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Sulaiman M. Bah

Statistics South Africa, Sulaimanb@pwv.gov.za

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by Sulaiman M. Bah*

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*Sub-directorate of Vital Statistics, Central Statistical Service, Private Bag X44, Pretoria 0001, South Africa, FAX (012) 324-3835, Email: Sulaimanb@pwv.gov.za
The making, unmaking and remaking of a national but stratified vital statistics system in the Republic of South Africa.

S. Bah

Abstract

The political history of South Africa had direct effect on the development of vital statistics in that country. The paper looks at the dynamics of the making, unmaking and remaking of a national but stratified vital statistics system in South Africa. The paper also outlines the crucial roles played by key players in the process. This historical context of vital statistics has implications for demographic teaching and research.

Introduction

The nature and quality of a vital statistics in a country has more to do with a country’s political history, governance and the civil society at large than with the level of economic development. Certain developing countries in both low and middle income range have developed high quality vital statistics comparable to those in developed countries. Two such examples are the Islands of Sri Lanka and that of Mauritius. Vital statistics is only one component of the demography of a country. It adequately reflects that component to the extent of its relative completeness. Geo-political forces help shape the demography of a country and the nature of the demographic statistics as well. At the same time, the demography of a country also plays a crucial role in the political transition the country undergoes. The role of demography in political destabilisation has been discussed by Coquery-Virdrovitich (1989) while demography’s role in the unmaking of civil society has been discussed by McNicoll (1995). This article looks at the Republic of South Africa (RSA) and traces how the political history of the country has contributed in shaping the course of vital statistics. The paper analyses the dynamics of the making, unmaking and remaking of a national vital statistics system which is racially stratified. Since data collected only get importance after been published, the paper also describes the crucial role played by the national statistical agency (known under various names: Union Office of Census and Statistics, Bureau of Census and Statistics, Central Statistical Services, Central Statistical Service) in this process. Even though vital statistics technically encompasses statistics on births, deaths, marriages and divorces, in this paper, it will be synonymously used as birth and deaths statistics.

The making

During the making of a national but racially stratified vital statistics system in South Africa, two processes simultaneously took place. In the initial stage the geographic aspect took precedence while in the later stages, the racial stratification gained more importance. Before the union of South Africa (pre-1910), the collection of births and deaths statistics was decentralised. There were laws relating to the registration of births
and deaths but were different in each of the colonies. The specific Acts which were enacted in the various colonies concerning vital birth and death statistics were as follows: Cape (Act 20 of 1880 and Act 7 of 1894), Natal (Act 16 of 1867, Act 17 of 1894 and Act 5 of 1896), Orange Free State (Proclamation 15 of 1902), Transvaal (Ordinance 19 of 1906). In the Cape, room was allowed for late registration of births in the rural areas. Each of the colonies collected, compiled and published reports containing information on births and deaths.

The union of South Africa was constituted in 1910 as a legislative union of the former British colonies of the Cape of Good Hope, Natal, the Transvaal, and the Orange Free State. At this early stage, geographic fragmentation along racial lines started emerging and in 1913, the Natives Land Act was passed. This Act set aside 10 percent of the land separately for Africans.

A national statistical office for South Africa was established in 1914 in terms of the Act 38 of 1914. This resulted in the centralisation of the collection of vital statistics. However, uniformity in birth and death registration throughout the union of South Africa was only achieved later after the Births, Deaths and Marriages Registration Act 17 of 1923 which came into effect in 1924. Under this Act, registration was made compulsory for all races in urban areas but was voluntary for Africans in the rural areas (Bourne, 1995). Another Act made sure that living in rural areas was not optional for Africans. The Representation of Natives Act was passed in 1936, stating that 13 percent of the land of South Africa be set aside for Africans, an increase over the 10 percent allocated earlier. The homeland policy of later years was built on that legislation. Ten ethnic homelands, or bantustans were set aside for Africans. All Africans were assigned to their ‘appropriate’ homeland and only documented workers were allowed as ‘guests’ in white areas (Kufman, 1997). This ‘bantustanisation’ of South Africa, together with the 1923 Act effectively meant the stunting of the development of vital statistics among Africans.

Further efforts at developing a national but racially stratified vital statistics system saw the compilation of vital statistics for coloureds and Asians. Official vital statistics for coloureds became available in 1937 and for Asians, a year later in 1938. As most of coloureds and Asians lived in urban areas, vital events among these groups were assured of high level of coverage.

