

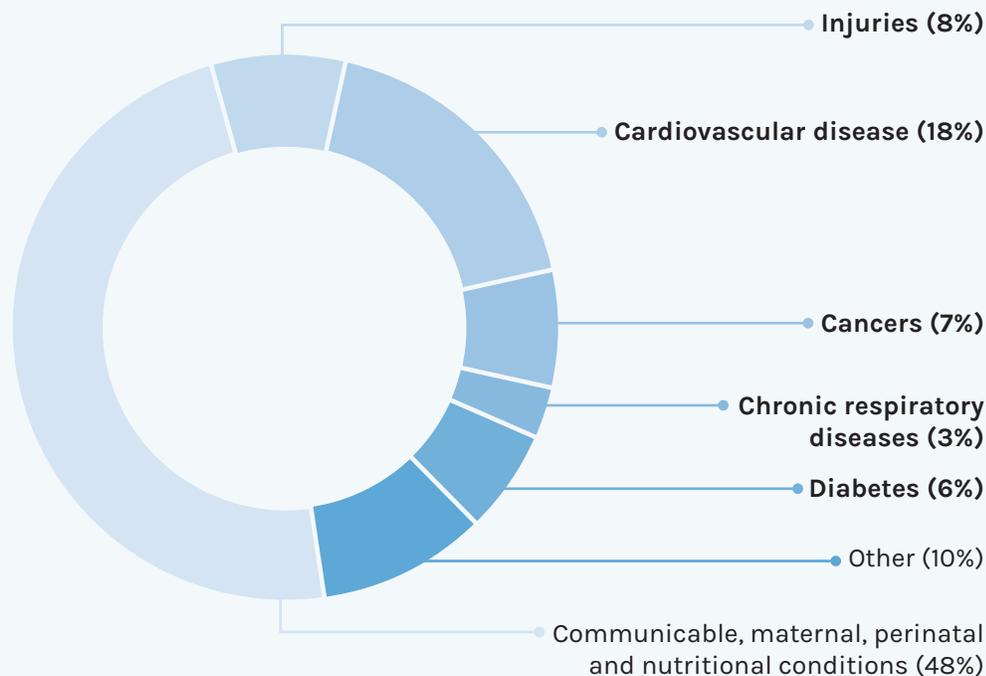
NCDs IN SOUTH AFRICA: A CALL TO ACTION

·The World Health Organization predicts NCDs will become the leading cause of death in Sub-Saharan Africa by 2030.

·Productivity losses related to ill health cost South Africa 6.7% GDP a year, rising to 7.0% GDP by 2030.



42% OF TOTAL DEATHS IN SOUTH AFRICA ARE FROM NON COMMUNICABLE DISEASES



HEALTH IMPACT

·NCDs account for 33% of disease burden and 43% of all deaths in South Africa.

·Probability of death between ages 30 to 70 years from one of the four NCDs is 27%.



SOCIETAL IMPACT

·According to the WHO, 6% of total health expenditure in South Africa is paid out of pocket.

·Demographic aging in South Africa will negatively impact the percentage of disease in the workforce.



ECONOMIC IMPACT

·Voluntary private health insurance serves only 16% of the population.

·South African government will increase spending on health system from R170.9 billion in 2017 to R217.1 billion by 2020. (percentage of GDP)

·In 2006, the South African government paid 39.9% of total health expenditure, by 2013 that increased to 48.4%.

MAJOR NCDs in SOUTH AFRICA



CARDIOVASCULAR DISEASES (CVDs)

- As of 2014, CVDs are the leading cause of NCD mortality in South Africa, and 4.3% of all deaths in South Africa are due to CVD.
- Approximately 130 heart attacks and 240 strokes occur in South Africa daily.
- In 2012, 107,000 South Africans died of CVD related deaths, the second highest in the Sub-Saharan region following Nigeria.



CANCER

- In 2012, prevalence of cancer in South Africa is estimated to be 165,951 people with reported incidence of 77,440.
- Over 38,000 South Africans died from cancer-related causes in 2013 alone.
- The International Agency for Research on Cancer shows that new cancer cases under age 65 in South Africa is estimated to grow by 26% by 2035.
- The top 5 cancers in South Africa are prostate, breast, cervix, lung, and colorectal, representing over 50% of cancer in South Africa.



DIABETES

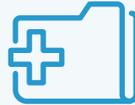
- According to the International Diabetes Federation, there were 2.28 million cases of diabetes in 2015 in South Africa.
- Individuals with hypertension and diabetes total 17 million visits to South African health facilities annually.
- In 2015, 57,300 South Africans aged 20-79 died of diabetes related causes.

NCDs IN SOUTH AFRICA: WHAT NEEDS TO BE DONE?

Governments cannot solve the problems of high disease burden without additional resources. The successful management of the NCD crisis requires the adoption of efficient and effective partnerships with the private sector. The Global Initiative on Health and the Economy recommends that the South African government focus on improving the following areas of its approach to PPPs in the health system:



- Strengthen cross-departmental coordination on NCD policies through the Office of the Deputy President.



- Strengthen the centralized health information center and establish improved methods for the surveillance of population data.



- Partner with the private sector in the promotion of preventative policies and campaigns for healthy living.



- Review the model for Public-Private Partnerships in the areas of the medical training and education, preventative and primary care delivery.



- Establish a policy environment which is conducive to attracting private investment in the healthcare sector through incentives such as tax benefits, regulatory predictability, human talent, respect for property and the rule of law.



- Encourage the piloting of innovative financing mechanisms to supplement government insurance providers and pool risk among the least developed.

The Global Initiative on Health and the Economy's (GIHE) mission is to champion good health policies as vital to advancing economic growth. The GIHE is dedicated to assembling government decision makers, community influencers, and key business leaders in an effort to find creative solutions to today's health needs.

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