



Expressions for a Healthy Life



# IMPACT ASSESSMENT OF MEDICAL TREATMENT ASSISTANCE (MTA) PROGRAM OF INTAS FOUNDATION

## IMPACT ASSESSMENT REPORT MAY 2023

**Presented To  
INTAS FOUNDATION**

**Presented By  
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## CSR Impact Assessment Report- Medical Treatment Assistance Program

### EXECUTIVE SUMMARY

India has been a signatory to the World Health Organization resolution on Vision 2020 (Right to Sight). Cataract related blindness is a growing concern in India which not only leads to morbidity, but also economic loss and social burden posed to the families. Indians are prone to cataracts ten years earlier than the people in the Western countries (Prakasi, 2023). The case in rural areas is grave as the population in rural areas is prone to excessive exposure to UV rays. If left untreated for a long period of time, the cataract swells, matures and poses a risk for developing complications. India accounts for 80% of the blindless due to cataract alone as per Programme for Control of Blindness, Ministry to Health and Family Welfare, Government of India.

INTAS Pharmaceuticals Limited, through INTAS Foundation, in accordance with the CSR Provisions of the Companies Act of 2013, has made efforts to work in the area of Health Care and Preventive Health Care. This is done through their Medical Treatment Assistance (MTA) Program. The idea of starting this program was conceived on the basis of NSO 2018 report which stated that the debt trap for medical help sought is increasing in the rural areas. There is a need to get the rural population out of the debt trap incurred for seeking medical help for chronic eye cases.

INTAS Foundation has adopted a philanthropic approach towards their CSR activity where a comprehensive effort to identification of causes like medical treatment assistance was identified, aimed to deliver high impact results. As per the CSR Mandate, an impact assessment of the interventions made is necessary to assess whether the interventions are meeting the desired results or not. For this, INTAS Foundation empanelled Faculty of Social Work, The Maharaja Sayajirao University of Baroda, for conducting an Impact Assessment study of the MTA Program through a mixed methodology.

The findings showed that that the MTA Program has been beneficial to most of the beneficiaries in terms

of provision of medical assistance at a free or subsidized level. The assistance is provided for one-time medical treatment with a to and fro transport facility to the empanelled hospitals. The out-of-pocket expenditure incurred by the patients was minimal in the light of the medical assistance provided to them.

INTAS Foundation is committed towards ensuring not only the availability of quality medical assistance for eye care but also accessibility and affordability of the services to the vulnerable section of the society to reduce out of pocket expenditure.

### Introduction

The residents of rural areas encounter barriers to healthcare that inhibit their ability to have access to the medical care that they need. Access to healthcare has certain parameters, of which accessibility and availability are two most important components. Despite the efforts to make adequate healthcare supply accessible, there are other impeding factors that act as a hurdle to affordable and quality healthcare services.

Through Medical Treatment Assistance (MTA) Program, efforts are made to provide medical assistance to needy patients by INTAS Foundation through empanelled hospitals. A camp is held at the village level to identify individuals who require medical support. Medical Treatment Assistance is provided for eye care at the INTAS Foundation empanelled hospital Occura Eyecare and Research Centre at Ahmedabad.

The selection criteria of beneficiaries are strictly on the basis of vulnerability of the target population viz. resident of rural area, income slab less than 1 lakh rupees, inability to incur out-of-pocket expenditure for medical treatment etc. Based on this premise, health camps are organised at various

villages with the help of local Gram Panchayat where eye check-ups are conducted for the population. Based on the diagnosis, the people who require treatment are commuted from their village of residence to Occura Eyecare hospital at Ahmedabad in a company provided van.

This facility is given one time where the transportation cost for the patient is free. At the time of consultation and second visit, the patient has to bear the transport and consultation charges. The total cost of treatment for one patient, if it is basic cataract operation, is free of cost, the bill of which is charged to INTAS Foundation. In case of complex surgeries, the total cost of treatment is divided into 70:30 ratio where 70% of the cost is borne by INTAS Foundation whereas 30% has to be borne by the patient.

