



health

Department:  
Health  
REPUBLIC OF SOUTH AFRICA



## Speaking Notes by Director General for Health, Dr Sandile Buthelezi

### Webinar launch of the District Health Barometer, 28 February 2024, 11h00am -12h30pm

Chairperson  
Provincial leadership  
CEO of HST, Dr Moeti  
Dr Ayanda Ntsaluba and representatives of PHEF  
Representatives from Academia  
NDoH partners  
Representatives of Research Councils & Organisations, NGOs  
Officials of the Department of Health and Other Government Departments

#### Greetings

It is with great pleasure and anticipation that we gather here today to mark the launch of the District Health Barometer (DHB). This momentous occasion represents a significant step forward in our collective efforts to understand, assess, and improve the state of health within our communities. The Department of Health considers the Barometer to be a vital resource in achieving our goal of improving health outcomes for all.

The DHB is a powerful tool for understanding the unique health challenges and opportunities that exist within and between our districts. It provides a much-needed reflection on services delivery, which is critical at this point as we end the 6<sup>th</sup> administration and developing plans for the 7<sup>th</sup> one. By shedding light on areas of strength and areas in need of improvement, this publication equips us with the knowledge necessary to allocate resources effectively, develop targeted health initiatives, and monitor progress over time.

I extend my deepest appreciation to the Health Systems Trust (HST) and the dedicated individuals and organisations who have contributed to this outstanding effort. Your efforts in gathering, analysing, and presenting this wealth of health data have laid the foundation for a more proactive and evidence-informed approach to public health. Importantly this data also enables us to identify and address the inequities that exist in access to quality health care and health outcomes in our country.

I also wish to extend our gratitude to Dr Ayanda Ntsaluba, Chairman of the Projects Committee of the Public Health Enhancement Fund (PHEF) for supporting this 2023 edition of the DHB

Today, as Director-General of the National Department of Health it is my pleasure to share some of the key findings and challenges in our health system as illustrated in the 2022/23 edition of the District Health Barometer.

#### **Maternal and Neonatal Health**

Our commitment to ensuring the well-being of mothers and infants requires a comprehensive understanding of the challenges and successes in maternal and neonatal healthcare.

The Barometer's findings on antenatal care, maternal mortality, early neonatal deaths, and deliveries among teenagers provide crucial insights into the current state of reproductive health.

We acknowledge the challenges in **maternal and neonatal health**, but there are positives that deserve recognition. Despite a decline in antenatal 1st visit coverage, 70.1% of women received antenatal care within the first 20 weeks of gestation. However, a 21.6% variation in antenatal 1st visit coverage between provinces, ranging from 69.6% to 91.2%, signals the need for targeted efforts to ensure timely and widespread access to antenatal services. While there's a variation between provinces, the narrowing gap between the best and worst-performing districts is commendable. We are definitely making strides in reducing maternal mortality.

Additionally, a 5% decline in the **early neonatal death in facility rate** over the past decade is a positive trend.

**Antenatal care**, a cornerstone of maternal health, reveals a concerning trend with a 5.1% decline in coverage. This decline has persisted since 2021/22 and is reflected in seven provinces experiencing reduced coverage levels over the past year.

While there is a decline in the **national maternal mortality in facility ratio**, the overarching trend suggests that achieving the Sustainable Development Goal (SDG) target of a maternal mortality ratio below 70 deaths per 100,000 live births by 2030 remains uncertain. Eight provinces recorded a decline in their maternal mortality in facility ratio, with the Western Cape being the only province to meet the SDG target. Although progress is evident, the 2.0-fold difference between the worst- and best-performing provinces underscores the need for continued efforts to improve maternal health outcomes across the country, and ensure greater investment in the more poorly performing provinces.

**Teenage pregnancies:** Addressing deliveries among teenagers is a complex aspect of reproductive health where our goal, working with other sectors is to significantly reduce the rate of teenage pregnancies. With 13.9% of all facility-based deliveries attributed to teenagers below 20 years of age, and 2.6% of those to teenagers aged 10 to 14 years, it is evident that adolescent reproductive health remains a significant concern if we are to protect the lives and welfare of these young women and girls. The 1.8-fold difference in delivery rates between the best- and worst-performing provinces and the 2.8-fold difference between districts necessitate tailored strategies to support teenage mothers if we are to meet our SDG targets.

### **Reproductive health**

In our pursuit of comprehensive healthcare, reproductive health is an integral component that demands our attention. The recent findings on the Couple Year Protection Rate (CYPR) underscore both achievements and challenges in this crucial aspect of public health.

