

# INTERNATIONAL CO-OPERATION & INTERNATIONAL HEALTH

## 10.1 INTRODUCTION

Various International Organizations and United Nations Agencies continued to provide significant technical support for many Health and Family Welfare programmes in the country. The status of support from various International Agencies is discussed in this chapter.

## 10.2 WORLD HEALTH ORGANIZATION (WHO)

World Health Organization (WHO) is one of the main UN Agencies collaborating, in the Health Sector, with the Ministry of Health & Family Welfare, Government of India and providing technical support. Activities under WHO are funded through two sources:- The Country Budget, which comes out of contributions made by member countries and Extra Budgetary Resources which come from (a) donations from various sources for general or specific aspects of health and (b) funds routed through the WHO to countries by other member countries or institutes/agencies. India is the largest beneficiary of the country budget within the South East Asia Region. The budget is operated on a biennium basis, calendar year wise.

### 10.2.1 Nodal Functions of WHO

- (i) **Sessions of the Executive Board of WHO:** The Executive Board (EB) is composed of 34 Member States elected by the World Health Assembly. Member States are elected for a three-year term. The main functions

of the Executive Board are to give effect to the decisions and policies of the Health Assembly, to advise it and to facilitate its work. The Board meets at least twice a year; the main meeting is normally held in January, with a second shorter meeting in May immediately after the Health Assembly. India is, at present, not a member of the Executive Board.

The 136<sup>th</sup> Session of the Executive Board of WHO was held during 26<sup>th</sup> January – 3<sup>rd</sup> February, 2015 in Geneva. A delegation from India comprising of Joint Secretary (IH) and Director (IH) attended the session. The delegation was assisted by officials from the Permanent Mission of India to UN agencies at Geneva.

During the EB Session, discussions were held on many important agenda items. India actively participated in the discussions and strongly raised its views on the agenda items having greater significance for India; such as SSFFC Medical Products, Health and the Environment – addressing the health impact of air pollution, global strategy and plan of action on public health, innovation and intellectual property, follow-up of the report of the Consultative Expert Working Group on Research and Development: Financing and Coordination, Framework of engagement with non-State actors, Anti-Microbial Resistance.

The 137<sup>th</sup> Session of the Executive Board of WHO was held in May, 2015 at Geneva.

- (ii) **World Health Assembly:** The World Health Assembly (WHA) is the most important annual event of the World Health Organization. The WHA is held once every year and deliberates various draft resolutions/decisions that are put up for its approval by the Executive Board of WHO. It is the highest policy making body of World Health Organization where all member countries are represented by high-level delegations.

A delegation from India, led by Hon'ble Minister of Health & Family Welfare, was deputed to attend the Commonwealth Health Ministers Meeting (CHMM) {17 May, 2015} and 68<sup>th</sup> World Health Assembly (WHA) at Geneva during 18<sup>th</sup> – 26<sup>th</sup> May, 2015. The delegation was assisted by officials from the Permanent Mission of India to the UN Agencies at Geneva.

The theme of the Commonwealth Health Ministers Meeting 2015 was '*Universal health coverage, with an emphasis on ageing and good health*'. The Hon'ble Minister of Health & Family Welfare addressed the Commonwealth Health Ministers Meeting and outlined the approaches being negotiated by India on achieving the objectives of Universal Health Coverage.

The 68<sup>th</sup> session of the World Health Assembly, which is the highest policy making body of the World Health Organization, took place in Geneva from May 18<sup>th</sup> – 26<sup>th</sup>, 2015.

It was after a gap of 19 years that India assumed the Presidency of the World Health Assembly this year. As head of the delegation from India, the Hon'ble Minister of Health & Family Welfare was elected the incoming President of the Assembly and steered the WHA Plenary meetings,



*(Shri Jagat Prakash Nadda, Hon'ble Minister of Health & Family Welfare, as the President of the 68<sup>th</sup> World Health Assembly in Geneva during 18 - 26 May, 2015)*

