

Preface

This statistical brief analyzes the causes of mortality among infants and adults over a ten year period covering the years 2004 to 2013. The brief states the major causes of death for Neonates (child born in the first 4 weeks), Children under five, Adults and Mothers/ pregnant women for 2013.

Statistics Botswana's Health Statistics Unit (HSU), is attached to the Ministry of Health & Wellness to provide statistical support to the Ministry to facilitate collection, analysis and dissemination of quality official statistics for evidence-based decision making, program monitoring and evaluation. The Unit produces Statistical Briefs on health related issues including, infant, children under five (5) and mortality by sex and mortality trends.

Generally as shown in this report mortality has been in decline, from a total of 11,041 in 2004 to 5,157 in 2013. While this has been a trend across many categories of causes of death, maternal mortality however remained steady. A particular focus is thus required for this cause of death.

For more information, contact the Directorate of Stakeholder Relations at 3671300. All Statistics Botswana outputs/publications are available on the website at www.cso.gov.bw and at the Statistics Botswana Library (Head-Office, Plot 8843, Khama Crescent, Gaborone).

We sincerely thank all stakeholders involved in the formulation of this brief, for their continued support, as we strive to better serve users of our statistical products and services.

Dr Burton Mguni Acting Statistician General

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1.0 Introduction

1.0 Summary of Findings

This report covers all causes that resulted death in 2013. Specifically the report coversinfant mortality, children under 5 mortality and mortality in all ages. The report also presents midnight census and non-institutional deaths.

Summary on causes

The Population of Botswana is estimated at 2.115 million for year 2013, with males constituting 49 percent compared to 51 for their female counterparts. The proportion of infant population and children less than five years are 2.6 and 12.1 percent respectively. The country experienced a decline in mortality levels between 2001 and 2011 as indicated in Population and Housing 2011 Analytical Report. Life expectancy at birth in 2001 was 55.6 and increased to 68 in 2011 as shown in table 1 below.

Table 1: Selected Mortality Indicators, 1971-2011

Indicator	1971	1981	1991	2001	2011
Infant Mortality Rate	97	71	48	56	17
Child Mortality Rate	56	35	16	19	11
Under 5 Mortality	152	105	63	74	28
Life Expectancy at Birth (years)	55.5	56.5	65.3	55.6	68
Males	52.5	52.3	63.3	52	66
Females	58.6	59.7	67.1	57.4	70

Source: Population and Housing 2011 Analytical Report

In line with the trend on life expectancy, a decline in infant mortality continued to be realized in 2013. Infant mortality as indicated in Figure 1 shows the same pattern as that of children Under 5. A slight decrease in mortality levels was observed from 2009 to 2013 in all infant, under-five and All Ages. Table 4, shows that overall inpatient mortality was 5,157 in 2013 indicating a slight decrease of 0.3 percent compared to 5,171 deaths in 2012. According to the results there were more male deaths for the selected period compared to female deaths.

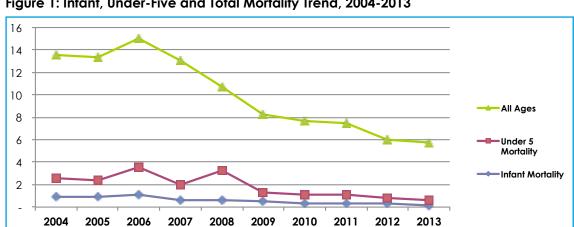


Figure 1: Infant, Under-Five and Total Mortality Trend, 2004-2013

In addition, infant and under-five mortality show a decrease of 46.9 and 22.6 percent respectively for 2012 and 2013. The report shows that despite the decline in infant mortality over the years some infants did not survive to age 5 years. It further shows that infant mortality is higher among females than in males, which was still the pattern in previous years.

2.0 Major causes of Infant Mortality

The report shows that Pneumonia, Diarrhoea, Septicemia, Respiratory distress and Volume Depletion are the major causes of deaths among infants in Botswana (**Table 5**).

In addition, Figure 2 shows major causes of infant inpatient mortality in 2013. Septicaemia constituted the highest accounting for 15.4 percent followed by Pneumonia (8.3%), Volume Depletion (7.1%), Diarrhoea (6.4%), other major causes reported recorded less than 6 percent each. The data, however, shows a slight decrease in the percentage of infant deaths associated with pneumonia from 13.5 percent in 2012 to 8.3 percent in 2013. Although contribution of deaths associated with Septicaemia increased from 11.6 percent in 2012 to 15.4 percent in 2013 the cases are less than that of 2012 (Table 5).