The basic eligibility of procuring free/subsidized medical treatment assistance through INTAS Foundation consists of the individual having the following documents:

1. Aadhar Card
2. Bank Account Number
3. Ration Card

Based on the aforementioned documents, a vulnerability assessment identifies the needy people who can be rendered the services under the Medical Treatment Assistance Program.

The medical camp in the villages help in determining the individuals who require treatment assistance based on the diagnosis. Post diagnosis, a counselling and pre-treatment session is undertaken at the village level itself through Occura and INTAS Foundation Team. A designated day and time is given to the beneficiaries and transportation to and fro from the village to the hospital is provided. For a second time consultation visit, the cost of transport and consultation is however, to be borne by the patients themselves.

## Assessment Purpose

Impact Assessment is an important tool that has gained momentum in the past decade to often serve an accountability aspect to determine if an intervention has worked, and if so, how well it has worked. Over and above that, it can help in determining the answers to the objectives sought, to evaluate the approach and assess the approach that can be best effective to reach the desired objective. The objectives of the Impact Assessment were as follows:

1. To assess and understand the impact of Project MTA implemented by INTAS Foundation in FY 2020-21 and 2021-22.
2. To identify lessons learnt and provide actionable recommendations to enhance the impact of ongoing MTA Project.

This study was undertaken to identify and highlight the observed impact that was produced through the Medical Treatment Assistance Program of INTAS Foundation. This impact assessment was conducted between the period of March 2023 to April 2023.

## Methodology

**Universe:** 1108 total beneficiaries under MTA Program

**Sample:** 30% of the total beneficiaries (369) selected through random sampling.

**Method of Data Collection:** This report is a compilation of the responses of 121 beneficiaries approached who had confirmed that they have taken benefits under the MTA Program

Out of 121 respondents, 32% respondents were approached through telephonic interviews and 68% respondents were reached through physical visits for the purpose of data collection.

## Tool

Interview schedule used for the Impact Evaluation was prepared based on the Quality-of-Care indicators as laid out by World Health Organization ([https://www.who.int/health-topics/quality-of-care#tab=tab\\_1](https://www.who.int/health-topics/quality-of-care#tab=tab_1)). The revision in the tool were made after comments from the team of INTAS Foundation. The tool was shared with INTAS Team and finalised based on the Quality-of-Care indicators upon which health services for individuals and populations increase the likelihood of desired health outcomes, the three key areas were used to assess the program included:

1. Accessibility
2. Affordability
3. Quality of Treatment

## Data Analysis & Findings

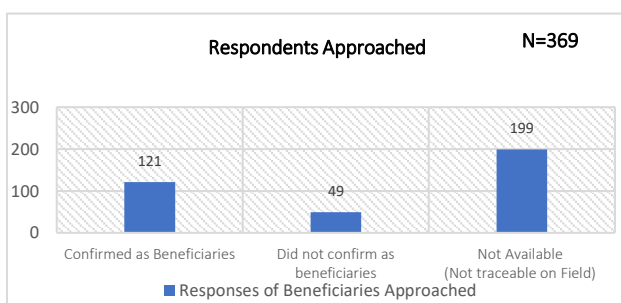


Figure 1: No. of Respondents Approached

Based on the total number of people approached, 121 confirmed that they had taken benefits if the Medical Treatment Assistance (MTA) Program. Of 369 respondents contacted, 49 respondents confirmed to not being beneficiaries of MTA Program. The remaining (199) were either not a beneficiary or were not contactable or to be found at the time of data collection. The analysis is thus based on the 121 available beneficiaries of the MTA Program.

Thus, this report is prepared based on the response related to impact assessment of MTA Program received from the total of 121 beneficiaries only.

## 1. Accessibility

Accessibility of the MTA Program is based on the vulnerability assessment where benefits are provided to the individuals based on their socio-economic vulnerability.

