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DA cannot claim it is responsible for a decline in infant mortality in Cape Town

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The Democratic Alliance has claimed that it is responsible for a decline in infant mortality in Cape Town. We have examined the publicly available data. Since the DA took office in 2006, infant mortality has not changed for the city as a whole. It has increased in Khayelitsha.

The Democratic Alliance (DA) has released a report titled *The Cape Town Story*.

The press statement released with the report states "the DA has improved public healthcare, cutting the infant mortality rate from 25.2 in 2003 to 20.8 in 2009 and achieving an 80% TB cure rate, the highest in the country." The *Cape Town Story* states, "The City?s Infant Mortality Rate improved from 25.2 in 2003 to 20.8 in 2009, in a context where the national rate has declined (to about 50)."

A reference is given to a speech by James Vos, chair of the health portfolio committee on 4 January 2011. We cannot find the speech and therefore are unsure what primary source is being referred to.

However, several graphs from the City of Cape Town show that the DA's claim to have cut infant mortality is unsupported by the publicly available evidence.

The following graph appears to show infant mortality in Cape Town's eight districts and then the city as a whole for 2003 through to 2009.

Infant mortality was recorded as 25 per 1,000 in 2003 and 21 per 1,000 in 2009. However, the DA only came to power in April 2006. The infant mortality rates for the city for each year the DA has run the city are:

2006: 21

2007: 20

2008: 20

2009: 21

There is no evidence here of a decline in infant mortality during the DA's rule. Whatever decline is shown by the data occurred from 2003 to 2006, the years preceding the DA coming to power.

The following graph shows infant mortality in Khayelitsha:

From 2003 to 2006 infant mortality declined from 42 to 31 per 1,000. A slight decline was recorded again in 2007, but then it rose in 2008 to 36 per 1,000. It was 35 per 1,000 in 2009. This shows that during the period that the DA has run the city the data records an increase in infant mortality in Khayelitsha.

The following graph shows that the major cause of infant mortality in Khayelitsha has moved from AIDS to gastric diseases, although because the two are often connected it is hard to draw conclusions from this.

In summary, the data shows that infant mortality has not changed in the city as whole during the DA term. Before the DA took power it was declining. In Khayelitsha, but infant mortality is has increased in this district during the DA's rule. The causes of this are unclear.

We wish to emphasise that we do not claim that the DA is the cause of the stagnation of infant mortality across the city or the increase in Khayelitsha specifically. However, there is no way the DA can claim responsibility for a decrease in infant mortality in Cape Town during its term in power, at least not based on the data we have seen.

What could explain the increase in infant mortality in Khayelitsha since 2006? We are not sure, but here are some possibilities to consider:

- The increase in infant mortality since 2006 might be a random fluctuation.
- It might be due to a decline in the sanitation infrastructure in Khayelitsha.
- Statistics gathering might be inconsistent.

We emphasise these are speculations.

For much of the last decade, there have been excellent people trying to improve health in Cape Town, including (to list a few) Virginia Azevedo, the late Ivan Toms, the staff of Medecins Sans Frontieres and the various city health facilities, researchers in public health at the three major universities and the members of TAC Khayelitsha (who distribute thousands of condoms monthly). They have worked under both DA and ANC governments. Whatever achievements have been made ?and there have been considerable ones-- the kudos belong to them, not to any one political party.

This is adapted from an article published by Nathan Geffen (TAC treasurer) and Gavin Silber (SJC Co-ordinator) in the Cape Times on Thursday 31 March and an extended version of that article published on Politicsweb.

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