



Confederation of Indian Industry

2nd Edition India-Africa Health Forum

21 April 2016

Greater Noida

POST EVENT REPORT

Global Exhibition on Services (GES) 2016

The second edition of widely attended event the Global Exhibition on Services (GES - 2016) was held from 21 to 23 April 2016 at India Expo Centre and Mart, Greater Noida. The Government of India, Ministry of Commerce and Industry in association with Services Export Promotion Council (SEPC), India Trade Promotion Organization (ITPO) and Confederation of Indian Industry (CII) organized the event. GES-2016 specially focused on various sectors including, Information Technology and Telecom, SME services, Education, Healthcare, Logistics, Media & Entertainment, Professional services, Tourism and Space for seminars, business to business meetings and roundtables around focus sectors. The objective of GES-2016 was to provide a platform to all the participants, delegates, business visitors and other key decision maker from the services industry and other related industry to interact with, and explore new business avenues.



The event was inaugurated by Shri Pranab Mukherjee, Honourable President of India on 20 April 2016. In his inaugural speech the Hon'ble President stated that India has the one of fastest growing service sector in the world with annual growth rate of above 9% since 2001. The contribution of service Sector of India to overall GDP has increased sharply, from 41% in 1990-91 to 66% in 2014-15. The dynamism exhibited by India's service sector is largely a reflection of the liberalization and reform process carried out in this sector since the 1990s. There exists a positive correlation between the extent of liberalization and growth in different service subsectors in India. The services that have been liberalized the most in terms of trade and FDI policies have experienced higher growth rates and employment creation opportunities.

He further stated that the share of India's services exports as percentage of the global services exports at about 3.2 percent is nearly double that of its share of merchandise exports in global merchandise exports. The Hon'ble President pleasantly announced that India is currently the eighth largest exporter of services in the world. In 2014-15, India's Services exports stood at US

dollar 158 billion as against services imports of US dollar 81 billion. India's services trade surplus cover about 53 percent of the deficit in merchandise trade.

The focus sectors identified for the Exhibition were Information Technology and Telecom, Education, Healthcare, Logistics, Media & Entertainment, Professional Services, Tourism, Space and Research & Development.

GES served as a platform to enhance strategic cooperation and develop synergies between players of the services sector in India with their Global counterparts. The Exhibition helped develop synergies to strengthen multilateral relationships among all stakeholders, tap the potential for services' exports and to increase FDI flow in the services sector. More than 40 countries participated at the event which had over 4000 structured buyer-seller meetings.

There were deliberations on issues of concern and on ways to take global services trade to a higher level. The Exhibition was a meeting place for countries, for global service sector players to forge new business relationships and enhance international trade in services.

Ms Nirmala Sitharaman, Hon'ble Minister of State for commerce and chief guest at the valedictory session of the Global Exhibition on Services (GES) stated that the success of the second edition of the Global Exhibition on Services has given confidence that India is emerging as a hub for global services. She further elaborated that the challenge is to provide high quality services at an affordable price. "Value for money," "is a very important criterion for the services sector." Giving the example of the Mars mission which was launched at a very low cost, she said that Indian service providers can deliver on costing, quality and standards. Branding does not mean expensive pricing, she said.

She also said that the Indian healthcare sector was ready to take on the global challenge and she was pleased that the GES had enabled linkages between healthcare service providers in India and buyers from Africa. She also mentioned Chinese interest in collaborating with Indian television and film content providers. She said that the government recognizes services as very important for India and is keen to skill people to international standards.

Commerce Secretary Ms Rita Teatia expressed her appreciation for all the activities, energy and action at the GES. She said that the Department of Commerce was taking various steps to encourage the services sector and increase its share in global trade. These include trade policy measures, addressing issues of competitiveness and providing more accurate data on services. She was keen to see the SAARC countries work together and put together a plan for providing high quality services in areas such as legal, educational, architecture and logistics.

