

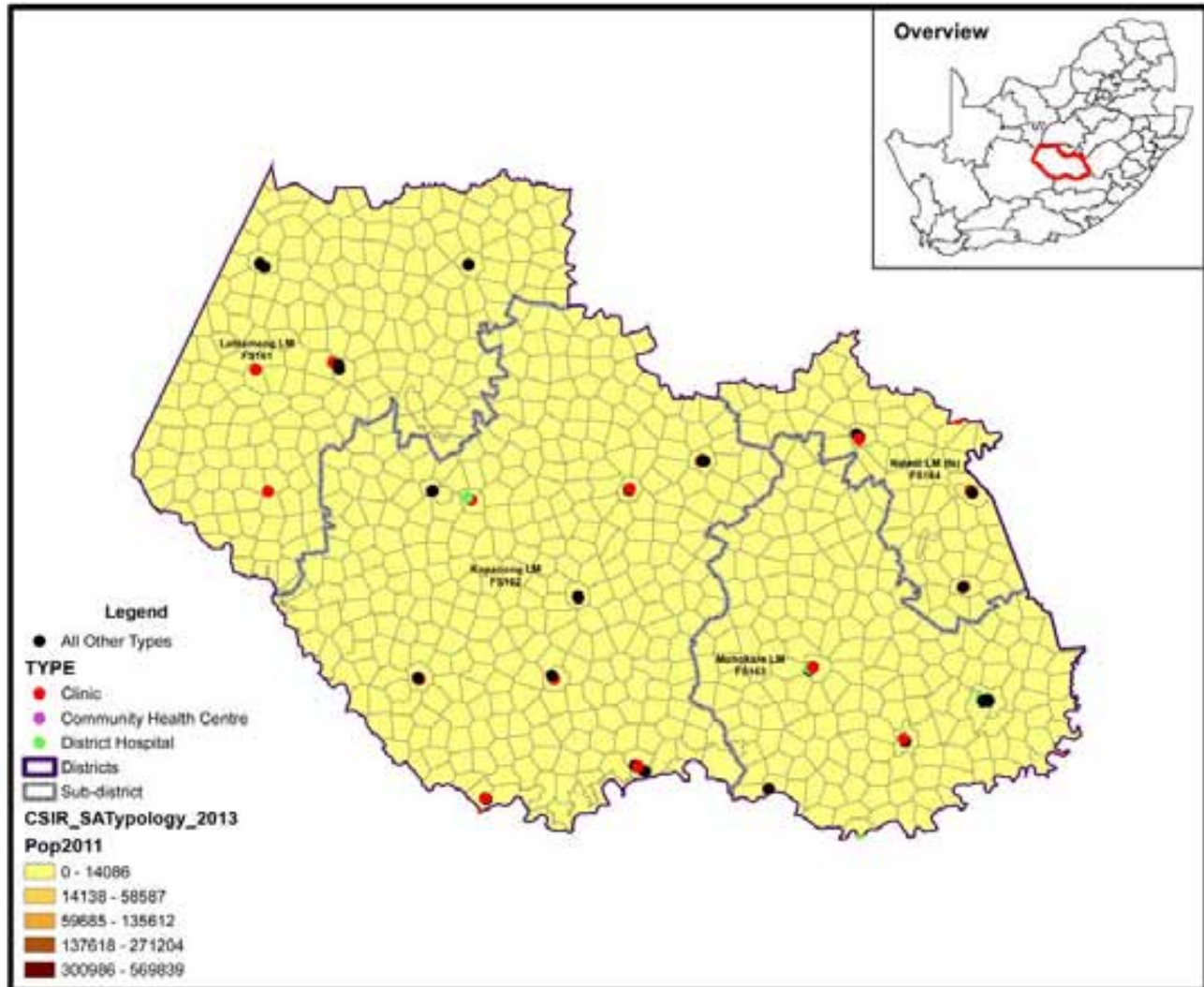
16 Free State Province

Xhariep District Municipality (DC16)

Naomi Massyn

Xhariep is the southern-most district in the Free State Province and is divided into four sub-districts, namely Letsemeng, Kopanong, Mohokare and Naledi. Geographically it is the largest of the five districts in the province, but has the smallest population at 139 567, with a population density of only 3.7 people per km². The district falls into socio-economic Quintile 3.

Population distribution, sub-district boundaries and health facility locations: Xhariep (DC16)



Burden of disease profile

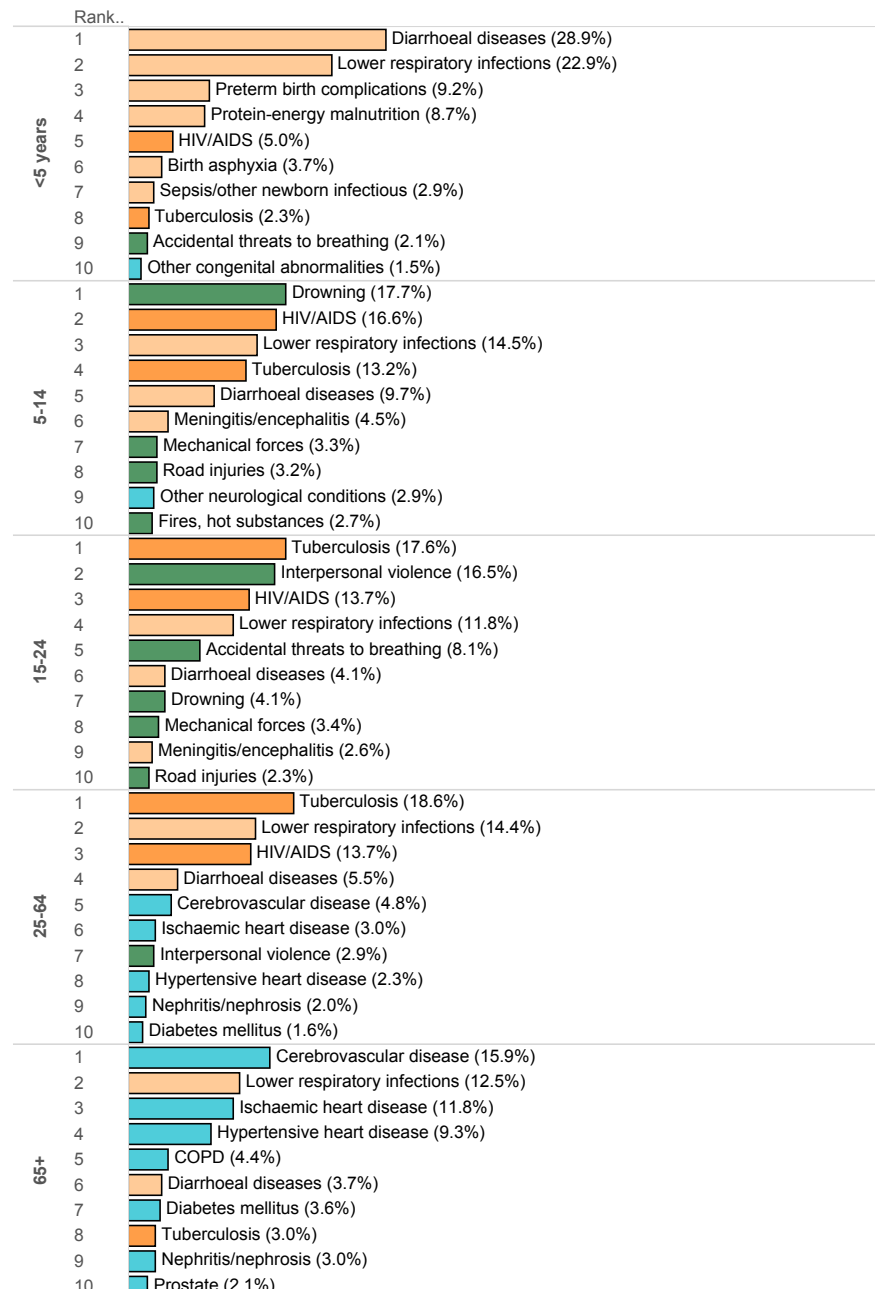
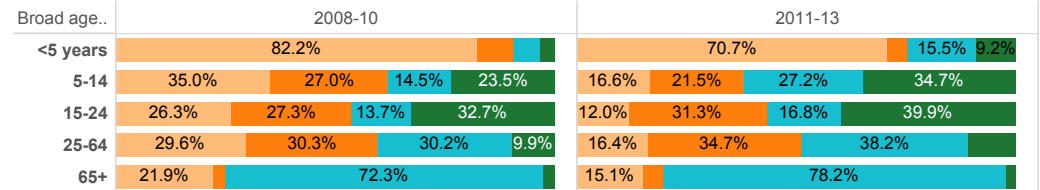
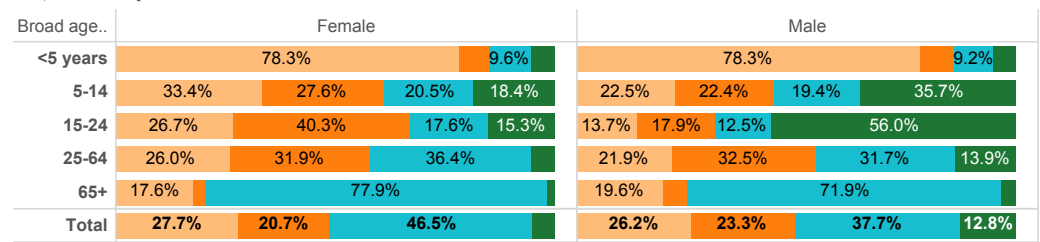
Percentage of deaths by broad cause and leading causes, 2008-2013: Xhariep (DC16)

Percentage of deaths by broad cause and leading causes, 2008-2013

Prov, District
FS, Xhariep: DC16
 Show History

Broadcause
■ Injury
■ NCD
■ HIV and TB
■ Comm_mat_peri_nut

FS, Xhariep: DC16



Broad cause groups by age and gender

In the under 5-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 78.3% of deaths among females and males. Non-communicable disease mortality was 9.6% and 9.2% among females and males respectively, and HIV and TB mortality and injury-related deaths were around 12% for both females and males.

In the 5–14-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 33.4% of deaths among females versus 22.5% among males. Proportionate differences were bigger for most the other broad causes too: HIV and TB mortality was 27.6% among females versus 22.4% among males, non-communicable disease mortality was 20.5% among females versus 19.4% among males, and injuries accounted for 18.4% of deaths among females versus 35.7% among males.

In the 15–24-year age group, injuries accounted for 56.0% of deaths among males versus only 15.3% of deaths among females, while HIV and TB accounted for 40.3% of deaths among females versus only 17.9% among males.

In the 25–64-year age group, non-communicable diseases accounted for the largest proportion of deaths among females (36.4%), while HIV and TB accounted for most deaths among males (32.5%). Communicable diseases and maternal, perinatal and nutritional conditions accounted for 26.0% of deaths among females and 21.9% among males. Injuries accounted for a small proportion of deaths in this age group, with the percentage being much higher among males (13.9%) than females.

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths (77.9% among females and 71.9% among males). Communicable diseases and maternal, perinatal and nutritional conditions accounted for 17.6% of deaths among females and 19.6% among males.

Trends in broad cause groups by age

In children under 5 years, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 82.2% to 70.7% between 2008–2010 and 2011–2013, while non-communicable disease mortality and injury-related deaths increased. In the 5–14-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased, as did HIV and TB mortality, while injury-related deaths and non-communicable disease mortality increased over this period. In the 15–24-year age group, injury-related deaths and HIV and TB mortality increased. In the 25–64-year age group, HIV and TB mortality increased from 30.3% to 34.7%, and deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 29.6% to 16.4%. In the 65-years-and-older age group, non-communicable disease mortality increased from 72.3% to 78.2%, while deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 21.9% to 15.1%. Deaths due to injuries and HIV and TB remained more or less the same.

Trends in leading causes of death by age

In this district the number of deaths in some age groups was too small to divide into two periods, therefore the leading causes are presented for the full six-year period from 2008 to 2013.

Under 5 years

Diarrhoeal diseases (28.9%) and lower respiratory infections (22.9%) were the leading causes of death, followed by preterm birth complications (9.2%) and protein-energy malnutrition (8.7%).

5–14 years

Drowning (17.7%), HIV and AIDS (16.6%), lower respiratory infections (14.5%) and TB (13.2%) were the top four leading causes of death. Road injuries (3.7%) and deaths due to fires and hot substances also ranked among the top 10 causes of death.

15–24 years

Tuberculosis (17.6%), interpersonal violence (16.5%) and HIV and AIDS (13.7%) remained the three leading causes of death in this age group, followed by lower respiratory infections (11.8%), accidental threats to breathing (8.1%) and diarrhoeal diseases (4.1%). Road injuries were the 10th leading cause of death (2.3%).

25–64 years

Tuberculosis (18.6%), lower respiratory infections (14.4%), HIV and AIDS (13.7%), and diarrhoeal diseases (5.5%) remained the leading causes of death, accounting for more than 52% of deaths in this age group. Mortality still appeared to be largely HIV-related. Cerebrovascular disease, ischaemic heart disease, interpersonal violence and diabetes mellitus appeared in the top 10 causes of death.

65 years and older

Cerebrovascular disease (15.9%), lower respiratory infections (12.5%), ischaemic heart disease (11.8%) and hypertensive heart disease (9.3%) remained the leading causes of death, accounting for almost 40% of deaths in this age group. Diabetes mellitus, TB, nephritis/nephrosis and prostate-related diseases appeared in the top 10 causes of death in this age group.

Indicator performance: Xhariep (DC16)

Category	Indicator	District value			District ranking	Provincial average	Provincial target	Provincial target	National average	National target	National target
		2012/13	2013/14	2014/15	2014/15	2014/15	2014/15	2015/16	2014/15	2014/15	2015/16
Management PHC	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	82.1	70.2	64.3	39	63.4	100.0		73.5		
Management Inpatients	Average length of stay (district hospitals) [Days]	2.1	3.3	2.2	52	3.2	3.1		4.6		
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	2 100.5	2 095.8	1 931.7	24	2 164.5			2 136.4		
	Inpatient bed utilisation rate (district hospitals) [Percentage]	70.2	71.2	80.8	5	60.0	70.0		65.8		
	OPD new client not referred rate (district hospitals) [Percentage]	25.8	32.7	38.2	12	71.2			60.7		
Mortality Inpatients	Child under 5 years diarrhoea case fatality rate [Percentage]	2.5	1.7	0.8	6	4.1	3.0	3.0	3.3	3.5	3.0
	Child under 5 years pneumonia case fatality rate [Percentage]	4.9	1.4	0.0	1	3.1	3.0	3.0	2.9		
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	3.2	15.9	9.3	18	12.2	7.0	11.4	11.6	8.0	7.0
	Inpatient crude death rate [Percentage]	5.9	5.3	3.5	7	6.1			5.2		
	Delivery	Delivery by Caesarean section rate (district hospitals) [Percentage]	0.0	2.0	0.0		17.1			22.7	
Delivery	Delivery in facility under 18 years rate [Percentage]	9.4	5.6	8.9	33	7.1			7.4		
	Inpatient early neonatal death rate [per 1 000 live births]	3.7	8.8	9.2	20	10.5		11.0	10.1		0
	Maternal mortality in facility ratio [per 100 000 live births]	0.0	0.0	115.5	22	217.8	130.0	128.0	132.5	100	80.0
	Mother postnatal visit within 6 days rate [Percentage]	174.8	219.6	211.8	1	80.8		82.0	74.3	80.0	85.0
	Stillbirth in facility rate [per 1 000 births]	14.6	20.9	22.6	35	25.4			20.7		
	PMTCT	Antenatal 1st visit before 20 weeks rate [Percentage]	62.8	67.4	68.7	7	58.6	70.0	60.0	53.9	65.0
Antenatal client initiated on ART rate [Percentage]		85.6	85.9	93.9	21	88.7		95.0	91.2	93.0	96.0
Infant 1st PCR test around 6 weeks uptake rate [Percentage]		233.8	293.0	279.3	1	91.3			100.6		
Infant 1st PCR test positive around 6 weeks rate [Percentage]		3.7	2.4	1.5	25	1.3	2.0	2.0	1.5	1.8	2.0
Child Health	School Grade 1 screening coverage [Percentage]		29.3	25.5	19	24.4	29.5	40.0	23.2	30.0	35.0
	Vitamin A dose 12-59 months coverage [Percentage]	77.2	76.0	93.1	1	58.7	65.0	60.0	52.2	55.0	
Immunisation	Immunisation coverage under 1 year [Percentage]	87.8	90.2	112.7	1	90.1	95.0	95.0	89.8	95.0	91.0
	Measles 2nd dose coverage [Percentage]	98.2	92.9	114.5	2	81.3	95.0	85.0	82.8	85.0	85.0
Reproductive health	Cervical cancer screening coverage [(Percentage)]	67.0	80.6	87.2	2	40.9	58.0	60.0	54.5	60.0	64.0
	Couple year protection rate [Percentage]	48.2	38.8	56.6	9	43.7	45.0		46.8	55.0	
TB case finding	TB Rifampicin resistance confirmed client rate [Percentage]	5.7	6.8	5.2	19	5.6			6.4		
HIV	HIV testing coverage (including ANC)		43.4	52.6	2	26.2			32.1		
	Male condom distribution coverage	24.4	15.7	37.5	26	34.1		0.0	38.4		
Non-communicable diseases	Hypertension incidence [per 1 000]	14.6	20.5	12.0		12.8	15.7		13.9		
	Mental health admission rate [Percentage]		0.4	0.2		0.9	1.0		1.2		

Section B: Profile Free State Province

Category	Indicator	District value			District ranking 2014/15	Provincial average 2014/15	Provincial target 2014/15	Provincial target 2015/16	National average 2014/15	National target 2014/15	National target 2015/16
		2012/13	2013/14	2014/15							
Human Resources	PHC doctor clinical workload [Clients per doctor per day]	22.8	27.5	55.0	52	31.9			26.9		
	PHC professional nurse clinical workload [Clients per nurse per day]	33.5	31.6	32.3	17	31.8			29.4		

