans and Coloured persons in the same vicinity.

In the Maitland and Brooklyn areas there are approximately just as many dependent European and Coloured cases. They are distributed just as densely as in Wynberg, but not nearly so densely as in the Woodstock—Salt River areas. The population here is not so dense in comparison with the other areas, while the sanitary and health conditions, generally speaking, are more favourable.

On the whole, it appears that the more densely populated and overcrowded areas (e.g. District Six, Woodstock, and Salt River) are also those in which the clustering of dependent units, European and Coloured, is the heaviest, the housing and sanitary conditions the worst, and the intermingling of European and Coloured within the same vicinity and buildings the most frequent.

There were a number of outlying areas which could not be included in the distribution chart (see Appendix No. 3). In most of these cases the number of dependents was not exceptionally large, but everywhere the non-European dependents far exceeded the Europeans in the outlying areas. The largest number of cases were in Belgravia, Lansdowne, Jamestown, Kensington, Rylands, Plumstead, Heathfield, Athlone, Retreat, Crawford, and further extensions of Brooklyn. If their full population is taken into consideration, the clustering may be compared with that of the Maitland area in Map No. 1.

CHAPTER IV.

THE PLACE OF ORIGIN AND MIGRATION OF DEPENDENTS.

It is sometimes said that there is an influx into Capetown of persons who become dependent soon after their arrival, and that so the heavy financial burdens of local charitable organisations are increased. Such a statement, if correct, would reflect a position which ought to be dealt with, since it would be serious if a large number of the dependents who applied for charitable assistance were persons who had recently moved into the city. Though it is generally believed by social workers in Capetown that the dependency situation is in some way adversely affected by a drift to the city, charities have not hitherto supported their contentions by reference to the actual facts of the situation.

An effort will be made to discuss certain data which were obtained in connection with the influx into Capetown. It was found possible to collect data only on the following points: (i) the place of origin and proportion of dependents of the Board of Aid who had migrated into Capetown; (ii) their last places of residence and previous abodes, and (iii) the period of residence in Capetown.

It would also have been valuable to know, in estimating the effects of the drift on the dependency situation, how soon dependency resulted after migration into the city. This problem was not specifically investigated, but the data allow certain indications to be made.

The data used here were collected by means of the special survey; 272 European and 842 non-European forms could be used. The sampling ratios were 39 % in the case of Europeans and about 34 % in the case of non-Europeans. These sampling ratios naturally refer to cases. In this portion of the study, however, it was found necessary to deal not with cases as units but with individuals. The individuals selected were both parents in family cases, and the individuals con-

cerned in single cases. The reason for this is obvious. Since the family unit consists of members who may have been born in different places, plotting birthplaces on the map must take into consideration individuals and not cases as such. In regard to the places of previous residence, only the places between the birthplace and last abode were taken into consideration in filling in the maps. Six maps were drawn, three for Europeans and three for non-Europeans.

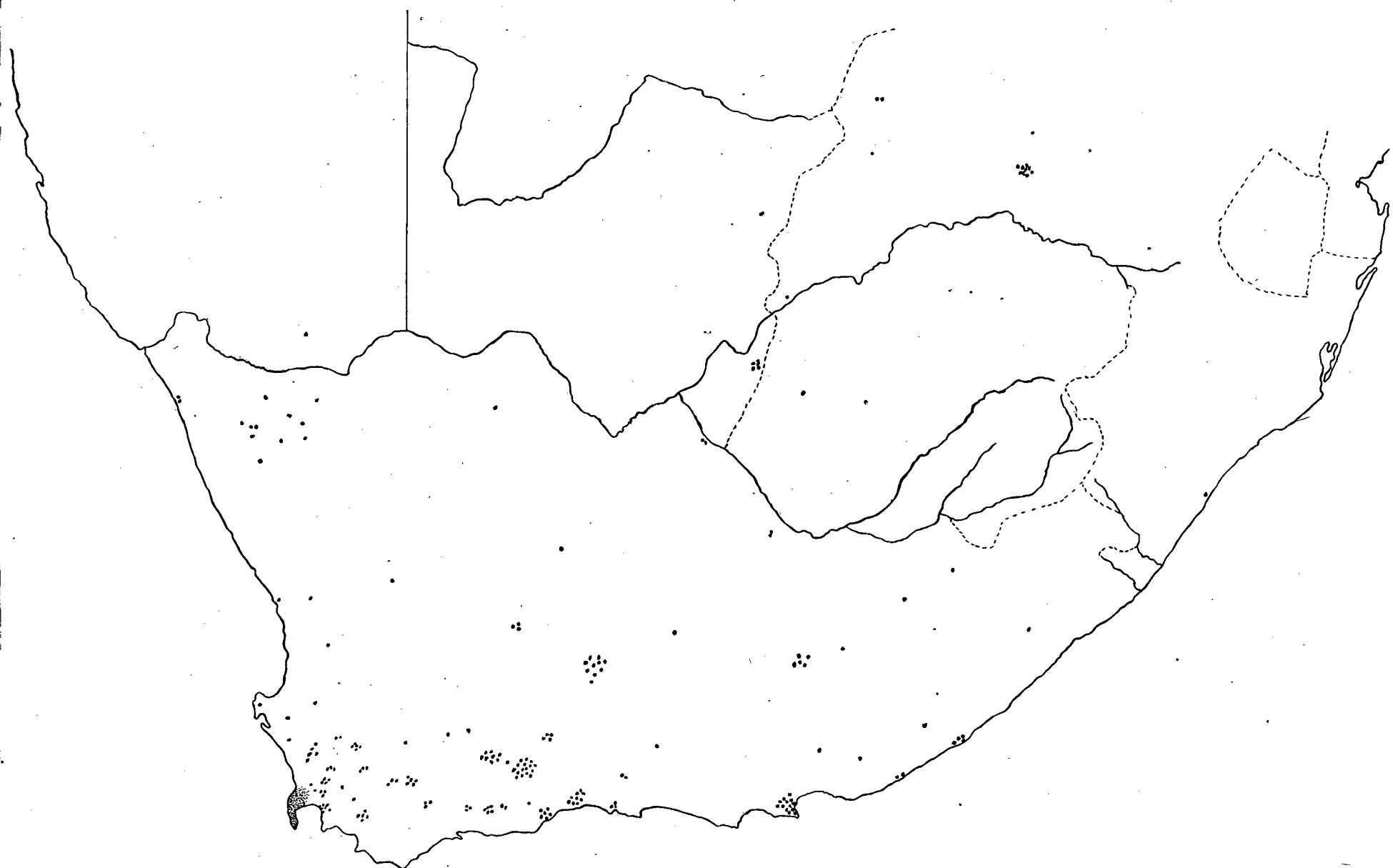
THE PLACES OF ORIGIN OF EUROPEAN DEPENDENTS.

The map was based (see Map No. 2) on 336 birthplaces which are indicated; 95 birthplaces outside the Union, including 39 in England, had naturally to be left out. For $36\% \pm 2.5$ of the individuals the birthplace was Capetown itself, but the remainder were born in other parts of the Union.

The map indicates that the vast majority of birthplaces outside Capetown are distributed fairly evenly over the districts nearer Capetown, such as Paarl, Stellenbosch, Somerset West and Caledon. Next in importance as birthplaces of these Capetown dependents are such places as Oudtshoorn, Ladismith, Mossel Bay and Laingsburg. These areas, particularly the first three, are well-known for the generally poor economic conditions that have been prevalent since the fall in ostrich feather values. Many prominent men in these areas claim that the districts are still suffering severely in consequence of this.

Some of the larger cities in the Cape Province, like Port Elizabeth and Kimberley, also provide a fair number of Capetown dependents, especially Port Elizabeth. Certain far-off rural areas, such as Namaqualand, even have a certain significance for the dependency situation in Capetown.

The Eastern Province, the Orange Free State, and the other provinces do not contribute largely to the dependency in Capetown, although a sprinkling of cases do come from certain localities in these provinces, even from Johannesburg. The larger cities in these areas would be drawing their own quotas of dependents from the proximate parts which they serve.



MAP No. 2—THE BIRTHPLACES OF EUROPEAN DEPENDENTS

PLACES OF ORIGIN OF NON-EUROPEANS.

The map (No. 3) was based on 1,123 birthplaces. In 43 instances the dependents were born outside the Union; 85 individuals did not state the place of birth clearly enough for localisation. 54 % \pm 1·6 of the non-European dependents were born in Capetown, and the remainder in other parts of the country.

Districts and villages in the immediate vicinity of Capetown ranked highest in importance as places of birth. Such towns and districts as Oudtshoorn, Ladismith, Mossel Bay, however, have certainly contributed to Coloured dependency in Capetown. The larger cities like Port Elizabeth, Kimberley, Durban, East London and Johannesburg also figured fairly often as places of origin. The Eastern Province, Natal, Free State and the Transvaal, apart from towns such as Durban and Johannesburg, show practically no birthplaces.

On the whole there is a marked similarity between the places of origin of European and non-European dependents in Capetown; i.e. a large proportion were born in Capetown; and there is a strong localisation of birthplaces in towns and districts nearer to Capetown, but the numbers become less the further the locality is removed from the city, with the exception of certain well-known poor districts. There is a noticeable difference between the two racial groups in the concentration points, the Europeans tending to come from towns and districts further from Capetown than those which represent the places of origin of non-Europeans.

THE FORM OF THE MIGRATION.

The question arose as to whether the dependents not born in Capetown had migrated to the city directly or by stages. This could be answered (i) by comparing the birthplaces with the last places of residence prior to arrival in Capetown, and (ii) by investigating the number and distribution of intermediate places of residence between the birthplaces and Capetown.

In Maps No. 4 and No. 5 the last places of residence before leaving for Capetown are shown for Europeans and non-Europeans separately. The clustering indicates the distribu-

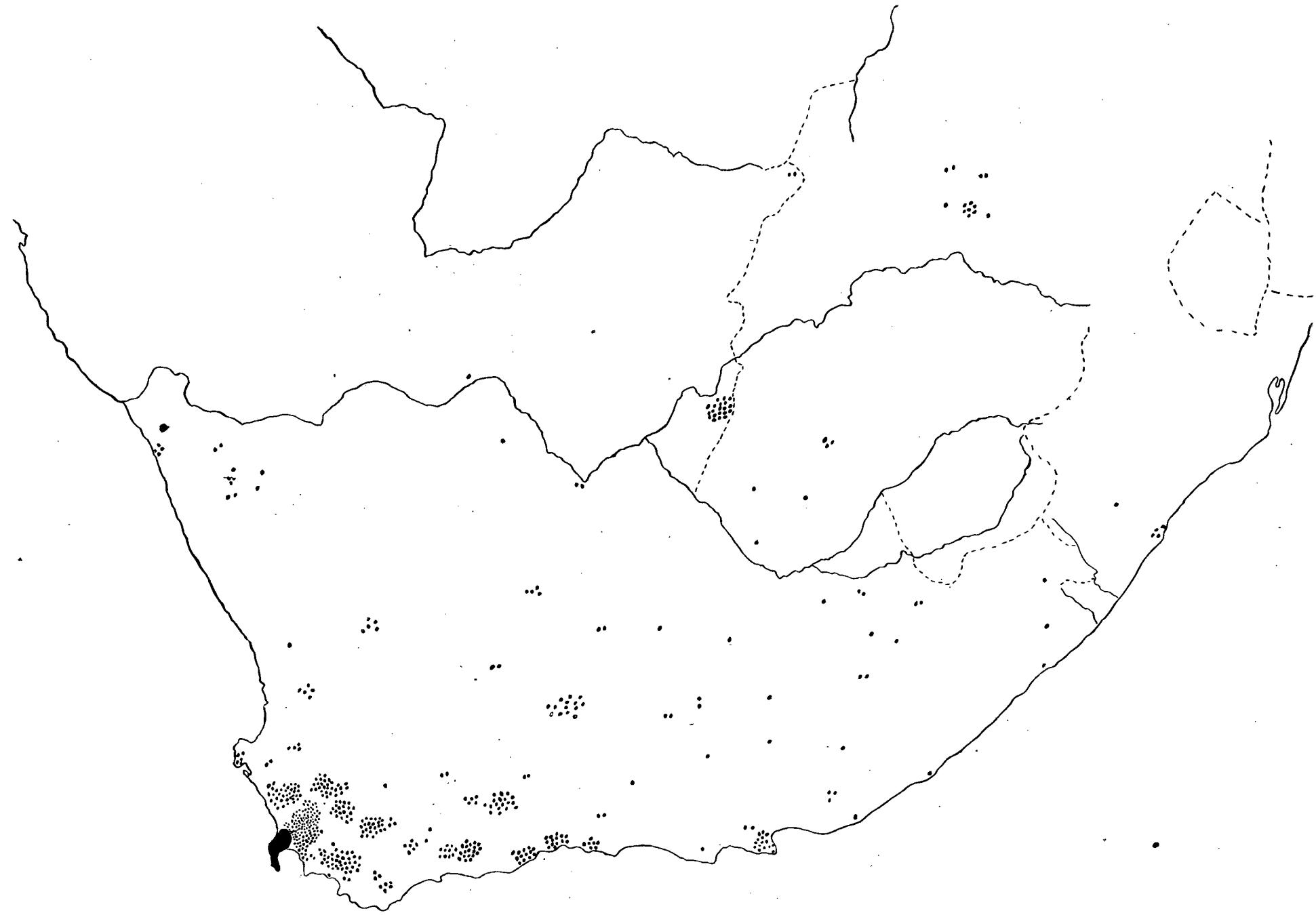
tion of dependents over such former places of residence. Both maps demonstrate that the last places of residence were very similar to the places of birth. They were mostly in the districts nearer Capetown and in certain other further outlying areas such as George, Oudtshoorn and Mossel Bay, etc. The main difference between Europeans and non-Europeans, as far as last places of residence are concerned, was that the non-Europeans come from the immediate vicinity of Capetown to a relatively greater extent than the Europeans did. This, however, was also true of the birthplaces. It will be seen, therefore, that the localities of the last places of residence as well as their relative importance as such, agree in all main respects with the situation revealed in connection with birthplaces as shown in Maps No. 2 and No. 3.

The investigation of intermediate places of residence, i.e., between the birthplaces and Capetown, showed that gradual migration through a large number of places of abode did not occur very often. Some dependents, however, lived in one or two towns other than their birthplace before reaching Capetown. Even these cases were relatively few, namely 89 out of the 216 European migrants, and 57 out of 517 non-Europeans. This also supports the suggestion that *on the whole the Capetown dependents from outside areas were not confirmed wanderers*. As far as places of residence are concerned this was even truer of the non-European dependents in Capetown.

It is interesting to note that the places in which intermediate residence was taken up were not necessarily near Capetown, but were also spread over the whole country (see Maps No. 6 and No. 7). There is even an indication that some moved to other cities, such as Johannesburg, before finally settling in Capetown.

THE PERIOD OF RESIDENCE OF DEPENDENTS IN CAPETOWN.

An attempt was made to find out the period of residence in Capetown of those not born there. Even though this did not indicate how soon after arrival the applicants became dependent, it would show how long certain dependents had been in Capetown at the time of the investigation, and therefore a maximum period within which they had become dependent.



MAP No. 3—THE BIRTHPLACES OF NON-EUROPEAN DEPENDENTS

The dependents who were not born in Capetown were classified according to what they stated to be their periods of residence.

TABLE NO. IX. PERIOD IN YEARS OF RESIDENCE IN CAPETOWN OF DEPENDENTS COMING FROM OTHER PARTS OF THE UNION OF SOUTH AFRICA.

<i>Period in Years of Residence</i>	<i>Europeans</i>	<i>non-Europeans</i>
Less than 1 year . . .	6% \pm 1.7	4% \pm .9
Between 1 and 5 years : .	21% \pm 2.8	11% \pm 1.4
Between 6 and 10 years . .	20% \pm 2.8	19% \pm 1.9
More than 10 years . .	53% \pm 3.5	66% \pm 2.2
<i>Total percent.</i>	100%	100%

For both racial groups the majority of persons not born in Capetown had been resident here for more than 10 years. The majority was not large in the case of the Europeans, but more than two-thirds of the non-Europeans who came from elsewhere had been resident for the longer period. It is important to note that nearly 27 % of the Europeans who came to Capetown from elsewhere had been living here for less than five years when they were found to be dependent at the time of the enquiry. Their dependency might have commenced some time before the investigation. Even a large portion of the 20 % who had been in Capetown between 6-10 years at the time of the enquiry when they were found to be dependent might have been relying on charity for a long time. It is clear that roughly 25 % of the Europeans and about 15 % of the non-Europeans, coming from other parts of the Union, became dependent within a relatively short time of their arrival. Since it is estimated that 64 % of the Europeans and 46 % of the non-Europeans at present dependent on the Board of Aid were born outside Capetown, *this means that approximately 17% of the European dependents investigated, and about 7% of the non-Europeans were chiefly migrants who became dependent within a fairly short time after arrival.* In the face of these figures there appears to be some justification for the statement that Capetown charities frequently have to carry burdens which could, perhaps, be avoided by a policy of greater co-ordination with inland places.

CHAPTER V.

THE AGE, SEX, AND RACE OF DEPENDENTS.

Certain characteristics such as the age, sex, and race of dependents can easily be ascertained without much doubt about their authenticity. While such common facts may not seem to be very important, the characterisation of the members of a social group can hardly be looked upon as complete if these factors are ignored. Consequently the first object of the present discussion is to give a description of the dependents in terms of these three common attributes.

It does not follow that because certain facts are easily ascertainable and, therefore, appear to be superficial, they have no important relationship to dependency. For example, reliance on charity at an early age may tend to pauperise to a greater degree than dependency for the first time in later life, or membership of the Coloured race may be a predisposing, even if it is not an active, cause of dependency. A second object, therefore, will be to investigate whether there is any relation between the age, sex, and race of dependents and the development of dependency.

Finally, anyone who is interested in combating dependency, either from the standpoint of social work or of general social policy, may reasonably put the question whether different types of dependents require distinctive treatment. Since the attributes to be discussed here are sometimes used as the bases of classification, a certain amount of interest should be attached to an analysis of the group of dependents according to age, sex, and race. No attempt will be made here, however, to discuss such distinctions from the point of view of their value for treatment, e.g. whether the greater dependency of one racial group should affect the method of providing charity. At the same time the distribution of these characteristics among the dependent group

investigated will be given as clearly as possible, and may be used for deductions of a more practical nature if this is desired.

THE AGES OF THE CHIEF DEPENDENTS.

The percentage distribution of the European and non-European dependents according to their age was first calculated (see Table No. X.). The age groups were taken in ranges of 10 years with the exception of dependents above 60, who were divided into two classes, namely those between 60 and 65, and those 65 years and over. The purpose of this latter deviation from the 10-year periods was to distinguish between old persons above 60 and 65 respectively, the latter being the age at which the old age pension is obtainable.

TABLE NO. X. THE PERCENTAGE DISTRIBUTION ACCORDING TO AGE OF THE VARIOUS CLASSES OF DEPENDENTS.

	<i>Age in Years</i>						<i>Percent- age Total</i>
	20-29	30-39	40-49	50-59	60-64	65-	
Eur. Males	13·43	21·56	15·00	14·84	7·01	4·86	
Eur. Females	1·29	4·58	4·29	6·28	3·42	3·43	
	14·72	26·14	19·29	21·12	10·43	8·29	
							99·99
Non-Eur. Males	14·11	25·27	15·24	9·29	4·81	5·61	
Non-Eur. Females	2·58	4·99	5·57	3·87	3·55	4·31	
	16·69	30·26	20·81	13·16	8·36	9·92	
							99·60

Table No. X. is based on all the dependents concerned in the investigation as determined by the yellow card index system.

According to the age distributions in this table, it is clear that a distinction can be made between early and late dependency. If one chooses to define early dependency arbitrarily as dependency while the chief recipient is below 40 years, and late dependency as occurring above 50, then the following distribution is found. Approximately 40 % of the

European and just below 50 % of the non-European dependents are below 40 years of age, and about 40 % of the Europeans and just above 30 % of the non-Europeans are above 50 years of age. The intermediate age class contains in each case about 20 % of the dependents. Special attention can consequently be given to these two classes, viz. the early and late dependency group.

Before discussing these groups, however, it will be useful to discover the relative meaning of these percentages when they are compared with the distribution of the age groups amongst the ordinary population of Capetown (see Table No. XI.).

TABLE NO. XI. THE PERCENTAGE DISTRIBUTION OF THE AGE GROUPS AMONGST THE ORDINARY POPULATION OF CAPETOWN.

<i>Age</i>	<i>Europeans¹</i>	<i>non-Europeans¹</i>
20 — 29	32·62	38·51
30 — 39	21·58	25·55
40 — 49	17·06	18·08
50 — 59	15·53	10·57
60 — 64	5·22	3·0
65 —	7·88	4·28
<i>Total</i>	99·89	99·99

From this it will be seen that, relative to the size of the age groups for the ordinary population, there is a continual increase in the proportion of dependents. E.g., between the ages 40 to 49 and 50 to 59 the actual percentages of European dependents are 19·29 and 21·12 of the dependency group. This slight difference assumes greater importance when it is seen that there is a decrease in the percentages of people found amongst the ordinary population in these two age groups. So also the figure of 10·43 % of the group of dependents for the age class 60-64, which does not loom so large when compared with the other percentages of the dependency age classes (even if the fact is taken into consideration that

¹ Figures for the Europeans taken from the 1931 Census and for non-Europeans from the 1921 Census, the non-Europeans not having been included in the subsequent Census.

this is a 5 instead of a 10 year class interval), seems to be very large indeed when the relative size of that age group in the ordinary population is taken into consideration. When the percentage of dependents above 65 years of age is compared with the preceding age group there does not seem to be much difference, but when the relative size of the ordinary population above 65 is taken into account it will be seen that there is actually a decrease in the proportion of dependency. This decrease can readily be understood, since charitable grants are often withheld from persons in receipt of old age pensions. A similar comparison can be made in the case of the non-Europeans, where the main tendencies are found to be more or less the same. There is just this difference, that even after the age of 65 there does not seem to be the same proportional decrease of dependents among the non-Europeans as for the Europeans.

Perhaps it is as well to point at this stage to the exceptionally high degree of dependency which exists amongst Europeans and non-Europeans between the ages 30-39, even if the relative size of that group in the ordinary population is taken into consideration. This may perhaps be explained by the fact that at this age the children of the family are usually small and do not contribute anything to the family income, and prevent the mother from doing so. At an earlier age there are often fewer children, while at a later age the children may be absent or have become assets.

Late Dependency. According to the Table No. X. in approximately 40 % of the European and 30 % of the non-European cases the chief dependents were 50 years or over. Of these roughly 20 % and 13 % respectively were between 50 and 60 years, and approximately 18 % of both racial groups were 60 years of age and over.

