An assessment and analysis of duty-bearers realising the right to food among children under the age of 18 years in Masiphumelele, Cape Town.

by
Susan Vincent

Thesis presented in partial fulfillment of the requirements for the
Degree Master of Nutrition at the University of Stellenbosch

Supervisor: Mrs HE Koornhof
Co-supervisor: Dr JN Matji

Faculty of Medicine and Health Sciences
Department of Interdisciplinary Health Sciences
Division of Human Nutrition

March 2015
DECLARATION

By submitting this thesis electronically, I declare that the entirety of the work contained therein is my own, original work, that I am the sole author thereof (save to the extent explicitly otherwise stated), that reproduction and publication thereof by Stellenbosch University will not infringe any third-party rights and that I have not previously in its entirety or in part submitted it for obtaining any qualification.

Date: March 2015
AN ASSESSMENT AND ANALYSIS OF DUTY-BEARERS REALISING THE RIGHT TO FOOD AMONG CHILDREN UNDER THE AGE OF 18 YEARS IN MASIPHUMELELE, CAPE TOWN.

Background: The Constitution of the Republic of South Africa, 1996, guarantees the right to food for all. Aligned with this commitment, policies and programmes have been developed by various government and non-governmental sectors. However, despite these interventions, malnutrition and food insecurity remain major problems in South Africa, in particular, for children. For the development of effective interventions to improve the right to food of children as right-holders, it is important and valuable to prioritise the identification of those who have either obligations or responsibilities as duty-bearers to the rights-holders.

Objectives: This study aimed to identify relevant duty bearers and determine what and how goods and services relating to specified food security determinants were being provided to children in the local community of Masiphumelele, and how these duty-bearers perceived their role in this context. It also aimed to determine whether collaboration existed between various duty-bearers. Furthermore, the perceived constraints to collaboration by the duty-bearers were explored to obtain information for planning future interventions.

Method: A cross-sectional, qualitative study was performed on duty-bearers providing goods and services to children under the age of 18 years in Masiphumelele, a township in the Southern Peninsula of the Western Cape. Goods and services were identified according to food-security determinants. In-depth interviews by way of a semi-structured discussion were conducted with 27 purposively selected duty-bearers in order to explore the types of goods and services provided and how they were being provided. Willingness to collaborate amongst duty-bearers was also explored.

Results: Six types of duty-bearers were identified namely 1) the state, 2) non-government organisations, 3) faith-based organisations, 4) welfare organisations, 5) individuals and 6) the private sector. Goods and services provided included: a) assistance in the transfer of public-assisted programmes, b) assistance in food supply, or c) assistance in private food transfer. Goods and services provided were mostly by way of the provision of food: 1) at a cost, 2) at no cost, 3) at a supported cost, 4) on credit, 5) through school feeding, or 6) by aiding the provision of food at no cost. All but one duty-bearer expressed willingness to collaborate. Perceived concerns and constraints to collaboration and issues faced in the context of delivery were numerous and varied.

Conclusion: While the state is obligated to fulfil the right to food, opportunities exist for all duty-bearers to build the normative content of the right to food into the daily realisation of this right amongst the children in Masiphumelele. This can be done through focused attention on the availability, accessibility, sustainability, stability and adequacy in the goods or services provided. Parents are to equally recognise their responsibilities, and opportunities exist for the initiation of community-based intervention using the human rights-based approach to development for participation and encouragement.
AFRIKAANS - ABSTRAK

‘N BEPALING EN ANALISE VAN DIE REALISERING VAN DIE REGOPVOEDSEL VAN KINDERS ONDER DIE OUERDOM VAN 18 JAAR DEUR PLIGDRAERS IN MASIPHUMELELE, KAAPSTAD.

Achtergrond: Die Grondwet van die Republiek van Suid-Afrika waarborg die regopvoedsel vir alle burgers. Beleide en programme ontwikkel deur verskeie regerings en nie-regerings-sektore wat verband hou met hierdie verbintenis. Ten spyte van hierdie intervensies bly wanvoeding en voedselonsekerheid steeds groot probleme in Suid-Afrika, veral onder kinders. Vir die ontwikkeling van doeltreffende intervensies vir die verbetering van die regopvoedsel van kinders, as regtehouers, is die priorisering van die identifisering van diegene wat pligdraers óf verpligtinge of verantwoordelikhede het aan die regtehouers belangrik of waardevol.

Doelwitte: Die doel van hierdie studie was 1) om relevante pligdraers te identifiseer en te bepaal wat en asook hoe hulle goedere en dienste, wat verband hou met spesifieke faktore wat voedselsekuriteit bepaal, verskaf aan kinders in die plaaslike gemeenskap van Masiphumelo, en 2) hoe hierdie pligdraers hul rol in dié verband sien. Verder is die mate waarin daar samewerking was tussen die verskeie pligdraers ook bepaal, asook watter beperkings tot samewerking pligdraers ervaar is, ten einde inligting te bekom vir die beplanning van toekomstige intervensies.

Metodes: ’n Deursnee-kwalitatiewe studie is gedoen oor pligdraers wat goedere en dienste verskaf aan kinders onder die ouerdom van 18 jaar, in Masiphumelo in die Wes-Kaap. Goedere en dienste is geïdentifiseer volgens spesifieke faktore wat voedselsekuriteit bepaal. Onderhoude is gevoer met 27 pligdraers om die aard van goedere en dienste wat hul lever te verken asook hoe hulle voorsien word. Pligdraers se bereidwilligheid tot samewerking is ook ondersoek.

Resultate: Ses tipes pligdraers is geïdentifiseer, naamlik 1) die staat, 2) nie-regeringsorganisasies, 3) geloof-gebaseerde organisasies, 4) welsynsorganisasie, 5) individue en 6) die private sektor. Goedere en dienste wat gelever is, sluit in hulp a) met die oordrag van openbare bystand programme; b) met kosvoorraad; of c) met oordrag van kos in die privatesektor. Goedere en dienste wat gelever is, het meestal plaasgevind deur die voorsiening van kos 1) teen ’n koste, 2) teen geen koste, 3) teen kosprys, 4) op krediet, 5) deur skoolvoeding, of 6) deur ondersteuning van die voorsiening van geen-koste voedsel. Feitlik alle pligdraers, met die uitsondering van een, het hul bereidwilligheid tot samewerking verklaar. In die konteks van dienslewering is waargeneem dat daar verskeie en uiteenlopende bekommernisse en beperkings bestaan ten opsigte van samewerking asook ander aangeleentheede.

Gevolgtrekking: Terwyl die staat verplig is om die reg op voedsel te vervul, bestaan geleentheede vir alle pligdraers om te bou aan die normatiewe inhoud van die regopvoedsel in die daaglikske verwesenliking van die reg onder die kinders in Masiphumelo. Dit kan gedoen word deur gefokusde aandag te skenk aan die beskikbaarheid, toeganklikheid, volhoubaarheid, stabiliteit en toereikendheid van die goedere of dienste wat gelever word. Net so moet ouers ook hul verantwoordelikhede erken. Geleentheede bestaan vir die insiêring van ’n gemeenskapsgebaseerde intervensie met behulp van die menseregte-gebaseerde benadering tot ontwikkeling vir deelname en aanmoediging.
ACKNOWLEDGEMENTS

I would like to extend my appreciation and thanks to the following people who helped to make this thesis possible:

- My supervisor, Mrs Liesbet Koornhof, Division of Nutrition, Faculty of Medicine and Health Sciences, University of Stellenbosch for her expert knowledge, support, guidance, understanding and encouragement.
- My co-supervisor, Dr Joan Matji, for her expert knowledge, support, guidance and encouragement.
- My funders, the Norwegian Government’s programme for Master’s studies (NOMA), without whom this study would not have been possible and to Per Ole Iversen who administered these funds.
- In particular, Wenche Barth Eide, Arne Oshaug, Bard Anders Andreassen, amongst others, who equipped me with the knowledge and Scott Drimie and Gareth Haysom for the inspiration that birthed this research.
- Gareth Haysom, for his input and assistance with literature.
- Dr Donald Skinner, for his expert knowledge and guidance in qualitative research methods for this study.
- Maritha Marais, for her assistance and encouragement.
- Nelisa Jange, government representative to the community, for assisting and escorting me around Masiphumelele during my data-collection phase.
- The duty-bearers who participated in this study, who afforded me their time for the interviews, for being willing and for making themselves available.
- Janine Hansen, transcriber, for her speed and accuracy in delivering the transcripts.
- Karin Dawes and Ronel Kellner, for extending your arm of support in assisting with my children’s schooling.
- My husband, Tony Vincent for his patience, encouragement and support.
- My children, Amitai, Cailin and Jerron Vincent for their long-suffering, sacrifice, understanding and patience in giving me time and space to complete this work.
- My dad, Paul Harms, who sadly did not live to see the completion of this, but who always encouraged me and believed I could do it.
- My mom, Gwen Harms, who supported and encouraged me, took care of my children for many hours, cooked endless meals and managed household affairs to enable me to complete this study.
- My in-laws, Tom and Veronica Vincent, for their support in much child-sitting.
- To my siblings and all my friends, both near and far, who encouraged me and supported me in so many ways - too many to mention.
CONTRIBUTIONS BY PRINCIPAL RESEARCHER AND FELLOW RESEARCHERS

The principal researcher (Susan Vincent) developed the idea and the protocol. The principal researcher planned the research, undertook data collection, transcribed the data (with the assistance of a transcriber), captured the data for analysis, analysed the data, interpreted the data and drafted the thesis. Mrs Liesbet Koornhof and Dr Joan Matji (Supervisors) provided input at all stages and revised the protocol and thesis.
TABLE OF CONTENTS

DECLARATION  ii
ENGLISH - ABSTRACT  iii
AFRIKAANS – ABSTRAK  iv
ACKNOWLEDGEMENTS  v
CONTRIBUTIONS BY PRINCIPAL RESEARCHER AND FELLOW RESEARCHERS  vi
LIST OF FIGURES  xi
LIST OF TABLES  xi
LIST OF ADDENDA  xi
LIST OF ACRONYMS AND ABBREVIATIONS  xii
GLOSSARY OF TERMS  xiii
REFERENCES FOR GLOSSARY OF TERMS  xiv

CHAPTER 1: LITERATURE REVIEW AND MOTIVATION FOR THE STUDY  1
  1.1 Introduction  1
  1.2 The right to food  1
  1.3 Food insecurity in South Africa  2
  1.4 Rights-holders  3
  1.5 Determinants of food, nutrition and health security  3
  1.6 Duty-bearers  5
  1.7 An integrated approach  6
  1.8 Masiphumelele, Cape Town  7
  1.9 Concluding statements on literature review  7
  1.10 Problem statement and motivation for the study  8
  1.11 Conceptual framework  8
  1.12 Impact of findings  9

CHAPTER 2: METHODOLOGY  10
  2.1 Introduction  10
2.2 Study aim and objectives
2.2.1 Aim of the study
2.2.2 Research objectives
2.2.3 Research questions
2.3 Study design
2.4 Study population and sampling
2.4.1 Study population
2.4.2 Sample selection
2.4.3 Sample size
2.4.3.1 Inclusion criteria
2.4.3.2 Exclusion criteria
2.4.4 Summary of the recruitment of study participants
2.5 Methods of data collection
2.6 Preparation for the study
2.6.1 Obtaining informed consent
2.6.2 Validity
2.6.3 Reliability
2.7 Research instruments
2.7.1 Discussion guide for in-depth interview
2.8 Analysis of data
2.9 Ethical and legal aspects
2.9.1 Ethics committee
2.9.2 Authorisation
2.9.3 Permission
2.9.4 Informed consent and consent to voice recording and transcription
2.9.5 Participant confidentiality
2.9.6 Feedback process
2.9.7 Benefit of participation
2.10 Research funding
CHAPTER 3: RESULTS

3.1 Introduction 19
3.2 Duty-bearers providing goods and services related to the determinants of food security 20
  3.2.1 Profile of duty-bearers 20
  3.2.2 Duration of involvement in providing the goods and services 21
  3.2.3 Sources of funding of duty-bearers 21
3.3 Types of goods and services provided by the duty-bearers 22
3.4 Actor level of duty-bearers 23
3.5 How goods and services are provided by duty-bearers 25
3.6 Collaboration of duty-bearers 26
  3.6.1 Assessment of the ability of collaboration amongst duty-bearers in the goods and services they provide 26
  3.6.2 Willingness of the duty-bearers to collaborate in the goods and services they provide 27
  3.6.3 Perceived concerns or constraints to collaboration by the duty-bearers 28
3.7 Issues faced by duty-bearers in the provision of goods and services 29
3.8 How duty-bearers perceived their role in Masiphumelele 34