General Committee meetings and other related proceedings at Geneva from 18<sup>th</sup> – 26<sup>th</sup> May, 2015. In his capacity as President of the Assembly, he addressed its plenary session on 18<sup>th</sup> May, 2015. In his Presidential remarks, he saluted the heroic efforts of our African brothers and sisters in fighting Ebola against all odds and congratulated Liberia for becoming Ebola free. He expressed solidarity of the WHO Member States and offered heart-felt condolences to the bereaved families and the people of Nepal who suffered a devastating earthquake. He highlighted the important opportunity the World Health Assembly provides every year to the Member States to take stock of the health challenges faced by humanity, while at the same time, prioritizing and strategizing our combined efforts. The Hon'ble Minister, while congratulating the Member States for taking pride in a fair amount of success in meeting the health related MDGs, underscored the need to redouble our efforts to surmount ever increasing public health challenges. The plenary session of the Assembly was addressed, among others, also by Dr. Angela Merkel, the German Vice Chancellor. The theme of general discussion in the plenary of the Assembly was "Building Resilient Health Systems".

The business sessions of the Assembly were conducted in two Committees, Committee A and Committee B. India, in close coordination with the Permanent Mission of India to the UN agencies at Geneva, actively participated in discussions and made focussed interventions on the important agenda items both before Committee A and Committee B, highlighting the country positions as well as its concerns and suggestions for a constructive way forward.

**Some of the significant outcomes of the 68<sup>th</sup> World Health Assembly are as follows:-**

- Adoption of a Global Action Plan on Anti-Microbial Resistance (AMR), which prepares a blueprint with specific actions and timelines for WHO as well as Member States to address the growing threat of AMR. The UN General Assembly is expected to hold a High-level Segment on AMR in 2016 to further highlight the need for comprehensive implementation of the Plan.
- Adoption of a resolution on health and the environment – Addressing the health impact of air pollution, India asserted that air pollution and its adverse health impacts are inextricably linked to socio-economic factors and the strategies that ignore the socio-economic dimensions of air pollution carry the risk of further worsening the existing health inequities. Vast differences exist in capacities and resources of countries, while dealing with health impacts of air pollution. Wide-scale, sustained adoption of clean air technologies needs huge investment. The need for global partnership to facilitate transfer of technology and mobilize adequate resources, therefore, is extremely important. India also forcefully argued that addressing the climate change goals remains within the mandate, principles and provisions of the UN Framework Convention on Climate Change and must be pursued through this Convention and the relevant institutional arrangements.
- India emphasized that the draft resolution on this agenda needed to reaffirm commitment to promote, facilitate and finance, as appropriate, access to and the development, transfer and diffusion of environmentally sound technologies, particularly clean air technologies and corresponding know-how in particular to developing countries (based on Rio+20 Declaration). The final resolution adopted reflected the concerns raised by India, supported by many other developing countries.
- Extension of the implementation timeframe of the Global Strategy & Plan of Action (GSPOA) on Public Health Innovation & Intellectual Property. India supported a draft resolution on the subject since the proposed extension of Global Strategy & Plan of Action until 2022 would lead to investment in resources with implications for innovation, research and development.
- Significant progress was made on the negotiations on the draft Framework of engagement with non-state actors, i.e. NGOs, philanthropic foundations, academic institutions and private sector entities. India considers this item as very important, since we would like to see WHO work as per its constitutional mandate, without compromising its inter-governmental nature, while engaging with non-state actors. India has always forcefully argued about the issues of transparency, conflict of interest, the process of risk assessment, risk management and due diligence, policy on hosted and external partnerships, criteria and definition of “arm’s length” in the context of non-state actors, acceptance of personnel

and staff secondments from non-state actors, evidence generation, due diligence process to be in public domain etc.

- The Assembly endorsed the Director General's action plan to strengthen the emergency response capacities of WHO and approved a 8% increase in WHO's programme budget for 2016-17.
- The Assembly adopted a decision on the 2014 Ebola virus out-break and follow-up to the Special Session of the Executive Board on Ebola and agreed on a set of actions related to interim assessment, International Health Regulations (2005), Global Health Emergency Workforce, Contingency Fund, Research & Development, Health systems strengthening and the way forward.

India played a constructive role in the adoption of the decision on follow-up to the Special Session of the Executive Board on Ebola as well as the resolutions on AMR and air pollution and also co-sponsored the resolution on GSPOA. The important resolutions adopted by the Assembly included resolutions on (i) Programme budget 2016–2017, (ii) Global technical strategy and targets for malaria 2016–2030, (iii) Poliomyelitis, (iv) Yellow fever risk mapping and recommended vaccination for travellers, (v) Recommendations of the Review Committee on second extensions for establishing National Public Health Capacities and on IHR Implementation, (vi) Global vaccine action plan, (vii) Global action plan on anti-microbial resistance, (viii) Health and the environment: addressing the health impact of air pollution, (ix) Framework of engagement with non-state actors, (x) Global strategy and plan of action on public health, innovation and intellectual property and (xi) Global burden of epilepsy and the need for coordinated action at the country level to address its health, social and public knowledge implications.



