



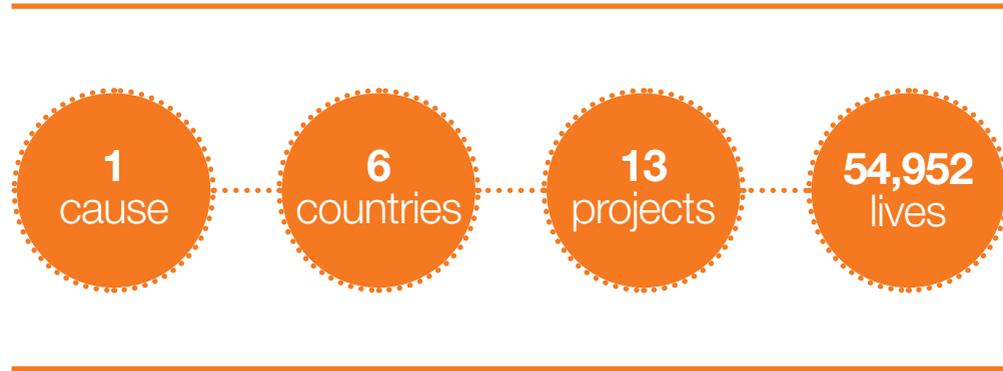
Target TB

Annual Review 2012–13

10 years – stopping people dying
from TB in Africa and Asia



Our vision is a world free from tuberculosis (TB).
Our mission is to stop vulnerable people in Africa and Asia dying from TB by improving their access to information, treatment, care and support.
 Here is 2012-2013 in figures and facts.



Why TB?

Tuberculosis kills nearly 1.5 million men, women and children every year – needlessly. TB is preventable and curable.

Treatment

We ensure people living in poverty receive the right diagnosis and treatment to regain their health quickly and effectively, which also helps reduce the spread of the disease.

Education

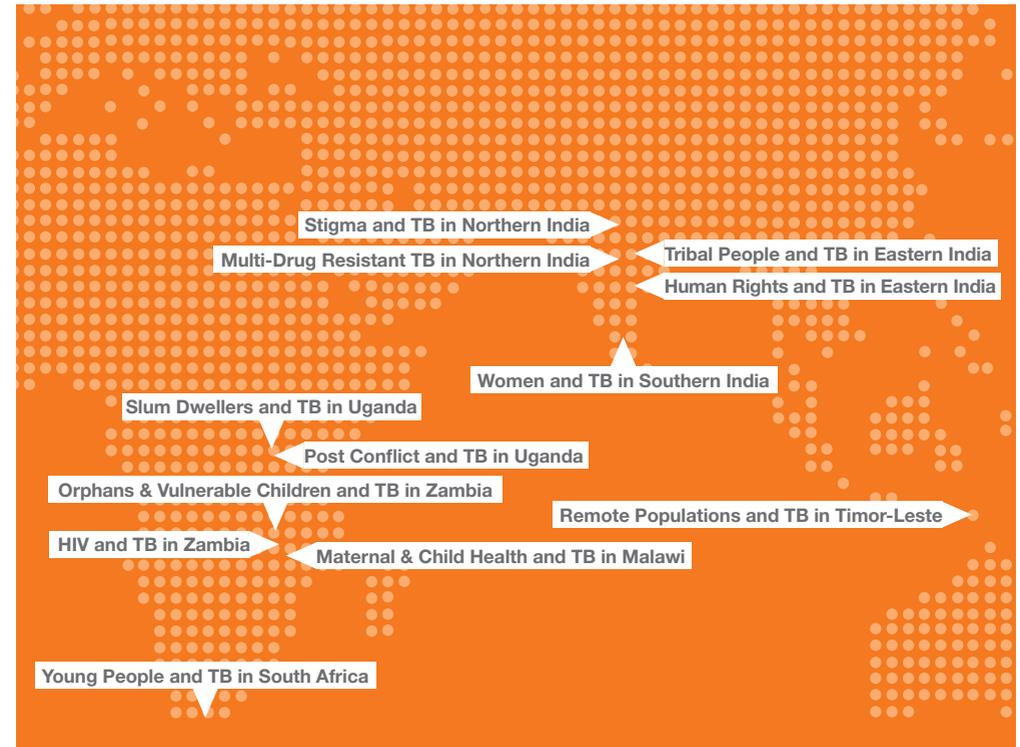
We inform people about TB so they recognise its symptoms and know where to get help, increasing survival chances and preventing further spread.