**Couple year protection rate:** It is with concern that we note a decline in the national CYPR from 60.7% in 2018/19 to 45.0% in 2022/23. This reduction is not isolated but widespread, with every province experiencing a decline except Mpumalanga. This trend is alarming, and it necessitates collective efforts to understand and address the underlying factors contributing to this significant decline.

On a positive note, we observe a **shift in contraceptive preferences**, with the Depot medroxyprogesterone acetate remaining the most popular method, closely followed by the increasing utilisation of the implant. This changing landscape underscores the importance of staying attuned to evolving trends in family planning preferences and ensuring that a wide array of options is accessible to all.

### **Child Health and Nutrition**

The DHB has recorded positive trends in child health and nutrition which underscore the collective efforts taken by government towards creating a healthier future for South Africa's children. While challenges persist, the commitment and progress to improvement is evident, and these successes pave the way for sustained advancements in child well-being.

### **Pneumonia Case Fatality Rate Under Five Years:**

In 2022/23, South Africa experienced a significant **positive shift in the fight against pneumonia**. The pneumonia case fatality rate declined to 1.5%, the lowest since 2017/18, following an increase to 2.1% in 2020/21. This encouraging trend reflects the effectiveness of interventions and healthcare initiatives. Despite regional variations, the overall decrease in fatality rates signifies progress in safeguarding the well-being of our youngest population.

### **Death Under 5 Years Against Live Birth Rate**

While the death under 5 years against live birth rate experienced a marginal increase to 1.8% in 2022/23, it is essential to acknowledge positive aspects. Despite challenges, the fluctuation in rates emphasises the resilience of healthcare systems in maintaining a stable and manageable scenario. It is worth noting that the majority of deaths were reported in the early stages of life, prompting targeted interventions to address this critical period.

### **Immunisation Coverage Under 1 Year**

South Africa has made commendable progress in immunisation coverage for children under one year, reaching a national average of 82.2% in 2022/23. KwaZulu-Natal emerged as a frontrunner with a coverage rate 24.7 percentage points higher than the lowest-performing province, Limpopo. Although regional disparities persist, the overall upward trajectory signifies a positive trend in ensuring that a substantial portion of our young population is protected against preventable diseases. The exceptional performance of Sedibeng (Gauteng) with 105.4% coverage, while possibly influenced by data nuances, underscores a commitment to comprehensive healthcare.

### **Measles 2nd Dose Coverage**

The national average for measles second dose coverage reached an encouraging 84.8% in 2022/23, signifying a substantial improvement in measles immunisation. Mpumalanga reported the highest coverage at 97.4%, while the Northern Cape recorded the lowest at 73.6%. Noteworthy is the outstanding performance of Overberg district (Western Cape) with 151.2% coverage, even if data quality issues may contribute to this figure. This achievement highlights the dedication to achieving and surpassing immunisation goals in certain regions, but also highlights the importance of good data quality, as well as investigation and explanation of rates well above 100%.

### **Infectious Disease Control**

#### **Tuberculosis**

In the 2022/23 period, our TB symptom screening rates for children under 5 years and clients aged 5 years and older were exceptional, surpassing the 90% national target. Specifically, rates stood at 94.5% and 97.6%, respectively. Steady increases in these indicators since 2019/20 reflect our commitment to proactive screening efforts, even amidst challenges such as decreases in primary health care headcounts.

Although rates varied across provinces, it's encouraging that KwaZulu-Natal achieved a remarkable 102.6% screening rate for TB symptoms in children under 5 years, showcasing exemplary dedication to early detection.

The national drug-susceptible TB treatment success rate in 2021 was 77.9%. Provinces displayed variations, but Mpumalanga reached the highest with an 82.8% success rate. While challenges persist, 14 sub-districts achieved the 90% target, signalling localised success stories and providing models for improvement in other areas.

While facing an increased Drug Susceptible-TB loss to follow-up rate nationally in 2021 (13.0%), regions such as KwaZulu-Natal have showcased exemplary performance with rates below the national target of 5%.

Death rates, although indicating room for improvement, ranged from 3.0% in Cape Town (WC) to 16.7% in Capricorn (Limpopo Province), underscoring the importance of targeted interventions at the district level.

Sadly, there has been a drop in the MDR-TB treatment success rate nationally between 2020 and 2021 (64.1 to 54.1). Although challenges persist, the commitment to achieving the national target of 70% treatment success rate remains unwavering. We remain committed to addressing root causes and data quality concerns and ensuring accurate reporting.

