Racism and Reproduction: The Institutional Effects of Apartheid on the South African Fertility Decline

Tom A Moultrie

Paper presented at the
XXIV IUSSP General Population Conference
Salvador, Brazil
18 - 24 August 2001

Session S19 - Fertility Transition

Contact details:
Tom A Moultrie
Centre for Population Studies
London School of Hygiene & Tropical Medicine
49-51 Bedford Square
WC1B 3DP London, United Kingdom

Phone: +44 (0)20 7299 4750
Fax: +44 (0)20 7299 4637
Email: tom.moultrie@lshtm.ac.uk

PLEASE DO NOT CITE OR QUOTE FROM THIS PAPER WITHOUT PRIOR PERMISSION
They said I should
Learn to speak a little bit of English
Maybe practise birth control
Keep away from controversial politics…

(Johnny Clegg and Savuka, “Third World Child”)

Apartheid, in all its manifestations, impinged on every aspect of the daily lives of African South Africans. Racial segregation, job reservation, restrictions on mobility, and the provision of inferior education and health care were just some of the more obvious aspects of that system. However, recent histories have argued persuasively that apartheid was not a singular, coherent and hegemonic ideology, but an amalgam of policies forged out of conflict and compromise within the white ruling classes. Consequently, serious internal contradictions existed between different policy arenas.

In the demographic realm, contradictions emerged between the desire to reduce African fertility (driven by a fear of White South Africans being “swamped”), and government policies that ensured that Africans were systematically denied access to education, health care and urban residence, all factors that are conducive to fertility change.

Earlier work (Moultrie and Timæus (forthcoming); Moultrie and Timæus (2001)) has presented robust estimates of changes in fertility and birth intervals over the last few decades. These estimates reveal that fertility among African South Africans has declined gradually from more than 5 children per woman in 1970, to approximately 3.5 by 1998. Over this period, however, median birth intervals increased dramatically: from around 30 months in 1970 to in excess of 60 months by 1998. The increase in birth intervals has followed a strongly secular trend, not contingent on the mother’s birth cohort, or her parity. The uptake of modern methods of contraception is largely responsible for this increase. No evidence of parity-specific fertility limitation was found, while the secular trend in birth intervals indicates that contraception was not used to space births - that is, spacing contingent on the age of the woman’s youngest child. These results suggest that there are qualitative differences in the South African fertility decline compared to other developing countries.

This paper investigates the institutional and social context surrounding the South African fertility decline and suggests that the two seemingly disparate trends observed in fertility and women’s birth intervals are a product of the institutional and social effects of apartheid social and population policies.
As Mostert, van Tonder and Hofmeyr (1988) have noted, the Afrikaans term for demography, prior to the widespread adoption of the anglicism demografie, was politiese wiskunde (“political arithmetic”), a term that neatly encapsulates the reflexive relationship that has existed between population and polity in the country. Mostert, van Tonder and Hofmeyr (1988:59) themselves acknowledge the importance of this nexus:

The political arena in South Africa is, to a large extent, dominated by the ‘arithmetic’ of the local population structure, while political decisions have, over the years, exerted a great influence on population trends... In the discussion of demographic trends in South Africa, ‘political arithmetic’ in this country will of necessity occupy a prominent place.

It is on this ‘prominent place’ afforded to the discussion of ‘political arithmetic’ in the context of the apartheid state and the social, political and economic institutions that it engendered that this paper concentrates.

The discourses on population in South Africa, and the evolution of South African population policies, are presented in Section 2 and located within a broader historiographical framework. This material is used to develop the analysis presented in Section 3 of the institutions and the institutional dynamics that have resulted in the particular pattern of fertility decline and birth spacing seen in South Africa through the apartheid era. While Kaufman (1996) has described the nature of South African society from the 1930s onwards with a view to understanding the dynamics of contraceptive provision and adoption in South Africa, this paper’s ambition is slightly more general, and seeks to investigate the evolution of a set of institutions that have had an effect on the pace of the South African fertility decline, and the trend in birth intervals in South Africa since the 1950s.

The paper concludes that apartheid population policies were generally ineffectual in hastening the pace of the South African fertility transition. The conditions of African women’s lives under apartheid created no desire among African women to limit their fertility, although women did adopt modern methods of contraception in order to delay the timing of subsequent births as an economic and social survival strategy. The effects of institutions on African women, and their responses to them, has shaped the patterns of childbearing observed in the country.

---

1 The term itself is not unique to South Africa, and was in common use in Europe in the eighteenth century. However, the overtly politicised connotations of the term are of obviously heightened relevance to South Africa.
This section describes the social, political and economic context that has prevailed in South Africa over the course of the South African fertility decline. Particular emphasis is placed on the manner in which apartheid intellectuals and ideologues constructed the threat of rapid African population growth, state responses to this apparent threat, and the consequent evolution of population policies in South Africa.

2.1 The racialisation of the South African polity: 1900-1948
Matters relating to race, and the establishment and maintenance of White hegemony became increasingly central to South African politics and policies from the turn of the twentieth century. Legassick (1995:44) argues that the “crucial formative period for the policy of segregation” was between 1901 (the final years of the Boer War) and the start of the First World War in 1914. While components of a segregationist framework had been established in the nineteenth century, these did not take on the mantle of a “totality created of ideological rationalisation, economic functions and legislative-administrative policy”. Nevertheless, as Legassick observes, colonial administrators and commentators in the nineteenth century were entirely aware of the comparative rates of population increase in the country, and its likely consequences.

Anthropologists, too, wrote of Africans in terms that were likely to feed the paranoia of the colonial elite about the numbers of Africans vis-à-vis the number of Whites. According to one, native Africans (“Bantu”) were possessed of robust constitutions, looked younger and were likely to live longer than Whites, and were particularly worthy of detailed study because they “outnumber by more than threefold all the other inhabitants of [South Africa] put together, and are still increasing at a marvellous rate” (Theal, 1910:102). An entire subsequent chapter of this book was simply entitled “Rapid Increase of the Bantu in Number”, and devoted itself to an exposition of the supposed causes of rapid population growth among Africans. Commentators and anthropologists such as Theal placed emphasis on the fact that, unlike other colonial situations, native South Africans had suffered no large demographic setback as a result of disease introduced by colonial settlers. Hence, unlike elsewhere, there was no obvious brake being applied to the growth of the indigenous population.

The histories and anthropological accounts of the time thus suggest that an important concern of colonial administrators was one of the numerical dominance of the indigenous inhabitants over the colonial settlers. It is in this context, Beinart and Dubow (1995:2) argue, that segregation emerged from the realisation that although Europeans had “conquered the
indigenous population, [they] could only partially displace it”. It was in this desire for displacement that the racialisation of South African demography took root.

Initially, the displacement of the indigenous population (and, hence, the maintenance of urban areas for Whites, while still retaining a population of African workers) found its expression in the discourses of public health. One such example was the forced removal of Africans to Ndabeni township on the outskirts of Cape Town in March 1901, motivated for primarily by the threat posed by Africans to public health after an outbreak of bubonic plague in the Cape Town docks (Swanson, 1977). While these concerns (what Swanson terms the “sanitation syndrome”) offered a convenient pretext for enforced urban segregation, Maylam (1995) and other historians have argued that this discourse also (and more importantly) provided a vehicle by which White capitalist interests in the cities could be safeguarded and preserved. Through a series of legislative acts in the years after Union in 1910 (including the 1913 Native Land Act which set aside 13 percent of South Africa’s land area for Africans, and the first legislation of race-based job reservation – the “civilised labour policy”), these interests were further entrenched and their continuity assured. With this, the concerns of White South Africans turned increasingly to the ‘political arithmetic’ of the Union, and from the mid-1920s, the racialised discourse of public health was superseded by White fears that they were being overwhelmed by the pace of growth of the African population, fears in keeping with the eugenicist ideas prevalent in Europe and America at the time.

Prior to, and in the aftermath of, the formation of the Pact Government in 1924, JBM Hertzog (elected Prime Minister in 1924) used the rhetoric of swamping to call for the extension and preservation of White privilege, and the continued denial of African rights. In three speeches between May 1924 and May 1926, Hertzog gradually developed his theme that segregation was required because of the numerical superiority of Africans. Initially, his overriding concern was with the government’s “civilised labour policy”, although he did argue that if a solution to the “native question” was delayed much longer, it would be the “death of both European and native” (Hertzog, 1977 (1924):307). By November 1925, the use of the swamping metaphor was in currency: extending the (qualified) franchise that Africans enjoyed in the Cape to other provinces “necessarily must lead to the swamping of the White population, and European civilisation in the Union” (Hertzog, 1977 (1925):21). These ideas were developed in the following months. At a speech in Malmesbury in early 1926, after presenting summary statistics of the racial composition of the Union (Africans then outnumbered Whites by a margin of 3 to 1), he proposed that “numbers take on practical value only when they are raised in connection with matters of importance. Only then do they carry any meaning for us. Therefore, the relationship of the
population numbers of the native relative to the European only are imbued with their full meaning when we can grasp the difference between the two races...” (Hertzog, 1977 (1926):71). Thus, according to Hertzog, the numerical balance between Whites and Africans would be unimportant were it not for the supposed cultural, religious and socio-economic differences between the two race groups.

Hertzog's views set the parameters for the debate on population issues for the next twenty years. Dubow (1995) argues that while the significance of Hertzog's use of rhetoric on swamping has been overlooked and ignored by South African historians of the liberal school, the rhetoric of swamping is more comprehensible when assessed in the context of the eugenicist movement "with its paranoia about civilisation's retrogressive tendencies and its vulnerability in the face of the 'virile' mass of 'barbarians' who were 'flooding' into the cities" (Dubow, 1995:156).

In a series of House of Assembly debates in the early 1930s (cited in Kaufman, 1996:15-7), African population growth was described variously as "disturbing" and as a possible "menace", while the African urban areas themselves were described as "congested with a large, and superfluous, native population". Although the first clinics were set up by private organisations to minister to the family planning needs of non-Whites in the mid-1930s in response to these concerns, Kaufman (1996) points out that far greater emphasis was placed at the time on maintaining or 'improving' the 'quality' of the White population.

While the rhetoric of swamping continued unabated through the twenties and thirties, it was only in the mid-1930s that Afrikaner nationalists first began to consider seriously the possibility of legalised and systematic segregation of the Black and White South African populations (Dubow, 1992). Their victory in the 1948 election gave the Nationalists an opportunity to put some of these ideas into practice.

2.2 Confusion; continuity and change; contradiction and conflict: 1948-1968
Although the apartheid era commenced with the electoral victory of the National Party over the United Party in 1948, many of the foundations for the apartheid state had been laid down gradually over the preceding decades. Thus, while post-1948 South Africa saw the codification and consolidation of many segregationist policy measures, 1948 in many respects did not mark a watershed in the nature of racialised discourses, but rather a formalisation and extension of existing debates and policies that had been in play for some time.

Through a detailed analysis of the evolution of government policies on influx control, Deborah Posel (1991; 1995) has shown that, contrary to many perceptions, apartheid was not a singular, hegemonic or monolithic ideology. In the decade after 1948, she claims, apartheid was an amalgam of policies forged out of conflict and compromise within and between White ruling
classes and other interest groups with consequently serious internal contradictions existing between and within different policy arenas.

The emergence of similar contradictions in the framing of the debate on population issues in South Africa between 1948 and the late 1960s can be identified. On the one hand, driven by the fear of White South Africans being “swamped”, the government desired a rapid reduction in African fertility, while on the other, it pursued policies that ensured that Africans were systematically denied access to education, health care and urban residence, all factors that – according to the modernisation thesis to which the government subscribed – are conducive to fertility change. These tensions were to play themselves out right up to the 1990s. Indeed, it is one of this paper’s central arguments that these tensions (and their institutional consequences) are responsible in a large measure for the pattern of fertility decline observed in South Africa since the 1950s.

