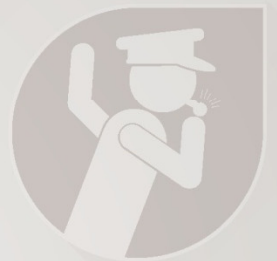




Western Cape
Government



Central Karoo District Municipality

2019



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Central Karoo District: At a Glance

Demographics

Population Estimates, 2019; Actual households, 2016



Population

74 757



Households

21 980

Education

2018



Matric Pass Rate	78.5%
Retention Rate	55.8%
Learner-Teacher Ratio	30.3

Poverty

2018



Gini Coefficient	0.585
Human Development Index	0.675

Health

2018/19



Primary Health Care Facilities

18

Immunisation Rate

71.3%

Maternal Mortality Ratio (per 100 000 live births)

188

Teenage Pregnancies - Delivery rate to women U/18

17.7

Safety and Security

Actual number of reported cases in 2018/19



Residential Burglaries

522

DUI

187

Drug-related Crimes

858

Murder

19

Sexual Offences

103

Access to Basic Service Delivery

Percentage of households with access to basic services, 2016



Water

95.1%

Refuse Removal

90.8%



Electricity

97.1%



Sanitation

95.4%



Housing

97.8%



Road Safety

2018

Fatal Crashes

Road User Fatalities 89

Labour

2017

Unemployment Rate (narrow definition)

22.9%



Socio-economic Risks

Risk 1	Low economic growth potential
Risk 2	High learner teacher ratio
Risk 3	Impact of the drought

Largest 3 Sectors

Contribution to GDP, 2017

General Government

20.8%

Agriculture, forestry and fishing

16.1%

Transport, storage and communication

14.8%

1

DEMOGRAPHICS

Accurate and reliable population data lies at the heart of the municipal budget and planning process as it is the primary variable informing the demand for basic services and the subsequent allocation of resources. Changes in population figures can mostly be attributed to three broad demographic processes namely, fertility, mortality and migration rates.

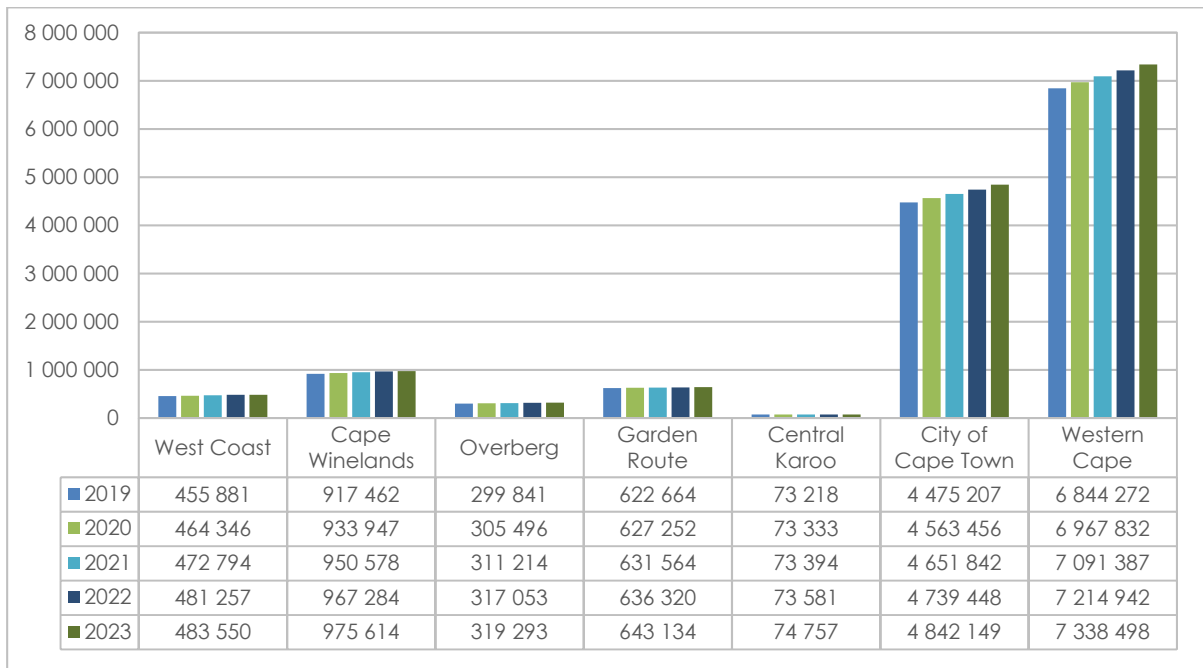
This chapter provides a concise yet meaningful overview of key demographic variables that will assist with municipal planning and budgeting, namely estimates of population size, a sex ratio analysis, the distribution of population projections within age cohorts, dependency ratios, the number of households and household size compositions as well an overview of population density per local municipal area.

The demographic data provided in this Chapter was sourced from the Department of Social Development who used Stats SA's 2018 Mid-Year Population Estimates (2002 – 2030) to project population growth for the period 2019 to 2025.

Data source: Department of Social Development, 2019



POPULATION



With a population of 73 218 in 2019, the Central Karoo District (CKD) is by far the least populated municipal district in the Western Cape. This total is expected to grow to 74 757 by 2023, equating to an average annual growth rate of 0.5 per cent. The estimated population growth rate of the CKD is the lowest amongst the various districts of the Western Cape. The Western Cape average annual growth rate is 1.8 per cent across the same period.

All Districts: Sex Ratio (SR), 2019 – 2023					
Municipality	2019	2020	2021	2022	2023
City of Cape Town	97.3	97.5	97.6	97.8	97.9
West Coast	98.2	98.3	98.4	98.4	98.4
Cape Winelands	97.7	97.6	97.6	97.5	97.7
Overberg	101.7	101.5	101.4	101.3	101.8
Garden Route	94.4	94.1	94.0	93.9	92.9
Central Karoo	92.4	92.1	91.7	91.6	91.4
Western Cape	97.3	97.4	97.4	97.5	97.5

The overall sex ratio (SR) depicts the number of males per 100 females in the population (Moultrie et al., 2013: 9). As per above table, there are in general considerably less males than females in the CKD as well as the Western Cape in general. The SR for the CKD further decrease towards 2023 which can be attributed to a wide range of factors such as an increase in male mortality rates and the potential outflow of working males. The variance in life expectancy between males and females can in turn also be attributed to a variety of social and behavioural dynamics (Stats SA, 2018: 23). Overberg is the only district with more males per 100 females.

Central Karoo District: Age Cohorts, 2019 – 2025				
Year	Children 0 – 14 Years	Working Age 16 – 65 Years	Aged 65+	Dependency Ratio
2019	23 045	44 403	5 769	64.9
2022	22 399	44 988	6 194	63.6
2025	23 230	45 700	6 626	65.3
Growth	0.1%	0.5%	2.3%	-

The above table depicts the CKD's population composition per age cohorts. These groupings are also expressed as a dependency ratio which in turn indicates who are part of the workforce (Age 15 - 64) and those, who are depending on them (children and senior citizens). A higher dependency ratio implies greater pressure on social systems and the delivery of basic services.

Between 2019 and 2025, the largest population growth was recorded in the aged cohort which grew at an annual average rate of 2.3 per cent. This increase, coupled with limited population growth in the child and working age cohorts increase the dependency ratio towards 2025.

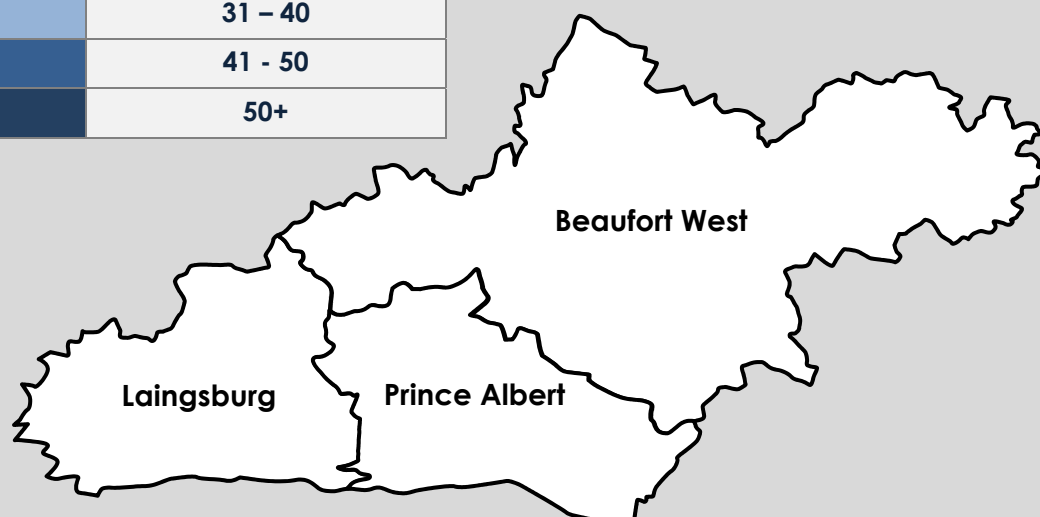
HOUSEHOLDS SIZING

Central Karoo District: Household size, 2019 – 2023				
2019	2020	2021	2022	2023
3.8	3.8	3.8	3.7	3.8

Household size refers to the number of people per household. It is worth noting that although the number of households in the CKD area are increasing, the actual size of households is ever so slightly trending downwards. This potentially implies an inflow of young professionals (either single, as couples or with small family groupings) into the area in search of job opportunities. Other contributing factors include, but are not limited to, lower fertility rates, occurrences of divorce, ageing population, etc.

POPULATION DENSITY

Colour Code	Population per km ²
	0 – 10
	11 – 20
	21 – 30
	31 – 40
	41 – 50
	50+



Amidst rapid urbanisation across the Western Cape, population density figures will aid public sector decision makers to mitigate environmental, individual health and service delivery risks.

