

Anna Riby, Shampa Bari & Cécilia Wismar, Swecare, Sweden



The mission of Swecare still remains: to support active collaboration with other countries to foster co-creation and trade, but also to share Swedish experience and knowledge Shampa Bari

03.06.2019

Tags: [Sweden](#), [Investment](#), [Swecare](#), [Internationalization](#), [Association](#)

Swecare Foundation is a

platform where academia, public sector actors, and the private sector come together to promote the internationalization and export growth of Swedish healthcare and life sciences. Anna Riby, regional director East Asia, Shampa Bari, regional director South Asia and Cécilia Wismar, office manager/CEO assistant, explain how the foundation builds bridges internationally, the perception of Swedish life sciences abroad, the areas in which Sweden is especially high-performing, and highlight success stories in Africa, the Middle East, and Asia.

Please introduce Swecare.

Anna Riby (AR): Swecare is a public-private foundation dedicated to enhancing the exports and internationalization of Swedish healthcare and life sciences companies. The Swedish Ministry of Health and Social Affairs and Ministry of Foreign Affairs sit on our board, together with representatives from academia and the industry. This triple-helix structure is what makes Swecare unique. We are also a cross-sectoral organization as our members not only include companies and institutions from the healthcare and life sciences sector but also architectural firms, consultants, lawyers, and so on. Swecare gathers all of these actors on one common platform.

Swecare was formed in 1978 by the Ministries of Health and Social Affairs, Foreign Affairs, and of Enterprise together with the Association of Regions and Local Governments, the Swedish Trade Council and some 10 companies, in order to answer an international demand for building turnkey hospitals, often with development aid funding.

Shampa Bari (SB): That type of project funding is no longer supported by Swedish development aid, but the mission of Swecare still remains: to support active collaboration with other countries to foster co-creation and trade, but also to share Swedish experience and knowledge. As the organization is directly funded and mandated by the government, we act as the nodal point for all the public and private actors wishing to build collaborations and partnerships in foreign countries.

How do you help your members build collaborations abroad?

AR: We take companies by the hand, show them to a new market that we think could be interesting for them, and introduce them to all the relevant stakeholders from the highest level of government down to possible distributors and customers. However, Swecare does not get involved in the business side of the equation. When it comes to negotiating contracts, companies take the lead and can, if necessary, solicit the help of Business Sweden and other consultants.

For example, we started working in Zambia, a growing market, as part of a Sida-funded project called 'Business for Development'. Before we started, there were almost no Swedish solutions in the country. We showed companies how they could contribute their solutions and expertise to improve the Zambian healthcare system and organized multiple delegation trips so that they could meet the relevant people. Some companies now have distributors in Zambia, and a couple even opened offices. There have been discussions with Zambian authorities to set up a training facility there to serve all of Southern Africa.

SB: Our focus is on building relationships. We know our member companies – and which markets they are interested in – inside out. We cover many countries, including small developing countries like Zambia and economic powerhouses like China and India. In most countries, we have met the Minister of Health and understand their challenges, demands and strategies. In that way, we are able to advise our members by explaining what the country needs and how they should approach the market. More importantly, as an independent non-for-profit actor, we can advise our members not to enter a market if we think the timing or the opportunity is not right. India is a good example. In my opinion, some Swedish companies should not be thinking of entering India even though they might be enticed by the size of the market as it requires huge investments. This outsider, macro-

level perspective enables us to remain objective and give sound advice. We would lose this independence if we were to get too close to the contract.

Swecare's members include groups which already possess an extensive global presence such as AstraZeneca and Getinge. How do they benefit from their membership?

AR: I think, first of all, that they see us as a legitimate actor that represents the Swedish brand abroad. Moreover, even though they have an extensive international commercial network, they are not present everywhere and do not necessarily have access to high-level officials at the state level, especially in countries where access is restricted like China, or at multinational institutions such as the UN.

Cécilia Wismar (CW): As the former Swedish head of AstraZeneca, Jan-Olof Jacke remarked last year: “Even a company as big as ours is considered small in many countries. Having access to a small agile organization that has knowledge of healthcare systems around the world is very useful”.

SB: Moreover, being a member of Swecare shows their desire to be part of the Swedish life sciences network. For many years, AstraZeneca and Getinge have helped cultivate the local life sciences scene. For instance, AstraZeneca opened the BioVentureHub, a collaborative innovation ecosystem within its facilities where start-ups can gain access to the group's know-how and infrastructure. The company also donated the land behind its facilities to the city of Gothenburg where a science park is now being built. Similarly, Getinge moved its headquarters to Lindholmen Science Park. In that way, they can collaborate more closely with the start-ups developing the technologies of the future such as AI. Thanks in part to their contributions, the Swedish life sciences scene has burgeoned. As a result, the need for Swecare's services has grown.

How is the Swedish healthcare and life sciences sector perceived abroad?

AR: The Swedish healthcare and life sciences sector enjoys a good reputation abroad and is strongly associated with quality and innovation. Sweden ranks at the top in terms of innovation, and this is true also for the life science sector. One important reason for this is the tradition of cooperation between academia and public and private sector. Sweden is also synonymous with excellence in education and research, embodied e.g. by Karolinska Institutet. The institute's connection to the Nobel Prize of Physiology or Medicine is a major component of the prestige of

Swedish life sciences, especially in China.

