



KC Ortiz, photojournalist and Kyle's brother, captured these moments in Cambodia. Above left, an Operation ASHA treatment provider administering TB Cambodia, most TB patients had to trek many miles to one of the few government hospitals for their daily pill, making it challenging to complete their

“It will be accomplished.” This became **Kyle Ortiz’s** '04 BS mantra when he volunteered to build a tuberculosis treatment program from scratch in Cambodia and had only five months to complete the task before returning to the United States. In that brief time, Ortiz arranged a meeting with the country’s minister of health to develop a collaborative relationship with the government, hired the first employees and set up three treatment centers in the capital of Phnom Penh.

Ortiz had helped grad school friend Sandeep Ahuja develop a similar program in India titled Operation ASHA, named after the Indian word for hope. The organization’s goal is to eradicate TB from disadvantaged communities through treatment, education, supportive services and preventive measures. When his friend expressed an interest in expanding to another country, Ortiz agreed to launch OpASHA in Cambodia. He had been teaching there while on a paid public service leave from his New York City law firm and was eager to do something “impactful.”

GRASSROOTS

According to the World Health Organization (WHO), Cambodia has one of the highest TB rates and a health system weakened by decades of civil unrest and economic hardship. Diagnosis and treatment services used to be available only in hospitals, but many people were deterred by the cost of travel and accommodations. Or they waited until they were very sick, infecting others in the meantime. The decentralized, grassroots approach adopted by OpASHA relies on small community health centers and neighborhood counselors.

“It’s a tricky treatment that requires one pill every day for seven months,” says Ortiz. “We tried to take away the hurdle of requiring a doctor or hospital staff member to dispense the medication. Why not an employee at a little store in a dense urban slum close to where they live? The WHO provides the medicine free, so there’s no black market. And Microsoft donates biometric devices that patients swipe with a finger to show they took

a pill that day. Neighborhood counselors can closely monitor use, check in personally with those who have missed a dose and encourage them to continue treatment.

“It costs OpASHA only \$30 to diagnose and treat a patient for the full seven months. The challenge is that two months in, they feel like they’re cured. But if they stop taking the pills, they can develop a scary super-resistant strain that costs \$6,000 to treat. That’s why it’s critical to reduce the default rate. Many organizations have a default rate around 20 percent, but OpASHA’s is 1 percent in India and zero in Cambodia.”

Ortiz says he developed his can-do mindset at Northern. As ASNMU president, he organized a project that generated 2,000 letters from students at all of Michigan’s public universities, expressing concern over impending budget cuts to higher education.

“NMU showed me that you can actually go out and accomplish something big; that if you go for it, great



medication to patients at a treatment center in Phnom Penh; center, a TB patient at a government hospital. Before Operation ASHA began work in seven-month treatment. Right, an OpASHA counselor making a home visit to check on a patient.

By Kristi Evans

HEALTHCARE

things can happen,” says the 2011 Outstanding Young Alumni Award recipient. “My plan was to go into politics after obtaining my master’s in public policy, but I got frustrated with the process of trying to affect change through politics. No one is making it through that path without selling out; that’s just the way the system works. Practicing law offers flexibility, new opportunities to get involved and connections with people.”

While enrolled in law school in his hometown of Chicago, Ortiz further demonstrated his commitment to public service, which was nurtured by what he witnessed during U.S. and international travel with his parents. “I always felt a responsibility for those not fortunate by the pure chance of where they were born,” says Ortiz. He taught basic law and human rights to inner city high school students with Street Law, worked with the consumer watchdog group Kids in Danger, taught English as a second language (ESL) through a

community college and helped the Parkinson Association of Illinois increase its exposure and donor base.

Ortiz is an associate with Weil, Gotshal & Manges in New York City. He represents chapter 11 debtors, with most of his time split between American Airlines’ parent company, AMR Corp., and Lehman Brothers Holdings Inc.



Kyle found a language instructor, ally in his mission and life partner in Cambodia native, Sophea

“In response to market conditions in 2009, the firm offered recent hires the opportunity to take roughly 18 months off and receive a public service stipend. They basically said, ‘We’ll give

you a stipend if you’re willing to go do something good and not come back until January 2011.’ How many people in their 20s are given that opportunity? I planned to teach ESL in China, but learned you could train for that and take Chinese language classes in Cambodia. I figured doing it that way would allow me to check another country off my list. My language instructor was Sophea, a Cambodian native who is now my wife. I went to China as planned, but Skyped her every day and returned to Cambodia for the sole purpose of seeing where that relationship would lead.”

A status update from his friend in India gave Ortiz a second purpose: starting an OpASHA program in Cambodia. Sophea’s language skills proved invaluable in dealing with high-level officials to gain government support for the effort.

OpASHA now has more than 50 treatment centers in the country and plans to extend its reach with 75 mobile centers by December. Ortiz continues to be involved by serving on the organization’s U.S. board of directors. ■