



# BOTSWANA MATERNAL MORTALITY RATIO 2019

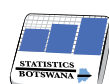
Private Bag 0024, Gaborone  
Tel: 3671300 Fax: 3952201  
Toll Free: 0800 600 200

Private Bag F193,  
City of Francistown Botswana  
Tel. 241 5848, Fax. 241 7540

Private Bag 32  
Ghanzi  
Tel: 371 5723 Fax: 659 7506

Private Bag 47  
Maun  
Tel: 371 5716 Fax: 686 4327

E-mail: [info@statsbots.org.bw](mailto:info@statsbots.org.bw) Website: <http://www.statsbots.org.bw>



**STATISTICS BOTSWANA**

## Preface

This Stats Brief presents the Maternal Mortality Ratio for the years 2014 to 2019. 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 subscription to the Sustainable Development Goal of 'ensuring healthy lives and promoting wellbeing for all ages. The SDGs commits countries to reduce global maternal mortality ratio to less than 70 deaths per 100,000 live births. The Goals also advocates for a large proportion of births being attended to by skilled health personnel.

The brief shows that 87 maternal deaths were reported in 2019 from 52,304 live births. Maternal Mortality Ratio declined steadily from 156.6 in 2016 to 133.7 in 2018 and is estimated at 166.3 deaths per 100,000 live births in 2019. The most common direct causes were Other immediate postpartum hemorrhage (15 Cases) followed by Genital tract and pelvic infection following abortion and ectopic and molar pregnancy (11 deaths) while among the indirect causes the most common causes were, Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium (10 cases) followed by Other maternal infections and parasitic diseases complicating pregnancy childbirth and the puerperium (7 deaths).

We continue to note a high number of mothers are 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 the 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**  
January 2021

# Table of Contents

<b>Preface</b> .....	<b>i</b>
<b>Table of Contents</b> .....	<b>ii</b>
<b>List of Tables and Figures</b> .....	<b>iii</b>
<b>1.</b> Introduction.....	<b>1</b>
<b>2.</b> Access to Health Services and Birth Attendants Assistance.....	<b>1</b>
<b>3.</b> Maternal Mortality Ratio.....	<b>1</b>
<b>3.1.</b> Causes of Maternal Deaths.....	<b>1</b>
3.1. Age Distribution of Maternal Deaths.....	<b>2</b>
3.2. Maternal Mortality by HIV Status.....	<b>3</b>
3.3. Female Population and corresponding Live Births.....	<b>3</b>
<b>4.</b> Institutional Births.....	<b>4</b>
4.1 Born Before Arrival (BBA).....	<b>4</b>
4.2 Non-Institutional Births.....	<b>4</b>
<b>5.</b> Technical Note.....	<b>4</b>
<b>7.</b> Definition of Maternal Mortality Ratio (MMR).....	<b>5</b>

## List of Tables and Figures

### List of Tables

<b>Table 1:</b> Botswana Maternal Mortality Ratio 2014–2019.....	2
<b>Table 2:</b> Direct and indirect causes of Maternal Mortality.....	3
<b>Table 3:</b> Live Births by Place of Delivery 2017 - 2018.....	5
<b>Table 4:</b> Causes of Maternal Mortality by Age Group of Mother - 2019.....	7
<b>Table 5:</b> Maternal Mortality in HIV infected women by Age Group of mother – 2019.....	8
<b>Table 6:</b> Health Facilities by Patients Care Services - 2019.....	9
<b>Table 7:</b> Non Institutional Live births by District - 2019.....	10

### List of Figures

<b>Figure 1:</b> Botswana Maternal Mortality Ratio 2014-2019.....	2
<b>Figure 2:</b> Age distribution of Maternal deaths.....	3
<b>Figure 3:</b> Maternal Deaths by HIV Status.....	4
<b>Figure 4:</b> Female Population and corresponding Live Births.....	4

## 1. Introduction

This Stats Brief provides information on Botswana Maternal Mortality Ratio for the period 2014 – 2019. Maternal Mortality Ratio is defined as the number of maternal deaths per 100,000 live births. As part of a collaborative effort between the Statistics Botswana and Ministry of Health and Wellness 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 2019 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 2007 Botswana Family Health Survey shows that 95 percent of Botswana's population have access to health services and live within an average of 8 kilometres radius from the nearest health facility. Hence, there is a high coverage and precision on the collection of births and deaths data.