What was significant post-1948, however, was the explicit articulation of White fears about the population dynamics that were afoot in the country, and the attempted resolution of these fears within a broader set of government policies. Within two years of the accession to power of the Nationalists, Jan Sadie, one of the most eminent and prolific South African demographers, wrote in the first volume of the *Journal of Racial Affairs*:

Numbers are the essence of democracy, where one person means, or may mean, with certain reservations of course, one vote. The population, its growth or decline, births and deaths, the racial composition, are the basic data of politics. The need for the study of population statistics is obvious.

In South Africa the outstanding problem, dominating all others, is the relative numbers of the different races constituting the Union’s population, and their differential rates of growth. For in the long run numbers must count. (Sadie, 1950:3)

and later in the same article:

For those who profess interest in the preservation of European civilisation in South Africa and who are willing to face the facts, there is only one inference to be drawn from the above conclusions. If the Europeans do not want themselves to be swamped – and it may be in the interest of the Native too that the European are not so swamped, at least during the next fifty or hundred years – the Natives will have to be

---

2 This “journal”, published by the South African Bureau of Racial Affairs (SABRA) has been described by one British academic as consisting “entirely of pseudo-scientific propaganda supporting apartheid” (Billig, 1979). SABRA’s mission was, inter alia, to “influence people who are in positions of responsibility relating to our racial problems and the creation of a good relationship between the different population groups” (South African Bureau of Racial Affairs, 1949b:1). The intellectual core of SABRA at its formation was the faculty of the Department of Bantu Studies at the University of Stellenbosch, who wanted to undertake the “scientific study of our country’s racial questions, the propagation of sound racial policy, and research into racial affairs” (South African Bureau of Racial Affairs, 1949e:3).
put into a position where they are themselves responsible for their well-being. (Sadie, 1950:8)

Sadie also echoed Theal’s sentiments from almost half a century earlier on the absence of a colonialism-precipitated demographic setback for the African population of South Africa:

South Africans did not, and cannot, follow the example set by some of our overseas cousins, who, when colonising new territories, simply eliminated their problem on arrival; actively by means of fire-arms and fire water and, passively, by refraining from preventing the spread amongst the aborigines of disease, which although endemic in the Old World, assumed the character of epidemics in the new. (Sadie, 1950:7)

By 1950, the concept of swamping, the need for the separate development of Africans and the formulation of African population growth as a distinct ‘problem’ requiring a ‘solution’ were firmly embedded in a single discourse of racial politics which became increasingly influential in the formulation of government policy.

Following Sadie’s lead, a dominant view emerged that a decline in African fertility could be brought about by containing Africans on their ‘own’ land, and forcing them to become reliant on their ‘own’ resources, and thus allowing ecological and Malthusian pressures to run their course in reducing African population growth. Implicit in this notion, of course, was that – with self-governance being granted to the bantustans – the effect on White South Africans of high rates of African population growth in these areas would be limited, since the homelands would be politically and administratively independent of the Union. One proponent of these views was Bruwer (1954), who argued in an article in the Journal of Racial Affairs that encouraging Africans to adopt parity-specific fertility limitation would be futile:

... it is clear how utterly difficult it will be to change the reproductive philosophy of the Bantu... It is generally accepted that industrialisation exercises a retarding force on population growth. In the South African pattern of industrialisation, this proposition probably does not hold for the Bantu. In the first instance, the economic pattern does not affect the way of living of the entire Bantu population ... The economic pressure, lack of space and housing etc. that tends to retard White population growth in industrial areas, does not therefore have the same effects on the Bantu population because they, in addition to the living possibilities in the White sector, can also enjoy the advantages of their own reserves.

Secondly, the mortality rate among the Bantu continues to fall as a result of better medical and other facilities ... As the death rate among Bantu children falls as a result of improved living standards, the mean number of children per family will thus probably overtake that of Whites...

... The pattern of South African food production is, to a large extent, one-sided. Although the Bantu, as the largest component of the population, also contribute to the production of food, this contribution
happens largely in the White areas. Native reserves constitute about 13% of the total surface area of South Africa. Virtually all these areas lie in good rainfall areas, but they are not only undeveloped and unproductive, but are being robbed of their productive potential by primitive methods and overcultivation. In the meantime, the White areas must employ their carrying capacity to saturation point in order to provide food for the majority of the Bantu population.

This one-sided burden on the land in respect of food production as well as industrial development shows the roots of our immediate population question to be both economic and sociological. Large-scale and planned development of the Native reserves is without a doubt, a more realistic approach to our current population problems than the illusion of a quantitative population policy that, if it is applied, will make reproduction just as one-sided in the coming decades as the current arrangements in respect of production. (Bruwer, 1954:21-23)

At about the same time, Sadie (1955) suggested that an alternative solution to the threat of “swamping” would be to encourage White immigration, although he acknowledged that such a policy (implemented in the late 1950s and 1960s, resulting in immigration of large numbers of Whites, particularly from the United Kingdom) was unlikely to rebalance the racial composition of the country to any significant degree:

It seems fair to conclude that there is a more than average probability that the Bantu population will grow at an increasing rate in the near future. This coupled with the fact that their multiplicand is so much larger than the corresponding multiplicand of Whites, means that the excess in number of Bantu over White will grow cumulatively ... [O]n the basis of very reasonable assumptions with respect to growth and urbanisation, and assuming that future policy does not stop the flow to the present urban centres, there will be [two or three times more Bantu than Whites] unless we embark on a policy of large scale White immigration. Even so, the disparity in numbers cannot possibly be eliminated by means of White immigration. (Sadie, 1955:47)

Bruwer’s argument, however, is noteworthy for the fact that it represents one of the first applications of the emergent theory of development via modernisation (and its demographic counterpart, demographic transition theory) to the South African context. However, even in 1954, the interpretation of modernisation theory was beginning to be subverted by the pressures of racial politics: modernisation of Africans was seen increasingly as occurring within the spatial and political realm of the bantustans, rather than within the White areas of South Africa.

More importantly, though, his arguments established the conceptual framework that dominated official demographic analysis in the country for the next thirty years. By paying little attention to the effects of the social and institutional characteristics of the South African polity on demographic outcomes, the inhibiting effects of apartheid polices on fertility decline were generally ignored, and the structure of South African society was treated as conceptually and
theoretically independent of the process of fertility decline. The formulation and maintenance of this conceptual separation meant that subsequent analyses of the causes and consequences of rapid African population growth refused to investigate the effects of apartheid institutions on African fertility. However, segregationist policies themselves preserved (and, indeed, intended to preserve) urban Africans’ links with the bantustans, and hence limited the fertility-inhibiting effects of urbanisation in the White areas, while modernisation of the bantustans was contingent on expensive infrastructural and development programmes.

In 1954, this separation was less problematic than it would become. The homelands policy had yet to be fully developed, the principles behind “Bantu education” had yet to be fully implemented (although the Bantu Education Act had been passed a year earlier⁵), and it is, at least theoretically, possible that large-scale industrialisation of, and investment in, the bantustans might have had the desired effect of promoting modernisation, and consequently fertility decline.

2.2.1 The Tomlinson Commission (1951-55)
The Commission for the Socio-Economic Development of the Bantu within the Union of South Africa⁴ (South Africa, 1955) marked a further milestone in the integration of population concerns into a broader social and political framework for South Africa. The Commission’s terms of reference were specified in very general terms: to “conduct an exhaustive inquiry into and to report on a comprehensive scheme for the rehabilitation of the Native Areas with a view to developing within them a social structure in keeping with the culture of the Native and based on effective socio-economic planning” (South Africa, 1955:xviii).

With this remit, the Commission could not but stray into matters of population policy, and in particular the link between modernisation and economic growth on the one hand, and population growth and the need to limit African fertility on the other:

… it cannot be assumed that [Africans’] attitude towards reproduction will change quickly enough in a spontaneous manner to realise the fruits of economic development in the form of a higher material standard of living… What is indicated, therefore, appears to be a campaign for the promotion of planned parenthood. (South Africa, 1955:30)

However, in the concluding chapters of the Commission’s Report, the call for a family planning service had been toned down into a recommendation that “an investigation into the possibilities of such a campaign [for the promotion of planned parenthood], should be

---

⁵ In a now-infamous speech in the Senate on the 1953 Bantu Education Act, HF Verwoerd had argued that “[T]here is no place for [the African] in the European community above the level of certain forms of labour… It is of no avail for him to receive a training which has as its aim the absorption in the European community, where he cannot be absorbed. Until now he has been subjected to a school system which drew him away from his own community and misled him by showing him the green pastures of European society in which he was not allowed to graze” (Verwoerd, 1975 (1954):266).

⁶ Hereafter referred to as the Tomlinson Commission.
undertaken” (South Africa, 1955:207). This modification probably resulted from the strong objections of Afrikaner theologians in the Dutch Reformed Church (to which almost all Nationalist politicians belonged) to artificial family planning. As a result, even this (modified) recommendation was not acted on for another decade.

The “Native problem” as outlined by the Commission emphasised the numbers game in terms redolent of Hertzog’s fears: “of all factors, the numerical relationship [between Whites and Africans] is probably the one which counts for most”, and argued that giving equal right to Africans would endanger “the existence of the European and his civilisation” (South Africa, 1955:9). The Commission’s concluding recommendations summarised four years of work and almost 4 000 pages of the full report as follows:

(i) A choice will have to be made by the people of South Africa, between two ultimate poles, namely, that of complete integration and that of separate development of the two main racial groups. Taking all factors into consideration, the Commission recommends the latter choice, namely, separate development.

(ii) The initial step towards the practical realisation of separate development of Europeans and Bantu, lies in the full-scale development of the Bantu Areas.

(iii) The development of the Bantu Areas will have to embrace a fully diversified economy, comprising development in the primary, secondary and tertiary spheres. (South Africa, 1955:207)

The genesis of many apartheid policies implemented after 1960 can be found in the Report’s recommendations that Africans be removed from so-called ‘black spots’, and its arguments in favour of the desirability of ‘retribalising’ Africans. As Posel discusses at length, changes in government policy on influx control and urbanisation represented the consequences of an ideological victory by the more conservative faction of the National Party under the guidance of the Broederbond, a secretive cabal of Afrikaner intellectuals, capitalists, administrators and theologians. Official policy on African urbanisation up until 1959 (under the Native Affairs Department) had sought to accommodate the growing demand for African labour in White areas. However, with the transformation of the Native Affairs Department into the Bantu Affairs Department, government policy underwent a marked shift. Whereas detribalisation (and permanent African settlement in urban areas) had been previously thought to be inevitable, the new approach actively sought to “curb white dependence on African labour in the cities” (Posel, 228-9), and cast the need for independent homelands as being in the interests of the preservation of African culture.
However, as a result of that strong rightward shift, the developmental aspects of the Commission’s recommendations were generally ignored. Posel notes that the recommendations, “an ambitious and expensive programme of agricultural, industrial and mining development”, were estimated to cost £104 million over the first ten years. However, “by the end of 1958 the government had allocated a mere £3,500,000 for reserve development” (Posel, 1991:126).

In the realm of population policy, too, the extent of the political shift after 1960 was clearly visible. The emergence of new political priorities in the wake of the political struggles within the ruling party set in place a set of contradictory approaches and policies towards African population growth and the need to reduce African fertility. The assumed importance of modernisation in reducing African fertility was replaced by a view that sought to solve the “native problem” by means of rigid social and spatial segregation and the granting of ‘independence’ to the bantustans. Doing so, too, would shift the burden of modernisation onto the new homeland administrations, and hence the cost of modernisation would not be borne by White South Africans.

