



# Operation **ASHA**

Fighting Tuberculosis Worldwide

ANNUAL REPORT 2012-13





[www.opasha.org](http://www.opasha.org)

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## WHY TREAT TB?

Tuberculosis is relatively simple and inexpensive to treat. Yet the disease spreads rapidly in poor settings, where people are least likely to have access to treatment. Inadequate treatment programs have led to the emergence of Multi-Drug Resistant TB (MDR TB) and Extensively Drug Resistant TB (XDR TB), now emerging as deadly and far-reaching epidemics.

In India and around the world, the benefits of treating TB extend far beyond the disease itself. Fighting TB is #6 in the Millennium Development Goals (MDGs), and current investments in TB have already helped to accelerate progress toward the MDGs overall by contributing directly to maternal and child health, reducing poverty, and addressing a major cause of death among people living with HIV.



**India**, where Operation ASHA focuses its work, has **4 million TB patients** - 25% of the world's total burden. 2 persons die of the disease every 3 minutes in India. On average, each patient infects 12 others before dying. The social stigma toward TB has its own consequences: 100,000 women with TB are thrown out by their families each year to die of disease and starvation, and 300,000 children drop out of school each year because they, or a parent, have TB. Lost wages due to TB amount to \$300 million per year, and the total loss to the Indian economy is \$23 billion per year.

**Around the world**, without dramatic increases in funding and political commitment between now and 2015:

- Over 50 million people will develop active TB.
- Over 10 million lives will be lost to this preventable, curable disease; over 4 million of them will be women.
- Millions of children will be orphaned needlessly.
- Over 2 million cases of MDR TB will emerge for want of proper care.
- There is a current global shortfall of nearly \$3 billion per year to fight TB.

Sources: The Government of India and the Stop TB Partnership.

## EXCEPTIONAL RESULTS

Due to an innovative model that combines intensive counseling, performance-based salaries for counselors, biometric tracking and a dense network of treatment centers, Operation ASHA's treatment outcomes are among the best in the world. Results for the 2012/13 year for South Delhi, OpASHA's largest and most established project, are shown below.

### Default rate: 3.2%

This compares to an average default rate of 11.75% for all other organizations treating TB during the same period in South Delhi. Default rate is especially important to monitor because patients who default on their treatment are highly likely to develop Multiple Drug-Resistant TB (MDR TB), usually fatal in the poor communities that Operation ASHA serves. MDR TB is the current emerging epidemic in India, as each patient with MDR TB infects 12 others on average before death. OpASHA's providers have financial incentives to keep default rates as low as possible.

### Cure rate: 86.5%

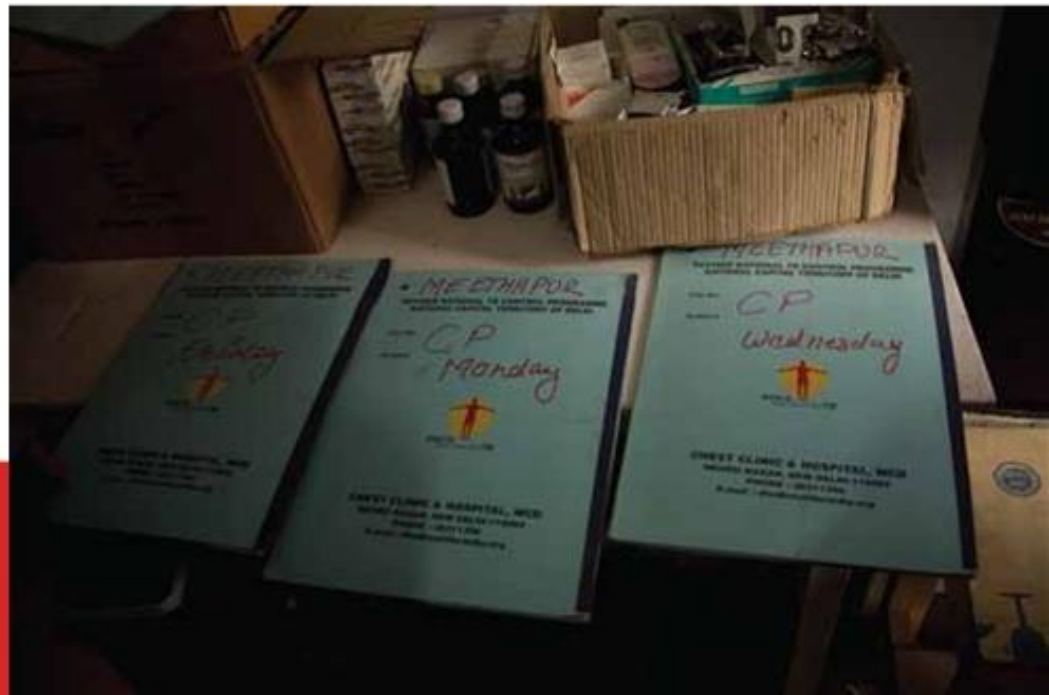
This exceeds the global target cure rate set by the World Health Organization of 85%.