The 2007 Botswana Family Health Survey further indicated that over 99 percent of deliveries have been assisted by skilled birth attendants in cities/towns, accounting for 97.2 percent in urban villages and 90.2 percent in rural areas. 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. The survey further indicated that over 95 percent of all reported deliveries occur in health facilities.

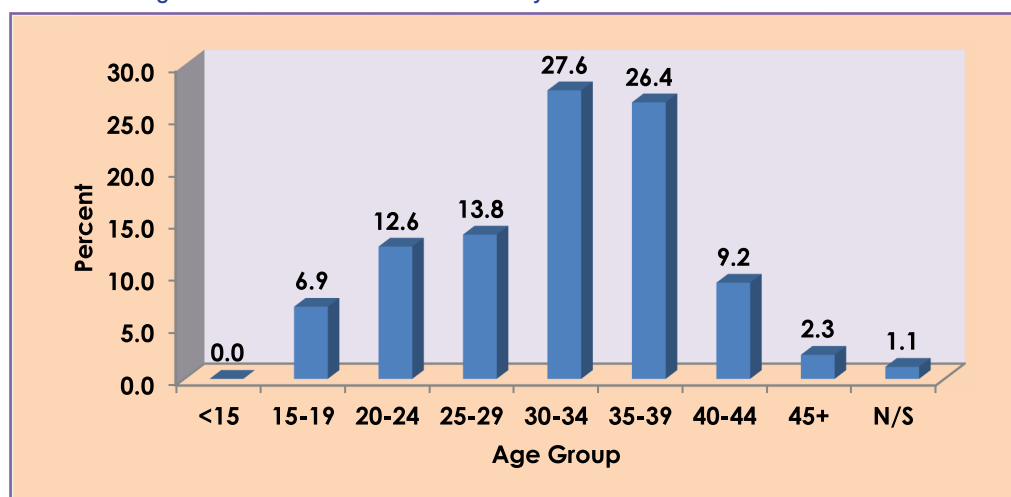
## 3. Maternal Mortality Ratio

Botswana Maternal Mortality Ratio for the period 2014 to 2019 is shown in **Table 1** and **Figure 1** below. The MMR increased from 133.7 to 166.3 per 100,000 live-births between 2018 and 2019.

**Table 1: Botswana Maternal Mortality Ratio 2014– 2018**

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

**Figure 1: Botswana Maternal Mortality Ratio 2014-2019**



### 3.1. Causes of Maternal Deaths

There were 87 maternal deaths in 2019 as shown in **Tables 2** and **4**. 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 2019, maternal direct causes contributed 59.8% percent of total deaths.

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

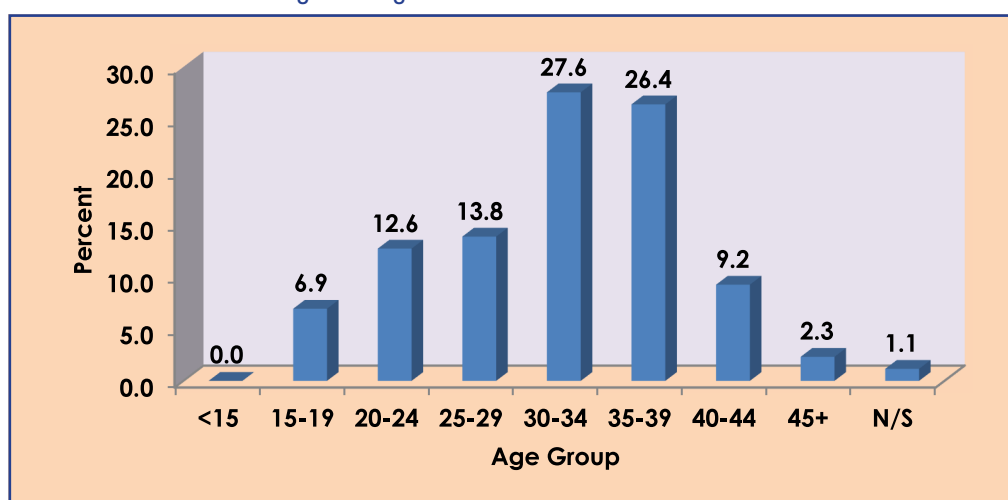
	Direct	Indirect	Total	% Direct
<b>2015</b>	43	30	<b>73</b>	58.9
<b>2016</b>	54	31	<b>85</b>	63.5
<b>2017</b>	57	18	<b>75</b>	76.0
<b>2018</b>	52	19	<b>71</b>	73.2
<b>2019</b>	52	35	<b>87</b>	59.8

