

### Health Goals, Objectives and Indicators

GOAL	OBJECTIVE	INDICATOR	NUMERATOR / DESCRIPTION	NUMERATOR SOURCE	DENOMINATOR	DENOMINATOR SOURCE	PRIMARY LEVEL OF RESPONSIBILITY	FREQUENCY OF REPORTING
		6.7B. Schools incorporating substance abuse into their Life-Skills programmes	Number of schools running substance abuse life-skills	Youth Risk Behavioural Survey,	Number of Schools surveyed	Youth Risk Behavioural Survey	Provincial	Annually
Improve the mental health and social well-being of individuals and communities	Improve counselling services for, and management of victims of attempted suicide, violence and rape	6.7C. Proportion of PHC facilities with at least one person trained in counselling services	Number of services providing counselling	Facility Survey	Total number of PHC facilities	DHIS	District	Annually
	Improve forensic mental health services	6.7D. Mean waiting time for persons referred by the court for observation	Waiting time for persons requiring observation	D: MH&SA	Number of persons requiring observation	D: MH&SA	Provincial	Annually
	Develop mental health services for children	6.7E. Proportion hospitals with child mental health services	Number of hospitals with child mental health services	Provincial records	Total numbers of hospitals	D: MH&SA	Provincial records	5 yearly
	Expand community based mental health care: 30% reduction in psychiatric hospital beds with concomitant increase in facilities in general hospitals and community care	6.7F. Proportion of hospital based services relative to community based care	Number of hospital psychiatric beds	Provincial records	Number of psychiatric beds and community facility	Provincial	Provincial	Annually
	Reduce suicide	6.7G. Proportion of people committing suicide	Number of suicides	NNMS	Population	Statistics SA	National	Annually
<b>6.8 Chronic Diseases, Disabilities and Geriatrics</b>								
Prevent and control non-communicable chronic diseases	Improve quality of care to people with chronic diseases	6.8A Proportion of emergency admissions (up to 75 yrs) of persons with hypertension	Number of Hypertension emergency admissions per hospital per province	Provincial Hospital Information Systems	Total number of emergency admissions per hospital per province	Provincial Hospital Information Systems	Provincial	Annually
		6.8B Proportion of emergency admissions (up to 75yrs) of persons with diabetes	Number of diabetes emergency admissions per hospital per province	Provincial Hospital Information Systems	Total number of emergency admissions per hospital per province	Provincial Hospital Information Systems	Provincial	Annually
		6.8C Proportion of emergency admissions (up to 75yrs) of persons with asthma	Number of asthma emergency admissions per hospital per province	Provincial Hospital Information Systems	Total number of emergency admissions per hospital per province	Provincial Hospital Information Systems	Provincial	Annually

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	Ensure prevention, early diagnosis and effective management of hypertension, diabetes, stroke and asthma	6.8D. Adult 18 – 75 yrs mortality rates due to hypertensive heart disease	Number of deaths due to hypertensive heart disease by age and gender	Stats SA	Total population by age and gender	StatsSA	Provincial	Annually
		6.8E Adult 18 – 75 yrs mortality rates due to diabetes	Number of deaths due to diabetes by age and gender	Stats SA	Total population by age and gender	StatsSA	Provincial	Annually
		6.8F Adult 18 – 75 yrs mortality rates due to stroke	Number of deaths due to stroke by age and gender	Stats SA	Total population by age and gender	StatsSA	Provincial	Annually
		6.8G Adult 18 – 75 yrs mortality rates due to asthma	Number of deaths due to asthma by age and gender	Stats SA	Total population by age and gender	StatsSA	Provincial	Annually
		6.8H. Alcohol intake in adults aged 18-75 years	Number of people taking < 1 drink per day, 1-3 drinks per day and 4 or more drinks per day	SADHS	Total population by age	SADHS	Provincial	5 yearly
	Decrease the percentage of overweight and obese people	6.8I Percentage of population > 15 years who are overweight	Number of people aged 15 years and above with BMI 25 – 29.9 (Kg/m <sup>2</sup> )	SADHS	Total population >15 years	SADHS	Provincial	5 yearly
		6.8J Percentage of population > 15 years who are obese	Number of people aged 15 years and above with BMI > 30 (Kg/m <sup>2</sup> )	SADHS	Total population >15 years	SADHS	Provincial	5 yearly
	Improve the quality of life of people with disabilities	Increase accessibility of health services to people with disabilities	6.8K Percentage of people with disabilities who have accessed basic rehabilitation services	Number of people (count first visit per treatment programme) with disabilities who access PHC facilities per province for basic rehabilitation services	Provincial annual report and intermittent surveys	Number of people with disabilities per province, in need of basic rehabilitation services	Disability survey	National, Provinces
6.8L Percentage of people with disabilities in need of assistive devices who have received assistive devices per province			Number of disabled people in need of assistive devices per province who received assistive devices	Provincial report	Number of people with disabilities in need of assistive devices per province	Provincial report	Provincial	Annually
Eliminate avoidable blindness due to cataract by 2020	Increase cataract surgery rate to 1 per 1000 population by 2005	6.8M. Cataract Surgery rate per year	Number of cataract surgeries done by all provinces x 1 million population	Provincial report	Number of indigent people (80% of total population)	Provincial reports	Provincial and National	Annually