It is a well-known fact that once a person has reached the age of 50 and becomes unemployed the mere fact of age makes it difficult to procure employment. Naturally the age counts still more against those who are 60 years or older. This means that under certain circumstances age can definitely become a causal factor in the development of poverty.

and dependency. For persons of younger years the problem is not the same as for those who have reached or are approaching an age at which their economic value as a wage-earning unit is considerably depreciated. While it is difficult, since conditions vary considerably from one individual and another, to determine an age limit at which the human unit becomes incapable of self-maintenance by earning, it is possible, by the attitude of employers, to arrive at an approximate delimitation. It should be remembered that a man's labour and ability are marketable commodities. Employers are reluctant to engage for the first time unemployed persons who are in the early fifties. More difficult to place in suitable employment is the person who is in the late fifties, while it is well-nigh impossible to procure even light work for anyone 60 years of age and over.

Early Dependency. At the same time there is another aspect of the problem of the age factor in its relation to dependency. While under certain circumstances old age may be regarded as a sufficiently good reason for the dispensation of charitable assistance, there is the other question of early dependency.

According to Table No. X. in about 40 % of the European and nearly 50 % of the non-European cases the chief dependents were below 40 years of age. In each case one-third of this relatively young group were even below 30 years of age. This means that quite a considerable proportion of the chief dependents of both racial groups were below 30—in fact, about 15 % of all dependents. Nearly twice as many, however, fell in the age class 30-39, which may also be looked upon as very young to be dependent.

This early dependency may easily lead to habitual pauperism. There is the risk that an early loss of self-reliance may lead to a life of periodic and even prolonged voluntary subsistence on the funds of charitable organisations unless prophylactic methods are adopted. Applicants who seek relief for the first time when they are no longer able to compete on the open labour market because of their age do so reluctantly, and seldom cease to feel ashamed of their pauperism.



MAP NO. 5—LAST PLACE OF RESIDENCE OF NON-EUROPEAN DEPENDENTS

On the other hand it has been a frequent experience of social workers to note the rapidity of the change of attitude on the part of young persons who have been in receipt of assistance before they have firmly established habits of independence. *While the risk of pauperisation attaches to almost any age, an approximate limit could be determined by stating that after 50 years the risk becomes less, since habits of industry will long since have been established unless there has been undue dependence, but that the danger tends to become proportionally greater among the younger age groups.*

Age of first Dependency. Table No. X., however, shows the ages, at the time of the enquiry, of recipients who were then dependent, and who may have been in receipt of charity either for only a short time or for many years. The age at which they first became dependent is submerged, but should not be overlooked. Information in regard to the age of first dependency was not available on the yellow cards. A random sample of 738 European and 972 non-European cases was taken from the thousands of "dead" files¹ of the Board of Aid, and a frequency table was constructed according to the ages of these recipients when they first became dependent on the Board (see Table No. XII.).

Very few chief recipients themselves received assistance before their twentieth year, though of course many may have belonged to families who were given charity: for example, in the name of the father or mother. Approximately 25 %, or about one-quarter of the Europeans, and 22.94 %, or a little more than one-fifth of the non-Europeans, in the first sample first became dependent before they had attained their thirtieth year, i.e. they had found it necessary to appeal to charity at an early age in their career. A little over 30 % of the Europeans and almost 40 % of the non-Europeans found it necessary to become dependent between the ages of 30 and 44. 27.90 % of the Europeans and 23.24 % of the non-Europeans became dependent between the ages of 44 and 59 years. 14.46 % Europeans and 15.22 % non-Europeans were given

¹ The "dead" files refer to the case papers of cases no longer receiving charity from this organisation.

assistance for the first time after the attainment of their sixtieth year.

TABLE NO. XII. THE PERCENTAGE DISTRIBUTION OF CHIEF DEPENDENTS ACCORDING TO THE AGE IN YEARS WHEN RELIEF WAS FIRST RECEIVED FROM THE BOARD OF AID.

<i>Age in Years</i>	<i>European</i>	<i>non-European</i>
15 — 19	1·63 ± .4	1·03 ± .3
20 — 24	10·44 ± 1·1	6·58 ± .8
25 — 29	13·56 ± 1·4	15·33 ± 1·1
30 — 34	12·46 ± 1·3	15·13 ± 1·1
35 — 39	9·90 ± 1·1	13·06 ± 1·0
40 — 44	9·63 ± 1·1	10·39 ± .9
45 — 49	7·72 ± .9	9·36 ± .9
50 — 54	10·43 ± 1·1	7·92 ± .8
55 — 59	9·75 ± 1·1	5·96 ± .7
60 +	14·46 ± 1·4	15·22 ± 1·1
<i>Percentage — Total</i>	99·98	99·98

If the median ages are calculated for the distributions in Table XII., it is found that the median age at which both Europeans and non-Europeans become dependent is approximately 40 years.¹ Since the significance of the median lies in the fact that it indicates the mid-point of a distribution, it is evident that in the case of both racial groups 50 % became dependent for the first time before they had reached their fortieth year.

It is noteworthy in regard to both racial groups that the highest proportion for a single age class of first dependency was between 25 and 29 years, though the extent of first dependency at that age was somewhat higher for the non-European group. From that point a gradual decrease can be seen in the percentages of those becoming dependent during the successive stages, but throughout the percentages of the non-Europeans remain higher than those of the Europeans. This holds true until the age of 50, when the percentages continue to decrease for the non-Europeans, but again increase in the case of the Europeans. *The whole tendency which can be perceived is for Europeans and non-Europeans*

¹ The median age was calculated by the method used by Thurston: "The Fundamentals of Statistics," p. 79. All medians in this investigation were calculated in this manner.



MAP NO. 6.—INTERMEDIATE PLACES OF RESIDENCE BETWEEN BIRTHPLACES AND CAPETOWN—EUROPEAN DEPENDENTS

to become dependent at a fairly early age, but more so in the case of the non-Europeans. This tendency to become dependent decreases with age for both racial groups until it increases again, in the case of Europeans, after 50.

It is interesting to compare this tendency with the finding on pages 50 and 51, that when comparing age groups there is a continual increase in the proportion of the Board of Aid dependents in the population of the city. When the two findings are taken together the only conclusion to be reached is that *once a person has become dependent, his dependency very often persists.* This supports the contention made in connection with early dependency, that pauperisation is very often the result.

Since the sample includes cases which became dependent on charity during the depression years, it is quite possible that the percentages for the younger age groups are larger than they would be in normal times. The percentage of those who become dependent in their younger years is, however, sufficiently large in both racial groups to warrant special attention from the point of view of rehabilitative or preventive treatment.

SEX AND DEPENDENCY.

Even without a careful analysis of the data available, it is possible to recognise the fact that no important direct relationship between sex and dependency will be found. The classification of the data on dependency in terms of chief recipients means that most cases of dependency are registered in the name of the *father* of the family. In as much as *families* constitute the majority of dependency units, and since usually the father is alive, the cases in which the chief recipient is a woman will be the exception rather than the rule. Such families are those of the lone-mother type.¹ Consequently it is not sex, but other social factors which are chiefly responsible for the fact that both in the case of Europeans and non-Europeans about three-quarters of the chief recipients are given as males and about one-quarter as

¹ See L. Verwoerd: "Die Alleenlopende Moeder as 'n Ontvanger van Liefdadigheid."

females (see Table No. X.). The causes of the dependency lie within the whole family situation, and are not the result of the masculinity of the father. The relation between marital conditions and dependency will be dealt with later (see Chapter VII.).

There is, however, one respect in which a comparison between the two sexes can be made. Are the females and male dependents distributed over the age groups in exactly the same way? This question can best be answered by comparing the percentages for the age groups of male and female dependents in Table X., while taking into consideration the percentages which members of these age and sex groups form of the whole population of the city. For the purpose of such comparison Table No. XIII. was constructed.

TABLE NO. XIII. THE PERCENTAGE DISTRIBUTION ACCORDING TO AGE, SEX, AND RACE, OF THE DEPENDENCY GROUP AND THE POPULATION OF CAPE TOWN.

Europeans			non-Europeans		
Age Groups	Dependency Group	Population in C.T.	Age Groups	Dependency Group	Population in C.T.
Males			Males		
20 - 29	13·43	15·90	20 - 29	14·11	16·47
30 - 39	21·56	10·09	30 - 39	25·27	12·40
40 - 49	15·00	7·86	40 - 49	15·24	9·28
50 - 59	14·84	7·98	50 - 59	9·29	5·24
60 - 64	7·01	2·69	60 - 64	4·81	1·40
65 +	4·86	3·52	65 +	5·61	1·92
	76·70	48·04		74·33	46·71
Females			Females		
20 - 29	1·29	16·72	20 - 29	2·58	22·03
30 - 39	4·58	11·49	30 - 39	4·99	13·12
40 - 49	4·29	9·20	40 - 49	5·57	8·83
50 - 59	6·28	7·55	50 - 59	3·87	5·24
60 - 64	3·42	2·55	60 - 64	3·55	1·63
65 +	3·43	4·36	65 +	4·31	2·34
	23·29	51·87		24·87	53·19

In the case of the Europeans it is quite clear that for the age groups 30-64 the percentages of the males form of the dependency group are nearly double the percentage they form of the city population. This is, of course, due to the

above-mentioned fact that the men figure as chief recipients although it is they who represent the family as a whole. In the case of the female dependents, on the other hand, the percentage which the dependents form of the dependency group is smaller than for the city population. This difference is due to the same reason given for the relatively larger extent in the case of the males.

The main point to be made here, however, is that in the case of the men throughout the age groups 30-64 the extent of dependency relatively to the size of these age groups in the whole population remains approximately the same. In the case of the women, however, while the percentages of dependents in the age groups 30-39 and 40-49 are approximately half the percentages of females in the same age classes in the city population, the percentages approximate to one another for the age class 50-59, and become the same for the age class 60-64. This means that relatively to the frequencies of the age classes in the city population the extent of female dependency within the dependent group increases with age more particularly between 50 and 64. In this respect the females differ from the males, where, as was seen above, the relative position remains more or less constant throughout the age classes 30-64. It will be seen from Table No. XIII. that the same holds true of the non-European.

This fact, that amongst the female chief dependents (in contrast with the males) there are relatively more belonging to the higher age groups, can also be deduced from a comparison of the average ages (see Table No. XIV.).

TABLE NO. XIV. AVERAGE AGES OF THE CHIEF RECIPIENTS.

	Age in Years	
	Europeans	non-Europeans
Male chief dependents . . .	43·2 ± ·3	41·4 ± ·2
Female chief dependents . . .	50·0 ± ·3	48·2 ± ·3
All dependents . . .	44·2 ± ·3	43·1 ± ·3

In both the European and non-European groups the female chief dependents are, on the average, older than the males.

In fact, when one compares the percentage which the male chief recipients of 60 years and over forms of the male dependent group with the percentage the female chief recipients of 60 years and over form of the female dependency group, it is seen that for both Europeans and non-Europeans a larger proportion of the female chief dependents belong to this higher age group (see Table No. XV.).

TABLE NO. XV. THE PERCENTAGE DISTRIBUTION OF THE MALE AND FEMALE DEPENDENTS ACCORDING TO THE VARIOUS AGE GROUPS.

	Age Groups			Total
	Under 50	50 - 59	60 -	
Europeans				
Males	65	19	16	100
Females	44	27	29	100
non-Europeans				
Males	74	12	14	100
Females	52	16	32	100

Similarly in the case of both Europeans and non-Europeans the females between 50 and 59 years form a bigger proportion of the female chief recipient group than the males of the same age form of the male chief recipient group. The opposite, however, is true of both racial groups for the recipients below 50.

It seems, therefore, that the only noteworthy difference as far as the dependency of males and females is concerned is to be found in the fact that there is a relatively stronger tendency for women to become dependent after the age of 50. The chances are, of course, greater that the women will be widowed, divorced, separated or deserted at that age, and will consequently figure as the chief recipients instead of the husband. The position is, therefore, that it is not the sex of males and females which is the causal factor of their dependency, but the family relationships and conditions which lead to dependency among males and females of the lower as well as the higher age groups. It is true that men and women become more and more unemployable after the age of 50.



MAP No. 7—INTERMEDIATE PLACES OF RESIDENCE BETWEEN BIRTHPLACES AND CAPETOWN—NON-EUROPEAN DEPENDENTS

While this may be truer of women than men, it cannot be proved here, though this would not demonstrate a causal relationship between sex and dependency, but between age and dependency.

It is not intended to argue here that with other material sex will not be found as a possible cause of dependency. It is not possible, however, to analyse the causal importance of sex in the case of these family cases of dependency, where the indication of the sex of the chief recipient has chiefly a formal value. A comparison of cases of single dependents might have more value in discovering whether sex in such cases is related to the extent of dependency. The number of such cases, however, is too small to allow far-reaching conclusions, and besides there is a prejudice in favour of assisting families and only aged single dependents, which would make such data unreliable.

RACE AND DEPENDENCY.

One question that must be raised is whether race is a causal factor of dependency. Naturally this problem can only be investigated here with regard to Europeans and non-Europeans (i.e. practically solely Cape Coloured and Malays). It is possible in this connection to make use of available material, since the Board of Aid deals with both racial groups.

If the ratio of the European to the non-European recipients of relief from this organisation is determined, it is possible that this will serve as an indication of the proportion of European to non-European dependents in the city. It was found that the total number of Europeans sharing in the Board's charity was 22 % of all the recipients, as compared with 78 % non-Europeans. These percentages are true of the number of *cases*, but remain exactly the same if the actual number of dependents (i.e. man, woman and child) sharing in the benefits dispensed are taken into consideration. The ratio of European to non-European dependents of the Board of Aid, therefore, is roughly 1:4. Since the Board of Aid is one of the largest organisations in Capetown dealing with dependency irrespective of race, and since very few bodies deal with Europeans or non-Europeans only, the chances are

that this proportion is true of all dependents in the city. This would seem to mean that very many more dependents are non-European, i.e. roughly four-fifths of all the cases, or of all the dependents sharing the benefits of charity. On the other hand, if the Europeans were to form a much smaller proportion of the population of the city than the non-Europeans, then the apparently larger proportion of non-European dependents would not be so significant. In actual fact, however, the European population of the Cape-town municipal area forms 52 % of the whole population,¹ and the non-Europeans the other 48 %. *Consequently it is quite clear that, even when the relative sizes of the European and non-European population of the city is taken into consideration, the dependency amongst non-Europeans is found to be about four times that of the Europeans.* The proportion of the Europeans sharing in the Board's charity was found to be 2·3 % of the entire European population in Capetown, the figure for the non-Europeans being 8·7 % of the entire non-European population of the city.

These figures naturally do not suggest that there are racial or biological attributes which result in greater dependency among the non-Europeans. This may be so, but on the other hand the greater extent of dependency amongst the Coloured and Malays may also possibly be ascribed largely to the social conditions under which these racial groups grow up and live. Very little doubt need be entertained that the extent of dependency is very much higher amongst these non-Europeans than the Europeans—whatever the circumstances which are responsible for this fact may be, i.e. traditional or contemporary, social or educational, biological or economic.

¹ Vide Mayor's Minute: City of Capetown, 1933. Report of the M.O.H., Section ii., p. 15. The figures for the Europeans are based on the 1931 Census, and those for non-Europeans on the 1921 Census. There was no Census of non-Europeans in 1931.

CHAPTER VI.

THE RECIPIENT AND MARRIAGE.

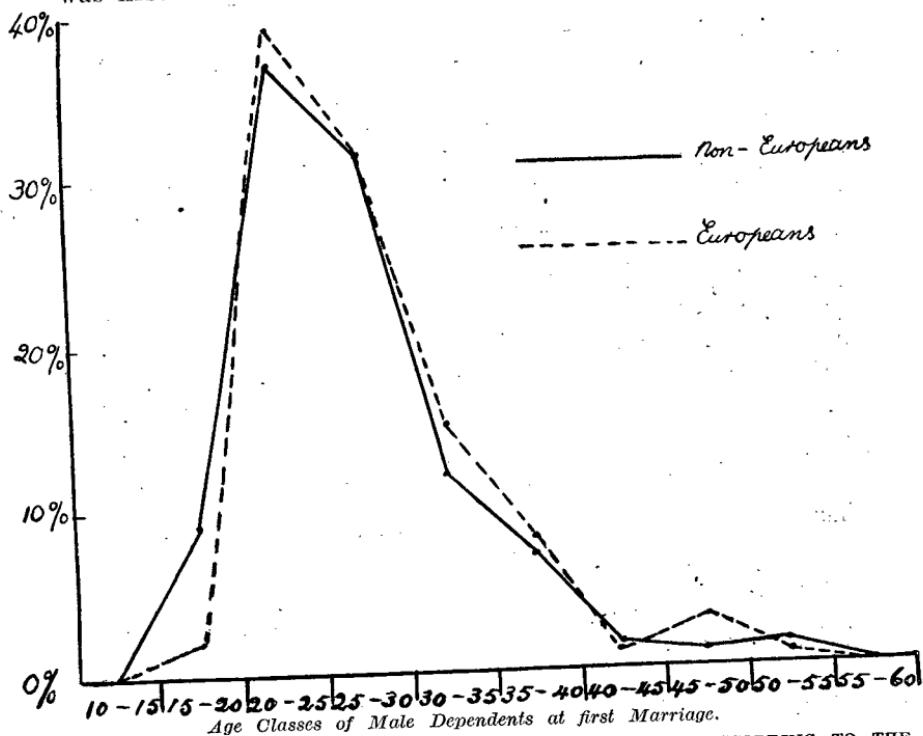
An aspect of marital life that seems to be causally connected with poverty is the age at which dependents first marry. There is the possibility that the assumption of marital responsibility early in life may afford some explanation of the commencement of a family's dependency. An investigation of the existence of tendencies in connection with the age of marriage is accordingly necessary. There is also the possibility that difference in the relative ages of married couples may be of importance—perhaps indirectly—in the development of poverty and dependency. Such age differences will, therefore, be investigated. Even the frequency of marriage amongst the poorer classes may be related to dependency, and will have to be taken into consideration. Finally, in a city like Capetown, the poorer Europeans and Coloured are constrained to live together in close proximity in the same streets and even houses. Intermarriage takes place, and it is also necessary to consider whether this fact has any influence on the development of dependency.

THE AGE OF FIRST MARRIAGE OF MALE DEPENDENTS.

Marriage dates or periods were contained in the forms S 1. Where the duration of marriage was given, the ages of first marriage were derived by subtracting the necessary number of years from the ages of the recipients at the time of the filling in of the forms. A large number of forms contained no information, because the persons interviewed could not state the date or period of marriage. All doubtful answers were discarded. As the male dependent is the person who becomes the breadwinner of the family after marriage, and is therefore responsible for supporting the family and so preventing dependency, it is his age at marriage which is important. Consequently the age of the female spouse was for the present purpose disregarded. Only the ages of males

at the time of their first marriage were taken into consideration in those cases where they had married more than once. In spite of the reduction of the number of cases the sampling ratios were approximately 25 % for Europeans and 17 % for non-Europeans.

In Graph No. 1 the distribution of male dependents is given according to the ages at which marital responsibility was first assumed.



GRAPH No. 1.—THE DISTRIBUTION OF MALE DEPENDENTS ACCORDING TO THE AGES AT WHICH THEY FIRST ASSUMED MARITAL RESPONSIBILITY.

It will be seen that, while as many as $9\% \pm 1.4$ of the non-Europeans married before they attained their twentieth year, the percentage for the Europeans is much lower, namely $2\% \pm .9$. Again, $39\% \pm 3.5$ of the Europeans and $37\% \pm 2.5$ of the non-European dependents married between the ages 20-24. A little over 30 % of both racial groups assumed marital responsibility between 25-29 years.¹

¹ By a similar procedure the percentages for the other age groups can readily be ascertained from the graph.

These percentages are of little significance when taken alone, but should be compared with the percentages of marriage occurring for various age classes amongst the non-dependent population. Since such figures were not obtainable for a purely non-dependent portion of the population the percentages were calculated for the ordinary population, which would naturally contain a preponderance of non-dependents. It was not possible to obtain the ages at first marriage of the whole European and non-European population, but the numbers of bachelors marrying at various ages during a specified year (1932) were obtainable.¹ This should give an indication of the normal distribution according to age at date of first marriage.

In the case of the Europeans there is no indication that early first marriages took place more often amongst the dependents than is normal. It was found that amongst the ordinary population group 1·5% of the Europeans married before their twentieth year, 36·9% between 20-24, and 40% between 25 and 29. In the case of the Europeans one can only say that amongst the poorer classes there is, economically speaking, more necessity for postponing marriage, but that this does not take place.² *Consequently the fact that the percentages of early marriages amongst the dependents are more or less the same as amongst the ordinary population can only be looked upon as of some causal significance in the sense that the economically necessary postponement does not take place.*

¹ Offisiële Jaarboek van die Unie van Suidafrika, No. 15, p. 929, Table i.

² The fact that marriage fairly often takes place early amongst the dependents as amongst the ordinary European population can be seen by locating the quartiles of the distributions. For the Europeans the first quartile was found to be 22·95. This means that 25% of the European male dependents married before they became 23 years old, i.e. either before or when they had barely attained their legal majority. The median is 26·45, showing that 50% of the male dependents had married before they became 26½ years old; the third quartile was found to be 30·96, which shows that 75% of the European male dependents had married before they became 31 years old.

The position, however, is different in the case of the non-Europeans. Here the same type of data for comparison was available as for the Europeans.¹ There is just the additional difficulty that the ordinary non-European population of the Union is not constituted in the same manner as the non-European dependent group. The former contains more natives and the latter more Coloured persons. However, it was found that whereas 9 % of the non-European dependents married before their twentieth year, this was only true of 1 % of the ordinary non-European population group. So also 37 % of the non-European dependents married between 20-24 years of age, as contrasted with 28 % of the ordinary non-European population group. For the age groups above 25 years the percentages of the dependents remain consistently lower than those of the ordinary population group. If these comparisons are justifiable when the above-mentioned difficulties are taken into consideration, then the only deduction that can be made is that *there was definitely a greater tendency for the dependents on the Board of Aid to marry earlier (i.e. chiefly below 25) than is usually the case amongst non-Europeans.*² This tendency may have some significance for the fact that even relative to the size of the respective portions of the population there is much more dependency amongst the non-Europeans than Europeans (see p. 54).

THE RELATION BETWEEN MARRIAGE AND DEPENDENCY.

An investigation was also made as to whether any of the male recipients became dependent on charity about the same time that they assumed marital responsibility. A random sample of 138 European and 317 non-European cases was taken, the sampling ratios being approximately 20 % and 13 % respectively. A correlation chart was constructed, the two variants being the age of first dependency and the age of first marriage. Using the Bravais-Pearson formulæ for r ,

¹ *Offisiële Jaarboek van die Unie van Suidafrika*, No. 15, p. 929, Table ii.

² The quartiles of the distribution for the non-European dependent group were Q₁ 22·08; Median 25·51; Q₃ 29·59. These can be interpreted in the same way as has been done for the European group of dependents (see footnote 1, p. 57).

it was found that there was a slight positive correlation between the two variants, the co-efficient for the Europeans being $.43 \pm .051$, and for non-Europeans $.48 \pm .033$. This means that there may have been a certain tendency for European and non-European male recipients to become dependent about the time when they married or after a more or less equal period after marriage.