Given its large geographical size and rural nature, the population density of the Central Karoo District (CKD) was only 2 persons per square kilometre in 2019. In order of highest to lowest, the various local municipal areas in the CKD compare as follows:

- Prince Albert 2 people/km²
- Beaufort West 2 people/km²
- Laingsburg 1 people/km²

2

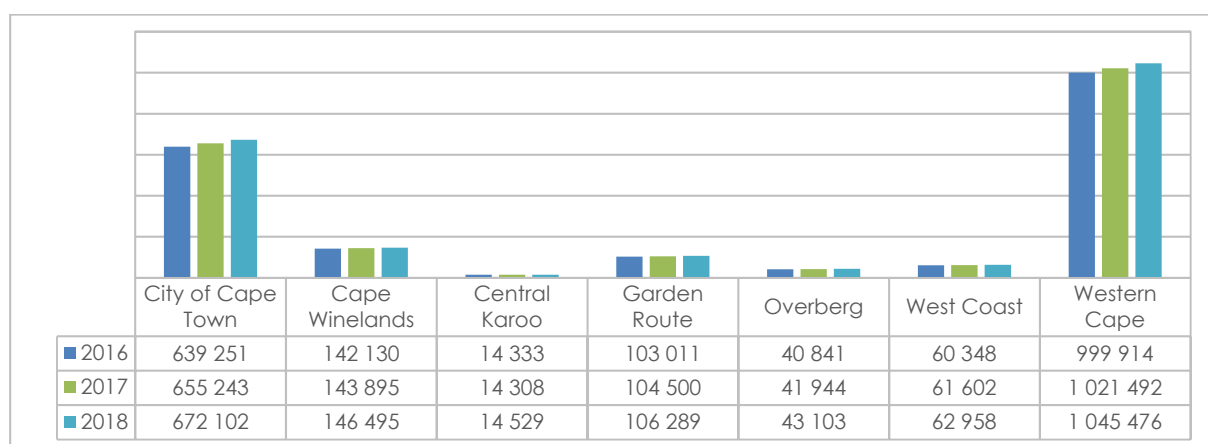
EDUCATION

The quality of education is closely correlated with economic development and social cohesion. Dramatically improving our education outcomes is an imperative not just to achieve the economic growth rates that South Africa needs to end poverty and increase inclusion, but also to tackle social ills such as crime and substance abuse.

Data source: Western Cape Education Department, 2019



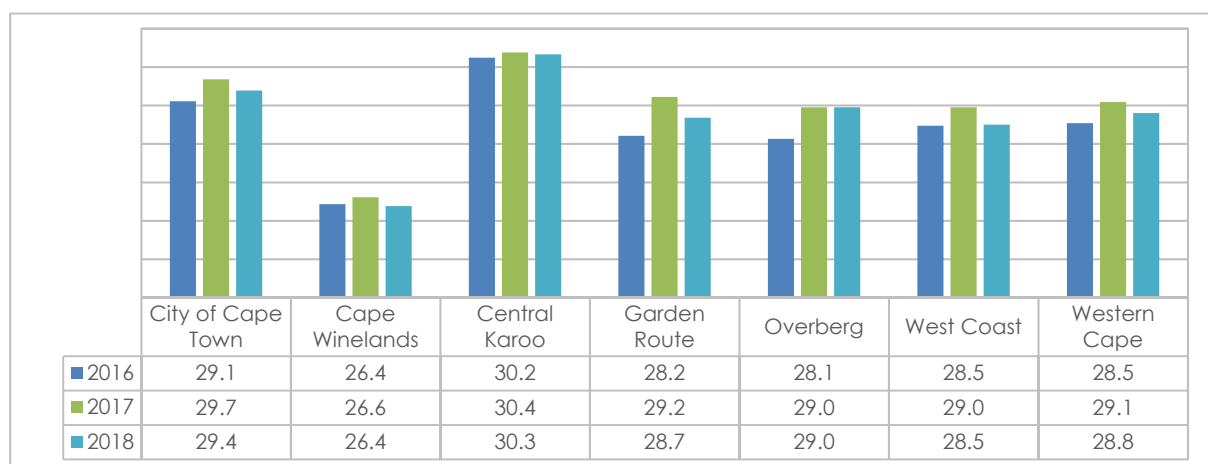
LEARNER ENROLMENT



The average annual growth in learner enrolment for the Western Cape across the period 2016 to 2018 is expected to be 2.3 per cent. The highest growth in learners is expected to occur in the Overberg District (2.7 per cent) whilst the lowest growth is estimated to be in the CKD (0.7 per cent). Within the CKD, the majority of learners are concentrated in the Beaufort West municipal area. Beaufort West also has the highest average annual learner enrolment growth rate of 0.9 per cent in the CKD between 2016 and 2018. Laingsburg's learner enrolment increased by 0.5 per cent whilst it decreased by 0.4 per cent in Prince Albert across the same reference period.

LEARNER-TEACHER RATIO

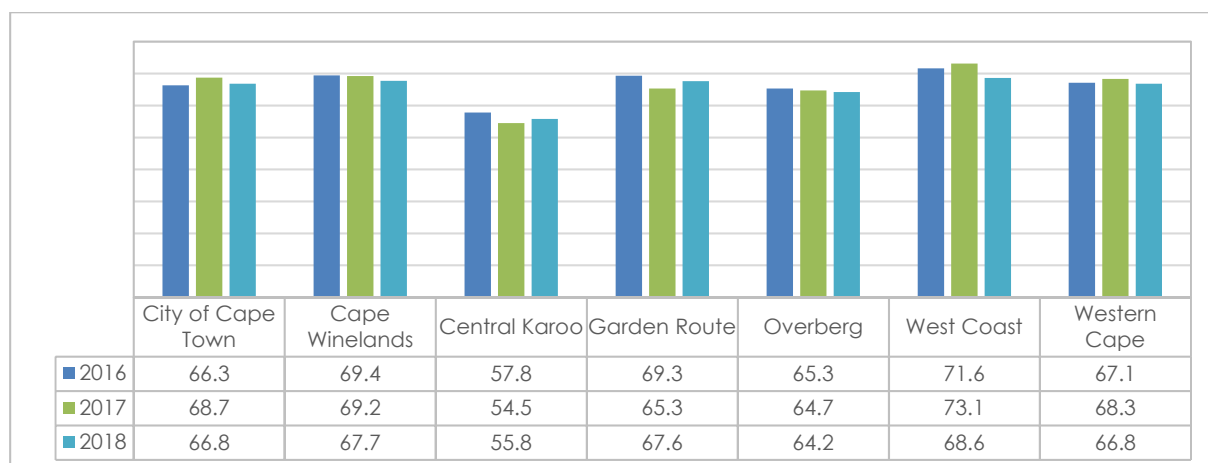
It is commonly assumed that children receive less personalised attention in larger class environments and that high learner-teacher ratios are detrimental to improved educational outcomes. Factors influencing the learner-teacher ratio is the ability of schools to employ more educators when needed and the ability to collect fees.



For 2018, the learner-teacher ratio in the CKD is at 30.3 higher than any other local municipal area in the Western Cape. The Western Cape average was 28.8 learners per teacher while the lowest ratio is observed in the Cape Winelands District (26.4).

LEARNER RETENTION

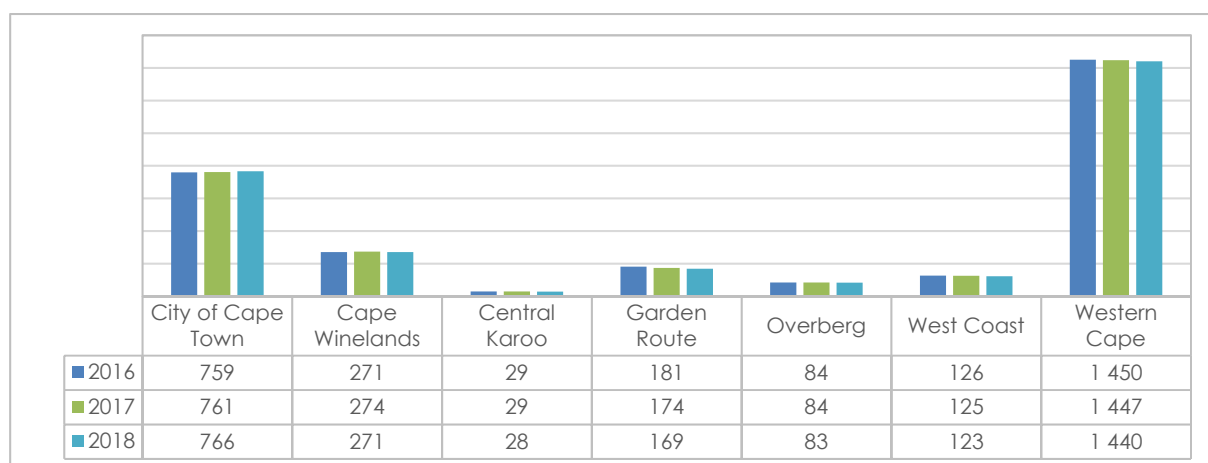
The learner retention rate refers to the number of students that start Grade 12 as a percentage of the number of students that enrolled in Grade 10 two year prior. The inverse of the learner-retention rate is commonly referred to as the drop-out rate. Learner retention rates are influenced by multiple social, economic and psychological factors.



The learner retention rate for the CKD has been regressing since 2016 and is in general lower than in any other District. The West Coast District has in recent times maintained the highest retention rate in the Province. The retention rate for the Western Cape was 66.8 per cent in 2018.

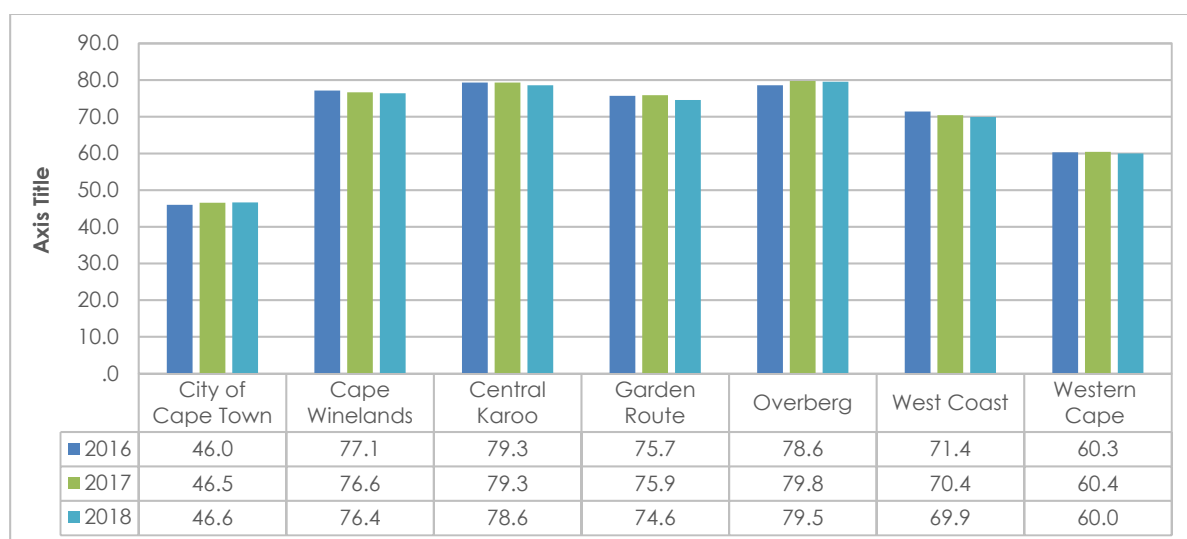
EDUCATIONAL FACILITIES

The increased availability of adequate education facilities such as schools, Further Education and Training (FET) colleges and schools equipped with libraries/media centres could positively affect academic outcomes.