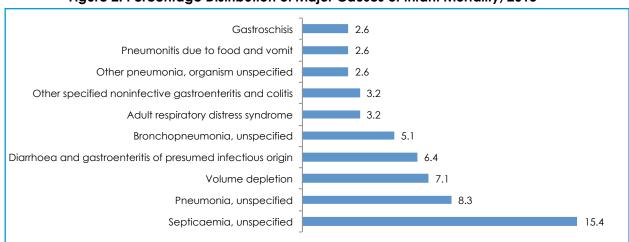


Figure 2: Percentage Distribution of Major Causes of Infant Mortality, 2013

3.0 Major causes of Children Under-Five Mortality

Just as the case of infants, septicaemia, pneumonia, diarrhea and volume depletion were found to be among the leading causes of under-five mortality. **Figure 3** shows that in 2013 the above conditions were responsible for 13.3 percent, 7.6 percent, 8.0 percent and 6.9 percent of under-five deaths respectively. Unspecified severe protein-energy malnutrition is revealed to be a threat to the lives of children under-five years being the second with a proportion of 8.2 percent. It is worth noting that the same conditions were still among the leading causes of mortality in 2012 as shown in **Table 6**.

In its efforts to alleviate the situation, the Botswana Government has embarked on a number of programs to promote the health and survival of the mother and the child. These include the 'Accelerated Child Survival and Development Programme', a robust immunization programme and periodic prevention campaigns. These initiatives have resulted in a decline in infant and child mortality and also improved health of mothers as observed between 2008 and 2013. This is in line with the Millennium Development Goals which call for reduction in child mortality and improvement in maternal health.

1.8 Cardiac arrest, unspecified 2.0 Respiratory arrest 2.0 Other specified noninfective gastroenteritis and colitis 2.9 Unspecified protein-energy malnutrition 5.6 Bronchopneumonia, unspecified Volume depletion 7.6 Pneumonia, unspecified Diarrhoea and gastroenteritis of presumed infectious origin Unspecified severe protein-energy malnutrition 13.3 Septicaemia, unspecified

Figure 3: Percentage Distribution of Major causes for Children Under-Five Mortality, 2013

4.0 Major causes of mortality in All ages

Figure 4 shows that and Pneumonia were the leading causes of deaths among the general population, accounting for 5.9 percent and 5.4 percent of all deaths in all ages respectively, followed by Stroke, not specified as haemorrhage or infarction and Tuberculosis of lung without mention of bacteriological or histological confirmation at 3.3 percent each. Other conditions which threaten the lives of people included Unspecified renal failure and congestive heart failure accounting for 3.0 percent each followed by Anemia. The same conditions also were realized as major causes of deaths in 2011 excluding Anemia and Cerebral Cryptococcus's.

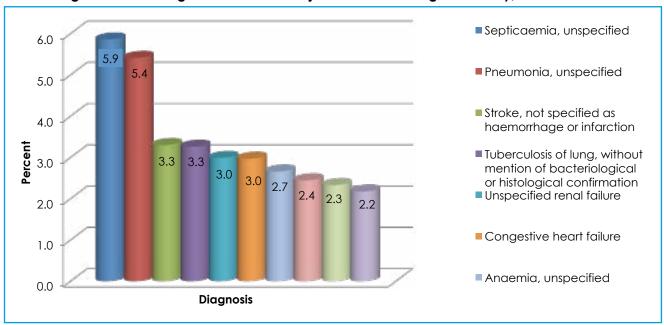


Figure 4: Percentage Distribution of Major causes for All Ages Mortality, 2013

5.0 Neonatal Mortality

Neonatal mortality refers to deaths among live births which occurred during the first 28 completed days of life. In 2013, there were 320 in-patient neonatal deaths in Botswana. Males accounted for 175 (54.7%) of this number while females accounted for 145 (45.3%) (Figure 5). The results further show that from 2008 to 2013 neonatal deaths decreased significantly by 48.1 percent from 616 to 320. In-patient neonatal mortality was mostly caused by Disorders related to short gestation and low birth weight (21.2%) follwed by Bacterial sepsis of newborn, unspecified (17.2%), Respiratory distress syndrome of newborn (10.6%) and Birth asphyxia (9.1%) (Figure 6).