Sadie’s arguments that “the numbers must count”, and his warnings of the dangers of African urban population growth resonated with the (new) leadership of the National Party. In 1962, Prime Minister Verwoerd (1978 (1962)) gave a speech in the White House of Assembly motivating strongly for the Transkei to be given its independence. Failure to do so would lead to the swamping of White South Africans in the Republic, he argued, and quoting Sadie directly, “… it would inexorably lead to Bantu domination. Because in the long run numbers must tell.” Verwoerd continued with the bluntest possible threat of not granting independence to the homelands: “And I say it unequivocally that the people of South Africa cannot accept the consequence of having a multi-racial state unless the Whites, the Coloureds and the Indians are prepared to commit race suicide” (Verwoerd, 1978 (1962):179-180).

The prospect of White “race suicide” reached its apogee in 1967 when MC Botha, Minister of Bantu Affairs, launched a campaign to encourage White South Africans to increase their fertility through tax relief and other benefits, and “have a Baby for Botha”. Contrary to Kaufman’s assessment (1996:32) that this call went unheeded (its sole, and unintended, effect according to her being a reduction in attendance at non-White family planning clinics), the campaign may have had a marginal impact on White fertility. According to Mostert (1979), total fertility among Whites in 1965 was 3.08 children per woman and that in 1970 was 3.09. White fertility had been in decline for some time, and the apparent stasis between 1965 and 1970 (total fertility had dropped to 2.58 children per woman in 1974) would suggest that while the programme did not increase White fertility, it did – for a while – halt its decline. Further evidence
in this regard is that between 1965 and 1970, the age-specific fertility rates for White South Africans actually increased in the 25-34 age group, while declining in all other age groups. Women in these age groups would, presumably, have been most susceptible to the campaign’s message.

As Greenhalgh (1995) has observed, ‘classical’ demographic transition theory shares many of the same tenets as modernisation theory, particularly in relation to the process of fertility decline. In parallel with their hypothesised significance for modernisation, education (especially that of women), wage employment and urbanisation were all assumed to be important, even if neither necessary nor sufficient, in the transition from high to low fertility. The rise (and acceptance by apartheid planners) of the modernisation thesis, with its emphasis on development as a determinant of demographic transition began to highlight some of the contradictions inherent in government policy in the mid- to late 1960s.

With the rejection of the developmental aspects of the Tomlinson Commission’s recommendations, government policies after 1960 had the explicit intent to limit African urbanisation and to restrict their participation in the labour force. The education of Africans, too, was seen as being of minor importance. The government’s desire for Africans to maintain strong links with the bantustans, coupled with the increasingly draconian system of forced removals to the homelands thus greatly restricted the extent to which modernisation might precipitate a decline in fertility.

Furthermore, these policies were seen to obviate the need for significant modernisation and development of the African population in White areas (since Africans were not supposed to be there), while the desire to grant politically autonomy to the bantustans meant that their underdevelopment was construed as a matter outside the ambit of government policy.

In the absence of either development, or family planning programmes, African fertility unsurprisingly remained high in White areas, increasing White fears of being swamped and leading to louder calls for even more rigid patterns of spatial separation along racial lines.

If apartheid demographers and ideologues were aware of the incompatibility of government policy with modernisation theory, it was not stated openly. Instead, African population dynamics were increasingly discussed in isolation from the broader social, economic and political context of the South African polity (much as Bruwer had done in the 1950s). This allowed lip service to continue to be paid to the benefits of modernisation theory, while not engaging with the negative effects of government policy on the viability of a modernisation-led fertility transition.
Thus, the result was a curiously naïve framing of the terms of a debate on population policy in South Africa, which took as axiomatic the preservation of the status quo, particularly the need for separate development, the necessity and desirability of maintaining the bantustans as quasi-independent entities, and the desire to control the migration of Africans to White urban areas.

2.3 Contradictions in the modernisation thesis, population control and family planning: 1968-74

Towards the end of the 1960s, two international developments helped to deflect attention from the increasingly obvious contradictions between the government’s desire to reduce African fertility through modernisation and its espousal of policies that denied the beneficial effects of modernisation to most African South Africans. The first was the publication of Paul Ehrlich’s book (Ehrlich, 1968), with its alarmist prognostications of overpopulation and resource shortages; the second was the legitimacy given to family planning programmes by the international community from the late 1960s onwards.

Ehrlich’s work proved a boon for South African demographers in the late 1960s and early 1970s. Not only did the notion of the “population bomb” reflect their own concerns about Whites being swamped by the higher fertility of Africans but the explicit threat of overpopulation (especially urban crowding) and environmental degradation provided some additional justification for the extension of apartheid policies, and the desire to grant independence to the bantustans. The significance of the “population bomb” metaphor, and the alacrity with which it was adopted cannot be understated.

The metaphor appeared increasingly frequently in reports on population growth and fertility in South Africa produced from 1968 onwards. These reports tended to commence with an introductory chapter outlining the ‘problem’, and establishing that if the population explosion carried a threat for the planet en masse, the threat was notably worse for White South Africans. After setting out the rates of global population growth from pre-Christian times and comparing the rates of population growth in developed countries relative to developing countries, they would then focus on South Africa, its high rate of (African) population growth, and conclude with a jeremiad that Africans would not, or could not, limit their fertility.

The metaphor of the “population bomb” was most clearly articulated at a symposium organised by the South African Medical Association in October 1971 on the “Population

---

5 The clearest examples of how this discourse was used are found in Cilliers (1971), Lötter and van Tonder (1976) and Schutte (1978). Similar instances are found in many of the papers, especially Robbertse (1969), presented at the 1968 South Africa Bureau of Racial Affairs congress in Bloemfontein, whose theme was “White Population Growth”. These papers can be found in Journal of Racial Affairs (1969), Vol. 201.
Explosion in South and Southern Africa”. An indication of the seriousness with which the government viewed the matter is given by the fact that, of the nine papers delivered at the symposium, senior ministerial officials gave four, including an opening address by Dr Connie Mulder, the Minister of Information. The theme of Whites being swamped was elaborated and found a new articulation in the rhetoric of the population bomb:

The Whites increased by about 662 000 from 1960 to 1970 as against a total Non-White increase during the same period of 4 782 000. That means for each White person added to the South African population, there was a corresponding increase of 7.2 Non-Whites. The conclusion to be drawn from the above is THAT THE WHITES ARE A DWINDLING MINORITY IN THE COUNTRY. (Dr C. J. Claassen in van Rensburg (1972:7), original emphasis)

Not only were Whites in imminent danger of being swamped but, with judicious choice of comparisons, it was possible to claim that “South Africa’s population is increasing at the highest rate in the world” (van Rensburg, 1972:10). The implications of this growth for the South African polity were terrifying: high rates of African population growth would tilt the numerical balance of the population in favour of Africans, thereby threatening still further any vestige of legitimacy for White control.

Further direct reference to the “population bomb” can be found in the set of population projections based on the 1970 census published in 1973 in which projected African population growth over the next forty years was described as “explosive” (Mostert, van Eeden and van Tonder, 1973b:11).

The new family planning paradigm, based on fertility reduction through the provision of family planning services, offered a way of resolving the incompatibility between apartheid policies and the ability of modernisation to deliver rapid fertility decline among Africans. Despite concerns expressed in parliament that the adoption of family planning programmes might open the government up to charges of “racial murder” or even genocide (Kaufman, 1996:35-37), calls for a family programme directed at Africans grew louder from the late 1960s. These concerns (even though they were periodically expressed over the next few years) were increasingly dissipated by the international support given to the implementation of family planning programmes across the developing world, and the belief in the possibility of a contraception-driven fertility transition.

Thus, in his speech to the 1968 SABRA congress, Dr PM Robbertse, the chair of the Human Sciences Research Council (HSRC), was among the first South Africans to invert the normal formulation of the modernisation hypothesis by arguing that African socio-economic
development was being compromised by high rates of population growth. Nevertheless, in keeping with the congress’ theme, greater attention was given to the promotion of White fertility.

Using Nazi Germany as his principal example, he proposed that White fertility should be increased through incentives to marriage (in the form of state transfers), further substantial transfers in respect of third, fourth and higher order children, and subsidisation of housing and tertiary education for large families. However, he was at pains to point out the necessity of family planning programmes for Africans, too:

“a population policy for the Non-Whites is as urgent as one for Whites ... If the birth rate of the Non-Whites is to fall, it would have the advantage that the proportional increase of the various population groups would become more equal ... it would also have the benefit of allowing the living standards of the Non-Whites to rise much faster.

“I am not prepared to guarantee that the proposed, or similar, measures will increase the White birth rate. I am, nevertheless, prepared to guarantee that this rate will decline further, unless attempts are made to halt the trend. Therefore, I am in favour of a population policy. Even if the measures only halt the trend, it would still be worth the effort. And these measures will promote social justice by easing the burdens that are placed on the large family. Along this road, the quality of the population will be raised.

“The time has also come to formulate a comprehensive population policy for the Non-White population groups, and I make the proposition that the majority of the Non-Whites would welcome such a policy...” (1969:61-62).

From early in the 1970s, apartheid-supporting academics and administrators had to come to terms with the demographic consequences of the government’s failure to modernise the African population. In response, they began to reformulate government population policy in a manner that attempted to square the contradictions between modernisation and apartheid, and simultaneously embrace the new family planning paradigm.

One tendency, most coherently represented by Jan Sadie and SP Cilliers, followed on from Robbertse, elaborating on the inversion of the modernisation hypothesis, and calling for immediate action to implement a family planning programme, and a revision of existing population policy. Their solution reversed the central argument of the modernisation hypothesis and demographic transition theory, and – instead – proposed that socio-economic development of the bantustans would only be possible if the rate of population growth was slowed significantly. Modern contraception offered an ideal mechanism for doing so.

Thus, for example, Sadie (1970, 1973) argued for the introduction of a “vigorou...
economy. Decentralisation was, broadly speaking, a euphemism for forced removals and stronger spatial and economic segregation of black and white in South Africa. In particular, the decentralisation policy aimed to promote the growth of (White-owned) industry within the bantustans, or on their periphery, thereby creating employment opportunities for Africans in or near the homelands, while increasing the possibility of removing ‘surplus’ Africans from the White cities. In 1970, Sadie concluded a review of demographic data on Africans with the opinion that the African population would “remain in the explosive phase, unless a vigorous family planning programme [was] successfully conducted” (Sadie, 1970:190). Three years later, in the commentary on a frequently cited series of population projections, he took a fairly pessimistic view of the potential for African fertility to decline. With a projected level of fertility of 5.2 children per woman for 1990-1995 and 4.1 for 2010-2015, he estimated a need by 2000 for new or existing cities to accommodate an additional 28 million inhabitants, and called for faster industrial decentralisation to reduce this growth, while noting again the additional need for a “sustained and vigorous family planning programme”. Failure to implement such a programme, in his opinion, would result in an ever-diminishing proportion of Whites and Asians (who “provide the major proportion of entrepreneurial initiative”). This dilution would then further impoverish Africans and Coloureds (and inhibit the decline in their fertility), since they have “for practical purposes, only their labour to offer whose employment is dependent upon the enterprise and capital supplied by the other two groups” (Sadie, 1973:37-8). Thus, by the early 1970s, White demographers had abandoned hopes of a Malthusian solution to the problem of African population growth.

