



Health in South African township communities

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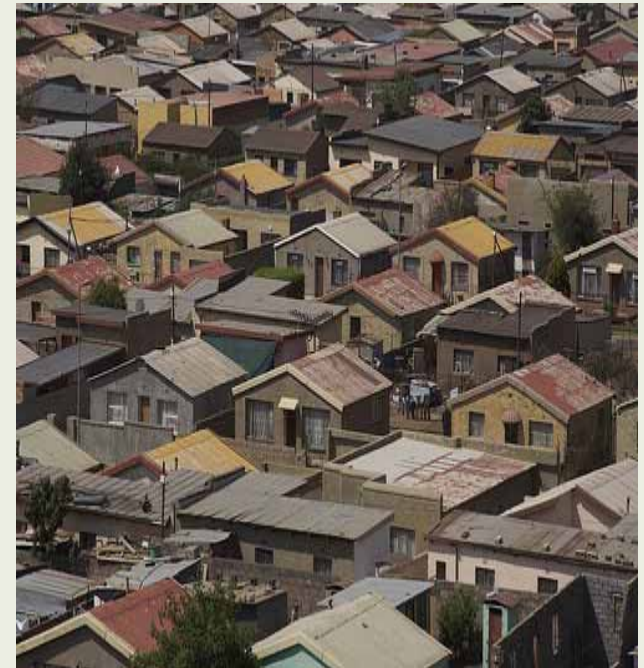


Background

- South Africa is a middle-income country of 49 m people with dramatic disparities in wealth, despite a GDP per capita of US \$8,900
- The national Gini coefficient for income inequality (0.58) demonstrates the second-highest level of inequality among all countries worldwide
- The country is grappling with the public health legacy of the colonial and apartheid eras while contending with new public health threats linked to a changing urbanisation, as well as the devastating HIV/AIDS epidemic
- Much of the patterning of health, poverty, and race observed in contemporary S. Africa is the result of the enduring effects of social, political, and economic discrimination.

Introduction

- Review the health and health status among urban or township dwellers in South Africa
- Provide some evidence on the current interplay between living in urban townships and health in South Africa.
- **Township** refers to the (often underdeveloped) urban living areas that, under Apartheid, were reserved for black Africans and Coloureds, but also working-class Indians). Townships are on the periphery of towns and cities. Townships sometimes have large informal settlements nearby.



Methods

- A systematic search of literature on the health of South African township dwellers was conducted.
- The search included major health databases such as PubMed, Medline, etc.
- A review of literature on the health of South African township dwellers was conducted.



Findings and Discussion

Source of health problems in SA township communities

“It is quite evident that the structural conditions of the past, most notably the racial discrimination and labo(u)r migration policies systematized by apartheid-era governments, underlie much of the current health problems affecting urban township dwellers in South Africa”.



Myer, Ehrlich and Susser (2004) Social Epidemiology in South Africa.
Epidemiol Rev 2004;26:112-123

“Bipolar” epidemiologic transition

- The general shift of a middle-income country toward an increased burden of **chronic diseases**, such as ischemic heart disease, stroke, and cancer, has been joined by a rise in **infectious diseases** associated with HIV/AIDS and the persistence of the **classic diseases of poverty**, such as childhood malnutrition, gastroenteritis, TB and pneumonia .
- One of the major lifestyle changes associated with urbanization is **smoking**, the prevalence of which is increasing in urban... township communities.

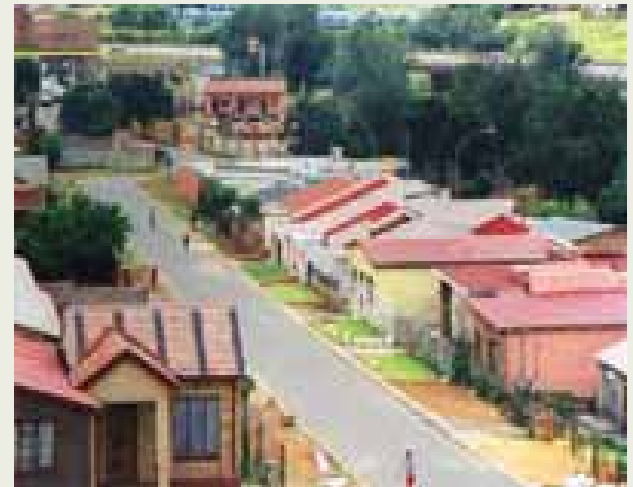
Epping-Jordan JE, Bengoa R, Yach D. *Chronic conditions - the new health challenge*.

