



The Centre for the Analysis of
South African Social Policy



Lone Mothers in South Africa – The role of social security in respecting and protecting dignity

Themed Working Paper 1

Defining Lone Motherhood in South Africa

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1 Background

The purpose of this document is to define the group of people whom we are considering as part of the project 'Lone Mothers in South Africa: The role of social security in respecting and protecting dignity'. Setting to one side the group of interest briefly ('lone mothers'), the project originates from research undertaken for the South African Department of Social Development (DSD) about attitudes to employment and social security (Noble et al., 2008; Ntshongwana and Wright, 2010a and 2010b; Ntshongwana et al., 2010; Surender et al., 2007; Surender et al., 2010). During the fieldwork for that programme of research, participants in focus groups repeatedly made the unprompted point that poverty eroded their sense of dignity. Given that the South African Constitution declares that people have inherent dignity and that dignity should be protected and respected (Republic of South Africa, 1996), we decided to dedicate a separate project to exploring the role that social security currently plays in relation to people's sense of dignity. Specifically we hoped to explore whether social assistance, as a financial transfer to low income people, serves to help to protect and respect people's dignity, or conversely whether there are ways in which the country's social security arrangements serve to undermine people's dignity.

Currently, there is no social assistance for low income people of working age, even though there is a commitment elsewhere in the Constitution to the progressive realisation of access to social assistance for people, and their dependants, who are unable to support themselves (Republic of South Africa, 1996: Chapter 2 section 27). We therefore wanted to additionally explore whether people thought that – in the context of very high levels of unemployment – some additional form of social assistance might be a worthwhile poverty alleviation measure that would help to protect and respect people's sense of dignity, or whether it might serve to further erode people's sense of dignity.

Although the issues around poverty, dignity and social security could be explored with any subgroup of the population, we selected lone mothers (broadly defined, as elaborated below) for several reasons. First, they embody the societal expectations of caregiver and breadwinner – roles which are difficult to reconcile even if there is financial support from the state (Budlender, 2010; Kilkey, 2000; Lewis, 2010; Mokomane, 2009). As Millar writes: 'lone parents are a group for whom the concept of the employment-based welfare, in which all adults are in paid employment, highlights very sharply the potential tensions between time for work and time for care.' (Millar, 2008: 4).

Second, as will be demonstrated below, as lone mothers typically have a low level of educational qualifications and in the context of high unemployment, any paid work is likely to be insecure and poorly paid, such as involvement in the Expanded Public Works Programme (McCord, 2003) or domestic work (Dinat, 2007; Ntshongwana and Wright, 2010a), which often falls short of the 'productive and decent employment' Millennium Development Goal.¹

Third, if employment opportunities are available, state provided childcare facilities are inadequate in many areas, and even if private provision is physically accessible it is usually

¹ It should however be noted that all work is, by definition, 'productive' according the System of National Accounts, and employment is simply a subset of all work.

unaffordable for low income families (Goldblatt, 2001; Dawes et al., 2010; Ntshongwana and Wright, 2010b; Richter *et al.*, 2012), and so challenges are faced at every turn whether in work or not in work. Recent research indicates that lone mothers in South Africa experience particularly high levels of poverty, and suffer financial (and often physical) insecurity which is compounded by a lack of autonomy (e.g. Ntshongwana and Wright, 2010a and 2010b). In addition and as will be elaborated elsewhere, this group internationally and within South Africa are often the focal point for debates around the undeserving poor, dependency culture, perverse incentives and the unsustainability of the social security budget, and are often the object of negative sentiment in the media.

2 The terms ‘lone mother’, ‘lone motherhood’ and ‘lone parent’

We use the term ‘lone mother’ as a socially constructed, descriptive term for lone parents who are female, and use ‘lone motherhood’ as a term that describes the varying states of being in the role of a lone mother.

There is an extensive literature on the social construct of lone motherhood and different terms have been used and critiqued over time. May (2010) argues that ‘we cannot assume that lone motherhood is experienced as a basis for identity nor that lone mothers constitute a self-defined group’ (May, 2010: 429). She further cautions against ‘interpreting a woman’s life or identity through the homogenizing, totalizing and (at times) oppressive lens of lone motherhood’ and recommends using a biographical approach in order to explore ‘the place of lone motherhood in a woman’s self-understanding’ (May, 2010: 430).² Nevertheless she maintains that ‘because ‘lone mother’ is a category that has significant impact on the lives of women categorized as ‘lone mothers’, it remains important for sociologists to offer theoretical and practical tools to counter the social and material inequalities that many lone mothers do face’ (May, 2010: 433). In this paper we try to tread that fine line.

We use the term ‘lone parent’ to refer to people who both (1) either do not have a partner or spouse or who do not co-habit with their partner or spouse and (2) are the main caregiver for a child under the age of 18. Such a broad definition encompasses a heterogeneous group of people. For example, in the same way as a parent may or may not be a biological parent, so too a mother may or may not be the biological mother and it is not assumed that a lone mother is a biological parent.

The UK’s Department for Work and Pensions (DWP) has commissioned a large number of studies on social security and lone parents. The so-called ‘generic definition’ of lone parents in these studies is as follows: ‘Parent or guardian with a dependent child under 16 who is not in a co-habiting relationship.’ (Sims et al., 2010: xiii; Lane et al., 2011: xi; Griffiths, 2011: xiii). Coleman and Lanceley use a slightly broader definition: ‘Lone parent – generic definition - Parent or guardian who is not in a co-habiting relationship and who has care of a dependent child under 16, or under 18 if in full-time education’ (Coleman and Lanceley, 2011: xv). However, in relation to who qualifies as a lone parent for Income Support, DWP provides many pages of technical detail in a guidance document called ‘The Decision Makers Guide’ issued by the Secretary of State for officials who make decisions about claims (DWP, 2013). Concepts are defined in great detail in Chapter 22 of the guide in relation to marital status (with detailed definitions of couple, lone parent, partner and polygamous relationships), having a child of eligible age³, and ‘being the person responsible for the child’, with examples provided.

² For a recent example of such an exploration (more broadly on the subject of motherhood and inspired by the work of Walker (1995)) see Moore (2013) in which she argues that that ‘more research is required to examine how state policy concerning women, work and childcare, or ‘political motherhood’, affects the way mothering is constructed in the everyday experiences of individuals’ (p170).

³ This decreased to 5 in May 2012 for people qualifying as a lone parent for Income Support.

The term 'lone mother' is not widely used in South Africa. Indeed, on one occasion when the project title was referred to, 'lone mother' was understood by the South African person who heard it to mean 'loan mother' (i.e. a mother who offers cash loans to people), in the same vein as a 'loan shark' (i.e. someone who lends money to people at a high rate of interest).

In the South African academic literature researchers make regular use of 'female-headed households' as a category of analysis (e.g. Dungumaro, 2008; Posel and Rogan, 2012). For example, Rogan (2012) disaggregates the category into three non-overlapping classifications: *de jure* female-headed households (never married, widowed or divorced/separated – the fastest growing type of female-headed household), *de facto* female-headed households (married but not living with husband or partner – the group at most risk of poverty) and co-resident female-headed households (living with partner or spouse). However, this categorisation also has its challenges and Budlender (2003) cautions against its use. Posel (2001a) highlights that 'household head' may be differently interpreted across cultures, and that the term presupposes that households are hierarchical, and is based on an assumption that household heads have primary control over decision-making and resources within the household (Posel, 2001a). It could also be argued that – even though Statistics South Africa makes explicit that it does not presume this to be the case⁴ – the expression 'female headed household' could be inferred by some to mean that households can only be headed by a woman if there are no men (particularly a spouse or partner) present, thereby preserving a sexist and hierarchical notion that men should head the household if they are present, and that women should defer to that social order. Indeed, according to Rogan (2012), in 2006 only 8% of female heads of household lived with a spouse or partner whereas 62% of male heads of household lived with a spouse or partner. In any event, for the purposes of our study, information on the self-identified head of household does not aid the process of trying to identify the group of interest as the women may or may not identify themselves, or be identified, as heads of household.