Cilliers (1971) took a similar view to Sadie, arguing that high population growth was retarding the “upgrading” of the African population. Consequently, the “need for population control” was based on the impossibility of modernisation without a prior fertility decline. Like Sadie, Cilliers called for the family-planning paradigm to be closely integrated into a broader programme of socio-economic development in the bantustans. In his monograph, “Appeal to Reason”, an entire chapter was devoted to “The need for population control”:

... I am convinced that the time has arrived for South Africa to formally and openly aim at population control through family planning. We must, without delay, incorporate a population programme into our broad programme for social and economic advancement for all sectors of our society. In fact, it cannot be disputed that without such a population programme, which should consciously and openly strive towards motivating all sectors of the community to limit family sizes in accordance with the ability to provide adequately for dependants and towards providing all sectors of the community with the knowledge and means of implementing fertility control, we will not succeed in our
The centrality of demographic concerns in the formation of government policy, and the
ingogetal of demographers to this, was increasingly evident in the early 1970s. In a subsidiary
report to the 1973 projections, Mostert, van Eeden and van Tonder argued that

> In the case that only the current homeland populations, together with
> their natural increase, must be kept in these areas, economic
development must at least keep pace with population growth. However,
> the ideal must rather be for homeland development to take place at such
> a rate that a much larger volume of Bantus will flock out of the White
> areas to the homelands than the natural increase of [those Bantu in the
> White Areas]. ... Even to be able to restrict the numbers of the [Bantu in
> White Areas] to the 8.2 million in 1970, more than 200 000 Bantus will
> have to be resettled in the homelands each year. (Mostert, van Eeden
> and van Tonder, 1973a:3)

The threat posed by African population growth to the political integrity of White South
Africa was picked up on by contributors to the 1972 symposium. Modernisation of the
bantustans, it was argued, was essential to maintain the integrity of White South Africa. Thus, for
example, van Rensburg (1972) argued that

> The more successful the policy of separate development is, (with the
> concomitant increase in the percentage of Whites in the White areas), the
> more successful the policy of the development of the homelands will
> have to be... In view of existing government policy, the possibility of no
> African emigration from the White areas in the years to come will not be
> considered, because such an eventuality would be tantamount to the
> total collapse of the present policy of separate development, an event
> which the author cannot or will not predict. (van Rensburg, 1972:13)

However, these views held their own contradictions: if van Rensburg could not
countenance the failure of the government’s influx control policies, he was also aware that the
homelands were incapable of supporting the projected African population, thereby leading to
possible further demands for Whites’ land by Africans and still greater threats to White
domination:

> A situation could very well arise where the Whites would have to
> safeguard their land by force of arms. In the best interests of all the
> people of South Africa it is imperative that the evil political
> consequences of a chronic and ever increasing African land hunger (a
> direct result of their uncontrolled proliferation), should be avoided at all
> costs. (van Rensburg, 1972:14)

The 1972 symposium also saw an elaboration and sophistication of official thinking on the
population question. Van Rensburg attacked the past discourses on population as being a
“dualistic White view which seeks to generate an increased growth of the White population and,
at the same time strives to bring about a drastic reduction in the growth of the Non-Whites” (van Rensburg, 1972:94). He argued that it was implausible to expect White fertility to increase to the rates required to stabilise its constituent proportion of the South African population. Second, even though a national family planning programme aimed at all population groups might precipitate a further decline in White fertility, he argued that in absolute terms the formulation of such a programme would decrease African numbers more than they would those of Whites. Third, he recast earlier White fears of being accused of genocide by arguing that Africans would refuse to limit their fertility on such terms:

Stated in plain language, they could argue: We do not see our way clear to committing racial suicide while you Whites are actively encouraged to have larger families … This understandable Non-White attitude (the result of the Whites’ dualistic approach) can have only one conclusion – an increasingly uncontrolled Non-White population growth causing, in turn, two inevitable results: ultimate and unavoidable “swamping” of the Whites and a rapid and ultimately disastrous drop in the Non-Whites’ standard of living until widespread famine and misery step in to restore the balance. The results of the White’s dualistic views can be summed up as suicide for the Whites, and indirectly suicide for the Non-Whites too. Strongly stated perhaps, but unfortunately the sober truth. (van Rensburg, 1972:96)

These calls from academics within the ruling party and the generalised White concerns about African population growth, together with the growing international support for the family planning movement, no doubt encouraged the South African government to launch its National Family Planning Programme in 1974. However, according to government officials the decision to launch the programme and make contraception available had been driven by a growing demand for contraception from African women (Mostert, 1978). While the public face of the campaign might have suggested that the programme was demand-led, the National Family Planning Programme was most definitely not simply a response to that demand, as Mostert (1978:86) makes plain:

the introduction of a (family planning service) in South Africa was stimulated by growing genuine demand. This was, in truth, not the only reason. From the beginning, too, the government viewed the programme as a mechanism for hastening the socio-economic development of the population.

Thus, by the end of the 1970s, interpretation of the modernisation-fertility nexus had come full circle. While the Tomlinson Commission had recommended in 1955 that fertility decline would come about through modernisation, by 1974 the government was advocating the exact reverse: modernisation through fertility decline.
Despite Mostert’s claim that there was a “genuine demand” for family planning from Africans, uptake was slow even though family planning services had been available to them, albeit unofficially, since the mid-1960s. Government surveys on family formation conducted in late 1969 and early 1970 in the four major metropolitan areas of the country had shown low levels of current use of modern contraceptive methods, but a high degree of desire for further information (although this simply may be the product of using a leading question), as Table 2.1 and Table 2.2 show.

Table 2.1 Percentage of fertile(*) married African women in 1969-70 wanting more information on contraception among, by age and city

<table>
<thead>
<tr>
<th>City</th>
<th>15-24</th>
<th>25-34</th>
<th>35-44</th>
</tr>
</thead>
<tbody>
<tr>
<td>Durban</td>
<td>77</td>
<td>73</td>
<td>53</td>
</tr>
<tr>
<td>Johannesburg</td>
<td>80</td>
<td>84</td>
<td>75</td>
</tr>
<tr>
<td>Pretoria (all ages)</td>
<td>-----</td>
<td>70</td>
<td>------</td>
</tr>
<tr>
<td>Cape Town (all ages)</td>
<td>-----</td>
<td>84</td>
<td>------</td>
</tr>
</tbody>
</table>

(*) The definition of “fertile” here is that used by the authors. It excludes women who are definitely or probably infertile (no use of contraception, and no conception in the past decade), as well as those deemed semi-fecund (no conception in the absence of contraceptive use in the last two to three years)

Source: Mostert (1972); Mostert and du Plessis (1972); Mostert and Engelbrecht (1972); Mostert and van Eeden (1972)

Table 2.2 Percentage current use of contraceptive techniques among fertile(*) married African women in 1969-70, by age and city

<table>
<thead>
<tr>
<th>City</th>
<th>Age</th>
<th>Not using</th>
<th>Modern methods</th>
<th>Traditional methods</th>
<th>Modern and Traditional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Durban</td>
<td>15-24</td>
<td>74</td>
<td>8</td>
<td>18</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>25-34</td>
<td>72</td>
<td>14</td>
<td>15</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>35-44</td>
<td>82</td>
<td>6</td>
<td>12</td>
<td>--</td>
</tr>
<tr>
<td>Johannesburg</td>
<td>15-24</td>
<td>76</td>
<td>18</td>
<td>6</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>25-34</td>
<td>66</td>
<td>24</td>
<td>10</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>35-44</td>
<td>79</td>
<td>16</td>
<td>6</td>
<td>--</td>
</tr>
<tr>
<td>Pretoria</td>
<td>15-24</td>
<td>74</td>
<td>15</td>
<td>10</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>25-34</td>
<td>71</td>
<td>13</td>
<td>14</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>35-44</td>
<td>68</td>
<td>16</td>
<td>16</td>
<td>0</td>
</tr>
<tr>
<td>Cape Town</td>
<td>15-24</td>
<td>50</td>
<td>22</td>
<td>18</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>25-34</td>
<td>41</td>
<td>22</td>
<td>22</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>35-44</td>
<td>56</td>
<td>18</td>
<td>17</td>
<td>9</td>
</tr>
</tbody>
</table>

(*) The definition of “fertile” is as in Table 2.1

Source: Mostert (1972); Mostert and du Plessis (1972); Mostert and Engelbrecht (1972); Mostert and van Eeden (1972)

Five years later, shortly after the official announcement of the 1974 National Family Planning Programme, a national survey on family planning use and fertility among Africans found much higher rates of current use of modern contraceptive methods among urban women meeting the same fertility criteria.

---

The survey (Löetter and van Tonder, 1976) covered all ‘homeland’ areas, but did not sample any Africans living in the Western Cape. One of the recommendations of the Tomlinson Commission was that the Western Cape be declared a Coloured “Labour Preference Area”. Accordingly, Africans were not supposed to be resident there. Hence, one suspects, Africans were not sampled in the Western Cape, since doing so would be tantamount to an admission that the policy of influx control in the Western Cape had failed.
29 percent of fertile urban African women aged 15-24; 33 percent of those aged 25-34 and 27 percent of women aged 35-44 were then using some form of effective contraception (Lötter and van Tonder, 1976). Thus, over the five years before the official launch of the National Family Planning Programme, contraceptive use among urban African women had increased quite dramatically. The desire for further information about contraception noted in 1969 and 1970, and the subsequent rise in current contraceptive use, (much of which happened without the benefit of a co-ordinated government programme) provides some indication that by the early 1970s (even if not in the 1960s as claimed by Mostert) a fairly strong demand for contraception had evolved, at least among urban African women.

The programme expanded rapidly after its official endorsement in 1974. By 1977, there were more than 2,700 clinics in (the White areas of) South Africa where contraceptives were available, and nearly a quarter of a million women were visiting these clinics every month (Mostert, 1978), leading Caldwell and Caldwell (1993) to describe the South African population programmes as being “super-Asian” in its intensity. However, as our earlier research has shown, that intensity did not translate into a rapid decline in the level African fertility, nor did it have a discernible effect on women’s fertility intentions.

2.4 From the National Family Planning Programme to the Population and Development Programme: 1974-1983

Compared to the early 1970s, research on African fertility almost ceased after publication of the report on the 1974 fertility survey, and what little research was conducted tended to avoid dealing with the inconsistencies of apartheid policy vis-à-vis population growth, and concentrated instead on the social and financial implications of continued African urbanisation (for example, see Schutte (1978)).

Several reasons can be proposed for the relative paucity of substantial demographic research in the period after 1974. First, the National Family Planning Programme represented an end in itself. Given the sheer weight of argument that such a programme was the only way to ensure White survival and limit African fertility, it is perhaps unsurprising that, until the programme was evaluated, little further data was collected.

A commentary on population growth published by Mostert in 1979 employed the device first used by Bruwer in 1954, paying much attention to the effects of high African fertility and ignoring the possible structural causes of that high fertility induced by apartheid policies:

---

7 It is unlikely that many of these women were White, since most White women would have received contraceptive advice from their (private) general practitioner.
In the White areas of South Africa, where more than half of Blacks are urbanised, and where a strong family planning programme is being pursued, it can be expected that that the birth rates will fall quickly, but in the Black areas it is probable that the birth rates will decline only slowly – on account of the lack of dynamism in their family planning programmes on the one hand, and the low rate of modernisation and urbanisation on the other. (Mostert, 1979:38).

It is difficult to credit that a demographer of Mostert’s standing would have been oblivious to the effects of apartheid on retarding the fertility transition in South Africa, or to the reasons behind the “low rate of modernisation” in the homelands. The more plausible explanation is that he constructed the argument thus because any deeper analysis would expose the full extent of apartheid’s contradictions with the theory and practice of modernisation.

