## CASE STUDY





# PRICELESS South Africa: A Regional iDSI Hub for Sub-Saharan Africa

### PRIORITY SETTING EXPERTISE FOR HEALTH

Smart decisions about healthcare spending are vital to countries in Sub-Saharan Africa, where resources are incredibly constrained and every dollar spent is often literally a life or death decision.

In 2016, PRICELESS SA (Priority Cost Effective Lessons for Systems Strengthening, South Africa), a programme run from the School of Public Health at the University of the Witwatersrand, Johannesburg, joined iDSI as a core partner. Through its research and with support from iDSI, PRICELESS has been supporting decision makers in South Africa towards effective and efficient healthcare resource allocation strategies to promote Universal Health Coverage (UHC) and to meet health-related Sustainable Development Goals (SDGs).

The global focus on UHC has facilitated PRICELESS, in close partnership with iDSI, to build capacity in South Africa for implementing Health Technology Assessment (HTA) tools, which have informed key government decisions.

PRICELESS works closely with the National Department of Health, supporting evidence-based policy decisions with analyses that examines all health, economic, social and ethical implications of possible interventions to improve healthcare. As an iDSI partner, access to iDSI's vast global network of expertise has helped PRICELESS to generate a

growing awareness of value for money analysis within the South African policy-making sphere.



Building on its success in South Africa, PRICELESS is establishing an iDSI regional hub to support governments across Sub-Saharan Africa to develop the skills and capacity necessary to conduct and review HTAs. The regional hub will also support stakeholders in Sub-Saharan Africa to nurture the political will for HTA across the region. As a local organisation that understands the regional context and its complexities, PRICELESS is uniquely placed to broaden the impact of iDSI expertise.

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## A TRACK RECORD OF DELIVERY

Established in 2009, PRICELESS believes that cost-effective and evidence-informed decision-making plays a critical role in improving public health.

Despite spending 14% of general government expenditure on health, and over 8% of GDP - which is some of the highest in the region – tightened fiscal spending on health in South Africa has led to a crisis of long waiting lists and a scarcity of medical resources and expertise in the public sector, threatening its drive towards UHC. PRICELESS helps to foster capacity development and collaboration among South African decision makers as well as academic institutions.

The work of PRICELESS is pivotal if the South African government is to get the best value out of health investments that address specific public health challenges. Diabetes has doubled in South Africa over the last decade, and over half of those with high blood pressure are undiagnosed and die before the age of 60. On average, a South African consumes 30 thousand kg of sugar each year, and there has been a ten-fold increase in sugary beverage consumption in the last ten years.

Ground-breaking analysis from PRICELESS has found that the introduction of a sugar tax could decrease the number of obese people by a quarter within two to three years, reducing the likelihood of a national health emergency, and generating an extra 5 billion rand (250 million GBP) for the national treasury. This research has led to a rapid response from the national treasury who announced implementing such a tax in its 2016 budget speech. PRICELESS research has also played a decisive role in South Africa joining two other countries in the region to introduce mandatory regulations on salt in bread and processed food.

In partnership with iDSI, PRICELESS is now evaluating the cost-effectiveness of interventions that reduce maternal and child mortality. The Programme for the Economic Evaluation for Maternal and Child Health interventions (PEECHi) is supporting South Africa's Department for Health in achieving SDG 3 on access to safe, affordable healthcare and maternal health. It is funded by the South African Medical Research Council in partnership with the South African Department of Health and the National Treasury.

As PRICELESS' reputation in South Africa grows, it is increasingly supporting the Department for Health; working with them to prepare for the implementation of national health insurance (NHI) and, in response to a request from the Ministerial Workstream on Health Benefits Package Design, proposing an incubation unit for South Africa to establish a HTA function. A Master's programme in Health Economics is also in development to build further capacity and skills in using reliable evidence to make effective and accountable decisions for health.

## **BUILDING REGIONAL EXPERTISE**

Valuable learning from South Africa and increasing demand for support from other countries means PRICELESS is well placed to develop a priority setting institution and create a regional iDSI hub. The PRICELESS team has grown to include more health economic expertise to facilitate this transition.

PRICELESS' strong relationships with an extensive network of universities, policy makers and clinicians across the region can capitalise on the growing interest in, and need for, regional progress in priority setting. In 2016, PRICELESS and the Collaboration for African Budget Reform Initiative (CABRI) convened a meeting with health and finance policy makers from nine Sub-Saharan African countries to communicate the added-value of evidence-informed priority setting. A new partnership with the Consortium for Advanced Research Training in Africa (CARTA) – a consortium of nine African universities, four specialist African research centres and seven northern partner institutions - is expected to strengthen individual and institutional capacity in population health research within the continent.

The Tanzanian Ministry of Health has requested an extension to PRICELESS' current support to Tanzanian officials in the selection of medicines to the approved National Essential Medicines List (EML). PRICELESS is also responding to demand from the Zambian government for individual technology assessments for vaccines and for broader support on the design of a health benefits package. A PRICELESS collaboration with Johns Hopkins School of Public Health on vaccine economics is likely to focus on the needs of Zambian policy makers, laying the groundwork for more substantive engagement. This collaboration will also create much-needed regional capacity to make better health investment choices for Gavi-funded countries.

#### A COMMITTED PARTNER FOR THE FUTURE

PRICELESS' expansion is a result of substantial demand from domestic and regional policy makers and development partners. With PRICELESS' expertise and commitment for a regional hub, and the support of iDSI in facilitating partnerships and strengthening expertise, the future for evidence-informed decision making across Sub-Saharan Africa is positive. The experience of PRICELESS highlights the growing global recognition of the value of priority setting, and the significance of combining North-South and South-South collaboration in delivering clear and measurable national health policy. This will support more countries across Sub-Saharan Africa to make evidence-informed decisions as they work towards achieving SDG target 3.8 on UHC, and will ensure that populations have greater access to quality health interventions that use scarce resources effectively and equitably.

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