More colloquially, reference is made in speech and the media to 'single-parent' households, but this is a rarely used term in the academic literature, though see p49 of Amoateng et al. (2007) for a chart showing numbers of single parent households (with and without relatives) in 1996 and 2001 by race of head of household (though 'single-parent' is not defined). In a paper on single motherhood in Ethiopia, Kenya, Tanzania, Malawi and Zimbabwe, Clark and Hamplová (no date) argue that single motherhood may be a more useful focus for research than female headed households. In the UK the established convention is to use the term 'lone mother' instead of 'single mother' which was seen as being too linked (as the counterpoint) to marriage. It was argued that the term 'single mother' implied that the woman was either 'single never married' or 'single following divorce or widowhood', whereas in a context where partnerships do not necessarily involve marriage, there was a need for a term that was broader than the maritally-oriented term 'single', and so the expression 'lone' was introduced. For example, Bradshaw and Millar wrote in the early

⁴ Statistics South Africa defines a household head as 'A person recognised as such by household, usually the main decision-maker, or the person who owns or rents the dwelling, or the person who is the main breadwinner. The head can be either male or female. If two people are equal decision-makers, or in a household of totally unrelated persons, the older or oldest can be named as the household head.' (Statistics South Africa, 2012: 13)

1990s: ‘The general description “single-parent families” leads to confusion because one category of lone parents are single lone parents’ (Bradshaw and Millar, 1991: 1). Although ‘single mother’ is a commonly used expression colloquially in South Africa we have chosen not to use it for this same reason.⁵

A risk, however, of using the term ‘lone mother’ in the South African context is that it is interpreted as meaning that the mother is ‘alone’, implying that the lone mother is not only the sole adult in the household but also that she is the sole person that provides care for the child and that she exists and brings up the child in an atomised environment with no social networks or other forms of support. Such an interpretation became apparent in the project’s advisory group inception meeting. This highlighted to us the importance of trying to be as explicit and transparent as possible about the group of interest in terms of how lone mothers are defined for the purposes of the qualitative and quantitative analysis and when presenting the findings. Some studies do define lone motherhood as situations where women live in households with children but not with other adults. For example, a recent 18-country study identified lone mothers as female-headed households where the women were not married or cohabiting, with children present but no other adults present (Brady and Burroway, 2012: 724). However in our definition we would include women who live with other adults (but do not cohabit with a partner or spouse). Also – as elaborated further in section 4 – our definition of lone motherhood takes into account that in principle many different people contribute in varying ways to raising a child and for this reason, we would not wish to go so far as to use the term ‘sole parent’, as favoured by the OECD (e.g. OECD, 2007 and 2011). That is, our working definition of lone parenthood is driven more by consideration of cohabitation (and presence of a child) than by a distinction between ‘lone’ and ‘shared’ parenting which is not separable by a fine line (Payne and Range, 1998).

The concept of lone motherhood is nevertheless beset with challenges. Household structures are fluid and both cohabitation (with partners or spouses) and co-residence (with children) is not necessarily clear-cut. There is also the challenge of countering a dominant ideology of the nuclear family. As May (2008) highlights: ‘A lone mother family by definition breaches the ideal nuclear family of two parents and their biological children. Lone mothers face prejudice, stigma and doubts over their ability to bring their children up ‘properly’ (May, 2008: 479). The negative connotations associated in South Africa and internationally with the term ‘lone motherhood’ require the term to be used critically.

At the risk of being tautological the next section presents a range of routes to lone motherhood. This sets the context for section 4 which makes explicit how we define what is meant by ‘lone mother’ for the purposes of this research project.

⁵ See also Moyo and Kawewe (2009) which uses ‘lone motherhood’ as an analytical concept in the Zimbabwean context to great effect.

3 Routes to lone motherhood in the South African context

There are many routes to lone motherhood status if, as suggested in the section above, a lone mother is defined as a woman who does not live with a partner or spouse and who is the main caregiver for a child under the age of 18. Perceived moral hierarchies associated with different subgroups of lone mothers reflect ideological positions about gender, sexuality and family (May, 2010).

Amoateng et al. (2007) identify four main household types in South Africa: single person, nuclear (household head, spouse and children), extended (nuclear family plus other relatives) and complex households (containing members that are not related to the household head). The percentages of people living in each type in 2011, using GHS data, are 5%, 35%, 57% and 3% respectively (Statistics South Africa, 2012b: 10). In theory, a lone mother may be found in any of these household types.

A widow with children is an archetypal type of lone mother. Statistics South Africa defines a widow as 'a woman whose husband has died and who has not married again' (Statistics South Africa, 2012a: 21). A South African study on resilience in 'single-parent families' focuses only on parents who have been widowed and are not in a relationship (Greeff and Ritman, 2005). This group tends to rank highest in the 'moral hierarchy' of lone mothers (Ntshongwana, 2010) and – unlike many of the other types of lone mother – fault is less likely to be attributed to the woman for her status. In countries with more comprehensive social security provision than South Africa such favour has often been translated to better social security provision for widows than other groups of lone mothers (Kiernan et al., 1998).

Lone mothers may also comprise women who have had a child with a partner or spouse but subsequently become separated or divorced, or less formally as a result of having abandoned or been abandoned by the partner or spouse. These women are sometimes regarded as at fault due to their 'failure to retain' the father of the child (Ntshongwana, 2010).

Some lone mothers may never have cohabited with a partner or spouse.⁶ Such women, especially if they are young are often positioned at the other end of the moral hierarchy than widows. There is an ongoing popular debate in South Africa about whether young women are becoming pregnant in order to gain access to the Child Support Grant (CSG). Although Makiwane et al. (2006) have demonstrated that teenage pregnancies are not on the rise, it is a prominent theme in the press that the numbers are increasing and that the CSG provides young women with a 'perverse incentive' to become pregnant. The media focuses on low income lone mothers but not on high income lone mothers.

Another route to lone motherhood includes the (formal or informal) adoption or fostering of a child whilst not in a cohabiting relationship. The broad working definition of lone motherhood that we are moving towards (see next section) will include women who are

⁶ Table A1 in Annex 2 shows that 63% of the women that we identify in the GHS as lone mothers living with their children, are 'single and have never married or lived together with someone before'.

living with and caring for children other than their own, e.g. aunts and grandmothers⁷ of children who - if not cohabiting with a partner or spouse - will be captured as 'de facto' lone mothers.

The structure of families cannot be ascribed to personal choice alone, but also reflects complex historical and societal dynamics including legacies of apartheid and colonialism, patterns of migration and urbanisation, high levels of poverty, unemployment, ill-health (including the HIV/AIDS pandemic) and premature mortality, and changing cultural norms and household structures (e.g. Amoateng et al., 2007; Bak, 2008; Moore, 2013; Pirouz, 2005; Posel and van der Stoep, 2008; Russell, 2003a and 2003b).

