

India Country Intervention

RC71, 03 September, 2018

New Delhi, India

Thank you Chair,

India firmly believes in the objective of attainment by all peoples, of the highest possible level of health, where health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

In this direction, we have recently adopted the National Health Policy 2017 with the aim to provide 'affordable healthcare for all'. This furthers the government's core belief of "Sabka Saath – Sabka Vikas" – Partnership with all and Development for all.

India has come a long way today. Sustained efforts have led to eradication of polio, and elimination of maternal and neonatal tetanus and yaws. Efficient management of HIV/AIDS coupled with higher rate of decline in U5 mortality and MMR vis a vis global average has been achieved by focusing on health systems and working in a mission mode with convergence. We have kept before ourselves an ambitious target of ending malaise of TB by 2025, much before the mandated 2030.

We recognized our main challenges to be low financial protection and high out of pocket (OOP) expenditure, shortage of doctors and specialists particularly in rural areas, burden of communicable diseases, vector borne diseases including neglected tropical diseases, TB and a high risk of premature death due to NCDs. However, we are addressing these challenges with ambition and vigour and accordingly there is a shift in policy paradigm and programmatic interventions.

Placing patients at the center of healthcare, we are trying to move from curative care to wellness (preventive and promotive).

Hon'ble Prime Minister of India Mr. Narendra Modi announced 'Ayushman Bharat' i.e. Long Live India- in this year's annual budget and launched the program during

this year's independence address to the Nation on 15th August, 2018 that will accelerate India's march towards Universal Health Coverage.

This programme has two components.

Strengthening of Primary Health services through **Health & Wellness Centers**. A hundred and 50 thousand Sub Centres & Primary Health Centres are being transformed as Health & Wellness Centres (HWCs) to provide Comprehensive Primary Healthcare services close to the community. The first was launched on 14th August.

The second is provisioning of Secondary and Tertiary Services through **Pradhan Mantri Jan Aarogya Yojana**. This is the largest public funded health protection scheme of the world – and aims to protect 107.4 million poor and vulnerable families (approx. 500 million beneficiaries) by providing coverage up to Rs. 500 thousand per family per year for secondary and tertiary hospitalization per year. This will protect a huge population from catastrophic healthcare spending and impoverishment. The launch is in September.

Mr Chair,

The spate of recent global public health emergencies has highlighted the need for greater public health preparedness and co-ordinated response. A robust response system is required to address the existing and emerging challenges. And we welcome the Regional Efforts in strengthening not only response and recovery but also preparedness. Strengthening of Emergency Medical Teams is a move in the right direction.

India continues to invest in strengthening and building IHR core capacities and we have reaped the benefits of strengthened surveillance, enhanced laboratory capacity and multi sectoral approach to successfully contain outbreaks, including the latest Nipah outbreak in Kerala which was localized and contained. We have collaborated with member states in providing needed services as and when asked and will continue to do so.

Distinguished delegates,

To touch upon briefly on human resource for health care institutions, we are going to establish 15 more All India Institutes of Medical Sciences which would take their number to 22 as institutes of excellence for teaching, patient care and research.

A uniform entrance examination for admission to all medical seats in the country viz. National Eligibility cum Entrance Test (NEET) has been introduced and we are now holding common counselling for entrance to all medical seats.

I am pleased to share that with 499 medical colleges, India has the distinction of the highest number of medical colleges in the world. The annual intake capacity stands at over 70,000 MBBS seats. We have been able to add 118 new medical colleges in the last 5 years with an addition of 18600 MBBS seats. The number of PG seats have shown a greater proportionate increase from around 33,000 to 46,000 during the same period.

We would be happy to strengthen our existing collaborations for more short-term and long-term trainings for member states of the Region.

As we move from Millennium Development Goals (MDGs) towards Sustainable Development Goals (SDGs), a paradigm shift in WHO's technical support to countries is also warranted.

Apart from technical support, we request Regional Office to assist member states in terms of working out a strategy for accessible and affordable medicines, point of care diagnostic devices and vaccines, with focus on new technologies and innovations in the sector.

Before concluding, I would like to highlight that "Digital Health" has a huge potential for supporting UHC and improving accessibility, quality and affordability of health services. I take this opportunity to thank all our member states for their unanimous support in consideration and adoption of the first WHO resolution on Digital Health initiated by India. We are happy with the prioritization of data and innovations in the

13th GPW and would request the Regional Director to ensure that the Region takes the lead in the area of Digital Health.

I reaffirm our country's commitment to Health for All and look forward to working with nations of our region.

Thank you!