CHAPTER 4: DISCUSSION

4.1 Introduction 37
4.2 Duty-bearers 37
4.3 Goods and services provided by the duty-bearers 38
4.4 Actor level of duty-bearers 39
4.5 Ways in which goods and services are provided by duty-bearers 39
4.6 Collaboration 39
4.7 Issues faced by duty-bearers in the provision of goods and services 40
4.8 Perceived roles of duty-bearers 41
4.9 Limitations 41
4.9.1 Selection bias 42
4.9.2 Bias in responses 42
4.9.3 Information bias 42
4.10 Recommendations 42

CHAPTER 5: CONCLUSION 44
REFERENCE LIST 45
ADDENDA 48
LIST OF FIGURES

Figure 1.1 The expression of the right to food in the South African Constitution 2
Figure 1.2 Conceptual framework of the determinants of food, nutrition and health security by actor level 4
Figure 1.3 Food security determinants at actor level 5
Figure 1.4 Conceptual framework of the study 8
Figure 2.1 Summary of the recruitment of participants 13
Figure 3.1 Distribution of duty-bearers categorised by type (n=25) 20
Figure 3.2 Combined distribution of duty-bearers by length of time involved in the delivery of goods/services 21
Figure 3.3 The sources of funding received by the different types of duty-bearers 22
Figure 3.4 The types of goods and services provided by duty-bearers 22
Figure 3.5 Goods and services provided by duty-bearers at actor levels 23
Figure 3.6 Combined overview of the actor levels of the duty-bearers 24
Figure 3.7 Actor level of duty-bearers according to the sectors they represent 24
Figure 3.8 Ways in which goods and services are provided by duty-bearers at actor level 25

LIST OF TABLES

Table 3.1 Table showing a list of concerns and constraints to collaboration 29
Table 3.2 Issues faced by duty-bearer in the provision of goods or services 33

LIST OF ADDENDA

Addendum A. Participant information leaflet and consent form 48
Addendum B. Discussion schedule and list of points for depth interview 51
Addendum C. Letter of request to City Health 52
Addendum D. Letter of response from City Health 54
Addendum E. List of categories and codes used for coding of data 55
Addendum F. Letter of approval from Ethics Committee at Stellenbosch University 57
Addendum G. Declaration of consent 59
# LIST OF ACRONYMS AND ABBREVIATIONS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CESCR</td>
<td>Covenant on Economic, Social and Cultural Rights</td>
</tr>
<tr>
<td>FAO</td>
<td>The Food and Agricultural Organisation of the United Nations</td>
</tr>
<tr>
<td>FBO</td>
<td>Faith-based Organisation</td>
</tr>
<tr>
<td>IFSS</td>
<td>The Integrated Food and Security Strategy</td>
</tr>
<tr>
<td>Masi</td>
<td>Masiphumelele</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-government organisation</td>
</tr>
<tr>
<td>NOMA</td>
<td>The Norwegian Government’s Programme for Master’s studies</td>
</tr>
<tr>
<td>NSNP</td>
<td>National School Nutrition Programme</td>
</tr>
<tr>
<td>SANHANES</td>
<td>The South African National Health and Nutrition Examination Survey</td>
</tr>
<tr>
<td>UDHR</td>
<td>The Universal Declaration of Human Rights</td>
</tr>
</tbody>
</table>
GLOSSARY OF TERMS

Duty-bearer  Duty bearers are those actors who have a particular obligation or responsibility to respect, promote and realise human rights and to abstain from human rights violations. The term is most commonly used to refer to State actors, but non-State actors can also be considered duty-bearers. Depending on the context, individuals (e.g. parents), local organizations, private companies, aid donors and international institutions can also be duty-bearers.¹

Food security  Food security exists when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs, and food preferences for an active and healthy life.²

Household food insecurity  Household food insecurity exists when all members do not at all times, have physical, social and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life. The four pillars of food security are availability, access, utilisation and stability. The nutritional dimension is integral to the concept of food security.³

Household food security  At the household level, household food security refers to the ability of the household to secure, either from its own production or through purchases, adequate food for meeting the dietary needs of all members of the household.⁴

Nutrition security  The provision of an environment that encourages and motivates society to make food choices consistent with short and long-term good health.⁵

Right-holders  Rights-holders are individuals or social groups that have particular entitlements in relation to specific duty-bearers. In general terms, all human beings are rights-holders under the Universal Declaration of Human Rights. In particular contexts, there are often specific social groups whose human rights are not fully realised, respected or protected. More often than not, these groups tend to include women/girls, ethnic minorities, indigenous peoples, migrants and youth.¹

Social safety net  Social safety nets are non-contributory transfer programs seeking to prevent the poor or those vulnerable to shocks and poverty from falling below a certain poverty level. Safety net programs can be provided by the public sector (the state and aid donors) or by the private sector (NGOs, private firms, charities, and informal household transfers).⁶

Spaza shop  An informal convenience shop in a South African township, usually run from home.⁷
REFERENCES FOR GLOSSARY OF TERMS:

   http://www.unicef.org/gender/training/content/resources/Glossary.pdf [2014, 7 November]

2. Food and Agriculture Organization, World food summit. (1996) [Online]
   http://www.fao.org/docrep/x2051e/x2051e00.HTM#P283_30407 [2014, 7 November]


4. Food and Agriculture Organization, Agriculture and Food Protection Department. [Online]

   http://www.eatright.org/About/Content.aspx?id=8361 [2014, 7 November]

6. Wikipedia.[Online]

7. Wikipedia.[Online]
CHAPTER 1: LITERATURE REVIEW AND MOTIVATION FOR THE STUDY

1.1 INTRODUCTION

The South African Constitution guarantees the right to food for all and in support of this, policies and programmes have been developed. Despite these policies and programmes initiated by government to fulfil the progressive realisation of the right to food, malnutrition and food insecurity remain major problems in South Africa, in particular, for children.

1.2 THE RIGHT TO FOOD

The right to food has long been recognised as a fundamental human right in international law. It is embedded in the right to an adequate standard of living as declared under Article 25 of the Universal Declaration of Human Rights\(^1\), in Article 11 of the International Covenant on Economic, Social and Cultural Rights (CESCR)\(^2\) and also in Article 27 of the Convention on the Rights of the Child.\(^3\) The term “adequate standard of living” includes the components adequate food, care and health in the prevention and control of disease. The General Comment 12 of the CESCR provides the normative framework of the right to adequate food which depends on access and availability as well as adequacy in both content and quality of food which is safe and culturally acceptable.\(^4\) This makes the realisation of the right to food a complex task as it is multi-dimensional, dependent on several factors and is impossible without the simultaneous realisation of other human rights such as the right to health, a healthy environment, education and social security amongst others. It is important to note firstly, that the right to food can only be realised if food security exists and secondly, to note that a primary objective in promoting the right to food and food security is to achieve nutrition and health security. This would thus ensure and facilitate the nutritional well-being of the individual.\(^5\) The right to food therefore, cannot be seen out of context of food security, nutrition security and health security.

The right to food is legally recognised in South Africa, since it is included in the Constitution, in chapter 2 of the Bill of Rights. See Figure 1.\(^6\)
Section 27(1)(b) “Everyone has a right of access to sufficient food and water”
Section 28(1)(c) “Every child has a right to basic nutrition”
Section 35(2)(e) “Everyone who is detained, including sentenced prisoner, has a right to conditions of detention that are consistent with human dignity, including at least exercise and the provision, at state expense of adequate accommodation, nutrition, reading materials and medical treatment”.


According to Maunder and Khoza, the Integrated Food Security Strategy (IFSS) of 2002 was developed to give effect to the right to food. The IFSS included the drafting of food security legislation as one of the necessary actions to ensure its effective implementation, however to date, drafting of the food security legislation has not taken place. The IFSS was recently reviewed and in August 2014 Government approved the National Policy on Food and Nutrition Security which was released collectively by the national departments of Social Development and Agriculture, Forestry and Fisheries. This paper mentions that a Green and White Paper process is foreseen to prepare a Food and Nutrition Security Act for South Africa, which would be the first concrete legislation on the right to access to food for all South Africans.

1.3 FOOD INSECURITY IN SOUTH AFRICA

The right to food is still not a reality for many households in South Africa as more than half of the population are vulnerable to food insecurity. The 2013 South African National Health and Nutrition Examination Survey (SANHANES) revealed that 26% of the population experienced hunger, 28.3% were at risk of hunger and only 45.6% of the population were food secure. Household food insecurity has been identified as one of the causes of malnutrition in South Africa. Of greater concern is the level of stunting, an indication of chronic malnutrition, which has significant poor development outcomes, the highest prevalence of which was reported to be 26.9% and 25.9% for boys and girls respectively between the ages of 0 and 3 years. The lowest prevalence was reported to be in children between 7 to 9 years of age at 10% for boys and 8.7% for girls. Significant
differences in stunting were prevalent between rural and urban and informal and formal regions with the highest level of stunting in boys being 23.2% in the rural informal areas and in girls, 20.9%, living in informal urban areas.10

1.4 RIGHTS-HOLDERS

Since food insecurity is a determinant of stunting, which is an indicator of chronic malnutrition and under-nutrition in children, 11 children are vulnerable and warrant special care and attention. All individuals (including children) are rights-holders regarding the right to adequate food, as this right is recognised as a fundamental right. A human rights-based approach to development focuses on the most vulnerable groups and by implication ensures that special attention must be given to these groups.12 When we consider the right to adequate food, children are more likely to suffer from dietary inadequacy or malnutrition where food insecurity exists and for this reason children, as a vulnerable group, are the focus of this study.

1.5 DETERMINANTS OF FOOD, NUTRITION AND HEALTH SECURITY

The conceptual framework developed by Ruel et.al.,13 as displayed in Figure 1.2, indicates food security or lack thereof to be a determinant of individual nutritional status of children where food security, adequate care and health are recognised as clusters of determinants of nutritional status.

The framework highlights the inter-relatedness of the determinants across all three clusters clearly indicating that nutrition security, or the fulfilment of the right to food, cannot be fully realised without the integration of food security, adequate care and adequate health.13
Although it is recognised that the right to food in the broader context of its definition, cannot be fully realised without integration of the three clusters mentioned above, the scope of this study will focus only on the food security cluster as highlighted in Figure 1.3.
In view of this, the key determinants of food security are the availability and access to food and the risks associated with these. The adequacy of food availability implies that the food should be adequate in terms of quantity and quality, be free from harmful substances and also be culturally acceptable. Consideration must be given to the sustainability of the food supply and access to food. This can be done by ensuring functional and accessible markets, the equitable distribution of income and safety nets.  

<table>
<thead>
<tr>
<th>A. Community level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assistance in food supply.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Household level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assistance in fixed pricing of food.</td>
</tr>
<tr>
<td>2. Contributors to household income.</td>
</tr>
<tr>
<td>3. Assistance in food supply e.g. spaza shops.</td>
</tr>
<tr>
<td>4. Assistance in the production of household food (urban agriculture).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Individual level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assistance in food supply e.g. street food suppliers.</td>
</tr>
<tr>
<td>2. Assistance in transfers from public assistance programmes e.g. government or NGO programmes that provide food, school-feeding schemes, food supplements distributed from health clinics.</td>
</tr>
<tr>
<td>3. Assistance in private food transfers e.g. reciprocal exchanges with business</td>
</tr>
</tbody>
</table>

**Figure 1.3** Food security determinants at actor level

Figure 1.3 gives context to the food security determinants at actor level, which could include public social security schemes, programmatic interventions, income-generating programs, community transactions and self-help networks at the community, household or individual level as indicated.

**1.6 DUTY-BEARERS**

In the context of this study, all those providing goods and services to the children of Masiphumelele are considered to be duty-bearers who have an impact on the realisation of the right to food. This would include provincial responses, local government, non-
governmental and faith-based organisations as well as businesses and individuals. The food security determinants shown in Figure 1.3 were used to identify all relevant duty-bearers.