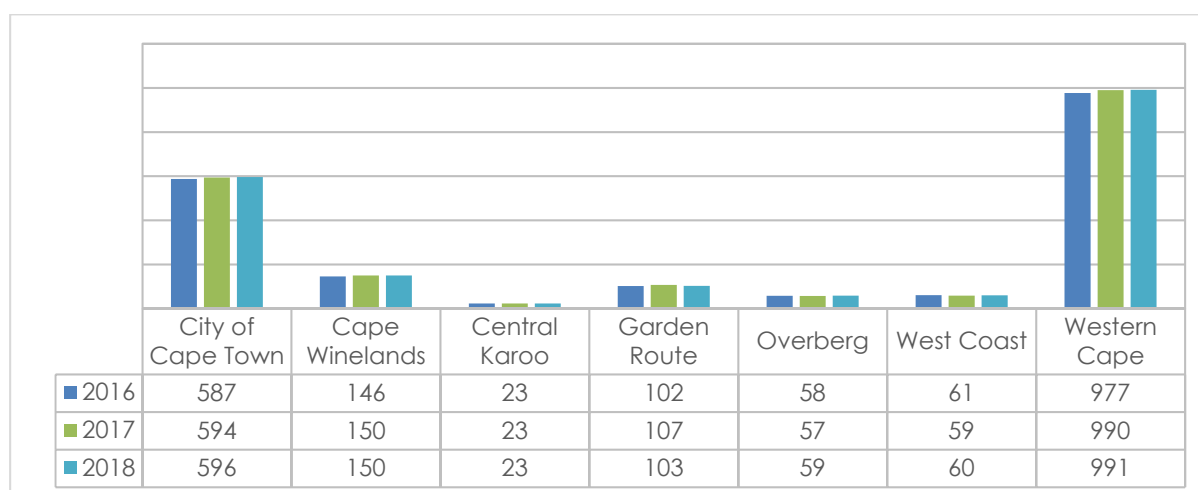
The number of schools across the CKD remain mostly unchanged in recent years, the exception being the closure of one school in the Beaufort West municipal area between 2017 and 2018. The closure of the school in Beaufort West can impact negatively on education outcomes given the gradual increase in learner enrolment.

NO-FEE SCHOOLS



The proportion of no-fee schools in the CKD municipal area decreased from 79.3 per cent in 2017 to 78.6 per cent in 2018. This decrease is expected to have a negative impact on education outcomes. The CKD does however (amidst widespread poverty) have the second highest percentage of no-fee schools in the Province in 2018. A total of 60.0 per cent of all schools in the Western Cape are no-fee schools.

SCHOOLS WITH LIBRARIES



As mentioned previously, there were 28 schools in the CKD municipal area in 2018. The majority of these schools (23) were equipped with libraries. The availability of library facilities within schools contribute towards narrowing the academic attainment gap by allowing students access to information which is in turn directly linked to improved education outcomes.

EDUCATION OUTCOMES



Education remains one of the key avenues through which the State is involved in the economy. In preparing individuals for future engagements in the broader market, policy decisions and choices in the sphere of education play a critical role in determining the extent to which future economy and poverty reduction plans can be realised. This section reflects on the matric pass rates amongst the various local municipal areas in the CKD.

Area	2016	2017	2018
City of Cape Town	85.4	81.6	80.9
Cape Winelands	84.7	82.3	80.6
Central Karoo	76.8	79.5	78.5
Garden Route	85.7	82.0	81.3
Overberg	92.6	87.6	82.2
West Coast	87.5	85.9	82.0
Western Cape	85.6	82.1	81.0

The matric pass rate for the CKD improved notably between 2016 (76.8 per cent) and 2017 (79.5 per cent) before decreasing slightly in 2018 (78.5 per cent). The 2018 pass rate in the Beaufort West municipal area (79.2 per cent) is higher than the District average and has been steadily increasing since 2016.

Laingsburg, who in 2016 achieved the highest pass rate in the District, experienced a sharp fall between 2016 (90.3 per cent) and 2017 (80.0 per cent). The pass rate in Laingsburg increased ever so slightly to 80.6 per cent in 2018.

The pass rate in the Prince Albert municipal area has been fluctuating in the last few year, increasing from 69.2 per cent in 2016 to 89.7 per cent in 2017 before dropping back to 71.2 per cent.

Decreasing pass rates does at face value not instil confidence, but should be seen within context where more students potentially pass matric within a certain region than the previous year (in terms of actual numbers), but that less passed as a percentage of the overall enrolment figure. It could also very well be the case where pass rates overall declined, but that the quality of the pass result improved i.e. more students passed with subjects such as math and science or more students passed with matriculation exemption (requirement for first-degree study at a South African university).

3

HEALTH

Health is another major factor contributing to the general quality of life in the Central Karoo District. It is therefore important to monitor the public health facilities as well as a variety of factors such as Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Syndrome (AIDS) or Tuberculosis (TB) and general topics that affect the community, like maternal health. This Socio-economic Profile provides the basic statistics concerning these issues. Since this profile focusses on the public health facilities, private facilities are not included.

Data source: Department of Health, 2019



HEALTHCARE FACILITIES

All citizens' right to access to healthcare services are directly affected by the number and spread of facilities within their geographical reach. South Africa's healthcare system is geared in such a way that people have to move from primary, with a referral system, to secondary and tertiary levels.

Area	PHC Clinics		Community Health Centres	Community Day Centres	Hospitals		Treatment Sites	
	Fixed	Non-fixed			District	Regional	ART Clinics	TB Clinics
City of Cape Town	69	37	10	46	8	2	111	128
Cape Winelands	39	33	0	6	4	2	45	94
Overberg	17	23	1	1	4	0	21	43
Garden Route	32	37	0	7	6	1	51	86
West Coast	25	37	0	1	7	0	43	75
Central Karoo District	8	10	0	1	4	0	12	22

In 2018, there were a total of 18 primary healthcare clinics (PHC) in the CKD – 8 fixed and 10 mobile facilities. Although there are no community health centres in the CKD, there was one community day centre. There are 4 district hospitals in the CKD as well as 12 antiretroviral treatment clinics/sites and 22 Tuberculosis clinics/sites. Given its small population size, the District has relatively less health facilities than the other districts.

EMERGENCY MEDICAL SERVICES



Access to emergency medical services is critical for rural citizens due to rural distances between towns and health facilities being much greater than in the urban areas. Combined with the relatively lower population per square kilometre in rural areas, ambulance coverage is greater in rural areas in order to maintain adequate coverage for rural communities.

In 2019, the CKD only had 1 ambulance for every 10 000 inhabitants. It is worth noting that this number only refers to Provincial ambulances and excludes all private service providers.

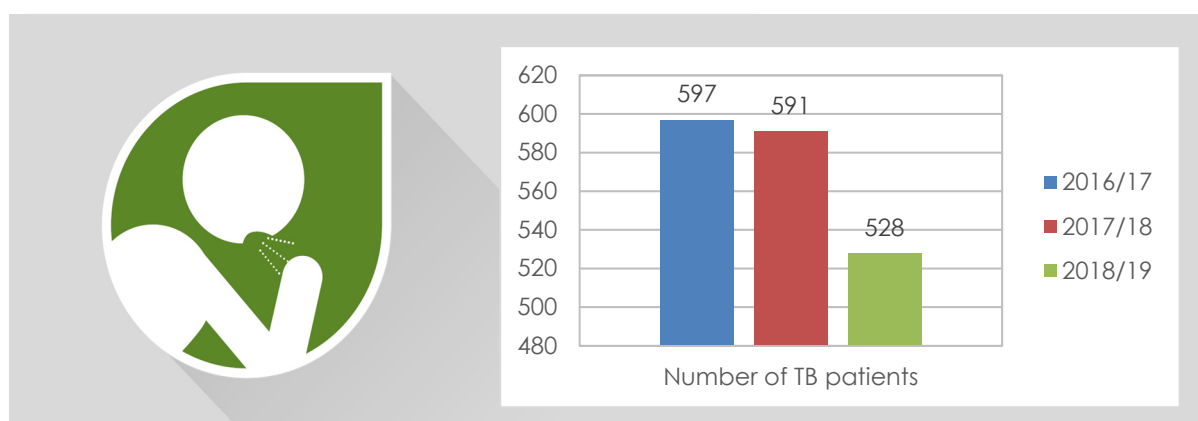
HIV/AIDS

HIV/AIDS is among the top ten causes of death in the Western Cape Province, accounting for 8.0 per cent of deaths in 2016. HIV/AIDS management is crucial given its implications for the labour force and the demand for healthcare services.

Area	ART clients that remain with treatment month end		Number of new ART patients	
	2017/18	2018/19	2017/18	2018/19
City of Cape Town	180 446	195 203	32 466	29 733
West Coast	10 202	11 255	2 125	2 118
Cape Winelands	29 019	30 724	4 602	3 851
Overberg	11 616	12 653	2 058	1 705
Garden Route	21 577	23 317	3 478	3 009
Central Karoo	1 884	2 022	292	207

The number of clients (patients) that remain committed to their antiretroviral treatment (ART) plan in the CKD municipal area increased by 7.3 per cent from 1 884 patients in 2017/18 to 2 022 in 2018/19. Of concern is the notable decrease in the number of new clients starting ART treatment – the number of new patients in the CKD municipal area decreased by 29.1 per cent from 292 in 2017/18 to 207 in 2018/19. The number of new ART patients in fact decrease across all districts. This could be an indication that the HIV infections are decreasing or an indication that less people are being tested and receiving access to HIV treatment.

TUBERCULOSIS (TB)



Tuberculosis accounted for 7.6 per cent of the premature deaths in the Province in 2016. The number of TB patients within the CKD municipal area has gradually been decreasing from 597 in 2016/17 to 591 in 2017/18 and 528 in 2018/19. The 528 registered TB patients received treatment at 22 TB clinics/treatment sites. Above figures refer to registered patients and should not be interpreted as a general decline in TB infections.

CHILD HEALTH

The United Nations Sustainable Development Goals aims by 2030 to end preventable deaths of new-borns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1 000 live births and under-5 mortalities to at least as low as 25 per 1 000 live births (Source: UN SDG's).

