Introduction

- The South African government spends more per capita on healthcare than peer countries, with worse outcomes.
- PRICELESS uses the tools of health economics to ensure that healthcare funds are being spent in the most efficient and cost-effective manner.

Reflection

Results: three key takeaways

- South Africa will have difficulty meeting the Sustainable Development Goals by 2030, even with the scaling of interventions.
- Significant disparities in performance between provinces.
- Social determinants of health (sanitation, hand-washing, etc.) just as important as clinical interventions.

Additional Projects

- WHO Pilot: Assisted in piloting a vaccine costing tool developed by the WHO.
- Diabetes: Conducted an economic analysis on the productivity costs of diabetes in SA.
- EMelA: Tested an electronic platform for medicine review.

Looking ahead

- Strong interest in working at the intersection of health and policymaking, possibly law school.
- Considering working in other developing countries, such as China.

Questions

- Are the most effective interventions I identified necessarily the most cost-effective?
- SA is planning to implement a National Health Insurance program, how will this change the country’s healthcare landscape?

Conclusion

- South Africa will continue to experience growing pains in providing adequate healthcare services to all its citizens.
- Improving the situation requires acknowledgement among political leaders that priorities must be set and tradeoffs must be made.

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