To test the extent of this tendency the percentages were calculated for the males in the sample who got married at varying ages from 15 to 54 and became dependent at the same time or shortly after—i.e. within five years. The percentages, $7.1\% \pm 1.7$ and $9.5\% \pm 1.01$ for Europeans and non-Europeans respectively, are evidently quite low and unreliable. They are especially low if one takes into consideration that a five-year period is a very liberal allowance for dependency to set in and yet for marriage and dependency to be regarded as related. Although the sample was small, and it would be unwise to generalise about the whole group of made dependents, it does seem very likely that there is no immediate relationship between marriage in general and dependency. Naturally this does not contradict the conclusions reached in connection with the influence of early marriages by males, nor does this affect another aspect of the matter, namely, that out of the marriage a large family may grow and soon contribute to the development of dependency. *The question here was simply whether marriage amongst the poorer classes, independent of the age of the male at marriage, is in itself an immediate cause of pauperism, and this does not seem to be the case.*

RELATIVE AGES OF MARRIED COUPLES.

A discrepancy between the ages of husband and wife is sometimes mentioned as a cause of family difficulties.¹ Amongst the poorer classes family disturbances, however, often lead to dependency. Consequently a study of the differences in age between married couples amongst a depen-

¹ Popenoe: "The Conservation of the Family," pp. 23-24. Mowrer: "The Family," p. 172. Cronje: "Egsketing en Huweliks- en Gesinsontbindings," p. 119, footnote 1.

dent group may prove useful, and indicate a possible source of unadjusted family relationships which contribute indirectly to dependency.

In order to obtain the necessary information in regard to the age relation of married dependents, the European and non-European married couples were separately classified into three main groups, viz.: chief male dependents (according to certain age groups) who were married, at the time of the enquiry, to women younger, older, or of equal age (see Tables No. XVI. and No. XVII). For the Europeans 434 couples (or about 62 % of the total number of European cases) were selected for this purpose, and for the non-Europeans 1,570 couples (or about 64 % of the total number of non-European cases).

The main results were as follows:

(a) Out of the European cases examined—

74·90 % consisted of husbands older than their wives.

13·57 % consisted of husbands younger than their wives.

11·52 % consisted of couples of more or less equal age.

(b) Out of the non-European cases examined—

77·76 % consisted of husbands older than their wives.

13·57 % consisted of husbands younger than their wives.

8·53 % consisted of couples of more or less equal age.

To find out whether these figures reflect a normal or an abnormal condition, the position amongst the normal population must be taken into consideration. According to the latest figures available, in 81 % of the European families the husbands were older than their wives, in 12·4 % they were younger, and in 6·6 % the couples were of more or less equal age.¹ Similar statistics could not be obtained for non-Euro-

¹ Census Report, 1926.

peans. There are certain differences, but undoubtedly the tendency is for the same general types of age relationship to exist among the dependents as among the ordinary population.

TABLE NO. XVI. THE PERCENTAGE DISTRIBUTION OF EUROPEAN MARRIED DEPENDENTS ACCORDING TO THE RELATIVE AGES OF THE MARRIED COUPLES.

Wife is younger by years	Ages of Husbands						TOTALS
	20-29	30-39	40-49	50-59	60-64	65+	
1	2.77	1.86	1.61	1.15	.69	—	8.08 ± 1.4
2	2.53	4.38	2.53	.69	—	—	10.13 ± 1.5
3	2.07	2.31	2.07	.46	.23	.23	7.37 ± 1.3
4	2.53	2.53	.69	.69	—	—	6.44 ± 1.2
5	.69	3.46	1.15	.46	—	—	5.76 ± 1.2
6	.46	1.86	2.31	1.38	.23	—	6.24 ± 1.2
7	.23	.92	1.61	1.38	.46	—	4.60 ± 1.1
8	.23	1.38	1.38	1.15	.46	—	4.60 ± 1.1
9	—	.92	.46	.46	.23	.23	2.30 ± .7
10-20	—	2.77	4.61	7.61	1.86	2.53	19.38 ± 1.9
TOTALS	11.51 ± 1.6	22.39 ± 2.1	18.42 ± 1.9	15.43 ± 1.8	4.16 ± 1.0	2.99 ± 0.9	74.90 ± 2.2

Wife is older by years	Ages of Husbands						TOTALS
	20-29	30-39	40-49	50-59	60-64	65+	
1	.92	1.15	.46	—	.23	—	2.76 ± .7
2	—	1.61	.23	.23	—	—	2.07 ± .7
3	.46	.92	.46	.23	—	—	2.07 ± .7
4	—	.92	—	—	—	—	.92 ± .5
5	.69	.46	.23	.46	—	—	1.84 ± .6
6	.46	—	—	—	—	—	.46 ± .5
7	.69	—	.23	.23	—	—	1.15 ± .5
8	—	—	.23	—	—	—	.23 ± .2
9	—	.23	.46	.23	—	—	.92 ± .5
10-20	.23	.23	.46	—	.23	—	1.15 ± .5
TOTALS	3.45 ± 1.0	5.52 ± 1.2	2.76 ± .9	1.38 ± .5	.46 ± .4	—	13.57 ± 1.7

Wife is of equal age	2.77 ± .9	4.38 ± 1.0	.92 ± .5	2.07 ± .7	1.15 ± .5	.23 ± .2	11.52 ± 1.6
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TABLE NO. XVII. THE PERCENTAGE DISTRIBUTION OF
NON-EUROPEAN MARRIED DEPENDENTS ACCORDING TO
THE RELATIVE AGES OF THE MARRIED COUPLES.

Wife is younger by years	Ages of Husbands						TOTALS
	20-29	30-39	40-49	50-59	60-64	65+	
1	4·14	3·31	1·34	.38	.25	.31	9·73 ± .8
2	3·88	5·03	2·16	.51	.25	.13	11·96 ± .9
3	2·29	4·01	1·47	.95	.31	.06	9·09 ± .8
4	1·73	3·06	1·66	.70	—	.13	7·28 ± .7
5	1·34	2·67	1·34	.19	.25	.19	5·98 ± .6
6	.45	2·29	1·34	.45	.13	—	4·66 ± .5
7	.31	2·16	1·03	.38	.19	.25	4·32 ± .5
8	.06	1·15	.82	.57	.06	.06	2·72 ± .4
9	.19	1·34	1·27	.51	.25	.13	3·69 ± .5
10-20	—	2·35	5·48	5·73	2·67	2·10	18·33 ± 1·1
TOTALS	14·39 ± .9	27·37 ± 1·1	17·91 ± 1·1	10·37 ± .8	4·36 ± .5	3·36 ± .5	77·76 ± 1·1

Wife is older by years	Ages of Husbands						TOTALS
	20-29	30-39	40-49	50-59	60-64	65+	
1	1·15	1·53	.64	.51	.38	.06	4·27 ± .5
2	.70	1·03	.57	.13	.06	—	2·49 ± .5
3	.82	.82	.25	.13	.06	—	2·08 ± .3
4	.25	.76	.06	.06	—	—	1·13 ± .3
5	.31	.19	.19	—	—	.06	.75 ± .2
6	.13	.45	—	.06	—	—	.64 ± .2
7	.19	.57	—	—	.06	—	.82 ± .2
8	.13	.13	—	.06	—	—	.32 ± .3
9	.13	.06	.13	.06	—	—	.38 ± .4
10-20	.13	.31	.06	.19	—	—	.69 ± .2
TOTALS	3·94 ± .5	5·85 ± .6	1·90 ± .3	1·20 ± .3	.56 ± .2	.12 ± .3	13·57 ± .9

Wife is of equal age	2·10 ± .3	3·63 ± .5	1·60 ± .4	.57 ± .2	.25 ± .3	.38 ± .3	8·53 ± .7
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Further analysis of the extent of differences in age can, however, be made. So, for instance, of the 13·57 % of European cases in which the husbands are younger than their wives, the wives are older by more than five years in 3·91 % ± 1·0. Amongst the non-Europeans 2·85 % ± .5 of the women are more than five years older than their husbands.

Only in 1·15 % of the Europeans and ·69 % of the non-Europeans were the wives older by ten years or more. Even if it were accepted that the stability of the family is endangered when the wife is older by five or more years than the husband, then these percentages are surely too low to allow one to find in them a possibly significant, even though indirect, causal factor of dependency.

Of these cases where the husband is older than the wife, 37·12 % \pm 2·4 of the Europeans and 33·72 % \pm 1·1 of the non-Europeans were older by more than five years. These included 19·38 % and 18·33 % respectively who were older by ten years and more. The percentages of these age differences, especially in the last mentioned, are sufficiently high to warrant the suspicion that here, perhaps, is a source of family dissension. In the absence of investigations which clearly prove that age differences beyond certain limits are significant from the point of view of unadjusted family relationships, it would not be justifiable to go further than indicating this possibility.

As far as the dependents were concerned, it was found that the average age of the European husbands married to older women was 37·10 \pm ·9, whereas the average age of the European husbands married to younger women was 43·1 \pm ·03. For the non-Europeans the averages were 36·4 \pm ·23 and 40·7 \pm ·23 respectively. This means that on an average it is the younger dependent who is married to a woman older than himself. There is the possibility that these men may have married widows with a family of their own, so that the joint family may be large, or the women may be more susceptible to illness and consequently unable to assist in supporting the family. This supposition may explain to some extent why these relatively young married men become dependent.

THE FREQUENCY OF MARRIAGE.

The question may be raised as to whether there are dependents, not necessarily chief recipients, who have been married more than once. A sample was taken as follows: 203

European males or about one-third of the total number of married and ex-married males, 241 European females or about one-quarter of the total number of married and ex-married females; 592 non-European males or one-third of the total number of married and ex-married non-European males, 743 non-European females or one-third of the married and ex-married females.

The results show that a little over 85% of the European and non-European males and females had been married only once, between 11% and 14% of both racial groups had been married twice, while a negligible proportion had married more than twice. It is clear, therefore, that a succession of marriages, with the consequent responsibilities, such as caring for families by the second or third marriage as well as by the preceding one(s), supporting the divorced spouse, etc., was not of great importance in causing dependency amongst this group of dependents.

INTERMARRIAGE BETWEEN EUROPEAN AND COLOURED.

European and non-European dependents often live in the same vicinity, and sometimes even in the same buildings and rooms (see Chapter III.). It is frequently asserted that one of the effects of such proximity is intermarriage of Europeans and Coloured. It was accordingly considered necessary to ascertain the extent to which "mixed" families were found among the dependents.

The full 700 European and 2,469 non-European cases were examined, and it was found that, out of the total number of European and non-European cases (3,169), 44% were European women married to or cohabiting with Coloured males, and 4·86% were European males who were married to or cohabiting with Coloured women. Altogether 5·3% of all the cases of dependents were instances of mixed marriage or cohabitation. This percentage represents 170 separate cases. These cases were usually classified as Coloured. The number seems small, but assumes a definite significance when it is compared with the total number of European cases, which is approximately only four times larger, although the total

number of mixed marriages is small compared with the number of poor European families. It seems that the greater tendency on the part of the Coloured to become dependent (see p. 54) extends to such "mixed" marriages in a remarkable degree. Perhaps this is because they take place amongst the poorest of the poor—at least as far as the Europeans are concerned.

CHAPTER VII.

THE MARITAL STATUS AND FAMILIAL CONDITIONS OF DEPENDENTS.

Many of the charities in Capetown render assistance to lone persons as well as families. It would be useful to know whether more families than lone persons are dependent. If it happens that many more families than lone persons are receiving assistance from charity, then it is quite possible that there may be certain factors operating amongst families which would make for greater dependency among them. On the other hand there is the possibility that, although charity is rendered to lone persons, these are assisted chiefly if they are old and ill, while there is a general tendency to refuse assistance to the able-bodied, unemployed single person, and to give preference to indigent families. In actual fact there may be as much poverty amongst lone persons as families without this fact being revealed by an analysis of the types of dependents receiving relief from a particular organisation. Nevertheless it is desirable to determine the extent to which these two types appear amongst the Board of Aid's dependents, irrespective of what the Board's policy may be.

Presumably the existence of any prejudice in favour of assisting families means that the presence of small children and the size of family are accepted as factors which make for dependency. Consequently the extent to which these conditions actually exist among the dependent families should be investigated.

Apart, however, from the size of family and the number of small children, there are sometimes to be found other familial conditions leading to dependency, e.g. where the male head is dead or absent, and does not render support or is unable to do so. Dependency arising from such familial conditions as widowhood, divorce, desertion, etc., will constitute a further task of enquiry.

DEPENDENT FAMILIES.

According to the distribution of the dependents relatively to their marital status and familial condition, about 85 % of the European and approximately 89 % of the non-European cases are dependent families of various types (see Table No. XVIII.).

TABLE NO. XVIII. CLASSIFICATION OF DEPENDENTS ACCORDING TO MARITAL STATUS AND FAMILIAL CONDITION.

Europeans									
No. of Per- sons	Families				Lone Persons				
	Husband and wife only	Husband and wife with children	Lone Mother with children	Lone Father with children	Males	Females			
2-3	7·99%	11·15%	7·57%	·28%					
4-6	—	33·14%	6·00%	·28%	2·71%	3·58%	·87%	7·13%	
7+	—	17·57%	1·72%	—					
Totals	7·99%	61·86%	15·29%	·56%	2·71%	3·58%	·87%	7·13%	
		85·70%				14·29%			
non-Europeans									
2-3	5·06%	7·66%	6·50%	1·50%					
4-6	—	35·67%	7·90%	·76%	1·36%	1·93%	1·61%	5·81%	
7+	—	20·38%	2·82%	·32%					
Totals	5·06%	63·71%	17·22%	2·58%	1·36%	1·93%	1·61%	5·81%	
		88·57%				10·71%			

These figures indicate that among both Europeans and non-Europeans there are many more families than lone persons receiving assistance from the charity concerned (see Graph No. 2). The families included a small percentage of cases consisting of husband and wife without children, or with whom none were living. Most of these were old couples. The type which predominated consisted of the unbroken family of husband and wife with children. By far the vast majority of the latter type consisted of fairly large families. One-third of them in the case of the non-Europeans and

nearly one-third in the case of the Europeans consisted of 7 or more persons, the average size of family being 5.5 persons for Europeans and 5.8 for non-Europeans. Two types of incomplete families were also present, namely a fairly large group of lone mothers with children, the average size of whose families was 4 for Europeans and 4.64 for

100% -

90% -

80% -

70% -

60% -

50% -

40% -

30% -

20% -

10% -



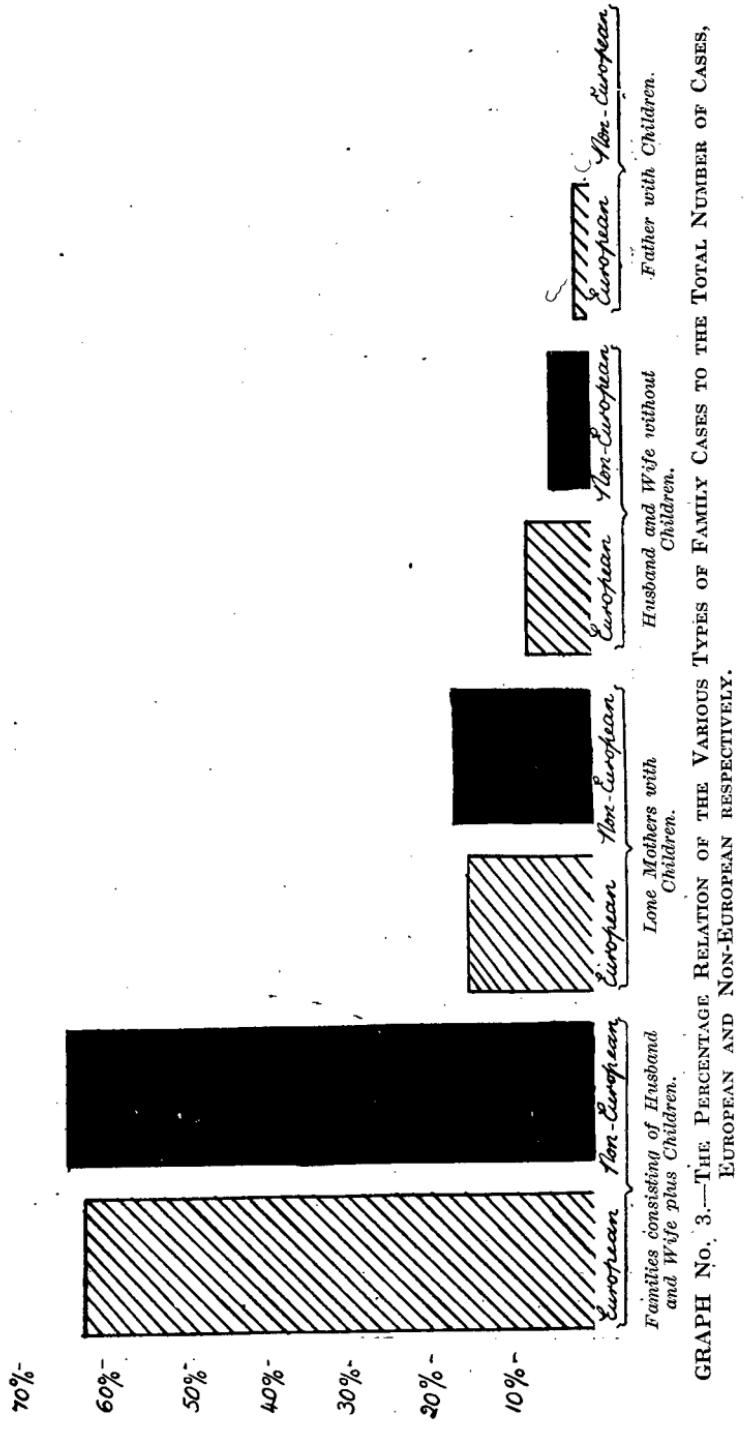
GRAPH No. 2.—THE COMPARATIVE PERCENTAGE DISTRIBUTION OF EUROPEAN AND NON-EUROPEAN FAMILIES AND LONE-PERSONS.

non-Europeans, and a very small group of lone fathers with children, whose families were on the average smaller, namely 3·8 amongst Europeans and 3·8 amongst non-Europeans (see Graph No. 3 for a comparison of the sizes of the various types of family cases). With the exception of those composed of husband and wife without children, the various types of family cases consisted of a fairly large number of persons, the average size for all types being approximately 5·2 for Europeans and 5·6 for non-Europeans. As far as the Europeans are concerned this average may be compared with the average sizes of families of different economic levels as given by Dr. E. G. Malherbe.¹ The average sizes of the family in the Union of South Africa was 7·1 for the "very poor," 6·1 for the "poor," 4·8 for those of "average means," and 4·6 for the "well-to-do." The average size of these European dependent families was, therefore, larger than those of families of average means or well-to-do.

The presence of a large family can under certain circumstances mean the commencement of dependency on the funds of a charitable organisation. Even if the head of the family is in full-time employment, a large family will find it difficult to manage on a small income. In the case of illness, unemployment, or the old age of the chief breadwinner, the size of the family would tend to accentuate the degree of dependency. The averages given by Dr. Malherbe seem also to indicate a general process that the degree of poverty increases with the size of family. *The large size of the family as a possible contributing cause of dependency is therefore present in a fairly large proportion of the family cases.*

Now, a large family is in itself not necessarily a cause of dependency, even if the breadwinner is unemployed or earning only a small income, since the children may be able to assist in the upkeep of the home if they are old enough to do so. On the other hand, if they are young they may not only be dependent on their parents but may prevent the mother from working. It is accordingly necessary to take into consideration not only the average size of the family,

¹ See "Education and the Poor White," p. 221.



GRAPH NO. 3.—THE PERCENTAGE RELATION OF THE VARIOUS TYPES OF FAMILY CASES TO THE TOTAL NUMBER OF CASES, EUROPEAN AND NON-EUROPEAN RESPECTIVELY.

but also the ages of the children. Of the European and non-European children belonging to the dependent families 57 % of the former and 68 % of the latter were 10 years of age or under. These figures include 35 % and 46 % respectively of the children who were below 7 years, and often still needed their mothers' care. 24 % and 21 % respectively were between the ages of 11 and 16, and hence mostly not capable of supplementing the family income. Only 19 % and 11 % respectively were 17 years and older, and thus possible assets. Most of the children of the dependent families were thus of an age which would mean that they are still an economic burden.

The conclusion reached, therefore, is that, *besides the size of the family, the ages of the children probably contributed towards the dependency of the group studied.*

From the point of view of familial conditions which are contributory causes towards dependency, those cases in which the father, the chief breadwinner, of the family is absent needs special attention. The lone mother may be widowed, divorced, deserted, or separated woman who, without the support of her husband, has the responsibility of providing for a family. She is in an awkward position because of her peculiar helplessness. If she has no source of income other than her own earnings she soon finds herself in economic difficulties, unless she is able to obtain a good position. She must also, usually without any support, care for the management of the home, see to the education of the children, and at the same time provide the income from which she and her family must live. Usually also, if she is able to obtain work, the wage she earns is barely sufficient for maintaining one person, and still less a family. *It is seen*
? thus that, under these circumstances, the conjugal condition of the lone mother becomes largely responsible for dependency. This type of family forms about three-twentieths of the dependent cases of both racial groups dependent on the Board of Aid. Presumably the proportion this type forms of these dependent cases is not a correct indication of its extent amongst the dependents of the city as a whole, since a

separate organisation, the Child Life Protection Society, exists specifically for dealing with this type. In all probability the lone mother families form a larger proportion of the dependents dealt with by the various organisations in the city, and constitute a very real problem which needs serious consideration.¹

THE LONE RECIPIENT.

There is a type of dependent who has no family to support. This is the lone recipient. The group includes, in addition to single persons, those who were married but who lived alone at the time of the enquiry. The lone recipients, as has already been indicated, form quite a small portion of the dependent group (see Graph No. 2). In the case of both racial groups the female lone dependents exceed in number the males; this is particularly striking in the case of the non-Europeans (see Table No. XVIII.). This may be the result of unintentional bias in rendering assistance, though it may also be that single males are less liable to unemployment or insufficient income. It is worthy of note that, while amongst both racial groups the proportions of male lone recipients below and over 50 are more or less equal, this is not so in the case of the females. Most of the female lone dependents belong to the older group of 50 years and over.² Generally speaking, single persons who become dependents are old, or suffer from illness or some other disability. Their dependency is rarely due merely to unemployment.

¹ See L. Verwoerd: "Die Alleenlopende Moeder as 'n Ontvanger van Liefdadigheid," which deals with this problem.

² 50 years has been determined as the age at which economic unemployability due to age often commences (see p. 45).

CHAPTER VIII.

DEPENDENTS AND THEIR HOUSEHOLDS.

The lone dependent or the dependent family is usually regarded as one economic unit, living in its own rooms or house, paying its own rent, and buying its own food. This, however, is not always the case. Sometimes a lone dependent lives with another person or family, who may or may not be related, sharing proportionately in the joint expenditure of the family. Such a person is not a member of the family in the narrower sense of the term, but is undoubtedly a member of a household which is functioning as one economic unit. Similarly two or three related or unrelated families sometimes co-operate and function as a single household. They contribute towards the rent, eat together, and have a joint household budget. A household is consequently here taken to signify any group of persons living together and sharing expenses.