Area	Immunisation Rate		Malnutrition		Neonatal Mortality Rate		Low birth weight	
	2017/18	2018/19	2017/18	2018/19	2017/18	2018/19	2017/18	2018/19
City of Cape Town	72.6	71.6	1.2	1.1	9.1	9.6	13.9	13.9
West Coast	54.3	59.1	1.7	2.1	9.2	6.4	13.4	13.8
Cape Winelands	58.9	61.8	4.7	4.4	9.5	9.3	16.0	15.8
Overberg	75.0	79.5	1.4	1.5	4.2	7.2	12.3	13.0
Garden Route	61.1	65.7	2.7	1.5	11.4	9.0	17.8	16.4
Central Karoo	73.0	71.3	5.6	3.8	19.9	12.1	21.9	23.4

The **immunisation coverage rate** for children under the age of one in the CKD municipal area increased slightly from 73.0 per cent in 2017/18 to 71.3 per cent in 2018/19. This is the second highest immunisation rate amongst all districts in the Western Cape (excluding the City of Cape Town).

In 2018/19, there were 3.8 **malnourished children** under five years of age (severe acute malnutrition) per 100 000 people in the CKD municipal area. This is a notable improvement from 5.6 the previous year. Where CKD had the highest malnutrition rate in 2017/18 amongst all Districts, the Cape Winelands District is in 2018/19 the worse performing.

The **neonatal mortality rate** (NMR) (deaths per 1 000 live births before 28 days of life) for the CKD municipal area improved from 19.9 deaths in 2017/18 to 12.1 in 2018/19. A fall in the NMR may indicate improvement in new-born health outcomes, or it may potentially reflect reporting constraints. The CKD still has the highest NMR amongst the other districts.

A total of 23.4 per cent of all babies born in facility in the CKD municipal area in 2018/19 **weighed less than 2 500 grams**. This is a regression from the 21.9 per cent recorded in 2017/18 and substantially higher than in any other district in the Western Cape.

DEFINITIONS

Immunisation: The immunisation rate is calculated as the number of children immunised as a percentage of the total number of children less than one year of age. Immunisation protects both adults and children against preventable infectious diseases. Low immunisation rates speak to the need for parents to understand the critical importance of immunisation, as well as the need to encourage parents to have their young children immunised.

Malnutrition: Expressed as the number of malnourished children under five years per 100 000 people. Malnutrition (either under- or over-nutrition) refers to the condition whereby an individual does not receive adequate amounts or receives excessive amounts of nutrients.

Neonatal mortality rate: Measured as the number of neonates dying before reaching 28 days of age, per 1 000 live births in a given year. The first 28 days of life (neonatal period) represent the most vulnerable time for a child's survival. The Province's target for 2019 is 6.0 per 1 000 live births.

Low birth weight: Percentage of all babies born in facility that weighed less than 2 500 g. Low birth weight is associated with a range of both short- and long-term consequences.

MATERNAL HEALTH

Area	Maternal Mortality Rate		Delivery Rate to Women under 20 years		Termination of Pregnancy Rate	
	2017/18	2018/19	2017/18	2018/19	2017/18	2018/19
City of Cape Town	58	66	9.7	9.6	1.1	1.2
West Coast	25	71	16.6	16.2	0.4	0.4
Cape Winelands	51	91	13.4	14.2	0.6	0.7
Overberg	28	51	13.8	14.7	0.5	0.5
Garden Route	81	55	15.0	15.9	0.6	0.6
Central Karoo	97	188	17.4	17.7	0.0	0.0

The **maternal mortality rate** (MMR) has been increasing across the Western Cape, almost doubling within the CKD from 97 deaths per 100 000 live births in 2017/18 to 188 in 2018/19 (93.8 per cent). The highest MMR increase was however observed in the West Coast District (184.0 per cent).

The **delivery rate to women under 19 years of age** in the CKD municipal area increased slightly from 17.4 in 2017/18 to 17.7 in 2018/19. This is the highest teenage pregnancy rate in the Western Cape.

The **termination of pregnancy rate** in the broader CKD remains zero. A low termination rate is strongly associated with a decrease in unwanted pregnancies which in turn attests of improved family planning and access to health care services (for example, access to contraception, sexual education programmes, counselling etc.).

DEFINITIONS

Maternal mortality rate: *Maternal deaths per 100 000 live births in health facilities. Maternal death is death occurring during pregnancy, childbirth and the puerperium of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of pregnancy and irrespective of the cause of death (obstetric and non-obstetric).*

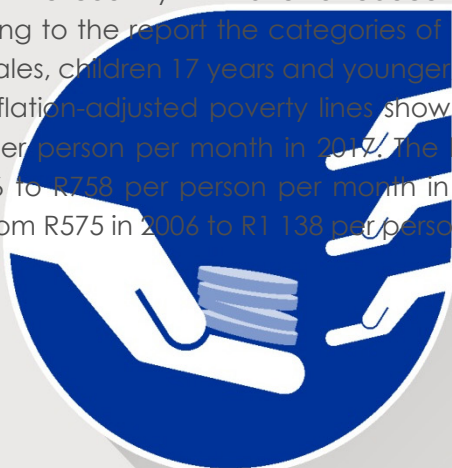
Births to teenage mothers: *Deliveries to women under the age of 20 years as proportion of total deliveries in health facilities. Teenage pregnancy is almost always unplanned; as a result, when young parents are placed in a position to care for their children, life can become particularly tough, especially if they do not have family or social support.*

Termination of pregnancy: *The percentage of terminations as a proportion of the female population aged 15 to 44 years. Government hospitals, designated private doctors and gynaecologists, and non-profit providers offer safe and legal termination of pregnancy. To have a free abortion, the request must be made at a primary healthcare clinic, where the pregnancy will be confirmed, counselling provided, an appointment made, and a referral letter be given to a facility where the procedure can be performed.*

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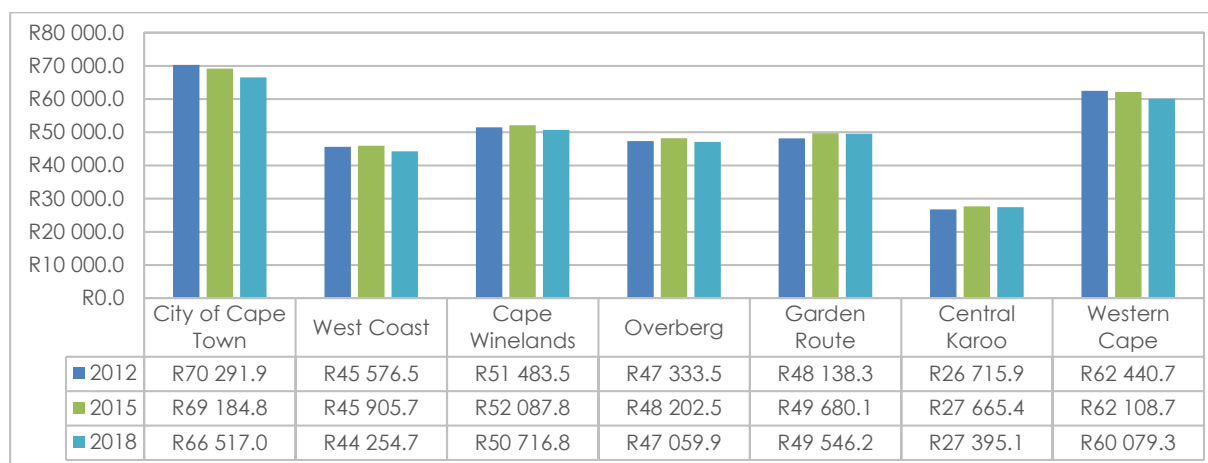
POVERTY

This section reflects on living conditions and economic circumstances of households in the CKD based on most recent data including Statistics South Africa's Non-Financial Census of Municipalities 2016 and Quantec. Economic theory suggests that when an economy prospers its households are expected to enjoy a good standard of living. On the contrary, a declining economy tends to lower the standards of living of people. This section uses indicators in terms of GDP per capita, income inequality, human development, as well as indigent households and free basic services to show the current reality of households residing in the CKD municipal area. One key feature emerging from the research evidence is that South Africa has made progress in reducing poverty since 1993, with real earnings at the lower end income groups increasing. But, as the diagnostic overview explains, "per capita income growth is only one indicator of a region's wellbeing. It tells us how much income there is to share, but does not communicate the distribution of that income." In South Africa, as Murray Leibbrandt from Saldru points out, income shares are stacked towards the top 10 per cent, with the lowest 5 per cent of the population getting hardly any of the income. This is a major sign of the growing inequality in our country. Despite this widening gap between the rich and the poor, social grants like the child support grant have undeniably had a significant impact on the lower and middle income groups. The deteriorating financial health of households and individuals under the weight of economic pressures, specifically between 2011 and 2015, has resulted in an increase in the poverty levels, according to the Poverty Trends in South Africa report released by Statistics South Africa in 2017. The report cites rising unemployment levels, low commodity prices, higher consumer prices, lower investment levels, household dependency on credit, and policy uncertainty as the key contributors to the economic decline in recent times. These recent findings indicate that the country will have to reduce poverty at a faster rate than previously planned. According to the report the categories of people vulnerable to poverty remained to be African females, children 17 years and younger, people from rural areas, and those with no education. Inflation-adjusted poverty lines show that food poverty increased from R219 in 2006 to R531 per person per month in 2017. The lower-bound poverty line has increased from R370 in 2006 to R758 per person per month in 2017 while the upper-bound poverty line has increased from R575 in 2006 to R1 138 per person per month in 2017.



GDPR PER CAPITA

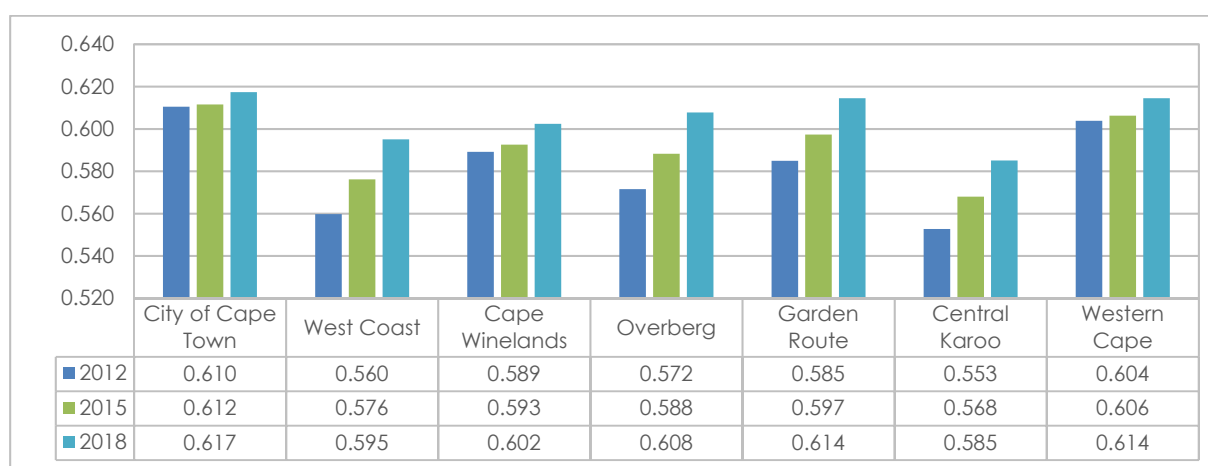
An increase in real GDPR per capita, i.e. GDPR per person, is experienced only if the real economic growth rate exceeds the population growth rate. Even though real GDP per capita reflects changes in the overall well-being of the population, not everyone within an economy will earn the same amount of money as estimated by the real GDPR per capita indicator.



