



Western Cape
Government



Central Karoo District Municipality

2018



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Central Karoo District: At a Glance

Demographics

Population Estimates, 2018; Actual households, 2016



Population
75 695



Households
21 980

Education (Garden Route and Central Karoo) 2017



Matric Pass Rate 81.7%
Learner-Teacher Ratio 42.1
Gr 12 Drop-out Rate 36.0%

Poverty 2017



Gini Coefficient 0.586
Human Development Index 0.685

Health

2017/18
20



Primary Health Care Facilities

18

Immunisation Rate

79.2%

Maternal Mortality Ratio (per 100 000 live births)

0.1

Teenage Pregnancies - Delivery rate to women U/18

17.4%

Safety and Security

Actual number of reported cases in 2018



Residential Burglaries

707

DUI

140

Drug-related Crimes

1 446

Murder

30

Sexual Offences

95

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 2017

2017

Fatal Crashes 53

Road User Fatalities 76

Labour 2017

2017

Unemployment Rate

24.0%



Socio-economic Risks

- Risk 1 Drought
- Risk 2 Increased population & demand for services
- Risk 3 Stagnating Economic Growth

Largest 3 Sectors

Contribution to GDP, 2016

General Government

20.9%

Agriculture, forestry and fishing

15.8%

Transport, storage and communication

14.9%

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DEMOGRAPHICS

2015

It is of critical importance for public policy decision makers across all spheres of government to acknowledge demographics as a decisive factor in shaping our current socio-economic reality.

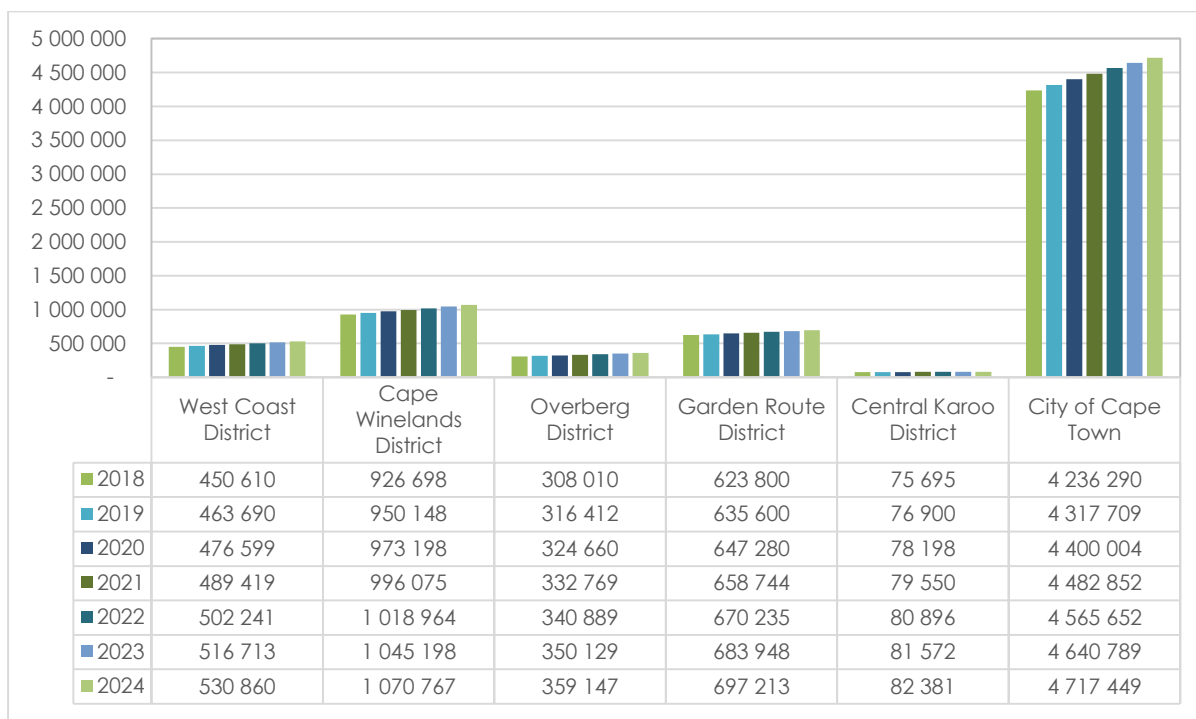
This chapter provides a concise, yet meaningful overview, of key demographic variables that will assist with municipal planning and budgeting, namely estimates of population size, the distribution of population projections within age cohorts as well as dependency ratios.

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 – 2018) to project population growth for the period 2019 to 2024.

Data source: Department of Social Development, 2018



POPULATION



The CKD currently has a population of 75 695, rendering it the smallest District in the Western Cape. This total is estimated to increase to 82 381 by 2024 which equates to a 1.4 per cent compounded growth rate between the two reference years.

AGE COHORTS

Year	Children: 0 – 14 Years	Working Age: 15 – 64 Years	Aged: 65 +	Dependency Ratio
2011	21 683	44 950	4 370	58,0
2019	19 404	50 041	7 455	53.7
2024	18 955	54 460	8 966	51.3

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

A comparison between the 2011 and 2019 estimates reflect a gradual increase in the working age and aged categories, but a noticeable decrease in children. The latter observation can potentially be attributed to a decrease in birth-rates across the District. Irrespective the reason, the expected decrease will lower the dependency ratio.

The population concentration within the children cohort further decrease towards 2024 which, coupled with a gradual increase in the working and aged categories, further decrease the dependency ratio. As lower dependency ratios imply less strain on the working age to support their economic dependents (children and aged), this decrease will have positive social, economic and labour market implications.

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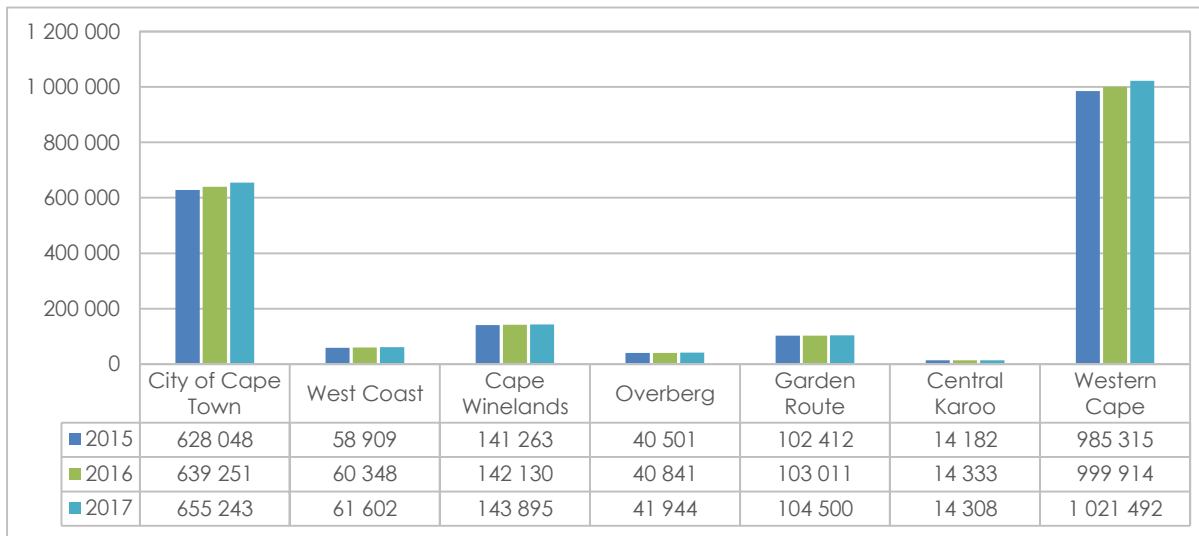
EDUCATION

Education and training improves access to employment opportunities and helps to sustain and accelerate overall levels of human development. It expands the range of options available from which a person can choose to create opportunities for a fulfilling life. Through indirect positive effects on health and life expectancy, the level of education of a population also influences its welfare.