Mr. Chandrajit Banerjee, Director General, CII said that the GES had been successful in presenting a heterogeneous mix of services on the same platform. He also mentioned the synergy between the services sectors and Make in India campaign. He said that the GES had attracted more than 20,000 business visitors, 450 exhibitors including 25 from foreign countries and 500 overseas delegates. There were 3000 B2B meetings and 20 odd conferences covering 17 sectors. He said the success of the GES was also reflected in the large number of individual meetings between businesses, between governments and between government and business.

In his concluding remarks, Mr Malvinder M Singh, Chairman, CII Services Council said that the Hindi word for services is 'Seva' which has a special meaning for him when expanded – Speed,

Efficiency, Value and Advantage India. He said that the Indian healthcare sector is able to provide the best services in the world at 1/10th of global prices. Further, he said that the word medical tourism should be replaced by medical value travel to indicate the Indian price point. He said he was energised by the dialogue generated at the GES.

Event Highlights

- ✚ Inauguration by Honourable President of India on 20 April 2016.
- ✚ 3 Day Exhibition from 21st to 23rd April 2016.
- ✚ GES had attracted more than 20,000 business visitors, 450 exhibitors including 25 from foreign countries and 500 overseas delegates. There were 3000 B2B meetings and 20 odd conferences covering 17 sectors.
- ✚ Networking & B2B meetings.
- ✚ Sectorial & Regional Seminars.
- ✚ Cultural Evening.

India Africa Health Forum 2016

The **India Africa Health Forum** held on the 21st April 2016 was a quintessential deliberation of the First Global Exhibition on Services. The summary report elucidates the discussions, challenges and way forward for cross learning on strengthening healthcare delivery system between India and Africa.

Background

Home to the world's 15% population, Africa is the second most populous continent with 1.1 billion people, residing in 54 countries. Although growth performance varies widely across country classifications and regions, Africa is still the fastest growing continent among all its counterparts with favourable macroeconomic prospects.

Health care in Africa has a scope for considerable improvement as most of the region lacks the robust infrastructure required to deliver quality health care. There is a perpetual shortage of trained medical personnel in most African countries.

According to the World Health Organisation (WHO), the Sub-Saharan region alone accounts for 11% of the world's population; yet, it bears 24% of the global disease burden, and has less than 1% share in the global health expenditure. The vast majority of the region's poor, both urban and rural, rely more on private health care given the fact that public resources are limited. Public-sector funding for healthcare remains uneven across the continent. Access to health services is further constrained by the road conditions, insufficient infrastructure and a scattered population, making it more difficult to attract healthcare workers and specialists. Eliminating these inequalities remains a key step towards better healthcare provision.

Event Summary

The India-Africa Health Forum, 2016 had over 200 delegates comprising of Government officials, policy makers, sector experts, private healthcare providers and investors and

international organizations from India, Nigeria, Tanzania, Zambia, Senegal, Niger, Gabon, Congo, Rwanda, Uganda, and Mauritius.

The deliberations revolved around the need for bolstering healthcare in Africa, regional and international partnerships and their potential to stimulate innovative interventions in healthcare delivery. Majority of the views expressed pointed towards enhancing Global South-South cooperation in bridging gaps in healthcare delivery through knowledge and technology transfer. The discussion was focused on advancing public, private and international organization funding, to build and train human resource for health, infrastructure development and concurrently frame better health policies.

The event was structured into four thematic sessions:

Session I- Partnering for Providing “Healthcare for All” in Africa discussed the importance and challenges of providing affordable and accessible healthcare in Africa covering the innovative business initiatives that have been taken in the region by the Government of India and private healthcare providers from India. The session gave impetus to broad areas of concern in terms of ease of doing collaboration, capacity building and investment opportunities.

Session II- Opportunities for the Indian Private Sector in Africa presented the vast opportunities in terms of existing gaps in public health system and urgent need to traverse the. The challenges in investments in Africa, how it can be overcome and the fact that not only investment but also technical handholding is needed to establish even small and medium scale business, especially healthcare being a service industry.