Real GDPR per capita (constant prices) for the CKD was at R27 395 in 2018 significantly lower than the Western Cape average of R60 079. Within the CKD, it was however not Beaufort West that maintained the highest GDPR per capita amongst the various local municipal areas, but Laingsburg. In 2018, Laingsburg had GDPR per capita of R32 474, compare to R27 434 in Beaufort West and R24 110 in Prince Albert.

INCOME INEQUALITY

The National Development Plan (NDP) has set a target of reducing income inequality in South Africa from a Gini coefficient of 0.7 in 2010 to 0.6 by 2030.



Despite the Gini coefficient of the CKD (0.585) being notably lower than that of the Western Cape (0.614) in 2018, it appears to be worsening at a faster rate. This being said, income inequality is lower in the CKD than in any other district. Within the CKD, income inequality is highest in Prince Albert (0.577) and lowest in Laingsburg (0.553). The Gini coefficient of the Beaufort West municipal area is 0.573 which is already within the NDP target of 0.6.

HUMAN DEVELOPMENT

Introduced in 1990 as part of a United Nations Development Program (UNDP) initiative, the Human Development Index (HDI) serves as a composite indicator of social and economic development and overall well-being amongst countries of the world. Reflecting education levels, health, and income, the HDI measures of peoples' ability to live a long and healthy life, to communicate, participate in the community and to have sufficient means to be able to afford a decent living. The HDI is represented by a number between 0 and 1, where 1 indicates a high level of human development and 0 represents no human development.



An overall improvement in human development is observed across the entire Western Cape with HDI levels increasing in all districts between 2012, 2015 and 2018. In 2018, the HDI score for the CKD was at 0.675 notably below that of the overall Western Cape at 0.730. HDI for the City of Cape Town was 0.744 while the highest score outside of the City was attributed to the Garden Route District (0.713).

5

BASIC SERVICE DELIVERY

The Constitution of the Republic of South Africa states that every citizen has the right to access to adequate housing and that the State must take reasonable legislative and other measures within its available resources to achieve the progressive realisation of this right. Access to housing also includes access to services such as potable water, basic sanitation, safe energy sources and refuse removal services, to ensure that households enjoy a decent standard of living.

This section uses Statistics South Africa's Community Survey 2016, Statistics South Africa's Non-Financial Census of Municipalities (2015 to 2018) as well as information by Quantec Research to reflect on the most recent household information and services trends.



ACCESS TO BASIC SERVICES

Since no new household survey information is available, this section highlights housing and household services access levels from the most recent available information from Statistics South Africa's Community Survey 2016. The next household survey which includes municipal level access to household services will be the Census in 2021.

Community Survey 2016	Central Karoo District	Western Cape
Total number of households	21 980	1 933 876
Formal main dwelling	21 498 97.8%	1 593 891 82.4%
Water (piped inside dwelling/within 200 m)	20 893 95.1%	1 914 055 99.0%
Electricity (primary source of lighting)	21 345 97.1%	1 829 816 94.6%
Sanitation (flush/chemical toilet)	20 979 95.4%	1 866 531 96.5%
Refuse removal (at least weekly)	19 964 90.8%	1 679 520 86.8%

In 2016, there were a total of 21 980 households within the CKD municipal area of which 97.8 per cent had access to housing in the form of a formal dwelling. Households across the CKD enjoyed high access levels to electricity and refuse removal at a rate above the Western Cape average. Sanitation access levels are approximately on par with that of the Western Cape as a whole. Water access levels are however relatively low in comparison to the Western Cape average and are expected to become even more pronounced as a result of the impact of the drought.

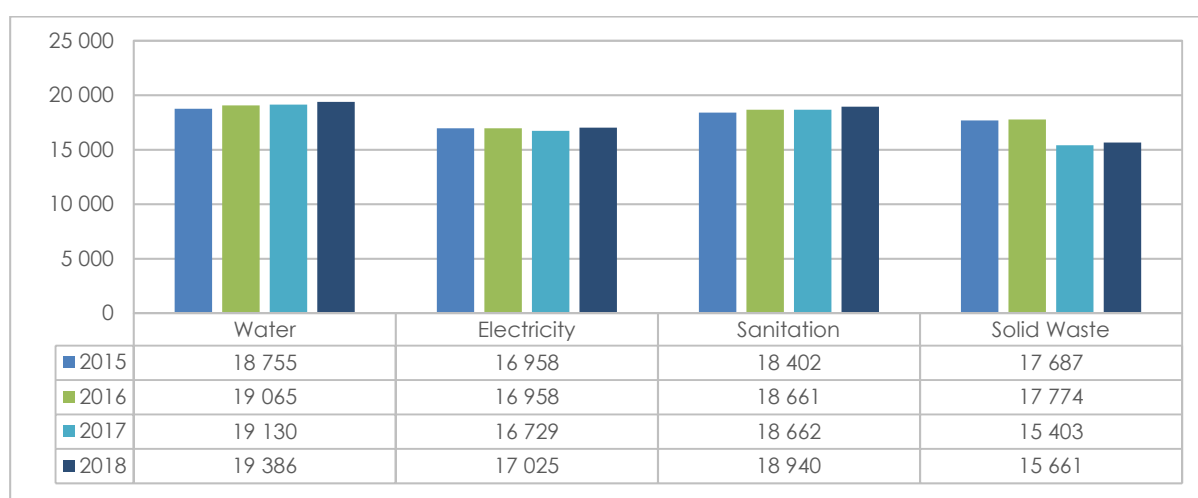
Dwelling Type	Central Karoo District	%	Western Cape	%
House or brick structure on a separate stand or yard	16 516	86.1	1 162 550	62.8
Traditional dwelling/hut/structure made of traditional materials	81	0.4	8 705	0.5
Flat in a block of flats	151	0.8	146 382	7.9
Town/cluster/semi-detached house (simplex, duplex or triplex)	1 501	7.8	150 400	8.1
House/flat/room, in backyard	368	1.9	26 929	1.5
Informal dwelling/shack	342	1.8	321 611	17.4
Room/flatlet not in backyard but on a shared property	81	0.4	15 679	0.8
Other/unspecified/NA	139	0.7	17 507	0.9
TOTAL	19 179	100.0	1 849 766	100.0

Access to decent formal housing is regarded as a basic human right and an important indicator of the level of human development within an economy. Above table present a more recent picture of the different types of dwellings for households living within the CKD municipal area in 2018 (Quantec Research, 2018). In the CKD as a whole, 86.1 per cent of households reside in a house or brick structure on a separate stand or yard. A total of 342 (1.8 per cent) households still reside in informal dwellings or shacks within respectively the broader CKD.

CONSUMER UNITS

A key element to the sustainable management of services is accurate and reliable information on the demand for services, including free basic services, to enable informed projections on future demand. This section reflects on services growth based on information from Statistics South Africa's Non-Financial Survey of Municipalities. The unit of measure is a consumer/billing unit which is not comparable to household level information. Services provided by municipalities are done per 'plot' or consumer/billing unit, however, since households are the unit of measurement more often used in demographic surveys, an understanding of household dynamics remains important.

The figure below illustrates the access to basic services (measured in terms of the number of consumer units that has access) in the CKD between 2015 and 2018 as indicated through Statistics South Africa's Non-Financial Census of Municipalities¹.



In 2018, water services represented the largest number of consumer units at 19 386. This was followed closely by sanitation at 18 940. Electricity and solid waste removal had 17 025 and 15 661 consumer units respectively. The relatively lower number of consumer units for electricity and solid waste can be attributed to the fact that certain areas receiving these services fall outside of the jurisdiction of the various local municipalities. The number of consumer units for water and sanitation services increased year on year since 2015 while solid waste consumer units decreased across the same period. In turn, electricity consumer units remain unchanged between 2015 and 2016, decreased ever so slightly in 2017 while increasing to new highs in 2018.

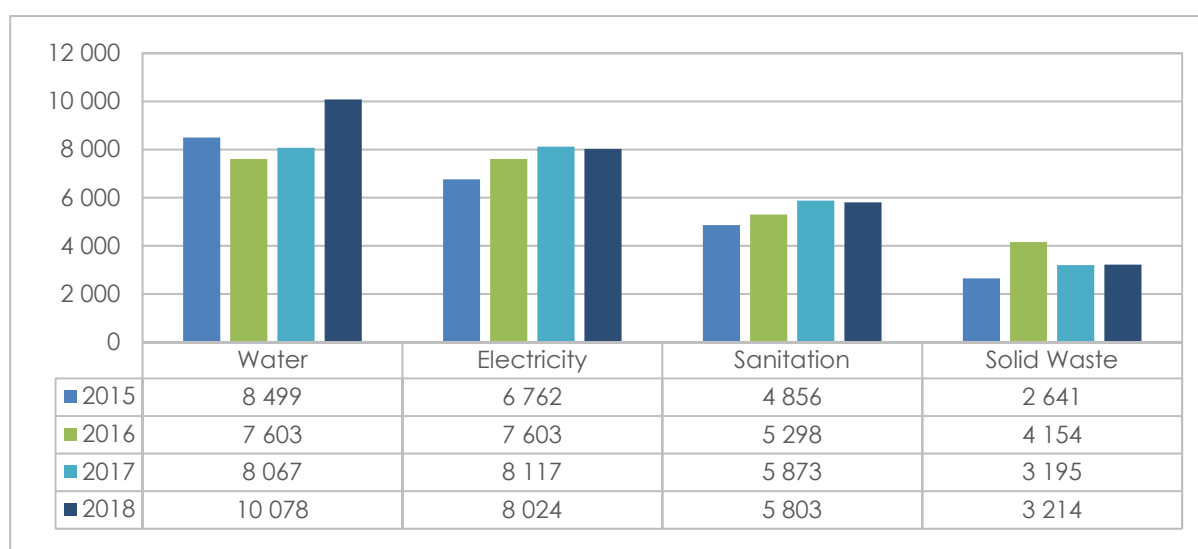
¹ Consumer/billing units are used as the unit of measurement. An entity to which the service is (or would be) delivered, and which receives one bill if the service is billed, alternatively known as a delivery point. (This concept is often referred to as a household by municipalities, but this is not strictly correct, as households and consumer units do not coincide one to one, particularly in blocks of flats, on stands where there are multiple households in the same dwelling, or in additional dwellings, such as garden flats, backyard rooms, etc., and in the case of public taps.)

