

**South Africa's looming public health crisis highlighted by a Karoo community with the highest rates of Non-Communicable Diseases in the country**

The number of South Africans suffering from diabetes increased by 257% in the decade to 2019, while cancer and cardiovascular illnesses are responsible for 55% of claims against critical illness policies. According to healthcare actuary Shivani Ranchod of Percept, a health and financial services advisory firm, South Africa is facing an unprecedented public health emergency driven by a growing prevalence of Non-Communicable Diseases (NCDs) like diabetes, cardiovascular disease, cancer, asthma and mental health conditions.

Ranchod adds that the country's looming public health crisis is likely to be compounded by the large number of South Africans living with HIV as well as the arrival of COVID-19, which impacts most severely on people with NCDs.

**Understanding the depth of the NCD burden**

Concerned about the impact that NCDs are having on the country's public healthcare system, especially as the country moves towards a system of universal health coverage, Percept joined forces with public health specialist, Dr Beth Vale, the Actuarial Society of South Africa (ASSA), the Board of Healthcare Funders (BHF) and RGA Reinsurance Company of South Africa to conduct deep dive research into the growing burden of NCDs. The research was conducted by Percept and Dr Vale, and was funded by ASSA, BHF and RGA. The findings were recently published in a series of 14 briefs, each exploring a different aspect of managing NCDs in the South African context.

The ASSA Public Interest function initiates and funds research that has the potential to influence public policy. According to Lusani Mulaudzi, ASSA's public policy actuary, the general prevalence of NCDs has never been quantified making it almost impossible to project the impact on healthcare costs in South Africa. "This research work done by Percept will help to enhance the understanding and management of NCDs in South Africa and ASSA is honoured to be part of this initiative."

Ranchod explains that the research on NCDs in South Africa is much more than just a set of quantitative data: "What makes these briefs incredibly relevant is the qualitative data gathered by Dr Beth Vale through in-depth ethnographic research in a community situated in the heartland of the Karoo."

**NCDs and socio-economic factors**

The Karoo community became the focus of the research because, despite being removed from the country's key urban centres, it has some of the highest rates of NCDs in the country. Ranchod says this highlights the link between NCDs and socio-economic factors. Previously considered "diseases of lifestyle" that afflicted high-income countries, she points out that the rate of NCDs is increasing rapidly in low- and middle-

income countries where healthy food options are either not available or unaffordable. She adds that 86% of the world's NCD-related premature deaths occur in low- and middle-income countries, with sub-Saharan Africa facing the highest NCD mortality risk.

The research also lists “exploitative working conditions” as a key driver of NCDs. According to Vale, the complex change from lifestyle farming to commercial farming in the Karoo has had a significant impact on the food environment for farm workers. “Payment has moved from a package of farm food and very limited wages, to a purely cash-based system based on a hard-won minimum wage,” explains Vale. She adds that many workers now travel long distances to buy food at month-end, often with a preference for processed, non-perishable food that can stretch across time and budgets.

Vale found that many members of the Karoo community, which was the focus of this research, live with multiple NCDs, sometimes in addition to being HIV positive. This leaves health workers having to manage drug interactions, adherence to prescribed drugs and juggle supply shortages on an ongoing basis.

### **Credible insights aid planning**

Ranchod says the direct cost burden on the country's public health system as well as the indirect impact on the economy are substantial. In addition to the cost of pharmacological interventions and consultations with health workers, a large number of individuals are missing work regularly because they are either too ill to work or in queues seeking help from a stretched health system.

Ranchod points out that on a national scale, the growing rate of NCDs is also impacting life insurers who are seeing significant changes in claims experiences. “Correct measurement of the risk and accurate pricing is crucial in enabling life insurers to provide sustainable financial protection for death, disability and critical illness.”

She points out that there is very little reliable data or research on the prevalence of NCDs in South Africa, because the conditions are not notifiable and also because the focus has been on HIV. “Not having credible insights into the state of the health of your population hinders your ability to plan. Equally, it also prevents life insurers from deriving accurate pricing for risk products. This research is the first step towards building a comprehensive dataset that paints the picture for the entire country.”

“The series of briefs provides a deep dive into some of the key NCD conditions and analyses South Africa's incidence and prevalence and what that means for the type of healthcare required in future,” concludes Ranchod.

### **Ends**

**Note to editors:** The series of 14 briefs is available [here](#).

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