While governments have a legal obligation to protect, respect and fulfil the right to food, as stated in Article 29 of the Universal Declaration of Human Rights (UDHR), the fact that everyone has a duty to the community, is also included in the preamble of the UDHR. This implies that civil society organisations, non-government organisations (NGOs), aid agencies, private sector organisations as well as individuals have a moral obligation to protect, respect and fulfil the right to food. The state would therefore be considered to be the principal duty-bearer and other actors considered to be moral duty-bearers, but all are considered to be duty-bearers.

1.7 AN INTEGRATED APPROACH

The realisation of the right to food, by addressing food and nutrition security, requires a comprehensive and integrated multi-disciplinary approach in a co-ordinated fashion of all duty-bearers, as highlighted in Figure 1.2. A global review which evaluated the success of interventions and programmes in reducing malnutrition highlighted the fact that multi-sectoral programming remained under-developed and under-researched, and recommended multi-sectoral interventions for the effective delivery of systems.

The recent publication of the Roadmap for Nutrition in South Africa by the Health Department heeds this recommendation. The Roadmap acknowledges food insecurity in the complexity of the health challenges that the country faces, and recognises the need for complementary strategies and an integrated approach if nutrition security is to be achieved for all South Africans. Furthermore, the Roadmap clearly identifies the multi-sectoral approach to include government departments at national, provincial and local levels, the private sector as well as civil society, as do the recommendations from SANHANES. Likewise, the National Policy on Food and Nutrition Security for the Republic of South Africa (22 August, 2014) recognised this and adopted an approach based on international best practice to address the issue of food insecurity.

Impumelelo Social Innovations Centre in South Africa identifies, rewards and promotes examples of best practice and social innovation in the public sector, civil society, the private sector and interest groups with the ultimate aim of inspiring people to replicate and
adopt these innovations in their context. They identified a number of case studies in South Africa with demonstrable best practice in the promotion of food security. They found the most successful organisations to be those that work with existing community dynamics and mention that “taking the time to research and work within existing community structures is beneficial in the long run”. Trusting relationships which have been established between NGOs, government partners and the target communities have attributed to the success of many of the programmes. New programmes are also urged to seek partnerships which would help them run more effectively. 20

1.8 MASIPHUMELELE, CAPE TOWN

Further to the work and recommendations of the Impumelelo Social Innovations Centre as referred to above and, given that food security has effectively been promoted at a local level within communities elsewhere in South Africa,20 the execution of this research study in the local community of Masiphumelele was prompted. Masiphumelele is a township situated south of Cape Town, and is home to an estimated 38 000 people. Although officially adopted as part of Cape Town and no longer referred to as an informal settlement, 90% of its residents live in informal housing with homes crudely constructed from tin, wood or metal, and with no running water or sanitation. A community-based organisation with over 12 years of experience working in Masiphumelele highlights from anecdotal evidence, that “unemployment is over 60%” and that “most of the people are hungry, most of the time”. 21

1.9 CONCLUDING STATEMENTS ON LITERATURE REVIEW

It is evident that in order for rights-holders to fully realise their right to food, an integrated approach to basic social service delivery, including a focus on food security, is required from duty-bearers. The conceptual model by Ruel et.al. (Fig. 1.2) illustrates the interaction between the determinants of food security at different actor levels. The geographical focus of this model is also that of a community.13 This study will use this conceptual model to assess food-security determinants which relate to access and availability of food across all three actor levels within a specific community.
1.10 PROBLEM STATEMENT AND MOTIVATION FOR THE STUDY

For the development of effective interventions to improve the right to food of children as rights-holders, there is a need to first identify those who have either obligations or responsibilities as duty-bearers to the rights-holders.

This study will aim to identify relevant duty-bearers and determine what and how goods and services relating to the food-security determinants are being provided to children in the local community of Masiphumelele, and how these duty-bearers perceive their role in this context. It will also determine whether duty-bearers can and are willing to collaborate with other duty-bearers. Furthermore, the perceived constraints to collaboration by the duty-bearers within this cluster will be explored with the hope of obtaining information that could be of use for future intervention.

1.11 CONCEPTUAL FRAMEWORK

The framework below, Figure 1.4 gives an overview of the study and indicates the expected outcomes.

---

**PROBLEM**

In order for rights-holders to fully realise their right to food with maximum effect, an integrated approach to basic social service delivery including food security is required from duty-bearers

**QUESTION**

Who are the duty-bearers, what goods and services relating to food-security determinants are they delivering to the children of Masiphumelele, and are they willing to collaborate with each other?

**ASSESSMENT (in-depth interviews)**

Duty-bearers in Masiphumelele who are providing goods and services relating to food-security determinants

---

**OUTCOME**

Duty-bearers are willing to collaborate

**OUTCOME**

Duty-bearers are not willing to collaborate

**Analysis**

---

*Figure 1.4 Conceptual framework of the study*
1.12 IMPACT OF FINDINGS

The study results will lead to the production of a database of duty-bearers providing goods and services related to food-security determinants among children in Masiphumelele. In addition, the results of this study could provide a platform on which co-operation and co-ordination between duty-bearers can be built or strengthened, thus potentially having a positive impact on the local community of Masiphumelele in the realisation of the right to food and nutrition security.
CHAPTER 2: METHODOLOGY

2.1 INTRODUCTION

The study took place in Masiphumelele, a township located in the South Peninsula of Cape Town, with data collection over a 4-week period from 21 August 2013 to 20 September 2013. The researcher investigated who the duty-bearers were, what goods or services they were providing and how these goods or services were being delivered. Furthermore, how they perceived their role and whether or not they were, or were willing to, collaborate in the services or goods they provided was ascertained. Perceived constraints to collaboration by the duty-bearers within this cluster were also explored.

2.2 STUDY AIM AND OBJECTIVES

2.2.1 Aim of the study

The aim of the study was to assess and analyse duty-bearers providing goods and services that are determinants affecting food security and the realisation of the right to food among children under the age of 18 years in Masiphumelele, Cape Town.

2.2.2 Research objectives

1. Identify duty-bearers providing goods and services relating to the determinants of food security (Figure 1.2) among children under the age of 18.
   a) Determine what services and goods are being provided and at which actor level.
   b) Determine how goods and services are provided.

2. Determine the extent of duty-bearer collaboration with each other in the services or goods they provide.
   a) Assess whether duty-bearers can and are willing to collaborate with each other.
   b) Identify concerns or constraints to collaboration.

3. Establish the context of the issues faced in providing the goods and services from the perspective of the duty-bearers.
2.2.3 Research Questions

1. Who are the duty-bearers and what goods and services relating to food-security determinants are being delivered to the children of Masiphumelele?
2. Are duty-bearers willing to collaborate inter-sectorally and across sectors for the maximum benefit of those to whom the goods and services are intended?

2.3. STUDY DESIGN

This is an observational study and takes the form of a cross-sectional descriptive survey where qualitative research methods are used.

2.4 STUDY POPULATION AND SAMPLING

2.4.1 Study population

The study population consisted of duty-bearers currently delivering goods and services related to the determinants of food security to children under the age of 18 in Masiphumelele, Cape Town, as outlined in Figure 1.3.

Masiphumelele is home to an estimated 38 000 people. According to the data of Statistics South Africa’s 2011 Census data, this figure was close to 22 000 people, with approximately 35% of this figure categorized as children below 19 years of age. The population is predominantly Black African. Ninety percent of its residents live in informal housing with homes crudely constructed from tin, wood or metal, and with no running water or sanitation. Although 2011 Census statistics indicate this figure to be 31%, anecdotal evidence suggests that “unemployment is over 60%”, and that “most of the people are hungry, most of the time”.

2.4.2 Sample selection

All participants eligible for participation, according to the inclusion criteria, specified under section 2.4.3.1 were identified through contact with schools, faith-based organisations, NGOs, community leaders, government structures and the district nutrition department. Thereafter recruitment of participants was done by means of purposive selection, and
through snowballing. Contact was made with potential participants telephonically or in person.

2.4.3 Sample size

On advice from a qualitative research expert, ideally between 10 and 30 participants were to be recruited. Given that the number of duty-bearers delivering goods and services relating to food security determinants was unknown, participants were to be recruited until no further participants fitting the inclusion criteria were identified, or until time allocated for data collection had expired.

2.4.3.1 Inclusion criteria

1) A duty-bearer delivering goods or a service related to the food-security determinants as described in Figure 1.3, to children under the age of 18 years in Masiphumelele.
2) A duty-bearer responsible for the delivery of goods (i.e. food, money, eating utensils, etc.) or services (facilitation relating to the food).
3) A duty-bearer who was in a position to make decisions on behalf of the organisation, NGO or other, whom they represented.
4) A duty-bearer who was willing to consent to the audio-recording of the interview.

2.4.3.2 Exclusion criteria

There were no exclusion criteria.
2.4.4 Summary of the recruitment of study participants

The summary below, Figure 2.1, gives an overview of the recruitment process of participants.

Figure 2.1 Summary of the recruitment of participants

2.5 METHODS OF DATA COLLECTION

All participants who had been identified and who had met the inclusion criteria, and were willing to participate and give written informed consent once study objectives had been explained and questions had been answered, were interviewed to obtain qualitative data using in-depth interviews. Reservations of those unwilling to participate were discussed as the individuals permitted, and their unwillingness to participate respected. 24

Where possible, an attempt was made to spend time in the context of the interviewee, where they were involved in the delivery of the goods or services, prior to the interview, in
order to observe them and talk to them informally and to present them with a copy of the participant information leaflet (Addendum A). Where this was not possible, the information leaflet was sent electronically via e-mail to the participant prior to the interview. The nature and details of the study were explained to each participant, and any questions they had were answered. Thereafter an appointment for the interview was arranged at a suitable and convenient time and venue for both researcher and interviewee.

An in-depth method of interviewing, which is the method generally used when detailed information is required from the participant, was used. The researcher ensured that informed consent forms were signed and received prior to all interviews by the participants, which were audio-recorded, this also being a very common method in qualitative data collection.

The interview by way of a semi-structured discussion was conducted by the researcher as participants were guided through a list of points (Addendum B) to gather information of relevance in order to fulfil the stated objectives of the study. It is however important to note that due to the varying scope of duty-bearers, not all questions on the list were covered during the course of all interviews, and discretion was exercised (e.g. the government department was not asked how they were funded nor did the researcher ask the street vendor whether there were criteria for inclusion or exclusion in the provision of goods). Participants were thanked for their involvement and time after each interview and informed that further contact would be made with them in order to present feedback of results of the study.

Communication with study participants was in English. Although provision had been made for the assistance of a translator for communication purposes where needed, translation was not required as English was well spoken by all participants.

2.6 PREPARATION FOR THE STUDY

2.6.1 Obtaining informed consent

Prior to commencing with data collection and the recruitment of participants from Masiphumelele, verbal, telephonic approval was obtained from the local community councillor after discussing and explaining details of the study. The researcher was
informed by the councillor that written approval was not required and that prominent leaders of the community would be informed by the councillor on the researcher’s behalf.

A letter was written to City Health (Addendum C) requesting permission to include the Masiphumelele Clinic as a participant in the study, to which written consent was received (Addendum D) granting permission for inclusion.

### 2.6.2 Validity

In order to increase the internal validity of the study, interviews were audio-recorded and accurately transcribed to avoid information bias. Furthermore, a decision was made to use an interpreter if English was not well-spoken. Duty-bearers were recruited at every actor level and in the diverse categories to prevent selection bias. The prevention of selection bias is important since this could have a negative impact on the external validity of the study. In addition, a rigorous effort was made to purposively select duty-bearers from the compiled list of duty-bearers. 27

### 2.6.3 Reliability

In order to reduce the risk of negatively influencing the reliability of the study, an effort was made to include as many participants as possible, within the time-frame of data-collection.24

### 2.7 RESEARCH INSTRUMENTS

#### 2.7.1 Discussion guide for in-depth interview

In-depth interviews were used to obtain information from the participants regarding the goods and services relating to food-security determinants (Figure 1.3) being delivered to the children in Masiphumelele. The researcher devised a list of all essential aspects that could possibly relate to the goods and services provided by duty-bearers. This formed the discussion guide (Addendum B), which then enabled the in-depth interview to take the form of a semi-structured discussion to ensure all relevant information was discussed and required data captured. Essential points covered were with regard to: 1) the delivery of goods or services; 2) information regarding the organisation or individual; 3) what service or goods were being delivered; 4) how these were delivered; 5) whether participants would
be willing to work alongside or with other providers, and 6) what their perceived constraints to this would be.