Care

We train local people as health workers and volunteer TB carers, giving them lasting skills to find, treat and care for people with TB. They also raise awareness about TB in their communities.

Our projects

All our projects tackle multiple issues in the fight against TB. Here are some key themes.



21,726
 people with symptoms referred for TB diagnosis

3,832
 people supported through 6-8 months of TB treatment

26,824
 family members and dependents of TB patients supported

6,402
 local volunteer carers and health workers trained and mobilised

4million
 people informed about TB and how to prevent the illness

£10
 average spend per person to deliver our life saving work

Voices from our work

Personal stories from people we have helped to survive TB this year and from those we've trained to fight TB in Africa and Asia.

To see more stories about our work visit targettb.org.uk



“It’s just good to be a part of this... to save lives”

Our volunteer health workers in Timor-Leste overcome barriers – literally! Alberto, travels by motorbike to reach 186 families living in poor, remote villages, delivering TB information and care. He does this every week, even though he has his own farm to manage.



“Now I tell them to talk to Prabendu (the health worker) but I do my ritual anyway. It comforts them”

A traditional healer in a tribal village in Jharkhand, India, describes what he does when people come to him with TB symptoms, since learning more about TB from our project staff.



“I didn’t know the link between TB and HIV... I didn’t have anyone to talk to”

Kotapatti is just seven years old but he has both HIV and TB. Even though she has HIV too his mother didn't understand much about the diseases. Our health workers in Tamil Nadu, India, reassured her that TB was curable and helped Kotapatti manage all his pills.



“Students shout out ‘mear mear liu semana tolu ba centro saude atu koko moras TB! – coughs more than three weeks, go to clinic for TB”

A health worker in Timor-Leste explains how lifesaving messages about TB are getting through to school age children.



“They told me I had MDR-TB but there was no treatment for me in Uttar Pradesh... now my daughter and I are on treatment”

In India, Zarina had two bouts of TB and spent all her money on ineffective drugs before she was diagnosed with a Multi Drug Resistant form of the disease. After travelling many miles to our partner clinic, she got the free treatment she needed. It will take two years for her and her daughter to get well.



“When I was ill, I couldn’t ride my bicycle or walk... I feel good right now and I run”

Robert Okello told us this with a smile. In Lira, northern Uganda, Robert said he values the friendship he has struck with Judith, our volunteer health worker, who encouraged him to take his TB treatment and bought him soap, sugar and soya powder to help him through.

2012-2013 achievements

Brief highlights of how we have pursued our mission this year. To see more, please visit targettb.org.uk or ask us for our Annual Report.



1. Preventing the spread of TB

When provided with accurate information about TB, people can make decisions about their own health. Our project in Jharkhand, India, records and broadcasts a community radio programme called 'Antardhwani'. Giving a voice to the voiceless, and overcoming the barrier of illiteracy, this reaches out to neglected tribal communities living in remote, scattered villages. Episodes are developed by, and

recorded, with tribal people in their own languages, informing people about TB and making clear their rights to demand basic healthcare. This girl tunes into the programme using a basic mobile phone. This year, we recorded 26 episodes which were broadcast to over 200,000 people in the region. A telephone helpline took 502 calls from people wanting TB counselling and advice after tuning in.



2. Improving access to TB diagnosis

We have taken high quality TB diagnosis into a new district in one of the world's poorest countries, Timor- Leste. Maubara is a mountainous coastal region where it is difficult to travel on poor quality roads; in fact many villages are only accessible by foot or bike. Even if you can reach the main road, public transport is too costly for the poor. Our 113 trained health workers now travel by motorbike and

a robust 4x4 to deliver health camps where whole villages are screened for TB. Sputum samples are taken there and then for testing and results delivered within days. Timorese health workers are also tracing family members of TB patients and integrating TB into maternal & child healthcare clinics. We've helped nearly 2,000 receive high-quality testing and diagnosis and treated 242 people for TB.