Data source: Western Cape Education Department, 2018

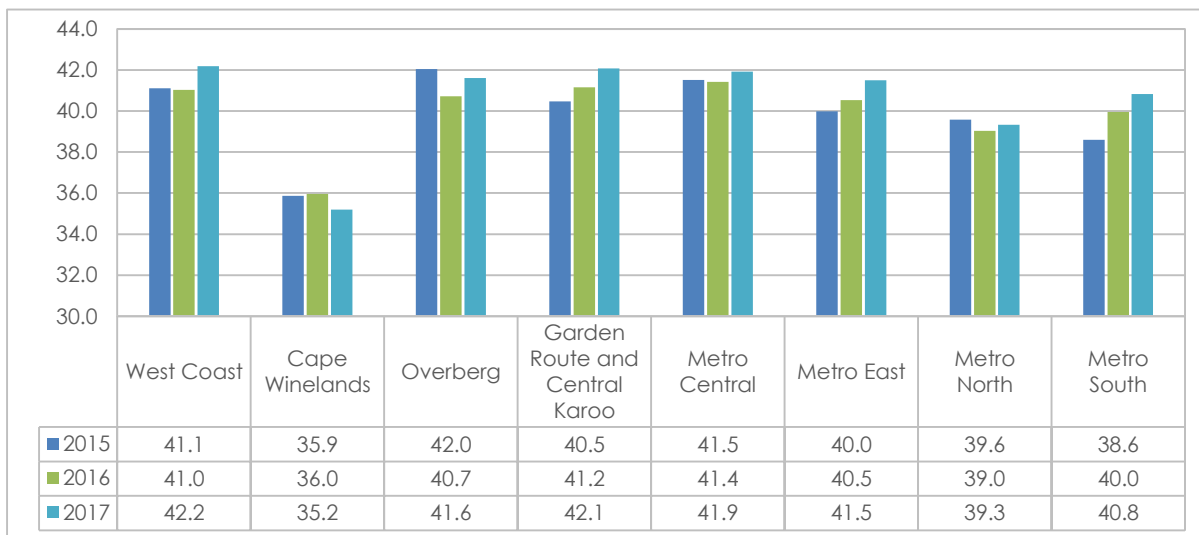


LEARNER ENROLMENT



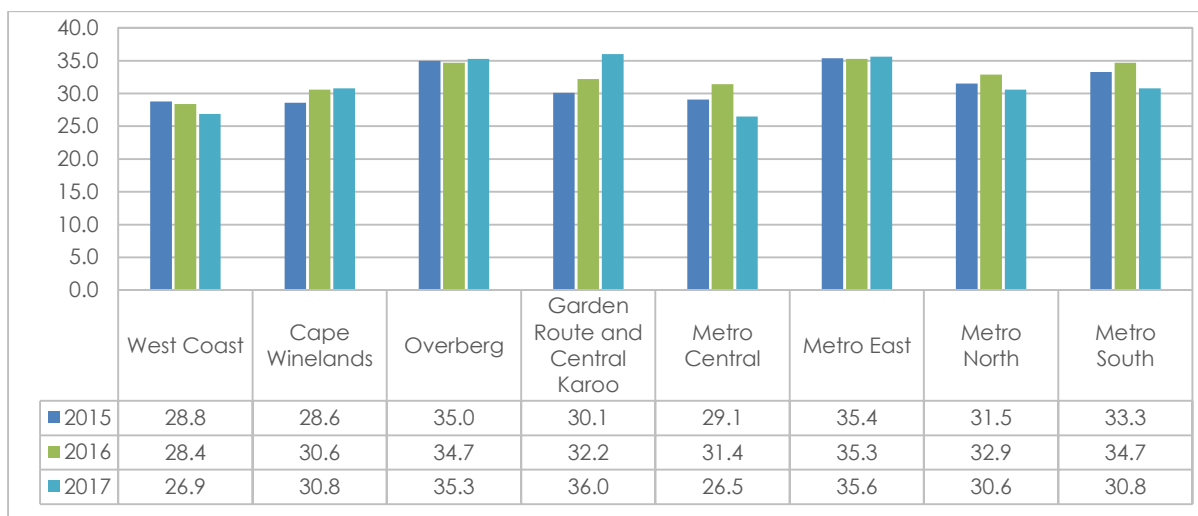
Learner enrolment in the CKD increased notably in 2016. It is expected that this increase can be attributed to learners in Beaufort West where the majority of pupils in the CKD are concentrated. The largest increase in learners between 2015 and 2016 was however observed in Prince Albert where the number of learners increased by 3.6 per cent. The growth in learners in Beaufort West and Laingsburg for 2016 was 0.4 and 2.5 per cent respectively. Learner enrolment however decrease slightly across the District towards 2017.

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. It is to this extent concerning to note that the combined learner-teacher ratio for the Garden Route and Central Karoo Districts increased year-on-year since 2015. This ratio was in 2017 estimated to be 42.1. The lowest learner-teacher ratio in the Western Cape was attributed to the West Coast District (42.2) while the Provincial average was 40.2.

GRADE 12 DROP-OUT RATES (%)



Above graph reflects the change in learner enrolment across a three-year period between Grade 10 and Grade 12. For example, 30.1 per cent of learners that enrolled in Grade 10 in the combined Garden Route and Central Karoo in 2013 did not enrol in Grade 12 in 2015 meaning that these children dropped out of the formal education system. It is evident from above that drop-out rates throughout the CKD is alarmingly high. Such drop-out rates can be attributed to a wide array of socio-economic ills such as unemployment and poverty that force children to leave school in order to support their families. Other contributing factors include teenage pregnancies as well as substance abuse. Irrespective the reason, such high dropout rates are concerning given the increased labour market demand for skilled and semi-skilled workers.