Category	Indicator	District value				District ranking 2013	Provincial average 2013	Provincial target 2013	Provincial target 2014	National average 2013	National target 2013	National target 2014
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		989.5	987.4	969.4	47	637.6			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	78.7	81.4	80.7		15	75.8			76.8		
	TB death rate (all TB) [Percentage]	9.9	10.4	11.5		42	11.1			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	3.5	3.5	4.0		11	4.3			5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	79.4	78.1	81.3		11	76.8	85.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		90.6	87.7	90.5	41	89.6			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		89.7	88.4	85.9	16	76.2			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		33.8			27	33.0			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	14.2	15.2	14.4		37	14.3			14.5		
	Percentage of deaths ill-defined [Percentage]	21.9	20.2	18.2		44	13.0			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	25.5	17.6	21.1		27	25.3			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	28.4	31.1	25.3		18	26.0			27.9		
	Percentage of YLLs due to injuries [Percentage]	11.0	13.6	12.8		25	11.9			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	35.0	37.7	40.8		38	36.7			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to some indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ Inpatient bed utilisation rate (district hospitals)
- ◆ Child under 5 years diarrhoea case fatality rate
- ◆ Child under 5 years pneumonia case fatality rate (lowest in the country)
- ◆ Inpatient crude death rate
- ◆ Mother postnatal visit within 6 days rate (best in the country, although more than 100%)
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Infant 1st PCR test around 6 weeks uptake rate (best in the country, although more than 100%)
- ◆ Vitamin A dose 12-59 months coverage (best in the country)
- ◆ Immunisation coverage under 1 year (best in the country, although more than 100%)
- ◆ Measles 2nd dose coverage (second best in the country, although more than 100%)
- ◆ Cervical cancer screening coverage (second best in the country)
- ◆ Couple year protection rate
- ◆ HIV testing coverage (including ANC) (second best in the country)

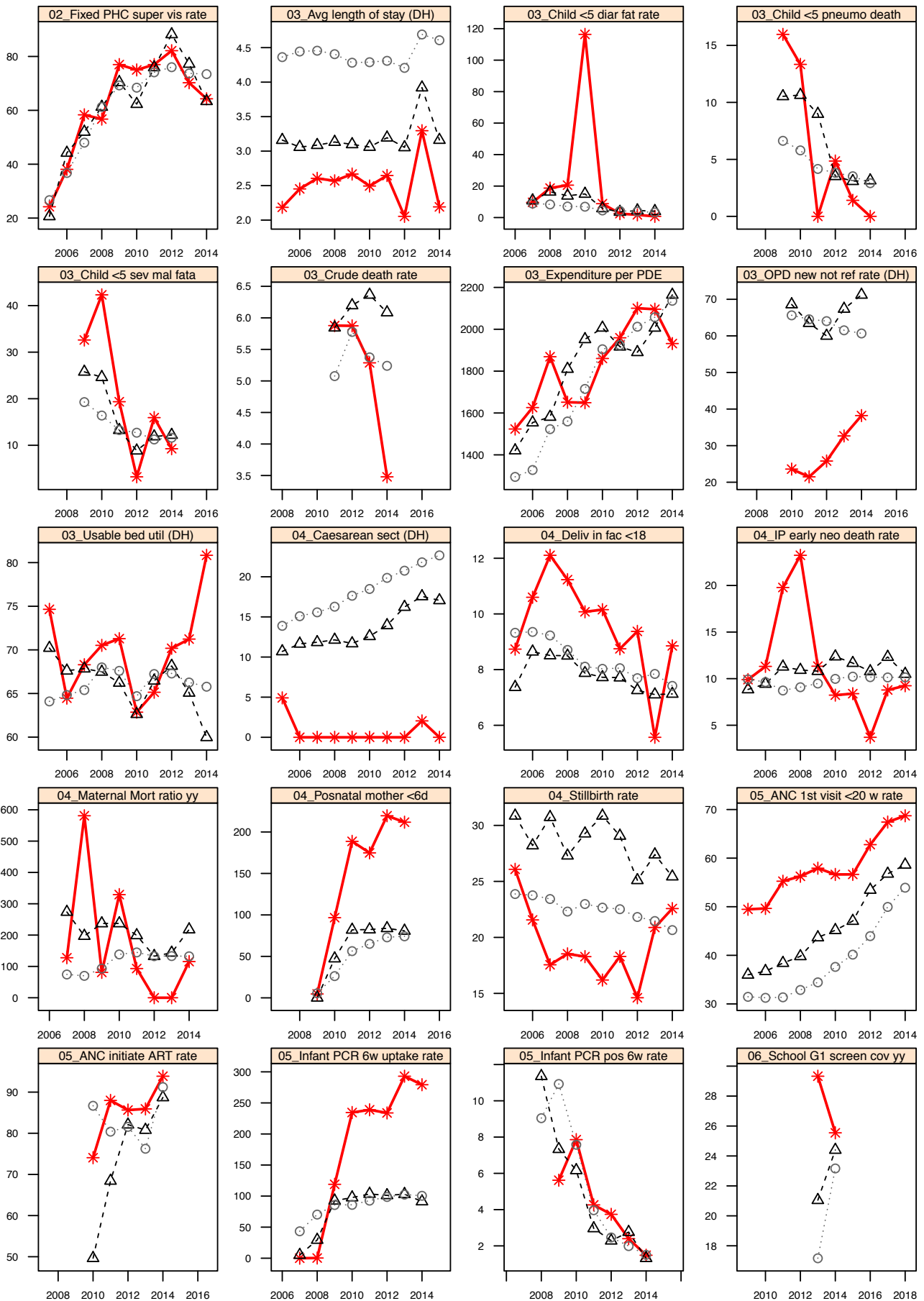
However, the performance of some indicators ranked among the 10 worst in the country. These indicators were:

- ◆ Average length of stay (highest in the country)
- ◆ PHC doctor clinical workload (highest in the country)
- ◆ Incidence (diagnosed cases) of TB - all types
- ◆ Percentage of deaths ill-defined

Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

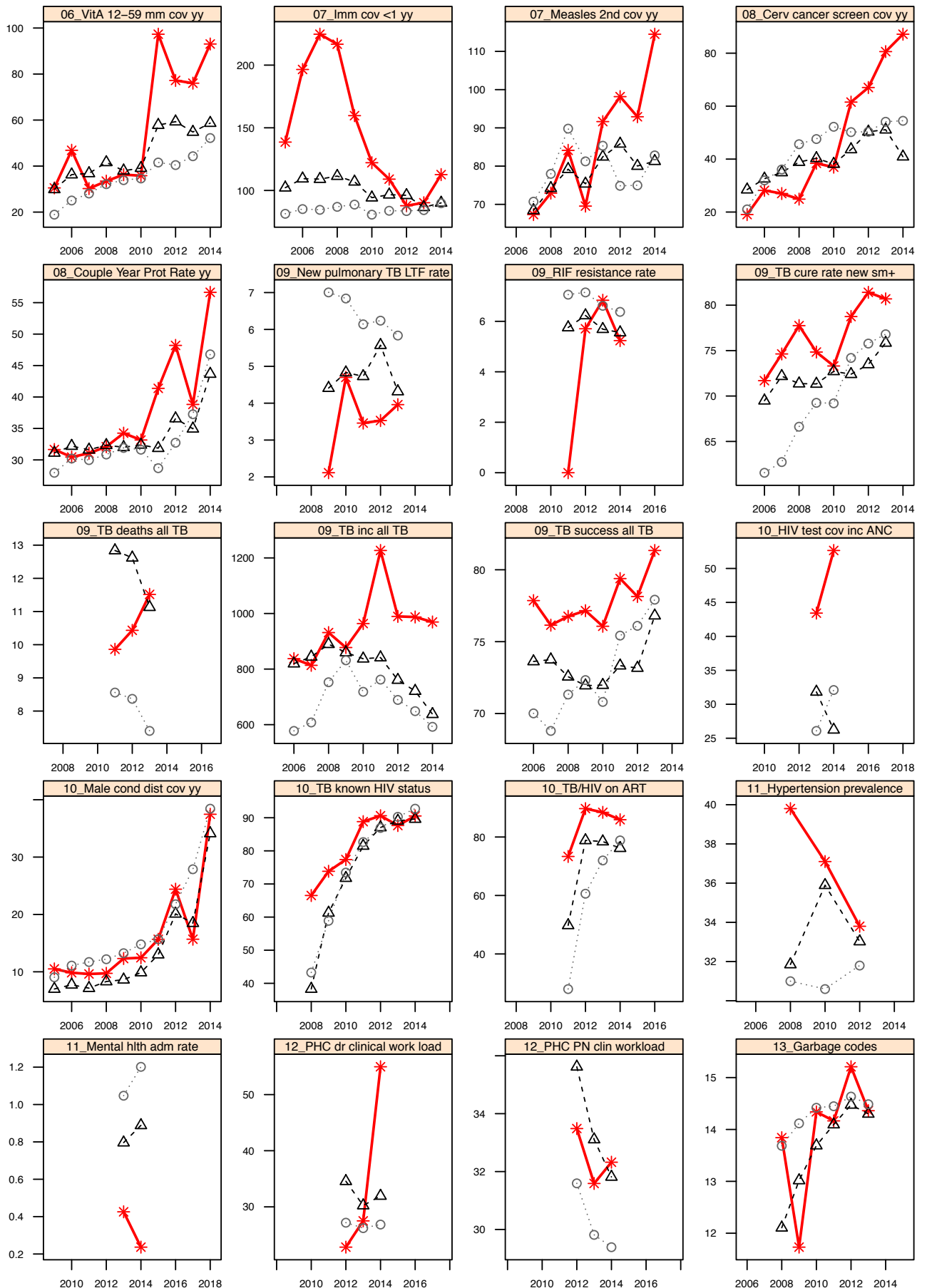
- ◆ PHC supervisor visit rate (fixed clinic/CHC/CDC)
- ◆ Average length of stay (district hospitals)
- ◆ Child under 5 years severe acute malnutrition case fatality rate
- ◆ Delivery by Caesarean section rate (district hospitals)
- ◆ Delivery in facility under 18 years rate
- ◆ Maternal mortality in facility ratio
- ◆ Stillbirth in facility rate
- ◆ School Grade 1 screening coverage
- ◆ PHC doctor clinical workload
- ◆ Incidence (diagnosed cases) of TB - all types
- ◆ TB death rate (all TB)
- ◆ TB treatment success rate (all TB)
- ◆ Hypertension prevalence rate (crude)
- ◆ Percentage of deaths ill-defined
- ◆ Percentage of years of life lost due to non-communicable diseases

Annual indicators for district: Xhariep (DC16)



District value * Provincial average Δ ZA (national) average ○

Annual indicators for district: Xhariep (DC16)



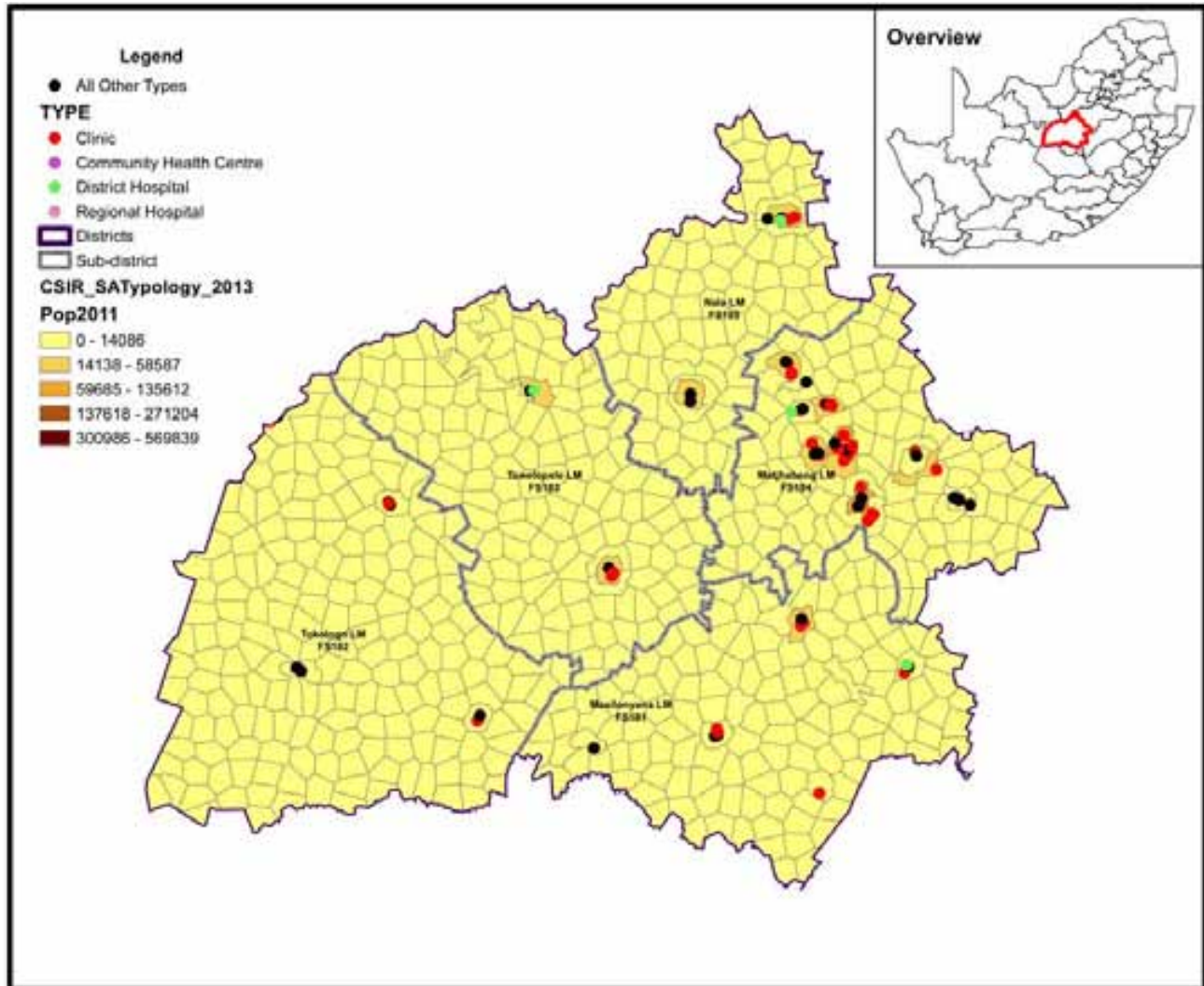
District value * Provincial average Δ ZA (national) average ○

Lejweleputswa District Municipality (DC18)

Naomi Massyn

Lejweleputswa District is located in the north-western part of the Free State Province. The district is divided into five sub-districts, namely Masilonyana, Tokologo, Tswelopele, Matjhabeng and Nala, with a population of 603 136 and a population density of 18.9 people per km². The district falls in socio-economic Quintile 4, among the wealthier districts.

Population distribution, sub-district boundaries and health facility locations: Lejweleputswa (DC18)



Burden of disease profile

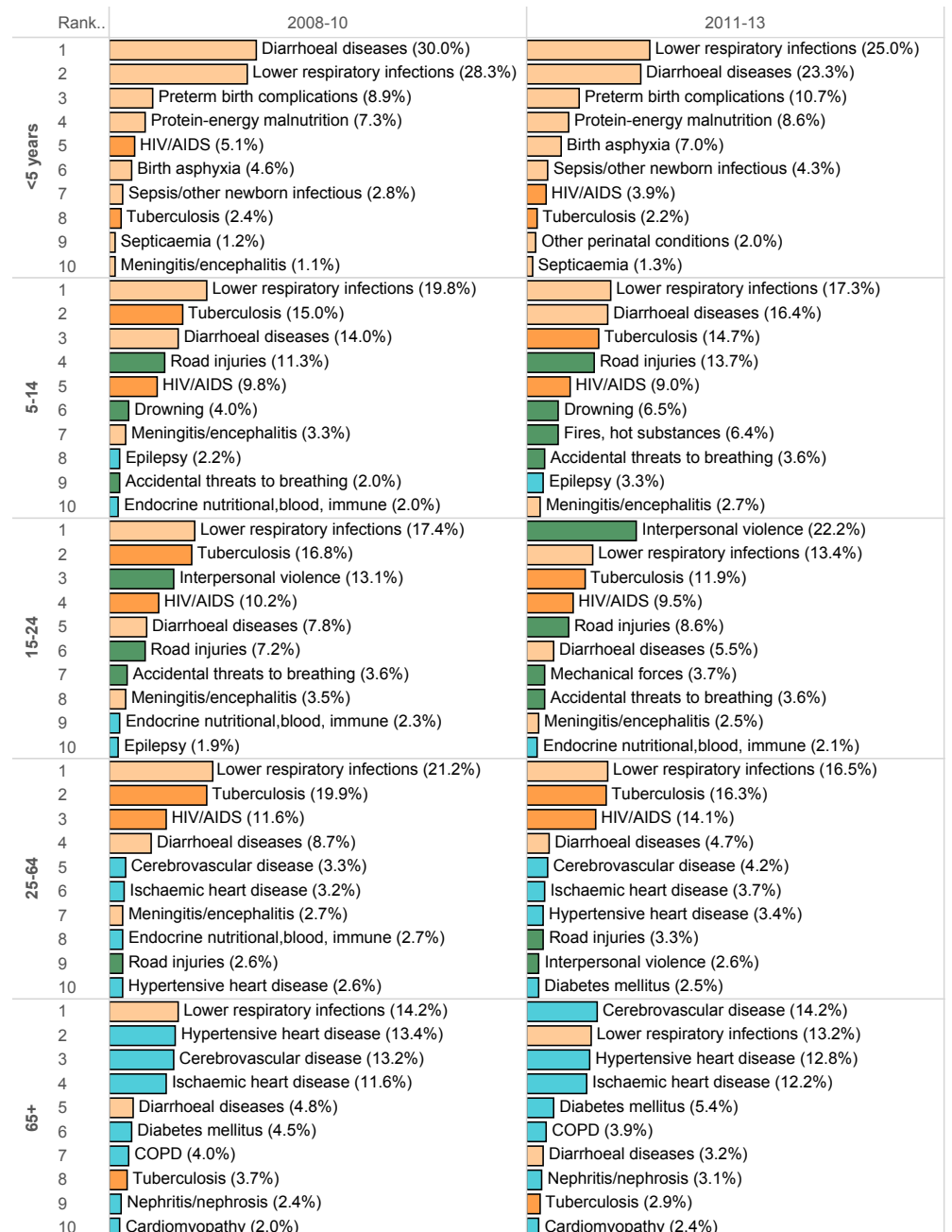
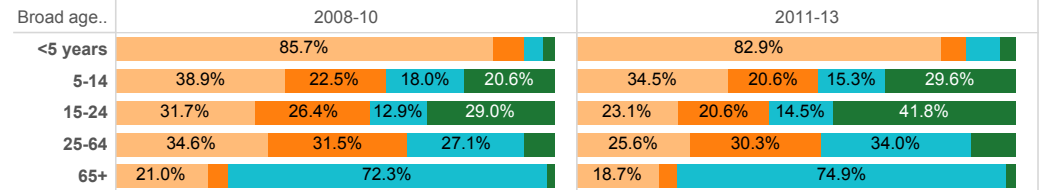
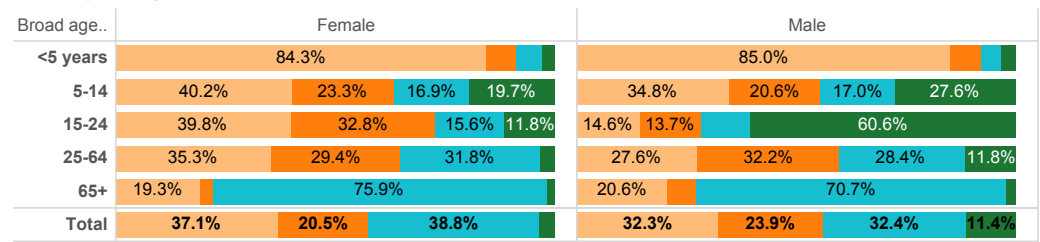
Percentage of deaths by broad cause and leading causes, 2008-2013: Lejweleputswa (DC18)