### Mortality rate: 2.5%

This rate is much lower than in neighboring areas, indicating that Operation ASHA's patients are being diagnosed and put on treatment earlier in the course of the disease.

### Failure rate: 3.3%

Failure occurs when the patient takes full treatment for TB but it fails to cure the patient, and usually results from drug resistance in the patient.

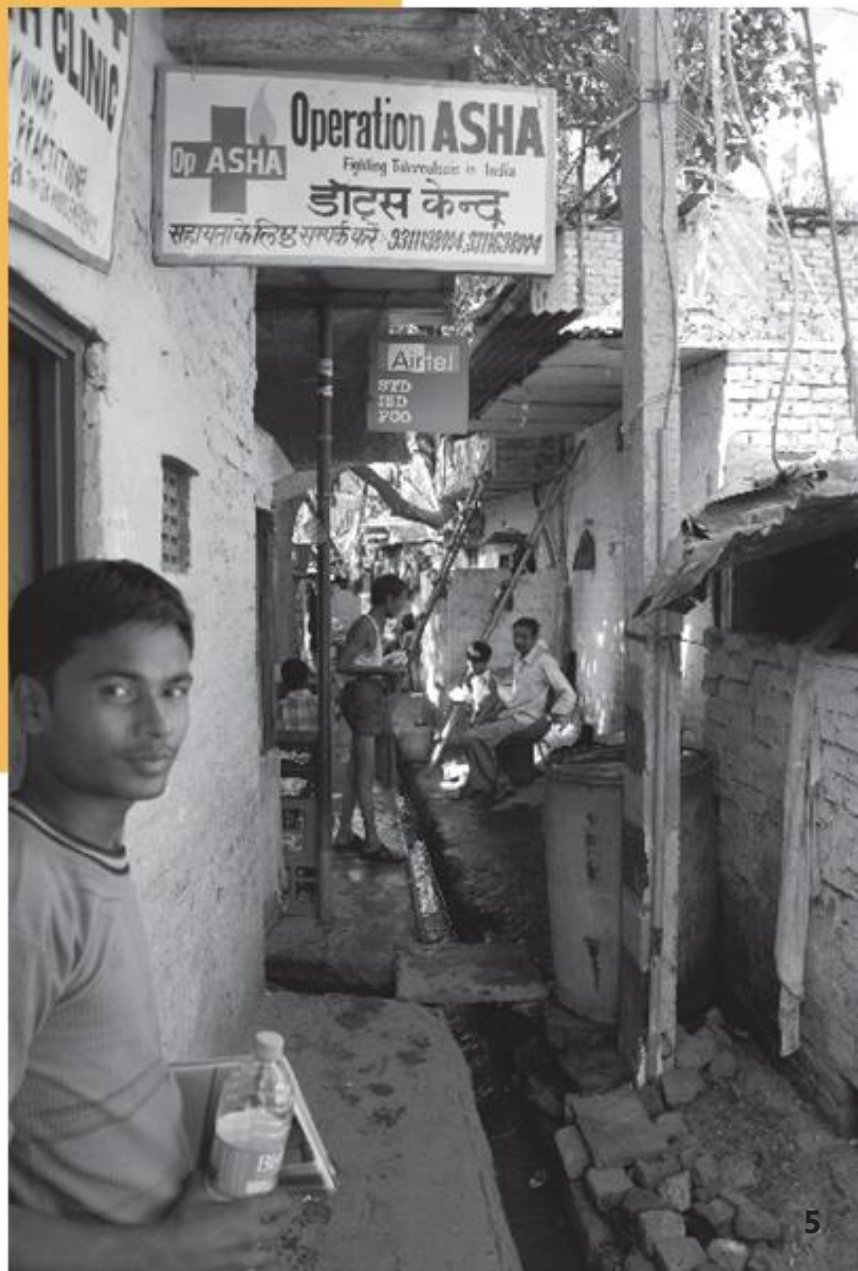




## THE MODEL BEHIND THE SUCCESS

Operation ASHA's excellent results stem from its unique 14-point model, carefully researched and developed over several years.