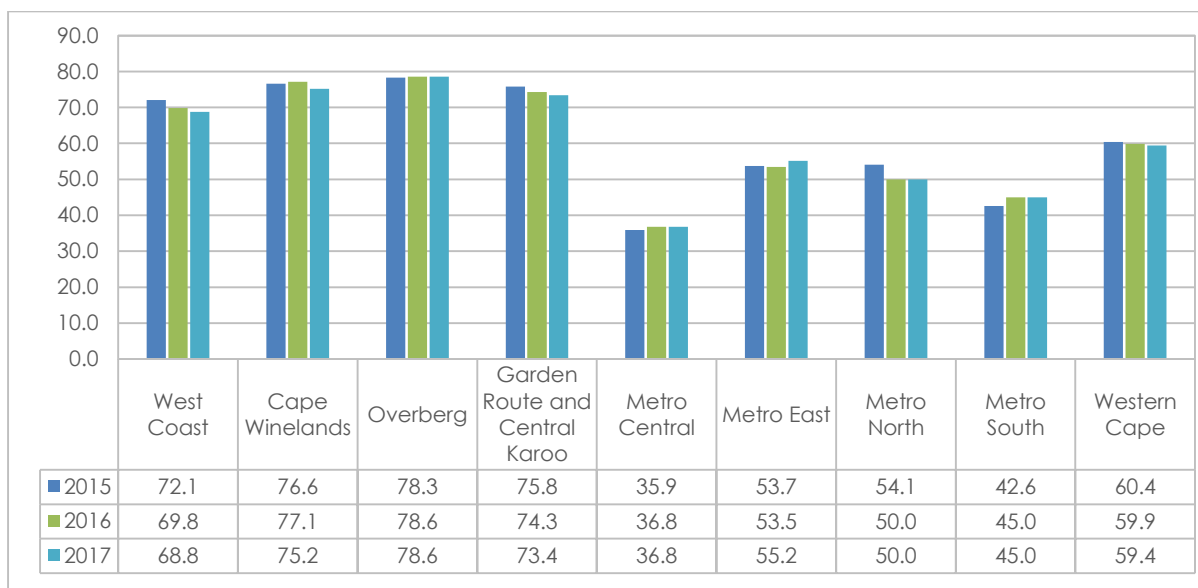
EDUCATIONAL FACILITIES

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



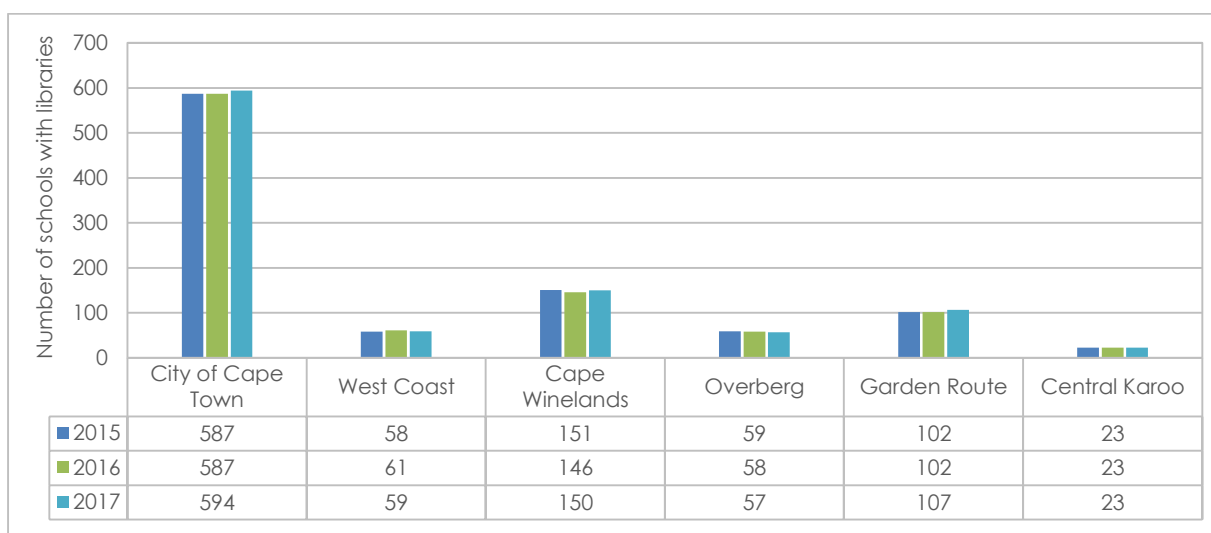
The number of schools within the greater CKD has remained unchanged at 29 between 2015 and 2017. This could negatively impact upon education outcomes, given the gradual increase in learner-enrolment.

NO-FEE SCHOOLS



According to the Western Cape Education Department, the proportion of no-fee schools has since 2015 decreased in the combined Garden Route and Central Karoo Districts. This decrease is expected to have a significant impact on the ability of poor households within Beaufort West to afford school fees.

SCHOOLS 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.

The majority of schools across the CKD are equipped with functional libraries, albeit that the number of libraries remain unchanged since 2015. The increase in learner-enrolment figures across the CKD would in future necessitate not only an increase in the number of schools, but also the provision of additional libraries.

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 upon the matric pass rate within the various local municipalities of the CKD.

MATRIC PASS RATE			
Area	2015	2016	2017
Overberg	89.6	92.6	87.6
Cape Winelands	83.6	84.7	82.3
Garden Route and Central Karoo	85.2	84.8	81.7
Metro Central	86.6	87.3	82.4
Metro East	80.0	82.3	77.2
Metro North	84.0	88.0	85.2
Metro South	84.2	84.8	82.2
West Coast	88.9	87.5	85.9
Western Cape	84.3	85.6	82.1

The combined matric pass rate for the Garden Route and Central Karoo Districts has been on a gradual decline from 85.2 per cent in 2015 to 84.8 per cent in 2016 and 81.7 per cent in 2017. This combined pass rate was in 2017 the lowest in the Western Cape. The West Coast District achieved the highest matric pass rate (85.9 per cent) in 2017.

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, 2018



HEALTHCARE FACILITIES

All citizens' rights 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 first access to primary health care services, 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	70	21	10	47	9	2	107	129
West Coast	27	37	-	1	7	-	45	74
Cape Winelands	39	33	-	6	4	2	49	100
Overberg	17	23	-	2	4	-	23	43
Garden Route	35	33	-	6	6	1	61	88
Central Karoo	8	10	-	1	4	0	13	22

Given its population size, the CKD has relatively less health facilities than the other districts.

None the less, there were in 2017/18 a total of 18 primary healthcare clinics (PHC) of which 8 were fixed and 10 were non-fixed. Although there are no community health centres in the CKD, there is 1 community day centre located in Beaufort West. There are also 4 district hospitals across the broader District. In terms of treatment facilities, there are 13 ART and 22 TB clinics in the CKD.

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.

Provision of more operational ambulances can provide greater coverage of emergency medical services. The number of ambulances in the CKD increased marginally from 0.5 per 10 000 inhabitants in 2016 to 0.6 in 2017. It is worth noting that this number only refers to Provincial ambulances and excludes all private service providers.

HIV/AIDS

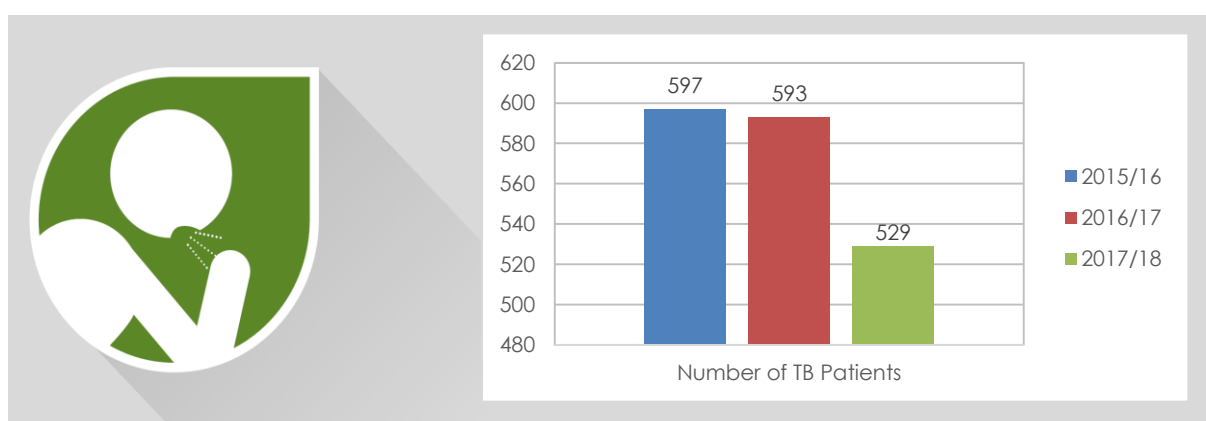
HIV/AIDS management is crucial given its implications for the labour force and the demand for healthcare services.