Session III- Investment and Financing Opportunities gave an overview of investment requirement through detailing the disease burden and specific areas that need more funds. It focused on building the technical capacity alongside funding and the need for investment in social insurance programmes. Aspects of improving the investment climate were also discussed.

Session IV- Building Healthcare Skills and Capacity Development: The session focussed on skill needs and skill gaps with lessons learnt in Indian context in recent past. Health sector needs skilling at lower levels to ease out the doctors from some of the technical work which can be delegated to support staff. For example a refractionist can save a lot of time for an ophthalmologist who can effectively utilize his time for higher level of clinical work.

The potential areas of collaboration in healthcare that emerged from the India-Africa Health Forum were-

- ✚ High end diagnostics, devices and Pharmaceuticals
- ✚ Capacity building in Medical, Nursing and Paramedical education
- ✚ Secondary healthcare facilities across the continent
- ✚ Production and supply chain management of high quality generic drugs and exports
- ✚ Healthcare Information, Communication and Technology (ICT) including telemedicine
- ✚ Bio medical engineering and Biotechnology- Maintenance and repair services for Medical equipment and devices.

SESSION I

Partnering for Providing “Healthcare for All” in Africa *(Sample picture of experts chairing in Session-I. This will be put in all for sessions)*



Introduction: Access to high quality and low cost medical services in India, along with a high success rate of clinical interventions undertaken here, has resulted in a rise in the country’s medical tourism, attracting patients from across the world especially low income countries (LICs). Health as a commodity is a universal right and needs to be packaged in a manner that it reaches into remotest pockets with minimum transit loss in quality and quantity. This supply chain could only be made possible if the reach of the government could be complimented with the skill of the private sector. A comprehensive package of Health, water, sanitation and education would be an ideal combination. There are some good success stories in and around India which could be taken as bench mark.

Session Summary:

The session highlighted how the Global Exhibition on Services (GES) can build development partnership between India and Africa. The presentation focused on the importance of moving from curative to preventive health care with ‘affordability’ and ‘accessibility’ being the cornerstones of this shift. The session emphasized the need for transfer of low cost, affordable and evidence based medical practices from India to the African region. In this context, speakers from Sudan and Uganda highlighted the health care scenario in their respective countries and also pointed to areas where collaboration with India could positively influence the health outcomes in the African region. In particular, two speakers from the African region mentioned the problem of healthcare affordability due to which many Africans came to India for medical services. They expressed the need for Indian private investors to undertake the initiative to

develop high-end services in Africa so that people can access advanced technology within the country. Indian speakers from both the public and the private sector discussed about new approaches and opportunities of collaboration. The table below provides key challenges and opportunities identified during the session.

Key note address by HE Dr Molosti Monyamane, Minister of Health Kingdom of Lesotho also stressed on the need for discussion among service providers and stakeholder and looked forward to Indian agencies to join hands with the health sector of his country to help it develop in skills, technology and hospital operations.

Dr Chris Baryomunsi, Minister of Health Uganda discussed at length the various opportunities particularly in the area of capacity building and project management for hospitals. HE Mr Elsadig M Ali H Elrasoul Aghbash, Minister of Health Sudan seconded the views of the Ugandan Health Minister.