Furthermore, with the granting of “independence” to four homelands over the next decade, data sources became increasingly fragmented (no census for the entire Republic including its homelands was conducted again until after 1990), and collection of demographic data had to rely on co-operative ventures with homeland administrations. As a result, the usefulness of the WFS-type survey data collected in 1982 (van Tonder, 1985) is limited by the fact that data were collected only in the “White areas” of the country. In addition, political unrest after the Soweto uprising of 1976 and its consequences undermined the legitimacy, the capacity and (probably) the desire of government authorities to conduct research into the demography of the Black population of South Africa.

The period from the early 1970s to the mid-1980s was a difficult one for apartheid ideologues. The relatively high rates of economic growth that had been achieved in the 1960s fell away. Organised African labour power asserted itself for the first time in a generation in the 1973 Durban Strikes. The 1976 uprising, led by students protesting against the forced teaching of Afrikaans in schools, marked the end-point of a period when the balance of power tilted briefly against the state. A period of relative quietude followed the suppression of the 1976 riots.

Despite the continued application of the Pass Laws and the granting of autonomy to homelands (often whether they wanted it or not), the underlying social fabric of South Africa was beginning to change fundamentally. Since 1973, African wages had increased sharply relative to those of Whites. In 1979, the Wiehahn Commission recommended allowing the formation of African trades unions (albeit under restrictive conditions). PW Botha’s accession to power in the 1978 election marked the onset of a new era, frequently referred to as being characterised by “reform and repression” under which piecemeal legislative reform was made while the state
simultaneously increased its internal security apparatus under the guise of the threat of the “Total Onslaught”.

In late 1981, the President’s Council commissioned a report from its Science Committee with a brief to examine, inter alia, “the extent to which the economic and social development, the quality of life and the productivity of the population of the Republic of South Africa, are significantly being harmed by the population growth and population structure, now and in the future” (South Africa, 1983:foreword). The final report, submitted in March 1983, provided the blueprint for the South African population policy that followed, as well as providing important signs that apartheid intellectuals were aware that the apartheid edifice was in danger of crumbling.

The historical and political context in which the report was written is of particular importance. Later that year, White South Africans were to be asked to approve the dismantling of the Westminster-style parliament, replacing it with a tricameral system, one house for each of the Whites, Coloureds and Asians/Indians. Africans were still to be denied any form of parliamentary representation. PW Botha urged support for the change arguing that White South Africans must either “adapt or die”. The introduction of the tricameral system was to precipitate the launch of the United Democratic Front as an internal front for the ANC, and to usher in seven years of internal instability which was to culminate in the start of negotiations with the, until-then banned, African National Congress about a future dispensation in 1990.

In many respects, the President’s Council Report is a masterpiece of obfuscation, allowing its readers to interpret it in a huge variety of ways. On one level, it is apparent that – in common with so much demographic research in South Africa from the 1950s onwards – the authors had struggled from the outset to avoid contradiction. In a comment on educational levels in the country, for example, bland assertions of fact (“the general level of education of Whites is considerably higher than that of the other three population groups... ” (South Africa, 1983:24)) are made with little or no attempt to explore the underlying reasons behind those facts or criticise the structural iniquities caused by apartheid policies.

Elsewhere, the report noted that

Of importance, moreover, is that the lowest numbers of children occur in families which are urbanised; in which both husbands and wife have reached a high level of education; and in which the wife is employed outside the agricultural sector and outside the family” (South Africa, 1983:74-75, original emphasis)

---

8 Hereafter termed the President’s Council Report
Thus, the separation of the links between cause and effect that was so necessary in earlier years was again necessary to hide contradictions between the consequences of apartheid policies and desired demographic outcomes. However, despite the contradictions that modernisation theory now held for apartheid South Africa, and despite the adoption of the family planning model and the inversion of the population-development argument in the 1970s, the converse was still believed to be of significance: “population growth in all countries is related to development and modernisation” (South Africa, 1983:64, original emphasis). To avoid the obvious contradiction between modernisation and apartheid policies, this absolute statement was then qualified:

The conclusion arrived at is not that fertility is not related to modernisation and development – it is abundantly clear that it is – but rather that there is a loose relationship that differs between regions, countries and cultures (South Africa, 1983:68).

The implementation of, and support given to, the National Family Planning Programme, and high levels of contraceptive use notwithstanding (the President’s Council Report itself claims a 45 percent current use rate in Soweto in 1980) notwithstanding, the report opines that Africans were still neither sufficiently modernised, nor possibly yet psychologically capable, to use modern contraception to limit their fertility:

The continuing high fertility and low usage rates of modern contraception can be attributed largely to a combination of low levels of modernisation, or socio-economic status, and accessibility of modern contraceptive services, particularly in the rural areas where about two-thirds of the Black population lives. In contrast with the Asian and Coloured populations, the level of socio-economic development and the psychological climate among Blacks are not yet favourable enough for modern contraceptive usage to be accepted on a large scale and to be conducive to rapidly declining fertility. (South Africa, 1983:103)

Thus, again, the failure to reduce African fertility is couched in terms of the failure of modernisation, rather than a deeper analysis of the constraints on the potential for modernisation to work imposed by other apartheid policies. What was not picked up in the President’s Council Report, either, was the rapid (contraception-driven) lengthening of birth intervals among Africans.

At another level of analysis, the report attempted to justify some of apartheid’s more grotesque social engineering in terms of international trends and policies: “policy measures relating to population redistribution are applied by 95% of the governments of developing countries” (South Africa, 1983:7).

Finally, the report reads as a damning internal indictment of apartheid policies and their retardant effect on African fertility decline, acknowledging the existence of the contradictions outlined above. These indictments are found predominantly in the Report’s recommendations
and, in effect, call for the dismantling of the apartheid edifice. In this regard, however, the report is more tentative, as if the authors were uncertain how President Botha and the cabinet would receive the conclusions drawn. For example, despite “the determined attempts by the government to limit flocking to White areas” (Schutte, 1978:83), the President’s Council Report viewed the urbanisation of Africans as “inevitable and universal”. At the time of the Report, the proportion of the African population in urban areas had increased only slightly - from one third at the time of the 1970 census, to 38 percent in 1983. Thus, although influx control had limited and controlled urbanisation to a considerable extent, the Report concluded that the maintenance of influx control would no longer be possible (South Africa, 1983:33).

The President’s Council Report also presented data showing a decline in the level of African fertility from 6.8 in 1955 to 5.2 in 1980 (a 23 percent reduction in fertility - more than twice the 10 percent generally accepted as heralding the onset of an irreversible fertility transition). Despite this decline, in one of the more significant passages, the third chapter of the Report concluded that “in the case of the Blacks, only a slight fertility decline has occurred” (South Africa, 1983:105, original emphasis). Three of the seven reasons given for the slow decline focus on the administrative deficiencies of the National Family Planning Programme, including its lack of integration into other social and development programmes, limitations on resources (both human and material) and problems of communication across the various ministries, both in White South Africa and in the ‘homelands’.

Two reasons blamed Africans for the failure, attributing to them “cultural resistance and ignorance, particularly among the tradition-bound Blacks”, and holding “certain Black leaders” accountable for their politicisation of family planning. As we shall show, the cultural resistance and politicisation arguments are, in many respects, disingenuous and incompatible with the high levels of contraceptive use. It seems, then, that these were simply arguments to divert some attention away from the real reasons for the slow pace of fertility decline in South Africa. This is not to deny that there was not politicised resistance to the government’s family planning policy, but as shall be shown in the third part of this paper, it is highly debatable whether this had any substantial effect.

The final two reasons (the second and third given in the text), are for the present purpose, the most interesting. These two at least acknowledge the contradiction that had plagued South African population policy for so long, attributing the slow pace of decline to the “large percentage of Blacks who are still in underdeveloped areas” and the “relatively poor and underdeveloped socio-economic circumstances of rural and urban Blacks”. While these observations echo those of Mostert (1979) quoted earlier, they represent the first official
admission of the institutional context of fertility decline in South Africa. Nowhere are the underlying reasons for the slow decline in African fertility openly discussed, but the implications must have been clear to those who read the report: Apartheid policies had retarded the fertility transition among African South Africans.

2.5 The Population and Development Programme
The 1984 Population and Development Programme (PDP) was set up to implement the recommendations arising from the 1983 President’s Council Report. The PDP represented a more coherent and holistic understanding of the dynamics of population and demographic change than the National Family Planning Programme it superseded, by acknowledging the importance of social and economic variables in hastening a fertility decline. The overriding ambition of the programme was to reduce national fertility to replacement levels (around 2.1 children per woman) by 2020. The principal motivation for this target was concern over the country’s water supplies, which – it was felt - were not capable of supporting a population of more than 80 million. This target would, on the basis of government projections result in a stable population of around this size in 2100.

For all of the concerns and awareness expressed in the President’s Council Report about the effects of apartheid on retarding the fertility decline among Africans, the effects of the PDP were muted, as can be seen from the continued slow pace of fertility decline after 1984. In their assessment of the PDP, the Department of Welfare’s White Paper of 1998 suggested that while the PDP did consider the broader context of fertility decline in South Africa, the programme “did not address the fundamental question of the lack of citizenship of the black population, nor the institutionalised discrimination” prevalent in South Africa (Department of Welfare, 1998:3). Additionally, the failure of the PDP to meet its objectives were also attributed to its lack of integration into an overall development plan for all South Africans, the paucity of demographic data and demographic skills, and a failure of implementation at a provincial level. The validity of these criticisms notwithstanding, however, the continued uptake of modern forms of contraception after 1984, particularly in rural areas, is indicative that the PDP did, in some respects at least, succeed in broadening access to contraception and contraceptive advice.

2.6 Conclusion – Rhetoric and Reproduction in Apartheid South Africa
Posel’s identification of the internal conflict and compromise within the apartheid state was also borne out in population policy. The centrality of population – the “numbers game” – to apartheid policies meant that population policy, particularly, was affected by internal conflict between various government ministries with competing aims and agendas, as well as being
affected by changes in international demographic thinking. The internal conflicts waged within
the ruling party created a host of legislative and administrative frameworks that were not entirely
consistent with each other. Accordingly, it is hard to divine a clear set of policies on population
that were implemented with any clarity or certainty after 1960. In keeping with the need for
quasi-scientific justifications of apartheid, the external face of many population policies presented
the international development and demographic paradigms of the day (and tried to accommodate
these within the broader structure of apartheid policies), but were generally heedless of any
contradictions between them and government policy in other areas. From an initial espousal of
modernisation theory, the first half of the 1970s saw the adoption of the rhetoric of the
population explosion and the family planning approach. With time, however, this was further
modified to incorporate both the family planning paradigm and the inverse of the population-
development hypothesis. The internal conflict in the formulation of population policy is apparent
throughout the apartheid era. Van Rensburg’s rebuke of calls for higher White fertility, and the
President’s Council Report, which (despite its internal inconsistencies) appeared to suggest that in
order to meet demographic ends, the structure of apartheid South Africa would have to be
altered fundamentally, are just two examples.

The extent to which South African demographers went to avoid highlighting the impact of
apartheid policies on demographic outcomes suggests that they became increasingly aware that
the structure of South African society from the 1950s onwards was not particularly conducive to
fertility decline. It thus becomes imperative to examine that structure, and its associated
institutions in order to grasp fully the nature of the South African fertility decline. Understanding
South African population policy and the contradictions that it embodied, combined with an
analysis of institutions that affect fertility, provides the essential insight as to why the South
African fertility decline has occurred in the way that it has.