The most common causes of deaths among direct and indirect causes are indicated in Table 4. Other immediate postpartum haemorrhage (15 Cases) was the highest followed by Genital tract and pelvic infection following abortion and ectopic and molar pregnancy (11 Cases) and the third was Ectopic Pregnancy, unspecified (5 cases). Among the indirect causes of maternal mortality the most common causes were, Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium (10 cases) followed by Other maternal infections and parasitic diseases complicating pregnancy childbirth and the puerperium (7 cases) and the Obstetric death of unspecified cause (4 cases).

### 3.2. Age Distribution of Maternal Deaths

**Figure 2** shows that the highest maternal deaths were reported among age groups 30-34 (27.6 percent), followed by ages 35-39 (26.4 percent) and then 25-29 (13.8%). There were two cases of maternal deaths recorded for ages 45 and above one in direct and one in the indirect causes. One was caused by Other immediate postpartum haemorrhage and Other maternal infections and parasitic diseases complicating pregnancy childbirth and the puerperium. However, no cases were reported in less than 15 years of age.

**Figure 2: Age Distribution of Maternal deaths**

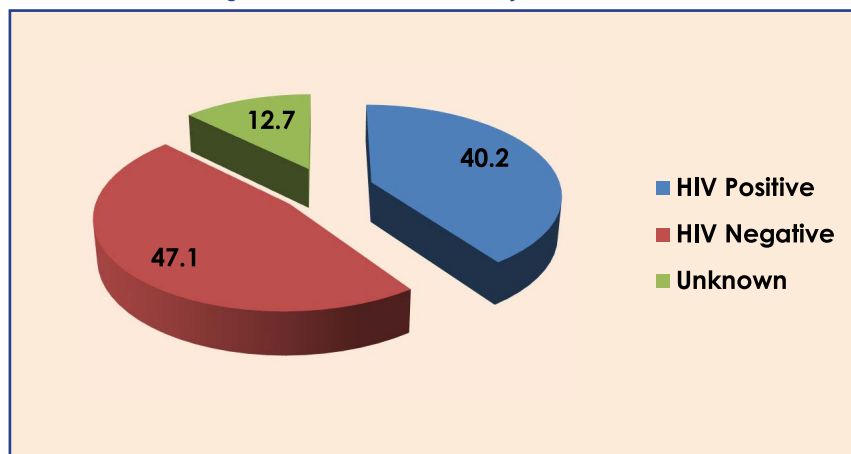




### 3.3. Maternal Mortality by HIV Status

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. From the 87 maternal deaths reported 40.2 percent were HIV infected women, 47.1 percent HIV negative and 12.7 percent-unknown status (Figure 3 refers). The major conditions which were the cunning catalyst in the twenty direct causes who were HIV positive was Other immediate postpartum hemorrhage and Genital tract and pelvic infection following abortion and Ectopic and molar pregnancy with six cases each while among the indirect causes of death Diseases of the respiratory system complicating pregnancy, childbirth and the puerperium (5 cases) was the highest followed by Other maternal infections and parasitic diseases complicating pregnancy childbirth and the puerperium with 4 cases.