Challenges	Opportunities
Despite decades of foreign assistance, few countries in Africa are able to spend the required amount on the health sector. The situation is exacerbated by the limited funds absorption capacity within the health department of these countries.	There is a need for handholding and capacity building to maximize funds and grant utilization at each level of healthcare delivery systems. In 2012, India pledged to invest in healthcare within the African region, riding on the advantage and experience of low cost technology and research & development. Indian experience from institutions like NRHM could be one such measure to replicate.
Many countries are facing a challenges with respect to cost of care,. The challenges in accessing healthcare remain constant due to a continuous rise in population. There is import dependence on majority of drugs and consumables	India- Uganda partnerships such as the one achieved by introducing Apollo hospitals in the country is a good example of how collaboration between the two countries can help address the problem of accessibility to tertiary care. Further the medical device industry can take advantage of Indian skill sets.
Some countries are facing dual burden of communicable disease (such as malaria, TB etc.) and non-communicable diseases. It is important to strengthen the basics of primary health care.	The delivery of care needs to be augmented at a rapid pace. There ought to be regulatory process in place to ensure equity. Similalry social health financing mechanism by utilizing services of private insurance companies and TPAs would be an area where India and Africa can partner.
Shortage of adequately qualified staff in medical services is a perpetual problem faced in all African nations.	There is much scope for skill transfer in hospital and health services. Collaboration is setting up Medical schools, Allied health institutions and short term training programs in large private and government institutions in India were considered.

SESSION II

Opportunities for the Indian Private Sector in Africa

Introduction: Around 60 percent of health care financing in Africa comes from private sources, and about 50 percent of total health expenditure goes to private providers. In a region where public resources are limited, the private sector is a significant player. In Africa, various constraints are being experienced in the healthcare delivery system, namely weak health infrastructure, inadequate human resource capacity and limited public financing to the health sector. Indian hospitals, medical professionals together with Indian medicines can provide affordable treatment in Africa.



Synopsis: The session started with opening remarks about the scope and need for directing private investments in the health sector of Africa. Currently health care market in Africa is around \$50 billion which will potentially double by 2020. The Governments have a considerable role in providing supporting infrastructure and creating appropriate support system including the healthcare regulatory environment. It was suggested, that the primary areas of focus should be restructuring bureaucratic processes, liberalizing human resource regulations and reducing tariffs and other import barriers that impede access to or raise the cost of health supplies. Given the advantages in health sector, India could play a vital role in fulfilling the deficit in health sector particularly, in supplying low cost alternative medicine, training African health workers, setting up super speciality hospitals and diagnostic centres and providing commercial insurance in Africa. **Dr. Florence Tugumisirize, Hospital Director, Masaka Regional Referral Hospital, Uganda** stressed the need for developing collaborations for setting educational institutions in health sector. **H.E. Mr. Elsadig M. Ali. H. Elrasoul Aghbash** Minister of State Trade and Commerce, Republic of Sudan stated that the private sector could come in the complimentary role by participating in PPP model and his government would like to make such policies which are win-win for both the parties. Health sector offers a recession free investment opportunity in Sudan.

The table below provides key challenges and opportunities identified during the session.

Challenges	Opportunities
The key challenge is to organize a risk pooling mechanism in health sector.	Estimates indicate that in the next decade an investment of \$50 billion will be needed in health care. A growing urban middle class with increased burden of non-communicable disease is willing to pay for quality health care and invest in social insurances. The opportunity exists in both, i.e. delivery of care as well as mustering health finances. This is similar to the Indian scenario of the 90s.
Poor regulation and business environment, fragmented health sector and lack of supporting infrastructure in Africa have been a major hindrance in providing quality healthcare.	Areas such as production of good quality low cost generic drugs, medical equipment, frill free hospitals, diagnostic and health insurance offer huge opportunity for investment.
The regulatory and accreditation frameworks is still evolving and needs high focus to provide investor confidence..	There is a need to improve quality of health systems in Africa; knowledge sharing activities with India in this regard can facilitate quality improvement of systems. National Board of Accreditation of Hospital (NABH) in India has completed more than a decade in promoting quality of care, and the body can collaborate with the counter parts in African countries to pave way in quality journey.

SESSION III

Investment and Financing Opportunities

Introduction: Africa has a growing urban middle class which is willing to pay for better treatment. This has opened the door to the private sector, which is starting to play a new role, often working in partnership with donors and governments to provide better healthcare facilities and increased access to medicine at an affordable price. A number of countries are trying to establish or widen social insurance programmes to give medical cover to more of their citizens.