More importantly, though, the lengthening of birth intervals together with the fact that an
increase in African women’s use of contraception did not result in the fertility decline so desired
by the government suggests that over the years from 1965, government family planning polices
were systematically subverted by African women. Rather than using contraception for fertility
limitation, as the government wanted them to, contraception offered women a very real means of
asserting greater control over their lives in a situation where such control was rarely available to
them. The nature of institutional effects on the lives and fertility of African women are explored
in the next section.
3 THE INSTITUTIONAL CONTEXT OF THE SOUTH AFRICAN FERTILITY DECLINE

The analysis of South African population policy from the 1950s shows, as McNicoll (1994) and Greenhalgh (1995) have argued, the importance of understanding local demographic dynamics in the wider context of international and national planning priorities. The material presented above has demonstrated how apartheid population policy represented a syncretism of international thought and (internally-contested) national ideology. This section examines the effect on the fertility decline of institutions specific to South Africa under apartheid, and proposes that an institutional analysis of the South African fertility decline provides answers to three important, and related, questions:

- Why has the South African fertility transition taken as long as it has?
- Why did African women demand and adopt modern contraception methods when they did?
- Why have birth intervals increased massively since the 1960s?

3.1 The effects of institutions on fertility

As has long been acknowledged, fertility and fertility change are not determined solely at the level of the individual, but are also affected by social formations and institutions or, as McNicoll puts it, “fertility transition, whatever else it may be, is an institutional phenomenon” (McNicoll, 1994:206). The imperative to investigate the institutional characteristics, and to situate individuals’ reproductive behaviour in its institutional context, is possibly even greater in South Africa where, in Bozzoli’s phrase, “the forces of structure and agency are so unevenly balanced” (Bozzoli, 1991:2).

No previous attempt has been made to understand the specific effects of apartheid institutions on South African fertility. While rigorous analysis of the South African fertility decline of necessity has to be contextualised with reference to the nature of the apartheid state over the last half century, little attention has been paid to the role played by the state and social institutions in determining the course of the South African fertility decline.

Other researchers have investigated aspects of the relationship between the apartheid polity and population processes in South Africa, although they have tended to force macro-level considerations into the background. Thus, for example, Chimere-Dan (1993) discusses in general terms the fact that apartheid education and the migrant labour system may have contributed to the slow pace of fertility decline, but his analysis does not identify, specify or investigate the mechanisms whereby this may have occurred.
Institutions are both dynamic and context-specific and hence, the set of institutions assumed to impact on fertility outcomes must be determined by reference to both the temporal period of investigation and local particularities. This necessity notwithstanding, McNicoll suggests a list of institutions that, in most situations, will have a bearing on fertility by the fact that they give “rise to local patterns of social organisation – particularly the family and local community; family and property law and the local dimension of public administration; the stratification system and mobility paths it accommodates; and the labour market” (McNicoll, 1994:206).

Other institutions need to be added to the list to reflect the specifics of the South African situation. Most important of these are the institutional aspects of gender relations precipitated by apartheid. With the history of population policies presented earlier, and taking McNicoll’s framework for the analysis of the institutional determinants of fertility as a starting point, it is possible to construct a more detailed picture of the dynamics of the South African fertility transition.

3.1.1 Institutional endowments
McNicoll (1994) suggests that the combination of institutional endowments found in a particular setting establish the pattern of fertility decline observed. Some combinations permit rapid fertility decline while others retard the process. Five archetypes of institutional endowment are identified, broadly associated with different geographic regions, ranging from “traditional capitalist” through to “soft state”, “radical devolution”, “growth with equity” and “lineage dominance”. In this typology, he argues, the “radical devolution” (e.g. China) and “growth with equity” (East Asia) archetypes have been associated with the most rapid fertility transitions, while societies institutional arrangements characterised by “lineage dominance” (e.g. sub-Saharan Africa) have shown the slowest pace of fertility decline.

The history of South African economic, social and political development fits none of these archetypes neatly. While ostensibly claiming to be adhering to a “traditional capitalist” development strategy, the South African state’s active intervention in all areas of personal and public life does not square well with the laissez-faire attitude assumed to be typical of such strategies. On the contrary, the apartheid state systematically set out to expand state power at the expense of other social institutions.

The following sections elaborate on the nature of the institutional endowment, and the roles played by institutions in South Africa from the 1950s in determining the course of the South African fertility decline.
3.1.2 State power: regularity and duress

McNicoll (1996) elaborates further on the role played by the state in governing the process of fertility decline and identifies two routes whereby the state, irrespective of its initial institutional endowment, can attempt to gain purchase on the pace of fertility transition. (Although the success enjoyed in the pursuit of either or both of these is still contingent on the initial institutional endowments and characteristics). The first route McNicoll terms regularity: the state’s ability to create and maintain order and, in particular, orderliness (predictability, or non-arbitrariness) of state-individual and individual-individual relations. The second is duress, “the use of political or administrative pressure or, at the extreme, physical force to attain fertility objectives” (McNicoll, 1996:17).

Application of this framework to the dynamics of the South African fertility decline suggests that one of the most important reasons for the slow decline in the level of South African fertility is that, from the 1950s, the apartheid state lacked both the inclination and the will to regularise its relations with Africans. Indeed, on many dimensions, the state’s relationship with Africans during the apartheid era can, in fairness, be described as being the exact antithesis of regularity. The state engaged in arbitrary and unpredictable denials of basic human rights and freedoms, encouraged the breakdown of alternative social institutions (out of fear of them being used to undermine the state) and compounded insecurity about property and residential rights through its use of forced removals and the Pass Laws. Likewise, policies on education, employment and urban residence were, in terms of their impact on Africans, both unpredictable and arbitrary. Furthermore, the state’s internal security apparatus compromised individual-individual relations (and hence the creation and maintenance of social capital) within the Black community by fostering distrust, division and suspicion. The maintenance of the migrant labour system, too, did much to undermine the role of the family as a repository of social capital, both within and beyond the household. These facets of state activity, combined with the migrant labour system, thus effectively made long-term planning on the part of families in relation to reproduction impossible.

The apartheid state was equally ineffective at using duress as a means to achieving its desired fertility outcomes. For all of its repressive tendencies and coercive capacity, its lack of political legitimacy among the African population, and a heightened sensitivity to charges of racial genocide reduced the capacity of the state to force or coerce individuals into particular forms and patterns of reproductive behaviour. This impotence, it must be noted, stands in stark contrast with the state’s ability to reach into almost every other sphere of Africans’ lives during the height of the apartheid era. There was no ‘one-child’ policy as in China, nor the incentivisation of
sterilisation (as in India), nor could the state realistically appeal to Africans’ patriotism or national interest in order to effect a rapid change in fertility.

In terms of its inability to promote regularity or exercise duress, the apartheid state was no different from other states in sub-Saharan Africa. What does set the apartheid state apart from those others is its institutional structure. Whereas other sub-Saharan African states demonstrated tendencies towards “lineage dominance” and prebendalist politics – what Bayart (1992) calls the “politics of the belly” – the South African state exhibited neither of these features. Furthermore, the South African state was, and remains, more industrialised, and its state structures more entrenched, and less prone to instability than those in other African countries. As a result, although other African states also lacked the ability to enforce or coerce desired patterns of childbearing and fertility, these states never had the potential to reach into the household as the state in apartheid South Africa did. A further difference is that, unlike other African states, the apartheid state actively sought to exclude Africans from ‘White’ civil society, while simultaneously undermining the building of a strong institutional power base within local African communities.

McNicoll’s discussion of regularity and duress in sub-Saharan Africa holds South Africa up as the exception testing the rule by quoting Caldwell’s observation that South Africa is the “only sub-Saharan national family planning programme comparable in intensity to those in Asia” (Caldwell (1994:13) in McNicoll (1996:22)). Both McNicoll and Caldwell miss the fact that while the South African family planning programmes were indeed intense (insofar as they made modern contraception widely and cheaply available to a broad section of the population) and driven by a strong desire to promote African fertility decline, the programmes did not challenge the structural constraints that African women faced as a result of the impositions of apartheid.

From this perspective, it is not surprising that despite their intensity, the population programmes implemented in 1974 and 1984 were incapable of delivering the results desired by the state, and that these programmes were subverted by the local populace.

3.1.3 The role of the state in directing fertility
In a more recent paper, McNicoll (1998) further developed his analysis of the role played by the state in directing fertility in both transitional and post-transitional societies. Irrespective of official programmes or desired demographic outcomes, he argues, the state exerts an influence on fertility by virtue of the fact that any polity “sustains a demographic regime: the set of routine behaviours surrounding cohabitation, marriage, childbearing and “health-seeking,” and their antecedents or supports in patterns of socialisation, organisation, and economic activity” (McNicoll, 1998:12).
Five ways in which the state can affect fertility are proposed:

1. through the development, funding and management of population programmes
2. through the socio-legal and administrative regime maintained by the state
3. through the state’s determination of equity and equality in society
4. through micro-effects on household economies via public expenditure and transfer payments
5. through its ability to appeal to “symbols of national identity and cultural continuity” (McNicoll, 1998:13)

At various points, as the discussion in Section 2 has shown, the apartheid state attempted to reduce African fertility (or increase White fertility) through each of these five routes. The 1974 National Family Planning and 1984 Population and Development Programmes sought (particularly) to reduce African fertility through encouraging the use of contraception, and promoting the ideal of smaller family sizes. The second route above corresponds broadly with his earlier discussion of regularity and duress, detailed above. Calls for fiscal incentives to childbearing, and the purported threats to symbols of national identity (what Benedict Anderson (1991) famously labelled the “imagined community”) were especially potent in government appeals for higher White fertility in the late 1960s and early 1970s.

Aspects of each of these five dimensions pervade the analysis of the role played by the South African polity, and social institutions in the course of the South African fertility transition, as discussed below.

### 3.2 Institutions in the South African fertility decline

#### 3.2.1 Systems of power and authority

A characteristic specific to South Africa is the manner in which many traditional institutions of local organisation and authority were replaced by state bureaucracies. However, this process was far from complete. As shown in Section 2, apartheid policies after 1960 sought to undo the ‘negative’ effects of the detribalisation of Africans that was seen to occur as a result of exposure to Western ideals and lifestyles, and part of the justification for the settlement of Africans in bantustans was to preserve and maintain “traditional” African culture. Accordingly, the apartheid state did not wish to entirely “capture” (in Goran Hyden’s (1983) phrase) the African population and African social institutions or to establish hegemonic social control over Africans, since the imposition of total bureaucratic control from above would undermine the policy of “retribalisation”. Thus, the extension of state power and control was far from complete. While the state desired control over the African population (and particularly desired control over
African fertility), it was not in the state’s interest to capture African civil society entirely, as doing so would undermine its own arguments in favour of the retribalisation of Africans. In any event, any such attempt would most likely have foundered because of the state’s illegitimacy in the eyes of the African population.

The result was an uneasy co-existence between different forms of authority at a local level. On the one hand, apartheid bureaucrats and township administrators imposed control on Africans by taking on many of the functions of traditional authority, for example the resolution of land claims, the maintenance of a criminal justice system and the enforcement of policies on urbanisation and employment. On the other, however, the apartheid state kept and maintained a parallel justice system based on African “Customary Law” to deal with “tribal” matters which continually sought to ensure the preservation of “traditional” culture.

The split of authority between bureaucrats and ‘tribal leaders’, coupled with the detribalising influences of urban life, undermined both the family and traditional forms of authority based on patriarchy and gerontocracy, as well as the formation of social capital. From the early 1950s onwards, concern was expressed at the high rate of teenage pregnancy among urban African women and the breakdown in parental authority. Eloff, for example, described the problem quite simply thus:

One of the distinguishing features of the community life of the urban Bantu is the high rate of extramarital births. The available features among the big cities of the Union show that nearly as many children are born outside of marriage as are born within marriage. By far the biggest percentage of these children is born to unmarried mothers.

