



### Amandeep Singh

**Host organization:** Operation ASHA (Cambodia)

**iCats role:** Country Director

**iCats duration:** Feb – Mar 2013 (full-time)

**Degree:** Masters in Pharmacy-BITS Pilani (India)

**Professional experience:** 4 years of professional experience in healthcare consulting at Boston Analytics

## Summary

Amandeep applied his healthcare know-how to establish the OpASHA model in Cambodia. Through adapting the OpASHA model to the rural context, hiring and training the local team as well as establishing partnerships with government and private healthcare providers, he played a key role in increasing patient enrollment tenfold and expanding their reach to over one million of people in Cambodia.

### The problem OpASHA aims to tackle

- TB kills worldwide nearly 1.4 million adults, every year. ~ 2/3 of all Cambodians carry the TB bacterium
- Government provides free antibiotics, but little access to basic health care prevents patients from following the treatment regimen. This often results in multi-drug resistant TB and death



### OpASHA's solution

- Community based access to Tuberculosis cure. "We bring the treatment to the patients"
- In Cambodia the organization runs a mobile model of community health workers who travel by motorbike to provide treatment at homes of patients

"2012 has by far been the best year of my life. It has opened my eyes to see things which I might not have realized if I had stayed back"

### OpASHA's challenges

Operation ASHA model in India was designed for high density urban slum areas. The model had to be adapted to a rural, low population density context in Cambodia.



### Opportunity for an iCats Fellow

There was an opportunity for an iCat Fellow with both healthcare as well as managerial skills to ensure a successful adaptation and rollout in Cambodia.

"The fellowship led me to unique experiences and I witnessed the shortcoming of the public health sector"  
*Amandeep*

### Amandeep's achievements ...



- Stabilizing and managing expansion of a new home-based healthcare delivery model
  - > Mobile community health workers travel by motorbike to provide treatment at homes of patients
- Reduced price per patient treatment to less than half
- Act as liaison with the government for a partnership
  - > Won trust of government which allowed OpASHA to expand their model into other districts in Cambodia
- Initiated partnerships with private healthcare providers
  - > Efficient service delivery of TB treatment

### Aman's next challenge

He joins an affordable housing project of a European family foundation and the United Nations in Manila that aims to explore alternative building technologies for the urban poor.

### ...contributing to Operation ASHA's impact



- Patient enrollment increased tenfold (300->3200)
- Expanded from 1 -5 operational districts in 2012
- Active case detection increased from 30% to 60% of total enrollment
- OpASHA Cambodia has now a bigger, stronger and more experienced team
- Population coverage increased from 0.45 million to 1.1 million

*"I am amazed by his dedication to bring success to the program and to the team. I have seen him working tirelessly in the past months. I asked myself why he would come from India to help our people? We are very proud of him."*  
*Dr. Vin Samnang, OpASHA Cambodia*