S Afr Med J 2003;93:585–90

Bradshaw D, Groenewald P, Laubscher R, et al. *Initial burden of disease estimates for South Africa*⁷, 2000.
Cape Town, South Africa

Causes of mortality

“In South Africa of the 1960’s, the causes of mortality differed across racial groups. For example, in adults aged 15–64 years, analyses from this period ranked ischemic heart disease, motor vehicle accidents, stroke, and digestive cancers as the most common causes of death among Whites, as compared with *ill-defined causes, homicide, stroke, and tuberculosis among Blacks*”



“Social disadvantage in SA townships is associated with increased morbidity and mortality”.

Causes of mortality and morbidity among township dwellers

The major causes of mortality and morbidity among township dwellers include:

- Violence;
- Environmental exposures such as coal smoke;
- Psychological stress;
- Stroke, hypertension and diabetes mellitus
- The limitations of township medical services

Injury and violence in SA townships

- "Unnatural" death, including death due to violence, accident, or suicide, was the leading reported cause of mortality in the S. African adult population between 1997 and 2001;
- Rates of both intentional and accidental injury are at least 1.5 times higher in urban townships than in rural communities;
- There is evidence to suggest substantial racial and socioeconomic variations in both the degree of violence and the forms of violence experienced.
- Violence against women (GBV) is a major component of violent crime, especially in poorer urban communities.

Wigton A. Firearm-related injuries and deaths among children and adolescents in Cape Town, South Africa: 1992–1996.

S Afr Med J 1999;89:407–10

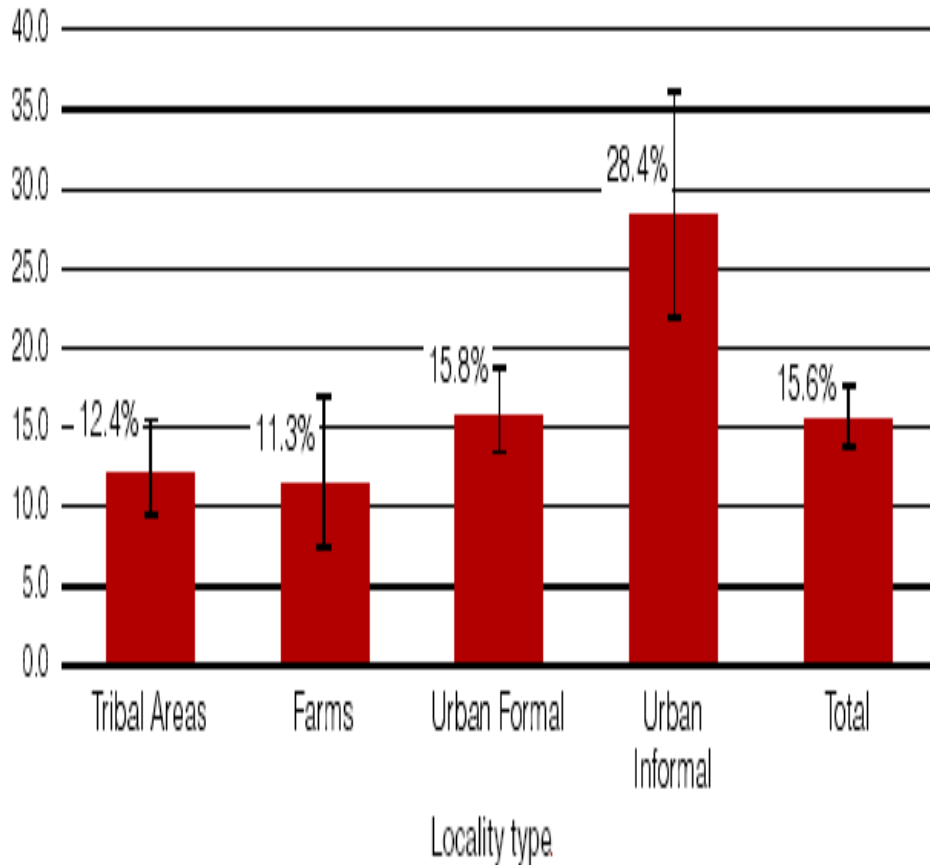
Jewkes R, Abrahams N. The epidemiology of rape and sexual coercion in South Africa: an overview.