There are different factors that are responsible for this situation. The most important is probably the lack of control by both elders and the community. To what extent the control over young people has weakened can be seen when it is compared with the position in tribal life. In tribal life, with its solid local group and the peer group within which young people played and worked together, it was difficult to initiate a personal relationship, or to do anything without the knowledge of the rest of the group. The group controlled the relationship between young man and girl and it was difficult to go further than the permissible form of sexual intercourse. The offender would be punished by a powerful social condemnation. In the cities, parental discipline has weakened, the peer groups have disappeared and there is no integrated community that can pass strong social censure. (Eloff, 1953a:27-28)

Detribalisation, and excessive individualism were held responsible for much of this breakdown:

The native has also not succeeded in disporting himself in such a way that individualism, which is typical of the white culture, does not cause damage to the functioning of the family. Members of the family have a strong tendency towards individualistic actions, but now there is no
balance to ensure that their individual behaviour can be coordinated for the benefit of the family as a whole (Eloff, 1953a:37)

and

The majority of parents in the cities did not enjoy any education, and they did not grow up in the city. The school, the cinema, the storybook or the cartoon strip and many other factors open up new worlds to the child, and these form ideas and interests which are alien to the parent. There are thus no communal thoughts, insights or universal interest between parent and child. (Eloff, 1953b:17)

These concerns no doubt helped to encourage and promote the shift in policy towards retribalisation and “Bantu education”, as well as further bolstering the argument in favour of further restrictions on African urbanisation, and presaged the recommendations of the Tomlinson Commission by a few years.

Thus, the failure of the state to fully capture African social institutions limited its ability to influence demographic behaviour within the family, either through promoting regularity or through the utilisation of coercive measures. The enforced complexity of relationships that Africans held to the land further attenuated this power.

3.2.2 Migrant labour, the family, and family structure

Many histories of South Africa focus on the alienation of Africans from the land after the 1913 Land Act had restricted Africans to 13 percent of the area of South Africa. In fact, as both Beinart (1994) and Keegan (1988) have argued, the issues around land were more complex because while ownership may have been restricted, settlement and share-cropping rights often remained unchanged. The implications of this retained articulation certainly limited the ability of the state to affect the family economy, and hence the economics of supply and demand for children.

The family, or the household, is the single most important link between individuals and the state in the analysis of fertility. Along with localised forms of authority, the family acts as a crucial filter between the actions of the state and the behaviour of individuals. As McNicoll argues, “fertility decisions are made within a family setting, subject to intergenerational and intergender power relations, to the exigencies of the family economy, and to local interpretations of often-elastic cultural prescriptions. If you would understand what happens, cherchez la famille” (McNicoll, 1996:1).

Indeed, it was important to apartheid planners that urban migrants' links to the homelands remained unbroken to inhibit permanent settlement in White urban areas, and to justify the resettlement and 'retribalisation' of African South Africans in the homelands.
In South Africa, the concepts of family and household were (and frequently still are), literally, elastic. To define what constitutes a household is probably even more difficult in South Africa than in other sub-Saharan African countries. The migrant labour system, combined with the strict controls on urbanisation, resulted in what have been termed 'stretched households', domestic units that are connected across space by kinship and remittances of income (Spiegel, Watson and Wilkinson, 1996). In this formulation, the 'household' is no longer a spatially discrete entity, but one that exists simultaneously in multiple spaces, economies, provinces and urban/rural morphologies.

As a result of this stretching of households, spousal separation was common, with men tending to be absent from their homes for long periods of time, leaving women behind to tend the land and raise the children more or less unsupported except for remittances. The extent to which apartheid society disrupted Africans' partnerships bore severe implications for gender relations, as will be discussed in Section 3.2.3.

The restrictions on African urbanisation, the Pass Laws and forced removals also had a profound effect on sex ratios in both urban and rural areas. Simkins (1983) has calculated estimates of these ratios using the 1950, 1960 and 1970 South Africa census data (Table 3.1).

<table>
<thead>
<tr>
<th>Census year</th>
<th>Metropolitan Areas</th>
<th>Towns</th>
<th>Rural Areas</th>
<th>Homelands</th>
</tr>
</thead>
<tbody>
<tr>
<td>1950</td>
<td>166 (16.8)</td>
<td>116 (8.7)</td>
<td>117 (34.9)</td>
<td>72 (39.7)</td>
</tr>
<tr>
<td>1960</td>
<td>140 (20.2)</td>
<td>104 (9.1)</td>
<td>112 (32.1)</td>
<td>76 (38.6)</td>
</tr>
<tr>
<td>1970</td>
<td>130 (18.2)</td>
<td>131 (8.9)</td>
<td>110 (24.5)</td>
<td>79 (48.4)</td>
</tr>
</tbody>
</table>

Source: Simkins (1983:53-7). Figures in parentheses indicate the proportion of African South Africans (both sexes) living in each area.

However, if children under the age of 15 are excluded from these ratios (since approximately equal numbers of children of each sex are likely to be found, and hence tend to bias the ratio towards 100), the sex ratio among adults suggests an even more extreme pattern:

<table>
<thead>
<tr>
<th>Census year</th>
<th>Metropolitan Areas</th>
<th>Towns</th>
<th>Rural Areas</th>
<th>Homelands</th>
</tr>
</thead>
<tbody>
<tr>
<td>1950</td>
<td>201 (21.5)</td>
<td>129 (9.4)</td>
<td>131 (33.7)</td>
<td>51 (35.3)</td>
</tr>
<tr>
<td>1960</td>
<td>149 (23.7)</td>
<td>110 (9.8)</td>
<td>121 (31.3)</td>
<td>56 (35.2)</td>
</tr>
<tr>
<td>1970</td>
<td>148 (22.3)</td>
<td>155 (10.3)</td>
<td>116 (23.4)</td>
<td>62 (44.0)</td>
</tr>
</tbody>
</table>

Source: Based on data presented in Simkins (1983:53-7). Figures in parentheses indicate the proportion of African South Africans (of both sexes) aged over 15 living in each area.

---

10 The number of men per 100 women
The data in Table 3.1 and Table 3.2 show clearly the effects of influx control and other government policies on the spatial distribution of the African South African population between 1950 and 1970. The proportion of the African population living in White rural areas decreased, while that living in the homelands increased. Substantial numbers of women urbanised between 1950 and 1960, since the proportion of Africans in metropoles and towns increased, while the sex ratio declined. Despite the hardening of influx control, and the extension of pass laws to women after 1960, the sex ratio in the cities remained constant, suggesting that at least some women were able to find employment or that sufficient circular migration was taking place to keep the sex ratio constant.

The situation in towns was somewhat different. Urbanisation occurred gradually over the twenty years, but it seems that significant numbers of African women were (probably forcibly) removed from towns after 1960. No doubt some went to the metropoles, but it appears that the majority were returned to the homelands.

One of the enigmas arising from the 1974 fertility study (Lötter and van Tonder, 1976) was the relatively small differential between urban and rural fertility. The study found that the (age-standardised) mean numbers of live births was 3.1 in urban areas, and 3.4 in rural areas. Lötter and van Tonder suggest that the smallness of the differential is attributable to a breakdown in social norms leading to higher adolescent fertility in urban areas (although this is unclear from their data); higher coital frequency in urban areas; and the restricted effects of modernisation on urban African fertility, no doubt a consequence of state maintenance of aspects of traditional authority and policies on urbanisation:

In short: Where urban dwellers remain oriented towards traditional values and norms which are internalised under tribal conditions, a decline in fertility does not follow automatically or mechanically (Lötter and van Tonder, 1976:44).

Contrary to this position, Kaufman is unconvinced that the differential is attributable to these factors, suggesting rather that the comparatively high levels of urban fertility reflect a breakdown in traditional breastfeeding and postpartum abstinence norms, resulting in enhanced fecundability.

The evidence presented above suggests a further explanation: that the sheer imbalance of the sex ratios had a depressive effect on rural fertility, while increasing urban fertility. This is in accordance with findings from the Lesotho WFS in 1977, where it was suggested that spousal separation reduced the level of marital fertility by around 10 percent (Timæus and Graham, 1989).
3.2.3 Gender relations

The breakdown of traditional authority, its replacement by bureaucratised control, and the effects of apartheid land policies in conjunction with the migrant labour system had a particularly profound effect on gender relations. Ethnographic accounts provide a rich seam of data on marital disruption and changing gender relations during the apartheid era. These changes can be charted through oral histories of older women collected in the 1970s, in which a recurrent theme is their frustration with what has been termed their “triple oppression” – along lines of class, race and gender. Central to these frustrations was their anger at being left, literally, holding the baby, and the fecklessness of men in their demands for higher fertility.

One of the key manifestations of this change is the rise in households headed by women: according to the 1998 DHS, 42 percent of all households surveyed were headed by women, while 51 percent of African women surveyed in the DHS lived in a household headed by a woman. Much of the literature on female-headed households adopts an overly simplistic mode of analysis. Many such households arise when women are widowed, abandoned, or divorced and many of them are very poor. It is dangerous, however, to view all of them as such, since women may become heads of households as a result of conscious decisions made and initiated by them to achieve their economic and social ends. Van der Vliet (1991), for example, describes how perceptions of, and attitudes towards, modernity and traditionality (and any conflict inherent in this binary) are deeply gendered in a South African context, and how women, especially in urban areas, have tried systematically to claim greater autonomy and freedom for themselves and, in so doing, break out of historical patriarchal and social constraints.

In her doctoral dissertation, Muthwa (1995) also commented on this desire by women for greater autonomy at the expense of marital cohabitation, where she observed among women heading households in Soweto that for many, the perceived advantages of marriage were outweighed by the perceived disadvantages. Amongst her sample, heading a household as a woman, while socially fraught and ambiguous on many levels, afforded women improved qualities of life through increased freedom, independence and potential for financial planning and budgeting, even if their material well-being did not improve. At the same time, while Muthwa found that women became heads of household largely as a result of marital breakdown, in the majority of cases it was the woman who initiated the split. This provides some firm evidence that the decision to become a female head is frequently not imposed, but is the consequence of choices, informed by their institutional context, made by the women themselves.

Other sources corroborate Muthwa’s and van der Vliet’s findings. African women’s descriptions of their daily lives in the 1980s describe very clearly their alienation from men:
‘In fact I am no longer interested in men. I am still tired from my husband. When I look at a man now, I feel dizzy ... it is happier without him’ – D.D

‘[The father of my child] doesn’t help me to support the child. Now I don’t want him to help me because I have a somebody, a boyfriend who helps me. But I won’t marry him.’ – S.P

‘I am not prepared to marry again. It creates more problems for me. What if I get another irresponsible husband?’ – R.R (Vukani Makhosikazi Collective, 1985:137-8)

The tenuous nature of women’s rights to live in urban areas (unemployment was sufficient to be “endorsed out”) and the limited employment opportunities available to African women (the single biggest form of employment of African women was as domestic servants, who had neither job security nor legal protection from summary dismissal), affected their desire for modern contraceptive methods. Since pregnancy almost certainly meant dismissal, and dismissal raised the possibility of being removed from the city, adoption of contraception to delay childbearing became an economic survival strategy for urban African women, as both Caldwell and Caldwell (1993) and Kaufman (1996) have argued. Rural African women faced similar pressures to delay their childbearing. The substantial gender imbalance in rural areas meant that the homelands were populated largely by the very young, the very old, the infirm and women. The absence of male labour to help with ploughing and other agricultural tasks rendered even subsistence farming difficult. Husbands and partners frequently abandoned their women, with remittances to rural areas often petering out as men established alternative households in urban areas. Childbearing, then, became a liability for rural women too, if they were to avoid poverty.
The institutional characteristics of the South African polity between 1950 and 1970 explain why the South African fertility decline has progressed so slowly. The slow pace of decline in fertility is not simply the product of Bantu education and influx control (as Chimere-Dan has argued), nor is it as anomalous as suggested by the Caldwells (Caldwell and Caldwell, 1993). The Caldwells had contrasted the high level of African fertility with the extent and scope of the 1974 National Family Planning Programme and the 1984 Population and Development Programme (what they deemed to be an “Asian-type” programme, with a “higher density of services than is available anywhere in Asia or indeed anywhere else in the world”) and the relatively high level of socio-economic development in the country. They proposed three explanations as to why South African fertility had not fallen further.