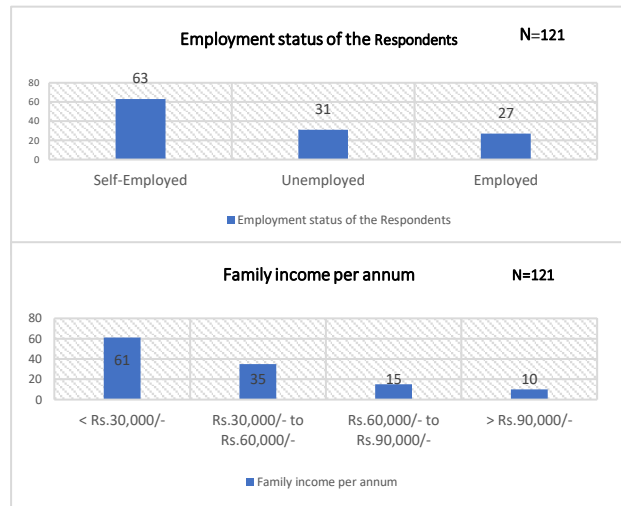


Figure 2: Status of Employment and Family Income of respondent

Employment and annual family income are the two main criteria that can help in assessing whether the individuals can be considered for treatment under the MTA Program. Based on the data received for 121 respondents, 63 beneficiaries were either self-employed who worked in their own patch of land or had tractors of their own. 31 respondents were unemployed. The data also revealed that majority of the respondents (61) had an income of less than INR 30,000/-. This was the major criteria for inclusion of individuals under the MTA Program where employment status and income were considered to assess whether beneficiary is capable of meeting the medical treatment based on out-of-pocket expenditure or not.

## 2. Affordability

With employment status of the individuals being a question and income being less than 1 lakh rupees, affordability of quality treatment is a concern. Most of the times, people in the rural areas are unable to meet the medical expenditure due to lack of money or means to pay for the services. Figure number 2

gives an illustrative picture of the status of employment and family income of the respondents based on which they were considered for the MTA Program. Affordability of quality medical treatment is always a question in rural areas and through the MTA Program, the respondents approached said that the treatment provided at Occura (empaneled eye hospital by INTAS Foundation) is affordable or free.

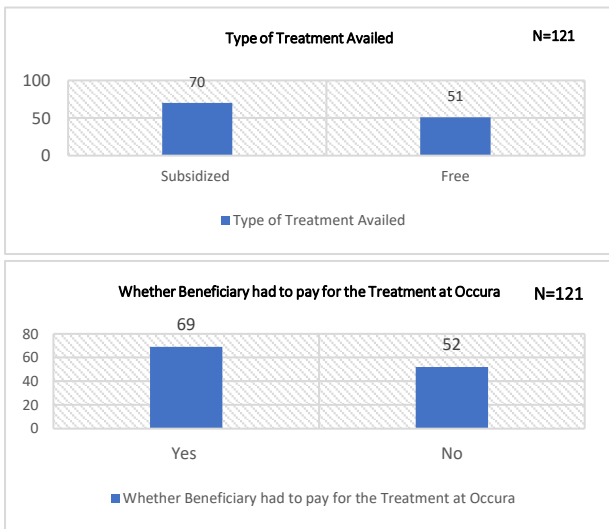


Figure 3: Type of Treatment availed and status of payment for treatment by respondent

MTA Program focuses on provision of free and affordable eye care treatment to the rural population based on the vulnerability assessment indicators. 57.8% (70) respondents said that they had availed subsidized treatment while 42.2% (51) respondents had availed free treatment. In subsidised treatment, majority of cost was borne by INTAS Foundation for cases like complex eye surgeries, while the expenditure borne by the patient was minimal. On an average, patients had to shell out a cost on an average of INR 2000/- for the surgeries undertaken. For minor surgeries like cataract surgeries, the treatment was provided free of cost. However, the consultation charges and transportation charges for the second time visit had to be borne by the patient.