2.8 ANALYSIS OF DATA

After each interview, all information recorded during the interview was transcribed by the researcher with the assistance of a transcriber. The researcher then verified and reviewed each transcript against the audio-recording. Thereafter transcripts were re-read and the contents analysed in detail to establish categories and identify common themes in the responses given by participants. Categories chosen were those which most correctly reflected the information sought in order to fulfil the objectives of the study. These categories and themes (Addendum E) were coded and summarised making use of the software programme ATLAS.ti v7. Summaries were then interpreted, enabling results and conclusions to be drawn.

2.9. ETHICAL AND LEGAL ASPECTS

2.9.1 Ethics committee

The study was approved by the Research ethics committee at the Faculty of Medicine and Health Sciences, Stellenbosch University (Reference number S13/05/096) (Addendum F).

2.9.2 Authorisation

Permission to include role players working for the Provincial Government Western Cape was obtained from City Health in order to include the Masiphumelele Clinic as a duty-bearer and participant in the study (Addendum C). This approval could only be given once approval from the Ethics Committee had been received.

2.9.3 Permission

Permission to conduct research in Masiphumelele was telephonically requested from and granted by the Public Relations Councillor of Masiphumelele prior to commencement of data collection.
2.9.4 Informed consent and consent to voice recording and transcription

All participants, prior to the interview, received consent forms for both informed consent and consent to voice recording and transcription (Addendum G) either electronically via e-mail or by hand. Informed consent was obtained from each participant, as was consent to audio-record the interview, by way of participants signing these documents. The researcher ensured that signed copies of consent forms were received prior to commencement of the recorded face-to-face interview and that participants received a duplicate copy. Participants were entitled to request for the recording to be halted or deleted at any point during the interview process. 23

Participation was voluntary; they could refuse participation and were informed that they were free to withdraw from the study at any time without being discriminated against.

2.9.5 Participant confidentiality

Audio-recordings of interviews were safely stored and transcripts were password-protected. All personal identifiers were removed from the interview and kept separate from the interview data. The data was only referred to by code and all recordings were destroyed after transcripts were checked for accuracy. Transcripts of the interview will only be reproduced in whole or in part for use in presentations or written documents that result from the study. Only that information deemed necessary for the development of the database of goods and services delivered, was included to develop the database of duty-bearers. The information given identifies the individual or organisation as well as the goods and services they deliver to the community, and to which actor level the service is delivered. Due to the context of the information required for the database, this information was not confidential. All personal opinions expressed however, remained confidential and anonymous.

A special effort was made to ensure that participants were protected from information being published in a way that would expose them or undermine their credibility, or that of the body they represent; and from generating any false information about them or undermining them in any way during the research process. 23
2.9.6 Feedback process

Participants were informed that they would receive feedback of the study findings. A written report is planned, as well as an oral presentation at a future date and time which is yet to be announced by the researcher. All participants will be invited.

2.9.7 Benefit of participation

The information obtained is of benefit to the participant in that a database of goods and services relating to food security in Masiphumelele has been created and could provide a platform on which to build an integrated approach to food security among children in Masiphumelele by all participants.

2.10 RESEARCH FUNDING

The study was funded by the Norwegian Government's programme for Master's studies (NOMA), administered by the Norwegian Centre for International Co-operation in Education.
CHAPTER 3: RESULTS

3.1 INTRODUCTION

The aim of this study was to assess and analyse duty-bearers providing goods and services that are underlying determinants affecting food security and the realisation of the right to food among children under the age of 18 years in Masiphumelele, Cape Town. A qualitative method was used for data collection using in-depth interviews conducted by the researcher by way of a semi-structured discussion with participants.

Forty-six potential participants were identified, of these, 38 were contacted. The remainder were not contacted due to time constraints of data collection. Ten were excluded, either due to refusal of participation, lack of response to request for participation, not meeting the inclusion criteria or inability to find a mutually acceptable time for the interview. The remaining 28 participants who met the inclusion criteria were interviewed. One however, was excluded as it only became evident during the interview that they did not in fact meet the inclusion criteria.

This chapter serves to present the results of the 27 in-depth interviews which were included in the analysis of data. Two participants represented the same duty-bearers and hence data collected from these in-depth interviews was merged in the presentation of findings and hence represented and referred to as the results of 25 duty-bearers.

The results are presented in line with the research objectives which were as follows:

1. Identify duty-bearers providing goods and services relating to the underlying determinants of food security (Figure 1.2) among children under the age of 18.
   a) Determine what services and goods are being provided and at which actor level.
   b) Determine how goods and services are provided.
2. Determine the extent of duty-bearer collaboration with each other in the services or goods they provide.
   a) Assess whether duty-bearers can and are willing to collaborate with each other.
   b) Identify concerns or constraints to collaboration.
3. Establish the context of the issues faced in providing the goods and services from the perspective of the duty-bearers.
3.2 DUTY-BEARERS PROVIDING GOODS AND SERVICES RELATING TO THE DETERMINANTS OF FOOD SECURITY

The first objective of the study was to identify the duty-bearers who were providing goods and services relating to the determinants of food security (as outlined in Figure 1.3) among children under the age of 18 living in Masiphumelele. Information obtained during the interviews of identified duty-bearers resulted in the categorisation of duty-bearers into types, length of time of involvement in providing the goods and services to the children in Masiphumelele, and also identified sources of funding of the duty-bearers.

3.2.1 Profile of duty-bearers

The 25 duty-bearers who participated in the study were identified into types as those being from non-government organisations (NGOs), faith-based organisations (FBOs), the State, the Welfare Association (a community-based organisation not registered as an NGO), the private sector, and individual duty-bearers. The distribution of these types is indicated in Figure 3.1.

![Figure 3.1](https://scholar.sun.ac.za)

**Figure 3.1** Distribution of duty-bearers categorised by type (n=25)

Just over one-third of duty-bearers were comprised of NGOs, (36%), almost one-third from the private sector, (32%), and the remaining third largely of faith-based organisations, (20%), together with the state (4%), Welfare Association (4%) and an individual duty-bearer (4%).
3.2.2 Duration of involvement in providing the goods and services

The duration of involvement of the duty-bearers in delivery of the goods or service ranged from 2 months to approximately 20 years. With reference to Figure 3.2, more than half of the duty-bearers, 15 in total, had been delivering goods or services for longer than a 5-year period, 7 of whom had been involved in delivery for longer than a 10-year period. The number of duty-bearers delivering goods and services for less than a 5-year period were 10 in total, with 3 duty-bearers delivering goods and services for less than 6 months.

![Figure 3.2: Combined distribution of duty-bearers by length of time involved in the delivery of goods/services]

3.2.3 Sources of funding of duty-bearers

Duty-bearers received funding for operational costs from various sources as indicated in Figure 3.3. Almost half of the duty-bearers received funding from local individuals. One NGO received funding from another NGO when identified needs arose. Duty-bearers in the private sector were not only self-funded but also received funding from local individuals, the State, an NGO and from collected fees. Two duty-bearers participated in fundraising as a means to acquire funding and the state funded 6 duty-bearers across 5 of the 6 types of duty-bearers.
3.3 Types of goods and services provided by the duty-bearers

The types of goods and services provided by the duty-bearers were identified in the context of the food-security determinants as outlined in Figure 1.3. Three types of goods and services were identified, namely, (a) those duty-bearers who assist in the transfer of food from public-assisted programmes, (b) those who assist in food supply and (c) those who assist in private food transfer. Figure 3.4 shows that 20 duty-bearers provided assistance in the transfer from public-assisted programmes, which included NGO feeding programmes, school-feeding programmes and feeding programmes undertaken by the state health clinic.
A total of 10 duty-bearers assisted in food supply by way of direct selling, or by way of donation of surplus food. Six of these were from the private sector and four duty-bearers assisted in private food transfer. The private food transfer by four duty-bearers in the private sector and NGO categories was by way of community transactions.

3.4 Actor level of duty-bearers

Food security determinants can be described at actor levels as community, household and individual levels, and using these actor levels as a guide, duty-bearers have been analysed accordingly.

Figure 3.5 illustrates the types of goods and services by duty-bearers in terms of actor levels. It shows that the assistance from public-assisted programmes was provided by 12 of the duty-bearers at the individual level, three at the household level and one at the community level. Of those duty-bearers who assisted in food supply, two were at the individual actor level and three at both the household and community levels. Only one duty-bearer assisted in private food transfer at the individual level by giving food to children who assisted with small tasks, and by giving credit to individual customers, and two at household level by extending credit to customers.

![Figure 3.5. Goods and services provided by duty-bearers at actor levels](https://scholar.sun.ac.za)
With reference to Figure 3.6, 19 duty-bearers acted at the individual level, nine at the household level while four acted at the community level.

**Figure 3.6.** Summary of actor levels of duty-bearers

The actor level by category of the duty-bearers (Figure 3.7), indicated that those duty-bearers representing the NGOs, the Welfare Association and the private sector operated on more than one actor level with the private sector delivering goods and services at all three actor levels. The duty-bearers from the faith-based organisations delivered goods and services at only the individual level, while the individual duty-bearer delivered only at the community level.

**Figure 3.7.** Actor level of duty-bearers according to the sectors they represent
Seven duty-bearers acted on two levels. Of these, five were NGOs who acted on both the individual and household levels, and two duty-bearers, from the Welfare Association and the private sector, acted at both the household and community level.

### 3.5 How goods and services are provided by duty-bearers

Goods, by way of food, were provided at a cost across all three actor levels by duty-bearers in the private sector. These were duty-bearers who were assisting with food supply either through a spaza shop or food vendor. They also provided food on credit. This manner of a self-help network or community transaction was explained in the following way: “I can get it on credit and the next day when I go to the bank come and pay for it, we work together.” It is a given that, “people buy on credit. I understand that because there’s no way really, living in Masi with the budget that we’ve got, that you will have everything without having credit.”

Food was provided by 10 duty-bearers (see Figure 3.8), at no cost to individuals, either daily or weekly, by way of a cooked meal or meals, a cup of soup, a snack, a sandwich or a treat or by giving surplus food items. The food provided at no cost at the household level was usually if there was a surplus of food or if a recognised need had arisen, and this would take the form of food parcels or soup and a meal for the family. Food sufficient for the whole family was provided at a supported cost by one duty-bearer to individuals who met set criteria.

![Figure 3.8. Ways in which goods and services are provided by duty-bearers at actor level](image)

<table>
<thead>
<tr>
<th>Provision of food at a cost</th>
<th>Provision food at no cost</th>
<th>Provision of food at a supported cost</th>
<th>School feeding</th>
<th>Aid the provision of food at no cost</th>
<th>Provision of food on credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>Household</td>
<td>Community</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

Stellenbosch University  https://scholar.sun.ac.za
The provision of food to learners at school formed a large part of the goods provided by nine of the duty-bearers, one being the National School Nutrition Programme (NSNP) funded by the state and five being faith-based organisations. The state provides the feeding at the primary and the secondary school in Masiphumelele by way of a daily cooked breakfast and lunch. The state provides meals to 2622 children daily, apart from school holidays and weekends. Furthermore, sandwiches are delivered on most school days by the FBOs to the primary school. Another duty-bearer distributes packets of dried food mix to unregistered pre-primary schools who are not receiving a grant, thereby providing school-feeding to ± 500 pre-primary children daily. Two duty-bearers aid the provision of food at no cost, one by offering a service of delivery of goods, and the other provides materials to the community to enable the handing out of the food.

3.6 COLLABORATION OF DUTY-BEARERS

A second objective of the study was to determine whether or not and how duty-bearers were collaborating with each other in the services or goods they provided and whether they would be willing to collaborate with other duty-bearers. The data gathered during the interviews led to the identification of themes and the following results.

3.6.1 Assessment of the ability of collaboration amongst duty-bearers in the goods and services they provide

Information from interviews showed that 20 of the 25 duty-bearers were currently collaborating in the food-security sector. This was either by way of 1) referral to food distribution points, 2) facilitation of food supply, 3) with the supply of food or 4) providing credit for food purchase. For some, collaboration is evident and expressed by saying that “collaboration is key” and that “without collaboration, it can’t be done”, whereas the following quote “it is like a silent collaboration”, shows collaboration is also a natural way of functioning in this community.