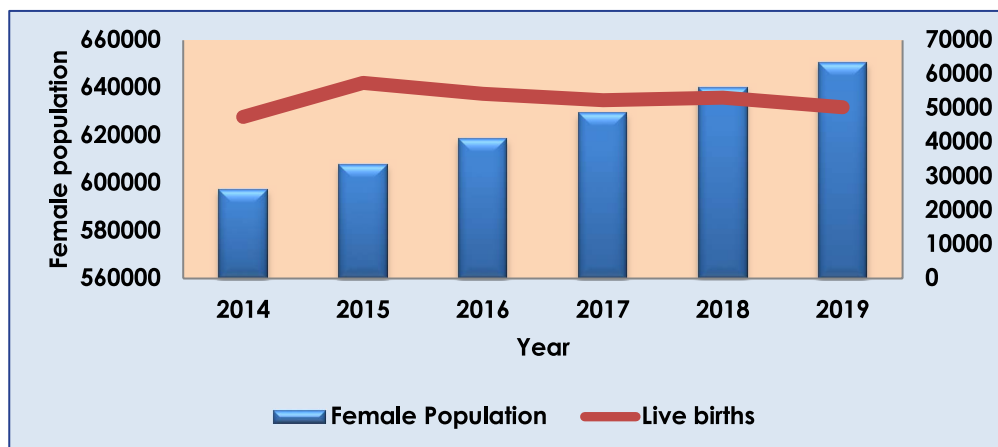
Figure 3 : Maternal Deaths by HIV Status



### 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, the female population in 2019 were 650,506 while the corresponding Live births were 52,304, indicating a marginal decrease of 1.5 percent in the number of Live births from the 2018 figure comparatively. Notably the female population has been substantially increasing while the Live births have been fluctuating over the period.

Figure 4: Female Population and corresponding Live Births



## 4. Institutional Births

There were 52,304 live births registered in 2019. **Table 3** shows that most births (63 percent) occurred in General Hospitals, as compared to 22 percent in primary hospitals and 15 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 a health facility was 7 days (**Table 7**) which is skewed towards hospitals as they often handle complicated referral cases.

**Table 3: Live Births by Place of Delivery 2017 - 2018**

Place of Birth	2017		2018		2019	
	Number	Percent	Number	Percent	Number	Percent
General Hospital	33,442	63.9	34,071	64.1	33,013	63.1
Primary Hospital	11,285	21.5	11,689	22	11,321	21.6
Clinics	7,515	14.4	7,239	13.6	7,872	15.1
Non - Institutional	116	0.2	116*	0.2	98	0.2
<b>Total Live Births</b>	<b>52,358</b>	<b>100.0</b>	<b>53,115</b>	<b>100.0</b>	<b>52,304</b>	<b>100.0</b>

### 4.1 Born Before Arrival (BBA)

The born before arrival (BBA) refers to babies brought to the health facility within 24hrs after delivery. The BBA accounted for 3.3 percent of 52,999 Institutional live births in 2018 as compared to 3.6 percent of 52,206 in 2019 (Table 6).

### 4.2 Non-Institutional Births

The 2019 non-institutional Live births constituting 0.2 percent of the total births (Table 3). It has been realized that non-institutional births reported by Health Facilities to Ministry of Health were insignificant ever since 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 Table 7.

## 5. Technical Note

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

## 6. Access to Health Services in Botswana

In Botswana, healthcare is delivered through a decentralized system with primary health care being the pillar of the delivery system. Botswana has an extensive network of health facilities (Hospitals, Clinics, Health posts and Mobile Stops) clustered in the 27 Health Districts.

## 7. Definition of Maternal Mortality Ratio (MMR)

As indicated earlier, 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 or aggravated by pregnancy or its management. The ratio is expressed as follows:

$$\frac{\text{Maternal deaths} * K}{\text{Live births}}$$

$$\text{Where } K = 100,000$$



**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).

<b>Maternal Death</b>	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.
<b>Direct Maternal Death</b>	A death resulting from complications of pregnancy, labour or delivery or their management.
<b>Indirect Maternal Death</b>	A death in which pregnancy exacerbated a pre-existing health problem.
<b>Non-Maternal Death</b>	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).
<b>Maternal Mortality Ratio (Commonly abbreviated as MMR)</b>	Number of maternal deaths during a given period per 100,000 live- births during the same time-period.