A group of this nature is never dealt with as a relief-receiving unit. It is the head of the family or a lone person in whose name the case is registered. In so far as the lone person or family forms part of a household in the wider sense, any assistance given to the case will, however, be shared by the whole household. The charity was intended for the family or person who applied for assistance, so that its distribution amongst a larger number of persons must be regarded as unsatisfactory, since sharing in this manner means that the recipient is deprived to some extent of even the meagre benefits provided. Apart from this material loss there is the deteriorating influence on the indirect and unknown participants. The presence of dependents in a household may, therefore, be instrumental in pauperising persons unknown to the relief-giving organisation. These considerations necessitate a study of the various types of households of which the dependents form part.

TYPES OF HOUSEHOLDS OF WHICH DEPENDENTS FORM PART.

The information in this chapter is based on data contained in the relevant portion of the Form S1. The sample contains 295 European and 872 non-European cases altogether, the sampling ratios being approximately 42% and 35% respectively for Europeans and non-Europeans.

Households may vary from the simple unit comprising a married couple with or without children to the slightly more complex one composed of two unmarried persons (of the same or different sexes) living together and sharing expenses, to the still more complex one consisting of a family and single persons, and to the most complex type comprising several families and single individuals.

It is, however, not only the number and kind of contracting units¹ which produce complexity in the household, but also the degree of relationship. A household can be looked upon as more complex when the contracting units are unrelated than when they are related, and as more complex when they belong to different racial groups than when they belong to the same racial group. Such households are called "complex" because it is not so easy for them to retain their entity, and because the difficulties to be faced are greater, e.g. when one of the contracting units is depending on charity.

It can now be shown to what extent the dependents entered into household relationship with other units (see Table No. XIX.). About 90% of the cases in each racial group must be regarded as households. This percentage, however, contains 74·38% European and 71·12% non-European households of the simplest type (i.e. families with or without children). Only in the remainder, i.e. approximately 13% of the European and 20% of the non-European cases, are the

¹ It is useful to speak of the family or individual participating in the household as a contracting unit. A contracting unit is an adult individual or a family which shares or should share by contributing directly or indirectly to the general upkeep or expense of the household. E.g., if two families, each comprising five individuals, arrange to live together as one household then there are two contracting units, but the size of the household is 10.

households more complex. It is quite clear, therefore, that intimate economic relationships with other units do not extensively complicate the treatment of dependents. The truth of this statement can be further demonstrated by an analysis of the few households which are more complex than the type consisting of one family.

TABLE NO. XIX. A PERCENTAGE DISTRIBUTION OF THE VARIOUS TYPES OF HOUSEHOLDS OF DEPENDENTS.

<i>Types of Households</i>	<i>Percentages of</i>	
	<i>Europeans</i>	<i>non-Europeans</i>
Dependent family without children	7·99 ± 1·5	6·00 ± .8
Dependent family with children	66·39 ± 2·7	65·12 ± 1·8
Dependent family and a related family	1·00 ± .6	1·36 ± .4
Dependent family and a lone relative	2·70 ± 1·0	3·80 ± .7
Dependent family, lone relative, and a related family	—	.80 ± .4
Dependent family, lone non-relative, and non-related family . . . . .	.30 ± .3	.24 ± .2
Dependent family, and a lone, non-relative . . . . .	.30 ± .3	.06 ± .1
Dependent family and a non-related family . . . . .	.30 ± .3	1·80 ± .5
Dependent family, lone non-relative, and a lone relative	—	.24 ± .2
Dependent family, related family, and non-related family	—	.12 ± .1
Lone dependent, and a related family	6·40 ± 1·4	8·24 ± 1·0
Lone dependent, lone relative, and a related family	—	.12 ± .1
Lone dependent, lone non-relative, and an unrelated family	—	.32 ± .3
Lone dependent and an unrelated family	1·70 ± .8	2·92 ± .6
	87·08 ± 2·1	91·14 ± 1·1
Non-household cases	12·92 ± 1·9	8·86 ± 1·0
<i>Total percentage</i>	100·00	100·00

Undoubtedly it makes very little difference when a lone person lives with a dependent family. If the lone person is a parent receiving pension, or an unmarried individual earning a wage, then the dependency position may be eased. Even if the single person shares the charity of the dependent family the position does not differ very much from that of other and, perhaps, larger dependent families. A single

person, relative or not, shared in a dependent's charity in 3 % of the European and 3·86 % of the non-European cases.

In fact, the only types where the complexity of the household may either be detrimental to the satisfactory usage of the charity provided, or oppose preventive or reconstructive social effort, are those in which a dependent family lives together with one or more other families, related or unrelated (sometimes with lone persons included), and those in which a lone recipient lives together with a related or unrelated family, or with more than one single person. The assistance from charity may then not be very beneficial to the dependents themselves owing to the number of persons sharing in the benefits.

On the other hand, the chances are that it is more often the dependent family or person (sometimes an aged relative) who benefits by the association. The non-dependent family, or person, supports the dependent unit, in as much as the latter's charitable grants are insufficient. At any rate, if no allowance is made for this possibility, then the total number of dependent cases included in households potentially detrimental to the recipient's interests is only 9·7 % \pm 1·7 among the Europeans and 16 % \pm 1·3 among the non-Europeans. All things being considered, the only conclusion to be arrived at is that *membership of households in the broader sense is of no importance from the point of view of the dependency of the group investigated.*

It is interesting to note that of the 13 % European and the 20 % non-European cases which have combined with other units into households, the greater number, i.e. 8·1 % and 11·6 % respectively, are lone cases. This is quite natural since lone recipients are often older persons for whom it is more economical and convenient to be associated with a family, while a dependent family is usually too much of a burden to other families.

A further point of interest is that the households in which the contracting units are relatives occur much more often than those in which the units are unrelated. This tendency is true of both racial groups, though it is slightly less marked among the non-Europeans (see Table No. XX.).

TABLE NO. XX. THE RELATIONSHIP BETWEEN
CONTRACTING UNITS IN HOUSEHOLDS.

	<i>Europeans</i>	<i>non-Europeans</i>
Households in which all the contracting units are relatives of each other	10·10% ± 1·7	14·32% ± 1·3
Households in which none of the contracting units are relatives	2·60% ± .8	5·34% ± .9
"Mixed" households, <i>i.e.</i> consisting of related and non-related elements	—	.36%

THE DEPENDENCY OF MORE THAN ONE UNIT OF A HOUSEHOLD.

An attempt was made to ascertain whether, and to what extent, more than one contracting unit of a household obtained relief from the same relief-giving agency. This occurred very seldom. In 2% ± .8 of the Europeans both units of a two-unit household received separate relief at more or less the same time. Among the non-Europeans two units of three-unit households received assistance in 1·4% ± .4 cases, while in .3% all three got relief more or less simultaneously. It is evidently not the policy of the Board of Aid to give assistance at the same time to more than one unit of a household. The investigation did not show whether the units not dependent on the Board of Aid were receiving relief from other sources or not.

HOUSEHOLDS CONSISTING OF CONTRACTING UNITS FROM BOTH RACIAL GROUPS.

Proximity of habitation within the same areas, streets, and sometimes buildings, of Europeans and non-Europeans may result in their coalescing into single households, and perhaps ultimately in intermarriage. In only .41% of the total number of European and non-European cases was there any intermingling in the sense of coalescence into households. It is, indeed, a consistent policy of charities to discourage intermixture of any kind. Control over the situation by removing the European or non-European element under the penalty of refusal of assistance can be exercised in the case of household combinations, which may account to some

extent for the low figure. The same measures are, of course, not applicable in instances of intermarriage where the cases become dependent after completion of the marriage contract.

REASONS FOR COMBINING INTO HOUSEHOLDS.

Provision was made in the survey form S1 to obtain information on the factors involved in the formation of more-than-one-unit households. It so happens, however, that in most instances either no answers were returned for the relevant portions, or else there was reason to doubt the accuracy or intent of the reason given. From the relatively small number of cases in which information was given certain reasons for living together could be ascertained. The chief factor was evidently the dependency, partially or wholly, of the one contracting unit on the other. Sometimes the dependent unit was an aged parent, parents, other close relatives, or even an acquaintance, while sometimes it was a relative, related family, or a friend, who having originally been housed because of ejection, continued to remain as part of the household after the time of stress had passed. Another reason often given by both Europeans and non-Europeans, especially by three-unit households, was that living together reduced the cost of living.

The primary fact emerging from this study is that coalescence into households was not causally related to the development of dependency. The material was not suitable for investigating the possibility that combinations into households may prevent dependency on charity.

CHAPTER IX.

THE HOUSING CONDITIONS OF DEPENDENTS.

The general character of the environment of the poorer classes has already been described (see Chapter III.). There remains the further task of considering the more immediate surroundings of the recipients, namely, the sort of buildings which they inhabit, the general appearance and sanitary conditions of their dwellings, the size of the home, and the kind of accommodation which it affords or lacks. In this way some insight may be obtained into the effects of poverty and pauperism on the dependent as far as the physical aspect of his home-life is concerned—his comfort or discomfort, and the conveniences or inconveniences that fall to his lot or station in life. Naturally there are many problems in connection with the housing of the destitute poor which cannot be discussed here.

The main data were obtained from the Survey Form S 1, and pertain to some 295 European and 872 non-European cases, residing in the area Sea Point to Observatory. For various reasons not all the information in the forms could be used. The standard deviations are indicated only where the data were obtained by actual observation and not merely based on judgment, since the latter is necessarily much less reliable, and an appearance of statistical accuracy would only prove misleading.

THE GENERAL NATURE OF THE BUILDINGS IN WHICH DEPENDENTS LIVE.

The Type of Building in which the Dwelling is situated. The dependents were classified according to the general nature of the building in which their dwellings were situated (see Table No. XXI.). None of the chief recipients in the sample were living at the same address.

TABLE NO. XXI. THE VARIOUS TYPES OF BUILDING IN WHICH DEPENDENTS LIVED.

Type of Building	Europeans	non-Europeans
Detached houses	10·85% \pm 1·7	9·16% \pm 1·0
Semi-detached houses	30·86% \pm 2·6	28·67% \pm 1·6
Flats	4·07% \pm 1·2	5·30% \pm ·8
Large and tenement buildings used exclusively as dwellings ¹	18·64% \pm 2·2	22·90% \pm 1·5
Buildings not exclusively used as dwellings but also containing:		
shop	7·80% \pm 1·5	3·97% \pm ·7
garage	·34% \pm ·3	·24% \pm ·2
office		·12% \pm ·1
or cafe	1·35% \pm ·6	·12% \pm ·1
Uncertain ²	26·09%	29·52%
	100	100

Most of the European and non-European recipients live in semi-detached houses and large buildings exclusively used for habitation. A fair proportion of the Europeans occupy dwellings which are not exclusively used for habitation, though there are proportionally fewer non-Europeans in this type. In both instances it is usually a building containing a cafe, garage, or shop which has the upper storey, back part, or another undesirable portion let for dwelling purposes. The proportion of both racial groups living in detached houses is relatively small, though not only these but also the families living in semi-detached houses and flats³ can be looked upon as suitably housed from the point of view merely of the type of building. Such cases constitute just over 40 % of both racial groups, and the chances that the remainder are not being suitably housed from this point of view are strong.

¹ Mostly large buildings in which rooms were let for dwelling purposes, but not of the "flat" type.

² Described in the forms in a way which left doubt as to where they should be classified.

³ The percentage of cases whose dwellings were returned as being in flats was 4·07 % for Europeans and 5·30 % for non-Europeans, but it is doubtful whether the dwellings have been correctly described as flats, especially as far as the non-Europeans are concerned, although it is certain that among the better type of European applicants there are cases living in flats. In most other cases such dwellings are more likely to be a series of rooms not isolated as an entity, as is the case with real "flats."

(More important factors, of course, are the degree of over-crowding, the outside and inside conditions of the building and home, the sanitary arrangements, etc., which will be dealt with in due course.) At this stage it need only be pointed out that although, generally speaking, a detached or semi-detached house will provide a more suitable home than rooms in a tenement, this will not be the case if the former is dirty, insanitary, and overcrowded, while the latter are well-cared for, sanitary, and roomy. In actual fact no importance at all can be attached to living in detached or semi-detached houses, or flats, since only in very few instances did dependent cases live alone in such buildings. For the most part the privacy and other benefits which such types of building should provide were lacking.

The Number of Families and Persons in the Building.

Sometimes over-crowding does not exist within the home itself, but within the immediate surroundings. This also is harmful. An effort was made, by questioning the dependents, to estimate the number of families and persons dwelling in the same building as the recipient. The results obtained in this respect must be understood as being merely an estimate, based on the statements of the persons interviewed.

The vast majority of the European and non-European dependents stated that there were not more than five families in the same building as themselves, but only a negligible proportion of the recipients lived in buildings exclusively occupied by themselves. About one-tenth of both racial groups estimated that there were six or more families living in the same building. Among the non-Europeans there were two cases who judged the number of families living in the same building to be between 31 and 35, one case stated between 26 and 30, and three cases returned the answer 21 to 25 families. There are, of course, certain well-known slum buildings in Capetown which house a considerable number, especially Coloured persons and families, e.g. Wells Square (since demolished), King's Buildings, Mocke's Buildings, De Beers Buildings, etc. The highest estimate for the European group was 16-20 families.

After the same procedure an attempt was made to obtain estimates in regard to the number of persons, irrespective of families, living in the same building as the recipient (the person questioned).

A marked proportion of Europeans (about 56 %), but not so many non-Europeans (about 45 %), occupied dwellings which were situated in buildings estimated to contain not more than 10 persons. About 33 % European and approximately 43 % non-European recipients judged that there were between 11 and 20 persons in their building. There were not many Europeans (about 10 %) and non-Europeans (about 12 %) living in buildings with a larger number of persons. The highest estimate among Europeans was 81-85 persons, and for non-Europeans 146-150 individuals.

These figures on the number of families or persons living in the same building mean very little if not taken in conjunction with the actual size of the building. Such a comparison unfortunately could not be made in any accurate manner.

Most of the buildings which were estimated to contain up to 10 persons, were those which contained up to five families. They were more or less of the type of detached or semi-detached house usually seen in the slum areas, which, although originally built to house comfortably one family, is now occupied by several. Frequently the houses of single families of bygone times were double-storey, but now the floors are occupied by separate families and lone persons. These very often contain up to a dozen families—sometimes one family per room. Such buildings would sometimes contain 6-10 families, and even from about 10 to 20 families. In the larger type of building one finds the larger groups composed of more families and individuals. The degree of over-crowding would here depend on the exact size of the building. A large number of families or persons could be housed quite comfortably in a very large and spacious building. It was, however, usual to find one family per room, so that it often happened that anything from 15 families upwards were housed in the same large building under the most uncomfortable conditions.

On the whole, *observation* leads to the statement that whatever the position within the family dwelling may be, there is usually too much overcrowding in the buildings—small or large—in which the dependents have their homes. At the same time it must be confessed that the above figures are of little value in proving the truth of this statement.

The General Condition of the Buildings. The investigators were asked to report on the general condition of the buildings in which dwelled the recipients who were visited. The term "general conditions" was further defined, i.e. in the sense that the building was comparatively well-cared for, or neglected, namely, plaster falling off, windows broken, wall-paper torn, etc.

A higher proportion of the European dependents (76·37 %) appeared to be living in the better-cared-for buildings than of the case of the non-Europeans (55·24 %). This is, perhaps, to be expected, since the Europeans pay on the average a higher weekly rent than the non-Europeans, and would, therefore, be likely to be living in a slightly better building, situated perhaps in a slightly better locality. About 24 % of the Europeans and approximately 45 % of the non-Europeans were living in buildings which were considered by the visitors to be neglected and in need of repair. These frequently occurred in some of the worst quarters of Capetown Central (towards Signal Hill), e.g. in Hudson Street, Loader Street, certain portions of Somerset Road, Upper Wale Street (especially from Buitengracht Street), and in Shortmarket Street (from Bree Street, where it runs across Rose Street and Chiappini Street). Similarly, dilapidated and neglected buildings are to be found in the direction of the Salt River-Woodstock area, viz., in upper Hanover Street, Caledon Street, Tennant Street, Stuckeris Street, Sheppard Street, lower Chapel Street, etc. Some of the dwellings very very poor and dirty, and badly needed the attention of the City Health Department.

THE DWELLINGS OF THE DEPENDENTS.

While paupers are frequently constrained to live in buildings and in environments which they themselves may find distasteful, it is felt that there is, nevertheless, an aspect of their environment which they are able to control to some extent by ordinary care and cleanliness. This is the internal appearance of their homes and dwellings, and very often the immediate surroundings, e.g. the backyard. An attempt was made by the visitors to observe systematically the care and cleanliness exercised by the dependents in their homes. The impression and judgment of the persons who visited the homes of the recipients are naturally given here with a certain amount of reserve.

The General Condition of the Floors and Furniture. The general impression gained by the visitors was that among both European and non-European dependents the floors and furniture appeared to be regularly cared for and clean. In the homes of about 80 % of the former and of about 68 % of the latter racial group the floors and furniture were judged to be of a cleanliness and presentable appearance which did not give the impression of being the exception rather than the rule. In these homes or dwellings the furniture was generally reported to be well-cared for, viz., in about 65 % of the European and approximately 48 % of the non-European cases. In other homes of this type the furniture, while clean, was scratched and in need of repair, probably as the result of frequent removals from one dwelling to another.

In a small proportion of both groups (3-4 %) the opinion was that, though the floors and furniture were clean at the time of the visit, they were not usually so. These cases had probably attempted to clean the dwelling shortly before the visit, without, however, succeeding in hiding those signs which indicated the unusualness of the tidy appearance. Although recipients were not aware of the impending visit, it is possible, since investigators of charitable organisations as a rule comment unfavourably upon untidy and dirty homes, that there was a special clean-up among the usually

lax dependents, who were expecting an ordinary routine visit from the permanent visiting staff of the Board of Aid, as the result of a re-application for further relief. Whether this reaction was due to fear of loss of a grant, or to a measure (however slight) of self-respect is, of course, difficult to say.

In a little over 12 % and 25 % respectively of the Europeans and non-Europeans, the houses were found dirty, a state which appeared to be a usual condition of the dwelling. In this type of home food or paper or both were frequently found lying about, and the impression was gained that no efforts were made to make the place presentable. Here the furniture was observed to be definitely dirty and neglected. The applicants belonging to this group are presumably those whose poverty and dependency has been of such long duration that it has had a disadvantageous effect on their industry and self-respect, and their care and pride of the home. However, the majority of the dependents evidently have not degenerated to this extent—which is encouraging from the point of view of reconstructive social work.

In the majority of cases (over 90 %) of Europeans and non-Europeans the furniture was a mixture of pine, oak, teak, and sometimes boxes. There were about 30 % non-European and approximately 17 % European dependents whose dwellings contained, in addition to the usual furniture, boxes as articles of furniture. Furniture made of the more expensive kinds of wood (e.g. satin walnut, mahogany) occurred very seldom, viz., in about 2 % of the European and less than 1 % of the non-European cases. In some instances (approximately 5 % Europeans and 6 % non-Europeans) only boxes were used as furniture. This seems to indicate that a total lack of any possessions rarely occurred even amongst the dependents. They would have at least this material background when rehabilitative effort is commenced. At the same time one may not be too optimistic, since the furniture is often not their own but still unpaid for on the instalment system.

THE CONDITION OF THE BACKYARD.

Approximately 14 % of the Europeans and about 10 % of the non-Europeans were reported to have no backyards attached to the dwelling. Most of the dwellings of this type would be situated in large buildings, some of which, perhaps not originally built for dwelling purposes, have no backyards, though there may occasionally be an open space in front. Typical examples are the recently demolished Wells Square in Canterbury Street, and a building in Albert Road, Salt River, which can be seen from the trains in passing, and readily be distinguished by the rows of washing usually suspended from the front balconies.

The majority of the European cases have backyards, however, and in four-fifths of them the investigators considered conditions to be more or less satisfactorily clean, the remainder being definitely dirty. It should be mentioned that very often the backyards are common to several families and households, when their care and cleanliness are regarded as being the business and responsibility of no one. In such instances dirty water, bad odours, and many flies can be noticed. As far as could be ascertained there are usually no caretakers attached even to the larger buildings whose yards were described as definitely dirty because of an abundance of flies, dirty water, etc.

The Water Supply in the Dwelling. Usually water is laid on in the dwellings of Europeans (93 %) but in 21.83 % of the non-European dwellings the water had to be fetched from some other part of the building, e.g., in the backyard or at the end of a passage. This is a state of affairs which is not conducive to cleanliness in homes where extreme poverty and ignorance of hygienic conditions have already combined to produce a general laxity about personal cleanliness and the care of the dwelling. Naturally the fact that water is laid on in the dwelling does not mean too much, since sometimes it is only a single tap—perhaps in the kitchen—which every member of the family must use for all purposes. This is troublesome, and leads to insufficient use of the water-supply. Other difficulties in connection with the use of water are often met with in these houses.

The Number of Bed- and Living-rooms. Approximately 61 % of the European and 71 % of the non-European cases lived in one-room dwellings. The proportions of lone dependents included in the survey were 15·9 % Europeans and 13·1 % non-Europeans. Assuming that each of these lone persons occupied a one-room dwelling, then it is evident that not less, but most likely more, than 45 % of the European and 57 % or more of the non-European cases were families who lived in one-room dwellings. This is certainly an unfavourable position. Similarly families in two-room dwellings, i.e., 14 % Europeans and 19 % non-Europeans, must be looked upon as badly housed. Just as may be true of the lone persons, the conditions are better for the remaining 25 % of the European dependents and 11 % of the non-Europeans who have homes containing three or more bed- and living-rooms. The value of the larger dwelling is, however, sometimes diminished by the fact that the family occupying it is very large.

The number of cases with separate living-rooms was small. About 4 % of the Europeans and 1 % of the non-Europeans included in the above totals had separate sitting-rooms which were used exclusively for this purpose; 22 % of the former and 5 % of the latter had separate dining-rooms, probably also used as sitting-rooms. 13 % of the total number of European and 6 % of the non-European cases in the sample were lone persons who did not form part of any household, and therefore could not reasonably be expected to participate in such extra accommodation. This means that for the remainder of cases (61 % European and 88 % non-European) there was no adequate provision possible for social life within the home; e.g., where sons, daughters and parents could have visitors. Here there was neither dining- nor sitting-room, and any friendly intercourse had to take place either outside the home or probably in the sleeping quarters, which were at the same time dining-room and often kitchen.

The Sleeping Accommodation. An attempt to determine the extent of overcrowding of bedrooms simply from the point of view of the number of persons is necessarily fairly arbitrary. It was decided to count as satisfactory all cases

of one person per bedroom independent of size, all cases of two persons per bedroom (chiefly married couples), and all cases of three persons per bedroom (chiefly married couples with one child or baby). In the case of the Europeans 63 % of the rooms were so occupied, and among the non-Europeans the same was true of 40 % of the rooms (see Table No. XXII.).