FREE BASIC SERVICES

As per the Constitution, it is the responsibility of the local sphere of government to provide services that satisfy the basic needs of its citizens. The Municipal Systems Act in turn defines a basic municipal services as those necessary to ensure an acceptable and reasonable quality of life and, if not provided, would endanger public health or safety or the environment. Such basic services include, but are not limited to the provision of water, sewage collection and disposal, refuse removal, municipal health services, street lighting, parks and recreation facilities etc.

Government however provides a basket of free basic services (water, sanitation, refuse removal and electricity) which aims to improve the lives of the poorest and most vulnerable communities. In order to qualify for the basket of free basic services, a household must be classified as an indigent household as per criteria determined by individual local municipalities. In general, a household is classified as indigent when the occupants in said households earn a combined income of less than a certain amount (poverty threshold) defined by the indigent policy of a municipality at that point in time. Municipalities review their indigent policies (and as such the determined amount) on an annual basis to bring the defined amount in line with reigning socio-economic conditions. According to Statistics South Africa, in 2017 most municipalities classified an indigent household as a family earning a combined income of less than R3 200 per month.

In 2018, the CKD municipal area had had a total of 8 119 indigent households, 537 more than the previous year. Below figure illustrates the extent to which these indigent households had access to free basic services.



Increased economic hardship at national level is expected to impact on poorer households and their ability to afford quality services. The burden will in turn be passed to local municipalities who must strain their revenue streams to extend services to indigents. The expected scenario is evident upon consideration of the rising trend in the number of indigent households receiving free basic services, in particular water, sanitation and electricity services. The notable increase in the provision of water services to indigent households in 2018 can potentially be associated with the drought and enhanced efforts to source additional water.

6

SAFETY AND SECURITY

The South African Police Service and Stats SA published the country's crime statistics for 2018/19, showing which types of criminal activity have increased/decreased in the past financial year.

The 2018/19 financial year saw increases in all contact crimes, including murder, sexual offences, attempted murder, assault with intent to cause grievous bodily harm, common assault, common robbery and robbery with aggravating circumstances.

Over the last year, 21 002 people were murdered across the country, up by 686 from 2017/18. The most common cause of murder was misunderstandings/arguments, followed by domestic violence and gang-related killings.

According to the 2018/19 crime stats, the murder rate increased by a staggering 3.4 per cent compared to the previous financial year. Most of these murders were committed between Saturday and Sunday, suggesting that weekends are the most violent and deadly periods in South Africa. The 2018/19 crime statistics indicate that there are 3 974 murders in the Western Cape. The murder rate is currently at 59.4 per 100 000 people.

Sexual offences have, according to SAPS and Stats SA, shot up by 4.6 per cent in 2018/19 compared to the previous financial year. SAPS and Stats SA further revealed that a total of 52 420 sexual offences were reported in this observed financial year, an increase of 3 212 compared to 2017/18.

Data from the 2018/19 Crime stats show that Nyanga and Delft, appear as two of the most dangerous areas of residence in South Africa. According to the statistics released by the South African Police Service (SAPS) both these Cape Town settlements feature prominently regarding crimes such as murder, rape, car hijacking, house robbery, and cash-in-transit heists. Nyanga is the top murder hot spot in the country, with 289 murder cases reported in the past year ending March 2019. This is followed by Delft, which had 247 reported cases and Khayelitsha came third with 221 cases.

The data depicted in the following section was sourced from the 2018/19 Crime Statistics released by SAPS and Stats SA in September 2019. Incidences of crime per 100 000 were calculated using actual crime and estimated population figures provided by the Department of Social Development.



MURDER



Municipal Area		2016/17	2017/18	2018/19
Actual Number	Central Karoo District	36	30	19
	Western Cape	3 311	3 729	3 974
Per 100 000	Central Karoo District	48	40	26
	Western Cape	51	56	59

Definition: The unlawful and intentional killing of another person.

According to the official 2018/19 crime statistics, the Western Cape murder rate increased by 4.4. per cent between 2017/18 and 2018/19. In comparison, the rate decreased dramatically within the CKD municipal area – the number of murders per 100 000 people in the CKD municipal area decreased by 33.7 per cent from 40 in 2017/18 to 26 in 2018/19. The CKD has the lowest murder rate amongst all other districts.

SEXUAL OFFENCES



Municipal Area		2016/17	2017/18	2018/19
Actual Number	Central Karoo District	107	95	103
	Western Cape	7 115	7 075	7 043
Per 100 000	Central Karoo District	143	126	142
	Western Cape	110	107	104

Definition: Sexual offences includes rape (updated to the new definition of rape to provide for the inclusion of male rape), sex work, pornography, public indecency and human trafficking.

The actual number of reported sexual offences in the CKD municipal area increased slightly between 2017/18 and 2018/19 while decreasing in the Western Cape as a whole across the reference period. The number of reported occurrences per 100 000 people in the CKD increased from 126 in 2017/18 to 142 in 2018/19 (13.5 per cent increase). The rate for the CKD is at 142 the second highest amongst all districts across the Western Cape. Only the Garden Route District (172) had a higher rate whilst the Western Cape average was 104 reported incidents per 100 000 people. The most notable change amongst the local municipal areas within the CKD was observed in Prince Albert where the sexual offences rate increased by 54.9 per cent. This increase was slightly offset by a 17.5 per cent decrease in the rate within Laingsburg.

DRUG-RELATED OFFENCES



Municipal Area		2016/17	2017/18	2018/19
Actual Number	Central Karoo District	1 378	1 446	858
	Western Cape	107 379	117 157	81 344
Per 100 000	Central Karoo District	1 847	1 910	1 186
	Western Cape	1 657	1 769	1 203

Definition: Drug-related crimes refers to the situation where the perpetrator is found to be in possession of, under the influence of, or selling illegal drugs.

Although there was an improvement between 2017/18 and 2018/19, the Western Cape still has the highest drug-related crime rate in the country at 1 203 reported incidents per 100 000 in 2018/19. The drug-related crime rate within the CKD decreased significantly from 1 910 reported incidents per 100 000 people in 2017/18 to 1 186 in 2018/19, a 37.9 per cent drop. In fact, the drug-related crime rate decreased amongst all local municipal areas across the District between 2017/18 and 2018/19 i.e. -40.1 per cent in Laingsburg, -29.8 per cent in Prince Albert and -42.1 per cent in Beaufort West.

DRIVING UNDER THE INFLUENCE




Municipal Area		2016/17	2017/18	2018/19
Actual Number	Central Karoo District	101	140	187
	Western Cape	12 895	12 776	12 561
Per 100 000	Central Karoo District	135	185	259
	Western Cape	199	193	186

Definition: Driving under the influence (DUI) refers to a situation where the driver of a vehicle is found to be over the legal blood alcohol limit. This is a crime detected through police activity rather than reports by members of the public.

The number of reported cases of driving under the influence (DUI) of alcohol or drugs per 100 000 people in the broader CKD municipal area has been increasing at an annual average rate of 39.8 per cent since 2016/17. This increase (the highest amongst any other District) is extremely distressing considering that the Provincial rate on average decreased by 3.7 per cent each year. Closer consideration of municipal specific rates across the District reveal that this increase largely stems from Laingsburg where the DUI rate increased by 84.0 per cent on average each year.

RESIDENTIAL BURGLARIES



Municipal Area		2016/17	2017/18	2018/19
Actual Number	Central Karoo District	707	707	522
	Western Cape	46 043	42 662	39 418
Per 100 000	Central Karoo District	948	934	722
	Western Cape	710	644	583

Definition: Residential burglary is defined as the unlawful entry of a residential structure with the intent to commit a crime, usually a theft.

The 2018/19 crime statistics indicate that residential burglaries per 100 000 people in the Western Cape decreased from 644 in 2017/18 to 583 in 2018/19 (9.5 per cent decrease). The number of residential burglaries in the CKD decreased more prominently by 22.7 per cent from 934 in 2017/18 to 722 in 2018/19. In similar fashion to the drug-related crime rate, the number of residential burglaries per 100 000 people decreased in all the local municipal areas of the CKD.

ROAD USER FATALITIES

Area	2016	2017	2018
Central Karoo District	58	71	89
Western Cape	1 410	1 379	1 387

Definition: The type of road user that died in or during a crash i.e. driver, cyclist, passengers, pedestrians.

According to a recent study, the majority of road fatalities in Africa fall within the working age cohort - between the ages of 15 – 44 years – whilst three out of four fatalities were found to be male (Peden et al., 2013). The untimely death of these primary breadwinners therefore impacts directly upon not only the livelihood of family structures, but deprive society of active economic participants that contribute towards growth and development. The socio-economic impact of such road fatalities has proven to be particularly devastating in South Africa where the majority of road users hail from poor and vulnerable communities.

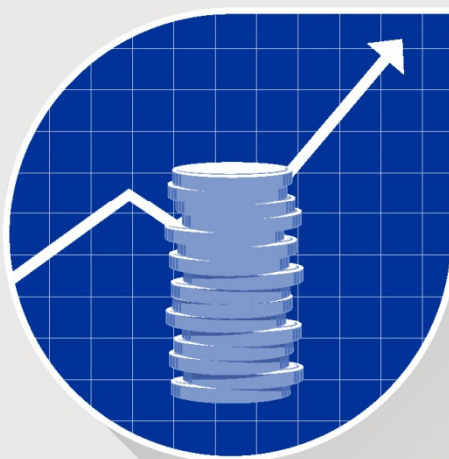
The number of road user fatalities in the CKD municipal area has been increasing year-on-year from 58 in 2016/17 to 71 in 2017/18 and 89 in 2018/19. In contrast, the number of fatalities across the Western Cape decreased between 2016/17 and 2017/18 before slightly increasing again in 2018/19. The N1 transport corridor running from Laingsburg towards Beaufort West is renowned for its high number of road user fatalities. Contributing factors can include driver fatigue and distractions, excessive speeding and reckless driving as well as road obstacles such as pedestrians and animals.

7

THE ECONOMY

Economic activity within municipal boundaries is important as it shows the extent of human development and the living standards of communities. Although municipalities have no power to increase or decrease taxes in order to stimulate economic activity, there are few levers that local government authorities have control over to contribute to economic performance, including, among others, procurement of goods and services, job creation through expanded public works programmes as well as creating an enabling environment for small businesses.

The ability of households to pay for services such as water, electricity, sanitation, and refuse removal depends on income generated from economic activities. A slowdown in economic activity may result in job losses and inability of households to pay for services, leading to reduced municipal revenues. Data on macroeconomic performance, especially the information on sectoral growth and employment, is useful for municipalities' revenue and expenditure projections.



