

16 Limpopo Province

Mopani District Municipality

Chantelle Liebenberg

Mopani District in Limpopo Province has an estimated medical scheme coverage of 9.4%.

The proportion of total district expenditure on primary health care (PHC) was 44.5%. The proportion of district health services expenditure on district management, at 8.9%, was the highest provincially, and the proportion of total district expenditure on district hospital services of 46.7% was the lowest in the province.

The PHC supervisor visit rate (fixed clinic/CHC/CDC) of 89.6% was the second lowest in the province but well above the national average of 76.0%.

The inpatient bed utilisation rate was 70.8%. The average length of stay was 4.0 days, which is shorter than the national average of 4.2 days and the shortest in the province. The average expenditure per patient day equivalent was R1 924, which is slightly higher than the national average of R1 823 and the second lowest in the province. The ratio of ambulatory to inpatient days was 1.7. This indicates that many more patients are seen at the emergency and OPD units than are being admitted as inpatients. The OPD new client not referred rate of 82.9% was the second highest provincially, and showed that a very high percentage of patients bypass PHC facilities and access district hospitals directly.

Delivery by Caesarean section rate in district hospitals was 17.5%. The delivery in facility under 18 years rate was 8.0%. The facility maternal mortality ratio was 134.8 per 100 000 live births, the lowest in the province and in line with the national average of 132.9 per 100 000 live births. The stillbirth in facility rate at 21.1 per 1 000 births was the second highest in the province, and the inpatient early neonatal death rate was 11.1 per 1 000 live births.

The antenatal 1st visit before 20 weeks rate increased from 40.8% in 2011/12 to 46.4% in 2012/13, the highest in the province. The 2011 National Antenatal Sero-prevalence Survey showed the HIV prevalence among antenatal clients tested rate was 25.2%. The antenatal client initiated on ART rate was 54.0%, the lowest in the province and well below the national rate of 81.6%. Data from the National Health Laboratory Services (NHLS) showed that the early infant HIV diagnosis coverage of 58.6% was well below the national average of 73.9%. The proportion of PCR tests HIV positive for infants under two months of age (NHLS data), at 2.8%, was in line with the 2.6% value of the infant 1st PCR test positive around 6 weeks rate (DHIS data).

With regard to the children's immunisation coverage, some of the immunisation indicators have percentages of more than 100%, suggesting poor data quality or incorrect catchment population figures. The immunisation coverage under 1 year increased from 106.1% in 2011/12 to 108.3% in 2012/13. The measles 1st to 2nd dose drop-out rate was 14.5%.

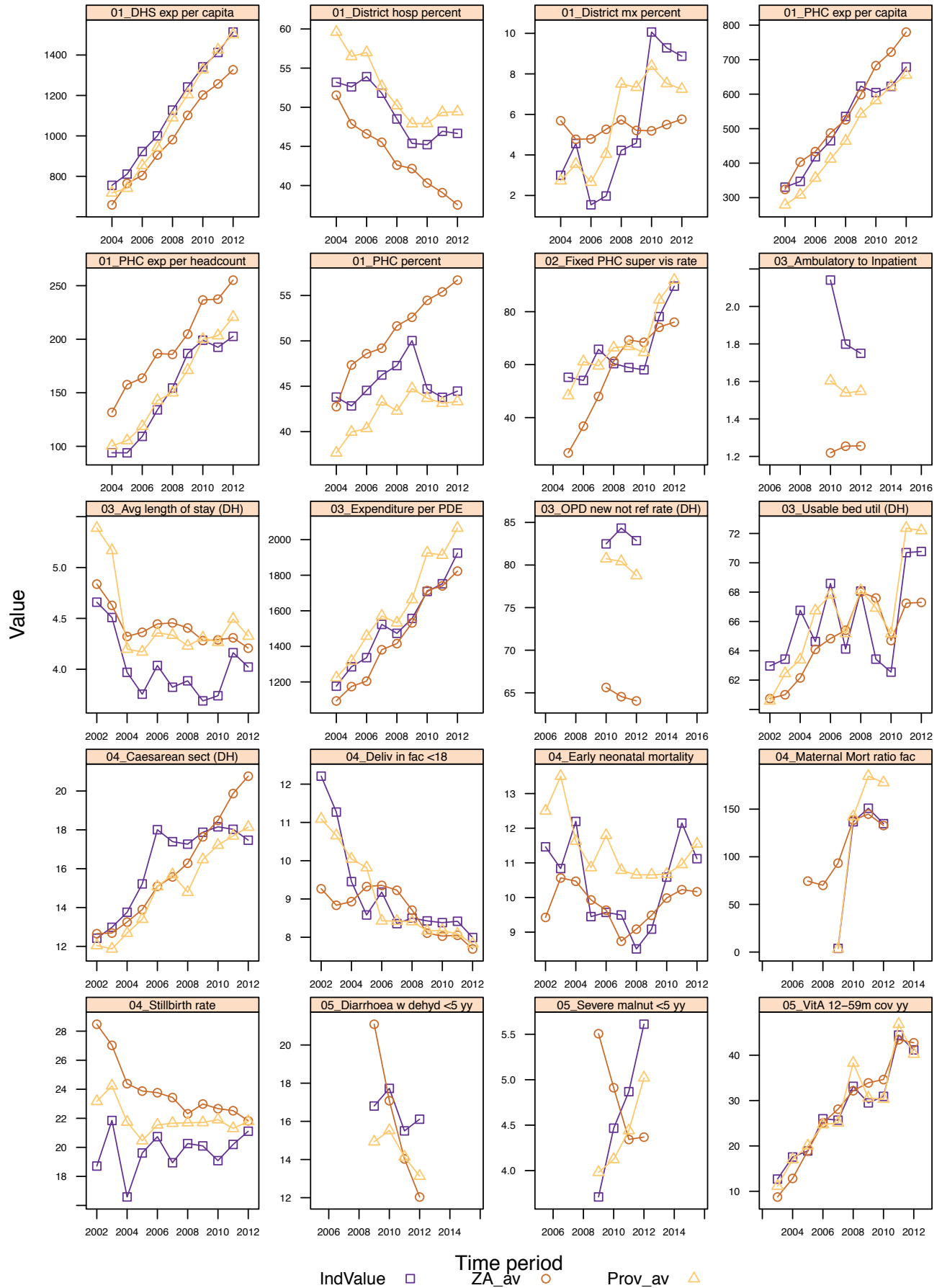
The child under 5 years diarrhoea with dehydration incidence was 16.1 episodes per 1 000 children – the highest incidence in the province. The child under 5 years diarrhoea case fatality rate was 10.2% and more than double the national rate of 4.3%. The child under 5 years pneumonia incidence was 40.4 cases per 1 000 children, and the child under 5 years pneumonia case fatality rate was 5.8%. The child under 5 years severe acute malnutrition incidence was 5.6 cases per 1 000 children, and the child under 5 years severe acute malnutrition case fatality of 21.1% was the second highest in the province and the sixth highest nationally. Vitamin A coverage for children aged 12 to 59 months was 41.2%.

The couple year protection rate increased from 44.0% in 2011/12 to 45.6% in 2012/13 and was the highest provincially. There was also an increase in the cervical cancer screening coverage from 57.1% to 66.6% in the same period, the highest coverage in the province.