*Shri Jagat Prakash Nadda, Hon'ble Minister of Health & Family Welfare with Dr. Margaret Chan, Director General, WHO in Geneva during 68<sup>th</sup> World Health Assembly*

As President of the World Health Assembly, the Hon'ble Minister of Health & Family Welfare hosted a Reception for all Member countries of WHO on 19 May, 2015 and also used the occasion to host a photo-exhibition on 'Yoga for All, Yoga for Health', at the UN Building, Geneva. The photo-exhibition on Yoga was jointly inaugurated by the Hon'ble Minister with the Director-General of WHO, Dr. Margaret Chan. On this occasion, Dr. Chan spoke very highly of Yoga as a holistic system of purification of body and mind. This was an important event on Yoga in pursuance of the adoption by the UN General Assembly resolution last year that declared June 21 as the International Day of Yoga.

During his Presidential address on 18 May, 2015 in the plenary session of the Assembly, the Hon'ble Minister of Health & Family Welfare re-iterated India's strong commitment to WHO and its mandate and announced the following voluntary contributions to WHO:-

- One million US Dollars for the proposed WHO contingency fund;
- One million US Dollars for the implementation of the identified research &

development demonstration projects under the Consultative Expert Working Group (CEWG) framework and

- One hundred thousand US Dollars for the Member State Mechanism on SSFFC medical products.

All these projects are strategically important, from a long term perspective, to improve the global drug exports of India and facilitate a stronger foothold for India in the global health policy and research environment.

The Hon'ble Minister of Health & Family Welfare led the Indian delegation at the 8<sup>th</sup> NAM Health Ministers meeting and BRICS Health Ministers meeting that were held on the side-lines of the Assembly. He also participated in the ministerial side event on anti-microbial resistance, in the informal meeting with the Ministers of Health of Guinea Worm affected countries and also in the event on Autism Spectrum Disorders: From Resolution to Global Action.

- (iii) **Meeting of Regional Committee of WHO for South East Asia Region:** The Regional Committee (RC) meeting of WHO-SEAR countries is held annually. The Regional Committee is a forum to review progress made on health issues in the region and to lay down the roadmap for future action.

The sixty-eighth Session of the WHO Regional Committee for South-East Asia was held in Dili, Timor-Leste from 7<sup>th</sup> – 11<sup>th</sup> September, 2015. It was attended by representatives of all 11 Member States of the Region, United Nations and other agencies, Non-governmental Organizations having official relations with WHO and observers. A delegation from India attended the session. Some of the important agenda items discussed during this Session were as follows:-

- Programme Budget 2016–2017 - Strategic budget space allocation;

- Governance reform - Framework of engagement with non-state actors;
- Response to emergencies and outbreaks;
- Anti-microbial resistance;
- Selected neglected tropical diseases targeted for elimination: kala-azar, leprosy, yaws, filariasis and schistosomiasis;
- Adapting and implementing the End TB Strategy in WHO South-East Asia Region;
- Patient safety contributing to sustainable universal health coverage;
- Prevention and control of Cancer – the way forward;
- Measles elimination and Rubella/CRS control in SEAR by 2020;
- Challenges in Polio eradication;
- Health intervention and technology assessment in support of universal health coverage;
- Effective management of medicines;
- Regional strategy on health information systems and
- Consideration of the recommendations on strengthening community based healthcare services.

**The following Ministerial Round Tables were also organized during the RC meeting:-**

- Accelerating implementation of the WHO FCTC in the South-East Asia Region;
- Strengthening health workforce in South-East Asia in order to expand delivery of effective services and
- Health in the post-2015 development agenda.

**During the Session, the Regional Committee adopted the Dili Declaration on Tobacco Control and resolutions on the following subjects:-**

- Programme Budget 2016–2017;
- Response to emergencies and outbreaks;
- Anti-microbial resistance;
- Patient safety contributing to sustainable universal health coverage;
- Cancer prevention and control—the way forward and
- Community-based health services and their contributions to universal health coverage.