So for example, family structures have been extensively influenced by the migrant labour system which as Posel writes 'cannot be explained outside of the context of forced labour, racial segregation and alienation of land' (Posel, 2001b p168). Urban-bound migration led to an absence of black African men residing permanently in rural areas as they dominated the migratory labour system. Influx control regulations prohibited permanent settlement of many African families in urban areas and so promoted patterns of migration that were circular or temporary (Posel and van der Stoep, 2008). Unaccompanied formal male labour migration shaped the social practices and material basis of matrimony and household formation for much of the twentieth century. However rising unemployment amongst unskilled Africans since the 1970s served to erode the material basis of the conjugal contract leading to either the postponement or complete avoidance of marriage among black Africans. More recently, Posel et al. (2011) suggest that the unaffordability of *lobola* contributes to the reduction in marriage rates among African women. In addition to declining marriage rates, the rates of co-habiting partnerships have also fallen over time (Hall and Posel, 2012). This contributes to dynamics such as female-headed households, out of wedlock births and unstable and fluid household composition, and is also reflected in demographic evidence of household 'unbundling', resulting in larger numbers of households but with declines in average household size (Pillay, 2008).

Internal migration is still extensive and female labour migration is on the increase (Posel and Casale, 2006). Often, however, women with children do not migrate together as explained here: 'Although mothers can now move permanently with their families to places of employment, there are a number of reasons why they may be choosing to migrate without their children. The precarious nature of employment, a higher cost of living [including unaffordable childcare], and the accessibility and quality of accommodation at places of employment would discourage migration with children [...] At the same time, extended family structures in households of origin may provide care and support of children, making it possible for women to leave their children "behind"' (Posel and van der Stoep, 2008: 6). Lone mothers therefore often have to confront the invidious choice of living with their children or finding paid work. Indeed in their review of motherhood and co-residence in South Africa, Posel and van der Stoep (2008) found that mothers who were not-co-resident with their children were more likely to be in employment than mothers who were co-resident. This invidious choice serves to undermine one of the articles in the *African Charter on the Rights and Welfare of the Child*: 'Every child shall be entitled to the enjoyment of

⁷ Households with a 'missing generation' are referred to as 'skip-generation' households by Statistics South Africa (e.g. Statistics South Africa, 2012b).

parental care and protection and shall, whenever possible, have the right to reside with his or her parents. No child shall be separated from his parents against his will, except when a judicial authority determines in accordance with the appropriate law, that such separation is in the best interest of the child.' (Organisation of African Unity, 1999: Article 19.1)

There is also a growing body of work on the migratory patterns of children (e.g. Hall and Posel, 2012; Madhavan *et al.*, 2012), which serves to further shed light on the fluid household arrangements that exist.

The combined impact of these and other factors means that the nuclear family (containing two generations, co-resident parents and biological children) is most certainly not the local norm (Budlender, 2010). Social mores concerning fertility, descent and family structure are complex and Russell has argued that African households are not nuclear, and that with rising affluence and influence of Western modernity, African households are additionally not becoming more nuclear (Russell, 2003a).

Statistics South Africa reported recently that only a third of South African children consistently lived with both their biological parents, almost a quarter (24%) lived with neither of their biological parents, almost two-fifths (39%) lived with their mothers, and 4% lived with their fathers. Of the children who lived with neither of their biological parents, 59% still had both their parents alive, while only 16% were double orphans (Statistics South Africa, 2012b). It has been well documented that child-headed households are very small in number (Meintjes *et al.*, 2009)⁸ and thus people who are not biological parents are playing a significant role in raising children. So for example, in their analysis of women living with children who are not their biological children (in which they demonstrate that the labour market activity of women who are not biological mothers yet live with other children in the household is negatively and significantly related to labour force participation) Posel and van der Stoep suggest that this adverse impact on participation in the labour market means that 'the "effects" of motherhood are not borne by mothers alone' (Posel and van der Stoep, 2008: 18).

Finally, there are also examples of lone motherhood being hidden. In some instances in black African families when a young woman has a child, the child is assimilated into the grandmother's family as a sibling to the mother and the child is given the mother's surname. The 'protected' young lone mothers are seen to have had an 'accident', coined a 'fall' and are 'helped up' by their parents or extended family members so as to continue with their lives as 'normally' as possible, in particular attending to their education (Ntshongwana, 2010). In many such occasions the grandmother would become the primary caregiver while the young mother continued with her education if she was still undergoing secondary schooling.

Whether hidden or not, notions of lone motherhood remain value laden and gender biased. Very little focus, negative or positive, has been placed on non-resident fathers. Although non-resident fathers are required to pay maintenance (Maintenance Act, 1998) this is not

⁸ See also <http://www.childrencount.ci.org.za/indicator.php?id=1&indicator=17> .

tightly enforced and in any event due to the high unemployment rates a considerable number of non-resident fathers are unable to financially support their children.⁹

⁹ According to South Africa's Maintenance Act parents are required to give their children a 'proper living and upbringing' with 'the provision of food, clothing, accommodation, medical care and education. The parents' respective shares of such obligation are apportioned between them according to their respective means, and the duty exists, irrespective of whether a child is born in or out of wedlock or is born of a first or subsequent marriage' (Republic of South Africa, 1998:14).

4 Towards a working definition of lone mothers in South Africa

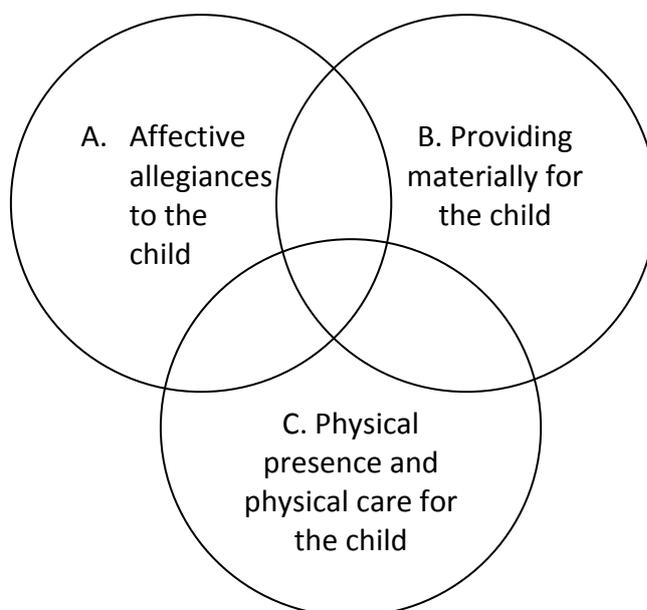
4.1 A model of the relational roles of a lone mother to a child

One way of approaching the definition of lone motherhood is to start with the distinguishing feature that there is a child involved and that the woman plays a role in relation to that child. If we consider lone motherhood in relation to the provision of care for that child, a lone mother's roles (as for any parent or caregiver) could be divided very crudely and in no order into three groups: (A) affective allegiances to the child or 'wishing the best for the child'; (B) providing materially (i.e. financially and in-kind) for the child; and (C) physical presence with and physical care of the child.

Such an approach is different from the more prominent focus on the child as the unit of analysis (for a review of recent child-focussed research on poverty and deprivation see Barnes et al., 2011) as the lone mother is here 'centre-stage' and there are various ways in which she may have a role in relation to a child including, as we have seen in the previous section, living away from the child in order to earn a living.