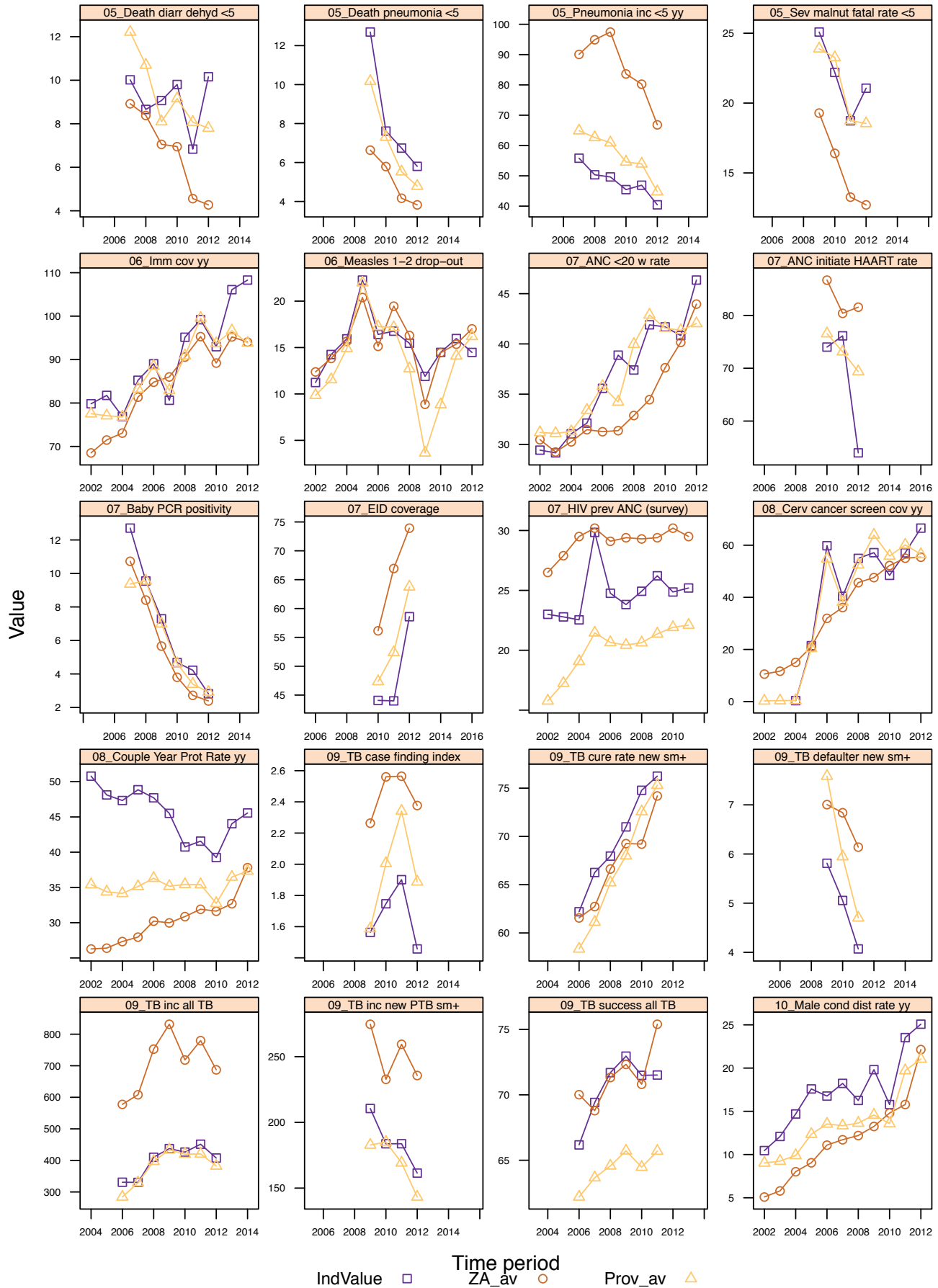
The TB incidence (all cases) in Mopani District was 407.5 per 100 000 people and lower than the national incidence of 687.3 per 100 000 people. The number of cases diagnosed with TB (new pulmonary smear-positive) decreased from 1 993 in 2011 to 1 757. TB incidence (new pulmonary smear-positive) was the second highest provincially at 161.4 per 100 000 people, but much lower than the national incidence of 235.7. The TB case finding index was 1.5%, the lowest in the province and lower than the national index of 2.4%. The TB cure rate (new pulmonary smear-positive) was 76.2% in 2011, higher than the national average of 74.2%, whilst the TB (new pulmonary smear-positive) defaulter rate was 4.1%. The TB new client treatment success rate (all TB) was 71.5%, the highest provincially.

The male condom distribution coverage increased from 23.5 condoms per male 15 years and older in 2011/12 to 25.1 condoms per male in 2012/13, the highest in the province. The total number of adults remaining on ART at the end of the month increased from 18 100 at the end of 2011/12 to 29 825 by the end of 2012/13. The total number of children under 15 years remaining on ART at end of the month also increased from 1 588 to 2 278 in the same period.

Annual indicators for district: Mopani: DC33



Annual indicators for district: Mopani: DC33



Vhembe District Municipality

Chantelle Liebenberg

Vhembe District in Limpopo Province has an estimated medical scheme coverage of 7.2%.

The proportion of total district health services expenditure on primary health care (PHC) was 44.0%, with 7.2% spent on district management, and 48.8% spent on the district hospital services.

The PHC supervisor visit rate (fixed clinic/CHC/CDC) of 96.3% was the highest in the province and the fifth highest in the country.

The inpatient bed utilisation rate was 78.5%, which was the highest for the province. The average length of stay of 4.6 days was the longest in the province and longer than the national average of 4.2 days. Expenditure per patient day equivalent was R1 905, the lowest in the province. The OPD new client not referred rate was 70.8% indicating that a high proportion of clients are bypassing PHC facilities and accessing district hospitals directly. The ratio of ambulatory patients to inpatients is 1.3, meaning that more clients are seen at the emergency unit/OPD clinics than are admitted to hospital.

The delivery by Caesarean section rate in district hospitals was 17.3%, the lowest rate in the province. The delivery in facilities in women under 18 years rate was 8.3%, the highest provincially. The facility maternal mortality ratio was 146.3 per 100 000 live births. The stillbirth in facility rate, at 16.7 per 1 000 births, was the lowest in the province, and the inpatient early neonatal death rate was also the lowest provincially, at 8.8 per 1 000 live births.

The antenatal 1st visit before 20 weeks rate decreased slightly from 39.5% in 2011/12 to 37.9% in 2012/13, and has dropped from being the highest to the lowest in the province. The 2011 National Antenatal Sero-prevalence Survey showed that the HIV prevalence among antenatal clients tested was 14.6%, and the lowest in the province. The antenatal client initiated on ART rate was 68.9%. Early infant HIV diagnosis coverage (NHLS data) was 75.1%. The infant 1st PCR test positive around 6 weeks rate (DHIS data) of 3.5% was higher than the proportion of PCR tests HIV positive for infants under two months of age (NHLS data) of 2.7%.