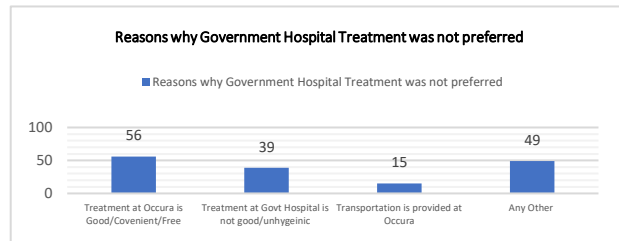


Figure 4: Responses of why Government Hospital Treatment was not preferred

Since treatment through MTA Program is subsidized and free, many people from the selected villages prefer to get treatment done through MTA Program rather than Government Hospitals. Various reasons were sighted for the same. 46.3% (56) respondents said that they didn't approach government hospital as treatment through MTA Program is good/convenient and free. 39.2% (39) respondents said that treatment at government hospital was not good and unhygienic. 12.3% (15) respondents said that they preferred MTA Program over Government Hospital as transportation is provided for free. The nearest government hospital is at Kadi and Fatehpura, accessing which requires a certain amount of money. 40.5% (49) respondents cited reasons like the treatment at Government hospitals is not upto the mark and staff doesn't respond well etc. Affordability has been one of the top most reasons for which MTA Program was preferred by the people in the villages owing to their socio-economic conditions and ease of access of treatment provided through this program.

### 3. Quality of Treatment

Quality of treatment is the degree to which the health services for individuals increase the likelihood of desired health outcomes. It is based on evidence-based knowledge and important to ascertain whether the efforts are reaping the suggested results or not.

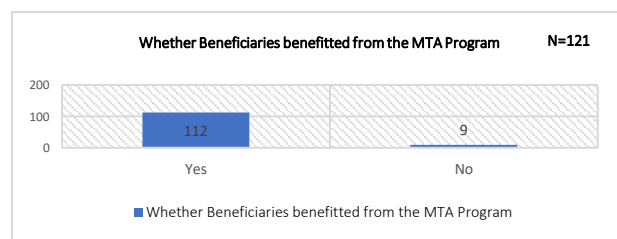


Figure 5: Whether beneficiaries benefitted from the MTA Program

As per the data received from the beneficiaries, 92.6% (112) of them had benefitted from the MTA Program while 7.4% (9) saw no benefits post treatment under the MTA Program. Many reasons were sighted for the benefit. The major reason sighted was that the treatment was free/affordable which otherwise wouldn't be accessible to them due to their socio-economic condition. The out-of-pocket expenditure was minimal, one which wouldn't bear a hole in the pockets of the beneficiaries. This was one major reason that the beneficiaries found the treatment to be beneficial and affordable, both.

The beneficiaries also sighted reasons like quality of support provided. The medical facility was good with all ultra-modern amenities and the service of the staff at the hospital was said to be good. Apart from that, beneficiaries also sighted reasons like free transportation to the hospital for the treatment.

*"Mane ek aankh ma motiyo hatu ane biji aankh ma jhamar. Occura ma operation pachhi saras dekhaay chhe. Have hu tractor pan chalai shaku chhu!"*  
(I had cataract in one eye and drowsiness in another eye. I am able to see properly after the operation at Occura. Now I can drive a tractor also!).

- Beneficiary aged 68

*"Motiya hata aank ma. Saanje occhu dekhathu hatu. Majoori varg na loko chhe ame, etle kaame to javaay nai kemke occhu dekhaay. Camp ma tapas karayi ane operation maate lai gaya hata. Have saras dekhaay chhe, complete!"*  
(I had cataract in my eye. Could see less in the evening. We are labour class people, thus couldn't go to work as could see less. Got diagnosed at the camp and was taken for operation. Can see better now, complete!).

- Beneficiary, aged 57

7.4% (9) respondents said that they were not satisfied with the treatment. Reasons sighted were various ranging from pain in the eye post treatment, unable to see clearly despite the treatment and watery eyes despite being operated for cataract.