TABLE NO. XXII. THE PERCENTAGE DISTRIBUTION OF THE BEDROOMS ACCORDING TO THE NUMBER OF PERSONS SLEEPING IN EACH BEDROOM.¹

Number of Persons in each Bedroom	Percentage of Bedrooms	
	Europeans	non-Europeans
1	20	9
2	23	15
3	20	16
4	16	16
5	10	16
6	5	13
7	3	8
8	2	3
9	1	2
10	—	1
11	—	1
	100	100

The accommodation in the remainder of the rooms is looked upon as unsatisfactory where four or more persons sleep in the same room. Provided the room is large enough and well ventilated, four persons could not be regarded as too many, but in most instances where there were four or more persons the rooms were on the small side, and usually gave the impression of congestion. In 21 % of the bedrooms used by Europeans there were five or more persons sleeping, and in a limited number of cases even as many as seven to nine persons. There were considerably more instances (44 %) of rooms accommodating five or more non-European persons—including 13 % with as many as seven to nine persons, and even a small number where as many as ten or eleven persons slept in the same room.

¹ Among the Europeans there were 377 bedrooms, and among the non-Europeans 954.

Accurate knowledge of the cubic capacity and ventilation of a room, which is necessary to judge whether there is over-crowding, could not be obtained in a rapid survey of this type. The general impressions of the visitors as to whether there were rooms with four and more persons which were more or less suited for the number which they actually accommodated, were that there was throughout extreme congestion. The rooms occupied by either racial group and holding four or more persons were judged as a rule to be more suitable for the accommodation of two and at the utmost three persons.

Not only was the impression gained that there was congestion, but among both Europeans and non-Europeans it was reported that there were persons sleeping on the floor. In 84 % of the European and 70 % of the non-European cases this did not happen, but among the remainder there were one or more persons per case who had no bed accommodation.

This means that 106 European and 702 non-European members of the families of the relatively small number of dependent cases dealt with by the special survey are extremely badly accommodated. Judged by this sample the numbers must be more than twice as large for all the cases

TABLE NO. XXIII. THE ACTUAL AND PERCENTAGE FREQUENCY OF CASES ACCORDING TO THE NUMBER OF PERSONS SLEEPING ON THE FLOOR.¹

No. of Persons per case sleeping on floor	Percentage of Cases	
	Europeans	non-Europeans
1	23 (7)	65 (7)
2	19 (6)	77 (9)
3	4 (1)	51 (6)
4	3 (1)	36 (4)
5	3 (1)	20 (2)
6	1 (.32)	8 (1)
7	—	3 (.34)
8	—	1 (.11)
9	—	1 (.11)
	53 (16)	262 (30)

¹ The percentage frequencies are given in brackets.

of this one agency. The figures show extreme distress for about 3 % of the Europeans but more than 10 % of the non-Europeans.

Even where there was bad accommodation the question still remains whether this was satisfactory. An effort was made to obtain some information in this respect, visitors being asked to record instances of inadequate sleeping accommodation. The criterion used was that arrangements were unsatisfactory if more than one person slept on a single bed, or more than two on a double bed. All that can be stated with accuracy is that in 50 % of the European and 70 % of the non-European cases there were one or more instances of undue sharing of beds. Among the Europeans there were some instances of five persons sharing a double bed and three sharing a single bed. For the non-Europeans the position was somewhat worse, many instances being reported of any number from three to eight persons sleeping in the same double bed, and from three to five in a single bed. Very often these were children.

An important question arising out of the number of persons sleeping in the same rooms is whether there was undue mixing of the sexes, with the danger of opportunities for immoral and perhaps incestuous sexual relationships. The criterion applied was whether apart from married couples there were single persons of opposite sexes above the age of fourteen years who slept in the same room. In 84 % of the European and 76 % of the non-European cases the occupants of a room were married, or only males or females, or of opposite sexes but under fourteen years of age. In the remainder the single persons sleeping in one room either were of opposite sexes and over fourteen years of age (in 3 % and 2 % of the non-European and European cases respectively), or belonged to opposite sexes with some below and some above fourteen years (i.e., in 13 % and 22 % of the European and non-European cases respectively).

The Presence of Other Conveniences in the Home. Only family cases, and not unattached lone dependents, are taken into consideration here, since separate kitchen, pantry, bath-

room and lavatory facilities are not necessary or usually expected by the latter. For the most part the lone persons living by themselves did their own cooking, etc., in their bedrooms. A few isolated cases of this type had separate kitchenettes.

Bathrooms. 54 % of the European and 93 % of the non-European cases stated that there were either no bathrooms or no accommodation which could properly be used for this purpose. Even in houses occupied by only one or two families there was frequently no bathroom. Very often in the larger type of building there was a room of sorts which might have served as a bathroom, but either had no bath or shower or was used for every other purpose except that of bathing. In about 19 % of the European and about 1 % of the non-European cases were there bathrooms for the exclusive use of the recipients and their families, but in the remainder such conveniences, although available, were usually shared by any number up to 16 households.

Lavatories. Approximately 18 % of the European and 6 % of the non-European dependents had lavatories for the exclusive use of their particular families and households. Among the remainder (82 % Europeans and 94 % non-Europeans) the lavatories were shared by other households. There were six instances among the Europeans of sharing by more than ten households, and fourteen instances among the non-Europeans. Some visitors took the trouble to see the lavatories, and complained that throughout these were in a shocking condition. In one building the lavatory had been clogged for about three weeks without receiving attention. In about 4 % of the European and approximately 1 % of the non-European cases were there more than one and never more than three lavatories available, and these were all in the larger buildings housing from 10 families upwards.

Kitchens. 50 % of the European and 36 % of the non-European cases had separate kitchens attached to their dwellings, but for the remainder the cooking had to take place either in the bedroom, as in the case of one-room dwellings occupied by families, or in some other equally unsuit-

able part of the dwelling. Very seldom among the non-Europeans (about 8 %) were the kitchens exclusively used by the dependents, though not so seldom among the Europeans (about 24 %).

Pantries. In less than 1 % of the non-European and about 12 % European cases were there pantries, foodstuffs being stored in the kitchen (if any) or in some cupboard in the dining-room (if any), or in the bedroom in the absence of other storage room.

CONCLUSIONS.

Observation showed that dependents are mostly housed in overcrowded ordinary houses or larger buildings, which are in a bad state of repair in the case of about one-quarter of those housing the Europeans and in nearly one-half of those housing the non-Europeans. This overcrowding is not only true with regard to buildings, but also to dwellings. The proportion of families living in single rooms or in two-room dwellings is very high, viz., at least 60 % European and 75 % non-European cases. Their bedrooms serve as dining-room, sitting-room, and mostly kitchen. Too many persons sleep together in one room in about 40 % of the rooms occupied by European dependents, and in about 60 % of the rooms occupied by non-Europeans. In a limited number of cases the overcrowding in this sense is extremely excessive, especially among the non-Europeans. The bed accommodation among the dependents was certainly found to be very deficient. Undue mixing of the sexes owing to overcrowding of bedrooms is present in roughly one-sixth of the European and one-quarter of the non-European cases. Bathrooms are entirely lacking for more than one-half of the European dependents, and nearly all of the non-Europeans, and when present are mostly of indeterminate value. Sanitary conditions are very unsatisfactory. Separate kitchens are lacking as often as not, and even then have to be shared in most cases.

Only in a minority of the cases, i.e. one-sixth of the Europeans dependents, but more than one-quarter of the non-Europeans, were the homes and furniture found dirty and

neglected. Total lack of ordinary furniture was found very rarely. Backyards are mostly present and mostly clean in the case of the Europeans, but as often as not indescribably dirty in the case of non-Europeans, since everybody uses them but nobody feels responsible. The water supply of about one-fifth of the non-European dependents is clearly deficient, and easily leads to uncleanliness.

If all these factors are taken into consideration, then the housing conditions of the dependents must be described as, on an average, most unsatisfactory—especially among the non-Europeans.

CHAPTER X.

THE HEALTH OF DEPENDENTS.

One of the factors often associated with dependency is ill-health. The latter may be present either as a direct or as an aggravating cause of the poverty and dependency situation. The income and expenditure of the poor family is, at the very best, so closely balanced that the slightest disturbance owing to illness of any member of the family may lead to the need for assistance. Ill-health may, however, also be the result of poverty. Sometimes a family is dependent for so long a period that inadequate housing and under-nourishment, which accompany dependency, lead to illness or weak constitutions. It is useful for an organisation to know in what proportion of its cases ill-health is present. Such information may be necessary for developing a suitable system of relief for this special type of dependent.

Knowledge of the nature and the extent of the incidence of ill-health amongst dependents is of value when attempting to determine the extent of temporary or permanent dependency. In fact, old age, physical and mental defects, and serious ill-health are some of the major causes of permanent dependency. An analysis of the various types of diseases from which dependents of a given organisation suffer should provide the information necessary to determine the probable extent of permanent dependency due to ill-health.

It is not only the health of the breadwinner that is of importance. Sometimes the illness of a wife or child may affect the budget almost as adversely as illness of the breadwinner. In the former case the expenditure may rise far above the income, whereas in the latter case it may be that only the income is diminished, although sometimes the illness of the breadwinner means both a decrease of income and an increase of expenditure. In order to give a true account of the influence of illness on dependency one should

be in possession of trustworthy information about the illness, not only of the chief recipients but also of the members of their families. Unfortunately the relief-giving organisation concerned, while demanding a medical certificate when the breadwinner pleads ill-health, does not systematically do this in connection with other members of the family, even though their condition is accepted as an argument for the provision of relief. The one exception is when the person concerned suffers from tuberculosis, in which case any member of the family can produce a medical certificate. Mostly the information of the visitor that the wife or child is in bed or seems ill is accepted. This is not satisfactory for use in estimating the real influence of ill-health in connection with dependency. Although casual reference will be made to the health conditions of the other members of the family on the basis of more or less reliable information gathered in this way in connection with a restricted number of cases, no use will be made of it in estimating the extent of natural dependency due to illness. The extent to which illness accompanies dependency is calculated only with regard to chief dependents on the basis of certificates produced, and is therefore an under-estimate in as far as the illness of family members, which also affects the economic conditions of the family, is left out of consideration.

THE EXTENT OF NATURAL DEPENDENCY DUE TO ILLNESS.

The first question which arises is how often ill-health was the cause of the dependency. It is usually very difficult to determine this with great accuracy. One can easily calculate to what extent ill-health is present amongst the dependents, but will, in the absence of thorough family case studies, not know whether the illness was a primary cause or a later development when poverty and dependency were already present. On the other hand, it is quite certain that even if ill-health is a later development, and even if it is a result of the poverty, it helps to aggravate it. Even if no distinction can be made between illness as a primary and as an aggravating cause of poverty and dependency, the extent to which illness is a causal factor of some kind can be estimated.

It was found that illness was present among 22·57 % of the Europeans and 21·20 % of the non-Europeans. In other cases either there was natural dependency due to old age or the dependents were able-bodied (see p. 119). *This percentage of cases in which the illness of the chief recipient is present may not seem large, but in reality the presence of one such factor in at least one-fifth of the cases of dependency is very important.* There are very few other separate causative factors so often present.

In this connection it is interesting to note the remarks of Warner, Queen, and Harper, and to compare them with the results obtained here. According to these writers "the most constant cause of poverty everywhere, at all times, and according to all investigators is 'sickness.' In both American and English experience the percentage attributable to this cause sinks but once slightly below 15, and never quite reaches 30. The average percentage is between 20 and 25. This is one of the most significant facts brought out . . . It was not one which the author anticipated when the collection of statistics began; and yet it has been confirmed and re-confirmed in so many ways, that the conclusion seems inevitable that the figures set forth real and important facts."¹

FORMS OF ILL-HEALTH AND DISEASE AMONG DEPENDENTS AND THEIR FAMILIES.

The classification used here (see Table No. XXIV.) in connection with the types of ill-health and other related conditions prevailing among the European and non-European dependents is based on that which is employed by the Health Department of the City Corporation of Capetown.² In the absence of any technical knowledge it was considered desirable to adhere as closely as possible to a type of classification which is presumably an accepted method in dealing with socio-health conditions. The description of ill-health conditions of dependents is based only on certificates actually

¹ Warner, Queen, and Harper: "American Charities and Social Work," p. 49.

² Vide Mayor's Minute, C.C. of Capetown, 1932. Report of the Medical Officer of Health.

issued by Free Dispensaries, Clinics, or private practitioners in Capetown.

Ill-health and Disease of Chief Breadwinners. An attempt was made to discover the extent to which the male chief recipients under 60 years of age and the female chief recipients under 56 years were subject to various diseases or conditions of ill-health (see Table No. XXIV.). There were altogether 127 European male chief recipients and 32 European female chief recipients (representing $18\cdot06\% \pm 1\cdot4$ and $4\cdot51\% \pm .8$ of the total number of European cases respectively), and 385 male and 142 female non-European chief recipients (representing $15\cdot56\% \pm .7$ and $5\cdot64\% \pm .4$ respectively of the total number of non-European cases) who suffered from various diseases and ill-health conditions.

It was found that there were certain conditions of ill-health which, because of their higher incidence as compared with other prevalent diseases, were important amongst the group of dependents studied. These diseases are in all probability significant of the living conditions of dependents who, suffering from the economic stress and strain of poverty, are frequently inadequately housed, clothed, and fed, resulting in a loss of vitality and a lowered resistance to disease. For example, tuberculosis is one of the more prevalent conditions. For the Europeans $11\cdot92\%$ and for the non-Europeans $34\cdot67\%$ of the chief dependents who were certified ill suffered from this disease. These percentages include male and female chief recipients. The males suffering from tuberculosis represented $2\cdot70\% \pm .6$ and $7\cdot36\% \pm .5$ of the total number of European and non-European cases respectively, and the female recipients $28\% \pm .3$ of the former and $1\cdot86\% \pm .2$ of the latter racial group. This means that in $2\cdot98\% \pm .6$ of the total number of European cases and in $9\cdot22\% \pm .6$ of the non-European cases the breadwinners were tubercular. *Not only does tuberculosis occur relatively more often among the non-European than the European dependents, but it is also by a long margin the single type of disease occurring most often amongst the non-European males and females.* In the case of the Europeans it occurs relatively

TABLE NO. XXIV. THE PERCENTAGE DISTRIBUTION OF CHIEF RECIPIENTS ACCORDING TO CONDITION OF ILL-HEALTH OR DISEASE.

Type of Condition or Disease	European chief recipients		non-European chief recipients	
	Male	Female	Male	Female
1. Infectious, Epidemic or Endemic conditions .				
Tuberculosis ¹ . . .	10·67±3·5	1·25± .9	27·43±2·1	7·24±1·2
Other conditions . . .	—	1·26± .9	.95± .5	.38± .4
2. Nervous Conditions and conditions affecting sense organs	18·23±3·8	3·77±1·7	10·27±1·3	3·04± .8
3. Conditions or defects of the Circulatory System .	8·16±2·4	5·01±1·8	5·71±1·0	4·56±1·1
4. Respiratory Complaints	4·40±1·7	1·26± .9	6·10±1·1	2·85± .8
5. Complaints of the Digestive System . . .	6·90±2·2	—	3·43± .8	.19± .2
6. Non-venereal Diseases of the Genito - Urinary System	3·78±1·7	—	2·85± .8	.76± .5
7. Diseases of the skin .	—	.63± .6	.76± .5	—
8. Diseases and Conditions of the Bones and Organs of Locomotion . . .	3·14±1·5	1·25± .9	2·09± .7	.38± .4
9. Malformations . . .	1·26± .9	—	—	—
10. Conditions due to external causes . . .	4·41±1·7	.63± .6	2·09± .7	.57± .4
11. Other conditions not included in above ² . . .	18·85±3·8	5·02±1·8	11·60±1·3	6·67±1·1
Total . . .	78·80±3·4	20·08±3·4	73·28±2·1	26·64±2·1
	99·88		99·92	

¹ All forms.

² This includes mostly cases too vaguely diagnosed for classification, though the certificates stated "unable to work." Note the high percentage of such certificates. One cannot criticise too strongly the issue of such casual and untrustworthy certificates.

³ Includes the puerperal condition. European pregnant females were .63 %, non-European pregnant females 2·29 %. The lowness of these percentages is not peculiar, as such cases will primarily be dealt with by other organisations, e.g. the Child Life Protection Society, the Municipal Health Service, and the various free Maternity Homes. In these cases the condition of the mother was not the sole factor in the dependency situation, but just an additional element which was taken into consideration. Otherwise the case would not have been before the Board at all.

less often than amongst the non-European dependents, but it is also the outstanding type of disease amongst these. It is true that amongst the Europeans the second group of indispositions, namely that of nervous conditions, occurs more often, but on the whole this type of indisposition is not so fatal to the economic welfare of the case as tuberculosis of the bread-winner. Therefore, *in spite of not being the type of disease occurring most often amongst the European chief recipients, tuberculosis must nevertheless there also be looked upon as the most serious single disease from the standpoint of the effect on the dependency situation.*

Writers on tuberculosis usually distinguish between exciting and predisposing causes. The former means infection by the tubercle bacillus. It is generally asserted by medical authorities that most people are slightly affected at some time, though most people do not succumb to the disease. The factors which are accepted as determining the incidence of the disease are poor social and economic conditions—the predisposing causes of tuberculosis. Persons who live in poverty and dependency frequently have to live in undesirable surroundings and under appalling housing conditions. They are often underfed, and so broken down physically that their powers of resistance are considerably reduced.

Among both Europeans and non-Europeans, nervous conditions and conditions affecting the sense organs were important conditions of ill-health among the recipients of charity, but relatively speaking more so among the Europeans. Blindness and deafness occurred only rarely in the group studied,¹ so that most of the cases included here really fell under the category of nervous conditions. The Europeans were 22 % and the non-Europeans 13·31 % of the total numbers of sick cases in each racial group. Owing to lack of more detailed information on the medical certificates it was impossible to say whether the nervous conditions were of an organic or functional nature, but it is not unlikely that the importance of the nervous conditions may be largely

¹ This is partly due to the fact that there are separate organisations dealing specially with such cases.

accounted for by the stress and strain usually associated with poverty. Queen and Mann state that "Among the causal factors which seem to be involved in the functional disorders are worry, grief, shock, persistent failure, over-stimulation from unusual success, economic depression, sex conflict, family troubles . . . and a host of other mental and social factors."¹ It may be noted that relatively to the size of the respective groups the proportions do not differ so much among the male and female recipients as one might expect.

Group 3 included almost without exception the various diseases of the heart. 13·17 % of the Europeans and 10·27 % of the non-European chief dependents who were ill belonged to this group. Such forms of ill-health are therefore next in order of importance for the recipients of charity as far as prevalence is concerned. The fact must not be overlooked that in the European and non-European groups these forms of disease occur proportionately far more often among the female chief recipients than amongst the males. In fact, amongst the European female chief recipients this group of disease occurs more often, and usually far more often, than any of the other groups. About one-quarter of the European female chief recipients affected by disease suffered from some form of heart disease. Here again it is not an unlikely conclusion that the worry, economic depression and domestic friction frequently associated with poverty and dependency were important factors in producing certain types of heart disease among dependents. Defective social and economic conditions are recognised as important causes of heart disease.²

The other forms of ill-health appear to be relatively unimportant as compared with tuberculosis, nervous conditions, and heart disease. Even these forms of disease which occur less often may, however, be the result of such factors as inadequate housing, malnutrition, unsatisfactory hygienic conditions, and neglect and disregard of primary stages of illness. Such deficiencies affect the poorer classes, and render

¹ "Social Pathology," pp. 568-571.

² See Queen and Mann: "Social Pathology," Chapter XXII., p. 498.

them more liable to disease in general than those placed in more fortunate economic and social conditions. These unfavourable conditions may affect complaints of the digestive system, diseases and conditions of the bones, and even respiratory complaints.

III-health and Diseases of the Children. Information was available in connection with 81 European and 214 non-European children who were certified for various illnesses. *It appeared that the diseases which were found to be most prevalent among the parents were also those which occurred most frequently amongst the children in the sample.* For example, more than one-tenth of the European children suffering from disease were tubercular, the figure for the non-European children being one-quarter. These proportions approximate closely to the percentages obtained for the parents. In all probability there has been no increase in the proportion of tuberculosis amongst the children. The existence of Clinics and Welfare Organisations would, of course, help to keep the figures for the children from soaring above those of the parents. At the same time the fact that there has been no definite decrease in the proportion of tuberculosis amongst the children indicates that preventive measures do not help if environmental conditions are not also improved. It is common knowledge among social workers in Capetown that the parents and children who are sent to Nelspoort or the Sunshine Home for Children for treatment are deprived of the health gained by their stay at these institutions by having to return to their old surroundings.

About two-fifths of the European and more than one-quarter of the non-European children in a condition of ill-health were subject to nervous conditions. These figures are much higher than they were for the parents, probably because in the poor families, especially those living in one or two rooms in the slums, the conditions within and outside the home are very unfavourable for normal healthy family life. The overcrowding, with the continual close contact between all members of the family, the exhaustion and dissatisfaction of the parents, continual family strife and, per-

haps, rough treatment of the children by the parents, sexual complications, the building up of grievances, unsatisfactory contacts with other children perhaps of various racial groups in the vicinity, difficulties of adaptability at school, shame due to dependency on charity—all this and much more must tend to produce fairly easily nervous conditions among the already under-nourished child with low powers of resistance. It is not surprising that so high a percentage of nervous conditions is found, but rather that the percentage is not much higher.

HEALTH CONDITIONS IN RELATION TO THE FUTURE OF THE DEPENDENT.

The question arises to what extent the ultimate recovery of ill dependents may be expected, which would make for self-maintenance. Where large sums of money are being spent annually by charitable organisations on the relief of sick poor, it is useful to ascertain the proportion of dependents who are permanently (as compared with those who are temporarily) incapacitated.

In the absence of any technical and detailed knowledge about the nature of the conditions and their appearance in *individual* cases, the conclusions reached here should be accepted with a certain amount of reserve. These conclusions were based on the seriousness and nature of the type of disease from which the patients suffered.

Only a small percentage of the European (5·8 %) and non-European (8·8 %) cases were judged to be so seriously incapacitated through illness that they could be regarded as likely to be more or less permanent or, at any rate, long-term dependents (excluding the tubercular patients). These chief recipients included mostly those who were paralytic, apoplectic, or epileptic patients as well as sufferers from tuberculosis. For the group of such dependents there were practically no prospects of ultimate independence (viz., 2·68 % Europeans and 1·33 % non-Europeans). In the case of the tubercular dependents, they sometimes have work, or again obtain work after a period of treatment, so that they do not

seem to be permanent dependents; but sooner or later they usually fall back on charitable assistance, which most often must ultimately become practically continuous.

The lot of the permanent dependent, i.e. the aged and the permanently incapacitated through illness or otherwise, is really very tragic. A relief-giving organisation usually deals with them on more or less routine lines, i.e., they must continually re-apply and undergo the more or less unpleasant procedure which, from the standpoint of the dependent, accompanies the receipt of charity. Certain concessions are made, e.g. lengthening the period for which grants are given without re-application, but in principle there is no definite system for dealing with the permanent dependents quite separately, according to their special needs. There is permanent provision for the aged who are eligible for old age pensions, or who can obtain admittance to institutions, but for the remainder depending on charity and for the permanently ill there is only a system which is really meant to be adapted to the needs of short term or temporary dependents.