ECONOMIC SECTOR PERFORMANCE

The total GDP for the CKD amounted to R3.015 billion in 2017 with economic activity mostly focussed within the tertiary sector (R2.116 billion; 70.2 per cent). The overall economy grew by 2.2 per cent between 2008 and 2017, slightly above the Western Cape average of 2.0 per cent across the same period. In more recent times (2014 – 2018e) economic growth across the District slowed to 1.0 per cent. District growth is expected to stagnate in 2018 (0.1 per cent) whilst the Province is estimated to grow at 0.9 per cent.

Central Karoo District: GDP performance per sector, 2006 - 2017									
Sector	Contribution to GDP (%) 2017	R million value 2017	Trend		Real GDP growth (%)				
			2008 - 2017	2014 - 2018e	2014	2015	2016	2017	2018e
Primary sector	16.1	485.5	5.5	0.9	8.5	-2.5	-10.0	10.8	-2.3
Agriculture, forestry & fishing	16.1	483.9	5.6	0.9	8.5	-2.5	-10.0	10.8	-2.3
Mining & quarrying	0.1	1.6	1.7	1.9	8.3	-0.2	1.4	2.3	-2.4
Secondary sector	13.7	413.1	1.4	1.1	2.0	1.3	0.6	0.8	0.6
Manufacturing	2.6	79.5	0.3	1.1	0.9	0.2	-0.1	1.3	3.0
Electricity, gas & water	5.7	172.7	0.6	0.9	0.4	0.1	-0.5	1.7	3.0
Construction	5.3	160.9	3.2	1.2	4.3	2.9	1.9	-0.3	-2.8
Tertiary sector	70.2	2 116.4	1.8	1.0	2.3	0.7	0.7	0.7	0.6
Wholesale & retail trade, catering & accommodation	14.7	444.3	1.0	-0.2	0.2	0.9	0.4	-0.6	-1.5
Transport, storage & communication	14.8	445.9	-0.3	-0.3	2.0	-1.6	-1.0	-0.1	-0.7
Finance, insurance, real estate & business services	10.5	317.8	2.8	2.3	2.9	2.4	1.8	2.8	1.8
General government	20.8	628.2	3.6	1.6	4.1	1.1	1.0	0.6	1.5
Community, social & personal services	9.3	280.2	1.6	1.5	1.6	1.0	1.6	1.5	1.9
Total CKD	100.0	3 015.0	2.2	1.0	3.4	0.2	-1.2	2.4	0.1

"e" denotes estimate

The **primary sector** is almost exclusively supported by the agriculture, forestry and fishing sector which contributed 16.1 per cent (R483.9 million) to total GDP in 2016. The agriculture, forestry and fishing sector was also the fastest growing sector in the municipal area between 2008 and 2017, growing at an average annual pace of 5.6 per cent. The accelerated levels of growth within the agriculture, forestry and fishing sector however diminished in more recent times, dropping off to 0.9 per cent between 2014 – 2018 mainly, due to the impact of the drought.

From a holistic value chain perspective, outputs from the primary sector (mostly from the agriculture, forestry and fishing sector) serve as inputs into the manufacturing sector. The inverse relationship between the agriculture, forestry and fishing sector and the manufacturing sector between 2017 and 2018 – the former sector declined from 10.8 per cent growth in 2017 to – 2.3 per cent in 2018 whilst the latter grew from 1.3 per cent in 2017 to 3.0 per cent in 2018 – attest that much of the manufacturing inputs are imported from outside of the district.

The **secondary sector** contributed 13.7 per cent (R413.1 million) to total GDPR in 2017 and maintained an average 1.4 per cent growth rate between 2008 and 2017. Strong growth within the construction sector (3.2 per cent) was offset by weakened performance in the manufacturing (0.3 per cent) and electricity, gas and water (0.6) sectors. Despite the historic strong performance of the construction sector, growth within this sector has spiralled downwards since 2014 to such an extent that it only average 1.2 per cent between 2014 and 2018. The manufacturing sector, in turn, has gained notable momentum in more recent years, growing at 1.3 and 3.0 per cent respectively in 2017 and 2018.

The general government sector is not only the most dominant sector in the **tertiary sector**, but also the single largest contributor to GDPR in 2017 (20.8 per cent; R628.2 million). It furthermore grew by 3.6 per cent between 2008 and 2017. The finance, insurance, real estate & business services sector has been able to maintain steady growth of 2.8 per cent between 2008 and 2017 and 2.3 per cent between 2014 and 2018.

LABOUR

The CKD contributed 18 905 jobs to formal and informal employment in the Western Cape in 2017.

Central Karoo District: Employment growth per sector 2006 – 2017									
Sector	Contribution to employment (%) 2017	Number of jobs 2017	Trend		Employment (net change)				
			2008 - 2017	2014 – 2018e	2014	2015	2016	2017	2017e
Primary sector	24.6	4 651	-1 382	466	-251	1 091	-150	-168	-56
Agriculture, forestry & fishing	24.6	4 649	-1 382	466	-251	1 091	-150	-168	-56
Mining & quarrying	0.0	2	0	0	0	0	0	0	0
Secondary sector	7.2	1 364	104	154	63	12	46	24	9
Manufacturing	1.6	303	-69	-4	0	6	-13	7	-4
Electricity, gas & water	0.6	119	50	14	5	5	4	4	-4
Construction	5.0	942	123	144	58	1	55	13	17
Tertiary sector	68.2	12 890	2 137	971	282	274	4	246	165
Wholesale & retail trade, catering & accommodation	22.1	4 175	587	317	41	155	-54	167	8
Transport, storage & communication	4.3	818	153	-24	-32	32	-24	10	-10
Finance, insurance, real estate & business services	8.4	1 582	111	112	20	29	-21	32	52
General government	17.2	3 254	762	216	196	-35	79	-84	60
Community, social & personal services	16.2	3 061	524	350	57	93	24	121	55
Total CKD	100.0	18 905	859	1 591	94	1 377	-100	102	118

"e" denotes estimate

Employment in CKD was in 2017 mostly concentrated within four sectors - agriculture, forestry and fishing (24.6 per cent; 4 649), wholesale and retail trade, catering and accommodation (22.1 per cent; 4 175), general government (17.2 per cent; 3 254) and community, social and personal services (16.2 per cent; 3 061). Collectively, these three sectors contribute 80.1 per cent to total employment in the CKD area. Between 2008 and 2017, a net total of 859 jobs were created in the CKD – notable job creation in the general government (762), wholesale and retail trade, catering and accommodation (587) and community, social and personal services (524) sectors were offset by significant job losses in the agriculture, forestry and fishing sector (-1 382). Job losses in the agriculture, forestry and fishing sector can mostly be attributed to the impact of the drought, but other factors such as mechanisation also come into play.

Although the agriculture, forestry and fishing sector declined in terms of GDP growth contributions between the periods 2008 – 2017 and 2014 – 2018 (5.6 per cent between 2008 – 2017; 0.9 per cent between 2014 – 2018), employment improved notably in recent times. The strong recovery of employment in the agriculture, forestry and fishing sector (from -1 382 between 2008 – 2017 to 466 in 2014 – 2018) resulted in a net total of 1 591 jobs being created in the CKD between 2014 – 2018.

Central Karoo: Trends in labour force skills, 2014 - 2018				
Formal employment by skill	Skill level contribution (%)	Average growth (%)	Number of jobs	
	2017	2014 – 2018e	2017	2018e
Skilled	19.0	2.1	2 728	2 801
Semi-skilled	42.8	2.9	6 141	6 273
Low-skilled	38.2	2.8	5 483	5 505
Total CKD	100.0	2.7	14 352	14 579

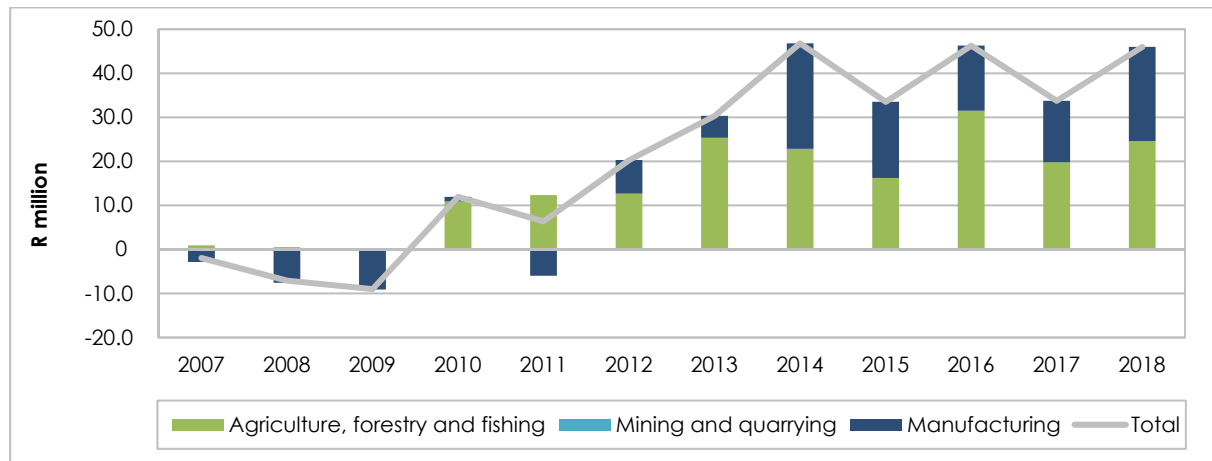
In 2017, the CKD's labour force mostly consisted of semi-skilled (42.8 per cent) and low-skilled (38.2 per cent) workers concentrated within the agriculture sector. The low-skilled and semi-skilled categories grew by 2.8 and 2.9 per cent respectively while the skilled labour segment grew by 2.1 per cent. Despite the comparatively lower growth rate within the skilled segment, it is expected that increased mechanisation within the agriculture industry will over time increase the demand for semi-skilled and skilled labour.

Western Cape: Unemployment Rates (Narrow definition)											
Area	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
City of Cape Town	14.8	16.2	17.5	17.7	17.9	18.0	18.4	19.1	20.3	21.2	21.0
West Coast	6.8	8.2	9.6	10.0	9.7	9.2	9.8	8.6	9.6	10.5	10.7
Cape Winelands	6.9	8.1	9.4	9.6	9.4	8.9	9.3	8.3	9.1	9.6	9.5
Overberg	6.6	8.0	9.5	9.8	9.6	9.2	9.6	8.6	9.7	10.2	10.1
Garden Route	13.1	14.2	15.4	15.3	15.1	14.6	14.6	14.1	15.1	15.4	15.2
Central Karoo	20.5	21.4	22.3	22.1	21.6	20.9	21.0	19.6	20.5	21.2	20.7
Western Cape	12.7	14.0	15.4	15.5	15.6	15.5	15.9	15.9	17.1	17.8	17.7

Unemployment in the CKD fluctuate year on year which can potentially be attributed to seasonal labour demand within the agriculture, forestry and fishing sector. The unemployment rate in the CKD decreased between 2017 and 2018, but remains considerably higher than the Western Cape average. It is worth noting that this rate refers to the narrow definition of unemployment i.e. the percentage of people that are able to work, but unable to find employment. In turn, the broad definition generally refers to people that are able to work, but not actively seeking employment.