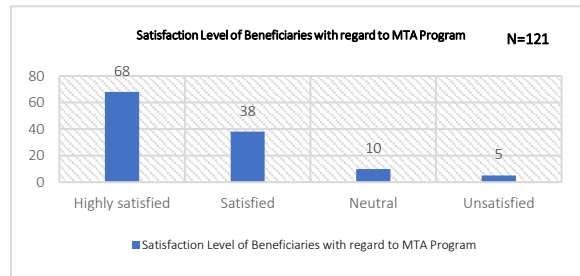


Figure 7: Graph showing level of satisfaction of the beneficiaries

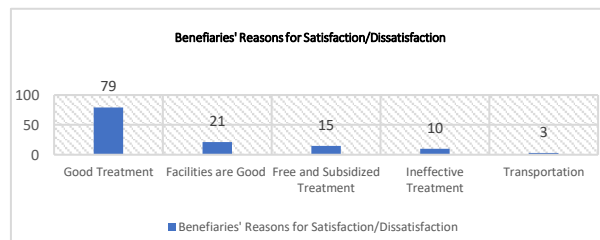


Figure 8: Graph showing reasons for satisfaction level of beneficiaries

With regard to satisfaction of the respondents with the MTA Program, it is evident from Figure 6 that 56.2% (68) respondents were highly satisfied with the treatment provided. 31.4% (38) respondents said that they were satisfied with the treatment provided. 8.3% (10) respondents were neutral in their response while 4.1% (5) respondents were unsatisfied with the treatment provided.

Figure 8 is illustrative of the reasons for satisfaction and dissatisfaction of the respondents with regard to the treatment provided. 65.3% (79) said that since treatment provided is good, they were satisfied with it. 17.4% (21) said that the facilities provided at the hospital are good, thus they were satisfied. 12.4% (15) respondents were satisfied due to the free and subsidized treatment provided.

The respondents who were neutral/dissatisfied with the MTA Program said that the treatment provided to them was ineffective. The reasons sighted were that despite the operation, there was pain and itching in the eyes, the eyes were watery and the vision was not clear.



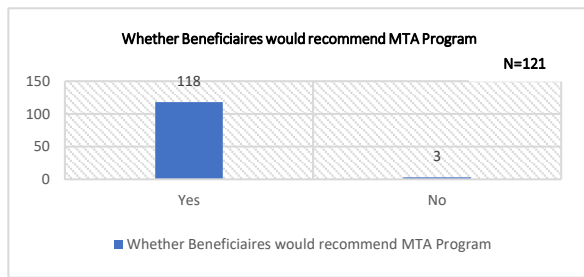


Figure 8: Graph showing whether beneficiaries would recommend MTA Program

Successful recommendation of the MTA Program would mean that the program has met its intended objective as the beneficiaries would themselves become the patrons of the program. With respect to beneficiaries recommending the MTA Program, it was found that majority of the beneficiaries, 97.5% (118) would recommend this program to other individuals. 2.5% (3) respondents said that they wouldn't recommend the program to anyone else sighting reasons that the treatment was ineffective and that money was charged at the hospital.

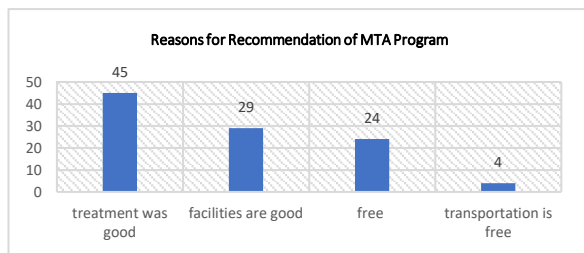


Figure 8: Graph showing reasons for recommendation of MTA Program

The beneficiaries sighted various reasons for the recommendation of the MTA Program. Based on the responses received by the respondents, the major reason for the satisfaction level with MTA Program was that the treatment provided was good. 37.2% (45) respondents said that the quality of treatment provided through this program was good. It was not only quality treatment that was provided, but the fact it was free was also sighted by 23.9% (29) respondents. 19.8% (24) respondents said that the treatment was free due to which they would recommend the Program to other people who are in need. 3.3% (4) respondents said that they would recommend because transportation is provided which saves them the additional cost that is incurred on travel.

