



MEDIA STATEMENTS

13 July 2020

BY MINISTER LINDIWE ZULU, MP, ON THE OCCASION OF THE SOCIAL CLUSTER MEDIA BRIEFING

Programme Director and Minister in The Presidency, Mr Jackson Mthembu; Colleagues; Ladies and Gentlemen of the media.

We are thankful for the opportunity to update the media and our nation on measures and progress made to manage the impact and spread of the COVID-19 pandemic in the sector.

Last week, the Department of Social Development gazetted directions regarding the phased reopening of early childhood development (ECD) centres and partial care facilities.

Prior to the publication of the directives, the Department had issued a call for the sector to participate in the self-assessment exercise which is critical in determining the state of readiness to safely reopen amid the coronavirus pandemic.

From the outset, let me reiterate our position in this matter. We take our responsibility to manage and coordinate this sector, which nurtures the future leaders of this country, very seriously. Our position is that we must first determine the percentage of ECD and partial care facilities that are in a position to safely reopen because the sector is incredibly large and diverse.

In addition to serving as an important role-player of our child care protection system, especially for working families with young children, the child care sector also represents an important employment sector for women and - in particular, women in poor communities.

We know just how critical this sector is and contrary to the narrative that has gained media traction, we are not opposed to its reopening. Rather, the steps we have taken to date are to ensure that when the sector reopens, parents/caregivers do not have to worry about the health and safety of their children.

For this reason, the directions include the health and safety guidelines, daily health screening, the use of personal protective equipment, physical distancing and more frequent and rigorous cleaning.

As of yesterday 12 July 2020, over 9 881 ECDs had completed the online self-assessment. An additional 8 751 completed the assessment manually - this bringing the total number of ECD centres and programmes that have done self-assessments to 18 632.

Of this number, 5 613 indicated that they can comply and were ready for reopening while 6 030 centres stated that will require support to operate under the current directions.

Of the 9 881 centres that completed the assessment online, 1 481 were verified by the Department and meet the compliance requirements.

The implementation of the measures outlined in the directions will not happen overnight. And that is why we want to take every necessary measure to ensure the safety of children and staff. We plan to expedite the verification process to avoid any further delays. We welcome the initiative by NEDLAC to partner with us in this regard.

I must also indicate that the Department continues to provide subsidies to ECD centres during the state of national disaster. In addition, we have waived the requirements for programmes that already receive subsidies to submit new applications for funding for the current financial year while the national state of disaster is in place.

The collective amount being paid annually towards this funding is R3.1 Billion, targeting early childhood development programmes in poor communities in particular.



With regard to the roll out of the Vangasali campaign, we have to date reached 26 086 unregistered ECD centres and programmes. This is important in ensuring that unregistered centres and programmes receive the necessary support to comply with the provisions of the Children's Act.

Ladies and Gentlemen, allow me now to update the nation on the administration and payment of the Special COVID-19 Social Relief of Distress Grant. To date, we have received over 7.5 million (7 558 555 - seven million five hundred and fifty eight thousand five hundred and fifty five) applications through the various electronic application platforms which include USSD, Digital, WhatsApp and email.

Of this number, a total of four million four hundred and twenty four thousand, seven hundred and twenty (4 424 720) have been approved.

A total of 2 Million, one hundred and seventy four thousand and forty six (2,174,046) constitutes applications that were found to be active on various databases including those who are currently receiving social grants, those receiving UIF benefits or are appearing on the active database of UIF contributors, those who are receiving NSFAS stipends, those who are found on government employee's databases (Persal and persol).

We acknowledge the public's frustration with regards to the administration and payment of this grant. However, let me hasten to add that the system is dependent on the verification of the applicant's information by other stakeholders to reduce the margin of error and avoid paying ineligible applicants. Given the limited financial resources available, we have to ensure that the money only reaches those who qualify for this support.

In line with my commitment that we will pay successful applications from May 2020, I can confirm that three million four hundred and twenty nine thousand, eight hundred and eight (3 429 808) of the approved applications were paid as at 12 July 2020. We have so far disbursed R1, 200,432,800.00 (One billion two hundred million four hundred and thirty two thousand and eight hundred rand). These payments are all for applicants who applied in May 2020.

SASSA will on a monthly basis, re-assess all applications to ensure that where circumstances have changed and income is received from any other source the grant will not continue to be paid.

The re-assessment of all applications has already commenced and the applicants are being re-assessed against SOCPEN, UIF, NSFAS, Persal and Persol in preparation for batch release of June payments from this week.

We are currently experiencing the following challenges in relation to the speedy administration and payment of the Special COVID-19 SRD Grant:

Slow processing the special COVID-19 SRD Grant.