Table 4: 2019 Causes of Maternal Mortality by Age Group

Direct Causes		Age group of mothers (years)									TOTAL
Code	Diagnosis	<15	15-19	20-24	25-29	30-34	35-39	40-44	45+	N/S	
O00.9	Ectopic Pregnancy, unspecified	0	0	1	2	2	0	0	0	0	5
O06.1	Unspecified abortion, incomplete, complicated by delayed or excessive haemorrhage	0	0	0	0	0	1	0	0	0	1
O06.4	Unspecified abortion, incomplete without complications.	0	0	0	0	0	1	0	0	0	1
O08.0	Genital tract and pelvic infection following abortion and ectopic and molar pregnancy	0	0	2	1	3	4	1	0	0	11
O11	CVA secondary to superimposed pre-eclampsia	0	0	0	0	1	0	0	0	0	1
O14.1	Severe pre-eclampsia	0	0	1	2	1	0	0	0	0	4
O14.2	HELLP Syndrome	0	0	0	1	0	0	0	0	0	1
O14.9	Pre-Eclampsia, unspecified as to time period	0	0	0	0	0	0	1	0	0	1
O15.1	Eclampsia in labour	0	0	0	0	1	0	0	0	0	1
O15.9	Eclampsia, unspecified as to time period	0	1	0	0	0	0	0	0	0	1
O16	Unspecified maternal Hypertension	0	0	0	0	0	0	1	0	0	1
O21.1	Hyperemesis gravidarum with metabolic disturbance	0	1	1	2	0	0	0	0	0	4
O41.1	Infection of amniotic sac and membranes	0	0	0	0	1	0	0	0	0	1
O62.2	Other uterine inertia	0	0	0	0	1	0	0	0	0	1
O71.1	Rapture of uterus during labour	0	0	0	0	1	1	0	0	0	2
O72.1	Other immediate postpartum haemorrhage	0	1	1	1	3	5	2	1	1	15
O86.0	Infection of obstetric surgical wound	0	0	0	0	0	1	0	0	0	1
<b>Total</b>		<b>0</b>	<b>3</b>	<b>6</b>	<b>9</b>	<b>14</b>	<b>13</b>	<b>5</b>	<b>1</b>	<b>1</b>	<b>52</b>
Indirect Causes		Age group of mothers (years)									TOTAL
Code	Diagnosis	<15	15-19	20-24	25-29	30-34	35-39	40-44	45+	N/S	
O26.6	Liver disorders in pregnancy, childbirth and the puerperium	0	0	0	0	2	0	0	0	0	2
O74.6	Other complications of spinal and epidural anaesthesia during labour and delivery	0	1	1	0	0	0	0	0	0	2
O95	Obstetric death of unspecified cause	0	0	0	2	0	2	0	0	0	4
O98.0	Tuberculosis complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	1	0	0	0	1
O98.7	Human immunodeficiency(HIV) disease complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	1	0	0	0	1
O98.8	Other maternal infections and parasitic diseases complicating pregnancy childbirth and the puerperium	0	1	2	1	1	1	0	1	0	7
O99.2	Endocrine, nutritional and metabolic diseases complicating pregnancy, childbirth and puerperium	0	0	1	0	2	0	0	0	0	3
O99.3	Mental disorders and diseases of the nervous system complicating pregnancy, childbirth and the puerperium	0	1	0	0	0	0	0	0	0	1
O99.4	Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium	0	0	1	0	3	3	3	0	0	10
O99.5	Diseases of the respiratory system complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	1	0	0	0	1
O99.6	Diseases of the digestive system complicating pregnancy, childbirth and puerperium	0	0	0	0	1	0	0	0	0	1
O99.8	Other specified diseases and conditions complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	1	0	0	0	1
Y14.9	Poisoning by and exposure to other and unspecified drugs, medicaments and biological substances, undetermined intent	0	0	0	0	1	0	0	0	0	1
<b>Total</b>		<b>0</b>	<b>3</b>	<b>5</b>	<b>3</b>	<b>10</b>	<b>10</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>35</b>
<b>Sub Totals</b>	<b>Direct Causes</b>	<b>0</b>	<b>3</b>	<b>6</b>	<b>9</b>	<b>14</b>	<b>13</b>	<b>5</b>	<b>1</b>	<b>1</b>	<b>52</b>
	<b>Indirect Causes</b>	<b>0</b>	<b>3</b>	<b>5</b>	<b>3</b>	<b>10</b>	<b>10</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>35</b>
<b>Grand Total</b>		<b>0</b>	<b>6</b>	<b>11</b>	<b>12</b>	<b>24</b>	<b>23</b>	<b>8</b>	<b>2</b>	<b>1</b>	<b>87</b>