Their first explanation suggested that widespread community and political resistance from Africans undermined the government’s family planning programme. This explanation is flawed on several grounds. First, the rapid rates of uptake of modern contraceptive methods by African women in the early 1970s, and the high rates of current use subsequently reported, are incongruent with widespread resistance to the use of family planning. Second, the absence of strong internal resistance to apartheid (no doubt in part a consequence of the extent to which apartheid disrupted African communities, and actively hindered the formation of strong community culture and local institutions) makes the possibility of resistance to the family planning programmes implausible. Third, historical evidence suggests that African opposition to family planning from the 1960s onwards was sporadic and muted and that White fears of a generalised resistance to family planning among Africans were, to say the least, overstated. Most frequently, African opposition to family planning was articulated in terms of the racialised discourse on population, rather than on the merits of contraception per se. (One of the more trenchant articulations of this was a polemic written for the African Communist, which referred to family planning in South Africa as being “genocidal” (‘Letsema’, 1982)). Importantly, too, opposition to family planning was found predominantly amongst men, and was not representative of a more general African opposition. This suggests that, along lines similar to those argued by van der Vliet, objection to the use of contraception was perceived by men to constitute a further threat against their traditional control over women and women’s reproduction. Women favoured the use of the injectable contraceptive (Depo-Provera) not least
because compliance was easy, protection against pregnancy was afforded for long periods at a
time and, since it was ‘invisible’, was less likely to arouse male opposition.

The second explanation offered was that fertility control was “pointless”, since the social
stratification of South African society made social mobility impossible. While African social
mobility indeed may have been difficult and obstructed, this does not square with economic
histories of South Africa. Both Beinart (1994) and Lipton (1985) discuss the changes that
occurred in South African society, and the South African labour market particularly, between
1970 and 1990. They argue that, while social mobility was indeed difficult and obstructed, it was
not impossible. More importantly, this period was characterised simultaneously by both political
repression and the gradual freeing up of the South African social order, as economic growth
systematically undid racist job-reservation policies and the government lost the political will to
enforce restrictions on African urbanisation.

The Caldwell’s third explanation, that there were “profound cultural and social differences”
in South Africa, resulting in a “refusal” by Africans to limit their fertility has been falsified by
more recent data and by the lack of women’s opposition to contraceptive use for either birth
spacing or fertility limitation indicated in demographic surveys conducted after 1970.

Rather than being explanations, the Caldwell’s observations are indicative of the institutional
dynamics that were at work in South Africa over that period. The limited ability of women to
change their own position in society, the precarious nature of urban and rural women’s existence,
together with their rising frustration with their men is thus responsible for the rise in demand for
modern forms of contraception identified by the government in the mid-1960s.

However, while African women certainly availed themselves of the contraception provided
by the government, the motives underlying that uptake warrant further analysis. Two distinct
motoes for contraceptive use have been identified in the literature. The first is parity-specific
limitation, that is, using contraception to prevent a subsequent birth once a desired parity has
been achieved. However, our earlier research has shown that African South Africans did not
engage in parity-specific fertility limitation. Thus, although women were reported as being in
favour of using contraception for this purpose, practice did not necessarily follow.

The second motive is the use of contraception to increase the interval between births. The
possibility that African women were using contraception for this purpose was missed by many
commentators of the time (and certainly by the planners behind the population programmes),
who failed to draw a distinction between contraceptive use for birth spacing and use for fertility
limitation. An article in the South African Medical Journal by van Dongen (1975) is a case in
point: he argued that Africans needed to make use of family planning clinics in order to reduce population growth, and failed to appreciate that women were possibly using contraception for entirely different motives. Where there was awareness that women may have had different motives for using contraception, others did not pick up on the implications. Thus, for example, Geraty cited evidence from a survey conducted by the Family Planning Association of (then) Rhodesia that

“birth control was seen as a measure introduced by the Government in order to reduce the Black population... On the other hand, family planning, used in the context of spacing births, was acceptable and meaningful, since the target population was able to associate it with practices that had been prevalent in traditional society...” (Geraty, 1975:425)

As has been shown earlier, by the start of the 1970s, support for contraceptive use to space births was almost universal among African women in metropolitan areas. Thus, contraception, while widely desired, was viewed - primarily - as a mechanism for spacing children, rather than limiting fertility. However, in the context of South Africa, this simple dichotomy is inadequate. Both currently and historically, parity-specific fertility limitation is unlikely to have occurred during the South African fertility transition. However, the pattern of contraceptive use and fertility among African South Africans is also not entirely consistent with the use of contraception for birth spacing. Women’s decision to use contraception was contingent neither on her parity (i.e. limitation) nor on the age of her youngest child (i.e. spacing in the conventional sense). This suggests a third pattern of contraceptive use, probably most associated with societies where marital relationships are as severely disrupted by institutional dynamics as in South Africa, hinging on women’s desire to delay pregnancy and its associated costs sine die, and without consideration for parity or age of other children".

This observation forces us to radically reassess the efficacy and success of the population programmes implemented in South Africa. The family planning programmes introduced in 1974 and 1984 helped to make modern contraception methods easily and widely available to African women, and were effective at least insofar as they assisted the rapid uptake of contraception by African women. However, urban African’s women demand for contraception predated these programmes, and hence that demand must, in some sense, be seen to have arisen from outside the realm of White discourse on population. Moreover, there is little evidence that these programmes altered the pace of the South African fertility decline, and given that the

---

11 I am grateful to Dr Ian Timæus for pointing out this distinction.
fundamental reason for the launch of those programmes was to provide a vehicle for the rapid decline of African fertility, the programmes must be said to have failed.

Thus, although adoption of contraception was fairly rapid by African standards from the 1960s onwards, the effect on the overall level of fertility was less than expected because it was used for neither spacing nor limitation purposes, but for simply delaying the next birth. As increasing numbers of women adopted contraception for this purpose, the effect would have been to set in motion a chain of increasingly delayed births. It is this process that has led to the very slow pace of the decline in South African fertility: Bongaarts (1999) has shown mathematically that an apparent decline in fertility will appear if, in every succeeding year, a greater proportion of women delays their birth by a longer time.

What the programmes offered, instead, was a mechanism whereby African women could assert a greater degree of control of their lives and their reproduction in a setting where the state and its institutional structures exercised huge power over individuals. Women's tenuous urban livelihoods, and poverty in rural areas, coupled with the state's inability to fundamentally alter the conditions of African household economics, meant that women sought modern contraceptive methods not to limit their fertility, but as an economic survival strategy.

In many respects, then, it is fair to say that the African populace subverted the government’s family planning programmes. Despite the imbalance between structure and agency in the South African context described earlier, the dynamics of the South African fertility decline and women’s responses to the institutional forces ranged against them suggest a Giddensian analysis of the dynamics of the South African fertility transition. The evolution and articulation of White fears that they were being swamped by African population growth precipitated state responses to those fears in the form of a system of generalised racism and found their expression in the government’s family planning programmes. African women, however, were not simply passive targets of these policies, responding mechanically to the state’s bidding. Rather, as Giddens (1984, 1990) has theorised, individuals and the state recursively interacted with each other. With the failure of modernisation-led fertility decline, the state sought to alter African women’s fertility preferences through the provision of contraception in the hope that women would avail themselves of these technologies to practice parity-specific fertility limitation. African women, however, saw this intervention as an opportunity to assert greater control over their lives in a way that made sense to them. What happened in the course of the South African fertility transition thus relates strongly to Giddens’ assertion that

“the reflexivity of modern social life consists in the fact that social practices are constantly examined and reformed in the light of incoming
information about those very practices, thus constitutively altering their character” (Giddens, 1990:38).

As we have seen, women rationalised their adoption of contraception in terms of the institutional forces set against them. In terms of gender relations, too, women's recasting of their position – with men occupying an increasingly peripheral space in the constitution of their quotidian realities – is indicative of this reflexivity in action.

Thus, African women in South Africa seem to have taken it upon themselves to subvert the intentions of the government's family planning programmes. Not out of political distrust or malice, however, but agentically, as government policies were incompatible with the reality of the constraints under which African women were forced to live their lives.

This paper, then, suggests that the slow pace of the South African fertility decline can be attributed to a range of institutional and structural factors. As a result of internal contradiction and policy changes over time, the state was never able to establish a firm grip on the African household economy, and thereby manipulate the economics of the supply and demand for children. Government social and economic policies, whilst appearing to adopt the rhetoric of modernisation and demographic transition theory, were generally inimical to rapid fertility decline. The policies adopted (particularly those relating to influx control, education and urbanisation) had the effect of attenuating the potential benefits of modernisation.

Beyond the structural constraints on women's lives imposed by apartheid, the apartheid state embodied neither of McNicoll's two paths of state-led fertility decline. State-individual relationships with Africans were not regularised, but equally, the state could not (and would not) use duress to dictate the pace of the South African fertility transition.

Second, apartheid institutions had the (unintended) effect of precipitating an irrevocable transformation of gender relations between African men and women. Migrant labour, restrictions on urbanisation and forced removals distorted and disrupted the formation of stable households and relationships. By the early 1980s, large numbers of African women were living in households headed by themselves or by other women, and – in many respects – viewed men as superfluous. This change in gender relations is made clear too, by women's adoption of modern contraceptive methods in the face of male opposition based on political and patriarchal views.

The slow decline in fertility and the rapid rise in birth intervals are thus not incongruous with each other. Rather, the structural and institutional context in which African women found themselves in between 1960 and 1990 has resulted in a new pattern of fertility decline.
The South African fertility decline represents, in many respects, an interesting counterpoint to that seen elsewhere in Africa and the developing world. From an institutional perspective, aspects of the decline exhibit similarities with that seen elsewhere in the sub-continent. While, the state was relatively strong and did not show the same prebendal tendencies so often associated with states in the sub-continent, the inability of the South African apartheid state to direct the course of the fertility transition is indicative of its failure to fully capture the African population. This failure, combined with the contradictory and incompatible ambitions of government policy provides a better explanation for the slow pace of the South African fertility decline than simply instrumentalist assessments based on the provision of services, and apartheid restrictions on spatial mobility.

In keeping with McNicoll’s view, the role of the South African state in guiding the fertility decline in South Africa is essentially peripheral. The decline was not hastened by the government’s early implementation of family planning services – rather, contraception offered women an opportunity to take control of their own reproductive needs within the broader structure of South African society. The combination of apartheid policies, the institutional structure of South African society, and the subversion of the government’s strong and vigorous family planning campaigns explains the dynamics of the South African fertility transition far better than simply appealing to any one of these forces, since they were reflexively bound up with, and continually mediated, each other.

Thus, the South African fertility decline provides further support for McNicoll’s argument that fertility transition is innately and inherently institutional. Where social institutions are ill-conducive to fertility change, even the strongest family planning programme is likely to have a limited impact.