Although it is estimated that 99 percent of all births were delivered in health facilities, it is a serious concern that almost fifty percent of neonate deaths occurred within 2 days after birth of which 16.9 percent of neonates died on the same day of birth 2013. Male babies were more affected to neo-natal mortality compared to their female counterparts in both 2012 and 2013 (Table 8).

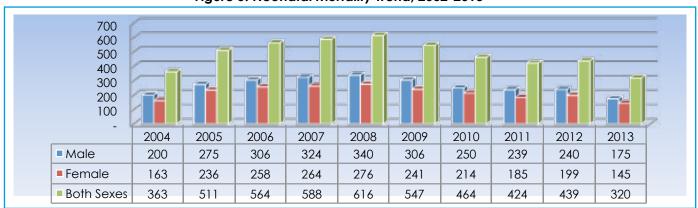
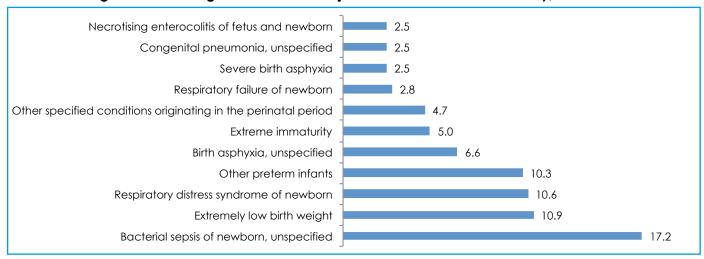


Figure 5: Neonatal Mortality Trend, 2002-2013





6.0 Maternal Mortality

Maternal mortality refers to 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.

There were 91 maternal deaths in 2013 as indicated in **Table 9**. The most common causes of maternal mortality as indicated in Table 2 and Table 4 were Other Immediate Postpartum Hemorrhage with 19 cases, Other and Unspecified Failed Attempted Abortion (15 cases), Hemolysis, Elevated Liver Enzymes and Low Platelet Count (HELLP) syndrome (11 cases), Eclampsia, Unspecified as to time period (7 cases) and Diseases of the Circulatory System Complicating pregnancy, Childbirth and the Puerperium with 6 cases. Unlike in the past, HIV/AIDS is no longer a major threat to pregnant women and mothers. Complications of AIDS are mainly due to diagnosis at an advanced stage and therefore the non-use of Antiretroviral (ARVs).

Although it was estimated that 99 percent of all births occurred in health facilities and all maternal deaths reported took place in health facilities, the country is still far from reaching the Maternal Mortality Ratio (MMR) target set of 82 per 100,000 live births by year the 2015. In 2013 there were 182.6 maternal deaths per 100,000 livebirths and the figure was lower in 2012 (147.9). As shown in **Figure 7**, the ratio has been fluctuating over the years: some years there was an improvement, while in others years the reverse was the case. Maternal Mortality Ratio as a major indicator of health status of pregnant women or mothers reveals that a lot has to be done in the country to deal with the burden.

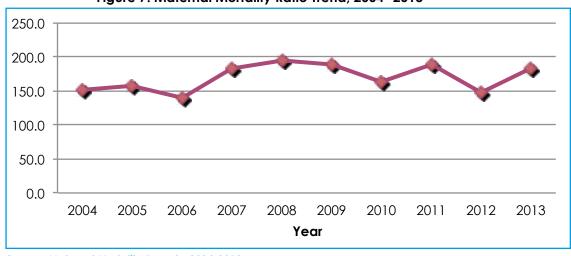


Figure 7: Maternal Mortality Ratio Trend, 2004-2013

Source: Maternal Mortality Reports, 2004-2013

7.0 Midnight Census

The Midnight Census is the counting of patients present in the ward at midnight. At midnight a nurse in charge of each ward counts patients and fills out the ward census slip.

Midnight census trend indicates that for the past five years there was a decline in the institutional deaths recorded for all ages. From 2009 to 2013 a decrease of 21.3 percent was realized from 7,491 to 5,898 deaths. However, neonatal mortality level fluctuates as indicated in (Table 10). The neonatal deaths increased from 578 in 2009 to 659 in 2010 (14 .0%) and increased further to 979 cases in 2011 then decreased to 864 cases in 2013. The highest numbers of neonatal deaths in general hospitals were recorded at Princess Marina Hospital (307) all other hospitals recorded less than hundred deaths each. Amongst the primary hospitals Gumare recorded the highest neonatal deaths (33) however, Palapye had the highest with 149 deaths for other age groups.