There are many combinations of these three roles and the prominence and adequacy of the roles may change over time (e.g. varying extents of wider family, community and state provision of support and changing employment, household and financial situations).

Figure 1: Relational roles of a lone mother to a child



Examples of combinations of the relational roles include:

‘ABC’: A lone mother might play all three roles.

‘AC’: A lone mother might live with her child and have affective allegiances to the child but not provide materially for the child (e.g. she has no income, and the financial support is provided by another member of the household or by the estranged father in the form of child maintenance payments).

‘AB’: A lone mother may have affective allegiances to the child and provide materially for the child but not live with or care for the child (e.g. in order to get employment, she works away from her child and remits funds to the person who cares for the child in practice).

‘BC’: A lone mother may live with the child and provide materially for the child but not have affective allegiances to the child (e.g. other children in the household may be prioritised for whatever reason¹⁰, or the mother for varying reasons may be unable to care for the child).

We are not suggesting that lone mothers live in an isolated bubble, nor that a family’s circumstances or arrangements never change. In practice, many people may have affective allegiances to the child, provide materially for her, and provide her with physical presence and care, and the individuals who provide these may change over time. Rather, our interest is on the policy question of whether social security could potentially play a role in respecting and protecting dignity amongst low income female primary caregivers who have to balance the competing needs and expectations around paid work and unpaid care.

The sections above attempt to set the context for the following sub-section which describes in more detail the group of interest for this project.

4.2 Honing our focus for the project

Income

The issue of dignity is relevant for all people regardless of their income status. However, because the prior study had raised such a strong message about the detrimental impact of poverty on people’s sense of dignity we wanted to narrow the focus of the study to only include people living on a low income. For the purposes of this study we selected people whose income falls below the means test of the CSG (currently¹¹ R33,600 per year for a single person).

Age

The study could have considered low income people of all ages. However, a group of particular interest for our purposes in relation to social assistance provision comprise those of working age, as there is no income maintenance provision for people in this age group who are not disabled. Low income people aged 60 and over are eligible for the Old Age Grant and are not expected to seek work. However, people below this age threshold are

¹⁰ For an example see du Toit and Neves (2009) p19.

¹¹ As at 31 March 2013.

expected to obtain employment. South Africa has very high levels of unemployment and so this expectation is often impossible to meet in practice. Although unemployment is often recognised as being a structural issue, there is no structural provision of income maintenance for people of working age who are unemployed (other than the Unemployment Insurance Fund which is time-limited and requires one to have made prior contributions within the formal sector).

Caregiver status

Having identified that we are interested in low income people of working age, we additionally wanted to narrow the focus to include people with dependent children aged 0-17 inclusive. Caregivers – whether biological parents or not – have the burden of not only meeting their own financial needs but also the needs of the children whom they are raising. Although there is no social assistance for low income adults with children, government does provide support for their children in the form of the means-tested CSG. In addition, although the Foster Child Grant (FCG) is not means-tested, low income recipients of FCG would also fall within our group of interest.

Gender

The study – like the earlier project for DSD - could have considered men and women. However, we were keen to explore the issue of dignity and social security with women as they most commonly have primary responsibility for raising children.

Marital status

All low income parents face great challenges in trying to make ends meet, regardless of their marital status. However, we wanted to narrow the focus to include low income working age mothers who are, for whatever reason, raising their child without a *partner* present. This would include women who are single never married never having lived with a partner, women who are single never married separated from a partner, and women who are widowed, separated and divorced having been married. We decided to broaden the definition to additionally include women who, though married or with a partner, are mainly living apart from their husband or partner (e.g. due to the other person being a migrant labourer, sick, imprisoned, absent for other reasons).

Household structure

Having said that such women are balancing these two roles (caregiver, breadwinner) without a co-resident partner or spouse, they may live in a range of household structures. In addition to the child or children they may live with people of an older generation, with siblings, with other adults, or on their own. It will be part of the project to explore this issue. Household structure is not a determining feature of our working definition of lone motherhood.

Summary

So far, then, we have narrowed the focus of the project to include a diverse group of people who are:

- 1) Female
- 2) A biological or foster or de facto caregiver of one or more children under the age of 18
- 3) Not co-resident with a husband or partner
- 4) Aged 16-59 inclusive
- 5) Low income (below CSG means test)

Only the first three criteria relate to lone motherhood. The latter two criteria are not distinguishing features of lone motherhood per se, as lone mothers could be of any age and any income status.

To what extent does this working definition map onto Figure 1? Using a definition such as this we would capture groups 'ABC', 'AC' and 'BC'. The 'AB' group is harder to capture in survey data as the mothers are not living with the children and therefore will not be co-resident with the children. In the focus groups some women refer to previous occasions when they worked away from their children as domestic workers and so this enables insights to be obtained from the 'AB' group.

5 Selecting lone mothers for the focus groups

On the basis of the points above, we devised a multi-stage process to recruit lone mothers for the focus groups. Annex 1 contains the demographic questionnaire for the focus group participants for this study, which was filled in at the time of recruitment. The first three questions serve as screening questions.

Income – By recruiting at paypoints on CSG pay-day we know that people are low income.

Gender – By recruiting in person we can identify women. The prospects of sampling women are high as, for example, Williams (2007) and Delany et al. (2008) report that over 90% of caregivers receiving CSG are female.

Marital status – Using the categories shown in Q1 in Annex 1 we ask people their marital status and exclude people who are both (1) married or living as married and (2) living with their husband or partner most of the time.

Age – We then exclude people aged 60 and over.

Caregiver status – In recognition that a number of people may care for the child of the women selected, we then ask if they mainly raise their child/ren alone. Those who say 'yes' are automatically included. Those who say 'no' are also included (unless their answer reveals that they are in fact living with a partner or spouse) and could include for example a woman living with her child but the child is mainly looked after by someone else whilst she works or seeks work.

6 A profile of lone mothers in South Africa using the General Household Survey 2011

The General Household Survey (GHS) 2011 is the latest available survey in a series of annual household surveys carried out by Statistics South Africa since 2002. The GHS is designed to measure living conditions, social development and service delivery in South Africa. Six broad areas are covered: education, health and social development, housing, household access to services and facilities, food security, and agriculture (Statistics South Africa, 2011: 1).

An analysis of the GHS 2011 is used here to build a profile of lone mothers in South Africa. Focusing on key demographic and socio-economic characteristics, the analysis is intended to develop a clearer understanding of the challenges faced by lone mothers. Details of the approach to identifying lone mothers in the data are contained in Annex 2. For the purposes of this analysis, a lone mother is defined as a mother living in the same household as her dependent (aged 0-17 inclusive) biological or non-biological children and not living with a spouse or partner. Linking back to Figure 1, therefore, we could in theory capture women in the diagram that relate to the groups 'ABC', 'AC' and 'BC'. We will not capture the 'AB' women – those who do not live in the same household as their child.¹² This will be a sizeable group, and so the analysis in this section should be regarded as a profile of lone mothers in South Africa who were *living in the same household as their child* at the time of the GHS 2011. Furthermore, as a number of iterative assumptions had to be made (Annex 2) the figures should be regarded as *estimates* of the number of lone mothers living with their children.