Percentage of deaths by broad cause and leading causes, 2008-2013

Prov, District
FS, Lejweleputswa: DC18
 Show History

Broadcause
■ Injury
■ NCD
■ HIV and TB
■ Comm_mat_peri_nut

FS, Lejweleputswa: DC18



Broad cause groups by age and gender

In the under-5-year age group, communicable diseases together with maternal, perinatal and nutritional conditions accounted for around 85% of deaths among females and males, which was the highest proportion in the country.

In the 5–14-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 40.2% of deaths among females versus 34.8% among males. There were gender differences in the percentages for the other broad causes too: HIV and TB mortality was 23.3% among females versus 20.6% among males, and injuries accounted for 19.7% of deaths among females versus 27.6% among males.

In the 15–24-year age group, injuries accounted for 11.8% of deaths among females versus 60.8% among males. Proportionate differences were bigger for all the broad causes: communicable diseases and maternal, perinatal and nutritional conditions accounted for 39.8% of deaths among females versus only 14.6% among males, and HIV and TB mortality was 32.8% for females versus 13.7% for males.

In the 25–64-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for the largest proportion of deaths among females (35.3%), while HIV and TB mortality was highest among males (32.2%). Non-communicable diseases accounted for 31.8% of deaths among females and 26.4% among males.

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths (75.9% among females and 70.7% among males). Communicable diseases together with maternal, perinatal and nutritional conditions accounted for around 20% of deaths in females and males.

Trends in broad cause groups by age

In children under 5 years, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 85.7% in 2008–2010 to 82.9% in 2011–2013. In the 5–14-year age group, injury-related deaths increased over this period from 20.6% to 29.6%, while all other broad causes decreased. In the 15–24-year age group, communicable diseases and maternal, perinatal and nutritional conditions decreased, as did HIV and TB mortality. Injury-related deaths increased from 29.0% to 41.8%. In the 25–64-year age group, the percentage of deaths due to non-communicable diseases increased from 27.1% to 34.0% and deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 34.6% to 25.6%. In the 65-years-and-older age group, non-communicable disease mortality increased slightly from 72.3% to 74.9%, while deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 21.0% to 18.7%.

Trends in leading causes of death by age

Under 5 years

Lower respiratory infections, diarrhoeal diseases, preterm birth complications and protein-energy malnutrition remained the four leading causes of death between 2008–2010 and 2011–2013.

5–14 years

Lower respiratory infections were the leading cause of death in 2008–2010 and 2011–2013. In 2011–2013, this was followed by diarrhoeal diseases, TB and road injuries. HIV and AIDS remained in fifth position at around 9%.

15–24 years

Interpersonal violence, lower respiratory infections, TB, and HIV and AIDS remained the four leading causes of death between 2008–2010 and 2011–2013. Road injuries, mechanical forces and accidental threats to breathing also ranked among the top 10 causes of death.

25–64 years

Lower respiratory infections, TB, HIV and AIDS and diarrhoeal diseases remained the four leading causes of death in this age group between 2008–2010 and 2011–2013, followed by cerebrovascular and ischaemic heart diseases. Diabetes mellitus was ranked 10th in 2011–2013.

65 years and older

Cerebrovascular disease, lower respiratory infections, hypertensive heart disease and ischaemic heart disease remained the leading causes of death in this age group between 2008–2010 and 2011–2013. Diabetes mellitus ranked fifth in 2011–2013.

Indicator performance: Lejweleputswa (DC18)

Category	Indicator	District value			District ranking 2014/15	Provincial average 2014/15	Provincial target 2014/15	Provincial target 2015/16	National average 2014/15	National target 2014/15	National target 2015/16
		2012/13	2013/14	2014/15							
Management PHC	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	90.4	90.8	73.0	33	63.4	100.0		73.5		
Management Inpatients	Average length of stay (district hospitals) [Days]	2.4	2.8	2.4	51	3.2	3.1		4.6		
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	2 243.0	2 294.4	2 311.2	21	2 164.5			2 136.4		
	Inpatient bed utilisation rate (district hospitals) [Percentage]	55.9	50.1	49.6	50	60.0	70.0		65.8		
	OPD new client not referred rate (district hospitals) [Percentage]	55.8	62.4	61.7	28	71.2			60.7		
	Child under 5 years diarrhoea case fatality rate [Percentage]	5.6	4.3	2.7	23	4.1	3.0	3.0	3.3	3.5	3.0
Mortality Inpatients	Child under 5 years pneumonia case fatality rate [Percentage]	3.7	2.7	5.1	46	3.1	3.0	3.0	2.9		
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	12.5	17.6	21.5	51	12.2	7.0	11.4	11.6	8.0	7.0
	Inpatient crude death rate [Percentage]	6.8	7.3	6.5	42	6.1			5.2		
Delivery	Delivery by Caesarean section rate (district hospitals) [Percentage]	13.4	11.6	9.7		17.1			22.7		
	Delivery in facility under 18 years rate [Percentage]	6.8	6.9	7.9	23	7.1			7.4		
	Inpatient early neonatal death rate [per 1 000 live births]	11.9	14.8	13.5	44	10.5		11.0	10.1		0
	Maternal mortality in facility ratio [per 100 000 live births]	159.2	192.2	211.1	44	217.8	130.0	128.0	132.5	100	80.0
	Mother postnatal visit within 6 days rate [Percentage]	79.5	87.7	88.3	5	80.8		82.0	74.3	80.0	85.0
	Stillbirth in facility rate [per 1 000 births]	26.7	30.1	30.5	51	25.4			20.7		
	Antenatal 1st visit before 20 weeks rate [Percentage]	55.2	57.8	60.7	14	58.6	70.0	60.0	53.9	65.0	70.0
PMTCT	Antenatal client initiated on ART rate [Percentage]	81.0	83.6	89.2	35	88.7		95.0	91.2	93.0	96.0
	Infant 1st PCR test around 6 weeks uptake rate [Percentage]	95.1	106.5	97.0	29	91.3			100.6		
	Infant 1st PCR test positive around 6 weeks rate [Percentage]	1.7	2.2	0.9	4	1.3	2.0	2.0	1.5	1.8	2.0
	School Grade 1 screening coverage [Percentage]		27.2	41.5	8	24.4	29.5	40.0	23.2	30.0	35.0
Child Health	Vitamin A dose 12-59 months coverage [Percentage]	78.9	77.5	83.0	2	58.7	65.0	60.0	52.2	55.0	
	Immunisation coverage under 1 year [Percentage]	98.5	97.4	100.7	8	90.1	95.0	95.0	89.8	95.0	91.0
Immunisation	Measles 2nd dose coverage [Percentage]	100.5	99.0	95.1	6	81.3	95.0	85.0	82.8	85.0	85.0
	Cervical cancer screening coverage [(Percentage]	48.6	49.4	44.7	33	40.9	58.0	60.0	54.5	60.0	64.0
Reproductive health	Couple year protection rate [Percentage]	42.5	44.0	49.1	21	43.7	45.0		46.8	55.0	
	TB Rifampicin resistance confirmed client rate [Percentage]	8.4	6.0	4.7	12	5.6			6.4		
TB case finding	HIV testing coverage (including ANC)		29.0	21.7	50	26.2			32.1		
	Male condom distribution coverage	26.9	25.8	34.6	30	34.1		0.0	38.4		
Non-communicable diseases	Hypertension incidence [per 1 000]	13.9	11.5	9.4		12.8	15.7		13.9		
	Mental health admission rate [Percentage]		0.6	0.2		0.9	1.0		1.2		
Human Resources	PHC doctor clinical workload [Clients per doctor per day]	57.6	38.5	37.0	39	31.9			26.9		
	PHC professional nurse clinical workload [Clients per nurse per day]	33.5	32.1	29.8	1	31.8			29.4		

Section B: Profile Free State Province

Category	Indicator	District value				District ranking 2013	Provincial average 2013	Provincial target 2013	Provincial target 2014	National average 2013	National target 2013	National target 2014
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		952.6	899.9	754.2	34	637.6			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	69.4	72.1	75.7		27	75.8			76.8		
	TB death rate (all TB) [Percentage]	12.6	9.4	8.1		25	11.1			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	4.9	6.2	4.4		14	4.3			5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	73.7	77.0	80.9		13	76.8	85.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		82.3	86.9	85.0	49	89.6			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		71.2	76.2	73.4	36	76.2			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		29.6			16	33.0			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	12.2	12.4	12.5		15	14.3			14.5		
	Percentage of deaths ill-defined [Percentage]	16.9	15.5	14.7		36	13.0			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	38.8	30.8	30.3		48	25.3			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	22.8	25.1	23.8		14	26.0			27.9		
	Percentage of YLLs due to injuries [Percentage]	9.5	11.2	13.2		32	11.9			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	28.9	32.9	32.7		18	36.7			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to some indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ Mother postnatal visit within 6 days rate
- ◆ Infant 1st PCR test positive around 6 weeks rate
- ◆ School Grade 1 screening coverage,
- ◆ Vitamin A dose 12-59 months coverage (second best in the country)
- ◆ Immunisation coverage under 1 year
- ◆ Measles 2nd dose coverage.
- ◆ PHC professional nurse clinical workload

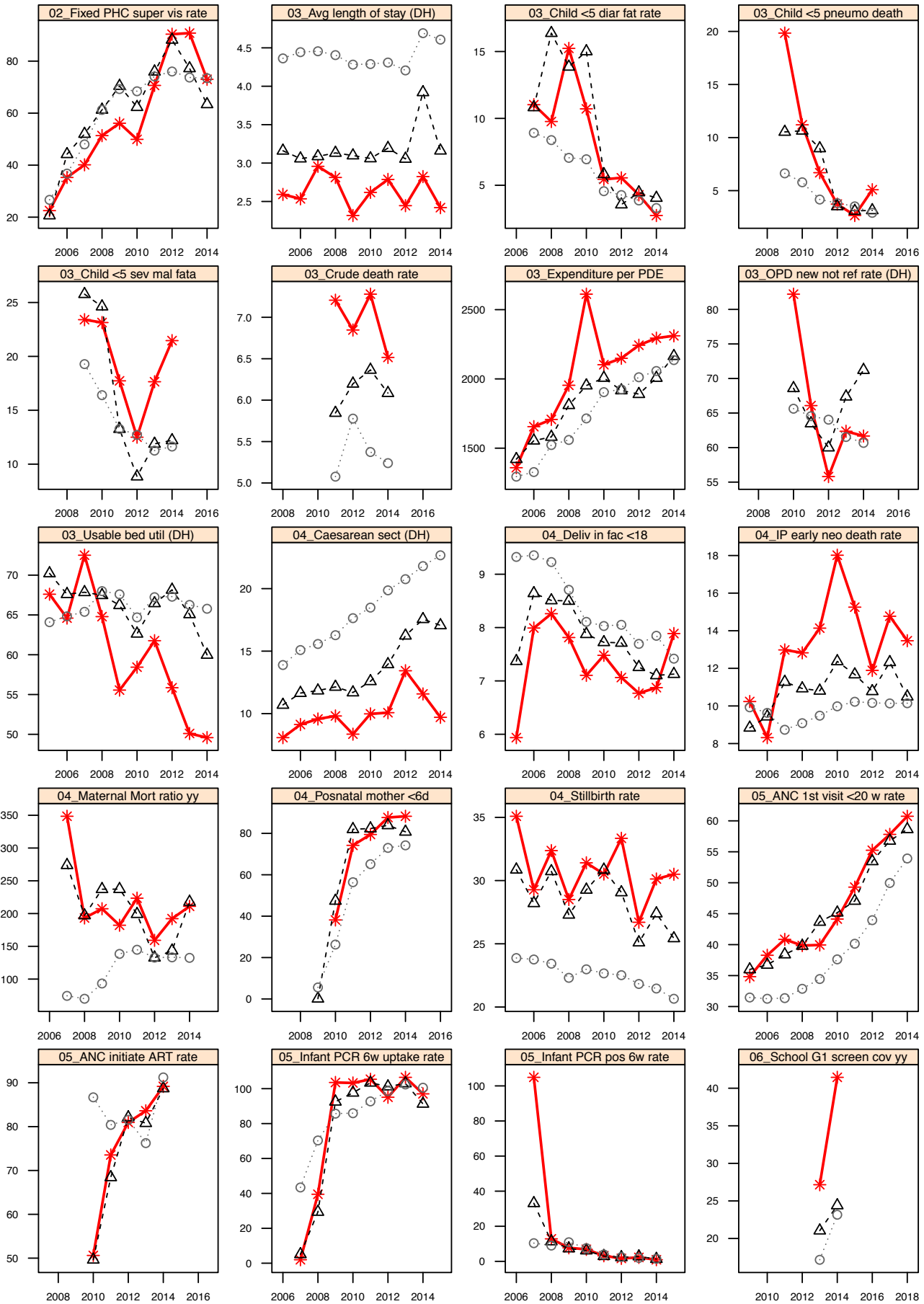
However, the performance of some indicators ranked among the 10 worst in the country. These indicators were:

- ◆ Average length of stay (district hospitals) (second highest in the country)
- ◆ Inpatient bed utilisation rate (district hospitals) (third lowest in the country)
- ◆ Child under 5 years pneumonia case fatality rate
- ◆ Child under 5 years severe acute malnutrition case fatality rate (second highest in the country)
- ◆ Inpatient early neonatal death rate
- ◆ Maternal mortality in facility ratio
- ◆ Stillbirth in facility rate (second highest in the country)
- ◆ HIV testing coverage (including ANC) (third lowest in the country)
- ◆ Percentage of TB cases with known HIV status
- ◆ Percentage of years of life lost (YLLs) due to communicable, maternal, perinatal, nutrition causes

Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

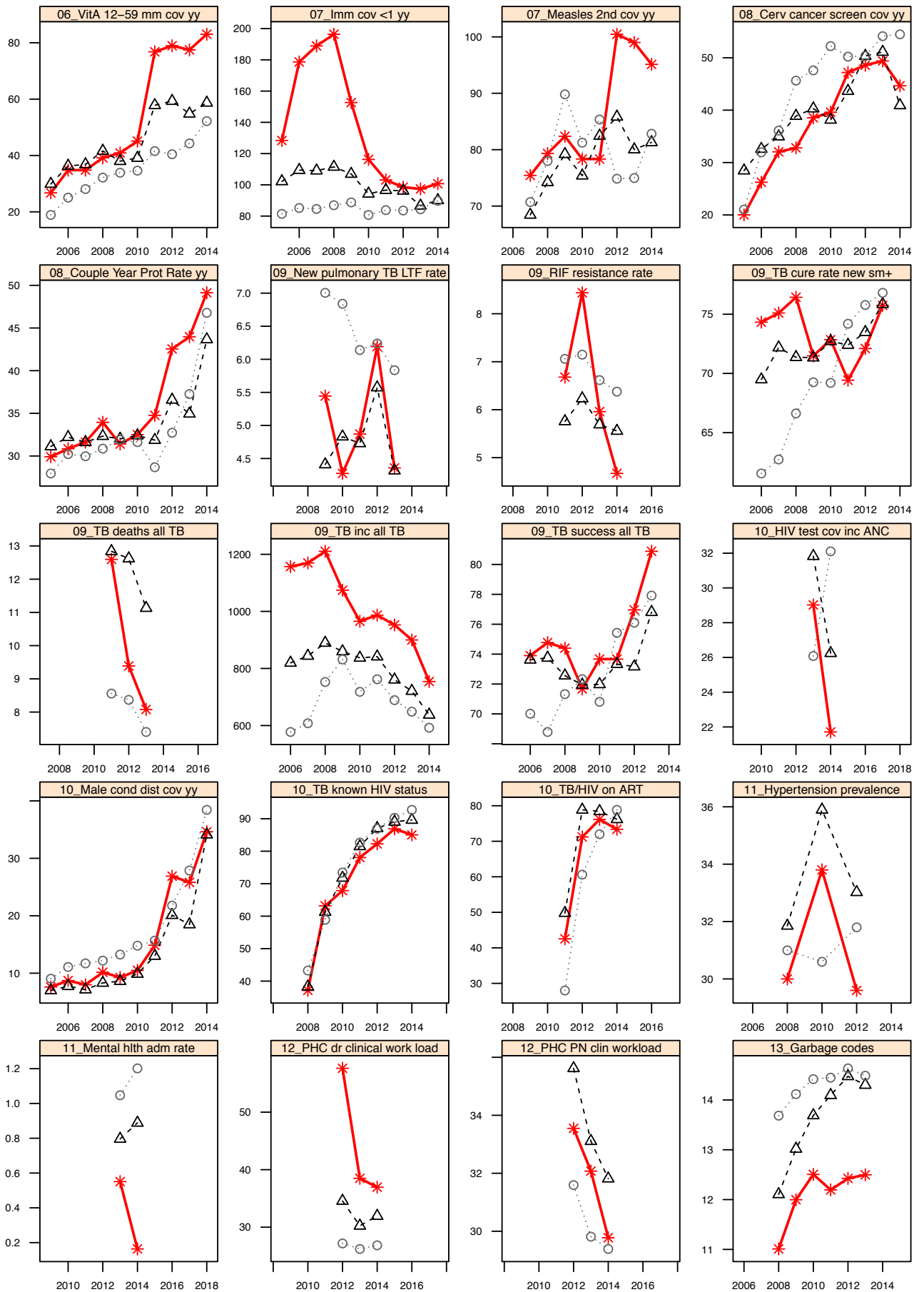
- ◆ PHC supervisor visit rate (fixed clinic/CHC/CDC)
- ◆ Average length of stay (district hospitals)
- ◆ Inpatient bed utilisation rate (district hospitals)
- ◆ Child under 5 years pneumonia and severe acute malnutrition case fatality rates
- ◆ Inpatient crude death rate
- ◆ Delivery in facility under 18 years rate
- ◆ Inpatient early neonatal death rate
- ◆ Maternal mortality in facility ratio
- ◆ Stillbirth in facility rate
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Antenatal client initiated on ART rate
- ◆ Cervical cancer screening coverage
- ◆ Couple year protection rate
- ◆ HIV testing coverage (including ANC)
- ◆ PHC doctor clinical workload
- ◆ Incidence (diagnosed cases) of TB - all types
- ◆ TB death rate (all TB)
- ◆ TB treatment success rate (all TB)
- ◆ Percentage of TB cases with known HIV status
- ◆ TB/HIV co-infected client on ART rate
- ◆ Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes

Annual indicators for district: Lejweleputswa (DC18)



District value * Provincial average Δ ZA (national) average ○

Annual indicators for district: Lejweleputswa (DC18)



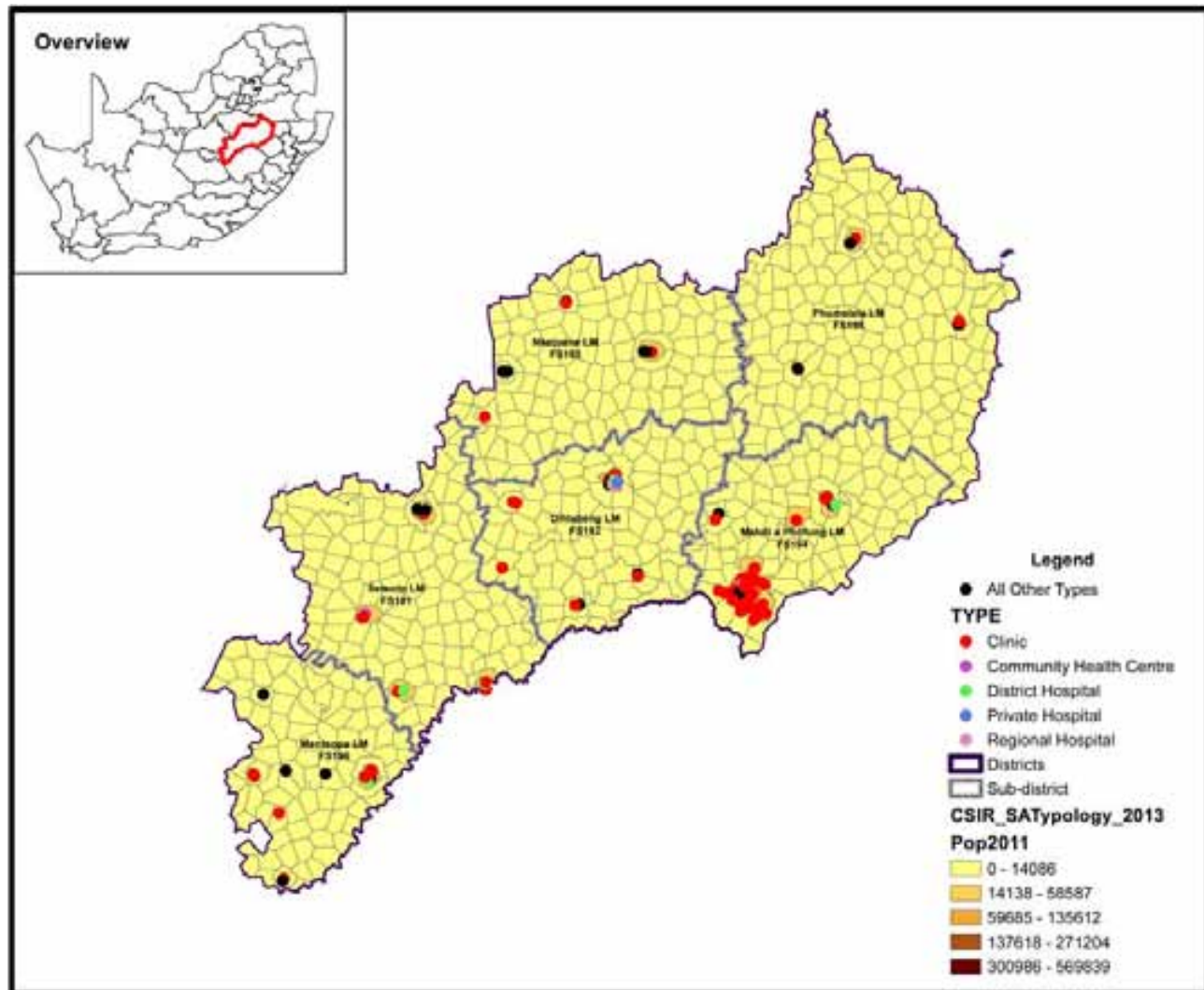
District value * Provincial average Δ ZA (national) average ○

Thabo Mofutsanyane District Municipality (DC19)

Naomi Massyn

Thabo Mofutsanyane District is located in the eastern Free State Province and borders Lesotho and KwaZulu-Natal. It includes six sub-districts, namely Setsoto, Dihlabeng, Nketoana, Maluti-a-Phofung, Phumelela and Mantsopa. The district has a population of 718 549, with a population density of 21.6 people per km², and falls in socio-economic Quintile 3. It is one of 11 National Health Insurance (NHI) pilot districts.

Population distribution, sub-district boundaries and health facility locations: Thabo Mofutsanyane (DC19)



Burden of disease profile

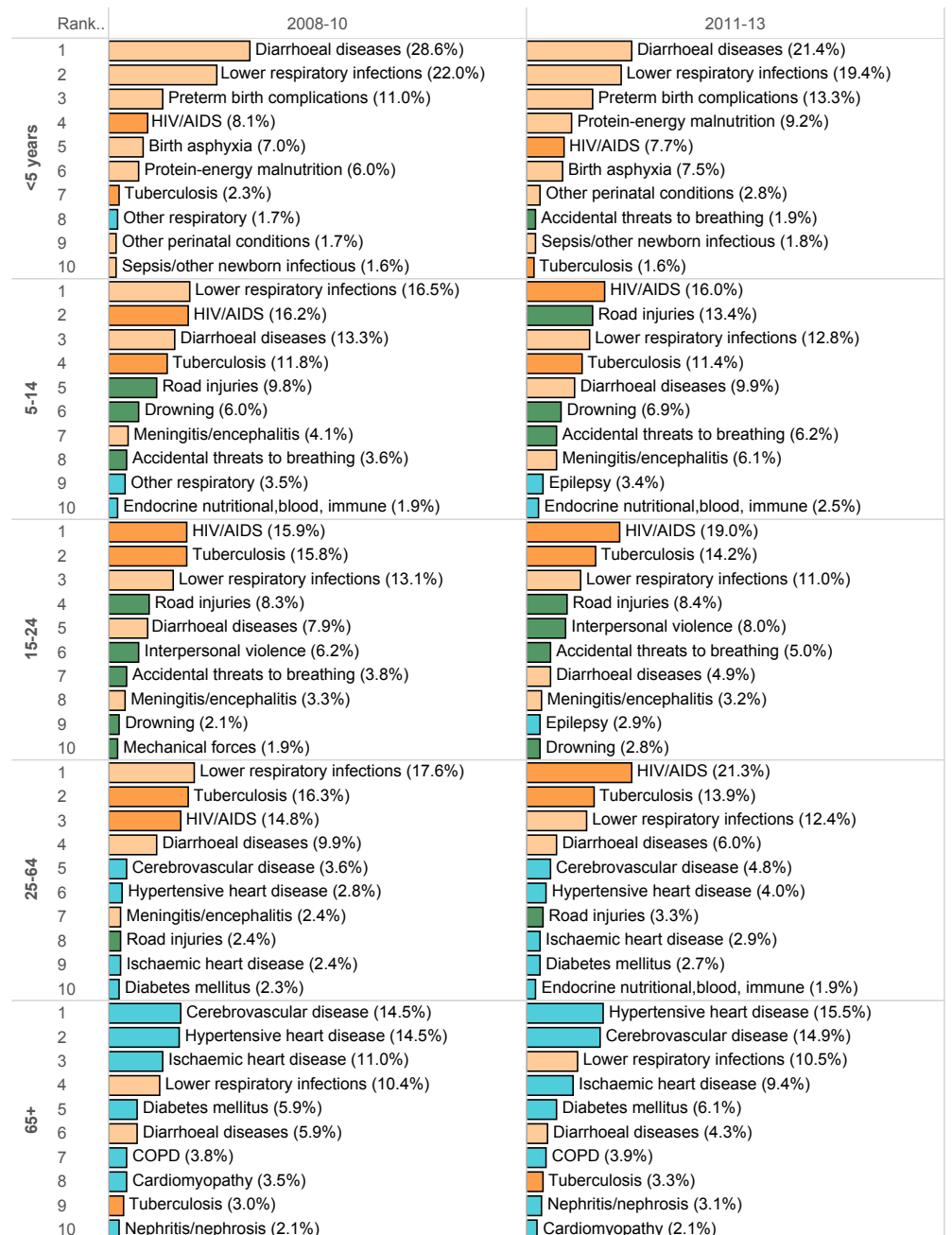
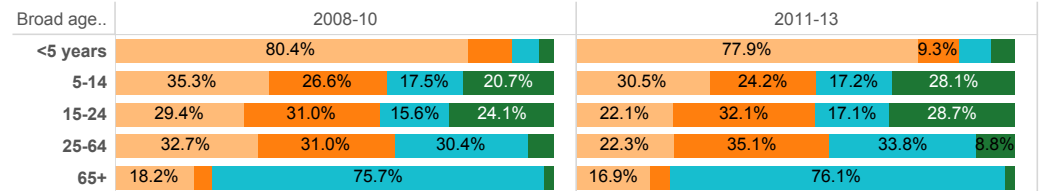
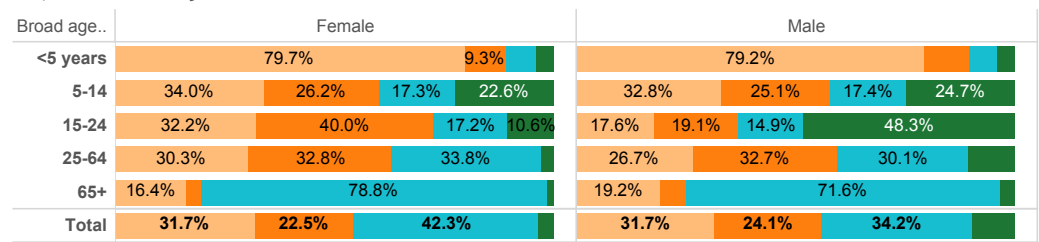
Percentage of deaths by broad cause and leading causes, 2008-2013: Thabo Mofutsanyane (DC19)

Percentage of deaths by broad cause and leading causes, 2008-2013

Prov, District
FS, T Mofutsanyana: DC19
 Show History

Broadcause
■ Injury
■ NCD
■ HIV and TB
■ Comm_mat_peri_nut

FS, T Mofutsanyana: DC19



Broad cause groups by age and gender

In the under-5-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for around 80% of deaths among females and males.

In the 5–14-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 34.0% of deaths among females versus 32.8% among males and injuries accounted for 22.6% of deaths among females versus 24.7% among males.

In the 15–24-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 32.2% of deaths among females versus 17.6% among males and injuries accounted for 10.6% of deaths among females versus 48.3% among males.

In the 25–64-year age group, non-communicable diseases accounted for the largest proportion of deaths among females (33.8%), while HIV and TB accounted for the largest proportion among males (32.7%). Injuries accounted for a small proportion of deaths in this age group, with the percentage being much higher among males (10.5%) than females.

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths (78.8% among females and 71.6% among males).

Trends in broad cause groups by age

In children under 5 years, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 80.4% to 77.9% between 2008–2010 and 2011–2013. In the 5–14-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased while injury-related deaths increased over this period from 20.7% to 28.1%. In the 15–24-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased, while non-communicable disease mortality, HIV and TB mortality, and injury-related deaths increased slightly. In the 25–64-year age group, HIV and TB mortality increased from 31.0% to 35.1%, non-communicable disease mortality increased from 30.4% to 33.8%, and injury-related deaths increased from 5.9% to 8.8%. Deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 32.7% to 22.3%. In the 65-years-and-older age group, non-communicable disease mortality remained around 76%, while deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 18.2% to 16.9%.

Trends in leading causes of death by age

Under 5 years

Diarrhoeal diseases, lower respiratory infections and preterm birth complications remained the leading causes of death between 2008–2010 and 2011–2013. HIV and AIDS and TB ranked lower in this age group.

5–14 years

HIV and AIDS was the leading cause of death in 2011–2013, followed by road injuries, lower respiratory infections and TB. Drowning remained in sixth position at around 6%.

15–24 years

HIV and AIDS, TB, lower respiratory infections and road injuries remained the leading causes of death between 2008–2010 and 2011–2013. Interpersonal violence, accidental threats to breathing, and drowning also ranked among the top 10 causes of death.

25–64 years

HIV and AIDS, TB, lower respiratory infections and diarrhoeal diseases remained the four leading causes of death in this age group between 2008–2010 and 2011–2013, followed by cerebrovascular and hypertensive heart diseases. Diabetes mellitus ranked one position higher in 2011–2013.

65 years and older

Hypertensive heart diseases, cerebrovascular disease, lower respiratory infections, ischaemic heart disease and diabetes mellitus remained the five leading causes of death in this age group between 2008–2010 and 2011–2013, followed by diarrhoeal diseases, chronic obstructive pulmonary disease, TB, nephritis/nephrosis and cardiomyopathy.