Area	Registered patients receiving ART		Number of new ART patients		HIV Transmission Rate	
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18
City of Cape Town	162 704	181 644	32 268	32 655	0,7	0,5
West Coast	8 910	10 588	1 835	2 217	0,6	0,6
Cape Winelands	27 162	29 136	5 097	4 679	1,5	0,4
Overberg	10 397	11 856	1 767	2 111	0,0	0,3
Garden Route	20 127	21 713	3 603	3 537	1,8	0,9
Central Karoo	1 631	1 884	299	292	2,3	1,1

The number of registered patients receiving antiretroviral treatment (ART) in the CKD increased by a notable 15.5 per cent from 1 631 patients in 2016/17 to 1 884 in 2017/18. There was however a slight decrease in the number of new ART patients from 299 to 292 across the same period.

Administering antiretroviral medication before and at birth drastically decreases the chances of an infant contracting HIV from their mothers. Progress made to increase access to ART medication has halved the HIV transmission rate in the CKD between 2016/17 and 2017/18. This being said, the transmission rate in the CKD remains considerably higher than in any of the other districts of the Western Cape.

TUBERCULOSIS (TB)



The number of TB patients within the CKD decreased notably (by 10.8 per cent) between 2016/17 and 2017/18. This number however refers to registered patients and should not be interpreted as a general decline in TB infections, despite there being a strong correlation between the two variables.

CHILD HEALTH

Area	Immunisation Rate		Malnutrition		Neonatal Mortality Rate		Low birth weight	
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18
City of Cape Town	78.1	86.8	1.7	1.2	9.1	9.1	14.3	13.9
West Coast	70.5	63.3	1.6	1.7	6.8	9.2	13.3	13.4
Cape Winelands	65.3	73.9	3.6	4.7	6.6	9.5	14.3	16.0
Overberg	71.8	75.0	1.6	1.4	6.9	4.2	11.8	12.3
Garden Route	77.0	74.8	3.2	2.7	8.5	11.4	14.6	17.8
Central Karoo	67.8	79.2	9.0	5.6	14.0	19.9	21.8	21.9

The **full immunisation coverage rate** for children under the age of one in the CKD increased from 67.8 per cent in 2016/17 to 79.2 per cent in 2017/18. This is the second highest immunisation rate amongst all districts in the Western Cape.

At 5.6 children under five years of age per 100 000 people, there are in 2017/18 more **malnourished children** in the CKD than in any other district.

The Western Cape has by 2016 already achieved its goal of reducing **neonatal deaths** to 6 children per 1 000 live births by 2019. The CKD rate increased sharply from 14.0 in 2016/17 to 19.9 in 2017/18. This rate is almost double that of the second highest district rate of 11.4 per cent (Garden Route).

The percentage of **low-birth weight** babies in the CKD remained relatively unchanged between 2016/17 and 2017/18.

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	
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18
City of Cape Town	0.1	0.1	5.0	9.7	1.4	1.5
West Coast	0.0	0.0	8.7	16.6	0.4	0.4
Cape Winelands	0.1	0.0	6.6	13.4	0.6	0.6
Overberg	0.1	0.0	7.8	13.8	0.5	0.5
Garden Route	0.0	0.1	6.7	15.0	0.5	0.6
Central Karoo	0.0	0.1	8.0	17.4	0.0	0.0

The **maternal mortality rate** for the CKD was zero in 2016/17, but increased slightly to 0.1 in 2017/18. The overall low mortality rates across the Province attests of improved maternal healthcare interventions such as the upskilling of health professionals, especially nurses and the implementation of best practices.

It is concerning to note that the **delivery rate to women under the age of 20** has more than doubled in most districts across the Western Cape between 2016/17 and 2017/18. At 17.4 per cent in 2017/18, the delivery rate in the CKD is higher than in any other district.

The **termination of pregnancy rate** in the CKD remains zero, whilst the Western Cape rate is 1.2 per cent.

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.*

4

POVERTY

This section outlines living conditions and economic circumstances of households in the Central Karoo municipal area 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 such as GDP per capita, income inequality, human development, as well as indigent households and free basic services to show the current reality of households.

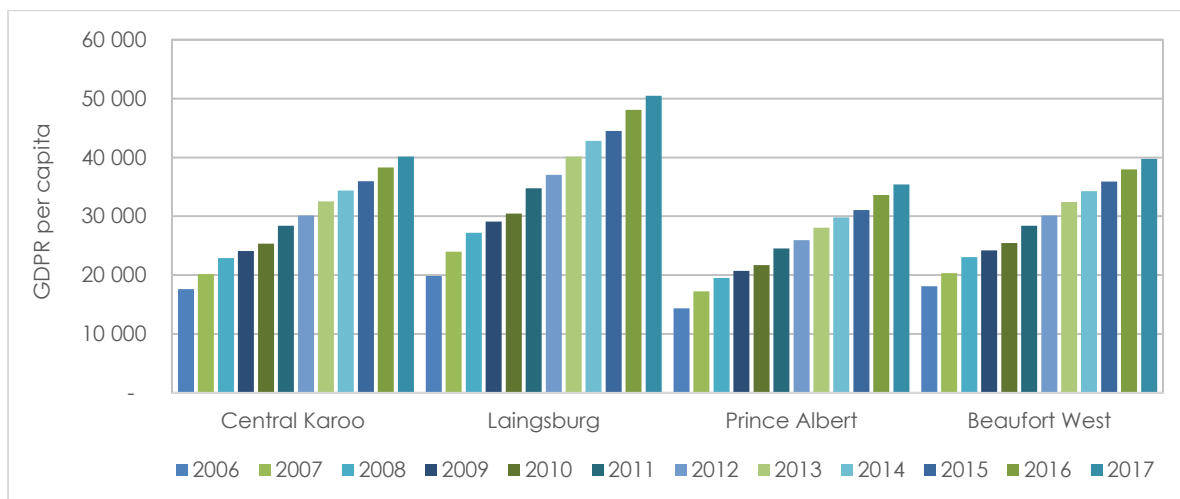
The deteriorating financial health of households and individuals under the weight of economic pressures, specifically between 2011 and 2015, has resulted in an increase in the poverty levels, according to the Poverty Trends in South Africa report released by Statistics South Africa in 2017. The report 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 the food poverty line 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 GDP per capita, i.e. GDP 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 the economy will earn the same amount of money as estimated by the real GDP per capita indicator.