More specifically, Swedish healthcare is associated with expertise in chronic disease management and elderly care as the country has had a long time to adapt to an ageing population. Finally, Sweden is also well-recognized in infection control and work to combat antimicrobial resistance thanks to our excellent Public Health Agency and the European Centre for Disease Prevention and Control located in the country.

SB: Sweden is also famous for its long-standing quality registries and biobanks which provide a unique source of health data that can be leveraged for research using machine-learning and AI technology. These assets are unique to Sweden and attract foreign researchers, especially from India. India is at the forefront of the development of AI technology and its researchers are interested in Sweden's data. Some of them have even established themselves in Sweden and started their own companies.

Sweden is also seen as world-leading in terms of sustainable healthcare with stringent procurement practices, waste management regulation, and energy consumption requirements. Swedish solutions can thus contribute to lowering the global healthcare footprint.

Swecare is now involved in the planning and preparations of the world exhibition Expo2020 in Dubai that will attract 25 million visitors. The Swedish pavilion has chosen to highlight life science as one of our top 5 prioritized sectors for the future. Swecare will aim to involve as many inspiring and interesting stakeholders possible to showcase our Swedish strongholds.

China is now the second largest export country for Sweden's life sciences. How active has Swecare been in China?

AR: We have been very active in China, regularly organizing delegation trips. China has also shown strong interest in Swedish life sciences. We regularly receive delegations from city or provincial authorities. However, it can sometimes be difficult to determine which collaboration opportunities are likely to be successful

China is especially interested in Sweden's expertise in elderly care. Expanding elderly care is a priority for the Chinese government as the population is ageing at an accelerated rate. In order to professionalize elderly care, the Chinese government is seeking international parties with which to collaborate.

2019 marks the ten-year anniversary of the Memorandum of Understanding (MoU) on Health between Sweden and India. How successful has this partnership been?

SB: The MoU on Health between Sweden and India is often touted as one of the most successful MoUs in the recent history of both Sweden and India. The two governments meet annually and share a close relationship as their priorities align in a significant way. This relationship has enabled our companies to receive the necessary support when navigating the Indian bureaucracy. Nevertheless, the impact on mutual trade and partnerships has not yet been as significant as we would wish. India is vast and the efforts made by Swedish companies and institutions have thus been diffused. We are now trying to see how we can focus our resources to one geographic location to showcase what makes Swedish healthcare successful.

At the suggestion of our Indian counterparts, we are now working on a project concentrated in a smaller city. The government aims to open a public university hospital in every state modelled after the All India Institute of Medical Sciences in New Delhi. In the last three years, eight hospitals have been built and are now operational. During the delegation trip last February, Minister of Health and Social Affairs Lena Hallengren visited the new AIIMS facilities at Jodhpur which has been selected for closer collaboration.

Some partnerships are already underway in infection control and antimicrobial resistance as well as chronic diseases. Bactiguard has been the most active Swedish company in India in the area of infection control. It not only offers products to fight against nosocomial infections but has also invested in nurse training. Right now, there are two companies interested in this project, but we hope to recruit at least five actors, both private and public, by the end of the year. If companies, institutions, ministries, and agencies can effectively work together on specific healthcare issues in defined geographic areas, this project could then serve as a model to emulate in other countries such as China.

Swecare is also very active in promoting trade with Africa where there are huge unmet medical needs. What can Swedish healthcare and life sciences organizations bring to Africa?

AR: In Africa, Sweden can propose many solutions suited for low-resource settings. African countries such as Rwanda actually share some of Sweden's challenges, such as lack of access to

primary care, especially in the sparsely populated countryside where there is a lack of human resources and distances to healthcare institutions are long. Just like in Sweden, the lack of human resources can be assuaged through digital solutions. For instance, in Rwanda, radiologists must travel between hospitals to analyse medical images. One Swedish company is helping them digitalize their imaging solutions. In other areas, these countries can learn from Sweden's experience and avoid repeating our mistakes. For instance, in Sweden, the regionalized healthcare system has led to gaps in access to services.

CW: Swecare has been working with East Africa for a number of years and this year the focus will be on Ethiopia, following previous trips to Kenya, Tanzania, Rwanda and Uganda with Business Sweden. The recent changes within the government have opened up opportunities within the healthcare sector including building and improving the e-health systems.

What will be the key success factors in the continuing internationalization of Swedish healthcare and life sciences?

SB: Collaboration between all Swedish actors is the key. Our role is to enable this collaboration by acting as "translators" as they do not necessarily speak each other's language, even though they are working towards the same goal.

AR: When it comes to research and development, there is already a strong collaboration between academia, government and industry that the innovative powerhouse of Sweden is built on. However, this is not yet the case when it comes to market development. Part of this can be explained by the fact that, in the beginning, companies are entirely focused on R&D and think the product is going to market itself. They often fail to realize the amount of time, effort and money it takes to market a product. Swecare must continue to work in helping them make the leap.

[See more interviews](#)