Before moving on to the profile of lone mothers using the GHS, a further note on the definition process may be instructive. The South African Social Attitudes Survey (SASAS) can help to further elaborate on the methods for identifying lone mothers. SASAS 2007 asks the respondents whether they are a 'single parent'. Other questions in SASAS 2007 enable us to operationalize our working definition outlined in the previous section¹³, and therefore enable a comparison of a self-defined 'single parent' status with our working definition. Analysis of SASAS 2007 shows that of those women aged 16-59 who define themselves as a single parent, 92%¹⁴ are captured by our working definition. Conversely, 81% of those included using our working definition also define themselves as a single parent. This analysis only includes lone mothers who state that they have a child or children living with them at home. Analysis of SASAS 2007 also reveals that 5% of those women aged 16-59 who define themselves as a single parent do not have any children living with them at home, thus perhaps shedding some light on the group of 'AB' women (i.e. those who do not live in the same household as their child).

¹² This means that in theory there could be two lone mothers per child (e.g. an unmarried non-biological mother living with the child whilst the biological mother works elsewhere). This is not problematic for our purposes and in any event there will not be any double-counting in this chapter as we are only capturing women living with dependent children.

¹³ Namely 'Are you the parent or caregiver of any children under the age of 18?', 'Are you currently living with your husband/wife?', 'Do you live together with a partner?', 'Do you have children living at home with you?' (and gender and age of respondent).

¹⁴ Survey weights were not applied in this analysis of SASAS 2007.

Demographics

Based on our analysis of the GHS 2011 using this broad definition, there are over 5 million lone mothers in South Africa, and of these, the majority (79%) are caring for a biological child.¹⁵ A further 1% of lone mothers (approximately 48,000) are caring for a step or adopted child.¹⁶ Approximately 1 million lone mothers are de facto lone mothers caring alone for a non-biological child (see Annex 2 for more information about how de facto lone mothers are defined).¹⁷

Of the de facto lone mothers, 42% are known from the survey data to be the grandmother of the child. This amounts to over 425,000 grandmothers (who are not cohabiting with a partner or spouse) caring for grandchildren.¹⁸ The actual figure may be higher than this as grandmother status can only be determined where the lone mother is the head of the household and the child they care for is the 'grandchild/great grandchild' of the head of household.¹⁹

Table 1 shows the proportion of mothers across three age categories. The vast majority of mothers are aged 16-59 years inclusive²⁰ and there is very little difference between lone mothers and non-lone mothers in the age breakdown.

Table 1: Mothers by age group

Age group	All mothers (%)	Lone mothers (%)	Non-lone mothers (%)
Under 16	1	1	0*
16-59	95	93	97
60 and over	4	5	3
Total	100	100	100
N	8,549,605	5,027,907	3,521,698

* Actually 0.01

Table 1 also reveals that there are more lone mothers than non-lone mothers: based on this definition, 59% of all mothers in South Africa are lone mothers.²¹

¹⁵ This may be in addition to non-biological children, but the status as a biological mother is prioritised.

¹⁶ In total 1.6% of lone mothers are mothers of a step or adopted child. Approximately two fifths of these are also a biological mother to another child (and therefore identified as a biological mother).

¹⁷ In addition, there are approximately 500,000 lone fathers (74% of the total number of male carers identified in cases where a female carer could not be identified). Of these lone fathers, 74% are biological fathers, 2% are step/adoptive fathers and 24% are de facto fathers.

¹⁸ These non-cohabiting grandmothers are most prominent in provinces containing rural former homelands: 26% of them live in KwaZulu-Natal, 20% in the Eastern Cape, 16% in Limpopo, 11% in Gauteng, 8% in Mpumalanga, 7% in North West, 6% in Free State, 4% in the Western Cape and 2% in the Northern Cape.

¹⁹ See also Annex 2 for details of how grandmother carers may be undercounted in the process of identifying the main carer.

²⁰ This differs from the definition of working age used in official statistics which is 15 to 64 years inclusive (e.g. Statistics South Africa, 2008). Our age bracket of 16-59 years inclusive takes into account, at the lower end, the age at which children should have completed compulsory schooling (i.e. 15 years), and at the upper end, the age at which adults become eligible for the state Old Age Grant (i.e. 60 years for men and women from 2010).

²¹ In terms of head of household analysis, 63% of all households were headed by a male and 38% were headed by a female. In households in which there is one or more child, 54% were headed by a male and 46% were

The 16-59 age category is of course quite wide in terms of ages captured, and will partly be influenced by the prioritisation of working age women in the identification of the main female carer (see Annex 2). Table 2 breaks down this age category into five sub-groups. Approximately 65% of lone mothers are aged between 20 and 39, while for non-lone mothers almost 70% are aged between 30 and 49. This pattern is reflected in the average age: the mean age for lone mothers is 37 and the median is 35, while the mean and median ages for non-lone mothers are both 40.

Table 2: Lone and non-lone mothers aged 16-59 by age subgroup

Age group	Lone mothers (%)	Non-lone mothers (%)
>=16 & <=19	5	1
>=20 & <=29	34	18
>=30 & <=39	31	39
>=40 & <=49	18	28
>=50 & <=59	11	14
Total	100	100
N	4,696,933	3,412,939

When lone mothers are broken down into biological, step/adoptive, and de facto status (as defined above and in Annex 2) there is a substantial difference in the mean and median ages: 34 and 33 respectively for biological mothers; 46 and 45 respectively for step/adopting lone mothers; and 47 and 51 respectively for de facto lone mothers.

In terms of the presence of other adults in the household, on average lone mothers live with 2.19 other adults (people aged 18 and over), which is slightly higher than the figure for non-lone mothers (2.01) and the average for all mothers (2.12). The average number of children in lone mother households is 2.95, again slightly higher than the figure for non-lone mother households (2.28) and all mothers (2.68).

Table 3 shows the racial breakdown of lone mothers as a whole and across the three age categories. Over 90% of all lone mothers in South Africa are black African. The remainder are mainly coloured, with only a small percentage of white or Indian/Asian lone mothers. A much higher proportion of lone mothers than non-lone mothers are black African (91% and 70% respectively). Indeed, given that only 82% of all mothers are black African, lone mothers are disproportionately represented amongst this population group. There is little difference between the age groups in the racial breakdown: a slightly higher proportion of

headed by a female. As the number of children in the household increases, the proportion of households headed by a female increases incrementally, up to 7 children: 42% of households containing 1 child have a female household head, compared with 43% of households with 2 children, 50% of households with 3 children, 55% of households with 4 children, 57% of households with 5 children, 59% of households with 6 children, and 71% of households with 7 children (after this point the incremental relationship ceases, with 57% of households containing 8 or more children having a female household head). Forty-seven percent of the women identified here as lone mothers were also the head of household, whereas only 5% of non-lone mothers were household heads.

under 16 lone mothers are white than in the other age groups, while a slightly higher proportion of lone mothers aged 16-59 are coloured than in the other age groups.

Table 3: Lone mothers by population group

Population group	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Black African	91	90	91	93	70
Coloured	7	4	7	4	13
Indian/Asian	1	0	1	1	5
White	2	6	2	3	12
Total	100	100	100	100	100
N	5,027,907	73,395	4,696,933	257,579	3,521,698

Geographical location

Table 4 shows the proportion of lone mothers in each of the provinces. KwaZulu-Natal has the highest proportion of lone mothers (23%), while Gauteng has the highest proportion of non-lone mothers (26%). The highest proportion of younger lone mothers is in Gauteng however (24%), whereas the highest proportion of older lone mothers is in KwaZulu-Natal, followed closely by the Eastern Cape (both 25%). As demonstrated in the section just above this one, both KwaZulu-Natal and the Eastern Cape contain large former homeland areas where 'skip-generation' households (containing a grandmother and grandchildren) are particularly prevalent.