**Table 5: Maternal Mortality in HIV infected women by Age Group of mother – 2019**

**Direct Causes**

Code	Diagnosis	Age group of mothers (years)								TOTAL	
		<15	15-19	20-24	25-29	30-34	35-39	40-44	45+		N/S
O00.9	Ectopic Pregnancy, unspecified	0	0	0	1		1	0	0	0	2
O06.1	Unspecified abortion, incomplete, complicated by delayed or excessive haemorrhage	0	0	0	0	0	1	0	0	0	1
O06.4	Unspecified abortion, incomplete without complications.	0	0	0	0	0	1	0	0	0	1
O08.0	Genital tract and pelvic infection following abortion and ectopic and molar pregnancy	0	0	0	0	1	4	1	0	0	6
O11	CVA secondary to superimposed pre-eclampsia	0	0	0	0	0	0	0	0	0	0
O14.1	Severe pre-eclampsia	0	0	0	0	0	0	0	0	0	0
O14.2	HELLP Syndrome	0	0	0	0	0	0	0	0	0	0
O14.9	Pre-Eclampsia, unspecified as to time period	0	0	0	0	0	0	0	0	0	0
O15.1	Eclampsia in labour	0	0	0	0	0	0	0	0	0	0
O15.9	Eclampsia, unspecified as to time period	0	0	0	0	0	0	0	0	0	0
O16	Unspecified maternal Hypertension	0	0	0	0	0	0	1	0	0	1
O21.1	Hyperemesis gravidarum with metabolic disturbance	1	0	0	0	0	0	0	0	0	1
O41.1	Infection of amniotic sac and membranes	0	0	0	0	1	0	0	0	0	1
O62.2	Other uterine inertia	0	0	0	0	0	0	0	0	0	0
O71.1	Rapture of uterus during labour	0	0	0	0	0	1	0	0	0	1
O72.1	Other immediate postpartum haemorrhage	0	0	0	1	0	0	3	1	1	6
O86.0	Infection of obstetric surgical wound	0	0	0	0	0	0	0	0	0	0
<b>Total</b>		<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>8</b>	<b>5</b>	<b>1</b>	<b>1</b>	<b>20</b>

