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NATIVE TAX FOR HEALTH SERVICES

COMMENT BY MR. RHEINALLT JONES

"It is important to make sure that before any tax is imposed the services for which the tax is levied are available," Mr. J. D. Rheinallt Jones, Director of the South African Institute of Race Relations said in an interview to-day in commenting on the proposal made in the Financial Relations Consolidation and Amendment Bill to empower the provincial authorities to tax natives.

Many natives had to travel long distances to reach a clinic, and even farther to reach a hospital, he said. Unless they could see that the service for which they were paying was available, the proposed hospital tax was likely to add considerably to the already widespread spirit of discontent.

At the same time it would be ungracious not to recognise that the Government and Provincial Administrations had accepted full responsibility for the welfare of natives as well as other sections of the community.

The proposal to enable Provincial authorities to tax natives for health services was an indication of the unfortunate consequences of the decision not to follow the recommendations of the National Health Services Commission. The commission recommended a health service to which natives would contribute 5s. a year.

SOCIAL SECURITY

Under the social security proposals natives coming under scheme B, that is natives not recognised as urbanised, would pay 5s a year. Their contributions would be for clearly defined health and social services. The proposal that the Provinces should tax natives 2s. 6d a year did not clearly define what services would be provided.

The effect of this tax on the contribution of natives to the social security scheme should also be considered.

Under the social security and health schemes natives in reserves would have to pay at least £2 a year in direct taxation. General tax is £1, minimum local tax 10s., and 10s. for health and social security schemes. In addition there would be dipping and other fees.

In trust areas natives would have to pay a minimum of £3 a year. Natives would receive great benefits under the full operation of the health scheme, and they often paid £1 a year to native doctors in cash and kind. Compulsory contributions, among other factors, would, however, have the effect of forcing natives out of rural areas.

He considered that natives should make some contribution to services.

HOSPITAL TAX ON NATIVES

HOPES OF GOOD RESULTS

The Native Affairs Department, which for years has been giving financial aid to various bodies administering hospitals and clinics, will now have to withdraw that aid since the Provincial Administration has power to levy a direct hospital tax on the natives, said Major F. Rodseth, Under-Secretary for Native Affairs, at the annual meeting of the Pretoria District Non-European Health Services Association yesterday.

The department drew from the S.A. Native Trust for this purpose, said Major Rodseth. The preservation of health was not primarily the affair of the Native Affairs Department, which, however, was happy to step into the breach for humanitarian reasons. The Provincial Administrations had been debarred from taxing the natives directly and took up the attitude that there were strict limitations to what they could do. There were great monuments to what the Provincial Administration did do, though quantitatively it was not sufficient.

EXPENDITURE

Estimates for the present financial year showed that the Native Affairs Department was using £75,245 of the Native Trust, a tremendous growth in expenditure. The need for this assistance was accentuated during the war.

But now certain changes had taken place. Even the partial implementation of the Health Commission's report would be beyond the resources of the Native Trust. Since the Provincial Administration had now been given power to levy a direct tax on the natives for hospital services it would be wrong for the Native Affairs Department to use more money that should be spent on general native welfare.

The change need not necessarily be a disadvantageous one. While there was some dismay at this new tax on the natives, there was hope that it would eventually be to the good. The more the Provincial Administration spent the more subsidy they would get from the Central Government.

Major Rodseth spoke of the awakening conscience on public health. The emphasis was being laid on positive health and not merely on the curing of disease. With the building up of positive health there should not be the same great need for hospital services.

FOOD

The natives must be educated on the subject of food, where and how to get food, how to prepare it and how best to build up their health.

In recent times there had been considerable agitation among natives against accepting food from their employers. Mines and other employers went to a lot of trouble to find a balanced diet for their employes, but the natives were inclined to want to provide their own food.

"Our own feeling is that this is an unfortunate development and one which will eventually undermine the health of the native in industry. Municipalities are finding that native health is deteriorating rapidly, and they are getting less work out of them. They are growing perurbed at this development."

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