8.0 Non-institutional Deaths

Non-institutional death refers to death that did not occur in a health facility. The data on non-institutional deaths from 2004 to 2011 was collected on the Medical Notification of Deaths Form (MH 3002). The form was completed by the Family Welfare Educators in their catchment areas in each district. The completed forms were then sent to the Health Statistics Unit on a monthly basis where they were captured and analyzed. The data on non-institutional deaths show a downward trend over the period 2004 to 2011. There was a decrease of 26.6 percent on non-institutional deaths between 2010 and 2011 from 84 to 62. More non-institutional deaths were recorded for males as compared to their female counterparts from 2004 to 2009, however in 2010 and 2011; more female non institutional deaths were reported as illustrated in Table 2. It should be noted that facilities were not completing MH3002 forms and as a result data for 2012 and 2013 was extracted from Vital statistics Unit. The figures are very high as compared to previous years, this could be due to regulations laid by claim service provider's e.g. life insurance.

Table 2: Non-Institutional Deaths, 2004-2013

Sex	2004	2005	2006	2007	2008	2009	2010	2011	*2012	*2013
Male	496	225	205	169	131	59	38	24	2,695	
Female	461	183	179	156	110	45	46	38	2,574	
All deaths	947	408	384	325	241	104	84	62	5,269	5,092

Source: 2002-2011 Health Statistics Reports: Statistics Botswana Figure is from 2012-2013 Vital Statistics Report, Statistics Botswana

Table 3: Projected Population by Age and Sex (Medium Scenario), 2013

		2013	-
Age (years)	Males	Females	Total
0-4	129,496	126,618	256,114
5-9	111,473	109,366	220,839
14-10	105,370	103,528	208,898
15-19	105,252	104,858	210,110
20-24	99,547	103,537	203,084
25-29	100,719	106,571	207,290
30-34	92,466	95,324	187,790
35-39	74,986	73,781	148,767
40-44	55,960	55,723	111,683
45-49	41,211	46,081	87,292
50-54	32,292	39,483	71,775
55-59	26,179	32,355	58,534
60-64	19,686	23,429	43,115
65-69	13,449	16,471	29,920
70-74	9,958	13,307	23,265
75-79	7,226	10,807	18,033
80+	11,092	17,290	28,382
Total	1,036,362	1,078,529	2,114,891

Source: Botswana Population Projections 2011-2026

Table 4: Mortality Trend for Infants, Under 5 and All Ages by Sex (excluding neonates), 2004-2013

Mortality	Sex	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
	Male	494	535	587	353	308	295	187	158	130	78
Infant Mortality	Female	438	409	565	305	319	264	181	177	145	78
	Both Sexes	932	944	1,152	658	627	559	368	335	275	146
	Male	832	762	1,219	692	493	419	400	382	286	236
Under 5 Mortality	Female	783	659	1,177	610	482	345	369	359	295	214
	Both Sexes	1,615	1,421	2,396	1,302	975	764	769	741	581	450
	Male	5,766	5,811	6,180	5,972	4,036	3,827	3,482	3,419	2,782	2,776
All Ages	Female	5,275	5,147	5,329	5,103	3,451	3,125	3,053	2,937	2,389	2,381
	Both Sexes	11,041	10,958	11,509	11,075	7,487	6,952	6,535	6,356	5,171	5,157

Table 5: Major Causes of Infant Mortality (Excluding Neonatal Deaths) Below One Year, 2012 and 2013