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<b>6.9 Poverty Alleviation and Food Security Strategy</b>								
Improve nutritional status	Reduce micro-nutrient deficiency disorders	6.9A. Vitamin A deficiency rate for children	Number of children under 5 years with serum retinal <20ug/dl out of the surveyed number of children	Directorate Nutrition	Number of children < 5 of age	Survey population	National	5 yearly
		6.9B. Iron deficiency rate for children	Number of children under 5 years of age with iron deficiency	Directorate Nutrition	Number of children < 5 of age	Survey population	National	5 yearly
		6.9C. Iodine deficiency rate for children	Number of primary school learners with low urinary iodine <100ug/dl	Directorate Nutrition	Primary school learners	Survey population	National	5 yearly
	Reduce the prevalence of underweight among children aged under 5 years to less than 10% by 2005	6.9D. Prevalence of underweight children	Number of children under five years of age below -2 standard deviations from the NCHS/WHO reference median value for weight-for-age	Nutrition Survey, SADHS	Number of children under five years of age	Survey population, SADHS	National	5 yearly
	Reduce the prevalence of stunting among children aged under 5 years to less than 20% by 2005	6.9E. Prevalence of stunted children	Number of children under five years of age below -2 SD from the NCHS/WHO reference median value for height for age	Nutrition Survey, SADHS	Number of children under five years of age	Survey population, SADHS	National	5 yearly
	Reduce the prevalence of wasting among children aged under 5 years to less than 2% by 2005	6.9F. Prevalence of wasting	Number of children < 5 years of age below - 2 SD from the NCHS/WHO reference median value for weight-for-height	Nutrition Survey, SADHS	Number of children < 5 years of age	Survey population, SADHS	National	5 Yearly
<b>6.10 Tackle violence against women and children</b>								
Reduce violence towards women and children	Increase the proportion of trained health care providers in the management of victims of abuse	6.10A. Proportion of health care providers trained in the management of victims of abuse	Number of health care providers trained in the management of victims of abuse	Provincial reports MCWH	Number of trained health care providers	Provincial report	Provincial	Annually

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Reduce maternal mortality and morbidity	Increase districts with trained health care workers in sexual violence management from < 5% to 20%	6.10B. Percentage of districts with trained health care workers in sexual violence management	Number of districts with trained health care workers in sexual violence management	Provincial reports	Total number of districts	Provincial reports	Provincial	5 yearly
<b>6.11 Emergency Medical Services</b>								
Improve the provision of emergency medical services to all communities	Increase the proportion of the population with access to emergency medical services on a 24 hour basis	6.11A. Proportion of services with a 24 hour communication system	Number of emergency medical services with 24 hour communication centres	Input from provincial EMS managers by means of EMS information systems Facilities Survey	Number of emergency medical services	Input from provincial EMS managers by means of EMS information systems	Provincial	Annually 2 yearly
		6.11B. Proportion of facilities that receive EMS response time of Urban <20 min Rural <60 min	Number of facilities that receive emergency medical services within time designated	Input from provincial EMS managers by means of EMS information systems. Facilities survey	Number of facilities	Input from provincial EMS managers by means of EMS information systems	Provincial	Annually 2 Yearly
Improve accessibility to emergency centres within health facilities	Increase the proportion of the population with access to emergency centres	6.11C. Proportion of facilities with graded emergency centres	Number of graded emergency centres	Input from provincial EMS managers by means of EMS information systems	Number of health facilities	Input from provincial EMS managers by means of EMS information systems	Provincial	Annually
		6.11D. Proportion of emergency specialists trained	Number of emergency specialists trained	Input from provincial EMS managers by means of EMS information systems	Number of health facilities	Input from provincial EMS managers by means of EMS information systems	Provincial	Annually
<b>7. RESOURCE MOBILIZATION, ALLOCATION AND MANAGEMENT</b>								
<b>7.1 Strengthening Planning and Budgeting and Monitoring inter and intra-provincial equity</b>								
Achieve equity in distribution of resources for service delivery in all provinces	Reduce disparity (ratio) between provincial and national average expenditure per capita	7.1A. Ratio between provincial health per capita and national average	Provincial per capita health care expenditure	NHA Update Provincial returns	National average per capita expenditure	NHA Update Provincial Returns	Provincial	Annual
	Reduce % disparity between hospitals budgets	7.1B. Hospital patient expenditure ratio	Average patient day equivalent (PDE) per level of hospital	Provincial returns	National average cost per PDE	National Norms	Provincial	Annual