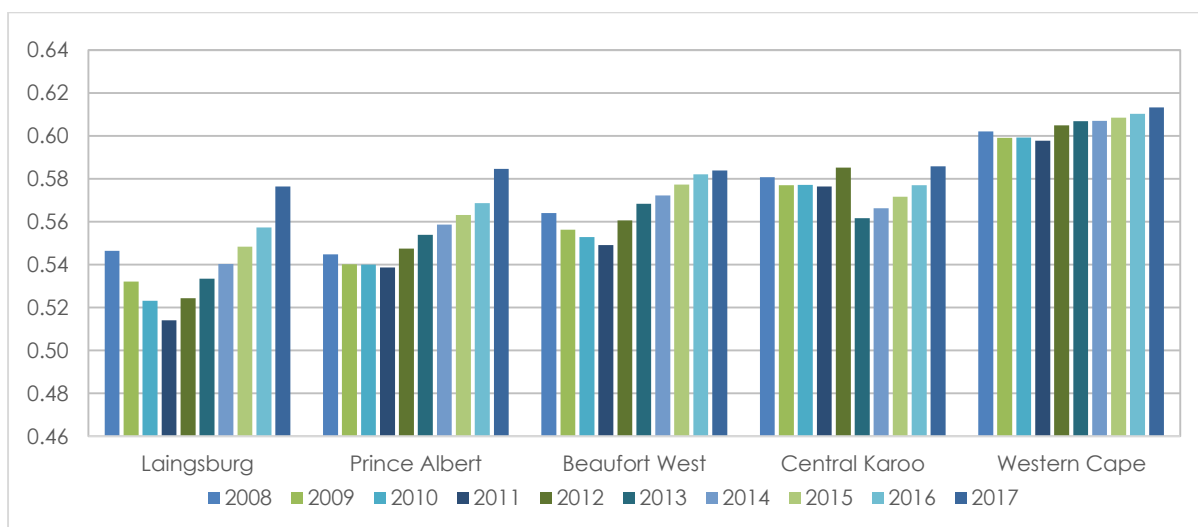


Source: Stats SA 2017, own calculations

Real GDP per capita for the Western Cape was R87 110 in 2017. In comparison, the total for the CKD was estimated to be substantially lower at R40 167. It is interesting to note that GDP per capita in Lainsburg is at R50 505 in 2017 considerably higher than that of Beaufort West (R39 735) and Prince Albert (R35 433).

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.



Source: Global Insight, 2017

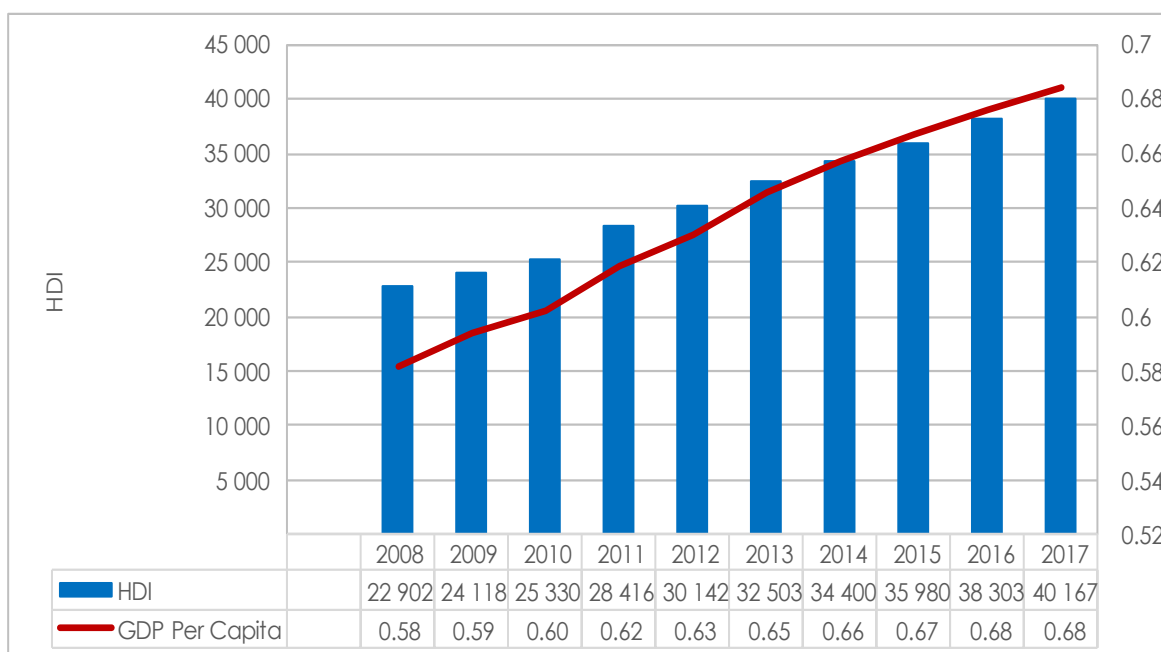
Despite its challenging economic conditions, income inequality in 2017 within the CKD (0.586) remains lower than the Western Cape (0.613) as a whole.

HUMAN DEVELOPMENT

The United Nations uses the Human Development Index (HDI) to assess the relative level of socio-economic development in countries. Indicators that measure human development are education, housing, access to basic services and health.

The HDI is a composite indicator reflecting education levels, health, and income. It is a measure 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.

Per capita income is the average income. It is income per head of the population per year. Per Capita Income might not be the income of every individual in the state. Life expectancy and Infant Mortality Rate are other important criteria for measuring development.



Source: Global Insight, 2017

It is generally assumed that an increase in per capita income will naturally drive up HDI. This is indeed the case within the CKD where, as per above graph, the HDI and per capita trends are on an upward curve. HDI in the CKD remain relatively unchanged between 2016 (0.676) and 2017 (0.685) and was slightly lower than the Provincial average of 0.733.

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 reflects on housing and basic services access levels (Census 2011) and the incremental progress municipalities have made hereto within the last 5 years (Community Survey 2016).



ACCESS TO SERVICES & HOUSING

Since no new household survey information is available (compared to SEPLG 2017), 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.

The table below indicates access to housing and services amongst the various districts of the Western Cape. There were 21 980 households within the CKD in 2016 of which 97.8 per cent enjoyed access to formal housing. This is higher than the Western Cape average and also higher than any other district.

Community Survey 2016	City of Cape Town	West Coast District	Cape Winelands District	Overberg District	Garden Route District	Central Karoo District	Western Cape
Total number of households	1 264 849	129 862	236 006	91 835	189 345	21 980	1 933 876
Formal main dwelling	1 032 497	111 389	191 077	75 105	162 325	21 498	1 593 891
	81.6%	85.8%	81.0%	81.8%	85.7%	97.8%	82.4%
Water (piped inside dwelling/ within 200m)	1 261 875	125 336	232 605	89 905	183 441	20 893	1 914 055
	99.8%	96.5%	98.6%	97.9%	96.9%	95.1%	99.0%
Electricity (primary source of lighting)	1 193 110	120 155	228 650	87 910	178 646	21 345	1 829 816
	94.3%	92.5%	96.9%	95.7%	94.3%	97.1%	94.6%
Sanitation (flush/ chemical toilet)	1 236 000	122 205	218 483	86 890	181 973	20 979	1 866 531
	97.7%	94.1%	92.6%	94.6%	96.1%	95.4%	96.5%
Refuse removal (at least weekly)	1 110 231	108 311	192 974	79 961	168 079	19 964	1 679 520
	87.8%	83.4%	81.8%	87.1%	88.8%	90.8%	86.8%

Access to electricity and refuse removal in the CKD was in 2016 higher than the Western Cape average. In fact, access to these two services were higher in the CKD than in any other District in the Province. Access to water services were however the lowest in the Province.