The immunisation coverage under 1 year decreased from 100.4% in 2011/12 to 96.9% in 2012/13 and was the second highest in the province. The measles 1st to 2nd dose drop-out rate was 14.7%.

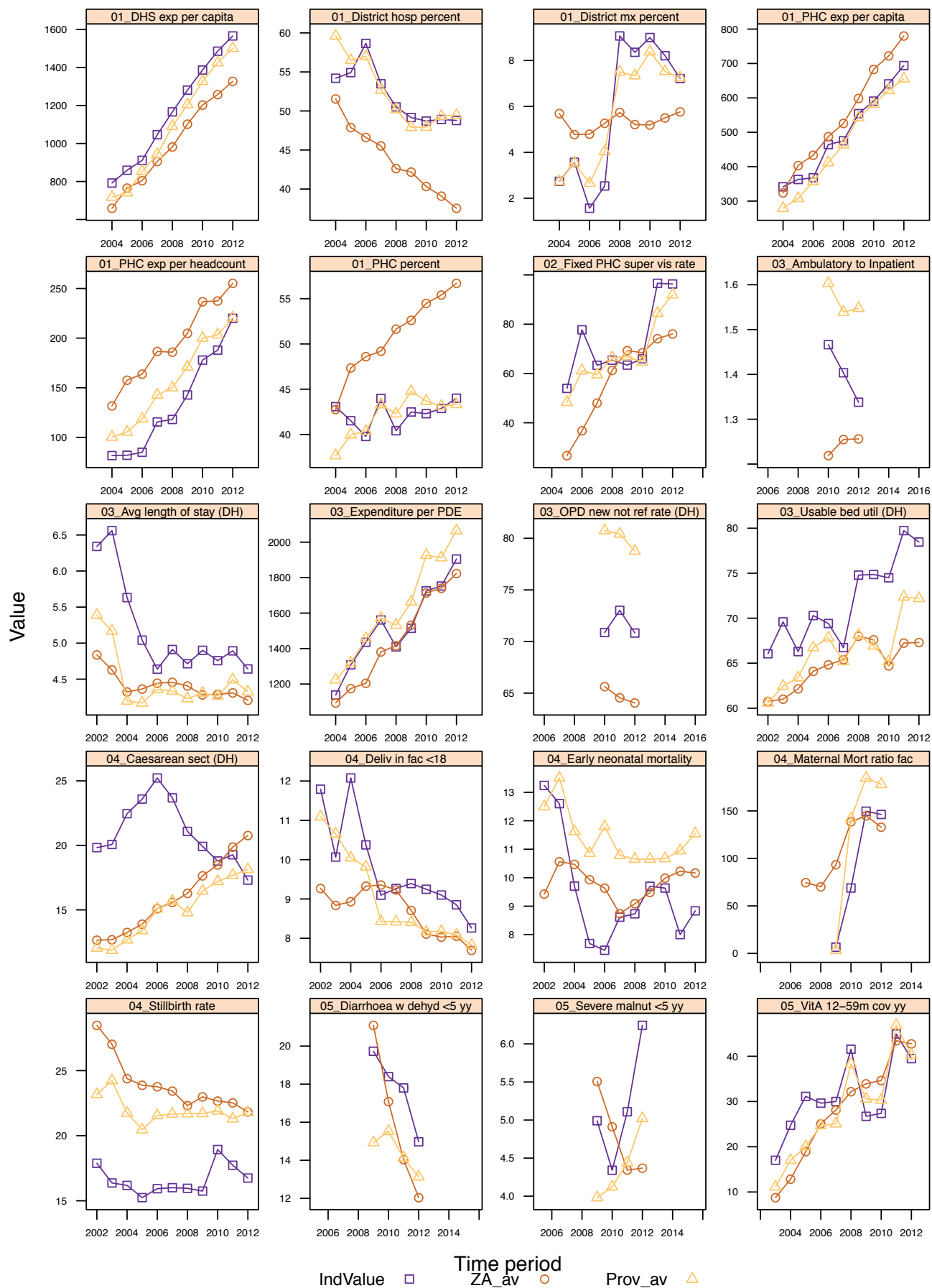
The child under 5 years diarrhoea with dehydration incidence was 15.0 episodes per 1 000 children, and the child under 5 years diarrhoea case fatality rate was 6.1%. The child under 5 years pneumonia incidence was 57.2 cases per 1 000 children, being the highest in the province, and the child under 5 years pneumonia case fatality rate was 4.1%. The child under 5 years severe acute malnutrition incidence was 6.2 cases per 1 000 children, also the highest in the province. The child under 5 years severe acute malnutrition case fatality rate was 18.0% and in line with the provincial average of 18.5%. Vitamin A coverage in children aged 12 to 59 months was 39.5%.

The couple year protection rate decreased from 37.0% in 2011/12 to 34.1% in 2012/13. There was also a large decrease in the cervical cancer screening coverage, from 70.1% to 52.1%, in the same period.

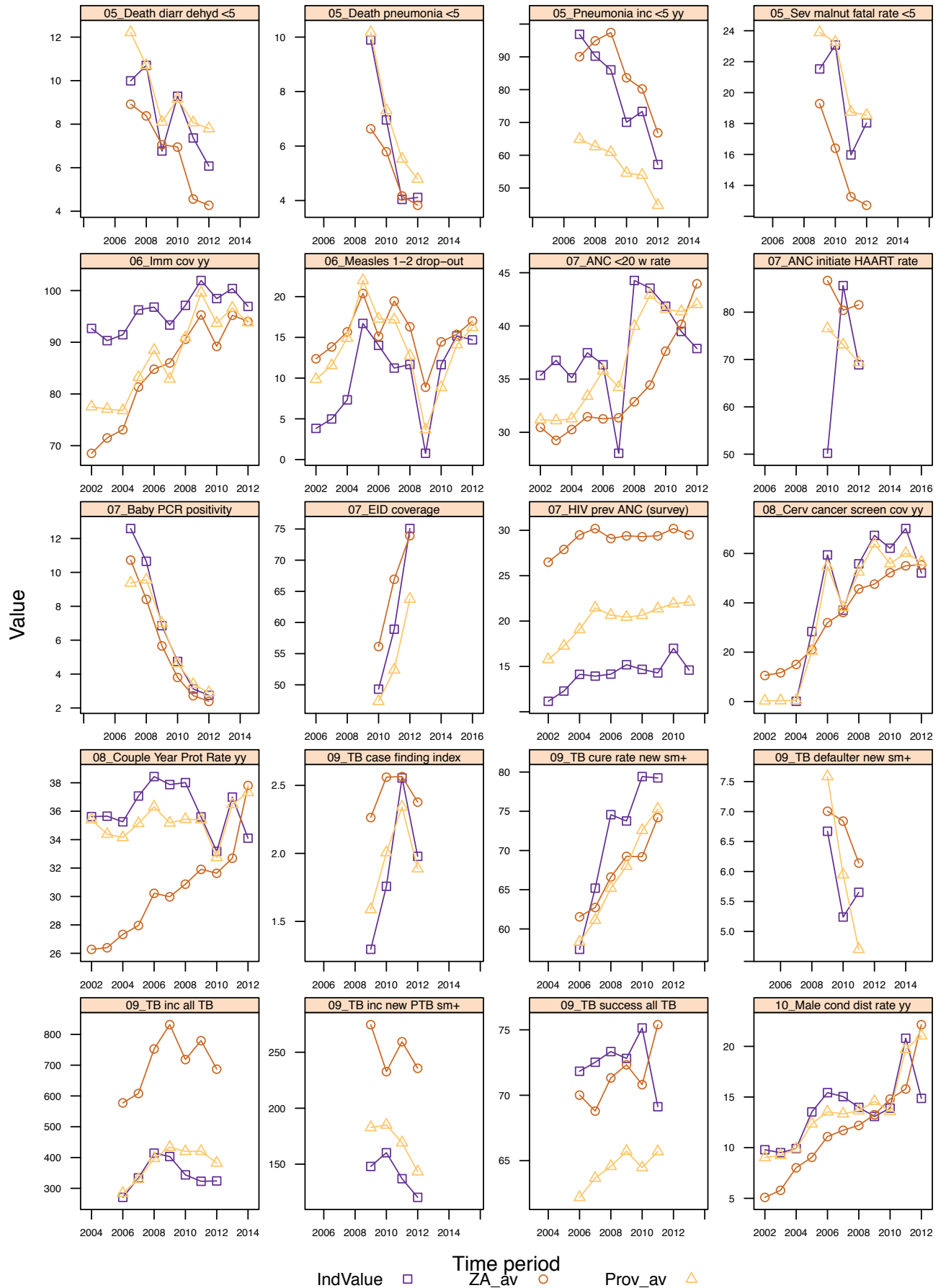
The TB incidence (all cases) was 324.0 per 100 000 people. This was well below the national incidence of 687.3 per 100 000 people. The TB case finding index was 2.0%. The number of cases diagnosed with TB (new pulmonary smear-positive) decreased from 1 784 in 2011/12 to 1 579 in 2012/13. TB incidence (new pulmonary smear-positive) was 120.3 per 100 000 people. This was the second lowest provincially and well below the national incidence of 235.7. The TB cure rate (new pulmonary smear-positive) of 79.3% was the highest in the province. The TB defaulter rate (new pulmonary smear-positive) was 5.7%, below the national rate of 6.1%, and the TB treatment success rate (all TB) was 69.1%.

