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## Preface

This Stats Brief presents the Maternal Mortality Ratio (MMR) for the years 2014 to 2020. Data used for this brief is provided by the Ministry of Health and wellness through reporting from the health facilities. The brief assesses the major causes of maternal mortality with a view to monitoring the effectiveness of Government interventions to ensure that no mother dies as a result of child birth. This commitment is underscored by Government's subscription to the Sustainable Development Goal of 'ensuring healthy lives and promoting wellbeing for all ages. The SDGs commit countries to reduce global Maternal Mortality Ratio (MMR) to less than 70 deaths per 100,000 live births. The Goals also advocate for a large proportion of births being attended to by skilled health personnel. Other key health facility indicators are outlined in this brief.

The brief shows that 76 maternal deaths were reported in 2020 from 58,244 live births yielding a Maternal Mortality Ratio (MMR) of 131 maternal deaths per 100,000 live births. The Maternal Mortality Ratio declined steadily from 156.6 in 2016 to 133.7 in 2018 and increased to 166.3 deaths per 100,000 live births in 2019. The most common direct causes were Genital tract and pelvic infection following abortion and ectopic and molar pregnancy (11 Cases) followed by Eclampsia in pregnancy (6 Cases) and the third was Cardiomyopathy in the puerperium (4 Cases) while among the indirect causes the most common causes were, Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium (4 Cases) followed by Diseases of the digestive system complicating pregnancy, childbirth and puerperium (3 Cases).

We continue to note a high number of mothers delivering in health facilities. The brief shows an overwhelming 99.8 percent of all births are estimated to have occurred in health facilities supervised by a skilled health professional.

Statistics Botswana welcomes contributions of all stakeholders and collaborating partners who ensured that this product is made possible. We welcome suggestions on how to improve this brief to effectively monitor the SDGs and ensure that no mother dies during childbirth due to preventable causes.

Thank you

Dr Burton Mguni Statistician General June 2022

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# Definition of Maternal Mortality Ratio (MMR)

Maternal Mortality Ratio is defined as the number of maternal deaths per 100,000 live births. This indicator estimates the proportion of pregnant women or mothers who die from causes related to or aggravated by pregnancy or its management. The ratio is expressed as follows:

Mate	ernal deaths	*	Κ
Live	births		

#### Where K = 100,000

#### World Health Organization (WHO) Maternal Death Definitions for classification and calculation of MMR

#### MR: key terminologies

The following World Health Organization (WHO) maternal death definitions were used for classification and calculation of MMR. The classification of causes of maternal deaths is also according to WHO International Classification of Diseases Volume 10 (ICD 10).

Maternal Death	A death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and the site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes.
Direct Maternal Death	A death resulting from complications of pregnancy, labor or delivery or their management.
Indirect Maternal Death	A death in which pregnancy exacerbated a preexisting health problem.
Non-Maternal Death	A death that occurred during pregnancy or within 42 days of termination of pregnancy, but was considered unrelated to pregnancy (e.g. due to injury, homicide, or suicide).
Maternal Mortality Ratio (Commonly abbreviated as MMR)	Number of maternal deaths during a given period per 100,000 live- births during the same time-period.

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#### 1. Introduction

This Stats Brief provides information on Botswana's Maternal Mortality Ratio for the period 2014 – 2020. Maternal Mortality Ratio is defined as the number of maternal deaths per 100,000 live births. The Sustainable Development Goal (S.D.G) 3.1 sets a target by 2030, to reduce the global Maternal Mortality Ratio (MMR) to less than 70 per 100,000 live births. As part of a collaborative effort between Statistics Botswana and the Ministry of Health and Wellness particularly, Department of Public Health - Sexual and Reproductive Health (SRH) to enable and improve the availability and quality of maternal mortality information, the parties, ensure that data on live births and maternal deaths are provided. The data for the period 2014 to 2020 are provisional until the National Annual Health Statistics Reports are published. We hope readers and users of this information will find this brief informative and we welcome input on how to further improve the content of this publication.