3. Improving access to TB treatment and care

Target TB doesn't just focus on the disease, we address some of the underlying causes and effects of ill health. In this way, we are helping to break the vicious cycle of poverty that many chronically ill people and their families are faced with in the developing world. This year, our new project launched in Zambia – 'Umweo; supporting communities affected by HIV and TB', will provide home based care and support for 4,368 people affected by TB and HIV in the rural district of Mkushi. Here, health workers will deliver food packages and household essentials such as oil, matches and soap, to ease the burden on patients who can't earn an income or harvest food for themselves and their families whilst they are sick with TB.



5. Integrating TB into other health services

This year saw the start of 'Kutukula Umoyo', our innovative project that screens pregnant women and young children for TB at antenatal clinics and under 5 clinics in Balaka District in Malawi. Rolled out to remote, rural clinics, this project now benefits women and children by providing early detection and treatment for TB, provided at the pivotal moment when the majority of women seek out health services.

Already, 4,889 women and 10,298 children have been screened for TB as a result of this project. Hilda Kapai, pictured, is one of the 30 health workers we have trained in TB screening, at work weighing babies at an under 5 clinic.

4. Up-skilling local TB health workers

Target TB doesn't duplicate provision or swoop in with short term solutions. In Lira, northern Uganda, we strengthened the skills and knowledge of 140 members of the existing 'Village Health Team (VHT)'. Put simply, VHTs are community volunteers who help to bridge the gap between vulnerable people and the formal health system. The concept is simple, but revolutionary; community members are able to overcome barriers to healthcare based on their sincere motivation to improve the lives of their friends and family.

Now, the team is out and about, informing people about TB and its prevention, identifying people with symptoms, and caring for patients and their families.



6. Influencing policy and strengthening health systems

We were thrilled to be able to bring together our partners working in India, Africa and Timor-Leste to a workshop in Zambia, to share best practice on community based TB control and effective advocacy. Here, we launched our new, robust Monitoring, Evaluation and Learning framework that will underpin all our projects; it's only by openly sharing information and learning that we can all improve and scale up our response to the TB epidemic.

Target TB continued to play an active role in a number of UK forums and networks to publicise TB and maintain TB and HIV on the international agenda. These include the Stop TB UK Coalition, the UK Consortium on HIV and AIDS and All Party Parliamentary Group on TB.



Your support helps mothers and children

TB commonly affects women of reproductive age and TB in pregnancy poses great threats. Our project sees women helping women in Malawi, to drive up the number of pregnant women and children under 5 being detected with TB. Veronica's story helps paint the picture.

It is clinic day at Balaka District Hospital. Health workers are busy with antenatal care and weighing and checking infants. Veronica Mkilolo is here too. She's a volunteer health worker trained for our 'Kutukula Umoyo' project ('integrating health').

Veronica's day started at 4.30am, collecting water and making maize flour porridge for her six children before they go to school or to stay with a neighbour. By 5am, she is on the road, with her friend Loveness, a fellow volunteer from the next village. Together, they will walk for three long hours just to reach the hospital. Veronica says 'We tell each other stories and talk about our farms on the way'.

They reach the clinic around 8am and there are already queues of women; they've walked a long way too, some pregnant, some with children on

Target TB stops men, women and children dying from TB. Read about a day in the life of Veronica, a volunteer health worker helping women and children in Malawi.



their backs. Veronica and Loveness start talking about TB; how is it transmitted, symptoms and what to do if you have symptoms. They have to shout over the noise of crying children and hubbub of a hospital in rural Malawi but they persevere and answer all the questions from the women.

Then, Veronica and Loveness help to weigh and measure babies, often up to 100 in a morning. This is an ideal way for them to question mothers about their own health and their child's; 'have they had a cough for more than 2 weeks? Have they had

night sweats?' If so, they guide the woman and her children to the TB unit, calm their fears and stay with them to ensure they provide a sputum sample for testing. 'No need to be afraid, TB is curable'.