The male condom distribution coverage decreased from 20.8 condoms per male 15 years and older in 2011/12 to 14.9 condoms in 2012/13, the lowest in the province. The total number of number of adults remaining on ART at the end of the month was 31 994 by the end of 2012/13, while the total number of number of children under the age of 15 years remaining on ART at the end of the month by the end of 2012/13 was 2 130.

Annual indicators for district: Vhembe: DC34



Annual indicators for district: Vhembe: DC34



Capricorn District Municipality

Chantelle Liebenberg

Capricorn District in Limpopo Province has the lowest medical scheme coverage in the province, estimated at 6.6%.

The proportion of total district expenditure on primary health care (PHC) was 45.1%, while 6.6% was spent on district management. The proportion of total district expenditure on district hospital services was 48.2%.

The PHC supervisor visit rate (fixed clinic/CHC/CDC) rate was 87.7%, the lowest in the province but above the national average of 76.0%.

The inpatient bed utilisation rate was 69.4%. The average length of stay of 4.5 days was the second longest provincially and slightly longer than the national average of 4.2 days. The expenditure per patient day equivalent (PDE) was R2 148 – the second highest in the province and higher than the national PDE expenditure of R1 823. The ratio of ambulatory to inpatient days was 1.6, indicating that many more patients are seen at the emergency and OPD units than are being admitted as inpatients. The OPD new client not referred rate of 61.2% was the lowest provincially and has declined markedly from 81.4%, but still showed that a large percentage of patients bypass PHC facilities and access the district hospitals directly.

Delivery by Caesarean section rate was 17.3%, the lowest in the province. The delivery in facility under 18 years rate was 7.3%, also the lowest provincially. The facility maternal mortality ratio was 292.2 per 100 000 live births, which was much higher than the national average of 132.9 per 100 000 live births and the highest in the country. The stillbirth in facility rate at 26.3 per 1 000 births was the highest in the province, and the inpatient early neonatal death rate was also the highest provincially, at 17.5 per 1 000 live births.

The antenatal 1st visit before 20 weeks rate decreased slightly from 41.0% in 2011/12 to 39.3% in 2012/13. The 2011 National Antenatal Sero-prevalence Survey showed an HIV prevalence among antenatal clients tested of 25.3%. The antenatal client initiated on ART rate, at 79%, was the highest provincially but below the national rate of 81.6%. Data from the National Health Laboratory Services (NHLS) showed that the early infant HIV diagnosis coverage was 52.8%, the lowest rate in the province and considerably lower than the national average of 73.9%. The proportion of PCR tests HIV positive for infants under two months of age (NHLS data) of 2.9% was much higher than the 2.1% value of the PCR test positive around 6 weeks rate (DHIS data).

The immunisation coverage under 1 year decreased from 98.0% in 2011/12 to 91.5% in 2012/13. The measles 1st to 2nd dose drop-out rate was 14.3%, the lowest in the province and lower than the national average of 17.0%.