About 12 % of the Europeans and about 8 % of the non-Europeans were temporarily incapacitated as the result of illness. Nearly all of the European and non-European cases classified in this group were families. These figures included a negligible number of European cases who were, by the nature of the disease (e.g. malaria) temporary dependents but likely to be recurrent. This group was not likely to remain dependent for a longer time than the period of illness unless there were other complicating factors (e.g. unemployment in addition to the illness of the breadwinner).

In a few instances, namely about 5 % of the Europeans and approximately 4 % of the non-Europeans, the prospects of partial or complete self-reliance would depend upon the extent to which the recipients concerned (mostly semi-fits) would be able to obtain a particular type of employment (e.g. light or sedentary work for those suffering from severe forms of heart disease or loss of one or other limb). Special economic facilities and protection should be given, e.g. in the case of the blind.

A comparison of the above group shows that if the permanently incapacitated and the semi-fit are looked upon as likely permanent dependents, owing to conditions of ill-health, then just over one-half of all the chief dependents suffering from ill-health possess the possibility of regaining their health and the potentiality of self-maintenance.¹

THE FAMILIAL STATUS OF THE DEPENDENT SICK.

Naturally, both from the standpoint of the amount of relief to be provided and of the unfavourable effect on the dependency situation, the position is more serious when the head of a family becomes wholly or partially dependent through illness, than when a single person is affected. It was found that about one-tenth of the cases affected by illness (both European and non-European) were lone persons. In all the rest of the cases affected by illness, i.e. about 90 %, it was the breadwinner with a family who was the patient.

¹ If one were to add to these the percentage of able-bodied dependents, who are necessarily temporary dependents, then it appears that the organisation under consideration deals with roughly 90 % of temporary dependents with possibilities of future self-maintenance in the case of each racial group, as contrasted with 5.8 % and 8.85 % permanent dependents, and 5 % and 4 % semi-fits in the European and non-European groups respectively. No stronger plea can be made than these facts present for the necessity of constructive family welfare work instead of the traditional provision of ordinary relief.

CHAPTER XI.

THE EDUCATION AND VOCATIONAL TRAINING OF DEPENDENTS, AND THE SCHOOLING OF THE DEPENDENTS' CHILDREN.

Lack of schooling and vocational qualifications may contribute to poverty and dependency. A low standard of schooling not only excludes a worker from the better types of occupation but seriously affects and handicaps him in other ways, e.g. there is absent that general background which makes for breadth of outlook and assurance in tackling the problems of life. The uneducated breadwinner is often doomed to an income which is hardly sufficient for a single person, and wholly inadequate for the support of a family. It was, therefore, considered necessary to ascertain the extent to which the male dependents, most of whom were the breadwinners of families, had been properly equipped for the task of earning a living by virtue of their schooling and their vocational training.

While poverty and dependency may be the result of poor training and education, it is also true that poverty mostly disadvantageously affects the education and the training of the children, and so causes increased poverty in the next generation. Even though free education is provided up to certain limits, attendance at school places an additional burden on the already slender budgets. In addition to this, conditions within the home, neighbourhood environments, the parental indifference, and the ignorance and lack of foresight commonly found associated with dependent parents, are factors which would affect the education of the children. Data in connection with the education of the children are therefore important if a charitable organisation is to develop a constructive social policy for the prevention of poverty and dependency.

SCHOOLING AND VOCATIONAL TRAINING OF CHIEF MALE DEPENDENTS.

Information on the school standard attained and the vocational training acquired was obtained from all the European and non-European chief male dependents receiving relief at the time of the investigation. The numbers were therefore as large as could be obtained in a study of dependents of this organisation. The group available for study here comprised roughly 75 % of the cases covered by the yellow cards.

On the basis of this information a comparison can be made for each of the racial groups between the education and vocational training (see Table No. XXV.).

About 14 % of the Europeans and about 47 % of the non-Europeans had had no schooling at all. Approximately 41 % of the Europeans passed various standards below Six, the

TABLE NO. XXV. THE PERCENTAGE DISTRIBUTION OF UNSKILLED AND SKILLED MALE WORKERS ACCORDING TO SCHOOL STANDARD ATTAINED.

School Standard attained	Europeans ¹		non-Europeans	
	Unskilled	Skilled ¹	Unskilled	Skilled ¹
None	9·76 ± 1·3	4·00 ± .9	36·19 ± 1·2	10·52 ± .8
Below 1	1·83 ± .6	.73 ± .3	3·12 ± .5	.73 ± .2
1	.91 ± .3	.18 ± .3	3·12 ± .5	1·59 ± .3
2	1·83 ± .6	1·99 ± .6	5·03 ± .6	3·08 ± .5
3	2·01 ± .6	2·71 ± .8	5·36 ± .6	3·60 ± .5
4	7·87 ± 1·2	8·13 ± 1·2	5·31 ± .6	4·87 ± .6
5	3·66 ± .9	8·93 ± 1·3	3·83 ± .5	3·71 ± .5
6	6·41 ± 1·2	19·49 ± 1·8	2·46 ± .5	4·50 ± .6
7	.73 ± .3	18·91 ± 1·6	.87 ± .2	1·09 ± .3
8	.18 ± .3	1·99 ± .6	.05 ± .2	.26 ± .2
9	—	.18 ± .3	—	—
10	.55 ± .3	2·00 ± .6	.05 ± .2	—
Total	35·74 ± 2·2	64·24 ± 2·2	65·39 ± 1·3	33·95 ± 1·3

¹ As will be seen in Table XXVI. (p. 109) by far the majority of the workers in the higher occupations had been engaged in skilled or semi-skilled trades. A small percentage had been occupied in certain types of domestic, clerical and semi-professional work, which did require training or apprenticeship of some kind. Strictly speaking, however, they do not fall under the type usually indicated by the term skilled workers, but this term was taken here in a slightly broader sense, especially since the numbers not customarily classified under this term were small. The term skilled here also includes semi-skilled, since a further distinction between these two groups would have been well-nigh impossible with the material available, and is at the best always difficult.

percentage for the non-Europeans being about 43 %. Of the Europeans a further 26 % attained Standard Six, and of the non-Europeans only about 7 %. Of those who passed beyond Six there were 20 % Europeans and 2 % non-Europeans. This means about 55 % of the Europeans and about 90 % of the non-Europeans had not even attained Standard Six. Those who had not progressed beyond primary education of some kind were 80 % and 98 % respectively.

From these figures it is quite clear that *the non-European dependent is educationally at a strong disadvantage as compared with the European dependent.*¹ It is also quite clear that, judged by standards of modern educational authorities set as desirable, the vast majority, even of the European dependents, have received only a poor, and very often a very poor school education. Perhaps the types of school visited by these people, owing to the poverty of their parents, may mean that the school education was even worse than the school standard attained indicates.

Unfortunately it was not possible to gather similar facts on their school education from a sufficiently large group of adult non-dependents of about the same social status and age. One should be able to compare the above data with similar data obtained from a group with similar opportunities, who have made good in life. Then one would be more certain whether the educational disabilities found amongst these dependents may really be regarded as, on the whole, a causative factor for the development of dependency. Without comparable data one can do nothing more than point out the existence of the low standard of education amongst the dependent group as a whole, and refer to subjective opinions that a poor school education is a handicap in life. By the latter is meant not only that the training for the participation in skilled occupations must have been rendered more difficult, even years ago when these people started life, but also that the absence of sound schooling makes for a loss in personal resourcefulness, breadth of interest, a practical attitude

¹ This is most probably chiefly due to the lack of provision made for compulsory and free education, so that the non-Europeans, who are as a rule financially very badly off, are unable to procure a good general schooling.

towards the problems of life, including "elimination of prejudice, development of open-mindedness, frank recognition of difficulties, willingness to face them square and to make use of professional service."

A comparison may, however, also be made of skilled and unskilled workers in respect of their standard of schooling. The unskilled were definitely at a disadvantage. About one-quarter of the unskilled European group and well over one-half of the non-European unskilled had had no schooling, as opposed to one-sixteenth of the skilled Europeans and just under one-third of the skilled non-Europeans. An additional group of about two-fifths of the unskilled Europeans, as compared with an additional one-fifth of the skilled, attained standards below Five. (In the case of the non-Europeans the proportions were about one-third and two-fifths respectively.) Standards Five and Six were attained by approximately a further two-sevenths of the unskilled Europeans, as opposed to about three-sevenths of the skilled. (In the case of the non-Europeans the proportions were about one-tenth and one-quarter respectively.) Progress beyond Standard Six occurred amongst less than one-twentieth of the unskilled European group, but among a little less than one-third of the skilled. (In the case of the non-Europeans the proportions were about one sixty-fifth and one-thirtieth respectively.) Both in the case of the Europeans and non-Europeans, therefore, one finds exactly the opposite tendency amongst skilled and unskilled. The greater proportion of the unskilled group as such are found amongst the first two sections mentioned above, i.e., those with little or no schooling, and the fractions diminish rapidly for the last two sections, i.e., those with more schooling. *Both the European and the non-European skilled dependent is, on the whole, better educated than the unskilled dependent of the same racial group.* It seems that the standard of schooling reached by the skilled non-European group as a whole is similar to that attained by the unskilled European group, while the standard attained by the unskilled non-European falls far below that of the unskilled European group as a whole.

The conclusion reached indicates that the skilled dependent has at least the educational factor somewhat in his favour, and this can be taken into consideration when a commencement is made with constructive treatment. Other circumstances being equal, his employability can be rated higher, on the whole, than that of the unskilled, owing to somewhat better education, even though his vocational training may mean very little through insufficiency or lack of real skill (see p. 125).

The question may well be raised why it is that in the European group the skilled worker, who is on the whole also the better educated person, should form the majority of the European dependent group. This will be discussed at a later stage (see p. 124).

THE OCCUPATIONS OF THE MALE CHIEF DEPENDENTS.

Dependency is found amongst persons who follow quite a variety of occupations, but certain of these occupations seem to provide a relatively greater number of dependents than others (see Table No. XXVI.).

TABLE NO. XXVI. THE PERCENTAGE DISTRIBUTION OF EUROPEAN AND NON-EUROPEAN MALE CHIEF DEPENDENTS ACCORDING TO USUAL OCCUPATION.

<i>Occupation</i>	<i>European</i>	<i>non-European</i>
i. Unskilled Workers	35.74 ± 2.2	65.39 ± 1.3
ii. Skilled Workers		
in Building	17.07 ± 1.7	11.84 ± .8
Engineering	6.39 ± 1.1	1.15 ± .3
Printing . . . . .	.36 ± .3	.47 ± .2
Food Industries	4.00 ± .9	1.85 ± .3
Clothing and Textile . . . . .	.91 ± .3	1.27 ± .3
Woodwork and Furniture	3.45 ± .9	4.90 ± .6
Domestic (chefs, barmen, stewards, etc.)	4.55 ± 1.0	3.23 ± .5
Farming and Gardening (skilled)	.72 ± .3	—
Clerical and Semi-professional	7.92 ± 1.3	.45 ± .2
Leather Trade	2.18 ± .7	1.42 ± .3
Mining . . . . .	.54 ± .3	.15 ± .2
Overseeing	1.44 ± .4	.05 ± .1
Miscellaneous	14.61 ± 1.7	7.17 ± .7
<i>Total</i>	99.88	99.34 •

The largest number of dependents following a single occupation was that of the unskilled workers. This was especially true of the non-Europeans, where the unskilled were far in excess of the skilled workers. It was, however, also true of the Europeans in spite of the fact that altogether there were nearly twice as many skilled workers as unskilled.

A study of the occupations in which the skilled workers who became dependents were engaged shows that among both the Europeans and the non-Europeans the outstanding case is that of the building trade. Quite substantial percentages (see Table No. XXVI.) of the dependents belonged to this group, including mostly bricklayers, masons, and painters. The following occupations contributed small percentages of dependents (which are, however, not so small as to be negligible) in roughly the following order for the European group: clerical and semi-professional work; engineering trades (i.e. mostly motor mechanics, plumbers, etc.); domestic pursuits; food industries; woodwork and furniture making; and the leather trade (mostly boot and shoe making). The percentages from occupations such as printing, clothing and textile industries, farming and skilled gardening, mining, etc., were very small, i.e. less than 1 % in each case.

In the case of the non-Europeans the degree of dependency need only be noted further in connection with wood-work and furniture making, and domestic pursuits. There were very few dependents who had been in occupations such as mining, printing, clerical and semi-professional work. Engineering, the food industries, the clothing and textile industries, and the leather trade contributed somewhat higher percentages, although they do not mean very much.

The fact must be stressed, however, that the numbers of dependents from occupational groups found amongst the clients of this organisation do not really give a reliable indication of the extent to which causative influences are at work within those occupations, making for unemployment and dependency. Deductions as to the causal relation between occupation and dependency can only be made when one knows the proportion of the city's population occupied in the

various trades or professions. For instance, among both Europeans and non-Europeans there are very few unemployed who had been engaged in mining, and this is simply because there are very few miners in Capetown. In Johannesburg, with a large mining population one can presume that the number of unemployed and dependents who had been engaged in mining would be very large. Consequently, perhaps with the exception of unskilled work and the building trade, one cannot suggest, on the basis of the information given, that any occupational group is particularly liable to dependency owing to the nature of the occupations. The investigation of such causal relationships, which should have been the object here, was not pursued any further owing to the lack of information on the distribution of the working-class population in the City over the various occupational groups mentioned.¹ Exception is made with regard to unskilled work and the building trade, since it is well known that in both these cases work is often uncertain and irregular, and very often subject to climatic and seasonal fluctuations. This fact, taken together with the higher percentages among both racial groups, might be taken as indicating to a certain extent at least a possible causal relationship between the conditions under which employment takes place in these occupations and dependency.

THE SCHOOLING OF THE CHILDREN OF DEPENDENTS.

The percentage distribution according to age and standard of schooling were calculated for three groups of children, viz., for the European and non-European children of dependents, and for a control group of European children of non-dependent parents (see Tables No. XXVII. to No. XXIX.). The latter group was attending selected schools in Cape-town and suburbs during November, 1933. The selected schools were chosen in consultation with an official of the

¹ The census information on occupations was available, but an attempt to arrive at a frequency distribution of the population of Capetown according to the particular occupations found amongst the dependents led to so many difficulties, which need not be mentioned, that the attempt was abandoned.

TABLE NO. XXVII. THE PERCENTAGE DISTRIBUTION ACCORDING TO AGE AND SCHOOL STANDARD OF CHILDREN OF EUROPEAN NON-DEPENDENTS.¹

Ages	Below Standard ²	Standards										Totals	
		1	2	3	4	5	6	7	8	9	10		
Under 7	2.49	.07										2.56	
7	3.32	1.03	.22									4.57	
8	1.17	2.34	1.93	.14								5.58	
9	.06	(1.04)	3.02	1.53	.33							5.98	
10		.07	(1.52)	3.66	2.15	.26						7.66	
11		.39	(2.23)	3.89	2.19	.27						8.97	
12		.02	.05	.65	(2.32)	4.51	2.06	.38				9.99	
13			.02	.08	.83	(2.45)	3.56	2.57	.18			9.69	
14				.02	.29	1.16	(2.93)	4.93	2.35	.21	.02	11.93	
15					.03	.05	.41	1.24	(4.28)	4.37	1.93	.18	12.49
16						.02	.14	.51	2.26	(3.14)	3.30	1.48	10.85
17							.03	.12	.49	1.08	(2.06)	2.50	6.28
18								.04	.03	.17	.70	(1.46)	2.40
19 and over										.02	.04	.66	.72
Totals	7.04	4.59	7.15	8.34	9.88	11.15	10.73	14.94	11.31	8.24	6.30	99.67	

¹ The Standard Deviations for the percentages will be negligible since this group of children consisted of 6,112 individuals and it was inadvisable to complicate the Table unnecessarily.

² Sub-standards A and B.

TABLE NO. XXVIII. THE PERCENTAGE DISTRIBUTION ACCORDING TO AGE AND SCHOOL STANDARD OF CHILDREN OF EUROPEAN DEPENDENTS.¹

Ages	Below standard ²	Standards										Totals
		1	2	3	4	5	6	7	8	9	10	
Under 7	3.9											3.91
7	(7.24)	1.74										8.98
8	7.53	3.77	1.30	.29								12.89
9	2.75	(4.93)	3.33	1.45	.43							12.89
10	.72	2.32	(5.94)	2.60	.72	.29						12.59
11	.87	.72	2.75	(3.91)	2.46	.58						11.29
12		.57	1.74	3.33	(3.47)	2.17	.87					12.15
13		.43	1.16	1.44	3.47	(2.47)	1.16	.43				10.56
14			.28	.87	1.16	3.04	(1.60)	.57	.14			7.66
15			.14	.43	.43	1.16	1.44	(.43)	.43	.14		4.74
16			.14			.29	.29	(.43)	.43	.14		1.72
17								.43		(.14)		.57
Totals	23.02	14.62	16.78	14.32	12.14	10.00	5.36	2.15	1.00	.42	.14	99.95

¹ This Table is based on 703 individuals; but as it was considered inadvisable to complicate the table unnecessarily the Standard Deviations are not shown.

² Sub-standards A and B.

TABLE NO. XXIX. THE PERCENTAGE DISTRIBUTION
ACCORDING TO AGE AND SCHOOL STANDARD OF
CHILDREN OF NON-EUROPEAN DEPENDENTS.¹

Ages	Below standard ²	Standards									Totals
		1	2	3	4	5	6	7	8	10	
Under 7	3·31										3·31
7	10·04	1·20	.05								11·29
8	9·22	2·59	1·68								13·49
9	6·05	4·52	2·74	1·05	.19						14·55
10	3·03	3·75	3·99	1·78	.43						12·98
11	1·88	2·02	2·64	2·64	1·39	.24					10·81
12	1·54	1·78	1·83	3·03	2·50	1·10	.24				12·02
13	.38	1·10	1·39	2·06	2·74	1·06	.47				9·20
14	.10	.48	.71	1·54	1·74	.87	.77	.20			6·41
15		.20	.48	.82	.96	.72	.81	.10	.05		4·14
16		.05		.20	.35	.24	.29	.05	.10		1·28
17				.05	.15		.05			.05	.30
Totals	33·55	17·69	15·51	13·17	10·45	4·23	2·63	.35	.15	.05	99·78

Provincial Department of Education, and were chosen only on the ground that the children of such schools belonged to families who were not dependent on charity. An additional check on the selection was that none of the schools selected were mentioned on the index cards of the Board of Aid.

The Schooling of non-European Children. The presentation of the material in connection with the schooling of non-European children of dependents (Table No. XXIX.) can unfortunately lead to no further comparison or discussion. It is not possible to decide whether these children are backward in school as the result of dependency, since one would need some norm with which to compare the data on their standard of schooling at the various age levels. The correct norm would have been to have obtained a distribution of the children of non-European non-dependent parents over the various standards at the different ages. At the office of the Provincial Education Department could not be given, as was the case with the European children. A possible alternative procedure was to approach the principals of non-European schools and obtain a distribution from them. In this case

¹ This Table was based on 2,082 children.

² Substandards A and B.

there was the difficulty that they might have such distributions available for all their children, without any distinction being made between those of dependent and non-dependent parents, and practically no such school could be found where one could be perfectly sure that they were not attended by any children of dependents. Consequently it would have been necessary to go to such schools, obtain the necessary data (as to age, standard, and the dependency or not of their parents) separately from each child in a sufficiently large group. Owing to the extent of the investigation in hand a subsidiary task of this extent could not be undertaken. There remained the possibility of comparing the data on the schooling of the children of non-European dependents with the data on the schooling of European children, either of dependent or non-dependent parents. This was, however, also impossible since the schooling of the European and non-European groups does not take place under the same conditions, for there is a factor which would make for a lower standard of schooling among non-Europeans. Consequently, on the basis of a comparison with European groups one would not be able to make any deductions on the effects of dependency on the schooling of non-European children. The factor referred to is that the children of non-European dependents do not obtain free schooling, and there is also no legal compulsion as is the case with all Europeans.

Approximately 50 % of the total number of school-going children of dependent non-European parents were 7-16 years of age and in Standard One and below, the remainder being distributed over standards Two to Eight, but with a very definite falling off of the numbers after Standard Four. In view of the absence of free compulsory schooling for non-European children, any comparison with the European children would be worthless.

The Schooling of European Children. The following comparisons and deductions may be made in connection with the schooling of European children. Of the total number of children of these parents at school, taking each of the European groups separately, 86.5 % \pm 1.3 of the children of depen-

dent parents were between 7 and 15 years of age¹ and in Standard Five or below, while only 45·4% \pm ·6 of the children of non-dependent parents of the same age levels were in these lower standards. For the same age group there were, however, about twice as many of the children of non-dependent as of dependent parents in Standard Six. 21·4% \pm ·5 of the former group, as compared with 2·14% \pm ·5 of the latter group of children (all 7-15 years old) were in standards above Six. For this age group there were, therefore, ten times as many children in the secondary standards from the control group as from the dependency group.

A negligible percentage of the children of European dependents *at school* were 16 years of age and over, viz. 2·29% \pm ·5 as compared with 20·25% \pm ·5 in the case of children belonging to the control group. This is largely due to the fact that more prosperous parents are able to prolong the school careers of their children beyond the limits of free education, while in the case of dependents this usually can only happen when a child obtains special assistance. Even then the child may be taken from school to work in order to assist the poverty-stricken family. A further comparison can be made between the two groups in connection with the school standard of the children above 16, leaving out those 18 years and older since these do not appear in both groups. Of the very small group of 16 and 17 year old children of dependent parents about one-third (namely ·72%) were still in primary standards, and two-thirds (1·57%) in secondary standards. In the case of the much larger group of 16 and 17 year old children of non-dependent parents, nearly the whole group is to be found in secondary standards (namely, ·82% in primary as opposed to 16·31% in secondary standards).

Each comparison of this series leads to and supports the statement that *the schooling of the school-going children of non-dependent European parents is superior to that of the children of dependent parents both in respect of the average standard of schooling ultimately reached and in respect of the*

¹ This age group was chosen since it includes the children for whom education was free and compulsory.

average standard of schooling attained by the children of various age classes studied. This conclusion holds true even for the ages where conditions such as compulsory and free education are present making for equal school opportunities. The explanation of this will be dealt with later.

It is possible to compare the schooling of these two groups of children from another standpoint, viz., the number of retarded children found in all the standards. This comparison was effected with the assistance of the retardation criterion used by Dr. Malherbe.¹ The black line in each column in Tables No. XXVII. and XXVIII. shows the limit below which children are so seriously retarded that they "menace the homogeneity of the class group."² The percentage of retarded children of European dependents in Standard One³ and above is approximately $12\% \pm 1.1$, as compared with a little less than $3\% \pm .2$ of retarded children of European non-dependents.

The question must now be faced why educational deficiencies, such as generally inferior average standard of schooling and greater degree of retardation, exist amongst the school-going children of dependent parents as compared with those whose parents are more prosperous. The reason may be found in social conditions such as differences in the circumstances of the schools attended and adverse home or environmental conditions, or perhaps in the greater prevalence of intellectual defects amongst the dependency group. Adverse home conditions might include lack of opportunity or incentive in connection with home-work through overcrowding or parental indifference. The adverse home conditions might also include unhygienic conditions or lack of nourishment, which make for physical deficiencies, hampering psychological development and school progress. Absenteeism from school, through truancy or lack of parental control, or the utilisation of the service of the child to increase the family income even though he is not yet 16 and

¹ Dr. E. G. Malherbe: "Education and the Poor White," p. 146 et seq.

