



## Initial Poverty and Social Analysis

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April 2018

**REG: DCDC Health Services Private Limited  
DCDC Dialysis Network Project**

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**Asian Development Bank**

## INITIAL POVERTY AND SOCIAL ANALYSIS

Country:	India and Sri Lanka	Project Title:	DCDC Health Services Private Limited DCDC Dialysis Network Project
Lending/Financing Modality:	General Corporate Finance	Department/ Division:	Private Sector Operation Department Infrastructure Finance Division 1

<b>I. POVERTY IMPACT AND SOCIAL DIMENSIONS</b>
<p><b>A. Links to the National Poverty Reduction Strategy and Country Partnership Strategy</b></p> <p>The Project will support the investee company in the expansion of one of the largest network of independently run dialysis centers in India and in the initial roll out of dialysis centers in Sri Lanka. This project is aligned with ADB's CPS for India 2013-2017 and ADB's Interim CPS for Sri Lanka 2015-2016 which (i) undertake to invest in physical and social infrastructure sectors; and (ii) catalyze private investment and enhance the effectiveness of public investment. India's Twelfth Five Year Plan emphasizes the development of social sectors, particularly health, in view of its impact on human development and quality of life. Similarly, Sri Lanka's Development Policy Framework encourages partnership and involvement of the private sector in its healthcare network to deliver a high quality and safe healthcare system.</p>
<p><b>B. Poverty Targeting</b></p> <p><input checked="" type="checkbox"/> General Intervention   <input type="checkbox"/> Individual or Household (TI-H)   <input type="checkbox"/> Geographic (TI-G)   <input type="checkbox"/> Non-Income MDGs (TI-M1, M2, etc.)</p> <p>Approximately 3.7 million Indians suffer from end stage renal disease (ESRD), of which about 1.1 million patients are aware that they will need to undergo regular dialysis. Of the total population suffering from ESRD in India, only about 10% of patients who are aware of their illness, undergo dialysis. This low number is partially attributed to insufficient supply of dialysis services, the lack of awareness of chronic kidney disease (CKD) and the relatively high cost of treatment. In Sri Lanka, the non-communicable diseases burden is also increasing and leading to CKD and ESRD. Current public sector services fall short of providing adequate ongoing care and the project will therefore contribute to improving health infrastructure to address growing demand for treatment centers.</p>
<p><b>C. Poverty and Social Analysis</b></p> <p>1. Key issues and potential beneficiaries. DCDC provides access to quality dialysis and ancillary services to ESRD patients free of charge or partially subsidized for patients considered to be living below the poverty line or to be part of the economically weaker segments.</p> <p>2. Impact channels and expected systemic changes. ESRD has significant impacts on household income and employment as treatment is costly and, on average, extends to 3 times a week for 3 to 4 hours consuming time of patients and their family members, who often have to travel substantial distances to a dialysis center. With ADB support, DCDC proposes the addition of 1,900 machines in 120 centers across India and regionally over the next 3 years, building its capacity to provide medical services and increasing its reach to economically weaker patients.</p> <p>3. Focus of (and resources allocated in) the PPTA or due diligence. Due diligence will include an assessment of the project's safeguard and other social dimensions concerns including labor and gender.</p>
<b>II. GENDER AND DEVELOPMENT</b>
<p>1. What are the key gender issues in the sector/subsector that are likely to be relevant to this project or program? DCDC provides equal employment opportunity to all qualified persons. DCDC also has an anti-sexual harassment policy to ensure its employees work in an environment free of unwelcome harassment or discrimination.</p> <p>2. Does the proposed project or program have the potential to make a contribution to the promotion of gender equity and/or empowerment of women by providing women's access to and use of opportunities, services, resources, assets, and participation in decision making?  <input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No   Due diligence will confirm possible measures that can be adopted to guarantee women patients' access to DCDC services.</p> <p>3. Could the proposed project have an adverse impact on women and/or girls or widen gender inequality?  <input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No   Please explain. Due diligence will confirm if DCDC has policies that prohibits discrimination against women both in its organization and in the provision of its services.</p> <p>4. Indicate the intended gender mainstreaming category:  <input type="checkbox"/> GEN (gender equity)   <input type="checkbox"/> EGM (effective gender mainstreaming)</p>

SGE (some gender elements)     NGE (no gender elements)

### III. PARTICIPATION AND EMPOWERMENT

1. Who are the main stakeholders of the project, including beneficiaries and negatively affected people? Identify how they will participate in the project design.