Two duty-bearers involved in feeding programmes felt that there was a lack of collaboration amongst duty bearers in Masiphumelele around feeding and they expressed the following:

- “Current collaboration between NGOs has been around education, not feeding.”
- “I wish they would collaborate more, there is a lot of duplication.”
Additional themes associated with collaboration that were identified included:

- **Inconsistencies and contradictions in the information given by duty-bearers and recipients of goods and services.** This became apparent when information given could not be verified by the duty-bearers with whom collaboration was thought to exist. Some duty-bearers thought that certain programmes still existed, but in reality, they didn’t and hadn’t for a long period of time. Certain duty-bearers also claimed to be providing goods and services, but the providers and recipients could not verify this and were unaware of the goods or services they were supposedly providing, or were to have been receiving.

- **An unawareness of programmes which already existed in the community.** Certain duty-bearers were not aware of what others were doing and felt the need to duplicate the same service.

- **A disconnect in the supply and distribution of goods to the recipients.** Many donors of goods or services seemed to be far removed from the setting in which distribution of these goods and services took place, while few were involved in the distribution process. “How they get the food from there, none of us knows” and “we’ve never got involved or gone into it” gives evidence to this.

- **Unco-ordinated collaboration.** Certain duty-bearers who were supposedly collaborating, were found to be disconnected. The following comments from participants: “I don’t even really know who they are” and “I don’t know what everyone else is doing and how they do it”, supports this finding.

### 3.6.2 Willingness of duty-bearers to collaborate in the goods and services they provide

Quotes regarding the willingness of collaboration between duty-bearers included the following:

- “Where we could collaborate, it would really assist greatly”.
- “If we work as a group together it will help us to see who the children are that we are feeding so that they also don’t get double feeding.”
- “Working alongside other individuals is first prize.”
- “If we can collaborate, then we will”.

• “At the end of the day it’s a case of understanding what the needs are, being able to help as far as we can and just trying to make sure that it’s facilitated in the easiest way possible.”

Willingness to collaborate also came with conditions from some duty-bearers as expressed in the following quotes.

• “If it’s at arm’s length.”
• “It would all depend on what the collaboration would entail”.

All duty-bearers, with the exception of one, expressed willingness to collaborate in the goods and services they provided.

3.6.3 Perceived concerns or constraints to collaboration by the duty-bearers

A number of varied concerns and constraints to collaboration were identified by duty-bearers and listed together with substantiating quotes in Table 3.1.

<table>
<thead>
<tr>
<th>CONCERN OR CONSTRAINT</th>
<th>QUOTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Pooling of finances would reduce the available finances for operating costs.</td>
<td>“we would have to take our finances and pool it, so there would be a watering down of our finances. So if you give all that now, then you might as well not exist – so there’s a risk”</td>
</tr>
<tr>
<td>2 People not wanting to collaborate and wanting to be independent.</td>
<td>“People often want to start their own thing and often don’t want to join an existing service”</td>
</tr>
<tr>
<td>3 Competition for funding.</td>
<td>“there’s a high amount of competition to receive funding” “there’s a general lack of funding for NGOs and because most of the organisations struggle with funding, they can be quite protective of their turf which makes it harder to work with them”</td>
</tr>
<tr>
<td>4 Having to use and distribute the food given by donors.</td>
<td>“It’s great, but why is it genetically modified food? It’s going to fill someone’s tummy, but the kids hate it.”</td>
</tr>
<tr>
<td>5 Conflicting vision, values, beliefs and ideologies.</td>
<td>“I’m always willing to share what I have, but I wouldn’t always take what they’re offering or support what they are doing necessarily. I am a collaborative person, but there are some things I won’t compromise on.” “I would not be able to collaborate with an organisation that only looks at food security and not nutrition. I wouldn’t even come close to them.” “I think that if the organisation doesn’t comply with what we believe we will be setting the wrong example. So if an organisation is just about giving food and things, that’s not what we do.” “They would need to have the same vision”</td>
</tr>
</tbody>
</table>

….. continued
6. Personality clashes

“I don’t like to be told what to do.”

“It’s very much regarded as her little empire and she doesn’t like people treading on her toes.”

7. Lack of time and availability

“I honestly believe that the thing that holds us back from sharing is that we are caught up in business.”

“Time wise I would have constraints.”

“People can’t commit because they have time constraints.”

“The time for people to go out and make those connections would be a problem.”

8. Lack of capacity

“If they don’t provide the same services, so I get lots of referrals and then I am sometimes inundated with referrals.”

9. Mistrust

“That there would a lack of commitment and people would be unreliable and inconsistent”

10. Relinquished authority

“Not being able to have a direct say in matters.”

11. Insufficient funds

“Not having enough funds to get involved”

12. Lack of understanding of the context of Masiphumelele.

“Some NGOs come in to do good and confuse people and end up doing more harm than good. They don’t understand the context of the situation. People don’t understand reality of life in Masi, they think they do but they actually don’t. They don’t understand how hard it is.”

<table>
<thead>
<tr>
<th>ISSUES</th>
<th>QUOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Feeding programmes can be seen as hand-outs and creates dependency.</td>
<td>“It can be disempowering to give food, and that’s the problem with handouts.”</td>
</tr>
<tr>
<td></td>
<td>“There needs to be a discipline behind giving to prevent people from moving from ‘I’ve got a crisis and you need to help me’, to a total dependency.”</td>
</tr>
<tr>
<td></td>
<td>“People in Masiphumelele are getting used to the handout.”</td>
</tr>
<tr>
<td></td>
<td>“So every time the garden was empty, they just came to look for me for funding. It is a problem as we need people to sustain themselves.”</td>
</tr>
<tr>
<td></td>
<td>“We need to devise a plan on how to prevent dependency on the handouts.”</td>
</tr>
</tbody>
</table>

Table 3.1. Table showing a list of concerns and constraints to collaboration

A conflict in vision, values and beliefs was quoted a number of times as being one of the biggest perceived constraints to collaboration amongst duty-bearers, and a lack of time and availability was also mentioned frequently.

3.7 Issues faced by duty-bearers in the provision of goods and services

The issues faced by duty-bearers in the provision of goods or services were numerous and diverse in nature. Some pertained to all types of duty-bearers while others were more specific to certain types of duty-bearers. From statements made in interviews many issues were identified and are indicated with quotes in Table 3.2.
<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Quote</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>Feeding the children can encourage and prevent parental responsibility and can lead to an abuse of the feeding programme.</td>
<td>“I'm not very keen on the feeding as I feel it is a handout to parents to not take responsibility. Later, the signs started showing when the parents were drinking even more now that their children are being fed.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“If the child goes home, all they need is a sandwich as they would have had a main meal; also they are fed at school.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“It takes sometimes a year or two to discover that the programme is being abused by the earning parents.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Getting the parents to understand that they need to take responsibility takes a lot of hard work.”</td>
</tr>
<tr>
<td>3.</td>
<td>Lack of successful implementation of food-creation projects</td>
<td>“I'm very keen to see more and more organisations get involved in the creation of food, not just the provision of it.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We need to do more teaching people how to produce and not just vegetable gardens, that's not good enough, they have to produce protein as well, whether it's fresh chicken or eggs. We need more of that.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We wanted a place to grow our own vegetables, but we couldn’t get an open space to grow our vegetables, but that is what we would like to do.”</td>
</tr>
<tr>
<td>4.</td>
<td>Children on the feeding programmes are not fed during the weekends or holidays.</td>
<td>“The younger kids stay with their older siblings at home during the holidays.”</td>
</tr>
<tr>
<td>5.</td>
<td>Kids on the feeding programme gained too much weight.</td>
<td>“Some kids had to be taken off the programme because they became too overweight.”</td>
</tr>
<tr>
<td>6.</td>
<td>Lack of funding or donations of food limit feeding capacity of those involved in feeding programmes.</td>
<td>“Due to a lack of funding certain programmes that provide food have been halted.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We rely on the food donations predominantly, but they seem to be donating less now.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We sometimes have to give from our own pockets when we do not get given enough food.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We don’t have enough funds, so it’s difficult for us.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We have a budget, so we have to compromise.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Lack of money can be a problem.”</td>
</tr>
<tr>
<td>7.</td>
<td>Inconsistency of funding or donations for those delivering the feeding programme.</td>
<td>“We don’t always get what we’re supposed to get and sometimes we don’t get from our donors. I don’t know when last they gave us. I can’t even remember.”</td>
</tr>
<tr>
<td>8.</td>
<td>Lack of manpower or committed volunteers in the delivery of and follow up of the feeding programme.</td>
<td>“People are just happy to give money for food, but we need the manpower.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Volunteers are hard to find and they come and go.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“We rely on volunteers and people are busy.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“People do need to be motivated to help. If we don’t publicise or “push” it, it does tend to lag.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“There is a lack of commitment from people. Not consistently being committed to being involved.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Lack of people can be a problem”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“People can’t commit on a regular basis because they have time constraints.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“The fieldworkers were supposed to follow it up. And they did, I think, half-heartedly.”</td>
</tr>
<tr>
<td>9.</td>
<td>Volunteers feeling unappreciated and unwelcome</td>
<td>“A few times I didn’t feel welcome.”</td>
</tr>
<tr>
<td>10.</td>
<td>Volunteers can interfere with the process.</td>
<td>“They have such good intentions, but they interfere with the process.”</td>
</tr>
</tbody>
</table>

...... continued
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>
| 11. | Lack of adequate facilities or equipment | “We don’t have a fridge to keep it fresh.”
|   |   | “Now we have chairs for them to sit on which was a problem in the past.”
|   |   | “We want to grow our own vegetables but we can’t get an open space to grow them.”
|   |   | “The space wasn’t big enough.”
| 12. | Limited space at facilities of service delivery. | “The space limits the number of children which can be accommodated legally.”
| 13. | Time constraints with delivery of services | “I spend more time trying to get funding than with the kids and the feeding programme.”
| 14. | Dishonesty in the spending and use of money and food given to feeding programmes and by recipients | “Often money is given to NGOs for feeding, but if you go to the kids, they’re not receiving it. The kids will tell you that they get peanut butter and bread every day, but the menu will tell you something different.”
|   |   | “Not all donated foods are given to those in need, but the staff of facilities are taking the surplus home. This is unethical and should be passed on to those in need.”
|   |   | “We’ve had instances where the volunteers walk off with bags of fruit and the kids don’t get fed.”
|   |   | “Some people collect and then sell it”
| 15. | Can be funder-driven. | “Sometimes you are forced to be funder-driven.”
| 16. | Funders giving with ulterior motives. | “Some people or organisations want to be known that they have given for advertising purposes.”
| 17. | The food given in the feeding programme is not always acceptable and lacks variety. | “There are some inappropriate food items donated which we are unable to serve to the children.”
|   |   | “One facility just throws half the food away because they don’t know what to do with it.”
|   |   | “It’s great, but why is it genetically modified food?”
|   |   | “It’s going to fill someone’s tummy, but the kids hate it.”
|   |   | “We just provide it now twice a week or even once to our kids and you have to add so much to make it yummy.”
|   |   | “Some add soup mix to it to make it taste better if they can afford it.”
|   |   | “Some of the children won’t eat it. It’s just the hungry ones who eat it. It’s so boring. I’d say only half of the children are actually eating it.”
|   |   | “Our population in Masiphumelele eat very specific things. I would cook that, but our Masi parents wouldn’t cook that.”
|   |   | “It’s a bit bland and the children get bored of it, which they would because it’s a “gloop”, a mush.”
|   |   | “It’s always the same stuff. We don’t want to give the children the same stuff every day. We only give it Monday’s and Wednesdays.”
|   |   | “The texture and flavour of the products can be a problem; they complain that the children don’t like it.”
| 18. | Inadequacy of food given in quality or quantity | “There are budgetary constraints so small portions are served.”
|   |   | “It is lacking in omega-3.”
|   |   | “They were mostly babies and the food is really lumpy, so only the kids from 1 year up will be able to eat it.”