Soc Sci Med 2002;55:1231–44

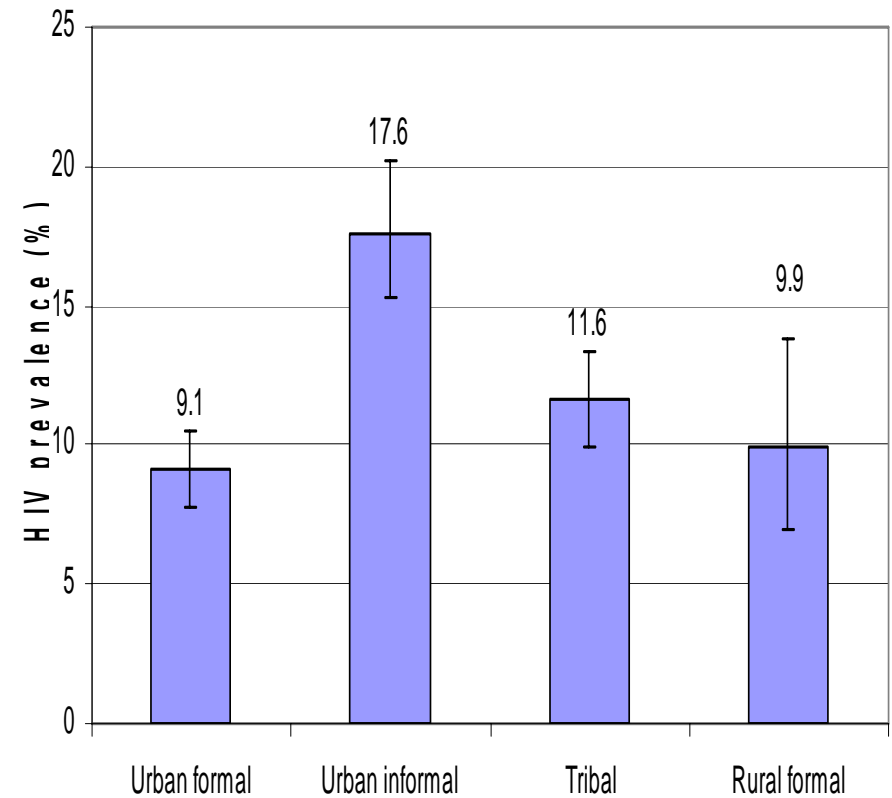
Xenophobic violence in SA townships

- In May 2008, an outbreak of violence against foreign nationals in South Africa left 62 people dead, at least 670 wounded, dozens raped, more than 100,000 displaced, and hundreds of thousands of dollars worth of property looted, destroyed or appropriated by local residents.
- A study by the Forced Migration Studies Programme (FMSP) at Wits University said violence was associated with “localized struggles for control over urban space”.

HIV prevalence by locality type, South Africa in 2002 and 2005




HIV prevalence was highest (28.4%) in SA townships in 2002



HIV prevalence was highest (17.6%) in SA township communities in 2005

Conclusions

- The evolution of townships in South Africa offers a glimpse of the complexities that arise in identifying and dealing with health challenges of peri-urban or township communities.
- Evidence from South Africa suggests that there are links between socioeconomic factors and health of township dwellers.
- Public health can and must play an essential role in meeting the health needs of urban township dwellers that are exacerbated by the HIV/AIDS epidemic.



Thanks