Our Annual Impact Review 2012 - 2013

lepra

Fighting disease, poverty and prejudice

We increased leprosy detection and early treatment in Bangladesh

Fighting disease

In 2012-13 our projects in India focused on five states, **Andhra Pradesh, Madhya Pradesh, Odisha, Bihar and Jharkhand,** whilst expanding our services by opening a new referral centre in West Delhi where there were previously no leprosy services to treat complex cases.

Our team in Bangladesh focussed on **TB and leprosy control and treatment,** targeting four districts in the north west of the country, **Bogra, Sirajgonj, Natore and Pabna,** with a new national level leprosy project initiated in January 2013.

We provided **129,974 people** affected by poverty-related diseases with treatment and disability services. General health services were provided to **58,292 people.** Diagnostic testing services were provided to a further **175,308.**

We were able to invest more money in our Bangladesh projects which saw a **34 per cent** increase in the number of leprosy cases registered compared with the previous year. As a result of this increased detection, new cases found in Bogra with visible disabilities halved.

Through health education we reached **300,000 people** in Bangladesh and **600,000** in India teaching them about signs and symptoms of disease and where to go for help. As a result, one in three cases of TB diagnosed in our project areas in Bangladesh and more than 90 per cent of those in our areas of Madhya Pradesh were as a direct result of our health education.

In 2012-13 Lepra improved the lives of more than 400,000 people in need in India and Bangladesh. We reached a further 900,000 with our community-based health education.

This impact review covers the 12 month period between April 2012 and March 2013.

Fighting **disease**

(continued from front)

Lepra supported and helped to improve performance of the national TB programmes in India and Bangladesh. This included facilitating testing for 84,561 people and 1,690 suspected drug-resistant cases, as well as training more than 9,000 health workers and almost 2,000 volunteers to administer treatment.

Traditional and village doctors are often the first point of contact for people who are ill. Research by our team in Bihar revealed that more than 95 per cent of rural practitioners have never received TB training despite treating people for coughs. During the year we trained more than 3,300 of these practitioners to improve diagnosis and treatment across our project areas.

Fighting **poverty**

50 million people in Bangladesh live in poverty on less than £1.25 per day. In our 'Exclusion to Inclusion' project, the number of families able to eat three meals a day as a result of having more money increased from 59 per cent to 89 per cent.

The proportion with access to banking facilities increased from 10 to 45 per cent, a significant achievement in a country where just 20 per cent of the population has access to banking.

In India, we helped 2,666 people to improve their family income. We helped 2,369 people to access government grants and welfare to which they are entitled. This includes helping groups of leprosy- affected people to work together to ensure their voices were heard with regard to their financial rights.

Lost days of income as a result of incapacity from diseases like TB place a heavy burden on families. Our best practice models continue to be adopted by government. Lepra's TB model is having an impact in ensuring that correct treatment minimises lost income associated with this disease. The sputum collection centres we established Madhya Pradesh in India have been adopted by the Ministry of Health and our volunteers are now working as part of the government's frontline health workforce. The proportion of TB patients correctly treated has increased from 12 per cent at the start to 90 per cent by the end of a four year project.

Our EU funded 'Reaching the Unreached' project came to an end in December 2012. This project achieved its objective of strengthening health systems in Odisha through demonstrating successful community-based health models including sputum collection centres, village level meetings, referrals for treatment and grain banks.

At the start of the project in 2008 just 16 per cent of the population had any knowledge on TB, yet by the end of the project 93 per cent of the population had a good knowledge of TB, its symptoms and where to find treatment. Grain banks set up in 100 villages had collected a stock of 9,000 kilos of grain to improve nutrition and food security during the lean months.

£3 helps us train a health worker

£16 provides a loan to start a business

£25 runs lessons in schools to fight prejudice

Fighting **prejudice**

Many of the people we work with are unfairly treated. Fear, misinformation and beliefs surrounding certain diseases give rise to prejudice towards those affected.

This prejudice can be as simple as negative feelings towards other people to legislative barriers and discriminatory practices by government and health workers. Self-stigma, often the result of real or perceived prejudice damages self-esteem and mental health. All of these are addressed through our person-centred approach.

We raised awareness with 1,064,846 people on the issues around disease to increase knowledge and reduce prejudice.

Research from our projects shows that our community education is reducing prejudice. A community survey first taken in 2011 in Bogra, Bangladesh revealed that a positive attitude demonstrated toward people affected by leprosy had more than doubled from 31 per cent to 64 per cent of respondents in just two years.

In India we conducted four social audits to demonstrate transparency and the effectiveness of our projects in Andhra Pradesh and Odisha. These involved a public hearing of all financial accounts related to these projects whilst seeking feedback from beneficiaries, government and the general public about Lepra's impact and areas for improvement.