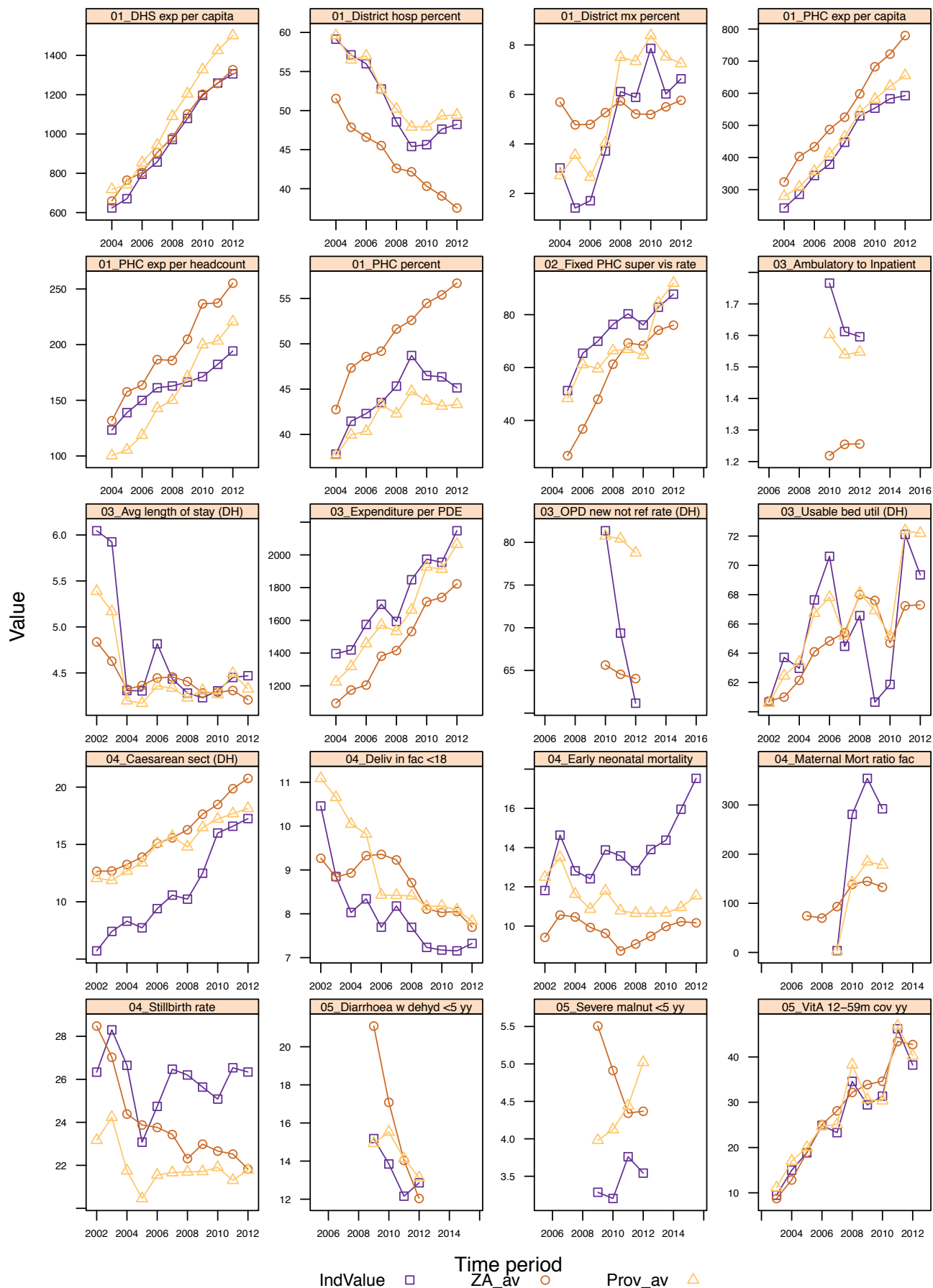
The child under 5 years diarrhoea with dehydration incidence was 12.9 episodes per 1 000 children, while the child under 5 years diarrhoea case fatality rate was 9.3%, more than double the national rate of 4.3%. The child under 5 years pneumonia incidence was 49.8 cases per 1 000 children, and the child under 5 years pneumonia case fatality rate was 4.8%. The child under 5 years severe acute malnutrition incidence at 3.5 cases per 1 000 children was the lowest in the province, and the child under 5 years severe acute malnutrition case fatality rate of 22.0% was the highest in the province and the fourth highest nationally. Vitamin A coverage for children aged 12 to 59 months was 38.2%, the lowest in the province and below the national coverage of 42.8%.

The couple year protection rate increased from 28.8% in 2011/12 to 33.3% in 2012/13, but it was still the lowest in the province. There was a decrease in the cervical cancer screening coverage from 55.6% to 52.1% in the same period, also the lowest provincially.

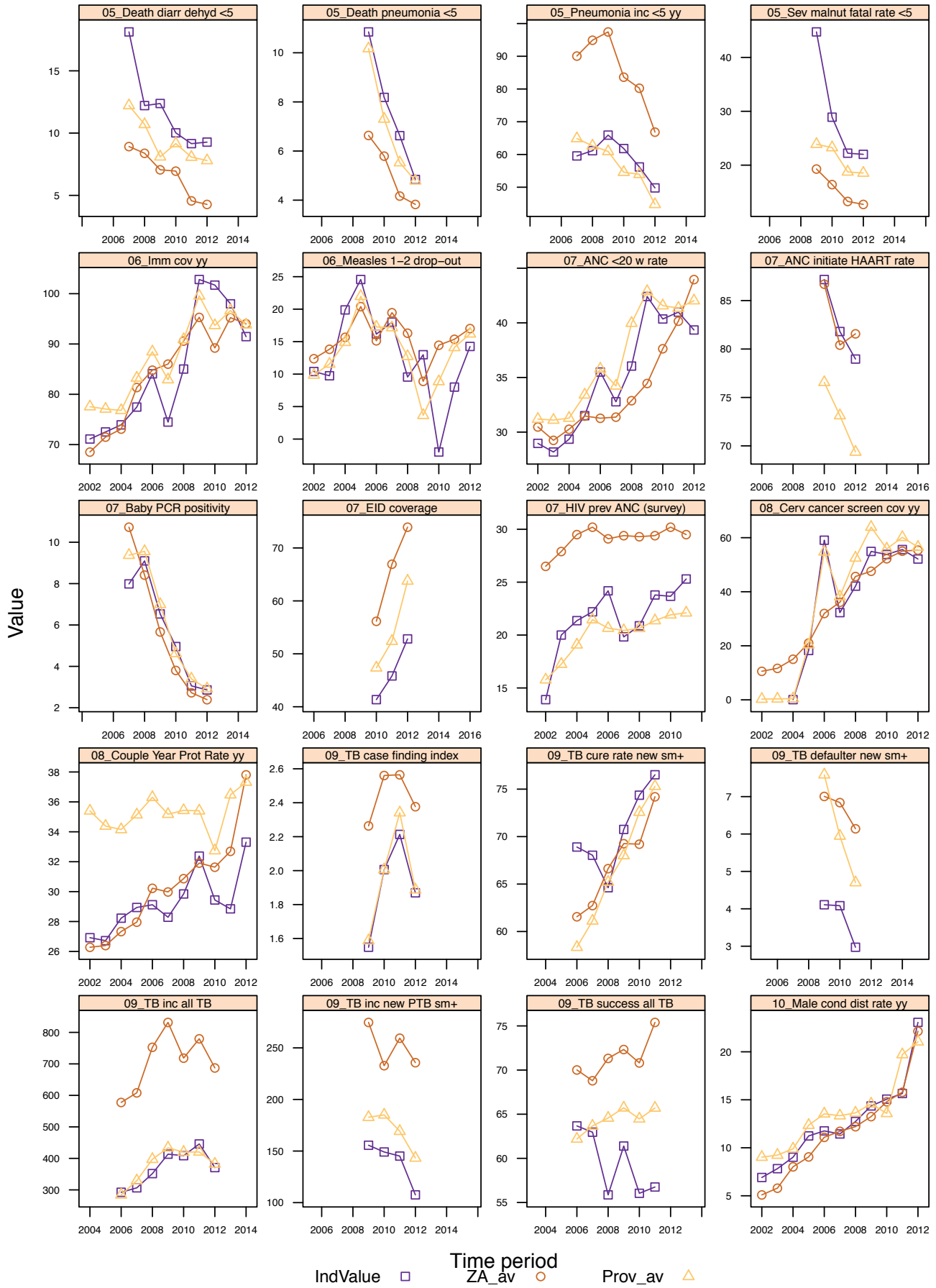
The TB incidence (all cases) in Capricorn District was 370.7 per 100 000 people and lower than the national incidence of 687.3 per 100 000 people. The number of cases diagnosed with TB (new pulmonary smear-positive) decreased from 1 748 in 2011 to 1 297. TB incidence (new pulmonary smear-positive) was the lowest provincially at 107.5 per 100 000 people, and much lower than the national incidence of 235.7. The TB case finding index was 1.9%, lower than the national index of 2.4%. The TB cure rate (new pulmonary smear-positive) was 76.5% in 2011, higher than the national average of 74.2%. The TB defaulter rate (new pulmonary smear-positive) at 3.0% in the same period was the lowest in the province, and the TB treatment success rate (all TB) was 56.8%, the lowest provincially. The poor treatment outcomes for all cases overall was due primarily to high mortality (14.6% of the cohort died) and 21.8% of patients being recorded as 'transferred out'.