Indicator performance: : Thabo Mofutsanyane (DC19)

Category	Indicator	District value			District ranking 2014/15	Provincial average 2014/15	Provincial target 2014/15	Provincial target 2015/16	National average 2014/15	National target 2014/15	National target 2015/16
		2012/13	2013/14	2014/15							
Management PHC	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	95.2	89.3	61.4	40	63.4	100.0		73.5		
Management Inpatients	Average length of stay (district hospitals) [Days]	2.7	3.5	2.8	50	3.2	3.1		4.6		
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	1 789.1	1 957.7	1 965.5	20	2 164.5			2 136.4		
	Inpatient bed utilisation rate (district hospitals) [Percentage]	54.3	51.9	50.6	47	60.0	70.0		65.8		
	OPD new client not referred rate (district hospitals) [Percentage]	58.5	67.5	69.6	39	71.2			60.7		
	Child under 5 years diarrhoea case fatality rate [Percentage]	5.5	6.5	4.5	39	4.1	3.0	3.0	3.3	3.5	3.0
Mortality Inpatients	Child under 5 years pneumonia case fatality rate [Percentage]	7.0	4.7	5.1	44	3.1	3.0	3.0	2.9		
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	23.3	16.6	13.0	34	12.2	7.0	11.4	11.6	8.0	7.0
	Inpatient crude death rate [Percentage]	6.4	6.7	6.9	49	6.1			5.2		
Delivery	Delivery by Caesarean section rate (district hospitals) [Percentage]	10.1	10.7	8.7		17.1			22.7		
	Delivery in facility under 18 years rate [Percentage]	8.1	7.8	7.6	20	7.1			7.4		
	Inpatient early neonatal death rate [per 1 000 live births]	12.3	12.9	8.0	12	10.5		11.0	10.1		0
	Maternal mortality in facility ratio [per 100 000 live births]	157.5	123.3	213.1	45	217.8	130.0	128.0	132.5	100	80.0
	Mother postnatal visit within 6 days rate [Percentage]	88.6	92.2	89.6	4	80.8		82.0	74.3	80.0	85.0
	Stillbirth in facility rate [per 1 000 births]	24.7	27.5	25.2	44	25.4			20.7		
	Antenatal 1st visit before 20 weeks rate [Percentage]	52.8	55.7	58.5	20	58.6	70.0	60.0	53.9	65.0	70.0
PMTCT	Antenatal client initiated on ART rate [Percentage]	79.4	82.7	89.3	34	88.7		95.0	91.2	93.0	96.0
	Infant 1st PCR test around 6 weeks uptake rate [Percentage]	113.6	115.4	105.6	14	91.3			100.6		
	Infant 1st PCR test positive around 6 weeks rate [Percentage]	2.1	3.0	1.8	30	1.3	2.0	2.0	1.5	1.8	2.0
	School Grade 1 screening coverage [Percentage]		26.0	21.8	25	24.4	29.5	40.0	23.2	30.0	35.0
Child Health	Vitamin A dose 12-59 months coverage [Percentage]	72.5	59.8	59.9	10	58.7	65.0	60.0	52.2	55.0	
	Immunisation coverage under 1 year [Percentage]	108.0	91.7	92.5	14	90.1	95.0	95.0	89.8	95.0	91.0
Immunisation	Measles 2nd dose coverage [Percentage]	97.3	89.5	83.9	19	81.3	95.0	85.0	82.8	85.0	85.0
	Cervical cancer screening coverage [(Percentage]	64.0	68.5	43.4	37	40.9	58.0	60.0	54.5	60.0	64.0
Reproductive health	Couple year protection rate [Percentage]	42.4	38.9	37.8	43	43.7	45.0		46.8	55.0	
	TB Rifampicin resistance confirmed client rate [Percentage]	4.8	5.1	5.1	18	5.6			6.4		
TB case finding	HIV testing coverage (including ANC)		35.0	28.4	39	26.2			32.1		
	Male condom distribution coverage	20.4	19.0	21.6	43	34.1		0.0	38.4		
HIV	Hypertension incidence [per 1 000]	15.7	25.5	10.1		12.8	15.7		13.9		
	Mental health admission rate [Percentage]		0.9	0.8		0.9	1.0		1.2		
Non-communicable diseases	PHC doctor clinical workload [Clients per doctor per day]	48.1	32.8	34.5	27	31.9			26.9		
	PHC professional nurse clinical workload [Clients per nurse per day]	38.8	39.0	34.6	29	31.8			29.4		

Section B: Profile Free State Province

Category	Indicator	District value				District ranking 2013	Provincial average 2013	Provincial target 2013	Provincial target 2014	National average 2013	National target 2013	National target 2014
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		538.4	547.1	510.8	14	637.6			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	77.6	77.2	77.2		23	75.8			76.8		
	TB death rate (all TB) [Percentage]	13.7	14.6	12.4		47	11.1			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	2.7	2.4	2.9		6	4.3			5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	77.2	74.8	76.9		30	76.8	85.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		94.0	91.4	90.0	44	89.6			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		87.1	84.3	81.3	26	76.2			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		30.3			17	33.0			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	14.3	15.1	14.2		34	14.3			14.5		
	Percentage of deaths ill-defined [Percentage]	7.7	7.3	8.2		15	13.0			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	35.5	27.9	27.9		44	25.3			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	27.2	29.4	28.2		25	26.0			27.9		
	Percentage of YLLs due to injuries [Percentage]	8.3	10.2	10.7		12	11.9			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	29.0	32.4	33.2		21	36.7			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to some indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ Mother postnatal visit within 6 days
- ◆ Vitamin A dose 12-59 months coverage
- ◆ TB defaulter rate (new smear positive).

However, the performance of some indicators ranked among the 10 worst in the country. These indicators were:

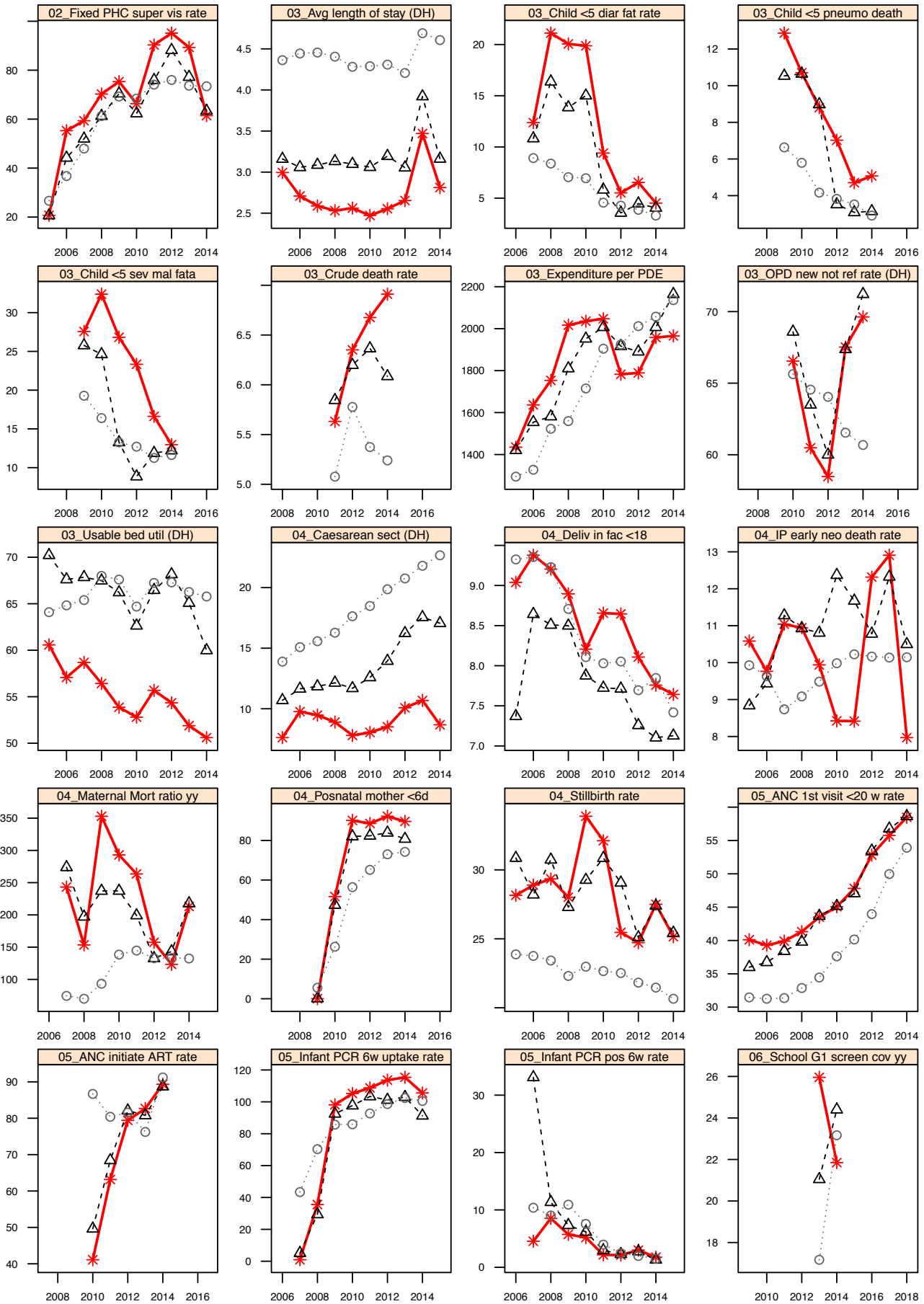
- ◆ Average length of stay (district hospitals) (third longest)
- ◆ Inpatient bed utilisation rate (district hospitals)
- ◆ Child under 5 years pneumonia case fatality rate
- ◆ Inpatient crude death rate
- ◆ Maternal mortality in facility ratio
- ◆ Stillbirth in facility rate
- ◆ Couple year protection rate
- ◆ Male condom distribution coverage
- ◆ TB death rate (all TB)
- ◆ Percentage of TB cases with known HIV status
- ◆ Percentage of years of lost life (YLLs) due to communicable, maternal, perinatal, nutrition causes

Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

- ◆ PHC supervisor visit rate (fixed clinic/CHC/CDC)
- ◆ Average length of stay (district hospitals)
- ◆ Inpatient bed utilisation rate (district hospitals)

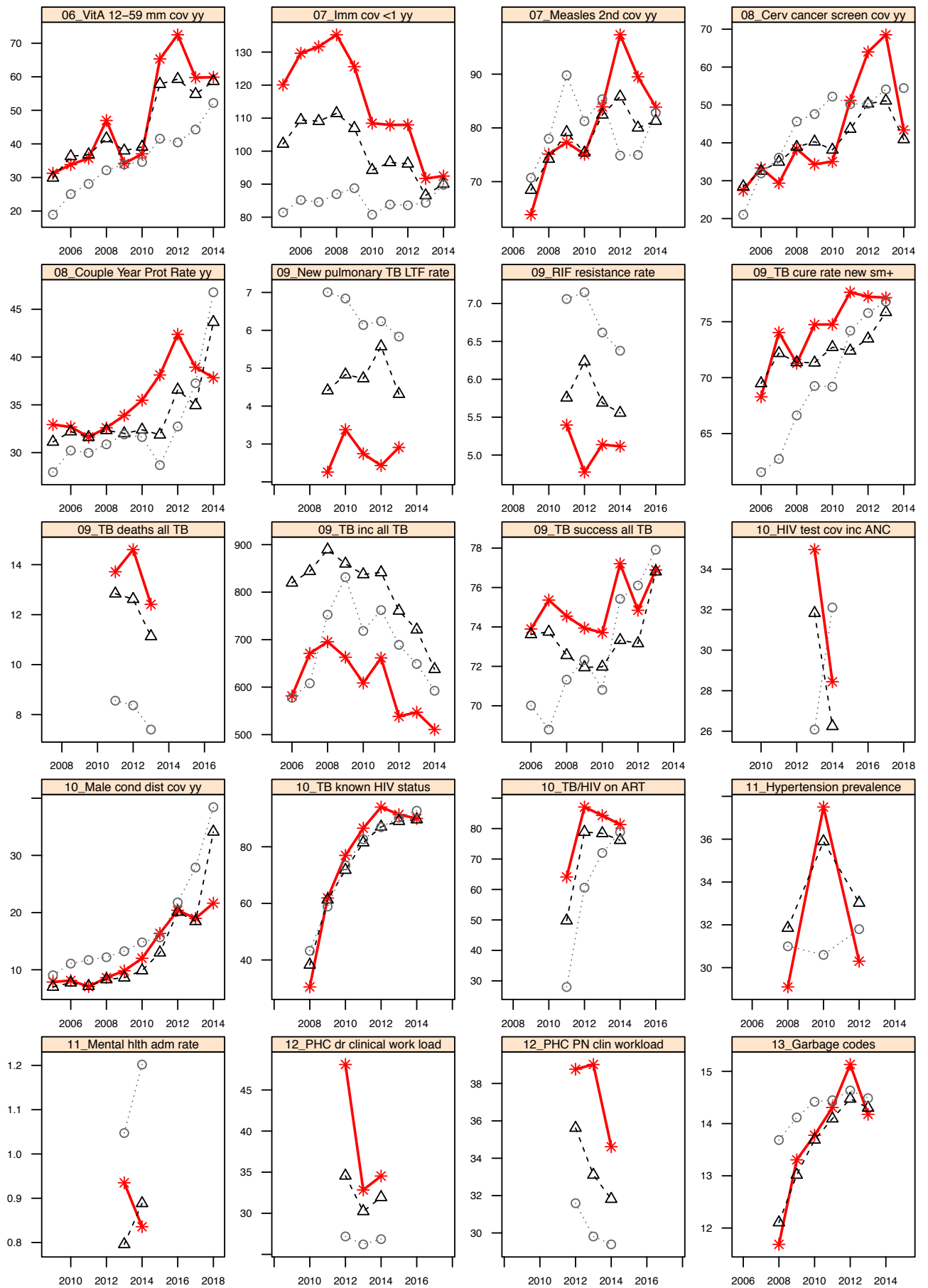
- ◆ OPD new client not referred rate (district hospitals)
- ◆ Child under 5 years diarrhoea, pneumonia and severe acute malnutrition case fatality rates
- ◆ Inpatient crude death rate
- ◆ Delivery in facility under 18 years rate
- ◆ Maternal mortality in facility ratio
- ◆ Stillbirth in facility rate
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Antenatal client initiated on ART rate
- ◆ School Grade 1 screening coverage
- ◆ Immunisation coverage under 1 year
- ◆ Measles 2nd dose coverage
- ◆ Cervical cancer screening coverage
- ◆ Couple year protection rate
- ◆ HIV testing coverage (including ANC)
- ◆ Male condom distribution coverage
- ◆ PHC doctor and professional nurse clinical workloads
- ◆ TB death rate (all TB)
- ◆ TB treatment success rate (all TB)
- ◆ Percentage of TB cases with known HIV status
- ◆ Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes
- ◆ Percentage of YLLs due to HIV and TB

Annual indicators for district: Thabo Mofutsanyane (DC19)



District value * Provincial average Δ ZA (national) average ○

Annual indicators for district: Thabo Mofutsanyane (DC19)

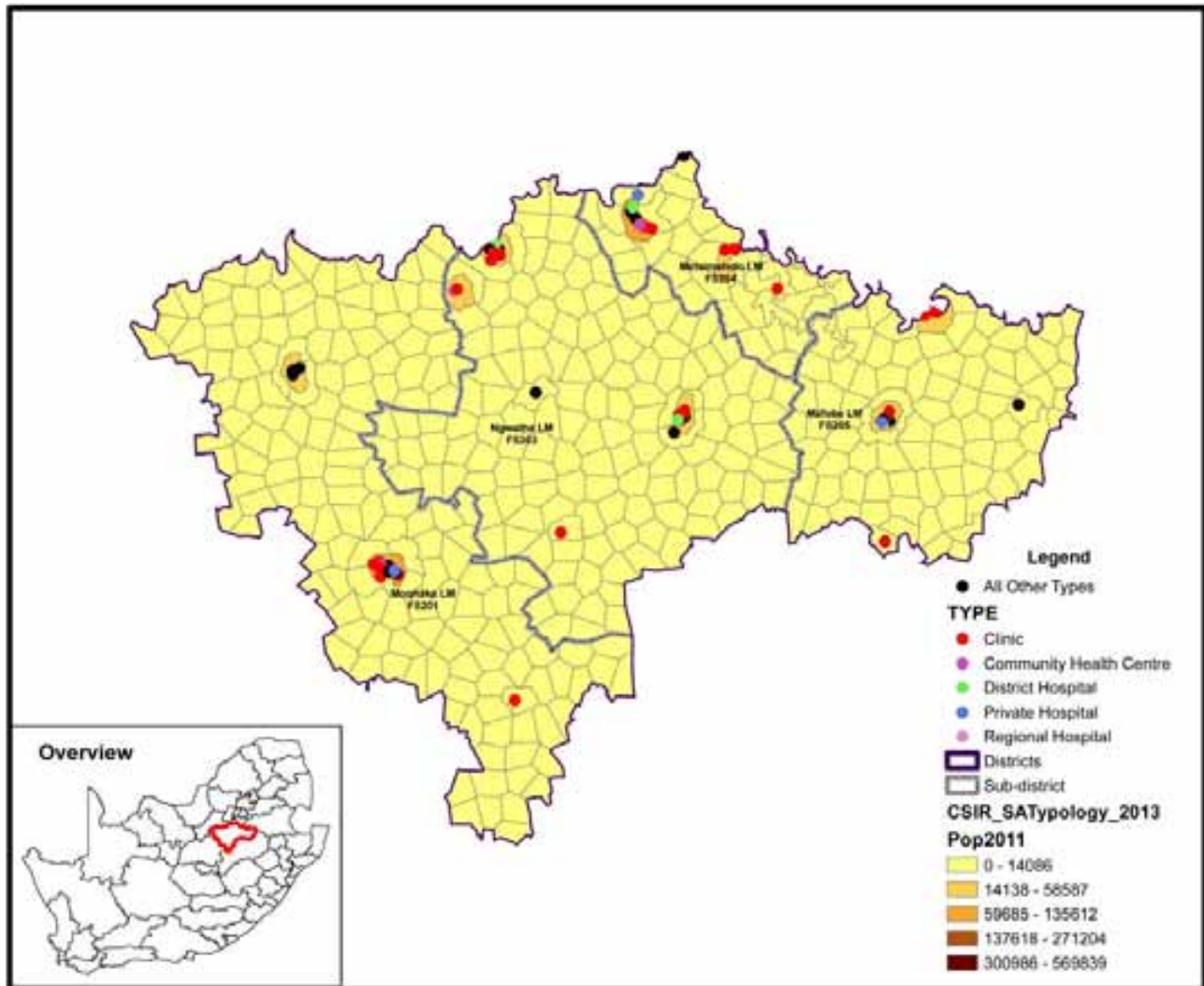


Fezile Dabi District Municipality (DC20)

Naomi Massyn

Fezile Dabi District is located in the northern Free State Province and is divided into four sub-districts, namely Moqhaka, Metsimaholo, Ngwathe and Mafube. The district has a population of 513 092, with a population density of 24.8 people per km² and falls in socio-economic Quintile 4.