### **10.2.2 Government of India contribution to WHO**

As a member country of WHO, India makes regular contribution to WHO for each biennium. A WHO biennium commences in January of the first year of the biennium and ends in December of the second year of the biennium.

The Assessed Contribution payable by Government of India to WHO is decided on the basis of UN Scale of Assessment. For the biennium 2014 – 2015, the scale of assessment for India has been revised from the existing scale of 0.5340 to 0.666. India's Assessed Contribution for the biennium 2014–2015 stands at USD 15,46,785 + CHF 14,50,884 and Voluntary Contribution of USD 55,000 and USD 35,000 towards the WHO/UNICEF/UNDP/World Bank's Special Programme for Research & Training in Tropical Diseases Research (TDR) and UNDP/UNFP/WHO/World Bank Special Programme of Research, Development & Research Training in Human Reproduction (HRP) respectively.

India has remitted Euro 7,61,000 towards membership fee to International Agency for Research on Cancer (IARC), Lyon, France for the year 2015.

### **10.3 AIRPORT/PORT HEALTH ORGANIZATIONS AND AIRPORT AND BORDER QUARANTINE CENTRE**

**Points of Entries (PoEs):** Airport Health Organization, Port Organizations and Airport & Border Quarantine Centre (APHOs/PHOs/ABQC) are subordinate offices of the Directorate General of Health Services. At present, there are 10 PHOs and 10 APHOs established at major International Airports and Ports and one Border Quarantine Centre at Attari Border, Amritsar. An EFC proposal has been approved for strengthening 21 existing Health Offices (10 APHOs, 10 PHOs and 1 ABQC) and to establish new Health Offices at 23 POEs (15 Airports, 2 Ports and 6 Airports and Border Crossings) in order to make India compliant with the International Health Regulations 2005.

Health units at international Points of Entry (POE) are statutory organizations, discharging the regulatory functions as delineated under the India Aircraft (Public Health) Rules, 1954 and Port Health Rules, 1955 respectively. The main objective of the APHO/PHO is to prevent the spread of infectious disease of epidemic proportions from one country to another, with minimum interference to world traffic. Some of the important routine functions of these organizations are:

- Screening of International Passengers for yellow fever disease;
- Quarantine;
- Clearance of Dead Bodies;
- Supervision of Airport Sanitation;
- Vaccination to International Passengers;
- Food Hygiene and
- Vector Control etc.

Apart from this, issuance of various documents/certificates (like Ship Sanitation Control Certificate) is another major responsibility at

International Ports. All travellers coming to India from WHO notified Yellow Fever endemic countries are required to possess valid Yellow Fever (YF) Vaccination Certificate, failing which, such passengers are quarantined for a maximum period of six days.

In addition, these health units are the first line for surveillance and response during the time of any Public Health Emergency of International Concern (PHEIC). Important activities undertaken for making POEs IHR compliant are:-

- Revision of Indian Aircraft (Public Health) Rules, 1954 and Port Health Rules, 1955 in tune with IHR (2005) is in final stages of approval;
- Development of Public Health Emergency Contingency plans for dealing with Public Health Emergency of International Concern (PHEIC) as per all hazards approach under IHR (2005);
- Designation of APHOs/PHOs/ABQC as Designated Officers (DOs) under the Food Safety & Standards Act 2006. These DOs have been provided training on registration, inspection and issuance of licenses to various Food Business Operators (FBOs). In addition, APHOs/PHOs are also undertaking surveillance of VIP Food;
- Capacity building is being undertaken at all POEs with the help of experts, in order to develop competencies for undertaking specific health measures for various events including Radio Nuclear, Chemical, Atomic and Zoonosis;
- Number of Yellow Fever vaccination centers have been increased to 34;
- Internal assessment of POEs for core capacities has been undertaken in line with IHR;
- The Public Health Emergency Contingency Plans (PHECP) have been implemented

during the current PHEIC (Ebola Virus Disease). The plans have been reviewed with inputs from all stakeholders and revised as per lessons, experience and best practices and

- Assessment of the international land borders for development of health units has been done in coordination with Land Port Authority of India (MHA). Two ICPs (Agartala and Petrapole) are being equipped with health manpower during the current year.