The initial delays have been largely due to a number of reasons including systems development (the system we are using has been custom developed for this grant alone), the need for multiple data verification sources, and slow response to requests to provide banking details by successful applicants. SASSA has enhanced its systems to improve the validation processes.

Bank Accounts that failed the verification process A high number of applicants failed the Bank Accounts Verification process largely due to Errors in the capturing of Banking information and some applicants attempting to use other people's bank accounts. Approximately one hundred and twenty three thousand (123 000) failed bank account verification which is facilitated through the National Treasury prior to crediting of accounts.

In this regard SASSA has requested Post Bank to open accounts for the clients to enable payment without delay. Clients will be able to update their banking details and preferences in future should they wish to make use of different bank accounts or even the cash send option and not continue receiving the money through the post office.



High Number of declined applications

Over the last two weeks, I have instructed SASSA to review all declined applications after I noticed the high number of rejections, particularly those that were declined due to their details appearing on the UIF database. SASSA has undertaken an internal reconsideration of previously declined applications due to UIF, after having received an updated database from the Department of Labour and Employment.

The number of declined applications as a result of the ID having been found on the UIF database has declined significantly. Approximately 900 000 validated applications were found to potentially qualify for payment from May 2020 following the reconsideration process.

SMS messages were sent to all these applicants indicating that they have been provisionally approved and must provide SASSA with their banking details. SASSA is currently processing payments to these applicants.

In order to address further exclusion errors, SASSA is implementing a Recourse Mechanism for applicants who have been declined and wish to review the decision. Applicants can now direct their appeals for review to: covid19srdappeals@sassa.gov.za. This facility will have dedicated staff to respond timeously to all emails. I would like to point out that applicants requesting recourse need not upload documents – the recourse process will be electronic.

Work is currently underway to develop a recourse mechanism which will attend to the complaints and disputes raised, while not extending the lifespan of this intervention. In addition, any recourse mechanism will have to be electronic in order to cope with the numbers involved – manual processes are not a viable option at all. The recourse process will be gazetted in due course. This will provide the legal framework within which the reassessments will take place. This will ensure that all applicants are dealt with in a transparent and administratively just manner.

SASSA is also continually engaging with the various Departments to refine the databases received to ensure that they are as current as possible, to ensure that the correct decisions are made.

Management of Disability Grants

Since the declaration of the state of the national disaster, I have been inundated with concerns about the limited access for grant applications by persons with disabilities. SASSA has implemented a strategy to progressively reintroduce these services in accordance with available resources, taking into account that access to health facilities remains a challenge.

SASSA has contracted 465 doctors in all the provinces who are assisting with assessments. Priority is being given to those who were assessed prior to lockdown, but did not complete the administrative process, as well as those who were booked for assessments, which could not take place during Levels 4 and 5 of the lockdown.

New applicants will be assisted at the SASSA offices, on an appointment basis and subject to the availability of resources to complete medical assessments, which are a legislated prerequisite to an application for a disability or care dependency grant.

In addition, I am considering a further extension to the period for which temporary disability grants will be paid in an effort to address the concerns of a very vulnerable sector of our society. Further announcements in this regard will be made shortly.

We have updated the Directions related to the Special COVID-19 SRD Grant to include payment of the grant to “holders of special permits under the Special Angolan Dispensation, the Lesotho Exemption Permit Dispensation and the Zimbabwean Exemption Permit Dispensation, and asylum seekers whose section 22 permits or visas are valid or were valid on 15 March 2020.”

The amended Directions, informed by the North Gauteng High Court judgment were gazetted on 2 July 2020. It will cost approximately R689 million to implement this judgement. We are currently in engagements with the Department of Home Affairs to verify the authenticity of all permits to limit fraudulent applications.



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It is important to note that like all other applicants, the asylum seekers and special permit holders will also be subjected to the eligibility criteria. In addition, SASSA has engaged the United Nations High Commission on Refugees, to obtain information on refugees and asylum seekers, as well as organisations working with these communities, to ensure that information on the grant and application channels is available for all those who seek to apply.

Still on the subject of the Special COVID-19 SRD Grant, I would like to mention that discussions for the introduction of the Basic Income Grant (BIG) have been brought back to the table. The BIG is being considered in view of SASSA's legislated mandate as well as the primary mandate of the National Development Agency (NDA).

In relation to the BIG, the NDA's primary mandate of "eradication of poverty and its causes by granting funds to civil society organisations for the purposes of (a) carrying out projects or programmes aimed at meeting development needs of poor communities; and (b) strengthening the institutional capacity of other civil society organisations involved in direct service provision to poor communities."