Synopsis: A brief introduction on the growing urban middle class in Africa coupled with better incomes seeking quality healthcare & treatment were the starting remarks of the third session. African countries like Gambia, Senegal, Cameroon and Niger intend to invest in various programs to address the MDG and are also welcoming private participation for the development of novel micro-insurance plans to curb out-of-pocket-expenses (OPE) which amounts for almost 60% of healthcare expenditure. The high OPEs on healthcare in most African countries have led to impoverishment which has further reinforced the demand of health insurance and role of private players in its management. The session also highlighted the favourable business avenues in Africa for the private sector to invest in the form of Public-Private-Partnerships (PPP) owing to the rising GDP growth rate. Further, there are green field opportunities for the private players to invest especially in health infrastructure, facilities, systems, training and skill development as well as the pharmaceutical sector which has a high demand for low cost generic drugs in Africa.

The investment by financial institutions has a ready market, particularly in areas related to production of generic drugs and provision of tertiary healthcare services. Financing in Africa has some challenges due to existing policy gaps and implementation issues. Governments need to address these in order to fast track the health sector development in Africa. Commercial insurance market is at infant stage and requires policy framework for private players to operate. Indian Exim Bank has now in place 203 Lines of Credit, covering 63 countries in Africa, Asia, Latin America, Oceania and the CIS, with credit commitments of over USD 14.27 billion, available for financing exports from India. Under the LOCs, Exim Bank will reimburse 100% of contract value to the Indian exporters, upfront upon the shipment of equipment and goods/ provision of services. Exim Bank's LOCs afford a risk-free, non-recourse export financing option to Indian exporters. Besides promoting India's exports, Exim Bank's LOCs enable demonstration of Indian expertise and project execution capabilities in emerging markets. To strengthen ties with African countries and counter the growing influence of China in that region, Prime Minister Narendra Modi in October' 2015 announced a concessional credit grant of \$10 billion to Africa through the next five year period.

Mr Biju Mohandas from IFC (World Bank) discussed about the IFC priorities and informed that French speaking countries are now coming into focus of IFC investment. Mr Prahlathan S Iyer Chief General Manager Exim Bank informed that they have come out with investor friendly policies for Indian investors in Africa and a credit line product for African entrepreneurs has also been launched specially for health sector

The table below provides key challenges and opportunities identified during the session.

Challenges	Opportunities
Access to capital is difficult	. Three initiatives which can be taken to address this issue: I. Educating the local banks with respect to the risk profile of the health care sector. II. Using international financial backing to encourage local financial institutions to lend to health care enterprises, including SMEs and III. Developing equity-focused financing vehicles for health care enterprises.
Quality, accreditation and standardization of practices are a pre requisite for investment market; lack of the same hinders investors to contribute.	Accreditation norms and its regulatory as well as voluntary promotion can be undertaken through capacity building, knowledge sharing with India and also using services of consulting organizations like IPE Global who are implementing such programs in Kenya. Apollo Hospitals/Apollo Med-varsity can also contribute significantly in capacity building programs.

SESSION IV

Building Healthcare Skills and Capacity Development

Introduction: The health of Africans is probably one of the greatest challenges to the economic development of the continent and its peoples. However the past two decades had even witnessed signs of a decline in health status in the sub-Saharan region. Significant increases in population have not been matched by increases in health resources and in a number of countries the ratio of health professionals to population has remained stagnant or has even declined. Health services have also been challenged by the resurgence of some of the older communicable diseases such as tuberculosis (TB) and malaria and now by the recent onslaught of HIV/AIDS. To this we can add the paradox that earlier improvements in health and life expectancy are now challenging health systems with increases in non-communicable diseases. More recently, the advent of health sector reforms especially those using Sector Wide Approaches, the new global funding arrangements, such as the Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM) and the Global Alliance for Vaccines and Immunization (GAVI), and the Heavily Indebted Poor Countries (HIPC) Initiative with its Poverty Reduction Strategy Papers (PRSPs) and Credits (PRSCs) may have created possible opportunities for an expansion of the pool of resources for health. The effectiveness of these interventions are not yet clear but how countries seize and utilize these opportunities will be important to how human resources for health (HRH) issues are resolved. Tackling Africa's health crisis requires appreciating and tackling the underlying paradoxes that subvert health systems in Africa.