The male condom distribution coverage increased from 15.7 condoms per male 15 years and older in 2011/12 to 23.1 in 2012/13, and is in line with the national coverage of 22.1 condoms. The total number of adults remaining on ART at the end of the month increased from 12 604 at the end of 2010/11 to 32 944 by the end of 2012/13. The total number of children under 15 years remaining on ART at end of the month also increased, from 1 148 to 2 013, in the same period.

Annual indicators for district: Capricorn: DC35



Annual indicators for district: Capricorn: DC35



Waterberg District Municipality

Anne Ochieng and Joseph Rasethe

Waterberg District Municipality is located in the south-western part of Limpopo Province, bordering Botswana and the North West, Gauteng and Mpumalanga provinces. The medical scheme coverage in Waterberg District Municipality was estimated to be 16.7%, roughly double the provincial coverage.

Waterberg District spent 57.1% of the district health services budget for 2012/13 on district hospitals, the second highest expenditure nationally and the highest in the province. In contrast, the district's expenditure on primary health care (PHC) services at 35.5% was the second lowest nationally and lower than the provincial average expenditure on PHC services of 43.3%. The proportion of district health services expenditure on district management for the year 2012/13 was 7.4%, the second highest in the province.

The PHC supervisor visit rate (fixed clinic/CHC/CDC) increased to 90.7% from 63.9% in 2011/12, exceeding the national average of 76.0%.

The district has the lowest provincial inpatient bed utilisation rate of 64.8%, slightly lower than the national average of 67.3%. The average length of stay of 4.2 days for 2012/13 was equivalent to the national average. The average expenditure per patient day equivalent of R2 346 was the highest in the province and the fourth highest nationally. The ratio of ambulatory to inpatient days at 1.7 was the second highest in the province and higher than the national average of 1.3. This indicates that more patients are seen at the emergency and OPD units than are being admitted as inpatients. The OPD new client not referred rate of 92.8% was the highest provincially and second highest nationally. This rate has varied between 94.8% and 92.8% over the past three years, showing that almost all patients bypass PHC facilities and access district hospitals directly.

The delivery by Caesarean section rate was 21.5%, the highest in the province and slightly above the national rate of 20.8%. The delivery in facility under 18 years rate was 7.3%. The facility maternal mortality ratio was 156.6 per 100 000 live births, which was much higher than the national average of 132.9 per 100 000 live births. The stillbirth in facility rate was 22.5 per 1 000 births, and the inpatient early neonatal death rate 10.1 per 1 000 live births.

The antenatal 1st visit before 20 weeks rate was 45.2%, in line with the national average at 44.0%. The 2011 National Antenatal Sero-prevalence Survey showed an HIV prevalence among antenatal clients tested of 30.3%, the highest provincially. The antenatal client initiated on ART rate was 70.5% and below the national rate of 81.6%. Data from the National Health Laboratory Services (NHLS) showed that the early infant HIV diagnosis coverage was 59.1%, considerably lower than the national average of 73.9%. The proportion of PCR tests HIV positive for infants under two months of age (NHLS data) of 3.2% was much higher than the 2.4% value of the infant 1st PCR test positive around 6 weeks rate (DHIS data).

The immunisation coverage under 1 year for 2012/13 at 87.1% was the second lowest in the province and lower than the national average of 94.0%. The measles 1st to 2nd dose drop-out rate was 20.5%, the highest in the province and higher than the national average of 17.0%.

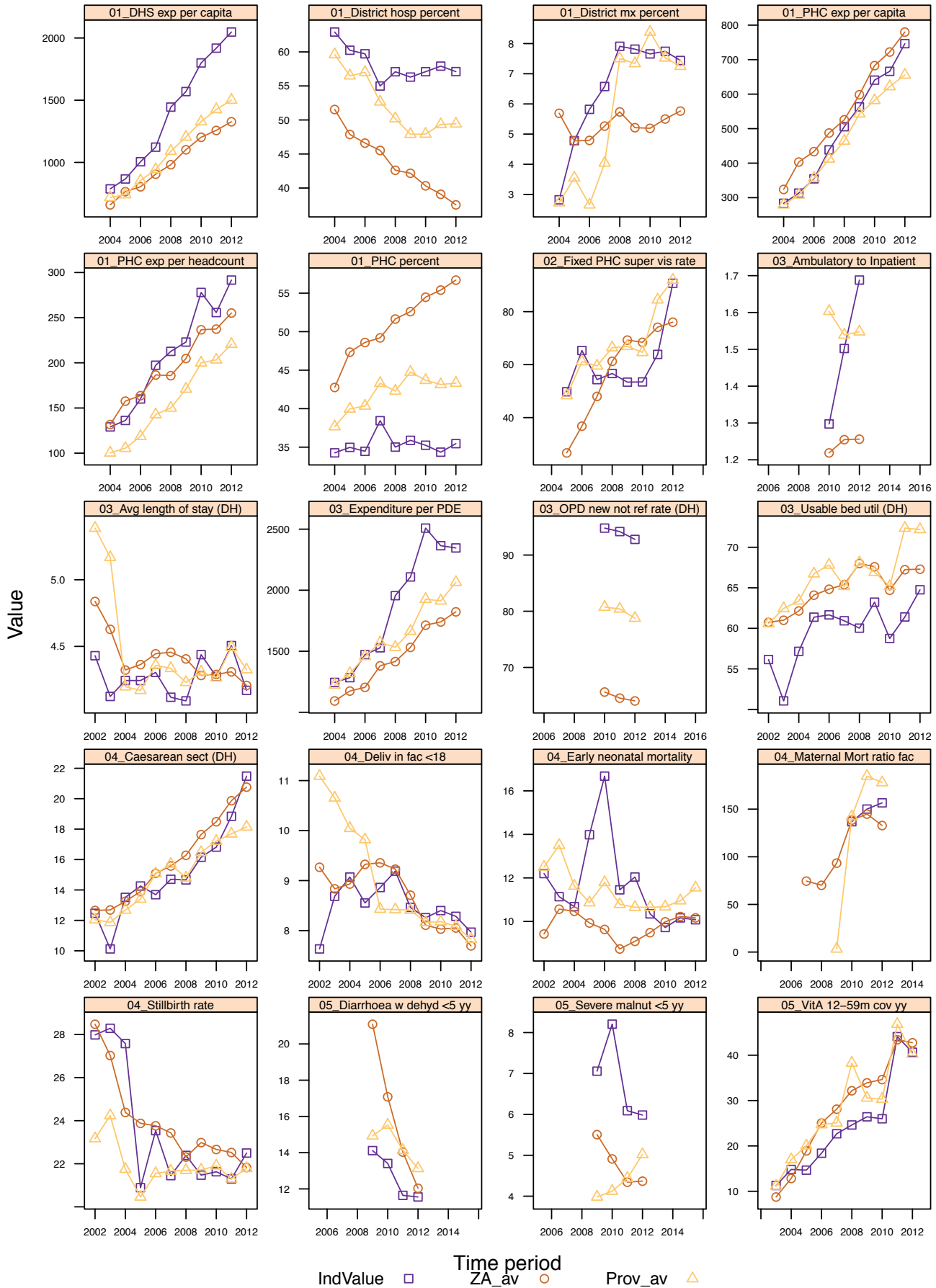
The child under 5 years diarrhoea with dehydration incidence was 11.6 episodes per 1 000 children, and the Waterberg District had the highest child under 5 years diarrhoea case fatality rate in the province of 11.4%, this being the third highest rate nationally. The child under 5 years pneumonia incidence of 33.0 cases per 1 000 children was the lowest in the province and much lower than the national average of 66.8 per 1 000 children. The child under 5 years pneumonia case fatality rate of 6.1% was higher than the national average of 3.8%. The child under 5 years severe acute malnutrition incidence of 6.0 cases per 1 000 children was higher than the national average of 4.4 per 1 000 children, and the child under 5 years severe acute malnutrition case fatality rate of 17.7% was higher than the national average of 12.5%. Vitamin A coverage in children aged 12 to 59 months was 40.6%.