#### 2. Access to Health Services and Birth Attendants Assistance

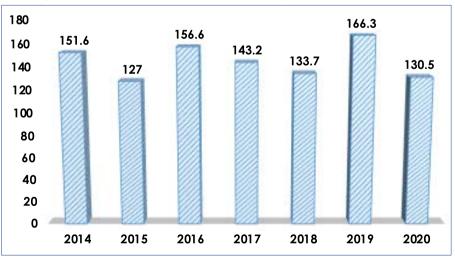
The 2020 Vital Statistics report indicates that over 99 percent of deliveries were delivered in health facilities over the years by a trained health professional. This shows that a high level of births is attended by skilled health personnel. The high level of birth attendance by skilled health personnel should lead to accurate identification and classification of maternal death cases, as well as certification of causes of maternal deaths. Hence, there is high coverage and precision on the collection of births and deaths data on mothers and their newborns.

#### 3. Maternal Mortality Ratio

Botswana Maternal Mortality Ratio for the period 2015 to 2020 is shown in **Table 1** and **Figure 1** below. The MMR decreased from 166.3 to 130.5 per 100,000 live-births between 2019 and 2020. Over the years the MMR has been fluctuating with the highest in 2019(166.3) and the lowest in 2015(127.0)

#### Table 1: Botswana Maternal Mortality Ratio 2010-2020

	2014	2015	2016	2017	2018	2019	2020
Institutional live births	47,273	57,290	54,159	52,242	52,999	52,206	58,146
Non-Institutional live-births	205	190	108	116	117	98	98
Total live-births	47,478	57,480	54,267	52,358	53,115	52,304	58,244
Maternal Deaths	72	73	85	75	71	87	76
Maternal Morality Ratio (per 100,000 live-births)	151.6	127.0	156.6	143.2	133.7	166.3	130.5



#### Figure 1: Botswana Maternal Mortality Ratio 2014-2020

#### 3.1. Causes of Maternal Deaths

There were 76 maternal deaths in 2020 as shown in **Tables 2** and **Annex 1**. The Maternal mortality data has been divided into two categories - direct and indirect causes. Overall, over the years direct causes have been higher than indirect causes. In 2020, direct causes of maternal mortality contributed 72.3 percent of total deaths.

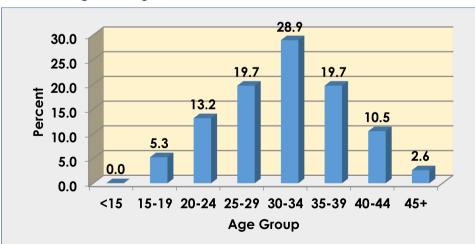
Years	Direct	Indirect	Total	% Direct
2015	43	30	73	58.9
2016	54	31	85	63.5
2017	57	18	75	76.0
2018	52	19	71	73.2
2019	52	35	87	59.8
2020	55	21	76	72.3

#### **Table 2:** Direct and Indirect Causes of Maternal Mortality

The most common causes of deaths among direct and indirect causes are indicated in **Annex 1**. The leading direct cause of maternal deaths causes was Genital tract and pelvic infection following abortion and ectopic and molar pregnancy (11 Cases) followed by Eclampsia in pregnancy (6 Cases) and the third was Cardiomyopathy in the puerperium (4 Cases). Among the indirect causes the most common causes were, Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium (4 Cases) followed by Diseases of the digestive system complicating pregnancy, childbirth and puerperium (3 Cases).

### 3.2. Age Distribution of Maternal Deaths

**Figure 2** shows that the highest maternal deaths were reported among age groups 30-34 years (28.9 %), followed by ages 35-39 years and 25-29 years at 19.7 percent each. There were two cases of maternal deaths recorded for ages 45+ and all were direct causes. One was caused by premature separation of placenta, unspecified and the other by Eclampsia in puerperium .However, no cases were reported in less than 15 years of age.