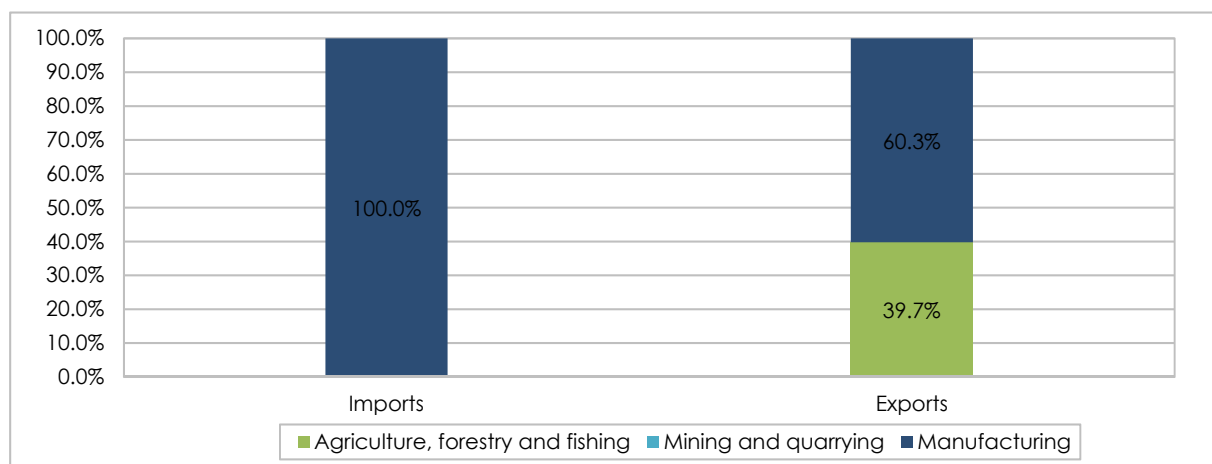
International Trade Dynamics

The CKD maintains relatively low comparative advantages (both in terms of HDPR and employment) in key sectors such as mining and quarrying, manufacturing, and finance, insurance, real estate and business services sectors. As such, the District relies on importing good and services from other regions to meet some of its needs.



In 2018, the CKD municipal area exported goods to the value of R61.9 million whilst imports totalled R15.9 million. Subsequently, the municipal area registered a trade surplus of R46.0 million. The export market relied mostly on dairy products (buttermilk, milk, cream) and beverages destined for respectively African and European countries. In turn, imports included food industry waste used as animal fodder as well as machinery used for processing and packing purposes.

Below figure reflects the distribution between sectors in terms of imports and exports for 2018.



Agricultural produce has since 2010 dominated exports from the CKD, the exceptions being in 2014 and 2015 where the region exported more manufacturing outputs. In 201, the manufacturing sector accounted for 60.3 per cent of the export revenue while the remaining 39.7 per cent of the export income is attributable to agricultural produce. Manufactured products and items for manufacturing account for all the commodities imported into the CKD economy. These range from animal feed, machinery for packing, and food preparations.

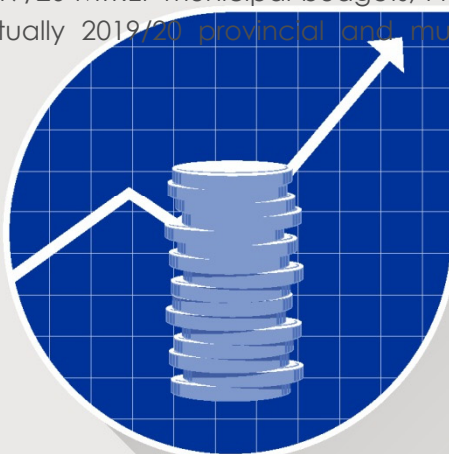
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PUBLIC INFRASTRUCTURE SPEND

Successfully leveraging infrastructure investment as a catalyst for broad-based economic growth and development can however only be achieved through combined and complimentary contributions from all public sector spheres as well as the private sector.

The OPMII compared the 2019/10 MTREF infrastructure commitments made by the Western Cape Government (WCG) within the geographical jurisdiction of a local municipality to the capital budget contributions made by the various local municipalities themselves. As the provincial and municipal financial years do not fully align, the municipal capital budget information was sourced from the approved 2018/19 MTREF budgets. The 2019/20 municipal capital budget spend detailed in the OPMII therefore referred to the outer year estimates and not actual committed funds.

With the approval of the 2019/20 MTREF municipal budgets, Provincial Treasury is for the first time able to compare actually 2019/20 provincial and municipal infrastructure budget commitments.



PROVINCIAL INFRASTRUCTURE SPEND

Provincial infrastructure spend within the geographical boundaries of the CKD municipal area will amount to **R152.5 million** across the 2019/20 MTREF.

Central Karoo District: Provincial Infrastructure Investments, 2019/20 MTREF (R'000)				
Vote	2019/20	2020/21	2021/22	Total
Health	1	500	1 100	1 601
Transport and Public Works	47 775	50 165	52 925	150 865
Total	47 776	50 665	54 025	152 466

Provincial infrastructure commitments towards the CKD will mainly be directed towards the road transport and public works function which will leverage the District's strategic location along a prominent transport corridor. An amount of R76.3 million will be applied towards general regravelling projects and R74.5 million for routine maintenance works. These allocations will contribute to the maintenance of the strategic advantage of the road network. Substantial allocations will also be made towards the housing function. The amount attributed to health infrastructure relates to upgrades and additions to the Murraysburg Ambulance Station.

MUNICIPAL INFRASTRUCTURE SPEND

As per schedule A5 in the approved 2019/20 budget, the CKD Municipality's capital budget will amount to **R2.0 million** across the 2019/20 MTREF.

Central Karoo District Municipality: Capital Budget, 2019/20 MTREF (R'000)				
Functional Classification	2019/20	2020/21	2021/22	Total
Governance and Administration	195	70	40	305
Community and Public Safety	449	40	1 065	1 554
Economic and Environmental Services	101	20	20	141
Trading Services	-	-	-	-
<i>Energy Sources</i>	-	-	-	-
<i>Water Management</i>	-	-	-	-
<i>Waste Water Management</i>	-	-	-	-
<i>Waste Management</i>	-	-	-	-
Total	744	130	1 125	1 999

Given its function as a Category C local government establishment, the Municipality is not responsible to provide a basket of basic services, hence no allocations are made towards trading services. Allocations made above are rather directed towards the Municipality's administrative functions relating to health services, planning and development as well as disaster management.

SOURCES

1. Demographics

- Population: *Department of Social Development, 2019*
- Sex Ratio: *Department of Social Development, 2019*
- Age cohorts: *Department of Social Development, 2019*
- Number of Households: *Department of Social Development, 2019*
- Household size: *Department of Social Development, 2019*
- Population Density: *Department of Social Development, 2019*

2. Education

- Learner enrolment: *Western Cape Education Department, 2019; Annual Survey of Public and Independent Schools (ASS), 2018*
- Learner-teacher ratio: *Western Cape Education Department, 2019; Annual Survey of Public and Independent Schools (ASS), 2018*
- Learner retention: *Western Cape Education Department, 2019; Annual Survey of Public and Independent Schools (ASS), 2018*
- Educational facilities: *Western Cape Education Department, 2019; Annual Survey of Public and Independent Schools (ASS), 2018*
- No-fee schools: *Western Cape Education Department, 2019; Annual Survey of Public and Independent Schools (ASS), 2018*
- Schools with libraries: *Western Cape Education Department, 2019; Annual Survey of Public and Independent Schools (ASS), 2018*
- Educational outcomes: *Western Cape Education Department, 2019; Annual Survey of Public and Independent Schools (ASS), 2018*

3. Health

- Healthcare facilities: *Department of Health, 2019*
- Emergency medical services: *Department of Health, 2019*
- HIV/AIDS: *Department of Health, 2019*
- Tuberculosis: *Department of Health, 2019*
- Child health: *Department of Health, 2019*
- Maternal health: *Department of Health, 2019*

SOURCES

4. Poverty

- GDP per capita: *Quantec Research, 2019*
- Income Inequality: *IHS Global Insight, 2019*
- Human Development: *IHS Global Insight, 2019*

5. Basic Services

- Households: *Statistics South Africa, Community Survey 2016*
- Access to housing: *Statistics South Africa, Community Survey 2016*
- Access to water: *Statistics South Africa, Community Survey 2016*
- Access to electricity: *Statistics South Africa, Community Survey 2016*
- Access to sanitation: *Statistics South Africa, Community Survey 2016*
- Access to refuse removal: *Statistics South Africa, Community Survey 2016*
- Dwelling type: *Quantec Research, 2019*
- Consumer units: *Statistics South Africa, Non-Financial Census of Municipalities 2015, 2016, 2017 and 2018*
- Indigent Households: *Statistics South Africa, Non-Financial Census of Municipalities 2015, 2016, 2017 and 2018*
- Free Basic Services: *Statistics South Africa, Non-Financial Census of Municipalities 2015, 2016, 2017 and 2018*

6. Safety and Security

- Murder: *South African Police Service (SAPS), 2019, own calculations*
- Sexual offences: *South African Police Service (SAPS), 2019, own calculations*
- Drug-related crimes: *South African Police Service (SAPS), 2019, own calculations*
- Driving under the influence: *South African Police Service (SAPS), 2019, own calculations*
- Residential burglaries: *South African Police Service (SAPS), 2019, own calculations*
- Road user fatalities: *Department of Transport and Public Works, 2019*

SOURCES

7. Economy

- Sector Performance: *Quantec Research, 2019*
- Employment growth per sector: *Quantec Research, 2019*
- Trends in labour force skills: *Quantec Research, 2019*
- Unemployment rates: *Quantec Research, 2019*
- Trade balance: *Wesgro, 2019*
- Sectoral trade distribution: *Wesgro, 2019*

8. Public Infrastructure Spend

- Provincial Infrastructure Spend: *Estimates of Provincial Revenue and Expenditure (EPRE), 2019; Overview of Provincial and Municipal Infrastructure Investment (OPMI), 2019*
- Municipal Infrastructure Spend: *Final approved 2019/20 municipal budgets, Budget Schedule A5*