Population distribution, sub-district boundaries and health facility locations: Fezile Dabi (DC20)



Burden of disease profile

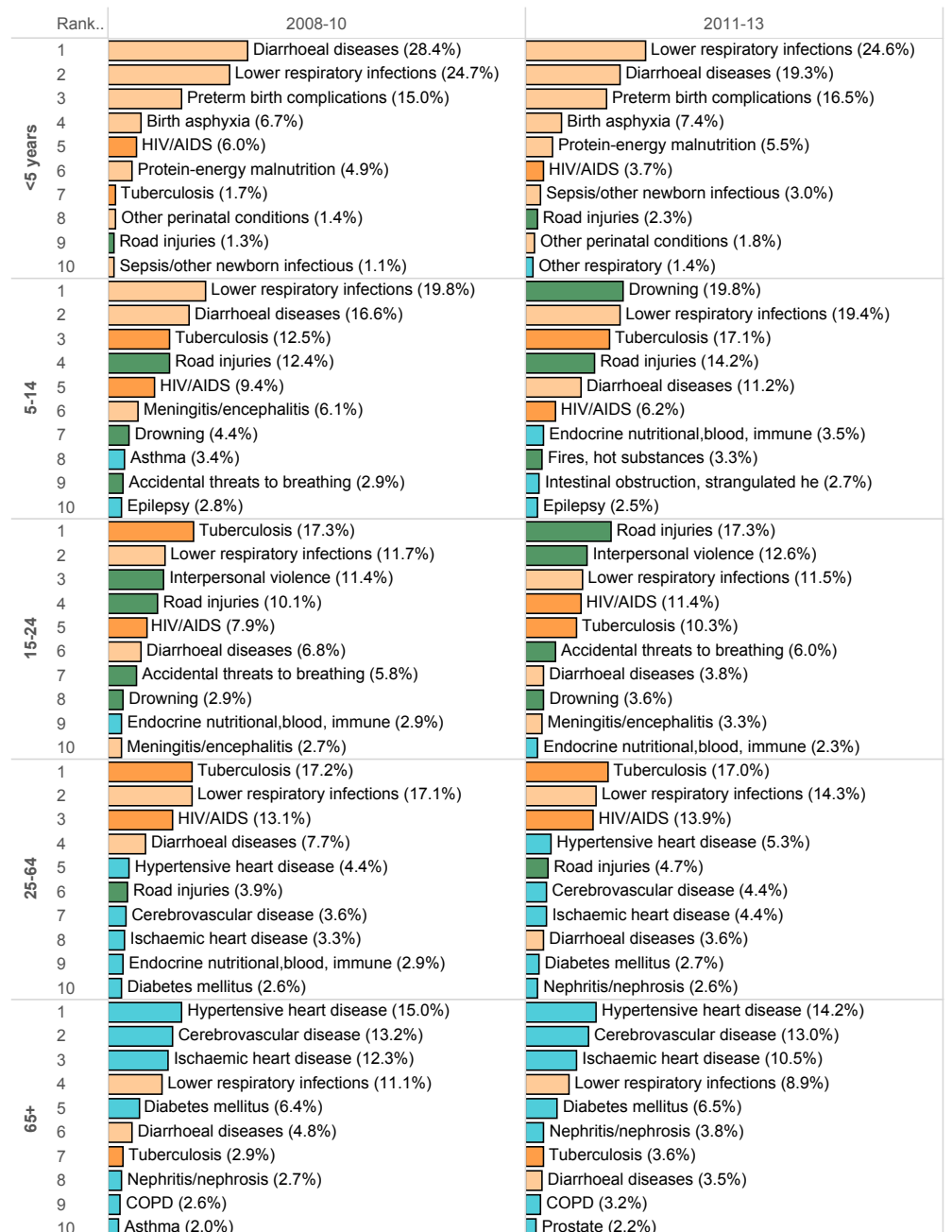
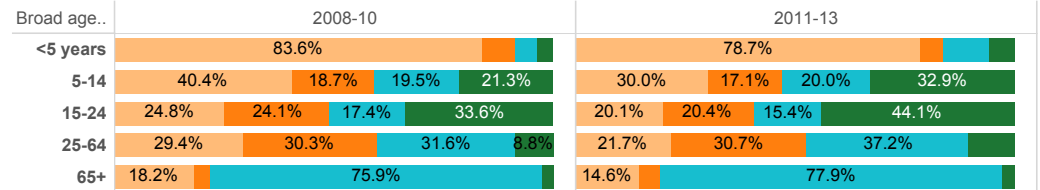
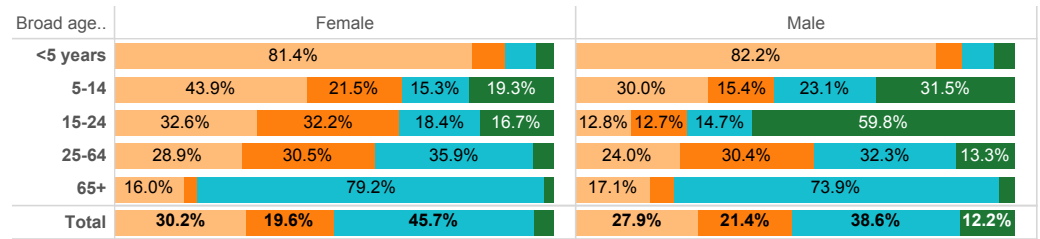
Percentage of deaths by broad cause and leading causes, 2008-2013: Fezile Dabi (DC20)

Percentage of deaths by broad cause and leading causes, 2008-2013

Prov, District
FS, Fezile Dabi: DC20
 Show History

Broadcause
■ Injury
■ NCD
■ HIV and TB
■ Comm_mat_peri_nut

FS, Fezile Dabi: DC20



Broad cause groups by age and gender

In the under-5-year age group, communicable diseases together with maternal, perinatal and nutritional conditions accounted for around 82% of deaths among females and males.

In the 5–14-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 43.9% of deaths among females versus 30.0% among males. There were gender differences in the percentages for the other broad causes too: HIV and TB accounted for 21.5% among females versus 15.4% among males, non-communicable diseases accounted for 15.3% (females) versus 23.1% (males), and injuries accounted for 19.3% (females) versus 31.5% (males).

In the 15–24-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 32.6% of deaths among females versus only 12.8% among males. Proportionate differences were bigger in this group for all the broad causes: HIV and TB mortality was 32.2% among females versus 12.7% among males, and injuries accounted for 16.7% of deaths among females versus 59.8% among males.

In the 25–64-year age group, non-communicable diseases accounted for the largest proportion of deaths among females and males (35.9% and 32.3%), followed by HIV and TB at around 30% for both females and males. Injuries accounted for a small proportion of deaths in this age group, with the percentage being much higher among males (13.3%) than females.

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths among females and males (79.2% for females and 73.9% for males), followed by communicable diseases together with maternal, perinatal and nutritional conditions.

Trends in broad cause groups by age

In children under 5 years, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 83.6% to 78.7% between 2008–2010 and 2011–2013. In the 5–14-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased, as did non-communicable disease mortality and HIV and TB mortality, while injury-related deaths increased over this period from 21.3% to 32.9%. In the 15–24-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased along with non-communicable disease mortality and HIV and TB mortality, while injury-related deaths increased from 33.6% to 44.1%. In the 25–64-year age group, the percentage of deaths due to communicable diseases together with maternal, perinatal and nutritional conditions decreased from 29.4% to 21.7%, while HIV and TB mortality stayed constant at around 30%. Non-communicable disease mortality increased from 31.6% to 37.2%. In the 65-years-and-older age group, non-communicable disease mortality increased from 75.9% to 77.9%, while deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 18.2% to 14.6%.

Trends in leading causes of death by age***Under 5 years***

Lower respiratory infections, diarrhoeal diseases, preterm birth complications and birth asphyxia remained the four leading causes of death between 2008–2010 and 2011–2013.

5–14 years

Drowning ranked as the leading cause of death in 2011–2013, followed by lower respiratory infections and TB. Road injuries remained in fourth position at 14.2%.

15–24 years

Road injuries ranked as the main leading cause of death in 2011–2013, followed by interpersonal violence, lower respiratory infections, HIV and AIDS, TB and accidental threats to breathing.

25–64 years

Tuberculosis, lower respiratory infections and HIV and AIDS remained the three leading causes of death in this age group between 2008–2010 and 2011–2013. Hypertensive heart diseases, road injuries, cerebrovascular disease and diabetes mellitus also ranked among the top 10 leading causes of death in 2011–2013.

65 years and older

Hypertensive heart diseases, cerebrovascular disease, ischaemic heart disease, lower respiratory infections and diabetes mellitus remained the five leading causes of death in this age group between 2008–2010 and 2011–2013.

Indicator performance: Fezile Dabi (DC 20)

Category	Indicator	District value			District ranking	Provincial average	Provincial target	Provincial target 2015/16	National average	National target	National target
		2012/13	2013/14	2014/15	2014/15	2014/15	2014/15	2015/16	2014/15	2014/15	2015/16
Management PHC	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	72.1	48.9	58.1	42	63.4	100.0		73.5		
Management Inpatients	Average length of stay (district hospitals) [Days]	3.4	4.2	3.9	22	3.2	3.1		4.6		
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	2 191.6	2 176.8	2 428.9	33	2 164.5			2 136.4		
	Inpatient bed utilisation rate (district hospitals) [Percentage]	83.6	95.1	68.7	22	60.0	70.0		65.8		
	OPD new client not referred rate (district hospitals) [Percentage]	74.5	78.6	80.6	49	71.2			60.7		
Mortality Inpatients	Child under 5 years diarrhoea case fatality rate [Percentage]	0.8	3.6	2.4	18	4.1	3.0	3.0	3.3	3.5	3.0
	Child under 5 years pneumonia case fatality rate [Percentage]	2.2	6.3	3.3	33	3.1	3.0	3.0	2.9		
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	6.7	17.2	20.5	48	12.2	7.0	11.4	11.6	8.0	7.0
	Inpatient crude death rate [Percentage]	6.6	7.0	6.7	47	6.1			5.2		
Delivery	Delivery by Caesarean section rate (district hospitals) [Percentage]	20.4	22.8	23.1		17.1			22.7		
	Delivery in facility under 18 years rate [Percentage]	7.4	7.1	6.9	13	7.1			7.4		
	Inpatient early neonatal death rate [per 1 000 live births]	13.5	12.4	11.1	32	10.5		11.0	10.1		0
	Maternal mortality in facility ratio [per 100 000 live births]	125.2	117.8	221.2	47	217.8	130.0	128.0	132.5	100	80.0
	Mother postnatal visit within 6 days rate [Percentage]	75.9	75.5	77.4	10	80.8		82.0	74.3	80.0	85.0
	Stillbirth in facility rate [per 1 000 births]	26.3	23.9	22.1	33	25.4			20.7		
PMTCT	Antenatal 1st visit before 20 weeks rate [Percentage]	51.1	53.2	55.8	30	58.6	70.0	60.0	53.9	65.0	70.0
	Antenatal client initiated on ART rate [Percentage]	65.0	73.3	87.9	38	88.7		95.0	91.2	93.0	96.0
	Infant 1st PCR test around 6 weeks uptake rate [Percentage]	95.1	89.5	88.5	42	91.3			100.6		
	Infant 1st PCR test positive around 6 weeks rate [Percentage]	3.6	4.1	1.3	11	1.3	2.0	2.0	1.5	1.8	2.0
Child Health	School Grade 1 screening coverage [Percentage]		13.9	12.7	44	24.4	29.5	40.0	23.2	30.0	35.0
	Vitamin A dose 12-59 months coverage [Percentage]	54.6	54.5	57.0	17	58.7	65.0	60.0	52.2	55.0	
Immunisation	Immunisation coverage under 1 year [Percentage]	82.8	73.7	79.6	36	90.1	95.0	95.0	89.8	95.0	91.0
	Measles 2nd dose coverage [Percentage]	76.1	66.8	75.0	34	81.3	95.0	85.0	82.8	85.0	85.0
Reproductive health	Cervical cancer screening coverage [Percentage]	47.4	46.7	37.1	45	40.9	58.0	60.0	54.5	60.0	64.0
	Couple year protection rate [Percentage]	33.6	34.0	43.2	32	43.7	45.0		46.8	55.0	
TB case finding	TB Rifampicin resistance confirmed client rate [Percentage]	4.4	5.0	6.2	35	5.6			6.4		
HIV	HIV testing coverage (including ANC)		31.0	22.6	49	26.2			32.1		
	Male condom distribution coverage	18.3	20.1	33.7	32	34.1		0.0	38.4		
Non-communicable diseases	Hypertension incidence [per 1 000]	13.6	16.5	16.5		12.8	15.7		13.9		
	Mental health admission rate [Percentage]		1.1	1.3		0.9	1.0		1.2		
Human Resources	PHC doctor clinical workload [Clients per doctor per day]	31.6	24.9	39.7	45	31.9			26.9		
	PHC professional nurse clinical workload [Clients per nurse per day]	36.4	29.7	37.1	39	31.8			29.4		

Section B: Profile Free State Province

Category	Indicator	District value				District ranking 2013	Provincial average 2013	Provincial target 2013	Provincial target 2014	National average 2013	National target 2013	National target 2014
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		640.4	616.9	514.1	15	637.6			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	75.1	79.6	81.2		13	75.8			76.8		
	TB death rate (all TB) [Percentage]	16.9	15.5	16.6		52	11.1			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	4.6	4.4	4.5		18	4.3			5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	71.3	72.3	76.0		33	76.8	85.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		90.2	88.8	92.8	29	89.6			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		79.5	75.0	66.0	43	76.2			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		39.7			42	33.0			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	17.0	15.9	16.6		44	14.3			14.5		
	Percentage of deaths ill-defined [Percentage]	6.9	6.1	6.9		5	13.0			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	33.3	28.2	24.1		33	25.3			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	23.4	23.6	24.7		15	26.0			27.9		
	Percentage of YLLs due to injuries [Percentage]	11.2	12.4	11.7		18	11.9			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	32.2	35.8	39.5		36	36.7			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to some indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ Delivery by mother postnatal visit within 6 days rate
- ◆ Percentage of deaths ill-defined.

However, the performance of some indicators ranked among the 10 worst in the country. These indicators were:

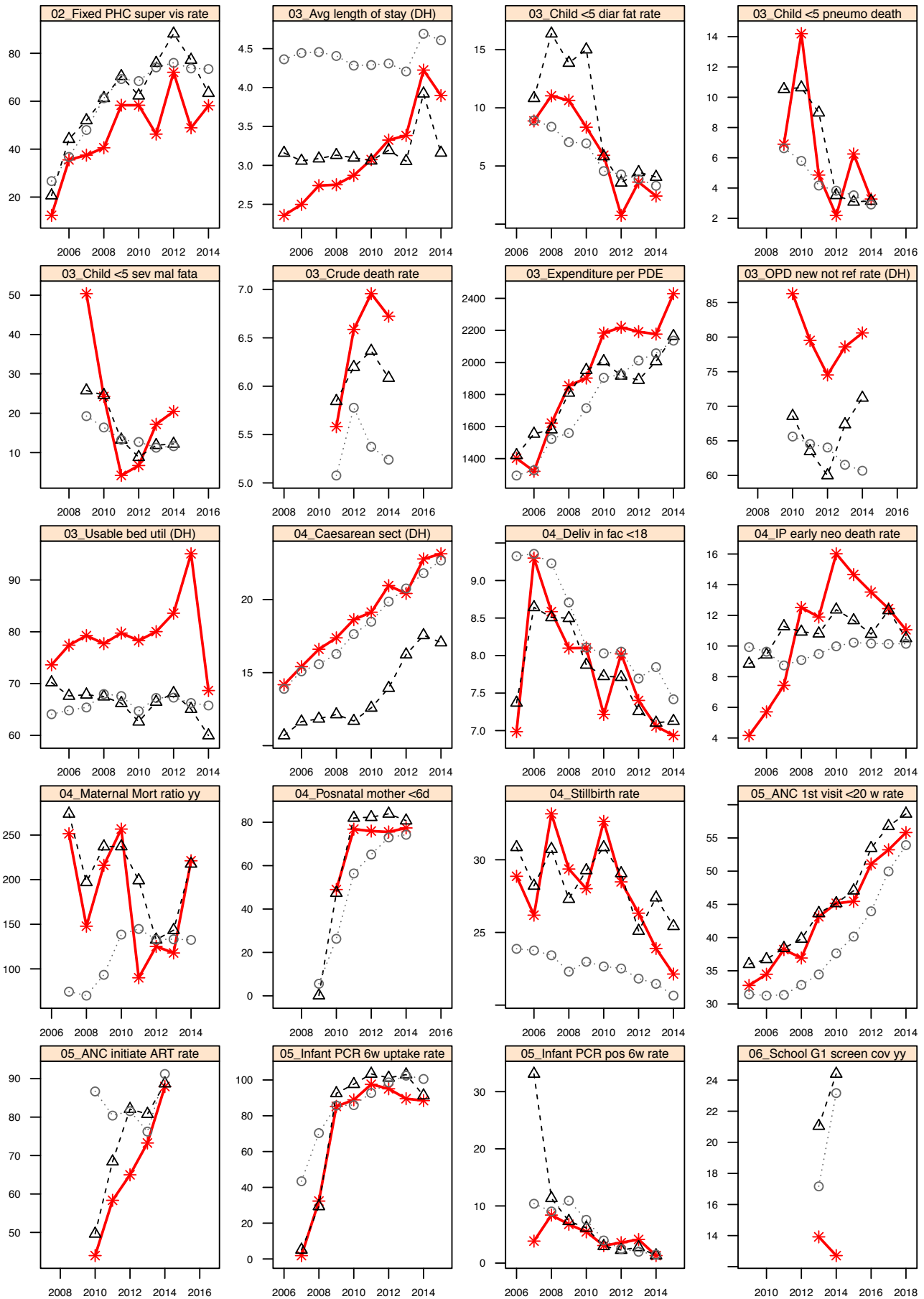
- ◆ OPD new client not referred rate for district hospitals
- ◆ Child under 5 years severe acute malnutrition case fatality rate
- ◆ Inpatient crude death rate
- ◆ Maternal mortality in facility ratio
- ◆ School Grade 1 screening coverage
- ◆ Cervical cancer screening coverage
- ◆ HIV testing coverage (including ANC)
- ◆ PHC doctor clinical workload.
- ◆ TB death rate for all TB (highest in the country)
- ◆ TB/HIV co-infected client on ART rate
- ◆ Percentage of deaths garbage codes

Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

- ◆ PHC supervisor visit rate (fixed clinic/CHC/CDC)
- ◆ Expenditure per patient day equivalent (district hospitals)
- ◆ Inpatient bed utilisation rate (district hospitals)