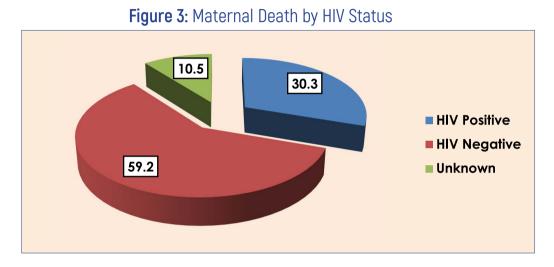


#### Figure 2: Age Distribution of Maternal Deaths



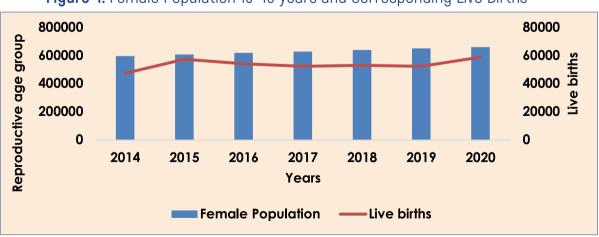
#### 3.3. Maternal Mortality by HIV Status

It has been realized that among the mothers dying due to specified maternal causes there are some who were found to have been living positively with HIV/AIDS. Of the 76 maternal deaths reported 30.3 percent were HIV infected women, 59.2 percent HIV negative and 10.5 percent-unknown status (Figure 3 refers). Most of the HIV+ deaths were in the age group 30-34 years(13.2%) followed by 25-30 years(7.9%) and 35-39 (5.3%). The major conditions which were the cunning catalyst in the twenty three causes who were HIV positive were Ectopic Pregnancy, unspecified and Obstetric death of unspecified cause with three cases each.



#### 3.4. Female Population and Corresponding Live Births

The trend in the female population and the corresponding Live births are shown in **Figure 4** below. According to Botswana Population Projections (Low Scenario), the female reproductive age (15-49 years) population in 2020 was 660,995 while the corresponding Live births were 58,224, indicating an increase of 11 percent in the number of live births from the 2019 figure comparatively. Notably the female population has been substantially increasing while the Live births have been fluctuating over the period.



#### Figure 4: Female Population 15-49 years and Corresponding Live Births

#### 4. Institutional Births vs Non Institutional births

There were 58 244 live births registered in 2020. **Table 3** shows that most births (61%) occurred in General Hospitals, as compared to 20 percent in primary hospitals and 19 percent in clinics respectively. This pattern has been consistent from 2017 to 2019. It is quite evident that most mothers (99.8%) prefer to deliver in health facilities than at home. The overall average length of stay in health facilities was 7 days (**Table 7**) which is skewed towards hospitals as they often handle complicated referral cases.

Table 3. Live bit this by Flace of Delivery 2017 - 2020										
	201	7	2018		201	9	2020			
Place of Birth	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
General Hospital	33,442	63.9	34,071	64.1	33,013	63.1	35,656	61.2		
Primary Hospital	11,285	21.5	11,689	22	11,321	21.6	11,720	20.1		
Clinics	7,515	14.4	7,239	13.6	7,872	15.1	10,770	18.5		
Non - Institutional	116	0.2	116*	0.2	98	0.2	98	0.2		
Total Live Births	52,358	100	53,115	100	52,304	100.0	58,244	100.0		

#### Table 3: Live Births by Place of Delivery 2017 - 2020

#### 4.1 Born Before Arrival (BBA)

The born before arrival (BBA) refers to babies brought to the health facility within 24 hrs after delivery. The BBA accounted for 3.7 percent of 58,244 births in 2020 as compared to 3.8 percent of 52,304 births in 2019 (Annex 3).

#### 4.2 Non-Institutional Births

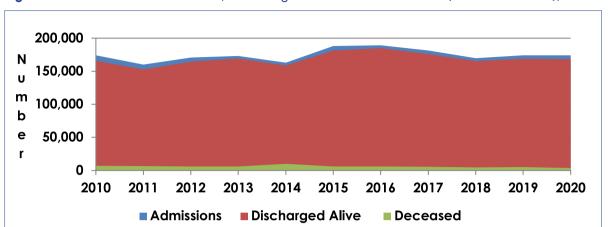
The 2020 non-institutional live births constitute 0.2 percent of the total births (**Table 3**). It has been realized that non-institutional births reported by Health Facilities to the Ministry of Health were insignificant ever since the Ministry of Labour and Home Affairs inaugurated the collection of births and deaths certificates. Furthermore it is worth noting that South East district reported the highest non-Institutional births accounting for 46.9 percent, followed by Greater Gaborone with 10.2 percent, Borolong with 8 births (8.2 percent) and Francistown at 7 births (7.1 percent) respectively. However, the distribution of these non-institutional births is shown in **Annex 5**.