Table 4: Lone mothers by province

Province	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Western Cape	7	12	8	3	15
Eastern Cape	16	9	15	25	10
Northern Cape	2	2	2	2	2
Free State	6	6	6	6	6
KwaZulu-Natal	23	18	23	25	17
North West	7	4	8	6	7
Gauteng	16	24	16	13	26
Mpumalanga	8	9	8	5	7
Limpopo	14	17	14	15	9
Total	100	100	100	100	100
N	5,027,907	73,395	4,696,933	257,579	3,521,698

In most provinces lone mothers outnumber non-lone mothers (Table 5). So for example, in the Eastern Cape and Limpopo 69% of all mothers are lone mothers. The exceptions are the

Western Cape and Gauteng where the proportion of lone mothers is lower than the proportion of non-lone mothers at 41% and 47% respectively.

Table 5: Lone mothers and non-lone mothers by province

Province	Lone mothers (%)	Non-lone mothers (%)
Western Cape	41	59
Eastern Cape	69	31
Northern Cape	60	40
Free State	57	43
KwaZulu-Natal	66	34
North West	60	40
Gauteng	47	53
Mpumalanga	62	38
Limpopo	69	31
South Africa	59	41

The proportion of lone mothers in urban formal areas is lower than the proportion of non-lone mothers (43% and 63% respectively). Conversely, a higher proportion of lone mothers live in areas defined as 'tribal' (i.e. former homeland communal areas) than non-lone mothers (48% and 25% respectively). Half the young lone mothers live in urban formal areas, a higher percentage than for the other age groups. Over 60% of older lone mothers live in 'tribal' areas, compared to less than 50% of young and 16-59 year old lone mothers.

Table 6: Lone mothers and non-lone mothers by area type

Geography type	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Urban formal	43	50	43	31	63
Urban informal	7	3	7	6	8
Tribal areas	48	44	47	62	25
Rural formal	3	3	3	1	5
Total	100	100	100	100	100
N	5,027,907	73,395	4,696,933	257,579	3,521,698

Education

Table 7 shows the highest educational level successfully completed by lone mothers. The proportion of lone mothers aged 16-59 who have completed post compulsory education (54%) is much higher than the proportion of older lone mothers (7%). Conversely, the proportion of older lone mothers who do not have any schooling is much higher (39%) than the proportion of lone mothers aged 16-59 (5%). These patterns reflect the discriminatory apartheid education system which would have been in place during their schooling. Post compulsory education is usually completed after the age of 15, which explains the low post

compulsory completion rate for the under 16 group. Although a surprisingly high 13% of lone mothers aged under 16 reported that they had had no schooling, over 90% of this group reported elsewhere in the survey that they were currently attending school. The finding that 65% of lone mothers under 16 had completed primary (but had not completed any secondary) level grades may also in part reflect repeated years of schooling.

When all lone mothers are compared to non-lone mothers, the main difference is in the proportion with higher education. A higher proportion of non-lone mothers (14%) than lone mothers (6%) have completed some form of higher education.

Table 7: Lone mothers and non-lone mothers by highest level of education successfully completed

Education level	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
No schooling	7	13	5	39	5
Primary	19	65	17	36	18
Secondary	17	17	17	13	14
Post compulsory	51	2	54	7	48
Higher	6	0	7	2	14
Missing	1	2	1	1	1
Total	100	100	100	100	100
N	5,027,907	73,395	4,696,933	257,579	3,521,698

Levels of literacy²² follow a similar pattern with regard to differences between lone mothers of different ages (Table 8). A higher proportion of older lone mothers are illiterate (41%) compared to younger lone mothers (20%) and lone mothers aged 16-59 (6%).

Table 8: Lone mothers by literacy

Literacy	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Literate	91	79	93	55	93
Illiterate	8	20	6	41	6
Missing	2	1	1	4	1
Total	100	100	100	100	100
N	5,027,907	73,395	4,696,933	257,579	3,521,698

Employment

Table 9 shows the employment status of lone mothers with regard to work activity in the last week, for those aged 16-59.²³ Lone mothers have a similar employment profile to all

²² Illiteracy is defined as having a lot of difficulty or being unable to read (e.g. newspapers, magazines, religious books) or write a letter in at least one language.

women in this age group: a little over one third worked in the past week (or had a job to return to), while just under two thirds did not. A higher proportion of non-lone mothers of aged 16-59 (45%) worked in the past week (or had a job to return to).

Table 9: Lone mothers by work activity in the past week

Employment status	Lone mothers aged 16-59 (%)	Non-lone mothers aged 16-59 (%)	All women aged 16-59 (%)
Work	36	45	37
No work	63	54	62
Missing	1	1	1
Total	100	100	100
N	4,696,933	3,412,939	15,495,677

Health

There is little difference between lone mothers and non-lone mothers with regard to suffering from illness or injury over the past month (Table 10). However, a higher proportion of lone mothers aged 60 and over suffered illness or injury than lone mothers in the younger age bands.

Table 10: Lone mothers by health status over the past month

Health status	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Suffer illness or injury	10	5	9	20	12
N	494,087	4,030	438,509	51,548	418,897

Housing

The majority (69%) of lone mothers live in a dwelling/house or brick/concrete block structure on a separate stand or yard or on farm. This is a similar proportion to non-lone mothers (71%). However, a much higher proportion of lone mothers than non-lone mothers live in a traditional dwelling/hut/structure made of traditional materials (17% and 8% respectively). This corresponds with the higher proportion of lone mothers in areas defined as 'tribal'. A relatively small proportion of both lone mothers and non-lone mothers live in informal dwellings.

Key differences between lone mothers of different ages are that a higher proportion of older lone mothers live in traditional dwellings (28% compared to 16% for 16-59s and under 16s). Also, a higher proportion of lone mothers who are under 16 and 16-59 live in informal dwellings (7-8% compared) than for older lone mothers (3%). A higher proportion of

²³ This includes working for a wage, salary, commission or payment in kind, or running any kind of business big or small, even for 1 hour per week, or a job or business to return to.

younger lone mothers live in a flat or apartment (10% compared to less than 1% for lone mothers aged 16-59 and 60 and over).

Table 11: Lone mothers by dwelling type

Dwelling type	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Dwelling/house or brick/concrete block structure on a separate stand or yard or on farm	69	59	70	64	71
Traditional dwelling/hut/structure made of traditional materials	17	16	16	28	8
Flat or apartment in a block of flats	2	5	2	0*	3
Town house (semi-detached house in complex)	0*	10	0*	0*	1
Dwelling/house/flat/room in backyard	1	0*	1	1	2
Informal dwelling/shack in backyard	2	2	2	1	4
Informal dwelling/shack not in backyard, e.g. in an informal/squatter settlement or on farm	5	6	5	2	6
Other	2	1	1	2	4
Missing	2	1	3	2	1
Total	100	100	100	100	100
N	5,027,907	73,395	4,696,933	257,579	3,521,698

* Less than 0.5

Table 12 shows the amenities available in the households in which lone mothers reside. Over half of lone mothers do not have access to a flush toilet, and almost two fifths do not have piped water in the dwelling or yard. These figures are much higher than for non-lone mothers. Older lone mothers experience greater deprivation of these household amenities, with almost two thirds not having access to a flush toilet and almost half not having piped water in the dwelling or yard.