DCDC's key stakeholders, apart from the government agencies and private hospitals where the DCDC centers are located, are its patients requiring dialysis care, on a long-term basis. Their participation in the project design is limited given the nature of the project.

2. How can the project contribute (in a systemic way) to engaging and empowering stakeholders and beneficiaries, particularly, the poor, vulnerable and excluded groups? What issues in the project design require participation of the poor and excluded?

DCDC has a grievance handling and patient feedback policy in all of its centers to ensure fair and ethical treatment of all of its patients

3. What are the key, active, and relevant civil society organizations in the project area? What is the level of civil society organization participation in the project design?

NA Information generation and sharing     NA Consultation     NA Collaboration     NA Partnership

4. Are there issues during project design for which participation of the poor and excluded is important? What are they and how shall they be addressed?  Yes     No

### IV. SOCIAL SAFEGUARDS

**A. Involuntary Resettlement Category**  A     B     C     FI

1. Does the project have the potential to involve involuntary land acquisition resulting in physical and economic displacement?  Yes     No

No involuntary resettlement impacts are expected as DCDC will locate its dialysis centers within premises of existing hospitals, either government or private, free of land disputes or encumbrances. Stand-alone DCDC centers will be located on rented premises.

2. What action plan is required to address involuntary resettlement as part of the PPTA or due diligence process?

Resettlement plan                       Resettlement framework                       Social impact matrix  
 Environmental and social management system arrangement                       None

**B. Indigenous Peoples Category**  A     B     C     FI

1. Does the proposed project have the potential to directly or indirectly affect the dignity, human rights, livelihood systems, or culture of indigenous peoples?  Yes     No

2. Does it affect the territories or natural and cultural resources indigenous peoples own, use, occupy, or claim, as their ancestral domain?  Yes     No    DCDC's operations are not expected to directly impact or benefit indigenous communities.

3. Will the project require broad community support of affected indigenous communities?  Yes     No  
Impacts on indigenous peoples are not expected as there is no likelihood of concentrations of scheduled tribes occupying or utilizing the proposed locations.

4. What action plan is required to address risks to indigenous peoples as part of the PPTA or due diligence process?

Indigenous peoples plan     Indigenous peoples planning framework     Social Impact matrix  
 Environmental and social management system arrangement                       None

### V. OTHER SOCIAL ISSUES AND RISKS

1. What other social issues and risks should be considered in the project design?

Creating decent jobs and employment     Adhering to core labor standards     Labor retrenchment  
 Spread of communicable diseases, including HIV/AIDS     Increase in human trafficking     Affordability  
 Increase in unplanned migration     Increase in vulnerability to natural disasters     Creating political instability  
 Creating internal social conflicts     Others, please specify \_\_\_\_\_

2. How are these additional social issues and risks going to be addressed in the project design?

The project is expected to skilled jobs, due diligence will assess DCDC's Human Resource Policy if compliant to the national labor laws and the core labor standards.

**VI. PPTA OR DUE DILIGENCE RESOURCE REQUIREMENT**

1. Do the terms of reference for the PPTA (or other due diligence) contain key information needed to be gathered during PPTA or due diligence process to better analyze (i) poverty and social impact; (ii) gender impact, (iii) participation dimensions; (iv) social safeguards; and (v) other social risks. Are the relevant specialists identified?

Yes       No

2. What resources (e.g., consultants, survey budget, and workshop) are allocated for conducting poverty, social and/or gender analysis, and participation plan during the PPTA or due diligence? ADB staff will assess safeguard and other social dimension concerns during due diligence.