Africa has the highest burden of disease of any continent (per population) but has the lowest number and ratio of health workers per population.

- ✚ Despite higher maternal and child mortality than found anywhere else, Africa produces the lowest number of basic health workers.
- ✚ The core of Africa's health problems reflects primary health problems—infectious diseases, nutritional diseases and diseases arising from environmental problems—but uses the same profile of health workers and health services as the developed industrialized countries that have to deal mainly with problems of degenerative diseases.
- ✚ The spectrum of skill mixes in African health systems has been limited or reduced by banning the production of some mid-level auxiliaries at the same time as some developed countries, such as the USA, have expanded utilization of physician assistants, nurse anaesthetists and medical assistants. • The majority of Africa's health workers serve a minority of the population found in urban areas where most of the health facilities are also established. The majority living in rural areas are often neglected.
- ✚ Some 70% of Africa's population see traditional health practitioners but these indigenous health service providers are often not well organized and integrated into a country's health system and have not been studied and analyzed in much detail. • In many African countries the curriculum of health training schools tends to focus on and reflect the health problems and needs of industrialized countries.
- ✚ Despite Africa's paucity of health professionals, large numbers of its trained health workers are routinely poached by the industrialized countries of Europe, North America and Australasia.

Source WHO Report "Health Work force in Africa" September 2006

Synopsis:

The deliberations were focussed on the need for skilling of health man power in core competencies. Dr Zainab Zaidi Director Health sector skill council elaborated on various aspects of skill development initiatives in health in India. Issues like re skilling, accreditation of course, development of national occupational standards and development of job oriented skill centres were some of the initiatives discussed.

Dr Sajal Sen, Chief Operating Officer, Imperia Health and Relihealth shared his experience in Africa and advocated to utilize the experience of Open and distance learning modules prepared by IGNOU. He also complimented some of the skill programs of clinical officers in Kenya on SGVB recovery services and on HIV AIDS which could be taken and adapted by India.

Challenges	Opportunities
Critical shortage of Health manpower. The existing work force is at times over burdened and has not upgraded skills.	Indian initiative of Health sector skill council which has produced the National occupational Standards for more than 20 categories in Health to meet the requirement of

	Government as well as private sector in one immediate step that can be taken up.
New Technology, IT integration and substantial use of high end diagnostics requires re skilling of work force and creating a pool of trained professionals.	Though India is yet to have a legislation for Allied health professionals, but the pool of manpower from African countries can be trained at the large number of private tertiary care facilities through structured programs.

Conclusion

African countries are now seen as preferred destination by investors. By 2020, the total GDP of Africa will reach \$ 2.6 trillion roughly from \$ 2 trillion in 2012. The health sector growth is faster and thus provides a large potential for investment. Based on the International Finance Corporation estimates, it is found that over the next decade \$25-\$30 billion in new investment will be needed to meet Africa's health care demand and bulk of the investment is expected to come from private investors around the world.

There are tremendous opportunities for Indian private sector for investing in development of secondary and tertiary hospitals and labs. African pharmaceuticals industry is still at infant nascent stage and this provides huge opportunities for Indian pharmaceuticals industry that is capable of providing generic medicines at affordable prices.

The Ministry of Health can look at African region as an opportunity to engage in skill building and capacity building. This would also be a means for soft engagement for long term strategic intents.

There should be strong engagement among India and African countries across diverse services sectors alongside health. India has comparative advantage in many services sectors, including, ICT, education, vocational skills development, health and financial services in which Indian investments will serve the continent well.

The Exim banks have shown keen interest in African region and have been expanding their influence through the line of credit. This needs to be expanded with a focus on health as a priority sector as the risk elements are low keeping in view the huge demand of health commodities.