



# Initial Poverty and Social Analysis

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Project Number: 54185-001  
July 2020

## IND: COVID-19 Hospital Service Delivery Project

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## INITIAL POVERTY AND SOCIAL ANALYSIS

Country:	<input type="text" value="India"/>	Project Title:	<input type="text" value="COVID-19 Hospital Service Delivery Project"/>
Lending/Financing Modality:	<input type="text" value="Corporate Finance"/>	Department/Division:	<input type="text" value="Private Sector Operations Department&lt;br/&gt;Office of the Director General"/>

### I. POVERTY IMPACT AND SOCIAL DIMENSIONS

#### A. Links to the National Poverty Reduction Strategy and Country Partnership Strategy

Global Health Private Limited (GHPL) owns and operates several hospitals and clinics in India, including 9 operating facilities under the Medanta brand. The Asian Development Bank (ADB) will provide a 3-year debt financing facility to GHPL to support its financing needs in responding to the COVID-19 pandemic. Proceeds from ADB's debt facility, together with internal cash accruals of GHPL, will be utilized (i) for purchase of essential patient care equipment, (ii) for purchase of personal protective equipment (PPE) and basic hygiene products for GHPL's employees, (iii) to train GHPL's personnel on infection prevention and control, and (iv) short-term financing needs to ensure the continued provision of essential and non-essential healthcare services including for non-COVID-19 patients. This project is consistent with ADB's country partnership strategy<sup>a</sup> with India that aims, among others, to support the improvement of the country's health system to contribute to the key outcome of a healthier population.

#### B. Poverty Targeting

General intervention  Individual or household (TI-H)  Geographic (TI-G)  Non-income MDGs (TI-M1, M2, etc.)

Over the years, India has developed various health programs that have further supported universal access to private hospital services. These programs may be the reason why hospitalization in private hospitals among all income groups, including the poorest, have increased from 1995 to 2014.<sup>b</sup> The proposed support to GHPL will, thus, benefit all those who access its services, no matter what income group they come from.

#### C. Poverty and Social Analysis

1. Key issues and potential beneficiaries. The intended beneficiaries of the project are GHPL's staff and patients. India's health system will also benefit from the project as GHPL's expanded critical care capacity, and continued provision of healthcare services will increase India's health system readiness. India reported its first COVID-19 case on 30 January 2020. Since then, the World Health Organization (WHO) has been issuing Situation Update Reports for India that show increasing numbers of confirmed COVID-19 cases and deaths.<sup>c</sup>
2. Impact channels and expected systemic changes. The financial support to GHPL will be used to scale up the health facilities' critical care capacity to strengthen India's health care system in responding to the COVID-19 pandemic.
3. Focus of (and resources allocated in) the transaction TA or due diligence. The due diligence will examine the potential social safeguards impacts and other social risks of the project.

### II. GENDER AND DEVELOPMENT

1. What are the key gender issues in the sector and/or subsector that are likely to be relevant to this project or program? While India is making progress towards development goals, gender disparities are persisting across all sectors, including decline in labor force participation and increasing trend of crimes against women. The health and economic crisis triggered by the COVID-19 pandemic is further widening these gender-based disparities. Healthcare is one of India's largest sectors in terms of revenue and employment, and women contribute as majority of nurses and health facility service staff. GHPL reports a female to male ratio of 84% of nurses, in line with the industry standards. These healthcare workers are on the front lines of the fight against COVID-19 and, as such, are at a greater risk of being infected.<sup>d</sup> While the healthcare sector may not be directly impacted in its employment ratio, the supply chains have been subject to disruption because of COVID-19 measures. Similar to other countries, there have been reports of female nurses experiencing difficulties finding appropriately sized personal protective equipment and in general, Indian women face challenges in getting access to feminine hygiene products.<sup>e</sup>

2. Does the proposed project or program have the potential to contribute 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?  Yes  No The project has potential for gender actions with regard to sustaining adequate protection of female healthcare workers, especially by providing appropriately sized personal protective equipment and hygiene products. The project will also consider measures to support GHPL's female staff to face the impact of the COVID-19 pandemic on their livelihoods.