#### 5. In-Patient Admissions 2010 - 2020

#### 5.1 Trends in Inpatient Admission 2010 -2020

Admissions in health facilities have realized a slight decrease of 2 percent in 2020 from the 174, 212 cases recorded in 2019. The proportions of the deceased to the admissions in health facilities have generally declined over time. The percentage of patients who died while admitted has consistently dropped from 4.1 percent in 2010 to 2.8 percent in 2020, which can be attributed to improved patient management at hospitals.

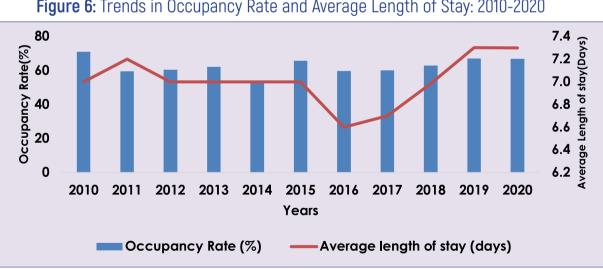




### Figure 5: Number of Admissions, Discharged Alive and Deceased (Excl. Neonates), 2010 – 2020

#### 5.2 Trends in Occupancy Rate and Average Length of Stay: 2010-2020

Figure 6, shows the occupancy rate and average length of stay between 2010 and 2020 in Botswana. The figure below generally shows an increase over the period for both the bed occupancy rate and average length of stay, with a step decrease in average lenth of stay in 2016 and 2017. The bed occupancy rate stood at 67 percent while average length of stay stood at 7 days. The figure further shows that occupancy rate have generally been fluctuating over the years ranging from 76.7 percent (the highest) in 2009 to 53.9 percent the lowest in 2014. The average length of stay has also been fluctuating, ranging from 7.3 days (highest) in 2019 to 6.6 days (lowest) in 2016. Since 2016 bed occupancy rate and the average length of stay have been increasing steadily.





#### 6. **Technical Note**

The availability of data on the number of live births and maternal mortality is a collaborative effort between the Ministry of Health and Wellness' Sexual and Reproductive Health Unit and Statistics Botswana through its Health Statistics Unit to ensure the production of quality national maternal mortality information.