SERVICES GROWTH

A key element to the sustainable management of services is accurate and reliable information on the demand for 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.

A comparison is made between 2007 and 2017 to determine services growth per consumer/billing unit over the past 10 years. This growth is contrasted against growth in support for indigent households, for which municipalities do not receive services revenue.

Water Services

Growth in domestic and non-domestic consumer/billing units for water services recorded average year on year growth of 4.4 per cent over the 2007 – 2017 period. This equates to a substantial increase of 6 751 consumer units over the 10-year period.

Non-financial Census of Municipalities	2007	2017	Change 2007 - 2017	Average annual change 2007 - 2017
Domestic and non-domestic water services per consumer/billing unit	12 440	19 191	6 751	4,4%
Indigent support for water services	6 526	8 067	1 541	2,1%

In contrast with this, indigent support for water services only increased by 1 541 consumer units, or at an average annual rate of 2.1 per cent. Growth in revenue generating consumer units across the CKD is therefore outpacing the increase in indigent services (the provision of free services at a cost to local municipalities).

Sanitation Services

Similar to the sizable increase in water services consumer units, the number of domestic and non-domestic consumer/billing units for sanitation services increased by 6 532 (4.3 per cent) between 2007 and 2017.

Non-financial Census of Municipalities	2007	2017	Change 2007 - 2017	Average annual change 2007 - 2017
Domestic and non-domestic sanitation services per consumer/billing unit	12 329	18 861	6 532	4,3%
Indigent support for sanitation services	6 180	5 873	-307	-0,5%

The number of indigent households registered for sanitation services in turn decreased, albeit slightly, by 0.5 per cent from 6 180 in 2007 to 5 873 in 2017.

Electricity Services

As mentioned above, access to electricity is higher in the CKD than in any other District of the Western Cape, implying that great progress has been made to roll-out electricity services. The sizable increase in domestic and non-domestic electricity services consumer units reflect this progress as more households are being connected to the grid.

Non-financial Census of Municipalities	2007	2017	Change 2007 - 2017	Average annual change 2007 - 2017
Domestic and non-domestic electricity services per consumer/billing unit	13 333	17 989	4 656	3,0%
Indigent support for electricity services	6 180	8 085	1 905	2,7%

The percentage growth in indigent households receiving free services increased more or less on par with the stated growth in domestic and non-domestic electricity services consumer units. The actual number of domestic and non-domestic electricity services consumer units however increase substantially more than the increase in indigent support services provided.

Refuse Removal Services

The number of domestic and non-domestic electricity services consumer units grew strongly off a relatively low base (in comparison to other basic services) from 12 200 in 2007 to 17 972, resulting in an average annual change of 3.9 per cent.

Non-financial Census of Municipalities	2007	2017	Change 2007 - 2017	Average annual change 2007 - 2017
Domestic and non-domestic refuse removal services per consumer/billing unit	12 200	17 972	5 772	3,9%
Indigent support for refuse removal services	6 180	3 195	-2 985	-6,4%

Services to indigent households in turn declined sharply, almost decreasing by half from 6 180 in 2007 to 3 195 in 2017 (a 6.4 per cent decline).

6

SAFETY AND SECURITY

South African society is becoming more and more violent. This was confirmed by the 2017/18 crime statistics released by the South African Police Service (SAPS) and Stats SA. The crime statistics show which type of criminal activity have increased/ decreased in the past year. The most notable changes that we have seen so far are the marked increase in crime related to murder and cash-in transit.

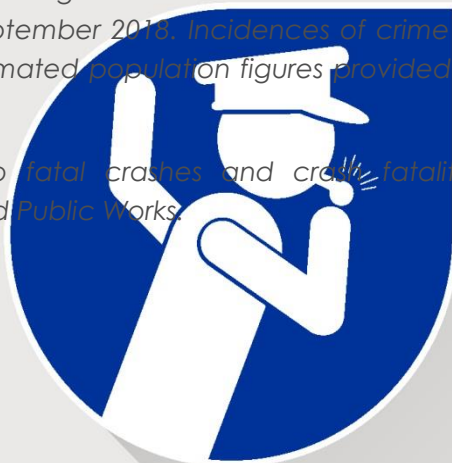
Between 1993 and 2011 the murder rate declined almost consistently year on year. The highest murder rate in 100 years (78 murders per 100,000 people) was recorded in 1993, as South Africa transitioned to democracy. By 2011 it had dropped to 30.1 per 100,000.

But over the past six years we have seen a reversal of this downward trend. The murder rate is currently 35.2 per 100,000 ensuring that South Africa remains one of the 10 most murderous countries in the world.

The Western Cape 's persisting problem with gang violence, the increase in crimes against women and children and farm murders. Nyanga in the Western Cape remains the most notorious area in the country, notorious for its gang violence. The murder rate increased by 9.6 per cent with over 300 murders reflected on the crime stats of 2017/18. The number of women murdered increased by 11 per cent, the number of boys by 20 per cent, and girls by 10 per cent from the year before.

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

The information relating to fatal crashes and crew fatalities were sourced from the Department of Transport and Public Works.



MURDER



Municipal Area		2016	2017	2018
Actual Number	Central Karoo	40	36	30
	Western Cape	3 224	3 311	3 729
Per 100 000	Central Karoo	54	48	40
	Western Cape	51	51	56

Definition: Murder is unlawful and intentional killing of another person.

The 2017/18 crime statistics released by SAPS and Stats SA indicate that murder has increased by 7.0 per cent to over 20,000 cases recorded in 2017/18. This gives South Africa a rather alarming 57 murders a day and at a rate of 35.7 people murdered per 100 000 populations (the murder rate). Within the Western Cape Province, the murder rate increases by 12.6 per cent (418) from 3 311 to 3 729, almost double the national increase of 6.9 per cent in 2017/18.

Within the CKD, the actual number of murders decreased from 36 in 2017 to 30 in 2018, a 16.7 per cent decline. In turn, the murder rate decreased from 48 in 2017 to 40 in 2018. Although the murder rate in the CKD is still considerably lower than the Western Cape average, it is slightly higher than the National figure.

SEXUAL OFFENCES




Municipal Area		2016	2017	2018
Actual Number	Central Karoo	135	107	95
	Western Cape	7 130	7 115	7 075
Per 100 000	Central Karoo	182	143	126
	Western Cape	114	110	107

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 rate of sexual violence in South Africa is amongst the highest in the world. In addition, a number of sexual offence incidences often go unreported (as in the case of rape). It is evident from above that the number of sexual offences in the CKD and Western Cape as a whole has gradually been declining since 2016. Although the CKD has the smallest number of actual recorded offences, it has the second highest sexual offences rate (per 100 000) amongst all Districts in the Western Cape (second to Garden Route).