**Indirect Causes**

Code	Diagnosis	Age group of mothers (years)								TOTAL	
		<15	15-19	20-24	25-29	30-34	35-39	40-44	45+		N/S
O26.6	Liver disorders in pregnancy, childbirth and the puerperium	0	0	0	0	2	0	0	0	0	2
O74.6	Other complications of spinal and epidural anaesthesia during labour and delivery	0	0	0	0	0	0	0	0	0	0
O95	Obstetric death of unspecified cause	0	0	0	0	0	0	0	0	0	0
O98.0	Tuberculosis complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	1	0	0	0	1
O98.7	Human immunodeficiency(HIV) disease complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	1	0	0	1
O98.8	Other maternal infections and parasitic diseases complicating pregnancy childbirth and the puerperium	0	2	1	0	0	1	0	0	0	4
O99.2	Endocrine, nutritional and metabolic diseases complicating pregnancy, childbirth and puerperium	0	0	0	0	0	0	0	0	0	0
O99.3	Mental disorders and diseases of the nervous system complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	0	0	0	0
O99.4	Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	0	0	0	0
O99.5	Diseases of the respiratory system complicating pregnancy, childbirth and the puerperium	0	0	1	0	0	0	2	2	0	5
O99.6	Diseases of the digestive system complicating pregnancy, childbirth and puerperium	0	0	0	0	1	0	0	0	0	1
O99.8	Other specified diseases and conditions complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	1	0	0	0	1
Y14.9	Poisoning by and exposure to ather and unspecified drugs, medicaments and biological substances, undetermined intent	0	0	0	0	0	0	0	0	0	0
<b>Total</b>		<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>15</b>
<b>Sub Totals</b>	<b>Direct Causes</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>8</b>	<b>5</b>	<b>1</b>	<b>1</b>	<b>20</b>
	<b>Indirect Causes</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>15</b>
<b>Grand Total</b>		<b>1</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>5</b>	<b>11</b>	<b>8</b>	<b>3</b>	<b>1</b>	<b>35</b>