# APPENDICES



## Appendix 1: 2020 Causes of Maternal Mortality by Age Group

auses

O00.9 O06.4	Diagnosis						(Years)			
Code 000.9 006.4	Diagnosis			4	0	5	0	4	0	σ
O00.9 O06.4	Diagnosis	<15	15-19	20-24	25-29	30-34	35-39	40-44	45-49	Grand Total
O06.4	Ectopic Pregnancy, unspecified	•	0	0	1	1	0	1	0	3
	Unspecifed abortion, incomplete without complications.	0	0	0	0	0	1	0	0	1
	Genital tract and pelvic infection following abortion and									
008.0	ectopic and molar pregnancy	0	0	2	2	5	2	0	0	11
014.1	Severe pre-eclampsia	0	0	0	0	1	1	0	0	2
014.9	Pre-Eclampsia, unspecified	0	0	0	0	0	1	0	0	1
O15.0	Eclampsia in pregnancy.	0	0	2	0	2	2	0	0	6
015.1	Eclampsia in labour	0	1	0	0	0	0	0	0	1
O15.2	Eclampsia in puerperium	0	0	0	1	1	0	0	1	3
O15.9	Eclampsia, unspecified as to time period	0	0	1	0	0	0	0	0	1
O21.0	Mild Hyperemesis gravidarum	0	0	0	1	0	0	0	0	1
	Infection of amniotic sac and membranes	0	0	0	0	2	0	0	0	2
	Premature separation of placenta, unspecified	0	2	0	0	0	0	0	1	3
O46.0	Antipartum haemorrhage with coagulation defect	0	0	1	0	0	0	0	0	1
O46.9	Antipartum haemorrhage unspecified	0	0	0	0	0	0	1	0	1
	Other immediate postpartum haemorrhage	0	0	0	1	0	0	1	0	2
072.2	Delayed and secondary postpartum haemorrhage	0	0	0	1	1	0	0	0	2
072.3	Postpartum coagulation defects	0	0	0	0	0	1	0	0	1
O75.8	Other specified complications of labour and delivery	0	0	0	2	0	0	0	0	2
075.9	Complications of labour and delivery unspecified	0	0	0	1	1	0	0	0	2
O85	Puerperal sepsis	0	0	0	0	0	1	0	0	1
O88.1	Amniotic fluid Embolism	0	0	0	0	0	0	1	0	1
O90.3	Cardiomyopathy in the puerperium	0	0	2	0	2	0	0	0	4
O95	Obstetric death of unspecified cause	0	0	0	1	0	2	0	0	3
Total		0	3	8	11	16	11	4	2	55
Indirect C	Causes									
074.6	Other complications of spinal and epidural anaesthesia during labour and delivery	0	0	0	0	0	1	1	0	2
O88.2	Obstetric pulmonary embolism	0	0	0	0	0	0	1	0	1
	Tuberculosis complicating pregnancy, childbirth and the	0	0	1	0	0	1	0	0	0
	puerperium	0	0	1	0	0	I	0	0	2
098.6	Protozoal diseases complicating pregnancy, childbirth and the puerperial	0	0	0	1	0	1	0	0	2
	Other maternal infections and parasitic diseases complicating pregnancy childbirth and the puerperium	0	0	1	0	1	0	0	0	2
099.3	Mental disorders and diseases of the nervous system complicating pregnancy, childbirth and the puerperium	0	1	0	0	0	0	0	0	1
099.4	Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium	0	0	0	0	3	0	1	0	4
	Diseases of the respiratory system complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	1	0	1
	Diseases of the digestive system complicating pregnancy, childbirth and puerperium	0	0	0	2	0	1	0	0	3
	Diseases of the skin and subcutanioius tissue complicating pregnancy, childbirth and puerperium	0	0	0	0	1	0	0	0	1
	Breast cancer with Metastasis	0	0	0	1	0	0	0	0	1
	Inhalation of gastric contents	0	0	0	0	1	0	0	0	1
Total		0	1	2	4	6	4	4	0	21
Grand Tot	tal	0	4	10	15	22	15	8	2	76



## Appendix 2 :Maternal Mortality by HIV Positive Status by Age-Group of Mother - 2020

		Í	•	54		34	39	44	6	P _
ICD 10 Code	Diagnosis	<15	15-1	20-24	25-29	30-34	35-39	40-44	45-49	Grand Total
000.9	Ectopic Pregnancy, unspecified	0	0	0	1	1	0	1	0	3
008.0	Genital tract and pelvic infection following abortion and ectopic and molar pregnancy	0	0	0	0	2	0	0	0	2
014.1	Severe pre-eclampsia	0	0	0	0	1	0	0	0	1
015.0	Eclampsia in pregnancy.	0	0	1	0	1	0	0	0	2
O41.1	Infection of amniotic sac and membranes	0	0	0	0	1	0	0	0	1
072.2	Delayed and secondary postpartum haemorrhage	0	0	0	0	1	0	0	0	1
074.6	Other complications of spinal and epidural anaesthesia during labour and delivery	0	0	0	0	0	1	0	0	1
O75.8	Other specified complications of labour and delivery	0	0	0	1	0	0	0	0	1
O90.3	Cardiomyopathy in the puerperium	0	0	0	0	1	0	0	0	1
095	Obstetric death of unspecified cause	0	0	0	1	0	2	0	0	3
O98.6	Protozoal diseases complicating pregnancy, childbirth and the puerperial	0	0	0	1	0	1	0	0	2
098.8	Other maternal infections and parasitic diseases compli- cating pregnancy childbirth and the puerperium	0	0	1	0	1	0	0	0	2
099.4	Diseases of the circulatory system complicating pregnan- cy, childbirth and the puerperium	0	0	0	0	1	0	0	0	1
099.6	Diseases of the digestive system complicating pregnancy, childbirth and puerperium	0	0	0	1	0	0	0	0	1
O99.8	Breast cancer with Metastasis	0	0	0	1	0	0	0	0	1
Total		0	0	2	6	10	4	1	0	23



