HEALTH
INNOVATION IN NUTRITION AND SERVICE DELIVERY

INTENSIFY PRIVATE SECTOR ENGAGEMENT TO END MALNUTRITION, DRASTICALLY REDUCE STUNTING & WASTING AND MATERNAL & CHILD MORTALITY, BY 2030

THE CHALLENGE

India is home to 1/3rd of the world’s stunted children. 38.4% of children under 5 years of age are stunted (height-for-age), and 21% are wasted (weight-for-age).

The government target is to reduce the infant mortality rate (IMR) from 37.9 deaths per 1,000 live births to 28 by 2019. The current World IMR is 31.7.

The government aims to reduce the maternal mortality ratio (MMR) from 174 deaths per 10,000 live births to 100 by 2018-20. The current World MMR is 216.

The double burden of malnutrition is characterised by the coexistence of undernutrition along with overweight and obesity, or diet-related noncommunicable diseases. 22.9% of women and 20.2% of men have a below-normal body mass index. 20.7% of women and 18.6% of men are overweight or obese.

In India, public expenditure on health as a share of the GDP, at 1.41%, is around the same as the South Asian average (1.37%) and substantially lower not only than the world average (5.99%) but also than sub-Saharan Africa (2.32%)

THE OPPORTUNITY

Spark a digital revolution in healthcare, for instance through devices like Amazon’s Echo, a voice-driven computer that can guide users through CPR and answer health queries by plugging into an artificial intelligence-powered “virtual physician” platform, HealthTap.

Incubate start-ups that are creating apps, predictive diagnostics systems and new devices that are working on innovative solutions in the health care value chain, especially in underserviced areas.

Reduce the productivity losses (estimated at 11% of gross national product per year) caused by various forms of malnutrition.

Government has a target of increasing public health expenditure to 2.5% by 2020.

Ongoing/Announced Government Initiatives

Mahila Shakti Kendras (allocation-Rs. 500 crore) set up in 14 lakh ICDS anganwadi centres to provide support services to rural women in health and nutrition, among others.

Under the maternity benefit scheme, Rs. 6000 is transferred directly to bank accounts of pregnant women who opt for institutional deliveries and vaccinate their children.

The proposed launch of the National Health Protection Scheme (NHPS) from April 2017 will provide annual financial cover of up to Rs. 100,000 per household for the poor and vulnerable.
POTENTIAL AREAS OF FOCUS

- **Untapped potential** in the health care sector for products and services
- **Leverage** logistic, supply chain and marketing expertise to help improve health systems
- **Partner** with government agencies to efficiently deliver vital medicines and medical supplies, and market the availability of these supplies, thereby creating demand
- **Ensure right composition of nutrients** in high-selling food products for non-communicable diseases such as diabetes, hypertension, etc.
- **Appropriate consumer education and promotion of nutritious products** to help caregivers make informed choices

HEALTH START-UPS

China saw its two largest venture capitalist investments in digital health care last year. One went into a Chinese medical service app, Ping An Good Doctor, which raised US$500 million, and the other to a video consultation app called Chunyu Yisheng, which raised US$183 million.

In India, the Pune-based LiveHealth is an app that lets patients store all their health records in one place, see test results, and communicate with doctors.

SERVICE DELIVERY TO LOW-INCOME HOUSEHOLDS

LifeSpring Hospitals committed to expand access to affordable, high-quality maternal and child health care to low-income families in India by opening 200 hospitals by 2015 and serving 82,000 women. Until now, LifeSpring Hospitals has delivered more than 7,000 babies, and its doctors have treated over 100,000 outpatient cases at the hospital chain’s nine clinics.