By 11am, the two friends are making the long walk back home. Veronica's own life has challenges yet she is willing to help others in her own community, and she says people 'respect me and ask for my help. They thank me'. Veronica is looking forward to the delivery of a new bicycle, funded by Target TB, to make her important journey easier.

TB is the **3rd leading cause of death** in women aged 15-44



10 million children are orphaned every year through the death of a parent from TB



Maternal TB can lead to birth complications and **increased neonatal mortality**



TB in pregnancy **doubles the risk of mother-to-child transmission of HIV**



Up to **25% of children** living with an adult with active TB **become infected**



The **BCG vaccine** limits some severe forms of TB in young children but is not effective against all forms of TB



Looking Back

2013 is the 10th Anniversary of Target TB. We've achieved a lot in a decade. Working together with our partners, we've made sure over 140,000 people get the right screening and diagnosis, we've trained and mobilised over 34,000 local people as volunteer health workers and we've cured around 40,000 people of TB. And curing one person of TB stops 15 other people from becoming infected.

Our vision of a world free from TB can be achieved. And did you know that our fight against TB was born of the vision of Leonard Cheshire and his wife Sue Ryder? See more of our story online at targettb.org.uk

Looking Ahead

The scale of the global TB epidemic means there is much more to do. So, this year we are launching 'Two Hands to Target TB', a big fundraising push to support another 2,000 volunteer health workers in Africa and Asia. Health workers in all of our projects are using their hands to help people survive TB. Now we're asking you to use your hands too! Take on a challenge to raise £340 this year. Find out more at twohandstotargettb.com



"I'm pleased to join Target TB in our 10th year and be part of its future growth. This is an inspirational charity." Wendy Darby, Chief Executive

Chair's Message

Look at the faces that smile out at you from the pages of this Review. The story they tell is an inspiring one. It is that TB – which blights so many lives – can be beaten.

2012-13 has been another year of growth for Target TB, in terms of both programme work undertaken and money raised, and looking back on our first ten years it is tempting to be impressed with how much has been achieved, and how we have grown. But we are more impatient than that! We know all too well that the challenge is huge and that it demands an extraordinary response

from us all. On behalf of the Board of Trustees I warmly thank all those who support our work, but my message to all who read this Review is to ask you – yes, you – to consider what more you can do.

The fight against TB is life-saving, world-changing, and winnable but it won't be any of those without the kind of positive action we and our partners take. Please join us.

Dick Bird, OBE

Who We Are

These are the people who make our work happen.

Partners

Malawi

Sue Ryder Foundation
International in Malawi

South Africa

Sustainable Livelihoods
Foundation

Uganda

International Medical
Foundation

Zambia

Zambia Tuberculosis
and Leprosy Trust
Bwafwano Integrated
Services Organisation

Southern India

Blossom Trust
Maharashtra Association of
Anthropological Sciences
Development Action Consortium Trust

Northern India

Agnes Kunze Society
Raphael Ryder Cheshire International
Centre

Eastern India

Alternative for India Development

Timor-Leste

Klibur Domin

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Andrew Russell, FCA (Treasurer)
Dr. Maya Unnithan, PhD

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Programme Development Manager
Morris Lab
Programme Officer Clare Shaw
Finance and Office Manager Janaki
Jayasuriya
Fundraising Manager Lynn Stevens
Fundraiser Sophie Moore

Volunteers

Jo Arkinstall, Jennifer Deming, Leanne
Hanmore, Melissa Ittoo, Ken Starnes

Thank you

We can only fight TB with the help of our supporters. Without whom none of these achievements would have been possible. We're grateful to all the people, too numerous to name, who share our vision and support our cause.

Grant Giving

Big Lottery Fund
Comic Relief
Department for International
Development
Wellcome Trust

Trusts and Foundations

We are grateful to the many trusts
and foundations who have given
us their generous support this year.