DRUG-RELATED OFFENCES




Municipal Area		2016	2017	2018
Actual Number	Central Karoo	1 215	1 378	1 446
	Western Cape	93 996	107 379	117 157
Per 100 000	Central Karoo	1 636	1 847	1 910
	Western Cape	1 497	1 657	1 769

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.

The 2017/18 crime statistics indicate that the Western Cape has the highest rate of drug related crimes in the country at 1 769 per 100 000. It also contributed more than a third (36.2 per cent) of cases to the country's drug related crime in 2017/18. Drug-related crimes within the CKD is an obstinate concern, increasing year on year. Where the District in previous years had the highest drug rate amongst all Districts, it was in 2018 surpassed by Overberg (1 930 per 100 000 people).

DRIVING UNDER THE INFLUENCE




Municipal Area		2016	2017	2018
Actual Number	Central Karoo	127	101	140
	Western Cape	11 725	12 895	12 776
Per 100 000	Central Karoo	171	135	185
	Western Cape	187	199	193

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.

Despite concerted efforts by government, our roads are still considered amongst the most dangerous in the world. Reckless driving and alcohol consumption remain the top reason for road accidents. The actual number of cases of DUI in the CKD increased by 38.6 per cent, whereas the number of cases across the Province slightly decreased by 0.9 per cent. The DUI rate for the CKD (185) was in 2018 slightly lower than the Western Cape average (193).

RESIDENTIAL BURGLARIES




Municipal Area		2016	2017	2018
Actual Number	Central Karoo	765	707	707
	Western Cape	47 569	46 043	42 662
Per 100 000	Central Karoo	1 030	948	934
	Western Cape	758	710	644

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

The 2017/18 crime statistics indicate that the number of residential burglaries in the Western Cape decreased by 7.3 per cent between 2017 and 2018. In turn, the actual number of residential burglaries in the CKD remained unchanged across these two years. The burglary rate (per 100 000) in the CKD in 2018 (934) is substantially higher than the Western Cape figure of 644, but did slightly decrease between 2017 and 2018. As the actual amount of burglaries remained unchanged in the CKD, the decrease in the burglary rate can probably be attributed to a decrease in population figures.

FATAL CRASHES



Area	2015	2016	2017
Central Karoo	40	41	53
Western Cape	1 187	1 234	1 237

Definition: A crash occurrence that caused immediate death to a road user i.e. death upon impact, flung from the wreckage, burnt to death, etc.

Fatal crashes involving motor vehicles, motorcycles, cyclists and pedestrians within the broader CKD increased quite dramatically from 41 crashes in 2016 to 53 in 2017, which equates to a 29.3 per cent increase. This increase affirms the perception of the N1 highway towards Beaufort West being one of the Province's most dangerous roads. This increase overshadows that of the overall Western Cape that only experienced a 0.2 per cent increase.

ROAD USER FATALITIES

Area	2015	2016	2017
Central Karoo	68	60	76
Western Cape	1 345	1 403	1 354

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 – 64 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 previous section specified that a total of 53 fatal road crashes occurred within the CKD in 2017. As per above, a total of 76 road users died in these crashes, a 26.6 per cent increase in deaths from the previous year. The CKD again recorded the highest number of road user fatalities amongst the various Districts.

Although the number of fatal crashes across the Province remained relatively unchanged between 2016 and 2017, there was a relieving decrease (3.5 per cent) in the number of road fatalities.

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 CKD's total GDP amounting to R2.835 billion in 2016, the majority of which originated from contributions from the tertiary sector (70.4 per cent; R1.997 billion). The overall economy grew by 2.7 per cent between 2006 and 2016, slightly above the Provincial average of 2.6 per cent across the same period. Annual economic growth in the CKD has however in recent years declined to such an extent that it has since 2015 dropped below the Provincial average. This being said, the District is expected to recover in 2017 (1.6 per cent) when it is estimated to once again surpass the Provincial average (1.0 per cent).

Central Karoo District GDP performance per sector, 2006 – 2017e									
Sector	Contribution to GDP (%) 2016	R million value 2016	Trend		Real GDP growth (%)				
			2006 - 2016	2013 – 2017e	2013	2014	2015	2016	2017e
Primary Sector	15,9	449,6	4,6	0,9	2,9	8,5	-3,1	-9,9	6,1
Agriculture, forestry and fishing	15,8	448,1	4,6	0,9	2,9	8,5	-3,1	-10,0	6,1
Mining and quarrying	0,1	1,5	1,3	4,3	4,0	8,1	0,0	0,9	8,5
Secondary Sector	13,7	389,2	2,1	1,5	2,0	2,7	0,4	1,8	0,8
Manufacturing	2,5	69,9	0,5	0,3	0,1	0,8	0,0	-0,1	0,9
Electricity, gas and water	5,7	160,8	0,7	0,4	-0,1	0,3	-0,2	-0,4	2,5
Construction	5,6	158,4	4,9	3,4	5,3	6,2	1,1	4,8	-0,7
Tertiary Sector	70,4	1 997,0	2,5	1,6	3,1	2,3	1,1	1,0	0,7
Wholesale and retail trade, catering and accommodation	14,5	411,5	1,6	0,3	1,1	0,2	0,8	0,5	-1,2
Transport, storage and communication	14,9	423,0	0,3	0,1	1,1	2,1	-1,6	-1,3	0,3
Finance, insurance, real estate and business services	10,6	301,5	3,4	2,4	2,4	2,6	2,8	2,1	2,1
General government	20,9	593,0	4,3	2,8	5,1	4,3	1,9	1,9	0,8
Community, social and personal services	9,5	268,0	2,9	2,5	6,0	1,1	2,0	1,9	1,8
Total Central Karoo	100	2 835,7	2,7	1,5	2,9	3,4	0,3	-0,8	1,6

Source: Quantec Research, 2017 (e denotes estimate)

Given the relevance of agriculture in the CKD, the **primary sector** is almost exclusively supported by the agriculture, forestry and fishing sector which contributed 15.8 per cent to GDP in 2016. At 4.6 per cent, this sector also grew the second fastest in the District between 2006 and 2016, but slowed considerably in the last few years (2013 – 2017) to 0.9 per cent. The sector achieved an 8.5 per cent growth rate in 2014, before contracting considerably in 2015 and 2016 with the onset of the drought. The agriculture, forestry and fishing sector is expected to recover notably in 2017. This recovery will in turn bolster growth within the manufacturing sector.

Despite promising growth prospects, the mining and quarrying sector only contributed 0.1 per cent to the District's overall GDP for 2016.

Secondary sector activities collectively contributed R389.2 million to GDP in 2016 (13.7 per cent). The **secondary sector** maintained a 2.1 per cent growth rate between 2006 and 2016, mostly supported by strong growth within the construction sector (4.9 per cent). In fact, construction was the fastest growing sector within the CKD across 2006 to 2016. Electricity, gas and water however contributed the largest share (R160.8 million) to the secondary sector in 2016.

Economic activities within the **tertiary sector** have been dominated by the general government (20.9 per cent; R593.0 million), wholesale and retail trade, catering and accommodation (14.5 per cent; R411.5 million) and the transport, storage and communication (14.9 per cent; R423.0 million) sectors. The tertiary sector as a whole grew by 2.5 per cent between 2006 and 2016, but growth within this sector however slowed in recent years (1.6 per cent between 2013 and 2017). The tertiary sector is expected to grow at 0.7 per cent in 2017,

LABOUR

The CKD contributed 18 732 jobs to formal and informal employment in the Western Cape in 2016.