The 1930s set the framework for a national but racially stratified vital statistics system which was built upon in the three decades to follow. However in those decades, the racial stratification became the principal axis for the collection of vital statistics. In this regard, the landmark event in the political history of South Africa was the inauguration of the Nationalist Party in 1948. It was during this period that the idea of separate development (Apartheid) was formalised. During this period, several Acts were passed which affected demographic statistics as a whole. Principal among these Acts were the Population

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1 The terms ‘African’, ‘coloured’, ‘Asian’ and ‘white’ are apartheid classifiers. As the paper takes a historical perspective and reports on how vital statistics was reported, these population groupings have been retained.
Registration Act of 1950 and the Native Laws Amendment Bill of 1951. The aim of the 1950 Population Registration Act was to make provision for the compilation of a register of the population of the Union primarily for the issue of identity cards. Under the 1950 Act, anyone whose name was included in the register was assigned with an identity number and a population group. The register was divided into three parts. One part was for South African citizens, the second part was for permanent residents and the third part was for temporary residents. The Act only classified people under three categories: white, coloured or native. For natives, the ethnic groups was further included. For some unclear reason, the Act did not include the category of ‘Asians’ among the categories into which people were classified. Of importance is that the population register included information on place and date of birth, date of death and, if applicable, date of departure from the Union.

In the later period of this making phase, a new act was passed concerning births and deaths registration, namely Act 81 of 1963. Under this Act, registration of births and deaths for Africans at district level, was to be handled by the Bantu Affairs commissioner while for all other population groups it was to be handled by the district registrar. In districts where there are no registrars, the magistrate serves as the district registrar. Details of births are kept in the ‘births register’ while those of deaths are kept in the ‘deaths register’. The Act made no link between these registers and the population register as outline in the 1950 Act. The Act distinguished between the registration of vital events occurring in urban areas from those occurring in non-urban areas. The registration of births and deaths among Africans (or coloureds living among them) living in non-urban areas was optional.

A computerised population register was started in 1972 but only the particulars of whites, coloureds and Asians were kept in that register.

The geographic aspect as the making phase came to an end in 1975. This was the last year in which the RSA was still geographically a single country. Vital statistics was stratified primarily according to the three population groups. The complete stratification into the four population groups had not yet been achieved.

The simultaneous making and unmaking

The geographic unmaking a national vital statistics system is often a reflection of changes in boundaries. In the case South Africa, the period from 1976 to 1990 witnessed the geographic break-up of the country into the TBVC states (Transkei, Bophusthatwana, Venda and Ciskei) and the RSA. When each of the states ‘gained independence’, it became excluded from the South African statistical system. However the remaining six homelands, KwaZulu, KwaNdebele, QwaQwa, KaNgwane, Gazankulu and Lebowa did not opt for ‘independence’ and remained part of the RSA. At the same time, forced resettlement of African to the homelands was intensified in the 1970s (Kaufman, 1997). Hence by 1990, the geographic unmaking of a national vital statistics system had been achieved.
While, the geographic unmaking was taking place, the making of vital statistics stratified according to the four population group was simultaneously taking place. The particulars of Africans were subsequently entered in the computerised population register in 1986 with the issuing of uniform identity documents. This was the same year in which pass laws were abolished. Finally by 1990, the making of national vital statistics system stratified by the four population groups had been achieved.

The Population Registration Act of 1950 and its various amendments were repealed in 1991 by the Population Registration Act Repeal Act. Starting from 1991, births and deaths was no longer collected by population groups. This effectively is the racial unmaking of the vital statistics system. Data was collected for the four provinces and the six self-governing states for all the population groups combined.

In further support of the Repeal Act, a new birth and deaths registration Act was passed in 1992- Act 51 of 1992. The provisions of this Act apply to all South African citizens whether in the RSA or outside the RSA, including persons who are not South African citizens but who sojourn permanently or temporarily in the RSA. Non-South African citizens living in the RSA would be issued with birth and death certificates but their details would not be entered in the population register. Hence, if a child is born outside the RSA, notice of birth may be given to the head of the South African diplomatic or consular mission or a regional representative in South Africa. Also, according to this Act, a birth can be registered anywhere, not necessarily at the place where the birth took place. Deaths, whether in urban or non-urban areas should be registered 'as soon as possible'. Further, according to the 1992 Act, deaths due to unnatural causes should only be stated as such without the detail about the real cause of death. The Act clearly made no mention of population groups.

**The remaking**

In the remaking of a national but racially stratified vital statistics system, there are three challenges at hand: the geographic remaking, the re-introduction of the population group variable in birth and death certificates and the acceptance of the importance of the population variable among health and population specialists.

The geographic remaking essentially involves the redefinition of boundaries to make South Africa what it was before the break up into the TBVC states. This was done in 1992 when changes in provincial boundaries districts took place. In 1993, the RSA was divided into nine provinces including the former TBVC states.

From late 1997, the Department of Home Affairs, in collaboration with the Department of Health, have revised the births and deaths forms. Both forms include the population group identifier. In addition, the health staff at clinics and hospitals will assist mothers to complete the forms and submit the forms to the Department of Home Affairs on behalf of the parents. This will help to capture some of the births that take place at the clinics and
hospitals but escape registration. At the same time, it will help a major barrier to registering births in some remote communities.

With the dismantling of apartheid, the culture of silence that once prevailed has also been destroyed. As a result, the proposals for remaking a racially stratified vital statistics system has been a hotly debated issue. On the one hand, there are those who advocate for the inclusion of the population variable in vital statistics. They see population group as an explanatory variable whose inclusion in vital statistics will help monitor the progress in health and completeness of coverage of vital events among previously disadvantaged population groups. In this camp falls the demographers and population specialists (Lehohla, 1993). One can also include in this camp the Central Statistical Service, the Departments of Health and Home Affairs. On the other hand, there is a group of researchers cautioning against the inclusion of the population variable in health research given the context of the legacy of Apartheid (Ellison et al., 1996).

