

## A national disgrace – again

Once again, I am writing about something we should not be seeing in South Africa (SA) – children dying of severe acute malnutrition (SAM). As Tamar Kahn reported in a recent *Business Day* article, we are a middle-income country that provides free healthcare and welfare grants to eligible children.<sup>[1]</sup> The numbers are stark. The rate of SAM in children under 5 years in SA has risen 26% in the past 5 years, our Minister of Health, Joe Phaahla, told parliament. The highest increase is seen in the Eastern Cape. He is talking about children who weigh <60% of their recommended weight for age. Just think about that for a moment – 60% less than their recommended weight for age. And worse, these figures are likely an under-representation of the true situation. SAM makes children vulnerable to other diseases such as pneumonia, severe diarrhoea and complications from diseases such as measles. Children admitted to healthcare facilities with these illnesses may not be recorded as having SAM as well.

Dr Phaahla, in a written response to a question from an EFF member of parliament, said that the incidence of SAM rose from 1.9 per 1 000 children under the age of 5 in 2018/19 to 2.4 per 1 000 children under the age of 5 in 2022/23. In the Eastern Cape, SAM almost tripled between 2018/19 and 2022/23, from 0.7 per 1 000 children to 2.7 per 1 000 children. In 2022/23, the recorded incidence of SAM was highest in the Free State (6.4 per 1 000 children under 5) and the Northern Cape (6.2), and lowest in Mpumalanga (1.3) and the Western Cape (1.5).

Chantell Witten, a registered dietician, said that the health department's committee for morbidity and mortality of children under the age of 5 found that 1 in 3 children who died had underlying malnutrition.<sup>[1]</sup>

Of course, there are the economic effects of COVID-19 and the general global rise in food prices to blame, which seems to be as far as our Minister of Health is going. State grants during COVID-19

were generally acknowledged to be woefully inadequate, as was the temporary increase in an already very low child grant. Grants alone are not the answer. These figures clearly show serious food insecurity in SA, the result of a catastrophic combination of social and economic factors, with massive unemployment probably the main driver for extreme poverty across our country.

Tackling problems like high rates of SAM in children requires a whole-of-society approach. At the health facility level, we need to measure and report this, and constantly push these figures into the faces of our policy-makers. Communities need to be empowered to become advocates for their issues, and they need to be listened to by the people that we, as taxpayers, entrust with the health of our populations. We need accountable and responsible government that is responsive to the needs of the population. We cannot allow our children to die of hunger in a land where ministers drive million-rand cars and live in mansions. Reporting figures to parliament is not enough. There needs to be action at a grassroots level, the first part of which should be going out and looking for children with SAM, not only so that we are aware of the true scale of the problem, but so that these children can immediately be treated and saved.

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1. Kahn T. Surging malnutrition among SA's children 'the tip of the iceberg'. *Business Day*, 19 July 2023. <https://www.businesslive.co.za/bd/national/health/2023-07-19-surging-malnutrition-among-sas-children-the-tip-of-the-iceberg/> (accessed 23 July 2023).