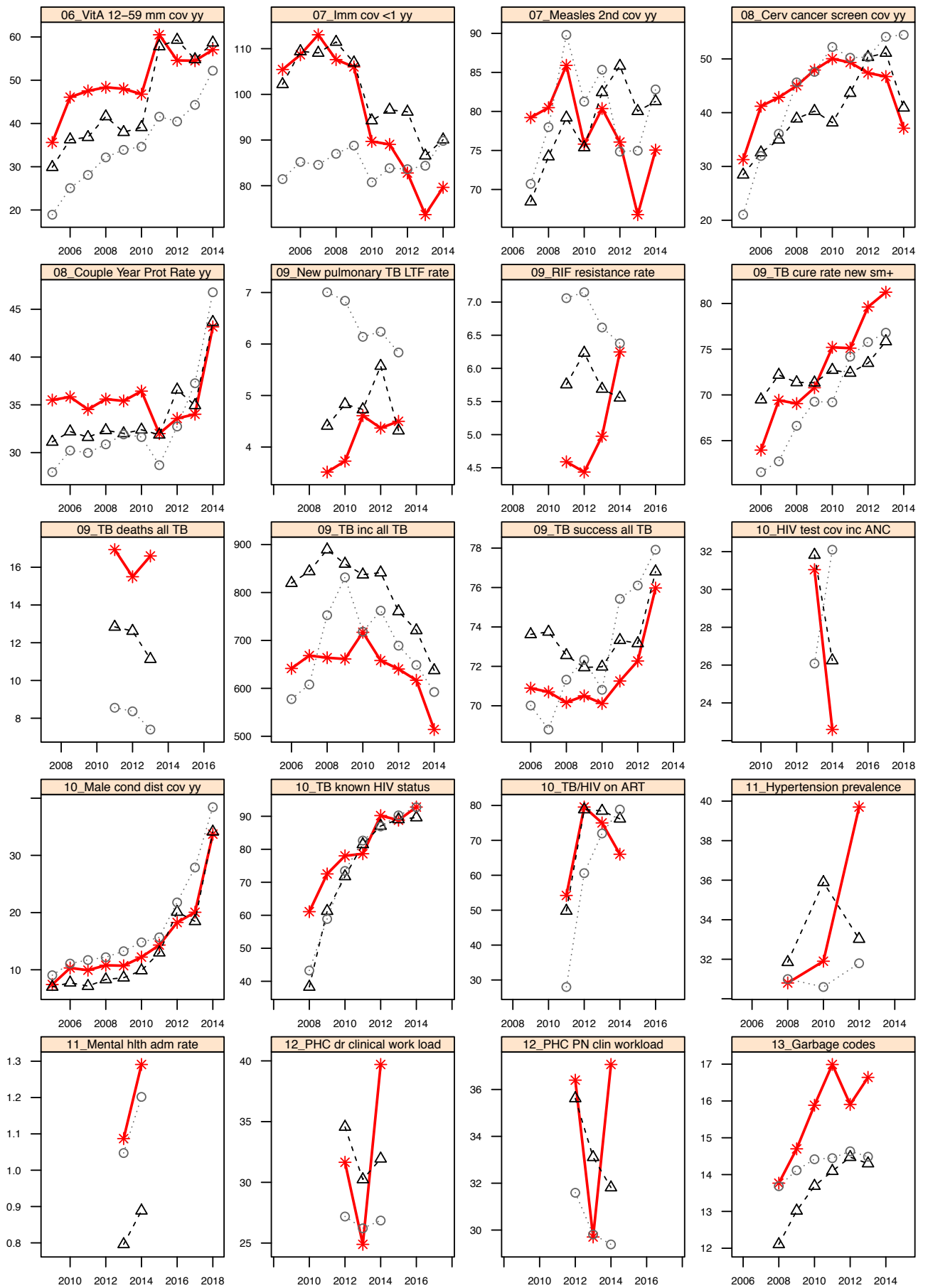
- ◆ OPD new client not referred rate (district hospitals)
- ◆ Child under 5 years pneumonia and severe acute malnutrition case fatality rates
- ◆ Inpatient crude death rate
- ◆ Delivery by Caesarean section rate (district hospitals)
- ◆ Inpatient early neonatal death rate
- ◆ Maternal mortality in facility ratio
- ◆ Mother postnatal visit within 6 days rate
- ◆ Stillbirth in facility rate
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Antenatal client initiated on ART rate
- ◆ Infant 1st PCR test around 6 weeks uptake rate
- ◆ School Grade 1 screening coverage
- ◆ Vitamin A dose 12-59 months coverage
- ◆ Immunisation coverage under 1 year
- ◆ Measles 2nd dose coverage
- ◆ Cervical cancer screening coverage
- ◆ Couple year protection rate
- ◆ HIV testing coverage (including ANC)
- ◆ Hypertension incidence
- ◆ Mental health admission rate
- ◆ PHC doctor and professional nurse clinical workloads
- ◆ TB death rate (all TB)
- ◆ TB treatment success rate (all TB)
- ◆ TB/HIV co-infected client on ART rate
- ◆ Hypertension prevalence rate (crude)
- ◆ Percentage of deaths garbage codes
- ◆ Percentage of years of life lost (YLLs) due to communicable, maternal, perinatal, nutrition causes
- ◆ Percentage of YLLs due to non-communicable diseases

Annual indicators for district: Fezile Dabi (DC20)



District value * Provincial average Δ ZA (national) average ○

Annual indicators for district: Fezile Dabi (DC20)



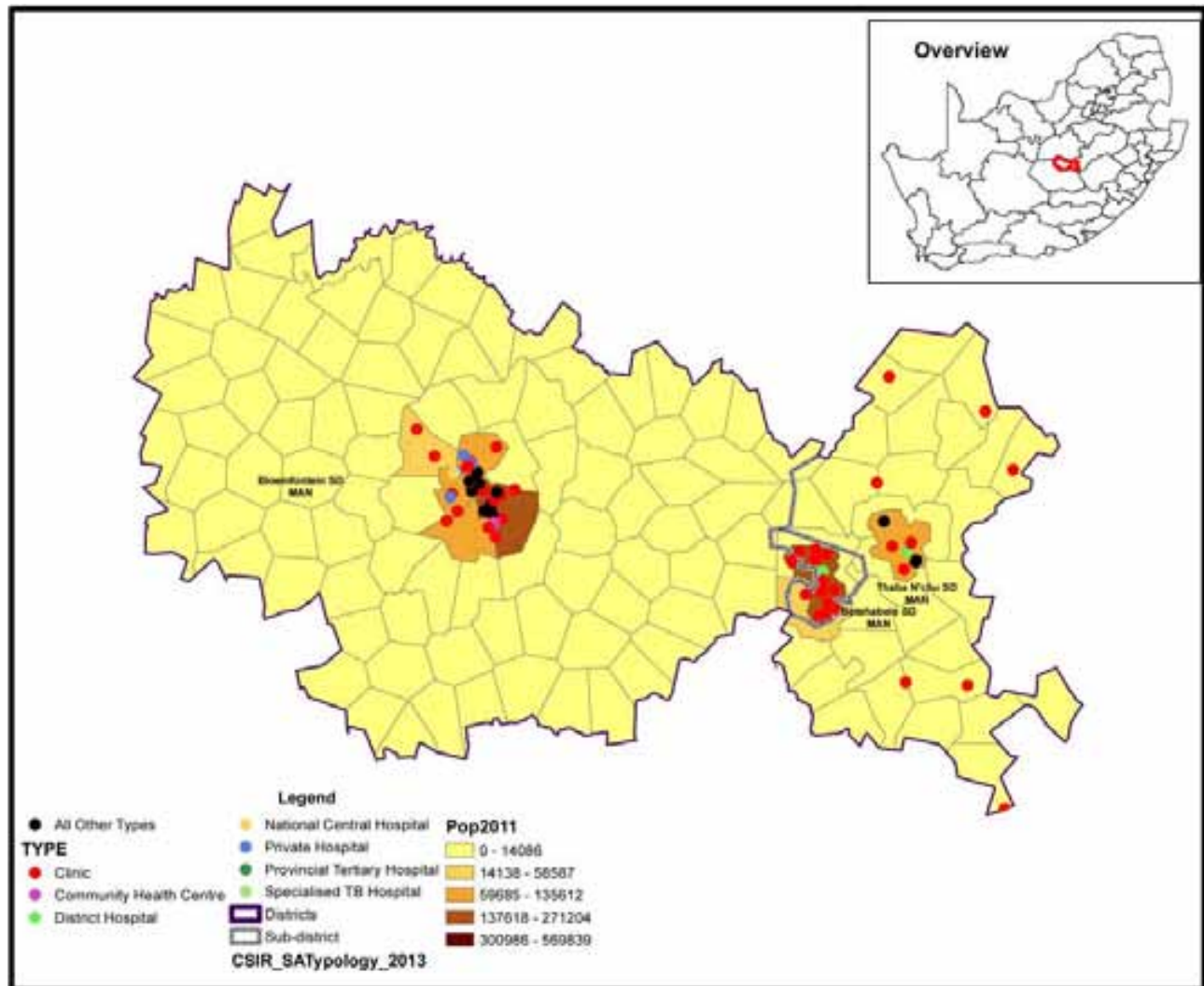
District value * Provincial average Δ ZA (national) average ○

Mangaung Metropolitan Municipality (MAN)

Naomi Massyn

Mangaung Metro is located in the central interior of Free State Province and comprises three sub-districts, namely Bloemfontein, Botshabelo and Thaba N'chu. The district has the largest population in the province at 783 580, with a population density of 124.7 people per km². It falls in socio-economic Quintile 5, among the wealthiest districts.

Population distribution, sub-district boundaries and health facility locations: Mangaung (MAN)



Burden of disease profile

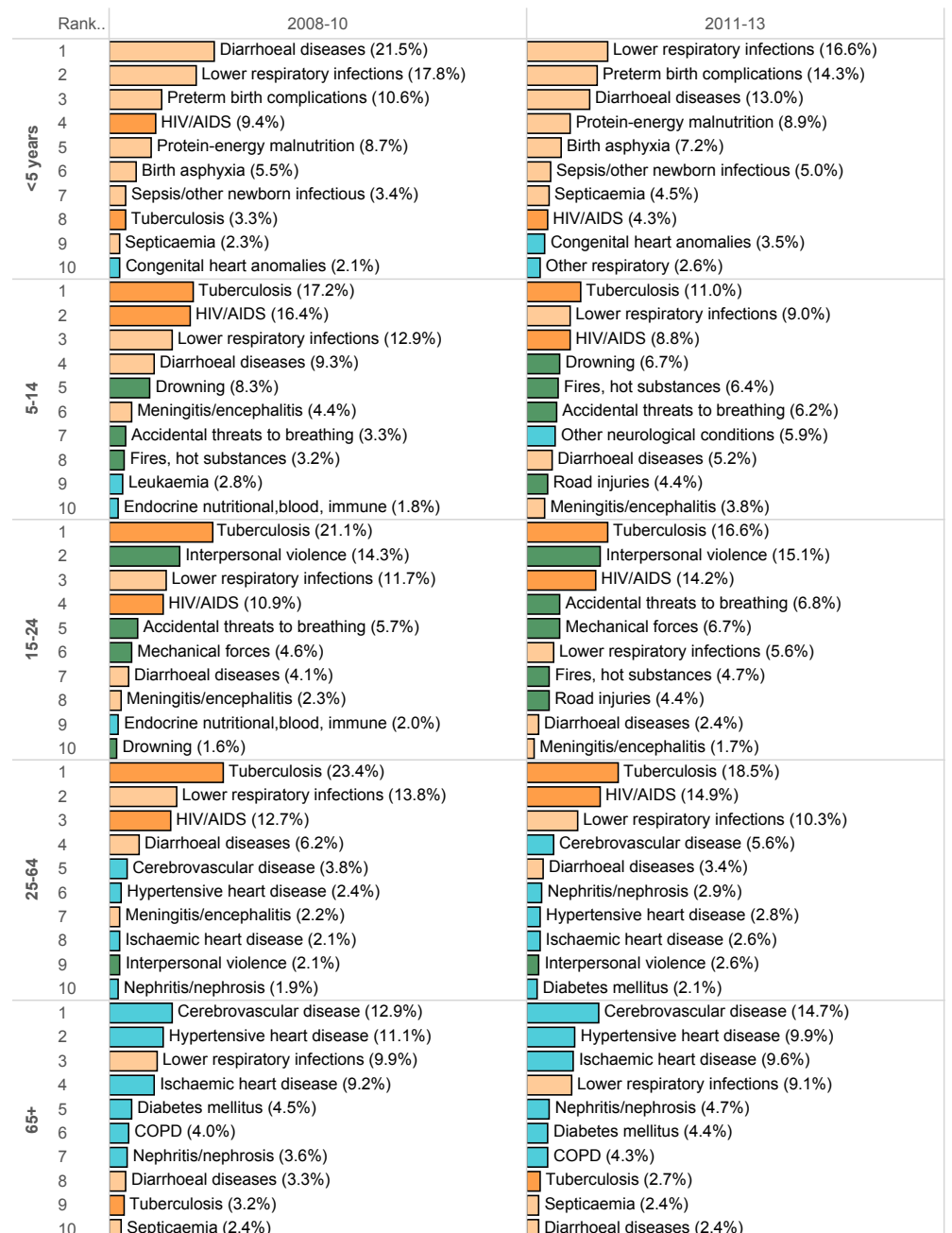
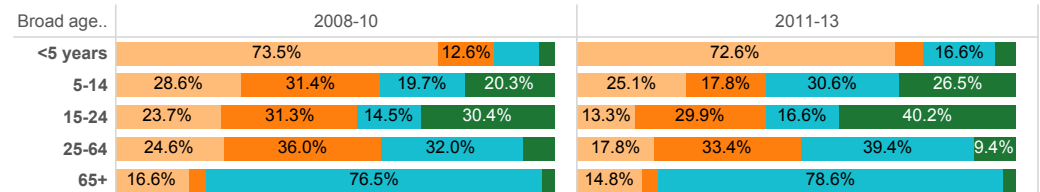
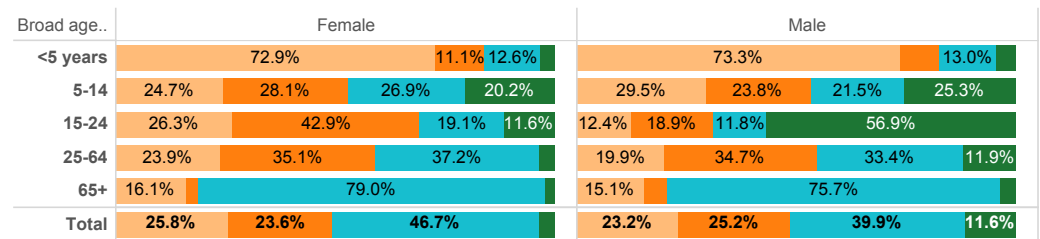
Percentage of deaths by broad cause and leading causes, 2008-2013: Mangaung (MAN)

Percentage of deaths by broad cause and leading causes, 2008-2013

FS, Mangaung: MAN

Prov, District
FS, Mangaung: MAN
 Show History

Broadcause
■ Injury
■ NCD
■ HIV and TB
■ Comm_mat_peri_nut



Broad cause groups by age and gender

In the under-5-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for around 73% of deaths among females and males, while non-communicable diseases accounted for around 13% of deaths. HIV and TB mortality was slightly higher among females than males (11.1% versus 9.2%).

In the 5–14-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 24.7% of deaths among females versus 29.5% among males. There were gender differences in the percentages for the other broad causes too: HIV and TB mortality was 28.1% among females versus 23.8% among males, non-communicable disease mortality was 26.9% (females) versus 21.5% (males), and injuries accounted for 20.2% of deaths among females versus 25.3% among males.

In the 15–24-year age group, communicable diseases and maternal, perinatal and nutritional conditions accounted for 26.3% of deaths among females versus only 12.4% among males. Proportionate differences were bigger in this group for all the broad causes: HIV and TB mortality was 42.9% among females versus 18.9% among males, non-communicable disease mortality was 19.1% (females) versus 11.8% (males), and injuries accounted for 11.6% of deaths among females versus 56.9% among males.

In the 25–64-year age group, non-communicable diseases accounted for the largest proportion of deaths among females (37.2%), while HIV and TB accounted for the largest proportion among males (34.7%). Communicable diseases and maternal, perinatal and nutritional conditions accounted for 23.9% of deaths among females and 19.9% among males. Injuries accounted for a small proportion of deaths in this age group, with the percentage being much higher among males (11.9%) than females.

In the 65-years-and-older age group, non-communicable diseases accounted for the highest proportion of deaths (79.0% among females and 75.7% among males). Communicable diseases and maternal, perinatal and nutritional conditions accounted for 16.1% of deaths among females and 15.1% among males.

Trends in broad cause groups by age

In children under 5 years, HIV and TB mortality halved, while non-communicable disease mortality increased from 10.4% to 16.6% between 2008–2010 and 2011–2013. In the 5–14-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased slightly, while HIV and TB mortality decreased markedly. Injury-related deaths and non-communicable disease mortality increased over this period from 20.3% to 26.5% and 19.7% to 30.6% respectively. In the 15–24-year age group, deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased, as did HIV and TB mortality. Non-communicable disease mortality increased slightly (from 14.5% to 16.6%), and injury-related deaths increased by one-third (from 30.4% to 40.2%). In the 25–64-year age group, HIV and TB mortality decreased from 36.0% to 33.4%, and deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 24.6% to 17.8%. Non-communicable disease mortality increased from 32.0% to 39.4%. In the 65-years-and-older age group, non-communicable disease mortality increased slightly from 76.5% to 78.6%, while deaths due to communicable diseases and maternal, perinatal and nutritional conditions decreased from 16.6% to 14.8%. Injury-related deaths and HIV and TB mortality remained more or less the same.

Trends in leading causes of death by age

Under 5 years

Diarrhoeal diseases, lower respiratory infections and preterm birth complications remained the leading causes of death between 2008–2010 and 2011–2013. HIV and AIDS and TB ranked lower in this age group in 2011–2013.

5–14 years

Tuberculosis, lower respiratory infections and HIV and AIDS remained the three leading causes of death between 2008–2010 and 2011–2013, followed by drowning, fires and hot substances and accidental threats to breathing. Road injuries and meningitis/encephalitis also ranked among the top 10 causes of death.

15–24 years

Tuberculosis and interpersonal violence remained the two leading causes of death between 2008–2010 and 2011–2013. HIV and AIDS, accidental threats to breathing, mechanical forces and road injuries also ranked among the top 10 causes of death.