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	Reduce disparity in public and private funding of health care	7.1C. Ratio of public to private per capita health expenditure	Total public health sector expenditure divided by the population covered	NHA Update Provincial returns	Total medical scheme expenditure divided by number of beneficiaries	NHA Update  Medical Schemes Council	National	Annually
<b>7.2 Medical Schemes and Social Insurance</b>								
	Implement Social Health Insurance	7.2A. Social Health Insurance	Enactment of SHI legislation	National DOH	Not Applicable	Not Applicable	National	Milestone
<b>7.3 Revenue Generation and Retention</b>								
	Increase revenue generated and retained	7.3A. Revenue generated as a percent of health budget	Number of facilities with revenue targets that were reached	Provincial revenue reports	Total number of facilities that were given revenue targets	Provincial revenue report	Provinces	Annually
<b>7.4 Public-Private Partnerships</b>								
	Increase number of partnerships that meet the equity and sustainability criteria	7.4A. Public Private Partnerships that meet the equity and sustainability criteria	Number of PPPs that meet the equity and sustainability criteria in each province	Provincial PPP REPORTS	Number of PPPs in place in the preceding year that meet the equity and sustainability criteria in each province	Provincial PPP reports	Provinces	Annually
<b>7.5 Strengthening coordination of Donor Funding</b>								
Facilitate and coordinate donor activities within the health sector	Ensure that assistance received is inline with DOH Priorities	7.5A. Project proposals approved in line with DOH priorities	Number of approved project proposals	Quarterly report	Total number project proposals made	Quarterly project progress reports	National and Provincial	Annually
Mobilizing international Donor funding	Processing of agreements with international donors community on health cooperation	7.5B. Agreements signed with international Donor community in line with DOH Priorities	Number of agreements implemented in line with DOH Priorities	IHL report	Number of agreements signed	IHL report	National	Annually
<b>7.6 Health Technology</b>								
Ensure the appropriate use of health technologies	Ensure equity in the distribution of and access to Health Technologies	7.6A. Percentage of institutions with audit and inventory systems	Existence of national essential technology policy and guidelines	D: Health Technology	Not Applicable	Not Applicable	National	Milestone
Develop a comprehensive and sustainable HT System for South Africa	Improve the system of managing HTs	7.6B Percentage of budget allocated to maintenance per province	Amount budgeted for maintenance of equipment	Provincial reports	Total provincial budget	Provincial reports	National Provincial	Annually