Corporate

Bupa International
Johnson Mathey PLC
Next PLC
PayPal Giving Fund

Income/Expenditure 2012-13

	Unrestricted Funds £	Restricted Funds £	Total Funds 2013 £	Total Funds 2012 £
Incoming Resources				
Voluntary Income				
Grants Received	107,750	681,632	789,382	698,971
Other Donations	65,849	20,000	85,849	40,684
Legacies	500	–	500	–
Investment Income	5,887	–	5,887	9,155
Total Incoming Resources	179,986	701,632	881,618	748,810
Resources Expended				
Costs of Generating Funds	88,920	–	88,920	87,614
Charitable Activities	42,617	533,279	575,896	581,222
Governance Costs	15,455	–	15,455	13,799
Total Resources Expended	146,992	533,279	680,271	682,635
Net Incoming Resources before other recognised gains and losses				
	32,994	168,353	201,347	66,175
Realised Gains/Losses on Investments	–	4,780	4,780	(6,039)
Unrealised Gains/Losses on Investments	–	–	–	2,584
Net Movement in Funds	32,994	173,133	206,127	62,720
Fund Balances brought forward 1/4/12	70,915	218,981	289,896	227,176
Fund Balances carried forward 31/3/13	103,909	392,114	496,023	289,896

The above financial information is extracted from the full financial statements of Target Tuberculosis for the year ending 31st March 2013, which have been audited by Mazars LLP, Chartered Accountants and Registered Auditors. For the full financial statements, approved on 20th July 2013, please ask us or see targettb.org.uk. Andrew Russell, FCA, Treasurer

How your money helps

Our vision is a world free from TB but only with the help of our supporters can we achieve it. A modest sum can help to transform the lives of some of the world's poorest people. If you believe that no one should die from TB, a curable disease, please donate or pledge to raise funds for us today.

To make a donation call us on **01273 827070** or go online to targettb.org.uk

To see how you can help people by organising your own fundraising event, call **Lynn and Sophie** on **01273 827070** or look for ideas at targettb.org.uk/get-involved

£9

can deliver a weekly food and essentials package in Africa so someone with TB can get strong and well and provide for their family

£21

can fund an awareness-raising street drama in a slum in India, where hundreds of people learn vital facts about TB that could save their lives

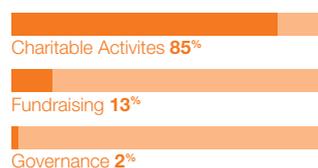
£34

can train and sustain a volunteer health worker to care for a TB patient through 6-8 months of treatment, giving emotional and practical support to the whole family

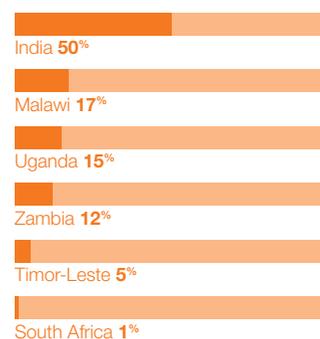
Income



Expenditure



Per Country



How we spent your money



85p

was spent helping people affected by TB in Africa and Asia

13p

was spent generating funds for our charitable work

2p

was spent ensuring good governance

For every £1 we spent on fundraising, we actually raised £10 more...

Get informed

TB is curable. Find out more about TB and see how Target TB helps people living in poverty in Africa and Asia

targettb.org.uk

twitter.com/targettb

facebook.com/targettb

targettb.org.uk/resources/sign-up-for-newsletter

Get involved

Make a donation or fundraise. On average we help people affected by TB for just £10 per person. See how to have fun with friends and family while raising life-saving funds.

targettb.org.uk/get-involved

Get in touch

Call us on **01273 827070** or email us info@targettb.org.uk

You can send letters and donations to Freepost RRYA-SSJU-SSXR, Target TB, Refuge House, 49-50 North Street, Brighton, East Sussex, BN1 1RH

Registered Charity number: 1098752

Cover photograph Clare Shaw, Target TB

Design iamalexandra.com



“If they didn’t come, how would anyone know I had TB?”

Libertina, a cured TB patient living in a remote village in Timor-Leste, on being reached by our team of TB health workers