**Important activities undertaken at the POEs for early detection and prevention of spread of events with significant public health risk:-**

- Screening of international travelers for MERS-CoV (including Haj Pilgrims), enlisting the contacts, quarantine of symptomatic travellers, sample collection and referral to designated isolation health facility. These activities are continuing since 2013.
- In view of the declaration of Ebola Virus Disease outbreak in West African countries as PHEIC by DG, WHO various measures were undertaken at international airports and ports as per the recommendations of Joint Monitoring Group (JMG). These measures include screening of international travelers arriving from West African countries affected with Ebola Virus Disease, enlisting the contacts, quarantine of symptomatic travelers, sample collection, referral to designated isolation health facility and conveyance disinfection etc. have been continuing since August, 2014. Health screening was being undertaken at 18 international airports till November, 2014. At present, the screening is being done at 7 designated airports.
- Surveillance of international travelers arriving from Polio affected countries (including vaccination).

## Port Health Organization (PHO) (2015-16)

Sl. No.	PHO, Marmagoa	PHO, Chennai	PHO, Vishakhapatnam	PHO, Kolkata	PHO, JNPT Sheva	PHO, Mumbai	PHO, Tuticorin	PHO, Cochin	PHO, Kandla
1	No. of Ships Arrived	434	2598	1550	NA	2318	1172	1370	1634
2	No. of ships given health clearance	Nil	1669	1550	2812	2303	1172	1370	1634
3	No. of ships given free Pratique	Nil	1669	1064	1370	117	1050	1342	530
4	No. of Ships given Radio Free Pratique	Nil	Nil	0	Nil	Nil	1018	28	903
5	No. of Ships quarantined	Nil	Nil	0	Nil	Nil	0	Nil	88
6	No. of ships disinfected	Nil	Nil	59	Nil	16	16	19	404
7	No. of ships issued Sanitary Control Certificate	Nil	1	0	Nil	Nil	3	105	19
8	No. of ships issued Sanitary Control Exemption Certificate	71	124	0	189	126	195	26	677
9	No. of Yellow Fever Vaccinations given	1495	5433	1826	4242	Nil	0	67	1204
10	No. of Sanitary Inspections	NA	360	56	290	Nil	4	6460	Monthly
11	No. of Imported food samples lifted	120	N/A	0	Nil	Nil	0	NA	2
12	No. of Water samples lifted	4	20	0	16	Nil	0	14	2
13	No. of Imported Edible Oil samples lifted	13	N/A	0	Nil	Nil	0	NA	271
14	No. of Dead Bodies given clearance	35	Nil	2	1	Nil	0	Nil	2
15	No. of Entomological surveys undertaken	4	2	0	2	2	2	3	Weekly
16	No. of Medical Chests inspected	11	14	50	26	15	42	43	88
17	No. of passengers medically examined	26573	29604	23688	12058	Nil	19847	0	120452
18	No. of crew medically examined	22862	Nil	0	58287	Nil	30663	1596	53979
19	No. of medical emergencies attended	Nil	Nil	0	Nil	Nil	0	0	17
20	No. of Rodent Screening of Ships from Plague Endemic Areas	Nil	290	153	Nil	Nil	208	198	1370

PHO- Port Health Organization

N/A- Data Not Available

NIL- Data is Nil



## Airport Health Organization (APHO) (2015-16)

Sl. No.	APHO, Delhi	APHO, Bengaluru	APHO, Hyderabad	APHO, Thiruchirappally	APHO, Kolkata	APHO, Mumbai	APHO, Chennai	APHO, Cochin	APHO, Ahmedabad	APHO, Trivandrum
1	Flights Arrived/ Inspected	NA	7323	3663/900	7105	21558	14597	13716	NA	6596
2	Aircrafts Disinfected	Nil	7323	3663	7073	21558	12668	1		5984
3	Surveillance of International Passengers and Crew for YF	All crew and passengers from Yellow Fever (YF) affected countries	1153191	Yes	Yes (Done by the immigration)	16	1846697	NA		Nil
4	Quarantine of Passengers	150	Nil	Nil	N/A	19	NA	47		4
5	Yellow Fever Vaccinations	NA	Nil	Nil	1251	11000	NA	Nil		NA
6	Clearance of Dead Bodies	101	384	274	123	594	454	530		488
7	VVIP Food Surveillance	3	1	Nil	14	Nil	NA	NA		NA
8	Medical and Flight Emergencies	6	Nil	10	7	Nil	NA	NIL		NA
9	Vector Surveillance	1	Nil	For Aedes Egypti done	1737	Pre and Post monsoon survey has been done by RHO Pune	Being carried out with FWs	NA		NA
10	Sanitary Inspection	w.e.f May 2015, 26	NA	23	1743	Nil	NA	12		NA
11	Food Establishments Inspected	w.e.f May 2015, 24	NA	Nil	40	24	92	Done by FSSAI		NA