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		7.6C. Percentage of budget actually spent on maintenance at facility level	Facility expenditure on maintenance of equipment	Provincial Hospitals	Hospital report	Provincial hospitals	Provincial	Annually
Develop the Regulatory Environment for Health Technologies	Develop a system of quality control and regulation of health technologies	7.6D. System of safety, quality control and regulation of expensive technology	Existence of a system of quality control and regulation of expensive technology	D: HT Policy	Not Applicable	Not Applicable	National	Milestone
Improve the planning of Highly Specialized Services	To improve planning and management of organ transplant as part of Highly Specialized Services	7.6E. Availability of national organ transplant policy and guidelines.	Organ transplant policy guidelines and issued regulations	D: HT Policy	Not Applicable	Not Applicable	National	Milestone
<b>8. HUMAN RESOURCES PLANNING, DEVELOPMENT AND MANAGEMENT</b>								
Ensure that there is sufficient staff with the right skills, in the right location`	Planning norms for staffing requirements	8A. Planning norms produced	Number of Norms produced	Public Service & Academic Survey	Total number of norms needed	Norms and standards report	National	Annually
	Formulate strategies to fill posts in areas of need	8B. Vacancy rates according to norms	Number of posts filled	PERSAL reports	Total number of posts required according to norms	PERSAL	National & Provincial	Quarterly
	Training of new categories of health workers, including mid level workers	8C. Percentage of mid-level workers trained	Number of mid-level workers trained	Training reports	Total number of mid-level workers needed	Training reports	National & Academic Institutions	Annually
	Appropriate production of health professionals	8D. % of trained health professionals according to training norms	Number of health professionals trained	Training institutions	Total number of health professionals as required by training norms	Reports from training institutions	National	Annually
	Strategies for recruitment and retention	8E. Attrition rate	Number of employees exiting	PERSAL & Stats SA	Total number of new recruits and employees retained	PERSAL	National & Provincial	Quarterly
Transformation of training and education of health professionals	Improving representativity in under- and postgraduate student demography	8F. Percentage of blacks, women and disabled being trained	Number of blacks, women and disabled trained	Reports from Training institutions	Total number of blacks, women and disabled	Reports from training institutions	National and Provincial	Annually
	Strategies to reduce migration of health personnel	8G. Staff migration rate	Number of health workers by category who migrated	PERSAL & Stats SA	Total number of health professions retained	PERSAL	National & Provincial	Quarterly
	Transformation of Schools of Public Health	8H. % of Schools of Public Health implementing policy guidelines	Number of schools of Public Health implementing policy guidelines	National / Schools of Public Health	Total number of Schools of Public Health	Reports from Schools of Public Health	National / Schools of Public Health	Annually
Transformation of professional legislation	Structural reform of professional statutory councils	8I. Legislation revised and implemented	Statutory councils reformed	Transformation reports	Number of councils reformed	Transformation reports	National / Statutory councils	Milestone

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	Regulation for health workers not currently regulated	8J. Legislation drafted for traditional healers	N/A	N/A	N/A	N/A	National	Milestone	
<b>9. STRENGTHENING CO-OPERATION WITH OUR PARTNERS INTERNATIONALLY</b>									
Expand bilateral and multi-lateral relations in Southern Africa, Africa and rest of the world	Advocate and advance South African priorities and positions and those of strategic partners in bilaterals and multilateral fora	9.1A. South African priorities and positions articulated in bilateral agreements and in multilateral fora	Number of bilaterals and multilaterals where SA position adopted	Trip reports, bilateral agreements and resolutions	Total number of bilaterals and multilateral where there was a SA position	Trip reports, bilateral agreements and resolutions	National	Annually	
	Establish mechanisms for consultations with cluster managers on health issues	9.1B. % of Clusters Managers participated in international health issues	Number of cluster managers and directors attending international health conferences and meetings	Conference and Meeting reports, approved submissions	Total number of meetings and conferences attended	IHL report	National	Annually	
	Strengthen human resource development		9.1C. Proportion of RSA medical doctors trained through the Cuban programme by 2004	Number of students who qualified as medical doctors	Report on Cuban programme	Total number of students admitted to be trained under Cuban programme	Provincial reports	Provincial	Ongoing
			9.1D Proportion of health personnel trained through international cooperation	Number by types of health personnel trained through international cooperation	IHL and HRD	Total number by type of staff that can be trained through international cooperation	IHL and HRD	National	Annually
		9.1E. Exchange programmes in priority areas	Number of participants and types of exchange programmes	IHL and HRD	Total number and type of exchange programmes possible	IHL and HRD	National	Annually	

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<b>10. ENVIRONMENTAL AND OCCUPATIONAL HEALTH</b>								
Reduce environmental health related risks	Reduce environmental mortality and morbidity	10A. Incidence of injury by accidents in the home	Number of reported accidents in the home	Health Facilities, Environmental Health Programme Survey	Total population	StatSA	National	Annually 5 yearly Monthly
		10B. Percentage of reported poisonings in children under 5 years of age per year	Number of reported poisonings in children under 5 years of age	Survey, Health facilities	Total population of children aged < 5years	StatsSA	National	Annually 5 yearly