….. continued
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>19. Wastage of food</strong></td>
<td>“There is wastage of vegetables.”</td>
<td>“Incorrectly cooked food, so the porridge is too thick or too runny.”</td>
</tr>
<tr>
<td></td>
<td>“Stock-piling occurs when pupils are absent.”</td>
<td>“I have a feeling that some of them are stock-piling it and the kids are eating their own food. They seem to let them eat their own food in preference to giving them that.”</td>
</tr>
<tr>
<td></td>
<td>“Sometimes it expires, so you throw it away.”</td>
<td></td>
</tr>
<tr>
<td><strong>20. Identifying those who are vulnerable and are in need</strong></td>
<td>“Identifying the real vulnerable is a challenge”</td>
<td>“It’s difficult to ensure that the food goes to who it is intended for.”</td>
</tr>
<tr>
<td><strong>21. Safety is a concern</strong></td>
<td>“Security personnel need to be on hand when distribution of food takes place during times of crisis. There are so many desperate people trying to get into the queue and you are going to get to a point where you don’t have enough.”</td>
<td>“I’m going into a dangerous area here.”</td>
</tr>
<tr>
<td><strong>22. Poor weather conditions</strong></td>
<td>“The bad weather prevents kids from attending the feeding programme, especially during winter.”</td>
<td>“We have fewer kids when the weather is bad.”</td>
</tr>
<tr>
<td></td>
<td>“When it’s raining the kids don’t come.”</td>
<td>“If the weather’s bad, they won’t come.”</td>
</tr>
<tr>
<td></td>
<td>“When it’s raining, it would be impossible for us to give food.”</td>
<td>“Some in the wetlands have to wade through knee-deep water. So they don’t bother to come.”</td>
</tr>
<tr>
<td></td>
<td>“The main thing is the weather. From the wetlands you have to walk 15 minutes in the pouring rain and wade through water up to your knees.”</td>
<td></td>
</tr>
<tr>
<td><strong>23. Stigmatisation</strong></td>
<td>“Often find that the child won’t come with the parent because of stigmatisation, the older the child, the more the stigmatisation.”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“The kitchen is also stigmatised because people know that if you get food from here that you have been referred by the clinic and have TB or HIV. So the people would send the child.”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“For the older children it would be a stigma. You are poor, so they would rather be hungry than let your neighbour see that you have come to fetch a plate of food.”</td>
<td></td>
</tr>
<tr>
<td><strong>24. Lacking in capacity, insufficient training and education</strong></td>
<td>“The cooks are unable to read the recipe on how to make porridge.”</td>
<td>“They don’t think the supplement food is worth collecting, not realising it’s far more nutritious. I don’t think it’s been explained that well and think it needs to be reinforced.”</td>
</tr>
<tr>
<td></td>
<td>“You’ve got to educate the people you’re giving food to and that’s not something we have done very well.”</td>
<td>“They have this misconception that they can only give it to children over 2 years of age.”</td>
</tr>
<tr>
<td></td>
<td>“The main thing is not proper training in how to cook it and so they’re not cooking it properly.”</td>
<td>“They run short of the supplements, so we have to educate them.”</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>26.</td>
<td>Difficulty in developing community leaders</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“It is difficult to develop community leaders and to find the time and resources to do that.”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“The difficulty is in training people on the ground as distributors. It’s very, very difficult and is long term as it requires many years of training people.”</td>
<td></td>
</tr>
</tbody>
</table>

| 27. | Lack of follow up |
|   | “We really need workers to around again and check how much is being used and whether it’s being used and whether they’re cooking it properly.” |

| 28. | Unfair distribution of food |
|   | “I wish there was a situation where every crèche in Masi gets a fair portion every day.” |

| 29. | Limitations to how much can be given |
|   | “Not having enough food to give is a problem.” |
|   | “Whatever you are giving, it’s just never enough.” |
|   | “Sometimes we get 50 people looking for donations and we can’t give to everybody.” |
|   | “When we do help then somebody else calls for help and then 5 people call for help and unfortunately we have to retract and say unfortunately we’ve done what we can at this point and we need to step back.” |
|   | “One has got to be very careful that if it’s not sustainable that you fail on the expectations of the people you’re trying to assist. So much as it may seem not a full commitment; one’s got to be weary that you can only do what you can.” |
|   | “You can only give to so many people.” |
|   | “Sometimes people get very upset when I tell them that I can’t help them.” |

| 30. | Dealing with a migratory population in Masiphumelele |
|   | “The problem is that children come and go so much.” |
|   | “They go off on holiday to the Eastern Cape and then don’t come back.” |
|   | “Most of the time or biggest problem is that they just vanish. We have a very mobile community.” |

| 31. | Lack of interest in or need of food supplement |
|   | “Some came and got it every week and some got it once and haven’t bothered again.” |
|   | “Some don’t come and collect the food even though it’s offered to them.” |
|   | “The main thing is not collecting the food.” |
|   | “I haven’t seen a severely malnourished child” |
|   | “Our kids were malnourished in the past. We don’t have any malnourished kids at the moment.” |

| 32. | Theft of food |
|   | “They steal the veggies I grow.” |
|   | “The volunteers walk off with bags of fruit and then the kids don’t get fed.” |

| 33. | Giving credit to customers limits cash flow and ability to trade effectively |
|   | “Some people want credit, you give them and then they don’t come back and pay, and so my business suffers.” |
|   | “Sometimes it’s not helping me because I didn’t have the money to go there and buy other stuff. I must wait for them to pay me before I can get.” |
|   | “I do not have a stable budget for that month and I’ve given credit. Sometimes I have to wait and wait and the money hasn’t come in.” |

| 34. | Rising competition in business |
|   | “When I started selling in Masi there were only 2 people doing that in Masi. Now we are plenty because people saw this thing is paying.” |

| 35. | Rising costs |
|   | “Petrol is expensive so it affects my selling price.” |

**Table 3.2.** Issues faced by duty-bearer in the provision of goods or services
Some issues and concerns raised were as a result of the goods or service provided. Examples of these were: that feeding programmes were seen as a handout and had created or were creating dependency and, that parents were abusing the feeding programme and were not taking parental responsibility for their children’s feeding. Other identified issues were endogenous in the provision of the goods or services and highlighted as: problems in identifying those most vulnerable to whom the goods or service was intended for, and in that the food given in the feeding programme was not acceptable in terms of adequacy of quality and quantity as well as culturally. Still other issues were exogenous to the goods or service being provided and these were described as poor weather conditions, rising costs and dealing with a migratory population.

3.8 How duty-bearers perceived their role

The responses by duty-bearers were categorised in themes and are as follows:

1) **Assisting in the provision of not just food, but healthy and nutritious food.**

Some duty-bearers felt very strongly that healthy and nutritious food must be given to the children and repeated this on more than one occasion during the interview. Below are quotes from seven duty-bearers emphasising this theme:

“I think it’s important that their basic needs are being met through being fed a nutritional meal”

“As far as these children in Masi are concerned we are committed to giving them a balanced diet twice a day.”

“We can actually provide the children with good food. Not the Oros juice, chips, sweets and oily food they’re getting from their parents. They need fruit every day, they don’t need chips. If I can do anything, that’s where I feel my role is.”

“One of the mothers came to me and said she went to the clinic and they are glad because her child is picking up weight, so I do feel we are doing something important.”

“I see food as part of the essential package, just one of the essential elements to the whole.”

“Children need to learn to eat healthy and eat vegetables every day.”
“It’s really important. We don’t want to have sick children, even if the community is not aware but the child’s brain is deprived and the child when he gets to school, the child may not progress very well because he was not fed very well at a young age. It’s extremely important.”

2) Feeding children who would otherwise be hungry.

Other duty-bearers felt that they were helping to feed children that would otherwise be hungry as expressed below.

“…lots of the kids, like one or two, say “I am hungry”

“It’s a matter of feeding children who would otherwise be hungry, yes, it’s an important thing.”

“I don’t believe that any child should be left for a day without food”.

“To the crèches we are essential because they wouldn’t be able to keep all those kids fed and they would be starving.”

“I do feel we are filling one hole I would say. That is maybe one child who would have gone to bed without a proper meal can now have a proper solid meal three times a day.”

3) Fulfilling a need to inform those who do not provide food at the point of delivery

A duty-bearer indicated that their role was to sufficiently inform those who did not work at the point of delivery by expressing the following:

” I don’t think people understand the issues that we face. My primary responsibility is getting people to understand how they can more effectively assist.”

4) What they do is important and they are meeting an important need.

Most duty-bearers felt that their involvement was important in that they were “meeting a very important need”.

“We are meeting an important need”.

“Some of them come to us and tell us “we appreciate it”.”

“It is important. I’m just one of the many threads in the tapestry.”

“I think we make a lot of difference”.

“I think we are fulfilling an important role.”

“I think you can really see the need and the appreciation from their side. I think it’s extremely important.”

“I am helping people, it’s important for me to be there. If I’m not there the people are asking, “Where were you yesterday?”

“I think I am playing an important role in Masi.”

“I believe I’m playing an important part”

5) Not doing enough to meet the need.

Others felt and were honest enough to express that they did not feel that they were doing enough to meet the need in Masiphumelele.

“I don’t think we do it regularly enough to satisfy a need, to be honest.”

“I feel we’re only touching the surface.”

“We do what we can with the budget we’ve got”.

“I would personally like it to be more.”

6) The need is not as great as it would seem.

In contrast, another duty bearer objectively expressed their opinion that perhaps the need for nutrition in Masi was not as great as it would seem.

“Masi, does not appear to be one of our informal settlements where the need for nutrition is high.”
CHAPTER 4: DISCUSSION

4.1 INTRODUCTION

This study assessed and analysed the duty-bearers providing goods and services relating to food security determinants to children under the age of 18 years in Masiphumelele, Cape Town. In-depth interviews with identified duty-bearers enabled analyses of the work of these duty-bearers and resulted in findings related to collaboration, along with perceived constraints to collaboration, and the issues faced in the context of delivery of the goods or services they provided.

4.2 DUTY-BEARERS

Six types of duty-bearers were identified in this study, one of which represented the state. This testifies to the fact that apart from the legal obligation that the state has to fulfil its duty to the right to food, many others have identified themselves as moral duty bearers holding to their moral obligation to fulfil the right to food.14

Of interest, is that most duty-bearers had been delivering goods or services to the children in Masiphumelele for a considerable length of time with 60% involved for longer than a five-year period, 28% of these for longer than 10 years, and indicates the level of commitment by these duty-bearers to the community. The strength of the commitment is further shown by the fact that funding of almost half of the duty-bearers came from local individuals. Positively, while the state did not provide funding for all duty-bearers, the state was identified as a source of funding across all types of duty-bearers, except in the case of the one individual who was self-funded. The state was found to be to be fulfilling the right to food either by provision through food supplementation or school-feeding schemes or by facilitation by means of monetary funding to those who met stipulated criteria. The study found that those who did not meet the necessary criteria for provision or facilitation by the state received assistance from moral duty-bearers.
4.3 GOODS AND SERVICES PROVIDED BY THE DUTY-BEARERS

Most of the participating duty-bearers provided goods through feeding schemes or programmes at schools, after-care or at the state clinic. There is a potential for overlap in the delivery of food to some children by different feeding schemes since the actual feeding took place at different times of the day and at different locations. Furthermore, some duty bearers were unaware of the existence of other feeding schemes that were currently operating. Of concern was that no goods or services pertaining to assistance in the production of household food or urban agriculture were identified for Masiphumelele and a participant mentioned that attempts at establishing community gardens in the past had failed. This was also expressed as a concern by a few participants. The promotion of household food production was one of the recommendations made by Olivier De Schutter, Special Rapporteur on the Right to Food, in his report written after his visit to South Africa in 2012.28 However, given the fact that attempts at establishing community gardens have previously failed and there is none or very little household food production taking place, the feasibility of this recommendation and the reasons for its lack, need to be further explored in this community. There is also a need to develop the sustainability of food supply for households by way of facilitated assistance alongside the provision of food hand-outs. This can be done by creating alternate income-generating activities with the assistance in small enterprise development as well as job creation initiatives. Social development plans are in place by the government as indicated in the Integrated Social Development Plan acting at both national and provincial levels. The aim of this plan is to reduce poverty through integrated sustainable development by co-ordinating and facilitating the delivery of integrated and sustainable development programmes through partnering with relevant stakeholders and civil society in order to promote and achieve holistic community development.29 The Annual Performance Plan 2013-2014 of the Department of Social Development indicated that “building sustainable, vibrant and healthy communities is the programme’s largest area of spending”. The money, administered through the National Development Agency, is used by this agency to “implement sustainable community driven projects that provide support to non-profit organisations working on early childhood development, food security, employment creation and income opportunities.”30 All of which would require medium to long term approaches.
4.4 ACTOR LEVEL OF DUTY-BEARERS

It was clear that the focus of the majority of participating duty-bearers targeted the actor level of the individual, since they assisted in transfers of goods from public-assistance programmes to feeding schemes or programmes. Thus the realisation of the right to food for the children, as individuals, was fulfilled by these duty-bearers. Of note here, is the fact that the state theoretically ensures the realisation of the right to food for children who meet specific criteria, by targeting the individual actor level through provision or facilitation.