NA- Data not available

NIL- Data is Nil

**Airport and Border Crossings 2015-16**

Sl. No.		Border Crossing, Amritsar
1	No. of International Flights	2025
2	No. of International Trains	89
3	No. of International Buses	463
4	No. of Patients Attended	1085
5	No. of Passengers Quarantined	Nil
6	No. of Sanitary Inspections	20
7	No. of Dead Bodies Cleared	250
8	No. of Mock Drills for Emergency	2
9	No. of Flight Emergencies	Nil
10	No. of Emergencies ICP at Attari	35

NA- Data not available NIL- Data is Nil

**10.4 CUSTOM DUTY EXEMPTION CERTIFICATE**

During 2015-16 (upto 31<sup>st</sup> December, 2015), this Ministry has issued one time Customs Duty Exemption Certificates in favour of:

- (i) ESIC Hospital, Sanath Nagar (Telangana), under the control of the Ministry of Labour & Employment, Shram Shakti Bhawan, Rafi Marg, New Delhi - 110001 and
- (ii) Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER), Dhanvantri Nagar, Puducherry – 605 006.

**10.5 VISIT ON FELLOWSHIP/ CONFERENCE ABROAD**

During 2015-16 (upto 31<sup>st</sup> December 2015), 135 medical personnel were permitted to participate

in international conference/symposia etc. abroad, including 22 medical personnel from CHS cadre who were granted financial assistance subject to a maximum of Rs. 1 lakh each under CHS Assistance Scheme to attend seminars /conferences abroad in order to acquaint themselves with the latest developments in the field of medicine and surgery in other countries and to exchange views with their counterparts.

**10.6 AGREEMENTS/MOUs (UPTO 31<sup>st</sup> DECEMBER, 2015)**

- A Memorandum of Understanding (MoU) between All India Institute of Medical Sciences (AIIMS, New Delhi), Indian Council of Medical Research (ICMR, Department of Health Research), Department of Bio-technology under the Government of India and the National Cancer Institute (DHHS) of the Government of USA on cooperation in the field of Cancer Research, Prevention, Control and Management was signed on 25<sup>th</sup> June, 2015.
- A Memorandum of Understanding (MoU) between Indian Council of Medical Research (ICMR, Department of Health Research), under the Government of India and the Centers for Disease Control & Prevention (CDC) of the Government of USA on cooperation in Environment & Occupational Health and Injury Prevention & Control was signed on 25<sup>th</sup> June, 2015.
- A Letter of Intent (LoI) between Indian Council of Medical Research (ICMR, Department of Health Research), Department of Bio-technology under the Government of India and the National Institute of Allergy & Infectious Diseases (NIAID) of the Government of USA on cooperation in the field of Anti-microbial Resistance was signed on 25<sup>th</sup> June, 2015.