## Appendix 3: Trends in Hospital Activities by Type: 2010-2020

Indicator	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Number of Beds	5,015	5,294	5,276	5,550	5,577	5,751	5,751	5,582	5,176	5,176	5,176
Inpatient Admissions	173,935	159,835	170,483	173,092	163,124	188,275	189,251	181,410	169,811	174,212	173,871
Discharged Alive	166,123	152,674	164,477	169,127	158,482	181,328	184,935	176,277	165,387	168,745	168,293
Inpatient Deaths	7,064	6,537	6,091	5,898	10,073	6,115	6,032	5,570	4,798	4,951	3,933
Patient Days	1,291,609	1,152,611	1,164,816	1,258,360	1,097,304	1,379,920	1,256,988	1,225,197	1,189,037	1,268,294	1,261,123
Occupancy Rate (%)	71	59.6	60.5	62.1	53.9	65.7	59.8	60.1	62.9	67	66.8
Average length of stay (days)	7.0	7.2	7.0	7.0	7.0	7.0	6.6	6.7	7.0	7	7.3
Bed Turnover Rate	35	30	32	32	30	33	33.2	32.7	32.9	34	33.3
Newborns	47,495	42,962	47,948	47,928	45,569	55,062	51,977	50,410	51,264	50,318	55,946
Born Before Arrival (BBA)	2,358	1,942	2,009	1,843	1,704	2,228	2,182	1,832	1,735	1,888	2,200
Total Live Births	49,853	44,904	49,957	49,771	47,273	57,290	54,159	52,242	52,999	52,206	58,146
Discharged Alive (neonatal)	45,999	42,790	49,555	48,459	46,015	55,603	52,489	52,324	51,544	51,487	57,519
Discharged Dead (neonatal)	659	979	931	824	1,124	846	789	1,204	748	752	736

