## INITIAL POVERTY AND SOCIAL ANALYSIS

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Country:	Regional	Project Title:	OrbiMed Asia Partners II, LP Fund	
Lending/Financing Modality:	Equity Investment	Department/ Division:	Private Sector Operations Department/ Private Sector Investment Funds & Special Initiatives Division	
I. POVERTY IMPACT AND SOCIAL DIMENSIONS				
A. Links to the National Poverty Reduction Strategy and Country Partnership Strategy				
The proposed Fund is consistent with ADB's Strategy 2020 in relation to providing selective investments in the health sector that are not commonly addressed. It supports inclusive growth and opportunities for innovation and value-added technology development and at the same time recognizes the importance of cost-effective health services.				
The Fund is aligned with the India Country Partnership Strategy (CPS) 2009-2012 and India's 12th Five-Year Plan (2012-2017) which support a comprehensive health approach and complement ADB's ongoing interventions in public health and sanitation with the delivery of improved health care systems and services. The Fund is also consistent with the PRC CPS 2011-2015 which promotes financing catalytic projects which are drivers of change to private sector development, and PRC's 12th Five-Year Plan which supports reforms to address structural imbalances by increasing public expenditure on social sectors including healthcare.				
B. Targeting Classification				
General Intervention Individual or Household (TI-H) Geographic (TI-G) Non-Income MDGs (TI-M1, M2, etc.)				
The project supports poverty reduction indirectly (GI) targeting the health and its subsectors - health finance and health programs				
C. Poverty and Social Analysis				
1. Key issues and potential beneficiaries. The Fund will invest in healthcare companies that are based in Asia and will target commercial healthcare opportunities that is in envisaged to impact Asia's most vulnerable and underserved.				
2. Impact channels and expected systemic changes. The Fund is expected to contribute to improved access and affordability of healthcare goods and services in developing member countries.				
<ol><li>Focus of (and resources allocated in) the PPTA or due diligence. Due diligence will include identifying investment opportunities to address unmet medical needs of low income groups.</li></ol>				
4. Specific analysis for policy-based lending. N/A				
II. GENDER AND DEVELOPMENT				
1. What are the key gender issues in the sector/subsector that are likely to be relevant to this project or program? There are significant unmet needs across segments of healthcare including in obstetrics and gynaecology across Asia. These maternal and child health care related expenses often drive the out-of-pocket expenditures of women especially in rural areas.				
<ul> <li>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?</li> <li>Yes No Please explain. The Fund will look into potential investments in companies which provide maternal and child health care services but no concrete measures to promote gender equity and women's</li> </ul>				
empowerment is envisaged due to the nature of the investment which is a private equity fund. However, Fund investments will be measured against social and gender impact tool.				
3. Could the proposed project have an adverse impact on women and/or girls or widen gender inequality? ☐ Yes				
<ul> <li>4. Indicate the intended gender mainstreaming category:</li> <li>GEN (gender equity theme)</li> <li>EGM (effective gender mainstreaming)</li> <li>SGE (some gender elements)</li> <li>NGE (no gender elements)</li> </ul>				

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. The investment strategy for the design of the Fund was adopted by OrbiMed from the outputs of TA 8026-REG: PPTA for Asia Life Sciences Fund, which had a research component that identified healthcare themes in need of capital. Healthcare companies within these subsectors (diagnostics, rural pharmacies, neonatal care clinics, and tertiary care hospitals) are expected to benefit from this investment. However, no participation in project design is envisaged.			
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? There is limited opportunity for the participation of the poor as this project is an equity investment to healthcare companies.			
<ul> <li>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?</li> <li>Information generation and sharing-N Consultation-N Collaboration -N Partnership - N</li> </ul>			
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 There are no issues in the project design which requires the participation of the poor and excluded.			
IV. SOCIAL SAFEGUARDS			
1. Does the project have the potential to involve involuntary land acquisition resulting in physical and economic displacement? Yes No There is limited impact on involuntary resettlement envisaged in this project.			
2. What action plan is required to address involuntary resettlement as part of the PPTA or due diligence process?            Resettlement plan           Resettlement framework             Environmental and social management system arrangement           Social impact matrix			
B. Indigenous Peoples Category 🗌 A 🔲 B 🗍 C 🖾 FI			
<ol> <li>Does the proposed project have the potential to directly or indirectly affect the dignity, human rights, livelihood systems, or culture of indigenous peoples?</li> <li>Yes No</li> <li>Does it affect the territories or natural and cultural resources indigenous peoples own, use, occupy, or claim, as their ancestral domain?</li> <li>Yes No The investment will not affect IP communities.</li> </ol>			
<ul> <li>3. Will the project require broad community support of affected indigenous communities? ☐ Yes ⊠ No</li> <li>4. What action plan is required to address risks to indigenous peoples as part of the PPTA or due diligence process?</li> <li>☐ Indigenous peoples plan ☐ Indigenous peoples planning framework ☐ Social Impact matrix</li> <li>☐ Environmental and social management system arrangement ⊠ None</li> </ul>			
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? Investments in healthcare companies may lead to job creation and employment. This can be included in the ESMS.			
VI. PPTA OR DUE DILIGENCE RESOURCE REQUIREMENT			
<ol> <li>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?</li> <li>☑ Yes</li> </ol>			
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? A project team member will be assigned to conduct safeguards and social analysis.			