² Dr. E. G. Malherbe: op. cit., p. 147.

³ The retardation limits are not shown for standards below 1.

has not passed Standard Six,¹ must also be reckoned with as a cause of educational deficiencies amongst the children of dependents.

No intelligence tests were applied, and hence it is not possible to discuss whether low intelligence or intellectual defects are found to a greater extent among the children of dependents than in the population as a whole. Consequently a comparison cannot be made as to the relative importance of social as opposed to intellectual defects as causes of educational backwardness amongst the dependency group.

On the basis of case studies made in connection with such families, one feels compelled to emphasize very strongly the unfavourable influence on schooling of adverse home and environmental conditions.

¹ At least 16 % of the children (of European dependents) between the ages 7-10 years, and at least 9 % of those between the ages 10-16 were not at school, although legally they should have been. It is well-known among the education authorities in Capetown that there is a certain amount of "dodging" of the legal requirements among the poor classes. When the child goes to school the family is involved in a certain amount of additional expenditure, even though the schooling may be free. For example, the child must perhaps be clothed much better, or there may be tram and bus fares, expenditure on stationery, etc. When a family is already so poor that it is dependent it is to be expected, unless the parents are very serious about the education of the child, that the immediate disadvantages rather than the more remote advantages of school attendance should appeal to them.

CHAPTER XII.

EMPLOYMENT AND UNEMPLOYMENT AMONG ABLE-BODIED DEPENDENTS.

Every dependent is to a greater or lesser extent also unemployed. There are, of course, various degrees of unemployment. There are dependents who are completely unemployed; others are engaged in regular part-time work; others are in full-time employment which, however, is inadequately paid; and others have irregular work. The completely unemployed may consist of people who are too old to work, or of those who are temporarily or permanently disabled or ill, but sometimes even include able-bodied persons. These very often depend entirely on charity for subsistence. Those who are employed, but under the limitations mentioned above, are only partially dependent, for the sort of income which they have must be supplemented by relief owing to the insufficiency of the income. Such partial dependents sometimes include aged, ill, and partially disabled persons (semi-fits), but also, and perhaps more often, able-bodied dependents.

One question which arises is to what extent the able-bodied dependents are in the relatively fortunate position of being partially employed. Among the able-bodied dependents, just as among the other groups, one finds those who are completely unemployed and entirely dependent, and the partial dependents who are in badly-paid or part-time regular work, or otherwise irregular work. Although one cannot be very dogmatic about differences between the completely and the partially dependent cases there is this difference, that those who are partially dependent may more easily retain their self-respect than the others. It is true that a person who has become completely dependent for a time need not have lost his desire for independence, but there is certainly a greater chance of evading the unfavourable consequences of relief if the recipient can show his capacity and willingness for work, and can feel that he is at least partially

making good. It is because of this fact that in the further discussions of unemployment special attention will be given to the existence of partial employment and partial independence amongst the able-bodied recipients of charity.

Vocational training is usually regarded by social workers as a factor which reduces the chances of unemployment. The fact that skilled workers are to be found amongst those who are dependent shows, however, that the possession of such qualification does not entirely prevent dependency. If vocational training does not entirely prevent dependency, is it not possible that vocational qualifications may, at any rate, lessen the extent of the dependency? In order to ascertain this, and thus to confirm or refute the above-mentioned unproven general opinion, a comparison was made of skilled and unskilled workers of both racial groups, not only in respect of the extent to which these respective occupational groups were able to supplement their charitable assistance by employment, but also in respect of the periods of unemployment.

THE VARIOUS CLASSES OF UNEMPLOYED WITH SPECIAL REFERENCE TO EMPLOYABILITY.

It was found that the dependents suffering from complete unemployment, or who were inadequately paid, or who were only engaged in part-time or irregular work, could be classified as in Table No. XXX.

TABLE NO. XXX THE PERCENTAGE DISTRIBUTION OF PARTIALLY OR COMPLETELY UNEMPLOYED OR INADEQUATELY PAID DEPENDENTS.

	<i>Europeans</i>		<i>non-Europeans</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
Aged ¹	11·87	7·85	10·42	9·70
Permanently disabled or ill	4·96	.84	6·94	1·91
Semi-fit	3·97	.99	2·50	1·00
Temporarily disabled or ill	9·24	2·57	6·10	2·75
Able-bodied	46·65	11·05	48·77	9·50
<i>Totals</i>	76·69	23·30	74·73	24·86

¹ Men 60 years of age and above. Women 56 years of age and above. These age limits were chosen to distinguish this class, since these are the ages at which the respective sexes are usually pensioned off.

From this table it can be seen that one really has to do with different classes of unemployed. There are those who are not only unemployed but also mainly unemployable—at least from the standpoint of complete employment. This would include the aged and the permanently disabled or ill, i.e., together 25·5 % Europeans and 28·97 % non-Europeans. Even the temporarily disabled or ill are at least temporarily unemployable. One may say that the unemployment in all such cases is more or less natural.

The group of semi-fit chief dependents is quite small (4·96 % Europeans and 3·50 % non-Europeans), and although they are employable to a certain extent special forms of work must be found for them. This small group will not be discussed further, but although it does not loom large from the standpoint of numbers it does merit special attention from the point of view of constructive social effort.

Definitely unnatural, on the other hand, is the unemployment of the employable able-bodied dependents. *This group therefore deserves attention, especially since it contains a very large proportion of the chief dependents, namely 57·7 % Europeans and 58·27 % in the case of the non-Europeans.* The size of these groups of able-bodied dependents must be clearly emphasised. There are times when organisations which are mainly relief-giving like to justify their procedure by insisting that their clients are mainly of the type for which constructive social work is hardly serviceable. Here one finds the case of a large relief-giving organisation having out of a total of 700 European and 2,469 non-European cases on its books at a certain stated period, roughly 60 % fully able-bodied dependents who are unemployed or insufficiently employed, but not unemployable. It must be noted, however, that this investigation was carried out during the depression, when there would be a tendency for more such able-bodied dependents to be receiving charity than is usually the case. Nevertheless these figures show without any doubt the need for the relief-giving organisations to correlate their assistance very closely with reconstructive family welfare service, and with the provision of employment by well organised employment exchanges. *These figures show only too*

clearly the large number of clients who possess the fundamental quality of employability which makes reconstructive effort not only possible but essential. Facts such as those above indicate that in connection with employment and dependency the fundamental group to be taken into consideration is the able-bodied. This will be done here.

UNEMPLOYMENT AMONG ABLE-BODIED DEPENDENTS.

Information on the family condition, employmental state, vocational status and regularity of work of able-bodied dependents was not available in full detail for all cases of this type. Consequently only a smaller group of able-bodied chief recipients could be used for the purpose of this portion of the study. This smaller group consisted of 200 Europeans and 630 non-European cases, the sampling ratios being about 29 % and approximately 26 % respectively. An analysis was made of this group to discover to what extent unemployment or employment, both regular and irregular, of able-bodied dependents existed amongst men and women of the various types of family cases, and to what extent it existed amongst skilled and unskilled male dependents (see Table No. XXXI.).

Of the total number of chief recipients in each of the racial groups in the sample, approximately 87 % of the Europeans and 78 % of the non-Europeans were altogether without work at the time of the enquiry. The remainder in each group, viz., about 13·5 % of the Europeans and approximately 22 % non-Europeans, were able to supplement their charitable assistance by regular or irregular work. It was not known whether this employment was of a permanent nature or not, but about 7 % of the Europeans and approximately 17 % of the non-Europeans, i.e. a very substantial portion of those partially employed, were engaged in irregular work—probably of the odd-job type.

The conclusion reached here is, therefore, that *by far the majority of the able-bodied chief recipients are completely unemployed and, in so far as partial independence might be a redeeming factor in their poverty situation (as was suggested above), this is not found to exist in the majority of cases.*

TABLE NO. XXXI. THE PERCENTAGE DISTRIBUTION OF A SAMPLE GROUP OF ABLE-BODIED MALE AND FEMALE DEPENDENTS OF BOTH RACIAL GROUPS ACCORDING TO THEIR FAMILIAL CONDITION, EMPLOYMENTAL STATE, VOCATIONAL STATUS AND REGULARITY OF WORK.

Type of case	In Employment						Out of Work			
	Females		Males				Males		Females	
	Regular	Irregular	Skilled	Irregular	Regular	Irregular	Skilled	Unskilled	Skilled	Unskilled
Europeans	—	—	—	—	—	—	—	—	—	—
	2.0 ± 1.0	—	3.0 ± 1.2	6.5 ± 1.7	.5 ± .5	.5 ± .5	40.5 ± 3.5	20.5 ± 2.8	12.0 ± 2.3	—
	3	—	—	—	—	—	—	—	—	—
	4	—	—	—	—	—	—	—	—	—
	5	—	—	—	—	—	—	—	—	—
	Total	2.0 ± 1.0	.5 ± .5	3.0 ± 1.2	6.5 ± 1.7	1.0 ± .7	.5 ± .5	48.0 ± 3.5	24.5 ± 3.0	15.5 ± 2.5
non-Europeans	—	—	.2 ± .2	.6 ± .3	.3 ± .3	.3 ± .3	2.3 ± .5	3.3 ± .7	—	—
	2	—	1.2 ± .2	4.3 ± .0	.7 ± .4	.8 ± .4	8.1 ± 1.1	19.2 ± 1.6	38.4 ± 2.0	9.2 ± 1.2
	3	3.3 ± —	.74.6 ± .9	—	—	—	—	—	—	—
	4	—	—	—	—	—	—	—	—	—
	5	—	—	—	—	—	—	—	—	—
	Total	3.3 ± .74.6 ± .9	1.4 ± .7	.43.6 ± .7	.8 ± .4	.8 ± .4	21.5 ± 1.6	43.9 ± 2.0	12.4 ± 1.4	—

1. Husband and wife without children.
2. Husband and wife with children.
3. Lone mothers with children.
4. Lone fathers with children.
5. Lone males.
6. Lone females.

Of the 87 % of the completely unemployed able-bodied European dependents about 15 % were women, mainly lone mothers with children. A similar position existed among the non-European completely unemployed. In both cases, therefore, roughly four-fifths of the able-bodied unemployed were men, and in fact mostly men with wives and children. *It is quite clear, therefore, that in the cases of the dependency of able-bodied persons complete unemployment usually means the unemployment of the fathers of families.*

As far as the able-bodied male dependents are concerned it was possible to distinguish between the skilled and the unskilled (see Table No. XXXI.). It is interesting to note that of the 72.5 % of European males completely out of work the greater proportion (48 %) were skilled, and the smaller proportion (24.5 %) were unskilled. The opposite tendency must be noted amongst non-Europeans, namely, the predominance of unskilled unemployed over skilled.

The possibility must be faced that these figures may not be very trustworthy. The sample of able-bodied dependents was relatively small, e.g., in the case of the Europeans the sample contained 111 skilled and 52 unskilled *male* dependents, and in the case of the non-Europeans 171 skilled and 334 unskilled *male* dependents. In addition to this a number of cases had to be left out because the vocational training was not entered. Some visitors left this space blank with the intention to indicate thereby that the person had had no training. The investigator felt, however, that use could only be made of cases in which there was a positive and not only a negative indication that the person concerned had had no training. By discarding such cases he may have introduced a tendency towards selection of a sample which would count against the proportion of unskilled. Opposed to this argument, however, there is the fact that in the whole group of dependents the ratios of skilled to unskilled Europeans was 2:1, i.e., very nearly the ratio of skilled to unskilled European male dependents in this sample. In the case of all the non-Europeans studied, skilled were to unskilled in the whole group as 1:2—again the same ratio as in the smaller sample. Under these circumstances it seems reasonable to conclude

that the sample proves that in the case of the European able-bodied male dependents of this organisation who are completely unemployed there is a big preponderance of skilled over unskilled, while the opposite is true of the non-Europeans.

The explanation which can be given is that in the ordinary population a preponderance of skilled and semi-skilled over unskilled workers exists in the case of the Europeans.¹ Consequently it may be argued that one could expect more actual unemployment amongst the skilled workers, who form the greater portion of the male working population, than among the unskilled, who form a fairly small portion. On the other hand, one is so persistently informed by educational authorities that more schooling and more training, especially vocational training, is an antidote to poverty and dependency, that it seems rather surprising to find that the proportion of skilled European unemployed amongst the able-bodied male dependents does not fall very far below the proportion of skilled workers in the European population.² *The conclusion seems unavoidable that a greater proportion of skilled able-bodied men are found completely unemployed and dependent on charity than one would have expected from the standpoint of the valuation usually placed on vocational training, although the proportion might have been expected from a purely statistical point of view.*

It is, however, necessary at this stage to emphasise once again that this enquiry took place during the depression, when causes for abnormality in connection with the point at issue might have been present to an exceptional extent, i.e. for more skilled workers to be dismissed than is normal. Besides this, the provision of work by Labour Bureaus mainly meant placing in relief work of the pick-and-shovel type. This would provide for the unskilled more often than for the skilled, who would be much more likely to attempt to

¹ See Malherbe: "Education and the Poor White," p. 124.

² It was not possible to discuss on similar lines the position of the Coloured able-bodied unemployed, since sufficiently recent Census material on the vocational status of Coloured persons to be of value for comparison was not available.

remain in town, where a possibility might arise for employment in their trade. This would also mean a tendency for the unskilled unemployed to diminish in numbers, but for the skilled unemployed to remain on charity.

It is also necessary to add that although termed "skilled" or "semi-skilled," owing to the fact that they have passed through the necessary period of training for their occupation, these workers might nevertheless be bad workers. In fact, when placed by special effort, they were often sent back by employers as incapable. This means, of course, that the simple fact of having been trained does not necessarily make a person worthy of employment, but only if his training has given him real skill, and he has in addition certain traits of character indispensable to success. It was not possible to determine for the object of this study which of the so-called skilled able-bodied dependents were unemployed, owing to incapacity for some or other of these reasons, and which were able-bodied skilled who were at the same time capable and deserving. If the so-called skilled dependents were not really skilled in spite of training, or if they were skilled persons who had degenerated, and there is every likelihood that many of the clients of a relief-giving organisation might be of such types, then it is quite clear that one must accept any deductions as to employment and employability made here concerning differences or similarities between skilled and unskilled workers with great reserve. E.g., if one were to find that there is a tendency for long-term unemployment to occur amongst the skilled just as often as amongst unskilled, then one may not conclude that training is of no significance for the relief of unemployment, because the so-called skilled dependents may not give any indication of the value of training, since they are not really skilled and capable in the sense usually meant when one speaks of skilled workers (see, however, p. 109).

PART-TIME AND INSUFFICIENTLY PAID EMPLOYMENT OF ABLE BODIED DEPENDENTS.

Reference has already been made (see p. 122) to a small group (13·5 % Europeans and 22 % non-Europeans) who earned a small income which had, however, to be supplemented by charitable assistance. About one-fifth of this

group of Europeans and one-third of the non-Europeans were women, practically all lone mothers with children. Nearly all these European women, but just below one-half of these non-European women, were engaged in some form of *regular* employment. Although regular it must have been inadequately paid or only part-time (e.g., washing, ironing, or charring one day in a week), since the assistance from charity could not be dispensed with.

In the case of these European men, practically all of whom had wives and children, most of those possessing some kind of employment were skilled, although two-thirds of these skilled workers only had irregular work. There seems to have been some advantage in this respect in being skilled, but after all one does not feel inclined to stress the value of training by demonstrating that it helps to enhance the chances of the unemployed obtaining part-time or underpaid and mostly irregular employment which still leaves the family partially dependent! In the case of the non-Europeans more unskilled than skilled men obtain this kind of employment, which is presumably due to the preponderance of unskilled among the non-European workers. In their case practically all partial employment is of the irregular type. On the whole, details such as these are of slight importance, but the main fact is that which has been pointed out before, namely, that *partial independence owing to partial employment only exists in the minority of cases.*

DURATION OF UNEMPLOYMENT AMONG SKILLED AND UNSKILLED WORKERS.

It was not possible within the limited time available for the survey to obtain data about the *precise* periods of unemployment for each of the recipients visited, but an effort was made to ascertain the approximate period in months immediately preceding the date of the enquiry during which the recipient was more or less continuously without employment. The forms contained adequate data about the periods of unemployment of 173 European and 481 non-European male dependents, the sampling ratios being about 25 % and approximately 19 % respectively. Although the European

sample was small it is perhaps worth while to compare the duration of the unemployment of skilled and unskilled workers.

TABLE NO. XXXII. THE PERCENTAGE DISTRIBUTION OF SKILLED AND UNSKILLED WORKERS ACCORDING TO DURATION OF PRESENT UNEMPLOYMENT.

Period of Unemployment	Europeans		non-Europeans	
	Unskilled	Skilled	Unskilled	Skilled
6 months and less . .	19 ¹	24 ± 4·3	36 ± 3·0	33 ± 4·1
7 to 12 months . .	38 ¹	41 ± 4·9	30 ± 2·9	29 ± 3·9
13 to 24 months . .	24 ¹	26 ± 4·4	22 ± 2·8	29 ± 3·9
More than 24 months	19 ¹	9 ± 3·0	12 ± 2·1	9 ± 2·6
<i>Total Percentage</i> .	100	100	100	100

In the case of the Europeans one might be tempted to suggest that there was a greater tendency amongst the unskilled dependents to remain unemployed for a longer period than amongst the skilled. Such a deduction would, however, be based mainly on the fact that 19 % of the unskilled as opposed to 9 % of the skilled were unemployed for more than two years. For the other periods in the table there are no significant differences, especially as the standard deviations are very high, owing to the smallness of the sample. In the case of the non-Europeans the differences between the skilled and unskilled as far as the duration of unemployment is concerned are insignificant throughout. Such comparisons seem to indicate, in the case of both racial groups, that *there is no difference in tendency with regard to the duration of unemployment amongst skilled and unskilled dependents.*

A brief comparison may also be made of the frequency with which the various periods of unemployment occurred. Among the Europeans 7 to 12 months' unemployment occurred most (namely, among 36 % ± 3·4 of the family cases); next came the period 13 to 24 months (30 % ± 3·2 of family cases); then 6 months and less (23 % ± 3·0 of the family cases); and last of all periods longer than 2 years (11 % ± 2·1 of family

¹ Total number involved too small to derive the standard deviations from the table. (See Hogg: "Incidence of Work Shortage," pp. 115-116.)

cases). In the case of the non-European family cases the frequencies differed comparatively little, and the order of sequence was from the shortest to the longest period. *There was, therefore, a tendency for unemployment amongst Europeans to last a medium period, if this is taken to be between 7 and 24 months; and a tendency for it to last a shorter period (below 12 months) among non-Europeans.* Naturally, when such tendencies are indicated it must be understood that quite a number of individuals form exceptions.

CHAPTER XIII.

THE BEARING OF THE ACTUAL FACTS OF DEPENDENCY ON THE FORM SOCIAL SER- VICE AND SOCIAL POLICY SHOULD TAKE.

THE PLACE OF RELIEF IN SOCIAL SERVICE.

The group which was studied above consisted of families and persons who were very poor, so poor, in fact, that they were dependent on charity. Their poverty was plainly evident from the fact that most of them, Europeans as well as non-Europeans, were without any income whatsoever (p. 12). It is this, the financial aspect of poverty, to which the Board of Aid pays most attention, because it is naturally a person's financial position which determines whether that organisation will assist or not. When once the organisation has decided that the applicant for relief is poor enough to be assisted, and when relief has accordingly been granted to a case, the attitude usually taken up is that the organisation has fully discharged its duties until such time as the case applies again for assistance, when the whole procedure of investigation of the financial circumstances and the consequent granting or withholding of relief is repeated. This tremendous emphasis on investigating only the financial position of the applicants for relief has an important defect. The above research has shown that there are certain causal factors responsible for (e.g. pp. 12, 96, 121), and conditions or characteristics associated with, the dependency of the group studied (e.g., pp. 36, 49, 57, 58, 69, 71, 93, 107). To treat dependency merely by giving a relief grant means that the causes which brought about the dependency are not investigated, and consequently not treated at all. Charity in the narrow relief-giving sense can, in the light of the above research, no longer be regarded as a sufficiently adequate conception, and must be replaced by a wider conception in which ordinary relief is given its proper place.

Amongst the recipients of relief were found certain broad types which can be discussed from the point of view of whether the provision of relief grants only adequately deals with their cases.

(i) There were the more or less permanent dependents who could not hope to recover from their dependency. This would include the aged, and the permanently disabled or ill, forming about 26 % of the Europeans and 29 % non-Europeans (p. 119). Rehabilitative measures would not be of much use to this type. These were mostly couples without children, and lone persons. It must be recognised that dependents falling under this group must be given a more or less permanent form of assistance. Rehabilitative measures do not form the principal object of treatment, though undoubtedly other forms of social service than financial grants can be rendered, e.g., housing under favourable circumstances.

(ii) Also present were the semi-fits, dependents who are able to undertake light or special work (p. 119). Social work ought to aim at partial or complete rehabilitation, according to the special circumstances of the case. Supplementary material relief could be given permanently or temporarily, according to whether the real object of rehabilitating the case can be partially or completely achieved. Special attention will have to be paid to the tubercular cases, owing to the importance of this disease among both Europeans and non-Europeans.

(iii) Besides these there were the temporarily ill dependents, who have every chance in their favour of becoming independent when they have recovered from their illness (p. 119). Ordinary relief ought to be given as a means to assist recovery, but at the same time the morale and family life of the cases must be kept healthy by skilled family welfare service accompanying the grants.

(iv) Finally, one finds the able-bodied unemployed, who formed the bulk of the Board's dependents (p. 119). The principal object of social work in connection with the able-bodied unemployed ought to be their ultimate rehabilitation. Careful case study ought to be undertaken to discover the causal factors and processes that have led to the dependency.

At the same time the case cannot be allowed to starve, and it is necessary therefore to combine ordinary relief with social service. The relief can be given to meet the immediate demands, but the main emphasis should be on guiding the family towards economic independence and social adaptation.

THE OBJECTS OF SOCIAL WORK ACCORDING TO THE RESULTS REACHED.

Constructive social work seeks to combat the causes and conditions of poverty and dependency. The meaning of constructive social work is determined for an organisation by what is revealed by investigation and research about the causes and difficulties of dependent persons and families. (The vast majority of cases receiving assistance were families: see p. 67).

The above study of dependency can now be used to indicate the various factors which have to be taken into consideration in the formulation of a constructive policy by charitable organisations in dealing with poverty and dependency.

(i) **Economic Rehabilitation.** The various classes of unemployed were discussed with special reference to their employability. It was found that by far the larger proportion of dependents were able-bodied although unemployed (p. 119), and since they were employable they had the essential quality making constructive social work possible. In spite of their having employability in their favour, however, no effort is usually made by the Board to guide them towards independence. To give a food ticket or a money grant to an unemployed person may keep him from starving, but it does not cure his unemployment. Constructive work in connection with unemployment will have to go in the direction of (a) the collection of data on the causal and other factors associated with unemployment in the city, in order to help to attack this at the roots by propaganda or other means. (This means undertaking in future periodic general investigations, as well as continuous sound case studies.) (b) The exploration of methods of relieving unemployment and of obtaining continual and close co-operation with Labour Exchanges; and

(c) the determination of how dependency arising from insufficiently paid employment can best be dealt with locally.

