

TAC's response to Gareth van Onselen

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Created 2011/04/04 - 5:35pm

4 April, 2011 - 17:35 ? moderator

On Saturday 2 April, the TAC released a statement adapted from articles by Nathan Geffen (TAC's treasurer) and Gavin Silber (SJC Co-ordinator) in which they pointed out a misrepresentation in the DA's booklet *The Cape Town Story* and the DA's accompanying press statement.

The DA made two statements:

1. "he DA has improved public healthcare, cutting the infant mortality rate from 25.2 in 2003 to 20.8 in 2009 ... " (Press statement with release of the Cape Town Story)
2. "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)." (Direct from the Cape Town Story)

The DA therefore claims it is responsible for the decline in infant mortality from 25.2 per 1,000 in 2003 to 20.8 in 2009. The DA only came to power in April 2006. So any consideration of the infant mortality rate under the DA really has to look at the period 2006 to 2009. Geffen and Silber pointed out that the infant mortality rate in Cape Town was 21 per 1,000 in 2006 and 21 in 2009. This contradicts the DA claim it is responsible for the drop in infant mortality. In response the DA's spokesperson Gareth van Onselen has stated, "The TAC has deliberately misrepresented the facts. It needs to retract its statement and apologise to the DA for trying to manipulate evidence, no doubt in order to further the ANC's agenda. The City of Cape Town has a proud track record of delivering to all citizens, especially the poor. The IMR is a good example of this commitment. The DA stated in the Cape Town Story it had reduced the infant mortality rate in Cape Town, since coming to power. That statement is absolutely true: In 2005 the IMR was 22.28, in 2009 it was 20.76."

There are several problems with Van Onselen's statement:

1. Why did the DA use 2003 as the base year if it cannot possibly be responsible for a decline in infant mortality from then until April 2006?
2. The DA came into power in April 2006, i.e. 4 months through the year. It would take months, if not longer, for a party coming into power to effect the kinds of profound changes needed to change infant mortality. It is therefore better to use 2006, at earliest, as the base year rather than 2005 as Van Onselen has done. In which case the data given by Van Onselen is as follows:

2006: 21.4/1000

2007: 20.28

2008: 19.78

2009: 20.76

3. The substantial drop in infant mortality from 25 in 2003 to 21 in 2009 per 1,000 given in the DA report can now be substituted with the much more modest claim: 21.4 in 2006 to 20.8 in 2009. There is no meaningful difference here. To quote infant mortality to a single decimal place --let alone the second decimal place used by Van Onselen-- requires

knowledge of the precise infant population of Cape Town to the nearest 325 or so. No one knows Cape Town's infant population to such a high degree of accuracy.

4. Even putting aside Van Onselen's false level of accuracy, his data shows a stagnation in infant mortality from 2006 to 2009 when compared to the drop from 2003.

Van Onselen stated, "The TAC has deliberately misrepresented the facts".

Although we will not sue, this is a false defamatory allegation. Geffen and Silber used data from a November 2010 City of Cape Town presentation. That is the public data they had access to and were entitled to use. That data quotes infant mortality to no decimal places, which as explained in point 3 above is the better way to quote Cape Town's infant mortality.

In summary we reiterate: **The data shows that the DA cannot claim responsibility for a drop in infant mortality in Cape Town.**

It is our job as a civil society organisation to hold government, whether it be the ANC or DA, accountable, especially on health-care. We find the defensive tone of Van Onselen's statement disturbing. We copy it below so that readers can make up their own minds.

DA Statement

Official Response:

The TAC has deliberately misrepresented the facts. It needs to retract its statement and apologise to the DA for trying to manipulate evidence, no doubt in order to further the ANC's agenda.

The City of Cape Town has a proud track record of delivering to all citizens, especially the poor. The IMR is a good example of this commitment.

The DA stated in the Cape Town Story it had reduced the infant mortality rate in Cape Town, since coming to power. That statement is absolutely true: In 2005 the IMR was 22.28, in 2009 it was 20.76.

Further, the DA-led government has made huge progress reducing the IMR in poor and impoverished areas. For example, in Klipfontein (which includes Gugulethu) the IMR has dropped from 27.41 in 2005 down to 23.42 in 2009. It is true the IMR in Khayalitsha has stayed the roughly the same (34.72 in 2005 to 34.85 in 2009). At no point in the Cape Town Story did we claim otherwise, and for the TAC to try and misrepresent that particular district as representative of the whole of Cape Town is deeply disingenuous and devious. It should be ashamed.

The full facts from the City, on which the Cape Story was based follow below.

Gareth van Onselen

DA Head of Election Communications

Infant Mortality Rate

Definition

Number of deaths <1 year per 1,000 live births for that year

Layman Description: This measures the number of deaths of children under the age of one year out of every 1,000 live

children born in the same year.

The figures quoted by the TAC have been rounded up one decimal point.

One of the best indicators of an effective health service is the Infant Mortality Rate (IMR). The City's IMR has improved and this compares very favourably with the national figure of over 50.

Background

City Health delivers its services on a decentralised area based management model based on the World Health Organisation (WHO) district health service principles.

This has resulted in the City being divided into eight sub district management areas i.e. Eastern, Khayelitsha, Klipfontein, Mitchells Plain, Northern, Southern, Tygerberg and Western.

When health indicators are presented they are done on a City Wide basis and a Sub district basis. One cannot therefore use an individual Sub district data as an indication of a city wide trend.

Finalisation and verification of all death data takes about six months so the final verified death data for end 2010 will only be available by June 2011.

IMR data for 2003 to 2009

	2003	2004	2005	2006	2007	2008	2009
Eastern	28.98	22.90	27.51	32.00	28.38	21.25	22.87
Khayelitsha	42.11	36.61	34.72	31.33	30.16	36.43	34.85
Klipfontein	28.65	28.79	27.41	24.65	24.74	24.19	23.81
Mitchells Plain	22.03	24.18	22.85	22.08	21.27	19.97	21.74
Northern	24.55	20.80	22.88	20.62	21.08	17.63	21.40
Southern	16.98	20.97	15.23	11.88	11.98	13.76	11.41
Tygerberg	18.61	19.58	16.20	17.61	14.91	13.74	16.96
Western	17.58	16.41	15.22	14.21	12.71	15.85	15.15
City Wide	25.16	23.74	22.28	21.40	20.28	19.78	20.76

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Source URL (retrieved on 2017/09/20 - 2:58pm): <http://www.tac.org.za/community/node/3043>