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		10C. Proportion of water samples that meet quality standards	Number of water samples complying	DWAF and Environmental Health surveys	Total number of water samples taken	DWAF survey	National, Provincial	Quarterly
Improve the health of workforce and of ex-miners	Reduce occupation related morbidity, mortality and disability	10D. Fatal work-related injuries/10 000 full-time employees/year - all industries	Fatal work-related injuries/10 000 full-time employees/year - all industries	NCOH, Department of Labour StatsSA	Not Applicable	StatsSA	National	Annually
		10E. Number of occupational respiratory diseases (by sub-type) reported to SORDSA	Number of occupational respiratory diseases (by sub-type) reported to SORDSA	NCOH, Department of Labour, Occupational surveillance, SADHS, DWAF and Environmental Health surveys	Not Applicable	StatsSA DWAF survey	National, Provincial	Annually, 5 yearly Quarterly
		10F. Number of cases of occupational diseases (by sub-type) reported to the Chief Inspector	Number of cases of occupational diseases (by sub-type) reported to the Chief Inspector	NCOH, Department of Labour, Occupational surveillance, NCOH,	Not Applicable	StatsSA	National	Annually, 5 yearly
		10G. Percentage of ex-miners certified with occupational cardio-respiratory diseases	Number of ex-miners certified by the certification committee	Medical Unit : Medical Bureau for Occupational Diseases (MBOD) NCOH, Department of Labour, Occupational surveillance, SADHS	Number of ex-miners who apply for benefit medical examinations in provinces	Receiving Unit (MBOD)	National (MBOD)	Monthly, Quarterly and Annually

### LIST OF ACRONYMS

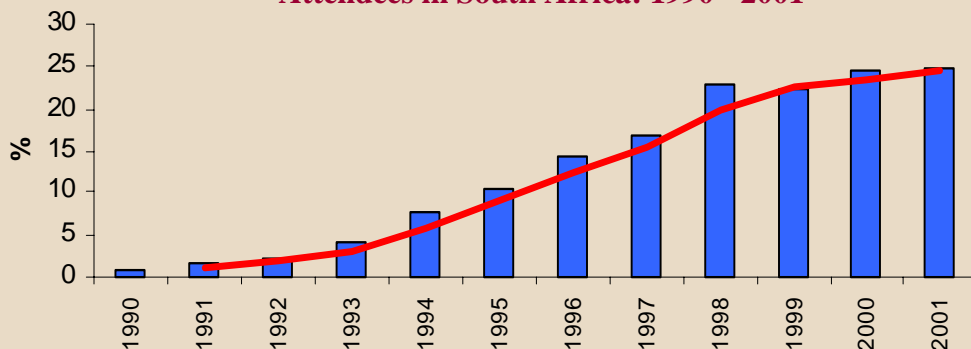
## Health Goals, Objectives and Indicators

AEFI:	Adverse Events Following Immunisation
AFP:	Acute Flaccid Paralysis
AIDS:	Acquired Immunodeficiency Syndrome
ANC :	Antenatal Care
BCG:	Bacille Calmette-Guerin
BDSS:	Birth Defects Surveillance System
BFHI:	Baby-Friendly Hospital Initiative
BMI:	Body Mass Index
CHC:	community Health Centre
CEO:	Chief Executive Officer
DHIS:	District Health Information Software
DMFT:	Decay, Missing or Filled Teeth
DOA:	Department of Agriculture
DOH:	Department of Health
DPT:	Diphtheria-pertussis-tetanus vaccine
DWAF:	Department of Water Affairs and Forestry
EDS:	National Essential Data Set
EMS:	Emergency Medical Services
ENHR:	Essential National Health Research
EPI:	Expanded Programme on Immunisation
EHTP:	Essential Health Technology Packages
GIS:	Geographic Information System
HGOI:	Health Goals, Objectives and Indicators
HH:	Households
HIV:	Human Immunodeficiency Virus
HPS:	Health Promotion Schools
HSRRCE:	Health Systems Research, Research Co-ordination and Epidemiology
IEC:	Information, Education and Communication
IHPF:	Integrated Health Planning Framework
IMCI:	Integrated Management of Childhood Illness
IMR:	Infant Mortality Rate
MBOD:	Medical Bureau for Occupational Diseases
M&E:	Monitoring and Evaluation
MH&SA:	Mental Health and Substance Abuse
MIS:	Management Information Systems
MUD:	Male Urethral Discharge
NCOH:	National Centre for Occupational Health
NGOs:	Non-government Organisations
NHA:	National Health Accounts
NHC/MIS	National Health Care Management Information System