### **HIV and AIDS**

By March 2023, 68.2% of people living with HIV (PLHIV) were on antiretroviral therapy (ART), showcasing significant progress in treatment coverage. KwaZulu-Natal led the provinces with a client remaining on ART rate of 76.0%.

### **Child Viral Load Suppression**

While challenges persist in achieving the second 95-95-95 UNAIDS target, the Western Cape province was a forerunner with a child viral load suppression rate of 71.0%.

Namakwa (NC) and Amajuba (KZN) reached the third UNAIDS 95-95-95 target, illustrating that success stories exist even in the face of complex challenges.

### **Non-communicable Diseases**

#### **Cervical Cancer Screening**

**Best Performing Province:** KwaZulu-Natal emerged as the best-performing province in 2022/23, demonstrating a commendable commitment to cervical cancer screening. Every district in KwaZulu-Natal achieved a screening coverage above the national average of 21.4%, showcasing a comprehensive and inclusive approach to women's health.

**Challenges in Northern Cape:** While celebrating successes, we recognise the challenges faced by the Northern Cape, with three of its five districts reporting the lowest coverage in the country. This highlights the need for targeted interventions in specific regions with large areas to cover and low population density to ensure equitable access to screening services.

**National Trends and Response:** Encouragingly, all provinces witnessed an increase in cervical cancer coverage in 2021/22, reflecting our collective efforts to expand screening services. Despite a decrease recorded in 2022/23, it's crucial to contextualise this within the challenges posed by the COVID-19 pandemic and the altered definition of the screening coverage indicator in 2020.

**Understanding the Impact of COVID-19:** The COVID-19 pandemic, coupled with changes in the screening coverage definition in 2020, contributed to the decrease observed in 2020/21. Understanding these challenges positions us to develop targeted strategies that address the impact of external factors on our screening initiatives.

### **Service Capacity and Access**

The Barometer reports that in March 2023, our nation witnessed a substantial increase of 20.8% in hospital beds for all types of hospitals in the public sector, reaching 20.3 per 10,000 uninsured population. This reflects a commendable effort in expanding our healthcare infrastructure.

Notably, the total number of beds increased by 19.8%, with the Free State leading the way. This surge in hospital bed capacity underscores our commitment to providing adequate inpatient care, particularly considering the challenges posed by the onset of the COVID-19 pandemic.

The stability in district hospital bed totals, remaining around 6 per 10,000 uninsured population, highlights our focus on maintaining essential inpatient services at the community level.

### **Finance**

Despite the challenges posed by the COVID-19 pandemic, our health system demonstrated commendable resilience. The decline in overall utilisation, coupled with sustained or increased expenditure, emphasises the efficiency and prioritisation of spending during challenging times. While recognising wide discrepancies across provinces and districts, we are aware that these variations may stem from varying burdens of disease, population density, and demographics. Provinces will work to devise strategies that address inefficiencies, and the unique characteristics of province to ensure that resources are allocated based on need.

A noteworthy aspect is the increase in total PHC expenditure per capita over the past five years, indicating a prioritisation of PHC services. This aligns with our commitment to strengthening primary healthcare, which plays a crucial role in achieving better health outcomes.

### **Human Resources for Health**

The growth in the number of medical practitioners, professional nurses, and pharmacists over the past decade indicates progress; however, SA has a long way to go before it reaches enough health care workers. The growth rates in medical practitioners, professional nurses, and pharmacists are commendable. However, the aging profile of the nursing workforce is a concern.

Acknowledging the 17% emigration rate for skilled health professionals, we are actively exploring strategies to retain and attract talent. Our commitment to building a resilient health system is unwavering.

Recognising the need for allied health professionals, we emphasise their critical role in multidisciplinary clinical and public health teams, particularly within primary healthcare settings. Inclusive and collaborative approaches must be implemented to ensure a well-rounded and effective healthcare workforce.

### **Conclusion**

Data is central to the health sector decision-making and resource allocation. We remain committed to rectifying data quality challenges as a priority for service delivery, planning and quality improvement.

The journey toward a healthier nation is an ongoing endeavour. While we celebrate the positive achievements, we are keenly aware of the challenges that persist. Our commitment to improving healthcare remains steadfast, and together, we will build a healthier and more resilient nation where evidence as provided by the District Health Barometer and other resources guides our investment and action.

I Thank you