The role played by the national statistical agency in the process

The national statistical agency is a statutory body empowered to carry out its duties of collecting and publishing statistics under the Statistics Act and it various amendments. The Statistics Act of 1976 gives the Central Statistical Services the right to unhindered access to documents of government institutions and the withdrawal of any information considered as statistics from such documents. The Act also give the Central Statistical Services the flexibility and latitude of publishing statistics if it sees it as being necessary or in the interest of the public. This is an empowering clause which gives the Central Statistical Services the clout of being a crucial role player in shaping the course of vital statistics.

The national statistical agency was publishing vital statistics exclusively on whites since 1910. This continued up to 1936. From 1937, particulars on coloureds were included in the publications and from 1938 those of Asians were included. The stratification by these population groups continued even after the 1950 Population Registration Act wherein the Asian population group was omitted. This was the case possibly because the statistical agency was obtaining vital statistics from sources other than the population register. For the years 1979 and 1980, information regarding African births was collected and processed. This information was obtained from sources other than the computerised population register since it excluded African births during this period. However, due to under-registration of these births and the high percentage of late registrations that occurred, the figures were not published for those years and subsequently, the collection of African birth information was discontinued in 1981. In July 1989, the collection and processing of information on African births was reinstated. Again, because of the problems or low recorded births and high amount of late registrations, the figures for African births were not published in 1990.

Starting in 1968, a separate mortality report was issued for Africans in selected urban magisterial districts. From 1978, a new series of reports was issued covering deaths of Africans throughout the country. This series continued up till 1990.
With the incorporation of TBVC states into South Africa and the changes in the boundaries of magisterial districts, the publications released by the CSS were subsequently modified to reflect these changes. As from 1994, particulars in respect of the former TBVC states were included in the mortality data published by the CSS. For births, data from the former TBVC states were included in the 1995 report.

**Discussion**

The state played a crucial role in the geographic aspect of the making of a national vital statistics system through the formation of the union of South Africa and the subsequent standardisation of the births and deaths registration throughout the Union. The state also played a role in the development of vital statistics stratified according to three population groups: whites, coloureds and Asians. The full making of a vital statistics system stratified by all the population groups including Africans was completed through the efforts of the national statistical agency. In spite of the fact that the population register omitted the details of Asians in the 1950 population registration Act, the national statistical agency had been publishing data on Asians prior to 1950 and continued doing so even after the 1950 Act. Again, in spite of the fact that the computerised population register did not include details of Africans from 1972 to 1985, the national statistical agency collected data on Africans and attempted to publish such statistics.

Since the registration rate of vital events among Africans living in rural and remote areas was low, in combining both rural and urban deaths in one report (from 1978 to 1990) was counterproductive. One could no longer monitor the coverage of births and deaths in the urban areas and the combination opened the door for speculation on the completeness of vital statistics among Africans.

This historical context of vital statistics have implications for demographic teaching and research. First, demographic teaching and research would have to contend with discontinuities in time series data for whites, Asians and coloureds. Second, diagnostics techniques for validating data have to come to the fore. Research has shown that the completeness of vital statistics among whites, Asians and coloured, prior to 1990, cannot be taken for granted (Bah, 1997a). For Africans, because of incomplete vital statistics data of varying quality, arriving at reconcilable estimates has been a contentious issue. Hence the third implication for demographic teaching and research is that importance has to be given to using a dual approach to arriving at demographic estimates, based on both direct and indirect demographic estimation techniques.

**Conclusion**

Vital statistics in South Africa evolved within the context of the political history of South Africa. It is only when we understand relevant aspects of this history that we begin to unravel the complexities surrounding the collection of vital statistics and the reasons for the present level of coverage. Vital statistics, like other types of statistics, are not ends in themselves but are tools. They provide factual information needed for health, social and
economic planning. In the case of South Africa, the political history of the country had direct effect on the demographic statistics collected, the demographic statistics published and subsequently on the demography of the country as well.

The making of racially stratified vital statistics was not done in an equitable manner. As Africans were discriminated against in society, there were also discriminated against in statistics. This led to the under-development of vital statistics among Africans.

For the years to come, the remaking of vital statistics which is racially stratified will be largely shaped by three key role players: the Department of Health, the Department of Home Affairs and the Central Statistical Service. The first two departments play crucial roles in determining the content of the birth and death registration forms and the births and deaths registration Acts. The CSS on the other hand plays a decisive role on the content of the official birth and deaths reports. By legislation, the CSS has the flexibility of publishing or not publishing various aspects of vital statistics based on its perception of what is considered useful.

Disclaimer

The view expressed in this paper are mine, as a professional demographer, and do not necessarily reflect the views of the Central Statistical Service (CSS).

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