The couple year protection rate in the district was 37.4%, and the cervical cancer screening coverage 55.5%.

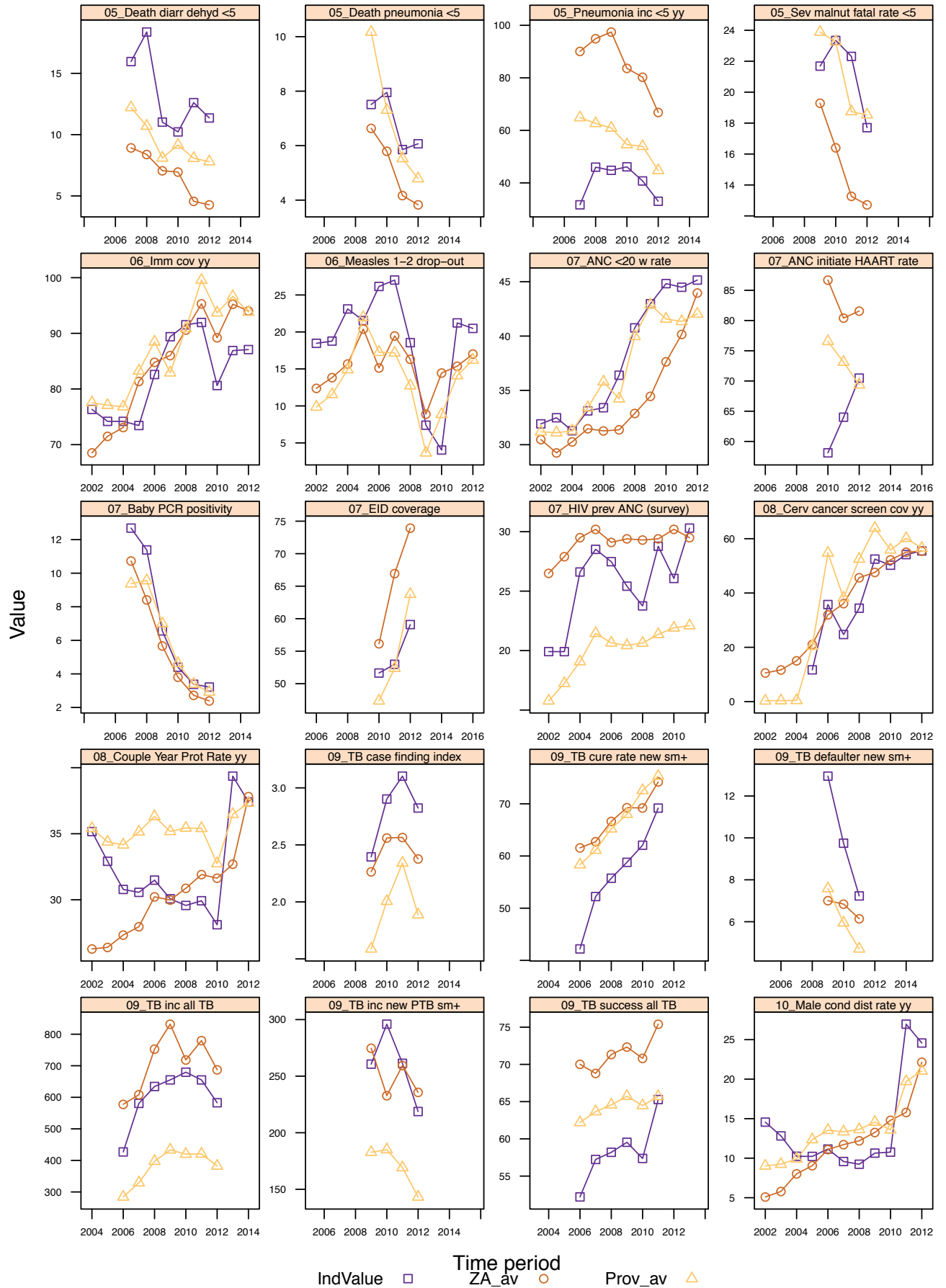
TB incidence is clearly higher in Waterberg than in the other districts in Limpopo, and treatment outcomes are, in general, poorer. The TB incidence (all cases) in Waterberg District was 582.7 per 100 000 people in 2012, the highest in the province but lower than the national incidence of 687.3 per 100 000 people. The number of cases diagnosed with TB (new pulmonary smear-positive) decreased from 1 758 in 2011 to 1 482. TB incidence (new pulmonary smear-positive) was also the highest provincially at 218.7 per 100 000 people, but lower than the national incidence of 235.7. The TB case finding index was 2.8%, also the highest provincially. The TB (new pulmonary smear-positive) cure rate in 2011 was the lowest in the province at 69.2% and lower than the national average of 74.2%. The TB (new pulmonary smear-positive) defaulter rate at 7.2% in the same period was the highest in the province, and the TB treatment success rate (all TB) was 65.3%.

Male condom distribution coverage was 24.6 condoms per male 15 years and older. The total number of adults remaining on ART at the end of the month increased from 11 689 at the end of 2010/11 to 23 441 by the end of 2012/13. The total number of children under 15 years remaining on ART at the end of the month increased from 815 to 1 550 over the same period.

Annual indicators for district: Waterberg: DC36



Annual indicators for district: Waterberg: DC36



Greater Sekhukhune District Municipality

Chantelle Liebenberg

The Greater Sekhukhune District in Limpopo Province has an estimated medical scheme coverage of 7.1%.

The proportion of total district expenditure on primary health care (PHC) was 46.0%, while 5.9% was spent on district management. The proportion of total district expenditure on district hospital services was 48.1%.

The PHC supervisor visit rate (fixed clinic/CHC/CDC) of 94.3% is the second highest in the province and well above the national average of 76.0%.

The inpatient bed utilisation rate was 75.0%, the second highest provincially. The average length of stay of 4.2 days was the same as the national average. The expenditure per patient day equivalent was R2 147, which was higher than the national average of R1 823. The ratio of ambulatory to inpatient days was 1.5, which indicates that more patients are seen at the emergency and OPD units than are being admitted as inpatients. The OPD new client not referred rate of 81.2% shows that a high percentage of patients bypass PHC facilities and access district hospitals directly.