25–64 years

Tuberculosis, HIV and AIDS and lower respiratory infections remained the three leading causes of death in this age group between 2008–2010 and 2011–2013, followed by cerebrovascular disease and diarrhoeal disease. Diabetes mellitus was listed as a leading cause of death in this age group for the first time since 2008.

65 years and older

Cerebrovascular disease, hypertensive heart diseases, ischaemic heart disease and lower respiratory infections remained the four leading causes of death in this age group between 2008–2010 and 2011–2013, followed by nephritis/nephrosis, diabetes mellitus, chronic obstructive pulmonary disease, TB, and septicaemia. Diarrhoeal diseases moved from eighth to 10th position.

Indicator performance: Mangaung Metropolitan Municipality (MAN)

Category	Indicator	District value			District ranking	Provincial average	Provincial target	Provincial target	National average	National target	National target
		2012/13	2013/14	2014/15	2014/15	2014/15	2014/15	2015/16	2014/15	2014/15	2015/16
Management PHC	PHC supervisor visit rate (fixed clinic/CHC/CDC) [Percentage]	90.6	70.9	61.1	41	63.4	100.0		73.5		
Management Inpatients	Average length of stay (district hospitals) [Days]	3.9	5.1	4.0	20	3.2	3.1		4.6		
	Expenditure per patient day equivalent (district hospitals) [Rand (real 2014/15 prices)]	1 692.1	1 851.3	2 189.0	7	2 164.5			2 136.4		
	Inpatient bed utilisation rate (district hospitals) [Percentage]	82.5	74.3	67.2	24	60.0	70.0		65.8		
	OPD new client not referred rate (district hospitals) [Percentage]	60.7	66.6	77.0	45	71.2			60.7		
Mortality Inpatients	Child under 5 years diarrhoea case fatality rate [Percentage]	2.2	3.7	6.9	49	4.1	3.0	3.0	3.3	3.5	3.0
	Child under 5 years pneumonia case fatality rate [Percentage]	2.2	2.1	1.6	15	3.1	3.0	3.0	2.9		
	Child under 5 years severe acute malnutrition case fatality rate [Percentage]	4.6	4.5	6.3	9	12.2	7.0	11.4	11.6	8.0	7.0
	Inpatient crude death rate [Percentage]	5.7	5.6	5.4	21	6.1			5.2		
Delivery	Delivery by Caesarean section rate (district hospitals) [Percentage]	31.0	32.0	32.0		17.1			22.7		
	Delivery in facility under 18 years rate [Percentage]	6.6	6.8	6.2	11	7.1			7.4		
	Inpatient early neonatal death rate [per 1 000 live births]	7.5	10.2	10.4	28	10.5		11.0	10.1		0
	Maternal mortality in facility ratio [per 100 000 live births]	103.3	148.4	230.7	48	217.8	130.0	128.0	132.5	100	80.0
	Mother postnatal visit within 6 days rate [Percentage]	75.1	71.2	62.1	33	80.8		82.0	74.3	80.0	85.0
	Stillbirth in facility rate [per 1 000 births]	24.4	27.6	24.1	39	25.4			20.7		
PMTCT	Antenatal 1st visit before 20 weeks rate [Percentage]	51.9	56.8	56.4	29	58.6	70.0	60.0	53.9	65.0	70.0
	Antenatal client initiated on ART rate [Percentage]	99.6	79.9	87.3	40	88.7		95.0	91.2	93.0	96.0
	Infant 1st PCR test around 6 weeks uptake rate [Percentage]	88.5	87.0	67.2	52	91.3			100.6		
	Infant 1st PCR test positive around 6 weeks rate [Percentage]	2.0	2.2	1.1	7	1.3	2.0	2.0	1.5	1.8	2.0
Child Health	School Grade 1 screening coverage [Percentage]		13.0	20.6	29	24.4	29.5	40.0	23.2	30.0	35.0
	Vitamin A dose 12-59 months coverage [Percentage]	38.4	35.7	40.7	50	58.7	65.0	60.0	52.2	55.0	
Immunisation	Immunisation coverage under 1 year [Percentage]	91.9	79.9	82.6	28	90.1	95.0	95.0	89.8	95.0	91.0
	Measles 2nd dose coverage [Percentage]	69.1	64.3	68.9	49	81.3	95.0	85.0	82.8	85.0	85.0
Reproductive health	Cervical cancer screening coverage [Percentage]	39.6	36.4	31.2	48	40.9	58.0	60.0	54.5	60.0	64.0
	Couple year protection rate [Percentage]	27.0	24.8	43.3	30	43.7	45.0		46.8	55.0	
TB case finding	TB Rifampicin resistance confirmed client rate [Percentage]	6.3	5.8	6.2	34	5.6			6.4		
HIV	HIV testing coverage (including ANC)		29.5	25.5	43	26.2			32.1		
	Male condom distribution coverage	13.7	10.7	45.9	15	34.1		0.0	38.4		
Non-communicable diseases	Hypertension incidence [per 1 000]	21.1	18.7	16.0		12.8	15.7		13.9		
	Mental health admission rate [Percentage]		0.8	1.2		0.9	1.0		1.2		

Section B: Profile Free State Province

Category	Indicator	District value			District ranking 2014/15	Provincial average 2014/15	Provincial target 2014/15	Provincial target 2015/16	National average 2014/15	National target 2014/15	National target 2015/16
		2012/13	2013/14	2014/15							
Human Resources	PHC doctor clinical workload [Clients per doctor per day]	31.8	29.4	25.7	5	31.9			26.9		
	PHC professional nurse clinical workload [Clients per nurse per day]	33.4	29.8	27.4	12	31.8			29.4		

Category	Indicator	District value				District ranking 2013	Provincial average 2013	Provincial target 2013	Provincial target 2014	National average 2013	National target 2013	National target 2014
		2011	2012	2013	2014							
TB case finding	Incidence (diagnosed cases) of TB - all types [Cases per 100 000 population]		853.3	761.6	685.8	27	637.6			592.5		
TB treatment outcomes	TB cure rate (new smear positive) [Percentage]	66.3	66.3	68.8		39	75.8			76.8		
	TB death rate (all TB) [Percentage]	11.3	13.3	10.2		37	11.1			7.4	6.0	5.0
	TB defaulter rate (new smear positive) [Percentage]	7.5	8.9	6.7		37	4.3			5.8	6.0	5.5
	TB treatment success rate (all TB) [Percentage]	69.5	67.7	72.1		42	76.8	85.0		77.9	82.0	83.0
HIV	Percentage of TB cases with known HIV status (ETR.Net) [Percentage]		84.9	90.0	91.5	37	89.6			92.8		
	TB/HIV co-infected client on ART rate (ETR.Net) [Percentage]		77.6	76.5	78.5	31	76.2			78.9		
NCDs	Hypertension prevalence rate (crude) [Percentage]		34.9			30	33.0			31.8		
Burden of disease	Percentage of deaths garbage codes [Percentage]	14.0	14.6	14.5		38	14.3			14.5		
	Percentage of deaths ill-defined [Percentage]	24.0	19.9	18.5		46	13.0			14.0		
	Percentage of YLLs due to communicable, maternal, perinatal, nutrition causes [Percentage]	28.0	23.0	20.2		24	25.3			22.1		
	Percentage of YLLs due to HIV and TB [Percentage]	26.1	27.9	26.5		22	26.0			27.9		
	Percentage of YLLs due to injuries [Percentage]	9.3	11.1	12.1		22	11.9			13.1		
	Percentage of YLLs due to non-communicable diseases [Percentage]	36.6	37.9	41.1		40	36.7			36.9		

Value in red – improvement strategies are urgently needed

Value highlighted in yellow – performance is ranked among the 10 best in the country

Value highlighted in red – performance is ranked among the 10 worst in the country

The district performed very well with regard to some indicators, which ranked among the 10 best in the country in the last reporting period. These indicators were:

- ◆ Expenditure per patient day equivalent (district hospitals)
- ◆ Child under 5 years severe acute malnutrition case fatality rate
- ◆ Infant 1st PCR test positive around 6 weeks rate (although this may be unreliable since only 67.2% of eligible infants were tested)
- ◆ PHC doctor clinical workload.

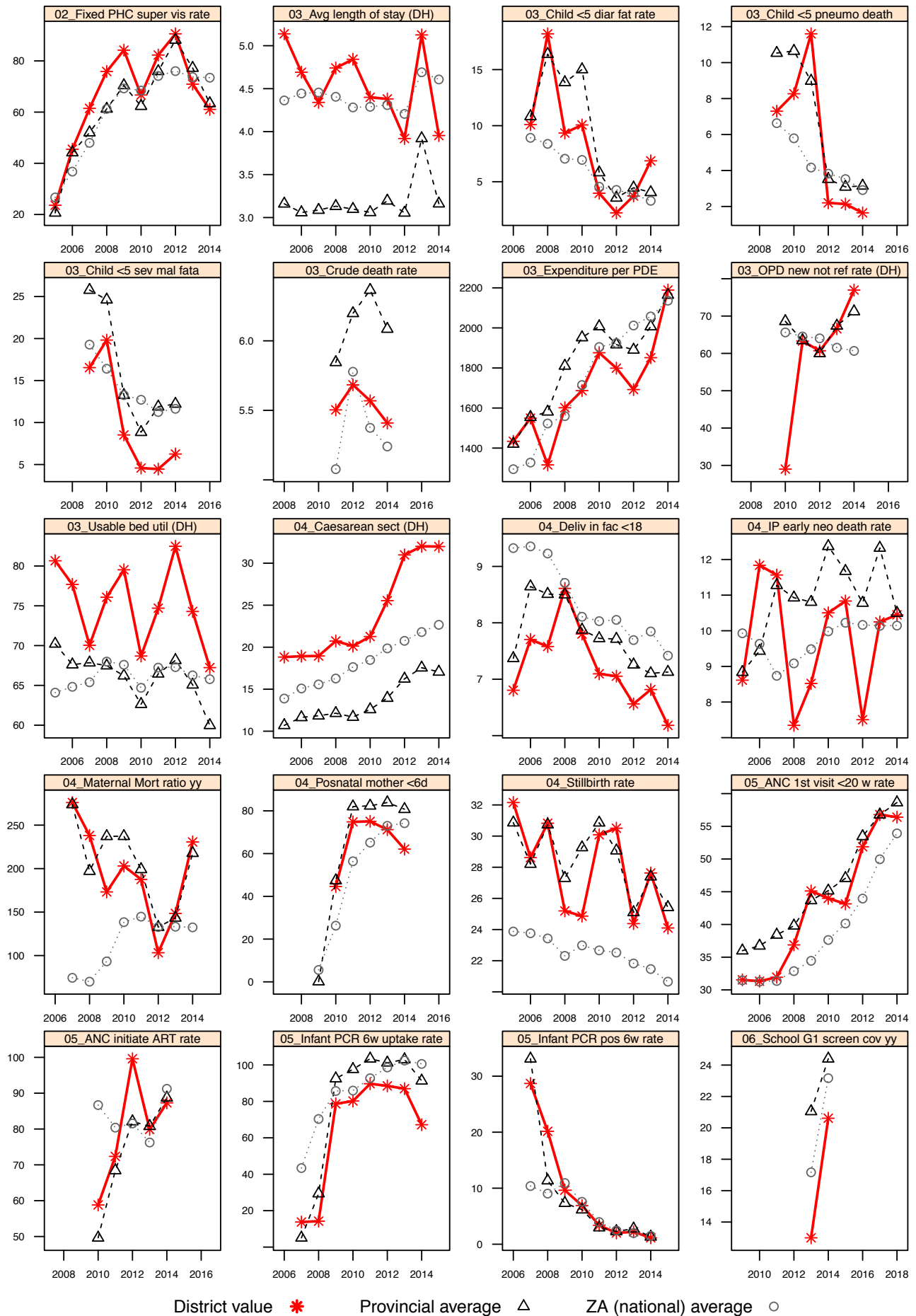
However, the performance of some indicators ranked among the 10 worst in the country. These indicators were:

- ◆ OPD new client not referred rate for district hospitals
- ◆ Child under 5 years diarrhoea case fatality rate
- ◆ Maternal mortality in facility ratio
- ◆ Infant 1st PCR test around 6 weeks uptake rate (lowest in the country)
- ◆ Vitamin A dose 12-59 months coverage (third lowest in the country)
- ◆ Measles 2nd dose coverage
- ◆ Cervical cancer screening coverage
- ◆ HIV testing coverage (including ANC)
- ◆ Percentage of deaths ill-defined

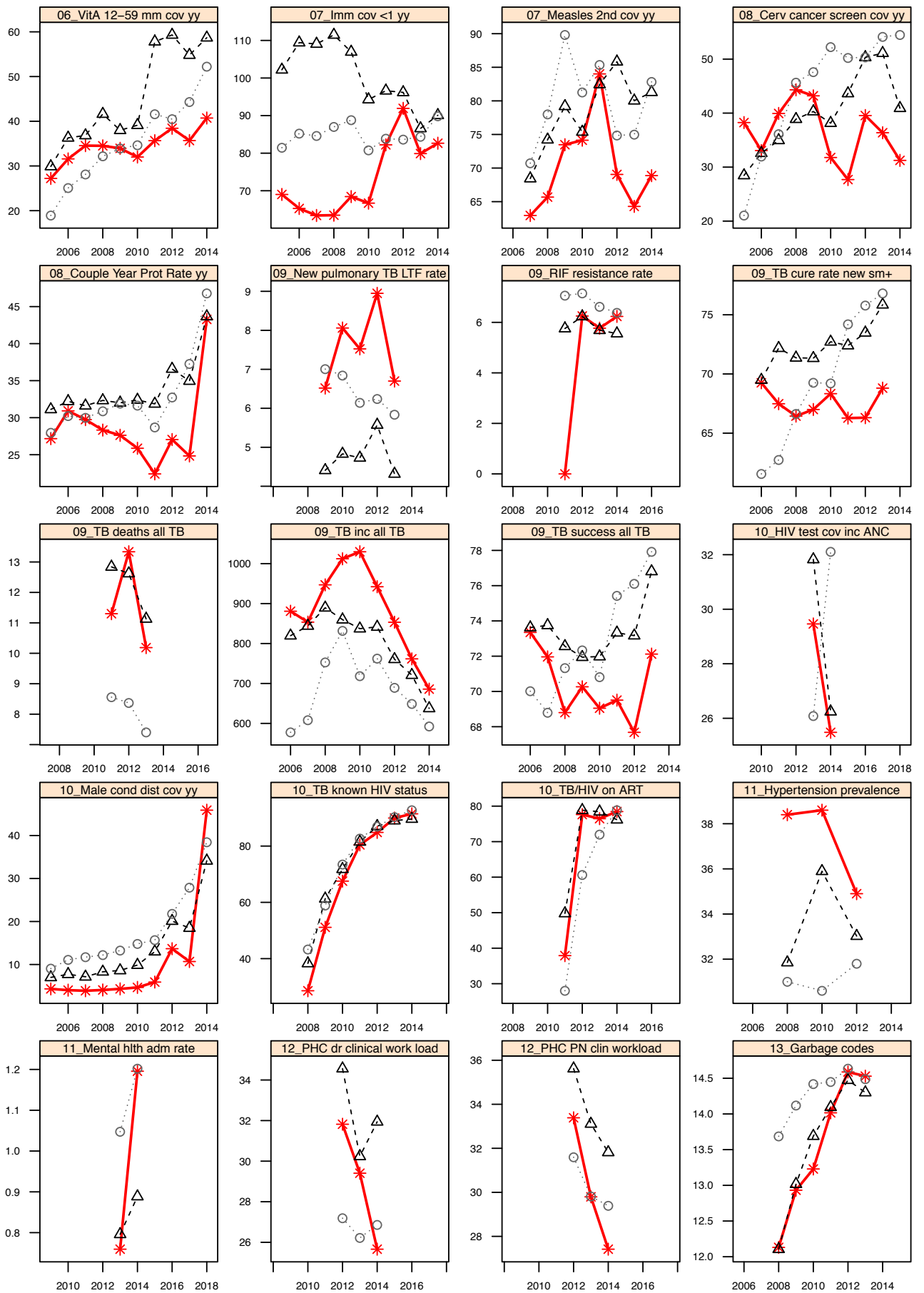
Although the district recorded an improvement in the performance of several indicators over the past three years, improvement strategies are needed urgently for the following indicators, especially when compared with the district ranking, 2014/15 provincial and national averages, and the 2014/15 and 2015/16 provincial and national targets. These indicators are:

- ◆ PHC supervisor visit rate (fixed clinic/CHC/CDC)
- ◆ Average length of stay (district hospitals)
- ◆ Inpatient bed utilisation rate (district hospitals)
- ◆ OPD new client not referred rate (district hospitals)
- ◆ Child under 5 years diarrhoea case fatality rate
- ◆ Delivery by Caesarean section rate (district hospitals)
- ◆ Maternal mortality in facility ratio
- ◆ Mother postnatal visit within 6 days rate
- ◆ Stillbirth in facility rate
- ◆ Antenatal 1st visit before 20 weeks rate
- ◆ Antenatal client initiated on ART rate
- ◆ Infant 1st PCR test around 6 weeks uptake rate
- ◆ School Grade 1 screening coverage
- ◆ Vitamin A dose 12-59 months coverage
- ◆ Immunisation coverage under 1 year
- ◆ Measles 2nd dose coverage
- ◆ Cervical cancer screening coverage
- ◆ Couple year protection rate
- ◆ HIV testing coverage (including ANC)
- ◆ Mental health admission rate
- ◆ Incidence (diagnosed cases) of TB - all types
- ◆ TB cure rate (new smear positive)
- ◆ TB death rate (all TB)
- ◆ TB defaulter rate (new smear positive)
- ◆ TB treatment success rate (all TB)
- ◆ Hypertension prevalence rate (crude)
- ◆ Percentage of deaths ill-defined
- ◆ Percentage of years of life lost due to non-communicable diseases

Annual indicators for district: Mangaung (MAN)



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District value * Provincial average Δ ZA (national) average ○