		20	12		2				
Diagnosis/cause	Male	Female	Both Sexes	Percent	Diagnosis/cause	Male	Female	Both Sexes	Percent
Pneumonia, unspecified	19	18	37	13.5	Septicaemia, unspecified	15	9	24	15.4
Septicaemia, unspecified	13	19	32	11.6	Pneumonia, unspecified	5	8	13	8.3
Other specified non-infective gastroenteritis and colitis	14	13	27	9.8	Volume depletion	6	5	11	7.1
Diarrhoea and gastroenteritis of presumed infectious origin	8	14	22	8.0	Diarrhoea and gastroenteritis of presumed infectious origin	5	5	10	6.4
Volume depletion	8	13	21	7.6	Bronchopneumonia, unspecified	2	6	8	5.1
Unspecified protein-energy malnutrition	4	7	11	4.0	Adult respiratory distress syndrome	5	0	5	3.2
Pneumocystosis	5	4	9	3.3	Other specified non infective gastroenteritis and colitis	1	4	5	3.2
Other pneumonia, organism unspecified	6	2	8	2.9	Other pneumonia, organism unspecified	1	3	4	2.6
Bronchopneumonia, unspecified	4	3	7	2.5	Pneumonitis due to food and vomit	1	3	4	2.6
Respiratory arrest	1	5	6	2.2	Gastroschisis	2	2	4	2.6
Causes specified above	82	98	180	65.5	Causes specified above	43	45	88	56.4
Other Diagnosis	48	47	95	34.5	Other Diagnosis	35	33	68	43.6
All diseases and conditions	130	145	275	100.0	All diseases and conditions	78	78	156	100.0

Table 6: Major Causes of Children Under-Five Mortality (Excluding Neonatal Deaths), 2012 and 2013

	2012					2013					
Diagnosis	Male	Female	Total	Percent	Diagnosis	Male	Female	Total	Percent		
Septicaemia , unspecified	31	41	72	12.4	Septicaemia, unspecified	37	23	60	13.3		
Pneumonia, unspecified	25	34	59	10.2	Unspecified severe protein- energy malnutrition	24	13	37	8.2		
Other specified no infective .0gastroenteritis and colitis	27	21	48	8.3	Diarrhoea and gastroenteritis of presumed infectious origin	18	18	36	8,0		
Volume depletion	21	25	46	7.9	Pneumonia, unspecified	13	21	34	7.6		
Unspecified severe protein-energy malnutrition	23	22	45	7.7	Volume depletion	15	16	31	6.9		
Diarrhoea and gastroenteritis of presumed infectious origin	21	20	41	7.1	Bronchopneumonia, unspecified	10	15	25	5.6		
Pneumocystosis	10	7	17	2.9	Unspecified protein- energy malnutrition	5	8	13	2.9		
Unspecified protein-energy malnutrition	6	9	15	2.6	Other specified non infective gastroenteritis and colitis	5	4	9	2.0		
Other pneumonia, organism unspecified	9	6	15	2.6	Respiratory arrest	4	5	9	2.0		
Bronchopneumonia, unspecified	7	6	13	2.2	Cardiac arrest, unspecified	4	4	8	1.8		
Causes Specified Above	180	191	371	63.9	Causes Specified Above	235	127	262	58.2		
Other Diagnosis	106	104	210	36.1	Other Diagnosis	101	87	188	41.8		
All Diseases and Conditions	286	295	581	100.0	All Diseases and Conditions	236	214	450	100.0		

Table 7: Major Causes of All Ages Mortality (Excluding Neonatal Deaths), 2012 and 2013

	2012					2013			
Diagnosis/cause	Male	Female	Both Sexes	Percent	Diagnosis/cause	Male	Female	Both Sexes	Percent
Pneumonia, unspecified	224	189	413	6.5	Pneumonia, unspecified	198	167	365	7.1
Septicaemia, unspecified	110	149	259	4.1	Septicaemia, unspecified	127	141	268	5.2
Unspecified human immunodeficiency virus [HIV] disease	122	90	212	3.3	Tuberculosis of lung, without mention of bacteriological or histological confirmation	109	69	178	3.4
Retrovirus infections, not elsewhere classified	114	98	212	3.3	Stroke, not specified as haemorrhage or infarction	68	95	163	3.2
Stroke, not specified as haemorrhage or infarction	70	133	203	3.2	Retrovirus infections, not elsewhere classified	91	59	150	2.9
Tuberculosis of lung, without mention of bacteriological or histological confirmation	123	72	195	3.1	Unspecified human immunodeficiency virus [HIV] disease	82	64	146	2.8
Diarrhoea and gastroenteritis of presumed infectious origin	87	90	177	2.8	Unspecified renal failure	80	64	144	2.8
Congestive heart failure	96	80	176	2.8	Other specified non infective gastroenteritis and colitis	85	55	140	2.7
Other specified non infective gastroenteritis and colitis	83	71	154	2.4	Diarrhoea and gastroenteritis of presumed infectious origin	61	51	112	2.2
Unspecified renal failure	75	74	149	2.3	Congestive heart failure	59	51	110	2.1
Causes specified above	1,104	1,046	2,150	33.8	Causes Specified Above	960	816	1,776	34.3
Other Diagnosis	2,315	1,891	4,206	66.2	Other Diagnosis	1,822	1,574	3,396	65.7
All diseases and conditions	3,419	2,937	6,356	100.0	All Diseases and Conditions	2,782	2,390	5,172	100.0