4.5 WAYS IN WHICH GOODS AND SERVICES ARE PROVIDED BY DUTY-BEARERS

The goods or services provided were largely distributed as food at no cost to the children attending the primary or high school, or households except where the type of duty-bearer was private and represented a spaza shop or street vendor. In this instance the information given is as received during an interview, and it was not verified as delivery of the goods and service was not witnessed. The state school-feeding schemes unfortunately do not continue during the school holidays and therefore long periods of time pass without assisted feeding for the children of school-going age, for which alternate arrangements should possibly be made. This is an opportunity for collaboration between NGOs and the State which can ensure the maximum facilitation of the realisation of the right to food amongst children in Masiphumelele to ensure uninterrupted provision of food. A safety net for the community is provided in that the spaza shops and street vendors extend credit to households who are unable to pay for goods, including food, at the time when they need it, enabling the fulfilment of the right to food.

4.6 COLLABORATION

It was clear from interviews that loose and informal collaboration amongst duty-bearers did exist. Although collaboration was reported, it was not possible always to confirm the extent of collaboration from data collected. Information received also revealed discrepancies related to collaboration. Furthermore, very little collaboration took place in the food sector. Although all but one duty bearer expressed willingness to collaborate, there is indication that some are not willing to compromise and discuss issues in order to reach an agreement based on what is of maximum benefit for the recipients of the goods.
and services. Preferences, ideals and values, both personal and organisational, were revealed as dominant constraints to collaboration. These barriers to collaboration, of which there are many more, are shared by others who have investigated barriers to implementation of collaboration\textsuperscript{31} and could hinder the ability for collaboration among the duty-bearers.

### 4.7 ISSUES FACED BY DUTY-BEARERS IN THE PROVISION OF GOODS AND SERVICES

Many duty-bearers felt that the goods or service they provided was a hand-out that created dependency and encouraged the children’s parents not to take responsibility. Considering the fact that almost one-third of the duty-bearers have provided these goods or services for longer than 10 years and another third for between 5 and 10 years, this may very well be the case. This issue highlights the concern regarding the lack of sustainable development of household food production and emphasises the need for alternate contributors to household income. This is important as funding is on the decrease and becoming increasingly more difficult to obtain. Problems relating to household food production were raised as an issue, in that vegetables were stolen or ruined and land was unavailable for planting. Household food production is in itself a food-security determinant and therefore these identified obstacles also need to be addressed.

There were numerous complaints by duty-bearers regarding the type of food items donated to individuals. There is a need to assess and consider the cultural acceptability and adequacy of such foods, as well as the wastage linked to this if children are not consuming it. It is clear that two issues have developed: Firstly, there is a need to discuss with duty-bearers whether a need exists for the development of criteria for the types of food to be distributed to the children with reference to food adequacy and cultural acceptability, and secondly, a need to assess the inclusion criteria for children who are receiving the food.

It is of interest that there were reports by a few duty-bearers that food- and nutrition-security needs were intermittently met within this community. The question arises as to whether this is in fact due to the longstanding and continuing nutrition intervention by duty-bearers providing goods and services pertaining to the realisation of the right to food in children in Masiphumelele. The Food and Agricultural Organisation of the United Nations...
(FAO) supports this finding in the claim that “Non-governmental and community organisations operating effectively at the regional and community levels are better positioned than most government institutions to reach those most in need.”

4.8 PERCEIVED ROLES OF DUTY BEARERS

Some duty-bearers perceived their roles as being important in that they were assisting the children of Masiphumelele to obtain a healthy and balanced diet. Others felt that they were not doing enough as they were not able to give sufficient quantities in times of need and that they were only scratching the surface of the problems. On the other hand, one duty-bearer felt strongly that the nutrition needs in Masiphumelele were not as great as they are thought to be. Considering this, opportunities may exist to use the methods described in this study to repeat the methodology of this study in other communities and to compare the findings of the communities to determine the levels, or extent, of duty-bearer involvement with a view to develop and implement appropriate intervention strategies. The method used in this study may also assist in identifying those communities which are most vulnerable and in which further duty-bearer involvement is necessary. This could assist willing duty-bearers to recognise where existing needs lie and where assistance is required. It may possibly also, in future, be coupled with more empirical data on nutritional status in the communities.

These duty bearers could also play a further important role in the monitoring of the realisation of the right to food as proposed by the FAO.

4.9 LIMITATIONS

Limitations of this study were that certain duty-bearers offering essential goods, such as social grants that contribute to household income were not included in interviews as they did not respond to numerous invitations or requests for participation, possibly because they see their role as managers of a national programme. Their participation would however have strengthened the description of the role of the state as facilitator for the fulfilment of the right to food.

Time was a limiting factor as data collection in this study was time-consuming. This resulted in the lack of sufficient time to visit all the sites at the correct times of distribution.
of food by duty-bearers, as originally anticipated. The aim was to obtain an objective view, and verify and witness personally the delivery of the goods or services provided.

A fear of disclosure and the use of tape-recording and transcribing of the interview may also have been a limiting factor to consider for those duty-bearers who were approached for inclusion, but who failed to respond or who declined to participate.

4.9.1 *Selection bias*

There may have been bias in the results obtained due to the incomplete representation of all the duty-bearers delivering goods and services to the children in Masiphumelele since 48 potential duty-bearers were identified and only 38 were contacted for possible inclusion. Those excluded may have included those acting on the household level contributing to household income or assisting in the production of household food notwithstanding that duty-bearers were purposively selected.

4.9.2 *Bias in responses*

A bias in response existed where there was insufficient time for some duty-bearers to respond, owing to the rules of the organisation where they worked, which required of them to obtain permission to participate in any research study from their manager. This led to a decision by the researcher to exclude them after sufficient time was allowed for these role players to obtain the necessary permission. This in particular resulted in the exclusion of the state being recognised in the study as a duty-bearer contributing to the household income by way of social grants. It also altered the profile of duty-bearers offering goods and services relating to food security determinants to children in Masiphumelele.

4.9.3 *Information bias*

The possibility of information bias is an inherent aspect of qualitative research methodology. The possibility of information bias was reduced, since after the coding was done by the researcher, the identified themes were discussed with one of the study leaders to ascertain agreement on the identified categories and themes.

4.10 **RECOMMENDATIONS**

Based on the findings, the researcher recommends that the networking and awareness between duty-bearers should be strengthened and facilitated through the already existing
Masiphumelele Non-government Forum. This is essential in order to enable the distribution of goods and services relating to the food-security determinants to take place in a more ordered and co-ordinated way. Furthermore, opportunities for collaboration amongst certain duty-bearers could possibly be further explored where services are duplicated, or overlap or could potentially be strengthened if collaboration existed.

It is also recommended that follow-up of the distribution or donation of goods and services from the source duty-bearer to the end user or recipient be monitored by the duty-bearer. This is necessary to build accountability as well as to verify whether the current process is sufficient, and to look for ways in which the process can be improved.

Developing or implementing strategies to identify the most vulnerable children in the community is advised. Furthermore, it is recommended that duty-bearers should enter into facilitated dialogue around the perceived concerns and constraints to collaboration, as well as the context issues faced in the delivery of goods and services.

Based on the findings of this study, it is recommend that the community be supported to strategise on possible ways to fill the capacity gaps identified in the missing food-security determinants at the household level (Figure 1.3) namely, the fixed pricing of food and the production of household food or urban agriculture. Further to this, it is also recognised and recommended that the feasibility and constraints of household food production be further explored given the locality of Masiphumelele in an urban setting and thereby emphasises the critical importance of primarily seeking to find ways to increase household income and employment with food gardens as a supplement.

A further recommendation would be the inclusion of the database of duty-bearers in the multi-stakeholder discussions in building of a local food system as was also recommended by the special rapporteur in his 2012 report on the right to food in South Africa. This recommendation is also supported by the recommendations made from the SANHANES.

Recommendations for further research include ideas surrounding collaboration in terms of available resources in the delivery of goods and service as well as exploring collaboration inter-sectorally by way of identifying duty bearers delivering goods and services related to the nutrition and health determinants of the children in this community. Opportunities for further research also exist in the duplication of the methodology of this study in other communities for use as comparative data.
CHAPTER 5: CONCLUSION

While the state is obligated to fulfil the right to food in accordance with the generic framework developed by Eide, namely to respect, protect and fulfil the right to food\(^4\), opportunities exist for all duty-bearers to build the normative content of the right to food into the daily realisation of the right to food amongst the children in Masiphumelele. Where possible, this can be achieved by means of focused attention on the availability, accessibility, sustainability, stability and adequacy in the goods or services provided. An emphasis must be placed on the lack of intervention of the food-security determinants that were found at the household actor level. Simultaneously, attention must also be drawn to the parents, who not only need to recognise their rights, but who are to equally recognise their responsibilities. This can be achieved by encouraging participation and empowering the community to initiate intervention using the human rights-based approach to development.

This study revealed that the duty-bearers expressed great willingness to collaborate with one another. However, the expressed constraints to collaboration amongst many participants may well be a hindering factor. While networking was evident amongst several duty-bearers, a more structured and co-ordinated approach in the food sector would identify the most vulnerable children and maximise the benefits in realising the right to food among them in Masiphumelele.


ADDENDA

Addendum A

PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM

TITLE OF THE RESEARCH PROJECT:
An assessment and analysis of duty-bearers realizing the right to food among children under the age of 18 years in Masiphumelele, Cape Town.

REFERENCE NUMBER: S13/05/096

PRINCIPAL INVESTIGATOR: S.M. Vincent

ADDRESS: Division of Human Nutrition
Dept. of Interdisciplinary Health Sciences
Faculty of Medicine and Health Sciences
Stellenbosch University
PO Box 19063, TYGERBERG, 7505

CONTACT NUMBER: Sue Vincent - 082 852 1283

Dear

My name is Susan Vincent and I am currently a student at the University of Stellenbosch studying for a Master’s in Nutrition. I would like to invite you to participate in a research project. Please take some time to read the information presented here, which will explain the details of this project and contact me if you need me to further explain any aspect in order for you to fully understand what this research entails and how you can be involved. Also, your participation is entirely voluntary and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point during the interview, even if you do agree to take part.
This study has been approved by the Health Research Ethics Committee (HREC) at Stellenbosch University and will be conducted according to accepted and applicable National and International ethical guidelines and principles, including those of the international Declaration of Helsinki.

The aim of the study is to determine who is or who are delivering goods and services relating to food security to the children of Masiphumelele and what and how these goods and services are being delivered and whether they would be willing to work with and alongside each other. The information obtained will be of benefit in that a database of those supplying goods and services relating to food security in Masiphumelele can be created and could also provide a base on which to build an integrated approach to food security among children in Masiphumelele by all those identified.

You have been invited to participate in this study as you have been identified as an individual or organisation providing goods or a service relating to food security to children in Masiphumelele.

Participation will require you to be interviewed (duration 30-45 min) at a time and place that is of mutual convenience for both yourself, the participant and the researcher, by prior arrangement. The interview will take the form of a discussion covering points regarding your delivery of goods or services, who you are as an organisation or individual, what service or goods you deliver and how these are delivered and whether you would be willing to work alongside or with other providers and what your perceived constraints to this would be.

The interview is to be voice recorded and transcribed for which your permission is required. Your request for the recording to be halted or deleted at any point during the interview process will be honoured. The information collected during the interview will be transcribed and all personal opinions expressed will be transcribed without your name, nor any other identifying information that can be associated with the voice recording or the transcript. The tapes will be erased once the transcriptions have been checked for accuracy. Transcripts of the interview may be reproduced in whole or in part for use in presentations or written products that result from this study. Only the information required for the development of a database of duty bearers, which will identify you and the organization you represent as well as the goods and services you deliver to the community and to whom, will, due to the context of the information required for the database, not be confidential and anonymous. All personal opinions expressed however, will remain confidential and anonymous. You as a participant will be protected from information being published in a way that would expose your expressed opinions or undermine your credibility or that of the body you represent.
All participants of the study as well as community leaders and representatives will receive feedback regarding the study results and the value of findings by way of written report and oral presentation of which you will be informed of in due course.

You will not be paid to take part in the study, but transport expenses incurred for the purpose of the interview will be paid by the researcher.