The proportion of lone mothers living in a household without mains electricity, or without a telephone is not substantially higher than the proportion of non-lone mothers. Similarly, the proportion of lone mothers living in an overcrowded household is only slightly higher than

the proportion of non-lone mothers. However, there are differences between age groups for all three indicators. For example, the proportion of older lone mothers living in a household without a telephone is over three times higher than the proportion of lone mothers aged less than 16 and 16-59, while the proportion of lone mothers aged 16-59 living in an overcrowded household is almost twice that of older lone mothers and over three times that of younger lone mothers.

These findings again correspond with findings on the geographical location of lone mothers. A higher proportion of older lone mothers live in 'tribal' areas, which in turn suffer from poor provision of infrastructural services. It is unsurprising, therefore, that a higher proportion of older lone mothers than other lone mothers should lack the different household amenities.

Table 12: Lone mothers by household amenities

Household amenity	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
No piped water in dwelling or yard	38	32	38	48	23
No mains electricity supply to the house	15	16	15	18	12
No access to flush toilet	53	50	52	65	31
No telephone (landline or cellphone)	6	5	5	18	4
Overcrowded household*	19	6	20	11	17

*A household with 2 or more people per room

Poverty

In the GHS, receipt of a grant is recorded against those for whom the grant is intended, rather than those who actually receive it and so receipt of the CSG is recorded against the child rather than the primary caregiver.

Nevertheless, it is possible to examine grant receipt in the households in which lone mothers live (Table 13). The vast majority (84%) of lone mothers live in a household where at least one grant is received. For older lone mothers the proportion is 96%, while for younger lone mothers the proportion is much lower at 56%. Over three quarters of lone mothers live in a household where at least one CSG is received. A higher proportion of lone mothers aged 16-59 (78%) than lone mothers under 16 (50%) or older lone mothers (63%) live in CSG households. Conversely, a higher proportion of older lone mothers (90%) live in households where there is an old age grant (OAG) recipient, compared to lone mothers aged 16-59 (25%) and younger lone mothers (8%). Disability grant receipt in the household is higher amongst lone mothers aged 16-59 (12%) than younger and older lone mothers (3%

and 4% respectively)²⁴. Although not shown in the table, 7% of lone mothers live in a household in which Foster Child Grant is received, and this rises to 13% for lone mothers aged 60 and over.

The proportion of non-lone mothers living in a household where one or more grants are received is much lower, both for any grant (56%) and for each grant type.

Table 13: Lone mothers by grant receipt in household

Grant type	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Any grant	84	56	84	96	56
Old age grant	28	8	25	90	13
Disability grant	11	3	12	4	8
Child support grant	76	50	78	63	50

Other indicators of low income that can be measured in the GHS include food poverty, income poverty and material deprivation.

Table 14 shows three different measures of food poverty. A higher proportion of lone mothers than non-lone mothers live in a household that experienced these types of food poverty. So for example, 30% of lone mothers live in a household that ran out of money to buy food in the last year, while this applied to 21% of non-lone mothers. A higher proportion of lone mothers than non-lone mothers also reported that the household had insufficient food 'always', 'often' or 'sometimes' (for adults and children separately).

A lower proportion of younger lone mothers than other groups of lone mothers experienced the different types of food poverty. This is possibly because they are mainly not lone mothers living by themselves, but are instead living in households where there are other adult household members and different income streams.

Table 14: Lone mothers by food poverty

Food poverty in last 12 months	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Ran out of money to buy food	30	17	31	26	21
Insufficient food for adults (always/often/ sometimes)	15	8	15	14	10
Insufficient food for children (always/ often/sometimes)	14	9	14	12	9

²⁴ The Disability Grant is paid to disabled people aged 18-59 only.

The Hoogeveen and Özler (2006) lower bound and upper bound poverty lines have been used regularly to measure income poverty in South Africa in the absence of an official poverty line. The poverty lines are R604 and R1,113 per capita per month respectively (2011 prices). Two thirds of lone mothers are poor on the lower bound measure, and over four fifths are poor on the upper bound measure. A higher proportion of older lone mothers (90%) are poor on the upper bound compared to lone mothers under 16 and 16-59. The poverty rates using each of the poverty lines are lowest for lone mothers under 16. The poverty rates for non-lone mothers are lower than for any of the lone mother age groups.

Table 15: Lone mothers by income poverty

	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
Poor on lower bound	67	50	67	63	37
Poor on upper bound	82	63	82	90	53

Poverty lines of R604 (lower bound) and R1,113 (upper bound) in 2011 prices

Finally, two indicators of material deprivation can be measured in the GHS: not owning a refrigerator and not owning a TV or radio. As with the previous poverty measures, the proportion of non-lone mothers lacking the items is lower than the proportion of lone mothers (Table 16). Thus, 24% of lone mothers live in a household that does not have a refrigerator, compared to 15% of non-lone mothers, and 10% of lone mothers live in a household that does not have a TV or radio, compared to 5% of non-lone mothers. A lower proportion of lone mothers aged 16-59 lacked these material items than the younger and older lone mothers.

Table 16: Lone mothers by material deprivation

	All lone mothers (%)	Lone mothers under 16 (%)	Lone mothers aged 16-59 (%)	Lone mothers aged 60 and over (%)	Non-lone mothers (%)
No refrigerator	24	30	23	30	15
No TV or radio	10	12	10	17	5

Annex 1 Screening questionnaire for focus group participants

To be completed for each focus group participant

What is your current marital status?

	Single, never been married (<input checked="" type="checkbox"/>)
	Separated (<input checked="" type="checkbox"/>)
	Divorced (<input checked="" type="checkbox"/>)
	Widowed (<input checked="" type="checkbox"/>)
	Married – husband lives with me most or all of the time (X)
	Married – husband lives somewhere else (not with me) most or all of the time (<input checked="" type="checkbox"/>)
	Living as married– partner lives with me most or all of the time (X)
	Living as married – partner lives somewhere else (not with me) most or all of the time (<input checked="" type="checkbox"/>)

Are you under 60?

	Yes (<input checked="" type="checkbox"/>)
	No (X)

Are you mainly raising a child/children alone?

	Yes
	No I have help from someone else – please specify

How many children aged under 17 live with you? _____

What is your home language?

	Xhosa
	Afrikaans
	English
	Other – please specify

What is your employment status?

	Unemployed
	Employed – for how many hours a week? _____
	Other – please specify

What is your name? _____

FG Number _____

Annex 2 Identifying lone mothers in the GHS 2011

The GHS series is available to freely download from the Stats SA website (<http://interactive.statssa.gov.za:8282/webview/>). The data are available as a person-level file and as a household-level file which can be linked together using the unique household identifier record (Statistics South Africa, 2011:4). The analysis was carried out on the combined household-level and person-level GHS 2011 dataset containing 93,434 individuals. The sampling weights are constructed so that the data can be weighted to represent the entire civilian population of South Africa (Statistics South Africa, 2011:6). According to the GHS 2011 population weights the size of the population in South Africa is 50.3 million.

The GHS does not contain a variable to indicate the lone mothers in the dataset, nor does it contain a variable to indicate a child's main carer. In order to identify lone mothers we first had to identify a child's main female carer (i.e. biological mother or de facto mother) and then identify which of the mothers were caring for their children alone.

It is important to note that the GHS can only be used to identify lone mothers who are resident with their child. It is possible to determine from the data those cases where a mother is absent from the household in which her child lives (using the question which asks whether the individual's biological mother is part of the household). However, it is not possible to establish whether the mother living elsewhere is a lone mother or living with a spouse or partner.