Table 6: Health Facilities by Patients Care Services - 2019

District Health Facility	Discharged				Patient Days	New Borns Discharged							
	Number of beds	Admissions	Alive	Dead		Occupancy Rate(%)	Length of Stay(Days)	Turnover Rate	New Born	New BBA	Alive	Dead	Total Livebirths
<b>General Hospitals</b>													
Letsholathebe II Memorial Hospital	340	6,025	5,846	187	79,988	64	13	15	2,262	43	2,288	14	<b>2,305</b>
Scottish Livingstone Hospital	350	10,474	10,305	333	68,795	54	6	24	3,216	148	3,329	33	<b>3,364</b>
Bokamoso Private Hospital	122	7,170	6,979	158	26,763	60	4	54	844	0	768	7	<b>844</b>
SDA Kanye Hospital	182	7,014	6,791	237	30,526	46	4	25	1,637	46	1,656	27	<b>1,683</b>
Mahalapye Hospital	320	7,306	7,052	259	63,607	54	9	24	2,327	72	2,362	37	<b>2,399</b>
Deborah Relief Memorial Hospital	167	4,920	4,779	142	39,826	65	8	23	1,718	44	1,748	14	<b>1,762</b>
Orapa Hospital	94	1,583	1,563	37	4,495	13	3	28	397	4	409	0	<b>401</b>
Princess Marina Referral Hospital	557	17,022	16,179	680	327,195	161	19	20	6,097	24	5,870	254	<b>6,121</b>
Gaborone Private Hospital	90	6,761	6,635	114	21,873	67	3	48	1,058	4	1,108	3	<b>1,062</b>
Nyangabwe Referral Hospital	497	21,794	20,700	957	178,922	99	8	30	5,139	41	5,084	96	<b>5,180</b>
Riverside Private Hospital	29	1,944	1,816	6	5,224	49	3	50	226	1	221	1	<b>227</b>
Bamalete Lutheran Hospital	138	5,680	5,537	127	19,047	38	3	27	1,786	13	1,791	8	<b>1,799</b>
Athlone Hospital	139	5,188	5,093	114	29,306	58	6	19	889	21	900	13	<b>910</b>
State Mental Referral Hospital	300	1,875	1,852	3	84,815	77	46	5	-	-	-	-	-
BCL Mine Hospital	15	19	19	0	38	1	2	1	-	-	-	-	-
Selibe Phikwe Government Hospital	61	4,037	3,894	121	15,470	69	4	100	1,165	16	1,220	11	<b>1,181</b>
Jwaneng Mine Hospital	60	2,791	2,724	71	8,979	41	3	36	1,015	26	1,037	19	<b>1,041</b>
Sekgoma Memorial Hospital	386	10,590	10,312	336	76,772	54	7	21	2,586	66	2,637	15	<b>2,652</b>
<b>Total</b>	<b>3,729</b>	<b>122,193</b>	<b>118,076</b>	<b>3,882</b>	<b>1,081,641</b>	<b>79</b>	<b>9</b>	<b>27</b>	<b>32,362</b>	<b>569</b>	<b>32,428</b>	<b>552</b>	<b>32,931</b>
<b>Primary Hospitals</b>													
Masunga Primary Hospital	48	1,790	1,770	38	5,744	33	3	38	389	8	397	2	<b>397</b>
Palapye Primary Hospital	50	3,698	3,548	124	12,732	70	3	73	1,540	51	1,586	19	<b>1,591</b>
Bobonong Primary Hospital	33	3,645	3,541	85	22,960	191	6	110	849	22	862	9	<b>871</b>
Mmadinare Primary Hospital	31	1,191	1,168	47	4,577	40	4	39	333	15	347	2	<b>348</b>
Thamaga Primary Hospital	61	2,443	2,367	64	10,039	45	4	40	681	29	703	7	<b>710</b>
Gantsi Primary Hospital	104	3,087	2,766	106	17,767	47	6	28	984	110	1,085	17	<b>1,094</b>
Sefhare Primary Hospital	38	1,899	1,874	46	8,897	64	5	51	602	7	609	2	<b>609</b>
Kasane Primary Hospital	30	2,400	2,347	46	7,218	66	3	80	400	10	404	7	<b>410</b>
Tshabong Primary Hospital	33	1,774	1,709	62	7,840	65	4	54	548	11	550	10	<b>559</b>
Tutume Primary Hospital	42	3,771	3,678	99	10,370	68	3	90	1,040	46	1,080	7	<b>1,086</b>
Gweta Primary Hospital	50	1,196	1,167	38	6,739	37	6	24	291	21	308	4	<b>312</b>
Rakops Primary Hospital	36	1,491	1,458	40	6,936	53	5	42	325	17	339	3	<b>342</b>
Letlhakane Primary Hospital	25	3,009	2,949	58	10,800	118	4	120	865	128	980	13	<b>993</b>
Gumare Primary Hospital	42	2,692	2,556	113	11,848	77	4	64	1,062	55	1,092	26	<b>1,117</b>
Thebephatshwa Primary Hospital	35	21	20	0	355	3	18	1	3	1	3	1	<b>4</b>
Goodhope Primary Hospital	40	2,664	2,587	61	18,667	128	7	66	615	33	636	12	<b>648</b>
Hukuntsi Primary Hospital	63	1,370	1,323	42	10,940	48	8	22	405	18	417	6	<b>423</b>
<b>Total</b>	<b>738</b>	<b>38,141</b>	<b>36,828</b>	<b>1,069</b>	<b>174,429</b>	<b>65</b>	<b>5</b>	<b>51</b>	<b>10,932</b>	<b>582</b>	<b>11,398</b>	<b>147</b>	<b>11,514</b>
<b>Total Clinics</b>	<b>709</b>	<b>13,878</b>	<b>13,841</b>	<b>0</b>	<b>12,224</b>	<b>5</b>	<b>1</b>	<b>20</b>	<b>7,024</b>	<b>737</b>	<b>7,661</b>	<b>53</b>	<b>7,761</b>
<b>Grand Total</b>	<b>5,176</b>	<b>174,212</b>	<b>168,745</b>	<b>4,951</b>	<b>1,268,294</b>	<b>67</b>	<b>7</b>	<b>34</b>	<b>50,318</b>	<b>1,888</b>	<b>51,487</b>	<b>752</b>	<b>52,206</b>

Table 7: Non Institutional Live births by District – 2019

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
<b>Total</b>	<b>98</b>	<b>100.0</b>



Private Bag 0024, Gaborone  
Tel: 3671300 Fax: 3952201  
Toll Free: 0800 600 200

Private Bag F193,  
City of Francistown Botswana  
Tel. 241 5848, Fax. 241 7540

Private Bag 32  
Ghanzi  
Tel: 371 5723 Fax: 659 7506

Private Bag 47  
Maun  
Tel: 371 5716 Fax: 686 4327

E-mail: [info@statsbots.org.bw](mailto:info@statsbots.org.bw) Website: <http://www.statsbots.org.bw>



**STATISTICS BOTSWANA**