After meeting with Lepra, I got hope." For 10 long and lonely years Moti hid away from other people, ashamed of his appearance

We continued our support to State Forums of leprosy affected people in India. After nomination by Lepra, Mr V Narsappa, Chairman of the National Forum of the Leprosy Affected received a National Award from the President of India as the 'Best individual working for the empowerment of persons with disabilities'.

We also facilitated the meeting of Mr Narsappa and Mr Venugopal, the Vice Chair of the National Forum India, with UK MPs, including members of the All-Party Parliamentary Group on Neglected Tropical Diseases, at the Houses of Parliament. This provided the opportunity to raise the issue of discriminatory laws against people affected by leprosy at the Westminster Hall Debates and raise the profile of Lepra and leprosy-affected people.

Our expertise in health programmes was recognised by The World Health Organization who commissioned us to contribute to a working paper on the impact and effectiveness of health education in leprosy control programmes.

As a member of the NGO TB consortium in India, we work with national partners to contribute to public health policy-making. We were elected to represent NGOs on the country coordinating mechanism for Global Fund's TB programme. Lepra was also nominated onto the National TB Control Programme's working group to develop a National Strategic Plan (2012-17) for case finding and diagnostics.

We enabled 3,186 people like Nilu to improve their income through our socio-economic empowerment initiatives

"Without my shop I would have to beg"

Achievements in numbers

50Million the number of people living in poverty in Bangladesh on less than £1.25 per day

3,300 the number of rural doctors trained

from 10% to 45% the increase in the proportion of people affected by leprosy in Bogra with access to banking facilities

we helped 2,666 people improve their **income**

we **enabled** 2,369 to access **government grants**

from **12%** to **90%** the proportion of TB patients in Madhya Pradesh **correctly treated**

84,561 TB tests performed

2,000+ **volunteers** trained to administer treatment

>9,000 **health workers trained**

93% of the population in Lepra supported districts of Odisha now have a good knowledge of TB, its symptoms and where to find treatment, compared with 16% in 2008

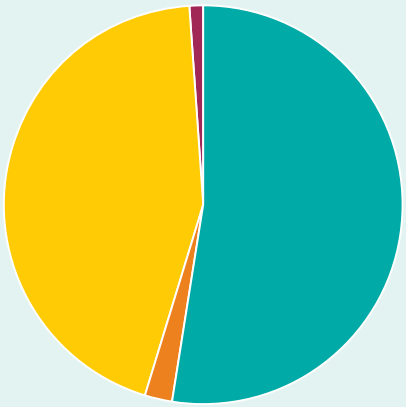
34% increase of leprosy cases registered in Lepra supported districts in Bangladesh, compared with last year

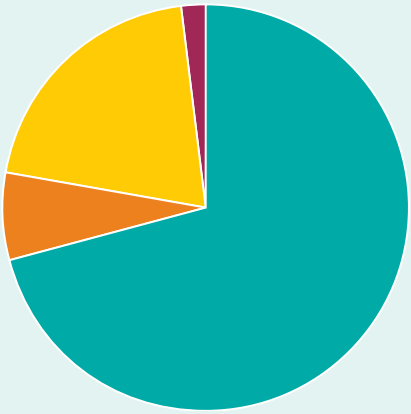
129,974 people provided with treatment and disability services

How **you** helped

Fundraising is an essential part of our work and determines the impact we are able to make on lives of people living on society's margins.

Total Income	4,250,652	
Public support	2,239,563	52.69%
Trusts and business	92,953	2.19%
Statutory grants and charitable acts	1,878,116	44.18%
Sales, investments and other	40,020	0.94%





Total Expenditure	4,085,804	
Projects and programmes	2,902,293	71.03%
Research, education etc.	282,117	6.90%
Fundraising	823,103	20.15%
Admin and governance	78,291	1.92%

*The financial information above has not been audited. If you require a full set of our latest Trustees Report and audited financial statements please visit our website.

50 per cent more people were diagnosed in Lepra's TB projects in Bangladesh as a result of our health education

Community education has yielded positive results across our projects. This included a significant positive change in attitudes towards people affected by leprosy as well as measurable increases in people using mosquito nets. At a cost of around 20p per person we reached 900,000 people including community groups and schools in India and Bangladesh.

Our work in those areas most in need increased in Bangladesh and Bihar where we reached more people than the previous year.

The number of people undergoing reconstructive surgery was double that of 2011-12 as was the number of people gaining access to poverty reduction measures like livelihoods training and linking to government schemes.

"We were visiting three to four projects a day. There were challenging days in the saddle but we met some great people. The Lepra staff explained how the health system in India is evolving and how Lepra has a key role to play in this."
David Bousfield on Lepra's annual cycle challenge to India

Thank you for your support

How you can help:

- A regular or single gift
- A gift in your Will
- Giving through your business or payroll
- Taking part in a challenge event
- Fundraising

Schools across the UK raised more than **£458,000** for Lepra

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