1. WHO-sponsored DOTS therapy
2. Close coordination with RNTCP, the Government of India's national TB control program
3. Dense network of community treatment centers
4. Trusted community leaders and community healers employed as providers and community partners
5. Rapid-response testing and education of patients' immediate circle
6. Well-trained corps of local providers
7. Provision of OTC drugs and camouflage to reduce stigma
8. Performance-based remuneration
9. Robust feedback loop
10. Stringent quality control
11. Very low-cost operating model
12. Sustainability within two years of opening each center via a government grant program
13. Biometric devices to track compliance
14. Franchise-like operation for easy replication



## ANNEX I. Receipt & Payment Account for the Year Ended on 31.03.2013

Receipts	Amount Rs.	Payments	Amount Rs.
By Opening Balance	15,677.28	To Postage	24,027.00
By HDFC Bank 7204	1,770,638.64	To Misc Exp.	35,747.00
By HDFC Bank	574,923.57	To Repair & Maintenance Exp.	97,111.00
By HDFC Bank Others	92,531.48	To Office Exp.	93,559.81
By Grant Receivable	4,834,500.00	To Power & Fuel	135,450.00
By Membership, Grant & Donation	17,003,651.78	To Bank Charges	5,732.85
By Govt. Grant	5,352,143.00	To Printing & Stationery	45,048.00
By Bank Interest	108,359.67	To TB Project Exp.	30,180,742.37
By FDR Interest	519,829.35	To FDR	200,000.00
By FDR	13,833,363.29	To Imprest & other assets	322,788.00
		To Grant Receivable	3,498,143.00
		To TDS	52,200.71
		To Fixed Assets Purchased	3,475,868.47
		To Axis Bank 42644	5,699,253.42
		To HDFC Bank 198675	68,158.03
		To HDFC Bank 7204	1,59,508.40
		To Cash In Hand	12,280.00
	<b>44,105,618.06</b>		<b>44,105,618.06</b>

## ANNEX II. Income & Expenditure for the Year Ended on 31.03.2013

Expenditure	Amount Rs.	Income	Amount Rs.
To Postage	24,027.00	By Membership, Grant & Donation	17,003,651.78
To Misc Exp.	35,747.00	By Govt Grant	5,352,143.00
To Repair & Maintenance Exp.	97,111.00	By FDR interest	519,829.35
To Office Exp.	93,559.81	By Bank Interest	108,359.67
To Power & Fuel	135,450.00	By Excess of Exp. over Income Trf.	
To Bank Charges	5,732.85	to General Fund	10,577,217.42
To Printing & Stationery	45,048.00		
To TB Project Exp.	32,297,895.56		
To Depreciation	796,630.00		
To Audit Fees	30,000.00		
	<b>33,561,201.22</b>		<b>33,561,201.22</b>

Liabilities	Amount Rs.	Assets	Amount Rs.
<b>Trust Corpus Fund</b>		<b>Fixed Assets</b>	
Opening Balance	23,321,000.00	As per Schedule 'A'	6,336,621.97
		<b>Current Assets</b>	
<b>Expenses Payable</b>		Cash In Hand	12,280.00
Expenses Payable	2,671,639.01	HDFC Bank	159,508.40
		Axis Bank	5,699,253.42
		HDFC Bank	68,158.03
		Imprest & other current assets	322,788.00
		Grant Receivable	3,498,143.00
		FDR	1,237,915.48
		TDS	178,468.10
		TDS	52,200.71
		<b>General Fund</b>	
		Opening Balance	2,149,915.52
		Less: Trf. From Income & Exp. A/c	10,577,217.42
			8,427,301.90
	<b>25,992,639.01</b>		<b>25,992,639.01</b>