There is no risk or possible inconvenience involved in taking part in this study, except for the time required from you for the interview.

If you are willing to participate in this study, please sign the attached Declaration of Consent as well as the Consent to voice recording and transcriptions and hand it to me, Susan Vincent, the investigator. You will receive a copy of this information and consent form for your own records.

Yours sincerely

Susan Vincent
Principal Investigator
Addendum B

DISCUSSION SCHEDULE AND LIST OF POINTS FOR IN DEPTH INTERVIEW

Checklist prior to interview
- Participant has received the information leaflet.
- Researcher has received the signed consent form and completed the consent form.

CHARACTERISTICS OF THE DUTY-BEARER

Reference number: _____________

Name of duty bearer: ______________________________________________________

Name of participant: _______________________________________________________

Position held: ___________________________________________________________________

REMEMIND PARTICIPANT OF AUDIO-RECORDING AND BEGIN RECORDING!

LIST OF POINTS FOR DISCUSSION

- Who is the duty bearer?
  - Can you tell me about yourself / organisation
  - For how long have you or the organisation been serving the children of Masiphumelele?
  - How many people are involved, are they volunteers or are they paid staff?
  - How are you funded?

- What goods or service is the duty bearer providing?
  - Can you tell me about the service or goods are you providing in Masiphumelele?
  - Are there any criteria for inclusion or exclusion?
  - How many children did you serve initially compared to now?

- How are goods or services being provided?
  - How is the service or how are the goods provided?
  - How are the recipients identified?

- Is there collaboration between duty-bearers?
  - Are you currently working with, alongside or partnering with other individuals or organisations assisting in food security for children in Masiphumelele and if so, how?
  - If not, do they feel it is necessary, giving reasons for their answer?
  - Do they feel it is possible to work with or alongside other individuals or organisations and if so would they be willing to and what would their perceived constraints be?

- How do duty-bearers perceive their role in the context of meeting the food security needs of Masiphumelele?

- What are the issues faced in delivering the goods or services?

Thank the participant and inform them that they will be given feedback on completion of the study by way of a notified presentation and written report.
Dear Dr Helene Visser

RE: PERMISSION TO CONDUCT RESEARCH AT THE PRIMARY HEALTHCARE FACILITY IN MASIPHUMELELE, CAPE TOWN

I am currently a student at the University of Stellenbosch studying for a Master’s Degree in Nutrition and in order for me to fulfil the degree requirements I will be conducting a study titled “An assessment and analysis of duty-bearers realizing the right to food among children under the age of 18 years in Masiphumelele, Cape Town.”

This study has been approved by the Health Research Ethics Committee (HREC) at Stellenbosch University (Ethics reference number: S13/05/096), proof of which is attached, and will be conducted according to accepted and applicable National and International ethical guidelines and principles, including those of the international Declaration of Helsinki.

The aim of this study is to determine who is or who are delivering goods and services relating to food security to the children of Masiphumelele and what and how these goods and services are being delivered and whether those identified would be willing to work with and alongside each other. The information obtained will be of benefit in that a database of those supplying goods and services relating to food security in Masiphumelele can be created and could also provide a base on which to build an integrated approach to food security among children in Masiphumelele by all those identified.

The primary healthcare facility in Masiphumelele has been identified as an organisation providing goods (food items) relating to food security to children in Masiphumelele and for this reason I would like to request permission to include them, by way of representation of an individual, as a participant in the study.
The research requires that the representative be interviewed in the form of a discussion covering points regarding the delivery of goods or services to ascertain what these are, how they are delivered and whether there would be willingness to collaborate with other providers and what perceived constraints to this would be.

Feedback of study results and the value of findings by way of written report after completion of the study will be provided.

I attach the research protocol and addendum for further information should it be required. I may also be contacted via email (sue@pgfoods.co.za) or mobile phone (0828521283) should you wish to query any of the above or attached.

I sincerely appreciate your considering this request, and look forward to hearing from you.

Kind regards

Susan Vincent
Principal Investigator
Addendum D

CITY HEALTH — Specialised Health

2013-09-16

Research Proposal: An assessment and analysis of duty-bearers realizing the right to food among children under the age of 10 years in Masiphumelele, Cape Town (ID NO: 10369)

Dear Mr Vincent,

Your research proposal was approved with the following stipulations:

Interviews must be conducted with the following 3 City Health staff (in order to give you a comprehensive picture):

1. Clinic Manager Masiphumelele Clinic
   Mr Joseph Socksatha
   Tel: 021 796-3058/3556
2. Head: PPHC & Programmes — Southern Sub District
   Mrs B van Niekerk
   Tel: 021 710-9389
   Cell: 082 621 7381
3. Coordinator Nutrition, City Health
   Mrs Carmon Beukes
   Tel: 021 796-6570
   Cell: 083 266 3302

The interviews with the Head; PPHC and Programmes and Coordinator Nutrition could be conducted off site. Please contact the abovementioned people to arrange mutually suitable dates and times for the interviews.

Please note the following:
1. All information obtained must be kept confidential.
2. A copy of the final report must be sent to the City Health Head Office, P O Box 2315 Cape Town 8001, within 6 months of its completion and feedback must also be given to the individual involved.
3. Your project has been given an ID Number (10369). Please use this in any future correspondence with us.

Thank you for your co-operation and please contact me if you require any further information or assistance.

Yours sincerely,

DR G.H. Visscher
Manager: Specialised Health

cc:
Mr Cupido
Mrs van Niekerk
Mrs Beukes
Mr Socksatha

THIS CITY WORKS FOR YOU — EN ISIKOSI ESE BENZELA WENA — HIERDIE STAD WERK VIR JOU
Addendum E

List of categories and codes used for coding of data

Code-Filter: All

HU: Assessment and analysis of duty bearers
File: [C:\Users\Sue DELL\Documents\Master of Nutrition...\Assessment and analysis of duty bearers.hpr7]
Edited by: Super
Date/Time: 2013-10-21 14:56:58

adequacy of food
AL: community
AL: household
AL: individual
can they collaborate if not already?
collaborating: no
collaborating: yes, in FS sector
collaborating: yes, in other sectors
concerns + constraints to collaboration
conclusions
context issues faced in delivery of G + S
DB: FBO
DB: government
DB: individual
DB: NGO
DB: private sector organisation
DB: Welfare Association
exclusion criteria
Food and Nutrition security
food donations
FS issues
funding
G/S provided: food supply
G/S provided: household income
G/S provided: private transfers
G/S provided: transfers from public assistance prog
heart of the community
how collaborating: facilitation
how collaborating: monetary
how collaborating: with food
how collaborating: referral
how G/S provided? aid provision of food @ no cost
how G/S provided? food supplements
how G/S provided? monetary grant
how G/S provided? provide food @ a cost
how G/S provided? provide food @ no cost
how G/S provided? school feeding
identification of recipients
inclusion criteria
involving the community
length of time involved
Masi favoured
misconceptions
motivations for involvement
number of children fed initially compared to now
number of paid staff
number of volunteers
other duty bearers not interviewed
overlap of feeding
percieved role
plus for Masi
problems in the community
realising other HR
recognising children as a vulnerable group
safety net
start up focus
willing to collaborate? no
willing to collaborate? yes
Addendum F

Approval Notice
New Application

16-Aug-2013
VINCENT, Susan Melanie

Ethics Reference #: S13/05/096

Title: An assessment and analysis of duty-bearers realizing the right to food among children under the age of age 18 years in Masiqhubeka, Cape Town.

Dear Mrs Susan VINCENT,

The New Application received on 15-May-2013, was reviewed by members of Health Research Ethics Committee 1 via Expedited review procedures on 13-Jul-2013 and was approved.

Please note the following information about your approved research protocol:


Please remember to use your protocol number (S13/05/096) on any documents or correspondence with the HRBEC concerning your research protocol.

Please note that the HRBEC has the prerogative and authority to ask further questions, seek additional information, require further modifications, or monitor the conduct of your research and the consent process.

After Ethical Review:
Please note a template of the progress report is available on www.sun.ac.za/irs and should be submitted to the Committee before the year has expired.

The Committee will then consider the continuation of the project for a further year (if necessary). Annually a number of projects may be selected randomly for an external audit.

Translation of the consent document to the language applicable to the study participants should be submitted.

Federal Wide Assurance Number: 001001772
Institutional Review Board (IRB) Number: NS/0005219

The Health Research Ethics Committee complies with the SA National Health Act No.61 2003 as it pertains to health research and the United States Code of Federal Regulations Title 45 Part 46. This committee abides by the ethical norms and principles for research, established by the Declaration of Helsinki, the South African Medical Research Council Guidelines, as well as the Guidelines for Ethical Research: Principles, Structures and Processes 2004 (Department of Health).

Provincial and City of Cape Town Approval

Please note that for research at a primary or secondary healthcare facility permission must still be obtained from the relevant authorities (Western Cape Department of Health and/or City Health) to conduct the research as stated in the protocol. Contact persons are Ms Claudette Abekham at Western Cape Department of Health (HealthRes@pw.gov.za Tel: +27 21 483 9907) and Dr Helene Visser at City Health (Helene.Visser@capetown.gov.za Tel: +27 21 400 3961). Research that will be conducted at any tertiary academic institution requires approval from the relevant hospital manager. Ethics approval is required BEFORE approval can be obtained from these health authorities.

We wish you the best as you conduct your research.
For standard HRBEC forms and documents please visit: www.sun.ac.za/irs

If you have any questions or need further assistance, please contact the HRBEC office at 0219389657.

Included Documents:
TIME SCHEDULE
CHECKLIST
DEC LETTER KOORNHOF
DEC LETTER MATA
APPLICATION FORM
CV KOORNHOF
CV VINCENT
PROTOCOL
DEC LETTER VINCENT
IC FORM
SYNOPSIS
CV MATji
Cover Letter

Sincerely,

[Signature]

Franklin Wada
Health Research Ethics Committee I

[Signature]
DECLARATION OF CONSENT

By signing this form below, I …………………………………………… agree to take part in a research study entitled:

An assessment and analysis of duty-bearers realizing the right to food among children under the age of 18 in Masiphumelele, Cape Town.

I declare that:

- I have read the attached information leaflet and it is written in a language with which I am fluent and comfortable.
- I have had a chance to ask questions and all my questions have been adequately answered.
- I understand that taking part in this study is voluntary and I have not been pressurised to take part.
- I may choose to leave the study at any time and will not be penalised or discriminated against in any way.
- I may be asked to leave the study before it has finished, if the researcher feels it is in my best interests, or if I do not follow the study plan, as agreed to.

Signed at (place) ................................................ On (date) .............................. 2013.

...............................................................   ............................................................
Signature of participant                Signature of witness

CONSENT TO VOICE RECORDING AND TRANSCRIPTION

By signing this form below, I …………………………………………… agree to allow the researcher to voice record me and transcribe the interview as part of a research study entitled:

An assessment and analysis of duty-bearers realizing the right to food among children under the age of 18 in Masiphumelele, Cape Town.
• It has been explained to me that the recordings and all electronic documents will be stored safely and recordings destroyed after the transcripts have been checked for accuracy.
• I was given the opportunity to ask questions and all queries were explained to my satisfaction.
• I have been given a copy of the consent form.

Signed at (place) ........................................ On (date) ......................... 2013.

...............................................................   ............................................................ .
Signature of participant                        Signature of witness

DECLARATION BY INVESTIGATOR

I S.M. Vincent declare that:

• I explained the information in this document to......................................................
• I encouraged the above mentioned participant to ask questions and took adequate time to answer them.
• I am satisfied that the above mentioned participant understands all aspects of the research as discussed in this information leaflet.
• I did/did not use an interpreter.  (If an interpreter is used then the interpreter must sign the declaration below.

Signed at (place) ........................................ On (date) ......................... 2013.

...............................................................   ............................................................ .
Signature of investigator                        Signature of witness
DECLARATION BY INTERPRETER

I (name) ………………………………………………………………… declare that:

- I assisted the investigator (name) Susan Vincent to explain the information in this document to (name of participant) ………………………………………………… using the language medium of Afrikaans/Xhosa.

- We encouraged him/her to ask questions and took adequate time to answer them.

- I conveyed a factually correct version of what was related to me.

- I am satisfied that the participant fully understands the content of this informed consent document and has had all his/her question satisfactorily answered.

Signed at (place) …………………………………………on (date) ………………………………2013

...............................................................   ............................................................
Signature of interpreter Signature of witness