

## Re: Monitoring District Health System performance in South Africa: A proposed dashboard based on key pragmatic indicators

**To the Editor:** The June SAMJ article by colleagues Barron *et al.*<sup>[1]</sup> is an important nudge towards a practical, effective and responsive District Health System monitoring and evaluation system. Noting the processes followed in developing this dashboard, I was struck by the absence of indicators tracking the non-communicable disease (NCD) pandemic, and lifestyle modifiers necessary to manage these NCDs.

Primary healthcare within the current district and national health system remains largely a 'disease management system'. This notion is supported by the budgetary allocations at this level (and indeed all levels) of care that are assigned to preventing and reversing NCDs and promoting health, as well as by the ever-increasing prevalence of preventable NCDs, which today include obesity.

A National Health Insurance framed largely as a 'disease management payment system' will not be able to cope with the ever-escalating burden of NCDs in ageing populations. South Africa needs a radical health service shift to enable and empower citizens towards managing their own healthy lifestyles. Maybe this shift can start with the essential inclusion of indicators in monitoring systems to represent the scale and magnitude of chronic diseases of lifestyle?

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1. Barron P, Mahomed H, Masilela TC, et al. Monitoring District Health System performance in South Africa: A proposed dashboard based on key pragmatic indicators. *S Afr Med J* 2025;115(5):e2673. <https://doi.org/10.7196/SAMJ.2025.v115i5.2673>

## Response to 'Re: Monitoring District Health System performance in South Africa: A proposed dashboard based on key pragmatic indicators'

**To the Editor:** We welcome, and agree with, the suggestion that there should be indicators in the dashboard to measure non-communicable diseases (NCDs), which form a large component of the overall

disease burden in South Africa, and are likely to become increasingly important in the future.

Unfortunately, the current information system at primary care level is based on aggregated cross-sectional data, without the ability to track individual patients longitudinally over time. Once the long-promised patient unique identifier is in place and we have a functional electronic health record (one of the basic building blocks and a requirement of any National Health Insurance), we will be able to develop and measure metrics and indicators related to NCDs.

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