(ii) **Social Reconstruction.** The problem of poverty and dependency is largely a result of unemployment, and the provision of adequately paid work would contribute towards diminishing able-bodied pauperism. Provision of work, however, is only one aspect of constructive social work. It is necessary to take into consideration other factors as well.

(a) *Environmental and Housing Conditions.* Facts were produced to show that the environmental and housing conditions of most of the dependents were very unsatisfactory. For the most part the dependents lived in densely populated and overcrowded areas, where intermixture of European and Coloured are frequent, and living and sanitary conditions very bad (pp. 36, 92, 93). Experienced social workers recognise that it must be taken into consideration that environmental and housing conditions are not only the result of poverty but are also important causes of further aggravating the downward trend in the social scale. When a family lives in a bad environment the latter influences unfavourably the home-life of the whole family, and frequently results in moral and social degeneration. In fact, there were signs of such deterioration to be seen in the dirty condition of some of the homes visited, in the lack of parental control, and in parental indifference. In the end the family becomes so degraded that the mere provision of employment without improvement of the environmental and home conditions means that the family will soon again find itself in difficulties. In fact, it was found that not only does the dependency of the breadwinner frequently commence at an early age, but that once he has become dependent his and his family's dependency very often tends to persist (see p. 49).

(b) *Management of Incomes.* All of the families in the group examined were in receipt of assistance, and there was a small but not negligible percentage of cases that had non-charitable incomes, which were sometimes so high that doubts could be entertained whether these ought to be dependents at all (see p. 15). Perhaps their dependency is due to

bad management. Not much is known about the household economy of dependents, but there are good reasons for believing that among the dependent group as a whole there is much injudicious purchasing and incorrect buying.¹ It would be useless to improve the income position by providing adequately paid employment if, as the result of bad management, the dependents were to find that they could not manage without continued assistance. With the improvement of income there ought to be a better standard and more intelligent manner of living. At present the household budgets of dependents contain mainly three items—rent, food, and household requirements. This can be understood because with a small income there cannot be provision for anything else. But even among the relatively small group of dependents who had quite big incomes these three items constituted the whole of the budget. It is very probable that if the financial position of the dependent group, as a whole, were to improve, an increase of income would simply mean an increase in the amounts spent on these items, and not any improvement in the manner or standard of living.² It is clear that charitable organisations ought to consider what steps could be taken for improvement in regard to the household economy of dependents, not only while they are dependent but *especially for some time after the grants could be withdrawn.*

(c) *Health Conditions.* The dependent sick, of whom the majority stood every chance of recovery and ultimate employability (see p. 104), form a group in regard to which special consideration should be given as to what type of rehabilitative service is needed. At present the Board of Aid really does not seem to worry about the sick dependents beyond including in their food order a few additional but necessary food items. Social circumstances may, however, have brought about the conditions of ill-health, or may result in

¹ See Perold: op cit., Chapter V., especially Tables 27 and 28.

² B. Vorster: "Die Huishoudelike Begrotings van Ontvangers van Liegdadigheid by die Onderstandsraad in Kaapstad." This study is a thesis at present being written for the degree of M.A. in the Department of Sociology, University of Stellenbosch.

prolonging this condition. The point is that, apart from the medical service rendered by the Health Department to the dependent sick, frequently social service is required as well — far-sighted service aiming beyond present assistance and cure to future prevention. It is the duty of an organisation presumably engaged in family welfare work to consider how the sick dependents can be assisted not only to health and a precarious living, but also to real self-sufficiency and social adaptation, and to consider what general measures must be taken to reduce the extent of dependency due to illness.

(d) *Limitation of Size of Dependent Families.* Both the size of the family and the presence of young children probably contributed to the dependency of the group studied (see p. 71). The average ages of the European and non-European male chief dependents were 43·2 years and 41·7 years respectively (see p. 51). Most of these were heads of families (see p. 67), and by far the majority were of equal age or older than their wives (see pp. 60-62). It is possible, therefore, that the average size of the dependent family may increase still further, and thus aggravate the dependency situation. It is desirable that the Board of Aid should consider ways and means of preventing the increase of the families of the very poor. Efforts could, for instance, be made by the visitors to persuade parents to avail themselves of the advice and facilities provided by the Mothers' Clinic. The advisability of controlling the increase of the family of persons in poor economic circumstances must also be carefully considered with regard to newly-married couples who are forced to apply for assistance. It was found that the percentages of early marriages amongst the European dependents were more or less the same as amongst the ordinary population, showing that the necessary postponement owing to economic disadvantages did not take place (see p. 57). The non-European dependents married even earlier than is usual amongst non-Europeans (see p. 58). The Board cannot, of course, prevent people from marrying, nor can it with justification refuse assistance to young couples in difficulties, but it can, perhaps, seek the co-operation of suitably

equipped organisations for preventing the too rapid growth of such dependent families.

(e) *Education and Vocational Training.* Lack of school education is regarded by educational authorities and social workers as a causal factor of poverty and dependency. Absence of a good school education not only usually makes training more difficult, but makes for loss of personal resourcefulness and the failure to recognise life's difficulties frankly. The vast majority of dependents receive only a meagre school education (see p. 106). It may be that most of the chief recipients themselves came out of poor homes, and therefore had their school careers unduly curtailed. The poverty of the dependent families studied appeared to have had the effect of curtailing the school education also of *their* children (see p. 117, footnote). Thus poverty begets poverty. Unless the process is stopped it may be found that in the future organisations like the Board of Aid will have to support increasing numbers of children, and the children's children of present-day dependents. No effort is usually made by mere relief-giving organisations such as the Board of Aid to interest themselves in preventing the removal of the children from school before they had had a sound secondary education, although the Board's visitors are in a favourable position to exert their influence. It is true that the financial position of the dependent family does not make it possible for the school career of the children to be prolonged. A body such as the Board of Aid should, however, consider what it can do, perhaps directly (by making cash grants for school fees, books, etc.), but certainly indirectly (by exerting its influence for procuring bursaries and influencing unwilling parents), to assist dependent families to prolong the school careers of their children until they have at least had an adequate degree of schooling.

The presence amongst the European dependents of a large majority (see p. 106), and amongst the non-Europeans of a fair number of skilled workers (see p. 106), indicates a further direction for the development of constructive social work. While there are good reasons for believing that the

possession of vocational qualifications to some extent prevents poverty and dependency, there must be something wrong when the skilled workers form so important a part of the dependency group. This indicates the need for further research work on the basis of which a constructive policy in this connection could be formulated.

THE VALUE OF RESULTS, SUCH AS THOSE REACHED IN THIS INVESTIGATION, FOR ASSISTING AN ORGANISATION IN CONTRIBUTING TOWARDS THE DEVELOPMENT OF SOCIAL POLICY.

Very often authorities such as the Government, or even the municipality, must accept the responsibility for legislation which affects the well-being of distinct groups of people. In some instances groups of the poor and dependent are affected. Very often such governmental bodies have little direct knowledge of, or data on, the local conditions of such people. Such lack of knowledge makes it necessary for them to obtain the advice of organisations which are in closer touch with the people concerned. Nationally or provincially organised welfare associations, such as Child Life Protection Societies and the Afrikaans Women's Organisations, have consequently developed a double function. On the one hand, through their local branches they perform various phases of social work and social service directly to the people who need them. On the other hand, through their central councils they not only attempt to obtain an insight into the larger problems which face their country, their organisation, and the social group they seek to serve, but formulate plans for combating bad conditions, and by representations to the authorities and propaganda amongst the general public strive after the fulfilment of their proposals.

Participation in the development of the various phases of social policy by organisations who have first-hand contacts with those in whose interests such policy should exist can only be welcomed.

Two matters need consideration. The first is that, while there is some justification for making proposals on the basis of general but unsystematic and undetailed knowledge, participation in the development of social policy will be far

more valuable if the organisation bases its suggestions on carefully collected facts which have been dealt with in a scientific manner. It seems a pity that while each organisation, and especially nationally organised ones, are in possession of masses of extremely valuable data, these often lie barren while the organisations suggest costly reforms backed only by general impressions. This study is an indication, in spite of its limitations, of what can be done with the material at the disposal of welfare organisations.

The second matter which merits attention here is that while more extensively organised bodies, and a very limited number of local welfare societies, recognise their duty to assist in the development of social policy, there are many other local organisations which do not sufficiently assume the same responsibility. This is presumably correct in the case of minor organisations, but should be inconceivable in the case of large local organisations like the Capetown General Board of Aid, which deals with numbers of cases, and has an annual budget equal to or even larger than some of the nationally or provincially organised bodies. Surely the task of a welfare body of this type, which could be continually in possession of full knowledge of the social conditions, needs, and possibilities of the poorest portions of the City's population, may not be restricted to the handling of charitable grants, or even the performance of more thorough social service. There should, in fact, be no better advisers to the government, or informers of the public opinion, or propagandists for what is needed than such an organisation if it undertakes its task conscientiously, and bases its contributions to social policy on careful investigations and the thorough manipulation of the available data. The fact is, however, that this and other similar organisations are not performing their duty, or certainly not in an adequate manner.¹ Consequently a few

¹ This statement is made with full recognition of the fact that members or officials of the Board do from time to time appear before government commissions to give evidence, and that the Board does sometimes draw up memoranda, e.g. in connection with Labour Colonies, which are attempts to influence certain aspects of social policy.

examples will be given of how, with results such as those provided by this investigation, an organisation could contribute its share in guiding social policy.

(i) **The Improvement of Economic Conditions.** The vast majority of dependents were able-bodied persons who could work, and therefore possessed the quality of employability which is essential to constructive social service (see p. 120). But does the possession of this quality help them? This does not seem to be the case, because an analysis of the income position indicated that most of the European as well as non-European chief dependents who were in employment were engaged in a type of work which did not sufficiently provide for their needs (see p. 12). The work was of a type which either did not command an adequate wage (e.g., unskilled work) or was irregular. It does not seem right that a part of the population should have no alternative but to become dependent even if it does work. It is, of course, well known that there are certain types of unskilled work from which it is impossible to earn a decent living. Other types, again, such as the building trade, are subject to seasonal variations, and make a steady income impossible (see p. 111). It is therefore necessary that steps should be taken (*a*) for the development of a reasonable wage policy, so that persons engaged in unskilled work, who can and do work, do not also at the same time have to be dependent; (*b*) for the stabilisation of employment to obviate dependency from seasonable irregularity, irregularity of the unskilled work of the odd-job type, and disturbances of employment due to business depressions. It is certainly not beyond the functions of a body whose dispensation of charity is seriously influenced by such facts to face them and to help to devise ways and means which will ultimately obviate dependency.

The debt position of dependents was not very serious, since the average amounts of debt per case were small, although naturally the smallness of the incomes of dependents makes even a small debt relatively important (see p. 28). While this is so, attention ought to be drawn to certain facts revealed by

the study of individual cases. E.g., one outstanding case can be cited, where a widow with an income of less than £2 per week had purchased a grand piano costing £120, on which she was paying off a few shillings per week. It is surprising with what ease persons even in a poor economic position can obtain facilities under the hire purchase system. The possibility of abuse of the facilities obtained under the hire purchase system ought to be investigated with a view to preventing the incurring of debt under a system which makes it easy for people to live beyond their means. There is reason to believe that the system is fairly widely and often unwisely used by the poor sections of the community. This would, of course, greatly increase the difficulties in the way of rehabilitative work. Hence, again, the executive committee of a welfare organisation, discovering such a hindrance to its endeavours, should feel it incumbent to agitate for legislation limiting the possibilities of abuse of the principles of hire purchase.

(ii) **Procuring Facilities for Housing the "Very Poor."**

The housing conditions of dependents were found to be on the average most unsatisfactory, especially among the non-Europeans (see pp. 92, 93). In addition to this rents formed, on the average, about 50 % of the total average weekly expenditure (see p. 20), as well as being the major item of debt incurred by dependents (see p. 26). It is generally recognised that poor housing and environmental conditions not only are the effects of dependency, but also tend to aggravate this condition. The financial position of the dependent (see p. 12) does not make better housing under ordinary circumstances possible, nor are the charities in a financial position to afford the removal of their clients to improved surroundings, and yet removal to a better home and environment is one of the essential preliminaries to constructive social work. There is, indeed, provision in the city for the housing of poor families who have a certain income, but for those who fall below this required minimum,¹ which is

¹ In the case of the Housing Utility Co. incomes must be £8-£16, and in rare cases £6-£7.

not exceptionally low, there is no provision of homes at sub-economic rents. If progressive charities were to start rehabilitative work, they would immediately be handicapped by the lack of proper housing facilities for the "very poor", while the process of rehabilitation was being proceeded with. The provision of such facilities is naturally quite beyond the funds of any one organisation, but there appears to be no reason why by concerted action the various organisations should not induce the proper authorities, such as the City Corporation, to use more extensively the facilities provided by the Government. They should even press for further concession, which will make the housing of the very poor easier.¹⁴ The whole question of housing would also require greater activity in regard to slum clearance. It is certainly unsatisfactory that slum clearance in the city is being proceeded with so slowly. After all, the blame for this must partially be borne by those social organisations whose work suffers as a result, as they have the facts to convince the public and yet remain silent, since they do not feel it their duty to give the necessary continuous and outspoken support to the small committee of the municipality, which must bear the whole burden alone. A sound housing policy is the *sine qua non* of all rehabilitive and constructive family welfare work and every large organisation, for the latter should exert itself energetically in promoting the former.

(iii) **The Promotion of Public Health.** Closely associated with the poor financial position and bad housing conditions of dependents is ill-health. The worry and under-nourishment resulting from poverty and dependency inevitably affects the health conditions of the sufferers. Ill-health occurred in about one-fifth of the European and non-European chief dependents (see p. 96). Just over one-half of these were considered able to regain their health (see p. 104). This should lead to the consideration of whether sanitary inspection, education in hygienic measures, municipal, medical, clinical, and nursing services are adequate, or whether it is necessary

¹⁴ The Minister of Public Health recently announced that such further assistance is being contemplated.

to demand improvements in such directions from the authorities concerned, either of the city or the central Government.

Tuberculosis was found to be the most important single type of disease among both European and non-European dependents (see p. 99). At present it is possible for poor persons suffering from this disease to be treated free of charge by the City Health Department and, in advanced cases, to be sent to Nelspoort for free medical treatment. The mere medical treatment of the disease, however, is not sufficient, since it is known that dependent persons who are treated at the Sanatorium return to their old surroundings, which are unhealthy and uncongenial, with the result that after a while the benefit derived from medical treatment is lost. The medical treatment must be accompanied by after-care and social service, e.g., to obtain observance of the prescribed diet, hygienic measures, etc., and there must be provision for proper housing. Especially this latter provision is of vital importance. As long as a relief-giving organisation finds such tubercular patients, or others still only suffering in a minor degree, dependent upon them and living under unfavourable conditions without the social workers finding the opportunity to remove them to better surroundings, the organisation must realise that here is something fundamentally wrong which is not to be met by relief grants. The fact that it possesses such factual knowledge makes it the inescapable duty of the organisation to keep the situation continually before the public until a system has been created for remedying this dangerous social condition.

(iv) **The Improvement of the Economic and Social Conditions of Non-Europeans.** It was found, when the relative sizes of the European and non-European population of the city were taken into consideration, that dependency amongst the non-Europeans was much greater than amongst the Europeans (see p. 54). The housing conditions of the non-European group were worse (see pp. 92, 93); the health conditions were less satisfactory (see p. 97); education and vocational training were especially lacking (see p. 106); their

income on the whole much lower (see p. 13), while the rent was only slightly lower (see p. 21). Further similar deficiencies in the social and economic conditions of the dependent non-Europeans as compared with the dependent Europeans were found, and this is indicative of the comparative position of the whole non-European group. The discovery of the influence of the unfavourable socio-economic conditions of the Coloured people on the degree of dependency developed by them should lead an organisation dealing with this phase of social welfare to co-operate in seeking a method by means of which the social and economic standards of this racial group can be raised, so that the percentage of dependency amongst them may be diminished. It may seem a far cry from the duty of granting relief to interesting oneself in finding a solution for the social side of the Coloured problem. The organisation should, however, limit itself only to that phase of the problem of which it has knowledge and factual information, namely, the over-balanced degree of dependency. Its experience and knowledge of this one aspect should, however, be valuable in co-operative effort to find a suitable social policy for dealing with this racial group. In these larger social problems there are usually too many aspects for any one body or person to have adequate insight and information on all phases, and therefore only co-operative effort can make a solution possible.

(v) **The Support of the Movement for the Co-ordination of Charities.** There appears to be some justification for the statement that the Board of Aid and other charities frequently have to support families who move into the city and become dependent relatively soon after arrival (see p. 41). This must be reckoned with by the various charities in the development of a systematic method of dealing with dependency. By promoting some plan of greater co-ordination with such inland towns and villages as Paarl, Stellenbosch, Wellington, Caledon, and Oudtshoorn, it should be possible to influence the migration from these parts. At present families leave for the city regardless of the prospects of work, and in spite of the existence of organisations and churches who

might have attempted to prevent unwise migration. The initiative in seeking such inter-urban co-operation could easily come from a large organisation in the provincial capital.

There is, however, another form of co-ordination which is far more vital to the interests of the large welfare bodies and the people they attempt to serve. Early in this work it was stated that this investigation would be subject to the limitation that it could only deal with dependents receiving aid from this one body (see p. 7). Therefore the results could not be accepted as giving a review of the dependency situation in Capetown, although the importance of the Board of Aid as a statutory body made it very likely that a very large percentage of the dependents were dealt with by it. To what extent this was true could not be determined, since many of the organisations in the city are averse to making their information available for such a general investigation by an outside investigator, and do not have their material dealt with separately. There is also no mechanism which binds the various organisations together, and makes a universal survey of their work possible. No real idea as to the extent of poverty and dependency in Capetown, the various methods of combating them, the degree and type of overlapping, and other similar matters, will ever be obtained until the 150 to 200¹ organisations are induced or compelled to co-ordinate. Any development in this connection would fall in line with a similar tendency in social work overseas.²

The limitations of this work referred to above, namely, that it is restricted to data on one organisation only, and does not give an insight into the whole situation existing in the city, should immediately be felt by the body concerned, if this review of its own activities could lead it to aspire to a real insight into its functions and rôle in the social work of the city. This, as well as its experience of the need for co-operation in its everyday charitable duties, should make it a strong protagonist of the local co-ordination movement.

¹ From a list of charitable organisations compiled by the author.

² Norton: "The Co-operative Movement in Social Work," pp. 19, 89-110.

Here, again, out of its actual experience should grow the need and desire for participating in a matter of social policy. It is, however, remarkable that during the various attempts made to promote co-operation and co-ordination amongst the charities of the city, the initiative has mostly been taken by individuals, while such organisations stand more or less aloof. There was a time in 1932 when the Cape Provincial Charity Commission found itself in agreement with proposals made by Prof. H. F. Verwoerd, and accordingly made recommendations to the Administrator.¹ Since then protracted efforts have been made with the support of the Mayor of Capetown to institute a voluntary co-ordination council of charities. The failure in this direction has been followed up by representations made by various bodies—such as a special Mayor's Committee and the Continuation Committee of the National Conference on the Poor White Problem—to have an ordinance passed for a system of compulsory co-ordination. Negotiations in connection with a draft ordinance are still in progress, yet such matters of general import do not seem to attract very serious attention even from large welfare organisations.

The few examples presented above are intended to serve a dual purpose. They should demonstrate the wider implications which seemingly minor results of scientific investigation can have, and they should reveal how much broader the functions of social welfare organisation are than is often realised. Not only must their social work transcend the limits of mere relief, and through case work provide many forms of social service, but they must even equip themselves to be able to participate in the development of social policy. If this is realised and such duties are accepted, then a higher conception of social work will gain ground, and interdependence of social investigation, social work, and social policy be appreciated instead of being decried, as is, alas, so often the case at present.

¹ Report of the Capetown Charities Commission, 1932, p. 8.

APPENDIX No. 1

BOARD OF AID

C/N	ADDRESS(ES)					DEAD CABINET NO.						
		Further Sources of Information										
CARD NO.	VISITED UNVISITED*				No.							
	No.	No.	No.	No.								
HOME LANGUAGE	Surname	Christian Name	Age Sex	Race	Single, Married, Divorced, Separated, Deserted, Widower)	Illness; Defects	Standard of Schooling	Usual occupation, skilled, unskilled, &c. State if any special qualification				
CHILDREN												
Name	Age Sex	Single, Married, Divorced, Separated, Deserted, Widower)	At what school and present standard (or at work, type of work)			Illness, Defects, &c.	Remarks : e.g., adoption, illegitimacy and if so, race of father of each child ; conduct pro- blems such as juvenile delinquency, etc.					
Date	...	...	...	...	...		
Total Income (per week)	...											
Total Expenditure (per week)	...											
Total Debt	...											
Possessions (& estimated value)												
Ejectments (with dates)	...											
										Related Families		
										Visited	Unvisited	
										Clients	Sources	
										Card Nos.	No.	

NAME OF CHARITY			DATE OF ASSISTANCE	AMOUNT AND NATURE OF HELP	PERIOD FIRST HELPED	DATE WHEN FIRST HELPED	YEARS DURING WHICH HELPED	YEAR	PERIODS	DATE	FACTORS	SUMMARY OF FACTORS INVOLVED IN THE SITUATION

VISITOR			UNEMPLOYMENT			DIAGNOSIS AND PROGNOSIS		
DATE	VISITOR	NAME	NAME	PERIOD	DATE	POSITIVE FACTOR	Negative Factor	Plan of treatment. Type No.

APPENDIX NO. 3.

LIST OF AREAS AND CASES NOT INCLUDED IN THE DISTRIBUTION CHART OF DEPENDENCY IN CAPE-TOWN.

			Europeans.	Non-Europeans.
Lansdown	...	...	9	29
Muizenberg	...	...	2	3
Belgravia Estate	...	—		24
Jamestown	...	...	1	39
Southfield	...	...	1	6
Kensington	...	...	6	70
Ryland's Estate	...	—		40
Rentzkie's Farm	...	...	1	6
Plumstead	...	...	6	24
Heathfield	...	...	4	26
Duminy's Cottages	...	—		1
Athlone and Swartdam	...	...	17	110
Retreat	...	...	6	79
Wakefield Estate	...	—		1
Garden Village	...	—		4
Kalk Bay	...	...	—	1
N'dabeni	...	...	—	17
Thornhill Estate	...	...	2	7
Lakeside	...	...	4	1
Rugby	...	...	2	1
Crawford	...	...	2	28
Sunnyside	...	...	—	6
Diep River	...	...	4	61
Black River	...	...	—	5
Wetton	...	...	—	2
Zonnebloem Estate	...	...	1	1
Brooklyn	...	...	5	17
Bokmakierie Estate	...	—		4
Without address	...	...	6	37