#### **10.** BOTSWANA MATERNAL MORTALITY RATIO 2020

## Appendix 4: Health Facilities by Patients Care Services - 2020

	Discharged				New Borns Discharged								
District Health Facility	Number of beds	Admissions	Alive	Dead	Patient Days	Occupancy Rate(%)	Length of Stay(Days)	Turnover Rate	New Born	New BBA	Alive	Dead	Total Livebirths
General Hospitals				_	Duys			-				_	
Letsholathebe II Memorial Hospital	340	7,429	7,093	190	80,346	65	11	21	3,053	73	3,104	20	3,126
Scotish Livingstone Hospital	350	9,711	9,086	0	66,453	52	7	26	3,580	191	3,733	37	3,771
Bokamoso Private Hospital	122	7,039	7,225	138	27,829	62	4	60	737	1	731	0	738
SDA Kanye Hospital	182	6,675	6,528	199	26,289	40	4	37	1,593	18	1,587	13	1,611
Mahalapye Hospital	320	8,264	7,088	218	69,805	60	10	23	2,704	68	2,735	38	2,772
Deborah Relief Memorial Hospital	167	5,415	5,246	152	32,916	54	6	32	2,098	53	2,128	23	2,151
Orapa Hospital	94	1,720	1,854	37	4,786	14	3	20	722	6	726	2	728
Princess Marina Referral Hospital	557	15,020	14,076	513	313,543	154	21	26	6,441	41	6,307	184	6,482
Gaborone Private Hospital	90	4,544	4,581	78	23,062	70	5	52	800	9	812	29	809
Nyangabwe Referral Hospital	497	19,990	18,845	961	178,465	98	9	40	5,309	47	5,262	102	5,356
Riverside Private Hospital	29	2,597	2,809	43	10,160	96	4	98	738	2	685	60	740
Bamalete Lutheren Hospital	138	4,541	4,431	100	14,400	29	3	33	1,494	10	1,493	11	1,504
Athlone Hospital	139	6,174	6,091	97	32,783	65	5	45	1,177	22	1,194	5	1,199
State Mental Referral Hospital	300	1,875	1,852	0	84,815	77	46	6	0	0	0	Ŭ	0
BCL Mine Hospital	15	1,0,0	1,002	0	38	1	2	1	0	0	0	0	0
Selibe Phikwe Government Hospital	61	4,030	3,960	75	18,462	83	5	66	1,142	15	1,145	10	1,157
Jwaneng Mine Hospital	60	2,890	2,824	61	8,353	38	3	48	899	26	907	15	925
Sekgoma Memorial Hospital	386	10,821	10,489	289	73,769	52	7	28	2,532	55	2,570	16	2,587
Total	3,729	118,754	114,097	3,151	1,066,274	78	9	31	35,019	637	35,119	565	35,656
Primary Hospitals													
Masunga Primary Hospital	48	1,158	1,124	37	3,198	18	3	24	399	10	375	2	409
Palapye Primary Hospital	50	5,094	4,970	71	21,853	120	4	101	1,610	45	1,642	18	1,655
Bobonong Primary Hospital	33	3,553	3,500	0	17,575	146	5	106	714	21	729	6	735
Mmadinare Primary Hospital	31	1,998	1,952	0	8,514	75	4	63	380	11	390	4	391
Thamaga Primary Hospital	61	2,528	2,515	74	10,444	47	4	42	604	14	689	2	618
Gantsi Primary Hospital	104	4,414	4,186	149	25,857	68	6	42	1,247	117	1,217	27	1,364
Sefhare Primary Hospital	38	2,153	2,299	35	9,442	68	4	61	630	12	637	5	642
Kasane Primary Hospital	30	2,271	2,251	30	6,446	59	3	76	546	16	559	2	562
Tsabong Primary Hospital	33	1,797	1,714	69	7,866	65	4	54	659	13	661	12	672
Tutume Primary Hospital	42	3,232	3,191	56	8,288	54	3	77	750	58	972	6	808
Gweta Primary Hospital	50	1,421	1,394	32	5,328	29	4	29	382	14	435	0	396
Rakops Primary Hospital	36	1,249	1,242	35	3,959	30	3	35	234	13	248	0	247
Letlhakane Primary Hospital	25	2,736	2,662	35	10,193	112	4	108	912	141	1,046	7	1,053
Gumare Primary Hospital	42	1,735	1,698	39	13,644	89	8	41	1,245	38	1,248	33	1,283
Thebephatshwa Primary Hopspital	35	56	54	0	221	2	4	2	3	1	3	0	4
Goodhope Primary Hospital	40	2,134	2,080	57	15,120	104	7	53	559	23	582	0	582
Hukuntsi Primary Hospital	63	1,025	975	36	7,358	32	7	16	286	13	315	1	299
Total	738	38,554	37,807	755	175,306	65	5	52	11,160	560	11,748	125	11,720
Total Clinics	709	16,563	16,389	27	19,543	8	1	23	9,767	1,003	10,652	46	10,770
	5,176	173,871	168,293		1,261,123	67	7	33	55,946	2,200	57,519	736	58,146



Appendix 5. Non institutional Live bir ti		
District of Birth	Number	Percent
Gaborone	10	10.2
Francistown	7	7.1
Lobatse	-	0.0
Selebi Phikwe	6	6.1
Orapa	-	0.0
Jwaneng	2	2.0
Sowa Town	-	0.0
Southern	3	3.1
Barolong	8	8.2
Ngwaketse West	-	0.0
South East	46	46.9
Kweneng East	2	2.0
Kweneng West	-	0.0
Kgatleng	-	0.0
Central Serowe/Palapye	4	4.1
Central Mahalapye	-	0.0
Central Bobonong	-	0.0
Central Boteti	2	2.0
Central Tutume	4	4.1
North East	-	0.0
Ngamiland East	1	1.0
Ngamiland West	1	1.0
Chobe	-	0.0
Ghanzi	1	1.0
Kgalagadi South	1	1.0
Kgalagadi North	-	0.0
Not Stated	-	0.0
Total	98	100.0

### Appendix 5: Non Institutional Live births by District – 2020

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