The delivery by Caesarean section rate in district hospitals was 18.8%, the second highest rate in the province, and the delivery in facility under 18 years rate was 7.6%. The facility maternal mortality ratio recorded by the DHIS was 151.5 per 100 000 live births. The stillbirth in facility rate was 23.6 per 1 000 births, and the inpatient early neonatal death rate was 9.8 per 1 000 live births.

The antenatal 1st visit before 20 weeks rate remained stable at 42.8%. The 2011 National Antenatal Sero-prevalence Survey showed the HIV prevalence among antenatal clients tested was 18.9%. The antenatal clients initiated on ART rate was 75.7%.

Data from the National Health Laboratory Services (NHLS) showed that the early infant HIV diagnosis coverage expanded rapidly to 92.8%, the highest coverage in the province. The proportion of PCR tests HIV positive for infants under two months of age (NHLS data) of 3.0% was higher than the 2.0% value of the infant 1st PCR test positive around 6 weeks rate (DHIS data).

The immunisation coverage under 1 year decreased from 85.6% in 2011/12 to 81.0% in 2012/13, and was the lowest coverage in the province. The measles 1st to 2nd dose drop-out rate was 19.7%.

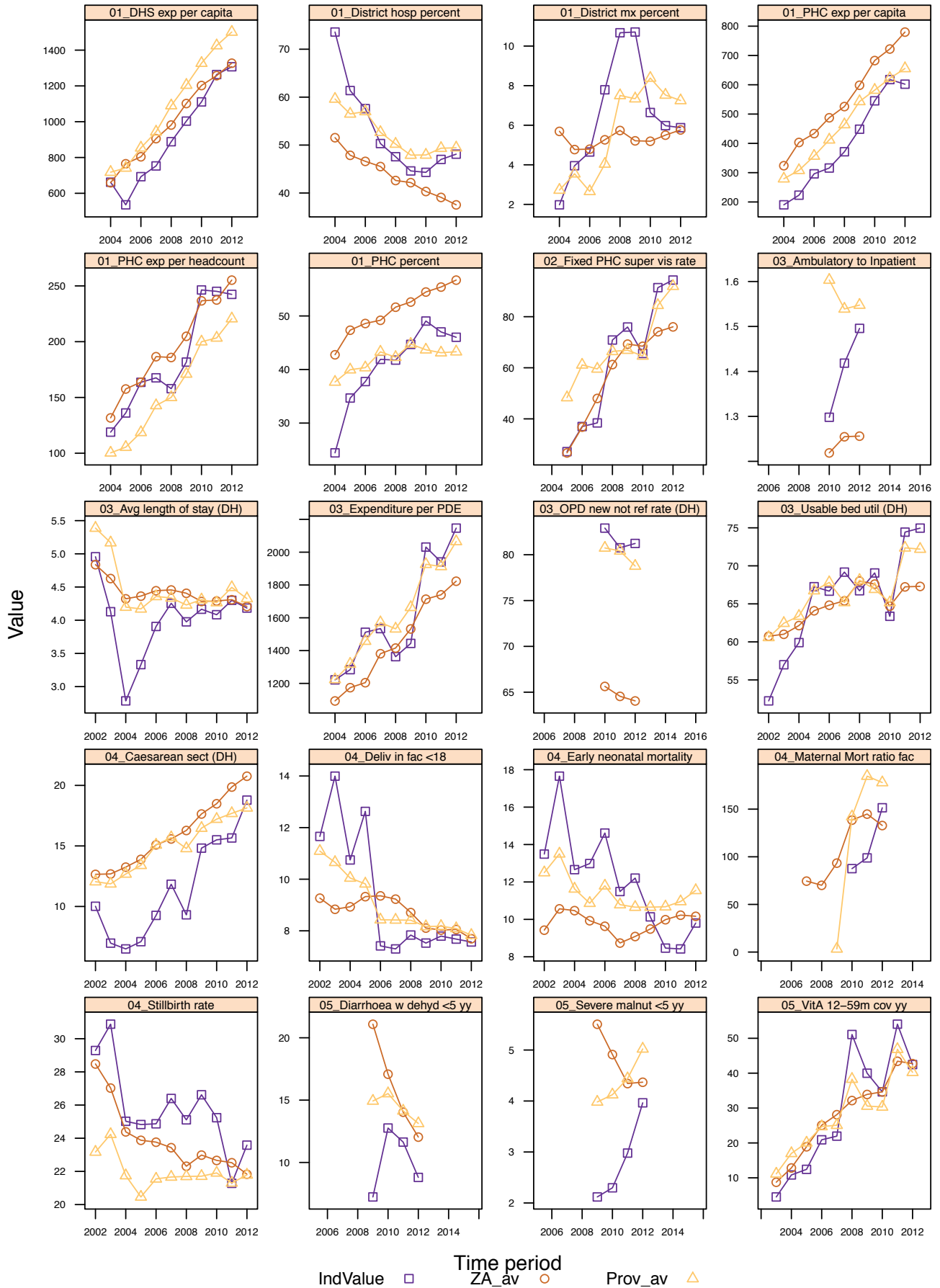
The child under 5 years diarrhoea with dehydration incidence was 8.8 episodes per 1 000 children, the lowest in the province. The child under 5 years diarrhoea case fatality rate was 5.0%, also the lowest provincially. The child under 5 years pneumonia incidence was 33.1 cases per 1 000 children, and the child under 5 years pneumonia case fatality of 3.9% was the second lowest incidence and lowest case fatality rate in the province respectively. The child under 5 years severe acute malnutrition incidence was 4.0 cases per 1 000 children, and the child under 5 years severe acute malnutrition case fatality rate was 13.7%, both being the lowest in the province. Vitamin A coverage for children aged 12 to 59 months was 42.5%, the highest provincially.

The couple year protection rate increased from 34.3% in 2011/12 to 37.2% in 2012/13. There was, however, a decrease in the cervical cancer screening coverage, from 61.1% to 57.0% in the same period.

The TB incidence (all cases) in Greater Sekhukhune District was 309.3 per 100 000 people, the lowest provincially and lower than the national incidence of 687.3 per 100 000 people. The number of cases diagnosed with TB (new pulmonary smear-positive) decreased from 1 620 in 2011 to 1 452. TB incidence (new pulmonary smear-positive) was 145.5 per 100 000 people, ranking lower than the national incidence of 235.7. The TB case finding index was 1.8%, lower than the national index of 2.4%. The TB cure rate (new pulmonary smear-positive) was 75.5% in 2011, and the TB (new pulmonary smear-positive) defaulter rate was 3.6%. The TB treatment success rate (all TB) was 67.6%.

The male condom distribution coverage increased from 13.8 condoms per male 15 years and older in 2011/12, to 19.7 condoms per male in 2012/13. The total number of adults remaining on ART at the end of the month increased from 9 556 at the end of 2010/11 to 23 226 by the end of 2012/13, and the total number of children under 15 years remaining on ART at end of the month also increased, from 667 to 1 805 in the same period.

Annual indicators for district: Greater Sekhukhune: DC47



Annual indicators for district: Greater Sekhukhune: DC47