SASSA has a comparatively well-developed infrastructure that reaches far more people (31.2%) than any other agency. Therefore, the BIG will result in most of the poorer individuals continuing to access the CoVID-19 SRD grant benefits.

The BIG will simplify coverage and ease of grant administration. Granted that our current social security grants' system does not permit universal coverage, the current proposal will help realise the government's broader social security reform environment. The BIG will be unconditional, individually-targeted and at the level that will lift individual South Africans out of poverty.

Since we already have categorical grants for children, older persons and persons with disabilities, the BIG will be an income support grant for the population aged 18 to 59.

Historic and emergent factors (particularly the CoVID-19 pandemic), demand that the BIG be introduced within our fiscal capabilities.

Currently, the most vulnerable groups of our population are the youth between 18 and 24 and the elderly between 50 and 59. Targeting these groups first and then progressively expanding to other age groups may be warranted.

We fully welcome the President's pronouncement on the immediate reinstatement of the ban of the sale of alcohol and urgently instructs the relevant departments of government (the Department of Social Development being among these) to mobilise and coordinate their resources and programmes towards invoking aspects of the National Drug Master Plan as well as the Gender-Based Violence and Femicide Master Plan.

Therefore, the Department of Social Development will urgently invoke its programmatic responses as part of a government-wide response that is planned and deployed through the Provjocs, Natjoints, inter-ministerial committees (IMCs) and National Coronavirus Coordinating Council (NCCC).

Noting that invoking these CoVID-19 responsive measures will immediately ensure, among others, the deepening of efforts to protect women during this period (particularly noting the curfew that is applicable between 21h00 and 04h00), programme-level linking of these will forthwith take place.



As it has been demonstrated, the ban of the sale of alcohol will contribute towards freeing up the much needed medical capabilities and resources within our medical facilities. We recently learned that permitting the sale of alcohol correlates with increases in non-CoVID-19 admissions in hospitals.

We cannot emphasise the need to partner with civil society organisations (CSOs), community-based organisations (CBOs), faith-based organisations (FBOs), etc. in realising compliance with the President's pronouncement, regulations and departmental directions. Likewise, CSOs, CBOs, FBOs, etc. have a greater role in monitoring incidents of women abuse behind closed doors; disseminating CoVID-19 information in local languages and dialects; identifying the need for intervention by social programmes; etc..

Social Behavioural Change

Due to their proximity to communities, CSOs, CBOs, FBOs, etc. can play a pivotal preventative role in our society's fight against the pandemic. For this reason, together with the Department of Health, the Department of Social Development is engaging these social activists in order to reach members of communities where they are. The Inter-sectoral Ministerial Advisory Committee that the two Ministers have established is reaching out to behavioural scientists and practitioners as well as academics and researchers in the humanities and social sciences for their contributions towards establishing socially-sustainable solutions to the challenges that accompany the CoVID-19 pandemic.

Noting that the virus is transmittable through human and social interactions, this initiative provides the government with a dashboard view of the relevant social factors in real time as these unfold in communities (especially in "hotspots").

Food Security

The COVID-19 pandemic is affecting food systems and all dimensions of food security across the country. In this regard, our response is to ensure access to nutritious food to vulnerable individuals and households. To date, over 800 968 food parcels were distributed nationwide, translating into 4 4 004 840 people that have benefitted from the food relief programme. Additional 1 210 968 food parcels were distributed with the support of partners organisations benefiting 6 054 840 people.

The sector has spent an amount over R 542 674 114 since the declaration of the state of national disaster. This excludes contribution from partner organisations and SASSA expenditure on the Social Relief of Distress.

The advent of COVID-19 compels the sector to reconsider our food security response mechanisms to meet the demand on the ground. We are looking at various ways to strengthen the current food networks and distribution to meet the basic needs of vulnerable households.

With regard to Gender Based Violence and Femicide, the Department has developed the Victim Support Services Policy and Bill which have been approved by Cabinet. This legislative framework will provide guidance on how support services may be provided to victims of violent crimes. The Bill has been sent for printing and will be published for public comments on 17 July 2020.

We have increased the capacity of the GBV Command Centre through recruitment of social work interns from the Health and Welfare SETA and NEDLAC to support and intensify services rendered. The officials



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will be deployed to the provincial departments, the National DSD office and the Gender Based Violence Command Centre.

We have also recruited additional 1 809 Social Workers on a 6-month contract to assist with the provision of psychosocial care and support to vulnerable groups, families and communities.

We take this opportunity to wish a full and speedy recovery to the Deputy Minister of Social Development, Ms Hendrietta Bogopane-Zulu who received her positive results this morning.

I thank you.