Table 8: Neonates Mortality by Age Group (Days) and Sex, 2013

		2012 Sex o	f decease	ed		2013 Sex of deceased				
Neonates Age Group (Days)	Male	Female	Total	Percent	Neonates Age Group (Days)	Male	Female	Total	Percent	
<1	28	22	50	11.4	<1	38	16	54	16.9	
1	32	31	63	14.4	1	34	33	67	20.9	
2	32	25	57	13	2	21	16	37	11.6	
3	23	15	38	8.7	3	16	9	25	7.8	
4	14	10	24	5.5	4	9	10	19	5.9	
5	11	8	19	4.3	5	6	9	15	4.7	
6	10	5	15	3.4	6	8	6	14	4.4	
7-13	34	41	75	17.1	7-13	19	20	39	12.2	
14-20	23	21	44	10.0	14-20	15	11	26	8.1	
21-28	33	21	54	12.3	21-28	9	15	24	7.5	
Total	240	199	439	100.0	Total	175	145	320	100.0	

Table 9: Causes of Maternal Mortality by Age Group of Mother - 2013

				Age grou	p of mo	thers (ye	ars)			
Diagnosis	<15	15-19	20-24	25-29	30-34	35-39	40-44	45+	N/S	Total
Other immediate post partum hemorrhage	0	0	0	3	5	9	2	0	0	19
Other and unspecified failed attempted abortion, complicated by genital tract and pelvic infection	0	0	1	6	3	3	2	0	0	15
HELLP syndrome (Hemolysis, Elevated Liver Enzymes and Low Platelet Count)	0	1	3	1	3	2	1	0	0	11
Eclampsia, unspecified as to time period	0	0	1	2	1	2	1	0	0	7
Diseases of the circulatory system complicating pregnancy, childbirth and the peurperium	0	0	0	0	4	2	0	0	0	6
Puerperal sepsis	0	2	0	1	0	0	0	0	0	3
Other maternal infectious and parasitic diseases complicating pregnancy, and the puerperium	0	0	1	0	1	1	0	0	0	3
Genital tract and pelvic infection following abortion and ectopic and molar pregnancy	0	0	1	1	0	0	0	0	0	2
Ectopic pregnancy, unspecified	0	0	0	1	0	0	0	0	1	2
Obstetric death of unspecified cause	0	0	0	1	0	1	0	0	0	2
Other viral diseases complicating pregnancy, childbirth and puerperium	0	0	0	0	2	0	0	0	0	2
Endocrine, nutritional and metabolic diseases complicating pregnancy, childbirth and the puerperium	0	1	1	0	0	0	0	0	0	2
HIV resulting in Kaposi sarcoma	0	0	1	0	0	0	0	0	0	1
Ectopic pregnancy, unspecified	0	0	0	0	0	1	0	0	0	1
Other abortion complete or unspecified, with other and unspecified complications	0	0	1	0	0	0	0	0	0	1
Incomplete abortion with other and unspecified complications	0	0	0	0	0	1	0	0	0	1
Gestational (pregnancy-induced) hypertension with significant proteinuria	0	0	0	0	0	1	0	0	0	1
Diabetes mellitus in pregnancy, unspecified	0	0	0	0	0	0	1	0	0	1
Placenta with haemorrhage	0	0	0	1	0	0	0	0	0	1
Premature separation of placenta, unspecified	0	0	0	0	1	0	0	0	0	1
Third stage haemorrhage	0	0	0	0	1	0	0	0	0	1
Postpartum coagulation defects	0	0	1	0	0	0	0	0	0	1
Complication of anaesthesia during labour and delivery, unspecified	0	0	0	0	1	0	0	0	0	1
Venous complication in the puerperium, unspecified	0	0	1	0	0	0	0	0	0	1
Tuberculosis complicating pregnancy, childbirth and the puerperium	0	0	1	0	0	0	0	0	0	1
Protozoal diseases complicating pregnancy, childbirth and puerperium	0	1	0	0	0	0	0	0	0	1
HIV disease complicating pregnancy, childbirth and puerperium	0	0	0	0	1	0	0	0	0	1
Mental disorders and diseases of the nervous system complicating pregnancy, childbirth and the peurperium	0	0	0	1	0	0	0	0	0	1
Diseases of the respiratory system complicating pregnancy, childbirth and the peurperium	0	0	0	0	1	0	0	0	0	1
Grand Total	0	5	13	18	24	23	7	0	1	91