Please note that all figures in this annex relate to the unweighted sample.

Identifying main female carers

The GHS helpfully identifies some of the relationships between the household members, for example biological parents, spouses/partners and all relatives of the household head. For this analysis we were able to identify mothers and fathers living with their biological children and any stepchildren or adopted children of the head of the household. Beyond this it becomes more complicated to identify a child's main carer with the available relationship information.

When there is no existing indication of the child's main carer (i.e. they do not have a biological mother or father and they are not the step or adopted child of the household head) we followed a modified version of the rules used by CASASP for identifying caregivers in the Census for analysis of take up of CSG (Noble et al., 2005)²⁵.

We assigned children a 'main female carer' in the following order of preference:

1. Biological mother in the household
2. Step or adoptive mother in household (only possible to identify where the step mother is also the head of the household)

²⁵ See Annex 2 of Noble et al. (2005). This procedure is in turn a modification of a routine developed by Ingrid Woolard for the Department of Social Development.

3. Oldest working age (>15 <60) female in the household
4. Youngest female in the household aged 60 and over
5. Oldest female in the household aged under 16

Steps 3, 4 and 5 are mediated by the presence of an ‘obvious’ main male carer (i.e. where the child has not been assigned a female carer in steps 1 and 2, and either lives with their biological father or is the stepchild or adopted child of a male head of household, they are not assigned a main female carer).

The mothers identified in step 1 are ‘biological mothers’, the mothers identified in step 2 are ‘step/adoptive mothers’) and the mothers identified in steps 3, 4 and 5 are ‘de facto mothers’.

Following these steps, the vast majority (95%) of the dependent children in the dataset are assigned a female carer. The dependent children in the sample who are not assigned a female carer are mainly those children who live with their biological father or those who are the step child or adopted child of a male household head²⁶. While many of the remaining cases are children living with a male household member who is neither their biological nor step/adoptive father (i.e. a de facto father)²⁷, there are a small number of cases where the child is the oldest in a child headed household (looking after either his/her younger siblings, younger relatives, or own children), or a child living alone. This accounts for just 0.2% of the sample of children.

Of the dependent children assigned a female carer, 71% are the biological mother, 1% are the step/adoptive mother²⁸, and 29% are the de facto mother.

Identifying lone mothers

Once a female carer has been assigned to each dependent child in the dataset this information is used to flag the lone mothers in the sample.

Each lone mother is only counted once based on the order of preference outlined in the steps above. So a lone mother who is caring for a biological child as well as a non-biological child will only be counted once (as a ‘biological lone mother’).

A ‘lone’ test was applied to all of the mothers identified in steps 1 to 5 based on whether or not the mothers were living with a spouse or partner. This was measured by the questions asking whether or not the spouse/partner lives in the household and which household member is the spouse or partner.

Table A1 shows the reported marital status of the lone mothers. Two percent of the women identified as lone mothers reported that they were ‘living together like husband and wife’ (possibly capturing those who live apart due to work or other circumstances and yet regard

²⁶ 70% of these cases are the biological father and 10% are the step/adoptive father.

²⁷ 16% of the sample of children not assigned a female carer. These de facto fathers are identified using similar rules to those employed in the identification of de facto mothers (i.e. oldest working age (>15 <60) male in the household; youngest male in the household aged 60 and over; oldest male in the household aged under 16).

²⁸ Remember that this could only be determined where the child was the step or adopted child of the head of household.

their status as such, and possibly capturing same sex couples). Ten percent reported that they were ‘legally married’ (rather than ‘separated but still legally married’). Again this is likely to mainly capture women whose spouses are migrant workers: in such a situation a mother might report that she is not living with her spouse *and* report that she is married. On balance, it seemed more in line with our inclusive approach to defining lone motherhood to look at whether or not a woman reported living with a spouse or partner and to use this as the ‘lone’ test.

Table A1: Marital status of lone mothers

	Percentage of all lone mothers
Legally married	10
Living together like husband and wife	2
Divorced	3
Separated but still legally married	2
Widowed	15
Single but have lived together with someone as husband and wife before	3
Single and have never married or lived together with someone before	63
Total	100
N	10,354

(unweighted)

The majority (76%) of lone mothers identified using the steps outlined above are the biological mother. Identifying biological lone mothers using the GHS 2011 is a straightforward process using existing variables in the GHS 2011 and so it is reassuring that the majority of lone mothers are identified in step 1 of the process. The identification of step or adoptive lone mothers in step 2 is also unproblematic and uses existing variables. For the lone mothers identified in steps 3, 4 and 5 the following caveats should be borne in mind.

Caveats regarding the identification of de facto mothers in steps 3, 4 and 5

There are two main problems with this method of assigning female carers, which are outlined below.

Problem 1 – overlooking women aged 60 and over

Below is a made up example of a household to illustrate this problem:

Example household 1

Person	Gender	Age	Rela	Step 1	Step 2	Step 3	Step 4	Step 5
1	F	60	1	0	0	0	0	0
2	F	25	3	0	0	0	0	0
3	F	14	7	0	0	2	0	0
4	F	7	7	0	0	2	0	0
5	M	5	7	0	0	2	0	0

In this example we see a female headed household (the female head is in bold – she is person 1) with three children (those aged under 18 – i.e. persons 3, 4 and 5). The children have not been identified in step 1 as living with their biological mother and they are not the stepchild or adopted child of the head (step 2). In step 3 we can see that person 2 (the 25 year old female) has been identified as the oldest working age female in accordance with the steps outlined above, and is therefore the de facto mother of the three dependent children. This could be the case; however, it is perhaps more likely that the 60 year old female is the main female carer and therefore de facto lone mother of the children. In terms of the relationship variable, the 60 year old woman is the grandmother of the 3 children, and the 25 year old is her daughter/step child/adopted child.

Problem 2 – favouring females over males

Below is a second made up example to illustrate a potential problem:

Example household 2

Person	Gender	Age	Rela	Step 1	Step 2	Step 3	Step 4	Step 5
1	M	45	1	0	0	0	0	0
2	F	16	8	0	0	2	0	0
3	F	10	8	0	0	2	0	0
4	M	13	8	0	0	2	0	0

In this example we see a household headed by a 45 year old male (in bold). The other members of the household are relatives of the household head (indicated by the 8 in the ‘Rela’ column), perhaps nieces and nephews. Because there is no mother (step 1) or female head of household (step 2), the oldest working age female – the 16 year old girl - is assigned the carer status for herself and the other two children. In later steps the 16 year old girl will be assigned non-biological mother status and will be identified as a lone mother due to the fact that she is not living with a partner and is of working age.

A less extreme but still possibly problematic case would be if the female in question was a little older and the other children were under 18. This female would be assigned the carer status for herself and the other two children, when it is possible that she is their sibling and the carer is actually the male household head.

It is therefore possible that the process used to identify lone mothers may introduce some bias towards an under estimation of lone mothers who are 60 and over and an over estimation of lone mothers aged 16-59 (example 1); and an under estimation of male caregivers (example 2). However, this bias only affects the process from step 3 onwards. . More significantly, probably, the group of migrant worker women who do not live with their children or partner/spouse if they have one are completely omitted from this analysis of the GHS. Notwithstanding these caveats, we feel that the process of identifying lone mothers using the GHS does help to shed some light on the heterogeneous group of women who live with children but not with a spouse or partner.

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