## 10.7 MEETINGS/CONFERENCES (UPTO 31<sup>st</sup> DECEMBER, 2015)

- 5<sup>th</sup> meeting of the South Asian Association for Regional Cooperation (SAARC) Health Ministers, preceded by meetings of the SAARC Technical Committee on Health and Population Activities, SAARC Expert Group on HIV/AIDS and SAARC Senior Officials (Health Secretaries), were held in New Delhi on 6<sup>th</sup> – 8<sup>th</sup> April, 2015 and the Health Ministers also adopted “Delhi Declaration on Public Health Challenges”;
- On the side-lines of 5<sup>th</sup> meeting of the SAARC Health Ministers, Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare also held bilateral meetings on 8<sup>th</sup> April, 2015 with the Health Ministers of Afghanistan, Maldives, Nepal and Pakistan in New Delhi to discuss issues of Health cooperation;
- A meeting between Officers from the Swedish Health Ministry and Indian Healthcare Government Officials led by Additional Secretary (Health) to discuss various bilateral Health issues was held in New Delhi on 15<sup>th</sup> April, 2015;
- A meeting between Ms. Melinda Gates, Co-Chair, Bill & Melinda Gates Foundation and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare to discuss possible collaboration in the field of health was held in New Delhi on 20<sup>th</sup> April, 2015;
- A call on meeting between H.E. Dr. Mohammad Ashraf Ghani, President of Afghanistan and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare was held in New Delhi on 28<sup>th</sup> April, 2015;
- A meeting between H.E. Mr. Raymond Tshibanda N’Tungamulongo, Minister of Foreign Affairs of Democratic Republic of Congo and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare to discuss bilateral health issues was held in New Delhi on 15<sup>th</sup> May, 2015;
- 1<sup>st</sup> meeting of the Joint Working Group (JWG) constituted under the Memorandum of Cooperation signed between India and Japan on cooperation in the field of Healthcare was held in New Delhi on 12<sup>th</sup> June, 2015;
- A meeting between H.E. Mr. Daniel Gustavo Gollan, Minister of Health of the Republic of Argentina and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare to discuss bilateral Health issues was held in New Delhi on 21<sup>st</sup> July, 2015;
- A meeting between Dr. Thomas R. Frieden, Director, US Centers for Disease Control & Prevention (CDC), Department of Health & Human Services, USA and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare to discuss progress on Indo-US bilateral cooperation in Health was held in New Delhi on 11<sup>th</sup> August, 2015;
- 1<sup>st</sup> meeting of the Joint Working Group (JWG) constituted under the Memorandum of Understanding signed between India and Indonesia on cooperation in the field of Health was held in New Delhi on 12<sup>th</sup> August, 2015;
- A meeting between Hon’ble Health Minister of Bangladesh and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare to discuss bilateral Health issues was held in New Delhi on 28<sup>th</sup> August, 2015;
- A meeting between Hon’ble Health Minister of Haiti and Secretary (Health & Family Welfare) to discuss bilateral Health issues was held in New Delhi on 28<sup>th</sup> August, 2015;

- A delegation led by Shri B. P. Sharma, Secretary (Health & Family Welfare) participated in the “*India-USA Health Dialogue and the India-USA Strategic & Commercial Dialogue*” in Washington DC, USA during 16 – 22 September, 2015;
- 1<sup>st</sup> meeting of the Joint Working Group (JWG) constituted under the Memorandum of Understanding signed between India and the Netherlands on medical cooperation was held in New Delhi during 28<sup>th</sup> – 30<sup>th</sup> September, 2015;
- A delegation led by H.E. Mr. Francois Lounceny Fall, Minister of Foreign Affairs and Guineans Abroad made a courtesy call on Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare in New Delhi on 26<sup>th</sup> October, 2015;
- A meeting between H.E. Dr. Riak Gai Kok, Health Minister of South Sudan and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare to discuss bilateral health issues was held in New Delhi on 27<sup>th</sup> October, 2015;
- A meeting between H.E. Dr. Abubakarr Fofanah, Minister of Health & Sanitation of the Republic of Sierra Leone and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare to discuss bilateral Health issues was held in New Delhi on 29<sup>th</sup> October, 2015;
- A meeting between H.E. Dr. Chitalu

Chilufya, Deputy Health Minister of Zambia and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare to discuss bilateral Health issues was held in New Delhi on 30<sup>th</sup> October, 2015;

- A meeting between Ms. Yoriko Yasukawa, Asia Pacific Regional Director for UNFPA and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare was held in New Delhi on 03<sup>rd</sup> November, 2015 and
- A meeting between Mr. Bill Gates, Chairman, Bill & Melinda Gates Foundation, USA and Shri J. P. Nadda, Hon’ble Minister of Health & Family Welfare was held in New Delhi on 4<sup>th</sup> December, 2015.

### **10.8 PERMISSION FOR INTERNATIONAL CONFERENCES**

In the year 2015-16 (upto 31<sup>st</sup> December, 2015), permissions were granted to 172 Organizations/ Institutions for holding Health related International Conferences in India.

### **10.9 ISSUE OF STATEMENT OF NEED (SON) CERTIFICATE AND EXCEPTIONAL NEED CERTIFICATE (ENC)**

In the year 2015-16 (upto 31<sup>st</sup> December, 2015), 959 applicants were issued Statement of Need (SON) Certificate and 17 applicants were issued Exceptional Need Certificate (ENC) for undergoing higher studies/training in the USA on J-1 visa in medical specialities/super-specialities.