3. Could the proposed project have an adverse impact on women and/or girls or widen gender inequality?  
 Yes  No

4. Indicate the intended gender mainstreaming category:

- GEN (gender equity)  EGM (effective gender mainstreaming)  
 SGE (some gender elements)  NGE (no gender elements)

<b>III. PARTICIPATION AND EMPOWERMENT</b>
<p>1. Who are the main stakeholders of the project, including beneficiaries and negatively affected people? Identify how they will participate in the project design. The main stakeholders of the project are GHPL's patients and personnel. Though there is limited opportunity to directly include and empower the poor and vulnerable, the project is expected to benefit all GHPL patients including those from lower income groups. The requirements of GHPL's personnel to effectively manage the COVID-19 pandemic have been considered in the project design.</p> <p>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? The project is focused on providing GHPL's personnel with enough PPE and adequate training as well as on providing proper patient care equipment. There is no other issue that requires participation of the poor and excluded.</p> <p>3. What are the key, active, and relevant civil society organizations (CSOs) 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</p> <p>4. Are there issues during project design for which participation of the poor and excluded is important? What are they and how should they be addressed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<b>IV. SOCIAL SAFEGUARDS</b>
<p><b>A. Involuntary Resettlement Category</b> <input type="checkbox"/> A <input type="checkbox"/> B <input checked="" type="checkbox"/> C <input type="checkbox"/> FI</p> <p>1. Does the project have the potential to involve involuntary land acquisition resulting in physical and economic displacement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No No land acquisition or involuntary resettlement impacts are expected. ADB funds will be used only to expand critical care bed capacity, purchase equipment, PPE and basic hygiene products, and train staff in GHPL's operational multi-super specialty hospitals and clinics. GHPL will also support an operational COVID-19-dedicated hospital through human capital and equipment. Only existing facilities inside the hospitals/clinics will be converted to critical care units.</p> <p>2. What action plan is required to address involuntary resettlement as part of the transaction TA or due diligence process? <input checked="" type="checkbox"/> None</p>
<p><b>B. Indigenous Peoples Category</b> <input type="checkbox"/> A <input type="checkbox"/> B <input checked="" type="checkbox"/> C <input type="checkbox"/> FI</p> <p>1. Does the proposed project have the potential to directly or indirectly affect the dignity, human rights, livelihood systems, or culture of indigenous peoples? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>2. Does it affect the territories or natural and cultural resources indigenous peoples own, use, occupy, or claim, as their ancestral domain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No No indigenous peoples impacts are expected. The project will be implemented in operational multi-super specialty hospitals, clinics and one COVID-19-dedicated hospital in urban areas where no known indigenous communities are present.</p> <p>3. Will the project require broad community support of affected indigenous communities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, as no impacts are anticipated</p> <p>4. What action plan is required to address risks to indigenous peoples as part of the transaction TA or due diligence process? <input checked="" type="checkbox"/> None</p>
<b>V. OTHER SOCIAL ISSUES AND RISKS</b>
<p>1. What other social issues and risks should be considered in the project design? <input type="checkbox"/> Creating decent jobs and employment <input checked="" type="checkbox"/> Adhering to core labor standards (M) <input type="checkbox"/> Labor retrenchment <input type="checkbox"/> Spread of communicable diseases, including HIV/AIDS <input type="checkbox"/> Increase in human trafficking <input type="checkbox"/> Affordability <input type="checkbox"/> Increase in unplanned migration <input type="checkbox"/> Increase in vulnerability to natural disasters <input type="checkbox"/> Creating political instability <input type="checkbox"/> Creating internal social conflicts <input type="checkbox"/> Others, please specify _____</p> <p>2. How are these additional social issues and risks going to be addressed in the project design? GHPL will be required to comply with national labor laws and take measures to comply with internationally recognized core labor standards for its existing personnel and service providers.</p>
<b>VI. DUE DILIGENCE RESOURCE REQUIREMENT</b>
<p>1. Do the terms of reference for the transaction TA (or other due diligence) contain key information needed to be gathered during transaction TA 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>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 transaction TA or due diligence? The project team will conduct the due diligence in accordance with ADB requirements.</p>

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- <sup>a</sup> ADB. 2017. *Country Partnership Strategy: India, 2018–2022 — Accelerating Inclusive Economic Transformation*. Manila.
- <sup>b</sup> Almeida, Rafael et al. 2017. *The Role of Government in the Indian Hospital System*. Woodrow Wilson School Graduate Policy Workshop Report. WWS 591g.
- <sup>c</sup> World Health Organization. 2020. [Coronavirus disease \(COVID-19\) India Situation Report](#). Delhi.
- <sup>d</sup> The World Health Organization estimates that women make up almost 70% of healthcare workers around the world, Shagazatova, M. 2020. [Helping Women and Girls Survive COVID-19 and Its Aftermath](#). Manila.
- <sup>e</sup> BBC. 2020. [Coronavirus Sparks a Sanitary Pad Crisis in India](#). 20 June 2020; and Shagazatova, M. 2020. [Helping Women and Girls Survive COVID-19 and Its Aftermath](#). Manila.