## Conclusion

For the purpose of undertaking impact evaluation study, the research team reached out to 33 percent of total beneficiaries (1108) and made all possible efforts to approach them. This report is a compilation of the responses of 121 beneficiaries approached who had confirmed that they have taken benefits under the MTA Program.

Overall, the Medical Treatment Assistance (MTA) Program of INTAS Foundation which is implemented in collaboration with Occura Eye Care and Research Institute has aimed to provide support to most of the beneficiaries as laid out in their objectives. The approach of conducting the camp at the grassroot level with the help of Panchayat Members at the local Primary Health Centre (PHC) has proven to be beneficial towards participation of the rural areas.

A good turnover of people was witnessed by the team at the Medical Camp in Zinzuwada at the PHC held on 27th of April, 2023. Upon interviewing some of the individuals randomly regarding why they had come to this camp, responses received were:

*"Sambhadyu tu ke camp ma tapaas thaay chhe ane saarvaar mafat ane saras madi reh chhe, etle ame pan aaya."*  
(Had heard that the check-up takes place at the camp and the treatment provided is free and nice, thus we also came).  
- Beneficiary aged 62

*"Loko thi sambhadyu hatu ke saarvaar complete made chhe. Ame pan batava aavya chhe."*  
(Have heard that the treatment provided is complete. We have also come for a check-up).  
- Beneficiary, aged 57

The responses of the beneficiaries interviewed highlighted that the treatment provided at Occura was not only free/subsidized, but also of high quality and timely. The major reason sighted by most of the beneficiaries who had undertaken subsidized treatment included that the out-of-pocket expenditure incurred for healthcare services was reduced to a large extent. While the same

services are provided at the Government hospital, on-treatment and off-treatment care provided by Occura is good. Based on the socio-economic vulnerability of the beneficiaries, the approach and treatment provided by INTAS Foundation's MTA Program were found to be good.

On the whole, at the impact level, the MTA Program has had a good and positive impact on the day-to-day activities of the beneficiaries. Owing to the fact that most of the beneficiaries who had availed the benefits belonged to low socio-economic background, were agricultural labourers, MTA Program has helped them get back to their livelihoods by the means of providing them with clear vision.

## Observations and Recommendations

Based on the impact evaluation conducted, it is found that while efforts are being made by INTAS Foundation and Occura to reach out to the vulnerable population for medical assistance, the management of data needs to be systematized so as to achieve the desired results in terms of assessing the impact of the program. It was observed from the views of the beneficiaries who could be contacted that the project is meeting the objectives as sought.

Since the Health Check Up Camps are held at the PHC, there is no clarity among beneficiaries whether the treatment is provided through PHC or INTAS Foundation.

It is recommended that:

1. The excel sheet of the data should include complete name (along with middle name), phone number (if available) and complete residential address of the beneficiaries. While attaching adhaar card in the case file is a very good practice, the organization need to maintain a separate record of each of the beneficiaries in excel sheet. The sheet should also provide nature of treatment provided.
2. In case beneficiaries do not have a phone number, correct numbers of the point of contact should be provided so that it is easy to track them on/off the field.
3. The project brief of INTAS Foundations MTA Program needs to illustrate effectively the methodology adopted in identification of the beneficiaries. The project brief can be re-worked including the how the vulnerability assessment is conducted, the approach adopted, etc.
4. Given the nature of support and extent of free services related to Eye Treatment available currently in the state of Gujarat, it would be noteworthy if INTAS Foundation extends its medical services/treatment program for other medical



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*We acknowledge the support of Prof. Sanjay Vanani and his team of students of Ganpat University for the support extended to us for data collection*