Central Karoo District employment growth per sector 2006 – 2017									
Sector	Contribution to employment 2016	Number of jobs 2016	Trend		Employment (net change)				
			2006 - 2016	2013 – 2017e	2013	2014	2015	2016	2017e
Primary Sector	25,7	4 814	-1 925	817	257	-258	1 087	-157	-112
Agriculture, forestry and fishing	25,7	4 812	-1 925	817	257	-258	1 087	-157	-112
Mining and quarrying	0,0	2	0	0	0	0	0	0	0
Secondary Sector	7,1	1 330	49	150	25	57	10	46	12
Manufacturing	1,6	294	-79	12	9	3	1	-10	9
Electricity, gas and water	0,6	116	55	21	4	3	5	5	4
Construction	4,9	920	73	117	12	51	4	51	-1
Tertiary Sector	67,2	12 588	2 134	1 011	232	271	257	-5	256
Wholesale and retail trade, catering and accommodation	21,2	3 970	415	366	52	33	142	-56	195
Transport, storage and communication	4,3	802	137	3	17	-31	29	-22	10
Finance, insurance, real estate and business services	8,3	1 550	167	59	12	15	34	-23	21
General government	17,8	3 343	951	159	-1	199	-32	75	-82
Community, social and personal services	15,6	2 923	464	424	152	55	84	21	112
Total Central Karoo	100,0	18 732	258	1 978	514	70	1 354	-116	156

Source: Quantec Research, 2018 (e denotes estimate)

Although the District only created a net total of 258 jobs between 2006 and 2016, it was able to create 1 978 employment opportunities in more recent times between 2013 and 2017. The majority of these 1 978 job opportunities were created within the tertiary sector (1 011). The impact of the recent drought on overall employment creation is evident upon noting that the District shed 116 jobs in 2016. Despite continued job losses in the agriculture, forestry and fishing sector in 2017 (112), net employment creation for the District as a whole is estimated to be 156.

The agriculture, forestry and fishing sector contributed the most jobs to the CKD economy in 2016 (4 812 jobs; 25.7 per cent), followed by the wholesale and retail trade, catering and accommodation sector (3 970; 21.2 per cent). Despite the agriculture, forestry and fishing sector's large share of overall employment, it shed 1 925 jobs between 2006 and 2016. Employment creation was highest within the general government (951 jobs) and community, social and personal services (464 jobs) sectors. The agriculture, forestry and fishing sector however recovered in more recent times, creating 817 jobs between 2013 and 2017, more than any other economic sector. The agriculture, forestry and fishing, construction and general government sectors are all estimated to shed jobs in 2017.

Central Karoo District trends in labour force skills, 2006 - 2017					
Formal employment by skill	Skill level contribution (%)	Average growth (%)	Average growth (%)	Number of jobs 2016	
	2016	2006 - 2016	2013 - 2017e	2016	2017e
Skilled	18.9	2.3	2.4%	2 717	2 705
Semi-skilled	42.8	0.3	2.3%	6 156	6 085
Low skilled	38.3	-0.9	2.4%	5 519	5 456
Total CKD	100.0	0.2	2.3	14 392	14 246

Source: Quantec Research, 2018 (e denotes estimate)

The labour force of the CKD was in 2016 mostly made up of semi-skilled (42.8 per cent) and low-skilled (38.3 per cent) workers. The number of skilled workers increased much more than that of semi-skilled workers during the period 2006 – 2016, while a slight decrease was experienced in the number of low-skilled workers. An improvement in education and economic performance can contribute to a further decrease in low-skilled workers.

Unemployment Rates for the Western Cape (%)											
Area	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017e
City of Cape Town	16.2	15.2	16.5	17.8	17.9	18.1	18.1	18.5	19.1	20.3	21.1
West Coast	4.7	6.5	7.9	9.3	9.7	9.6	9.2	10.0	9.0	10.1	11.1
Cape Winelands	6.5	7.2	8.3	9.6	9.8	9.7	9.4	9.9	9.1	10.1	10.7
Overberg	6.2	6.9	8.3	9.7	10.0	10.0	9.8	10.5	9.8	11.1	11.8
Garden Route	13.2	12.7	13.8	15.0	14.9	15.0	14.8	15.1	15.0	16.3	17.0
Central Karoo	20.5	21.0	22.0	22.9	22.6	22.4	22.1	22.6	21.7	23.0	24.0
Western Cape	13.3	12.9	14.2	15.5	15.7	15.8	15.7	16.1	16.2	17.4	18.2

Source: Quantec Research, 2018 (e denotes estimate)

Unemployment¹ in the CKD remained stable between 2010 and 2014, but increased notably towards 2017. The unemployment rate for the District is estimated to be 24.0 per cent in 2017 (narrow definition), significantly higher than the Western Cape average of 18.2 per cent.

¹ Narrow definition: Percentage of people that are able/willing to work, but unable to find employment. In turn, broad definition refers to people that are able to work, but not actively seeking employment. Broad definition is more difficult to accurately measure/calculate.

SOURCES

1. Demographics

- Population: *Department of Social Development, 2018*
- Age cohorts: *Department of Social Development, 2018*

2. Education

- Learner enrolment: *Western Cape Education Department, 2017; Annual Survey of Public and Independent Schools (ASS), 2017*
- Learner-teacher ratio: *Western Cape Education Department, 2017; Annual Survey of Public and Independent Schools (ASS), 2017*
- Grade 12 drop-out rates: *Western Cape Education Department, 2017; Annual Survey of Public and Independent Schools (ASS), 2017*
- Educational facilities: *Western Cape Education Department, 2017; Annual Survey of Public and Independent Schools (ASS), 2017*
- Educational outcomes: *Western Cape Education Department, 2017; Annual Survey of Public and Independent Schools (ASS), 2017*

3. Health

- Healthcare facilities: *Department of Health, 2018*
- Emergency medical services: *Department of Health, 2018*
- HIV/AIDS: *Department of Health, 2018*
- Tuberculosis: *Department of Health, 2018*
- Child health: *Department of Health, 2018*
- Maternal health: *Department of Health, 2018*

4. Poverty

- GDP per capita: *Statistics South Africa, 2018; own calculations*
- Income Inequality: *IHS Global Insight, 2018*
- Human Development: *IHS Global Insight, 2018*

SOURCES

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*
- Growth in water/electricity/sanitation and refuse removal services per consumer/billing unit: *Statistics South Africa, Non-Financial Census of Municipalities 2007 and 2017*
- Indigent support for water/electricity/sanitation and refuse removal services: *Statistics South Africa, Non-Financial Census of Municipalities 2007 and 2017*

6. Safety and Security

- Murder: *South African Police Service (SAPS), 2018*
- Sexual offences: *South African Police Service (SAPS), 2018*
- Drug-related crimes: *South African Police Service (SAPS), 2018*
- Driving under the influence: *South African Police Service (SAPS), 2018*
- Residential burglaries: *South African Police Service (SAPS), 2018*
- Fatal crashes: *Department of Transport and Public Works, 2018*
- Road user fatalities: *Department of Transport and Public Works, 2018*

7. Economy

- Sector Performance: *Quantec Research, 2018*
- Labour: *Quantec Research, 2018*