Source: Maternal Mortality Ratio Report, 2013

Table 10: Midnight Census Deaths, 2009-2013

Table 10. Midnight Censos	20	2009		10	2	011	20	012	2013		
Facility	All Ages Dead	Newborns Dead	All Ages Dead	Newborns Dead	All Ages Dead	Newborns Dead	All Ages Dead	Newborns Dead	All Ages Dead	Newborns Dead	
General Hospitals											
Letsholathebe Hospital	245	19	310	29	163	8	138	20	177	40	
Delta medical centre	4	2	0	1	0	0	0	0	0	0	
Sekgoma Hospital	377	25	385	34	365	30	316	10	277	61	
Scottish Livingstone Hospital	510	44	426	46	319	8	408	38	406	31	
Bokamoso Private	0	0	68	5	99	5	123	0	58	0	
Jwaneng Mine Hospital	126	10	138	15	90	13	94	10	87	16	
Seventh Day Adventist Hospital	249	22	198	27	288	23	259	30	204	26	
Mahalapye Hospital	382	27	405	47	402	0	366	32	343	31	
Deborah Retief Mem. Hospital	228	11	178	19	233	12	161	19	191	17	
Orapa (De-beers) Hospital	26	5	17	6	22	1	0	0	22	1	
Princess Marina Hospital	1,226	1	931	1	886	300	1201	228	1,044	307	
Gaborone Private Hospital	114	4	72	28	91	5	81	9	98	7	
Nyangabgwe Hospital	1,645	0	1,440	0	1,361	2	1,207	195	1,147	62	
Bamalete Lutheran Hospital	206	13	252	11	205	141	154	6	159	6	
Athlone Hospital	220	30	255	28	151	9	158	14	217	1	
Sbrana Mental Hospital	6	0	7	0	1	0	6	0	8	0	
BCL Hospital	3	0	11	0	5	0	1	0	2	0	
Selibe-Phikwe Hospital	197	46	206	40	153	40	136	38	156	36	
Talai	F 7/4	050	5 000	227	4.024	507	4.000	/40	4.507	/40	
Total	5,764	259	5,299	337	4,834	597	4,809	649	4,596	642	
Primary Hospitals											
Masunga Primary Hospital	128	9	134	8	121	11	100	6	80	2	
Palapye Primary Hospital	211	16	227	20	238	20	174	22	149	12	
Bobonong Primary Hospital	138	21	120	28	144	27	119	19	92	18	
Mmadinare Primary Hosp.	50	4	45	6	45	10	53	5	57	3	
Thamaga Primary Hospital	120	6	96	6	103	8	52	3	67	5	
Gantsi Primary Hospital	153	22	165	24	108	62	103	14	106	17	
Sefhare Primary Hospital	114	12	112	14	141	22	110	20	53	18	
Kasane Primary Hospital	26	17	43	9	140	15	117	11	93	13	
Tsabong Primary Hospital	89	19	83	2	46	66	29	1	38	18	
Tutume Primary Hospital	158	19	146	14	94	5	78	56	69	5	
Gweta Primary Hospital	58	8	78	2	189	18	119	8	71	12	
Rakops Primary Hospital	65	5	54	2	31	28	64	2	54	1	
Letlhakane Primary Hospital	81	7	129	18	113	16	60	11	127	20	
Gumare Primary Hospital	175	30	142	28	32	4	24	1	139	33	
Thebe-Phatshwa Primary	7	0	0	0	1	0	2	0	0	0	
Goodhope Primary	115	13	110	17	47	3	24	6	51	4	
Hukuntsi Primary hospital	31	7	74	9	68	4	47	9	53	9	
Total	1,719	215	1,758	207	1,661	319	1,298	191	1,299	190	
All Clinics	8	104	7	115	42	63	7	88	3	32	
Grand Total:	7,491	578	7,064	659	6,537	979	6,091	931	5,898	864	
Source: 2009-2013 Maternal mort	alibe Dadia De	an auta, Ctartiali,	a Dalawana								

Source: 2009-2013 Maternal mortality Ratio Reports: Statistics Botswana