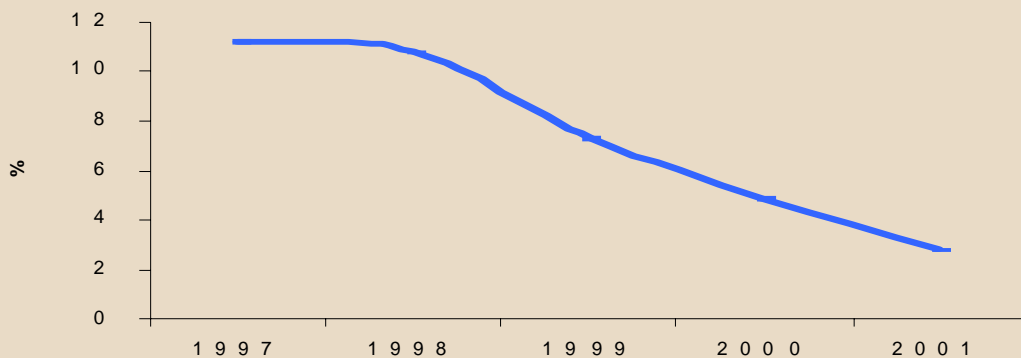
## Health Goals, Objectives and Indicators

NHIS:	National Health Information Systems
NHIS/SA:	National Health Information Systems Committee of South Africa:
NNT:	Neonatal tetanus
OHS:	October Household Survey
PHC:	Primary Health Care
PPIP:	Perinatal Problem Identification Programme
PPP:	Public-Private Partnerships
PUD:	Penile Urethral Discharge
RDP:	Reconstruction and Development Programme
RSA:	Republic of South Africa
SACENDU:	South African Community Epidemiology Network on Drug Abuse
SADHS:	South Africa Demographic and Health Survey
SAPS:	South African Police Services
SHI:	Social Health Insurance
SORDSA:	Surveillance of Work-Related and Occupational Respiratory Association of South Africa
SPS:	Strategic Position Statements
StatsSA:	Statistics South Africa
STIs:	Sexually Transmitted Infections
TB:	Tuberculosis
TOP:	Termination of Pregnancy
UPFS:	Uniform Patient Billing System
WHO:	World Health Organisation

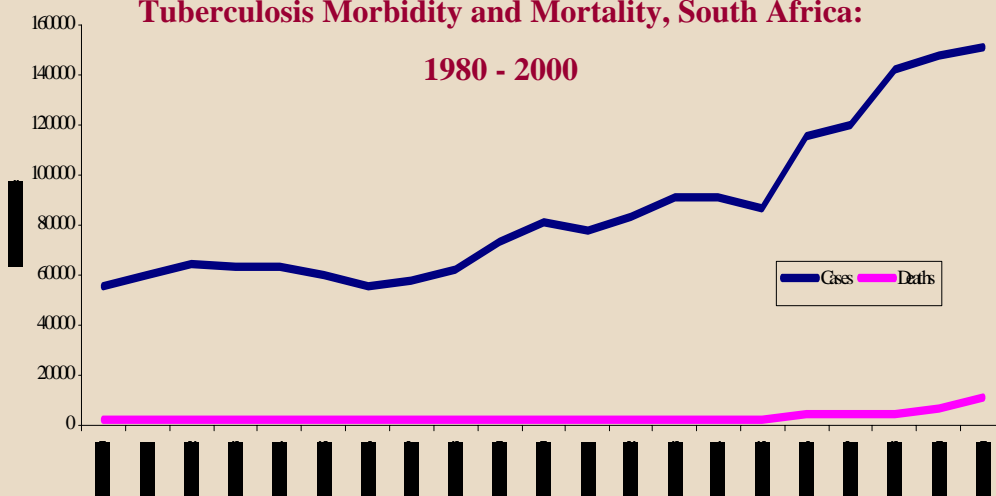
### National HIV Prevalence Trends Among Antenatal Clinic Attendees in South Africa: 1990 - 2001



### National Syphilis Prevalence Among Antenatal Clinic Attendees in South Africa: 1997-2001



### Tuberculosis Morbidity and Mortality, South Africa: 1980 - 2000



### Annual Malaria Cases & Deaths: 1971 - 2001

