

SJA

Annual Report

2010



VISION

A society free from poverty, hunger and all forms of discrimination based on gender, creed or ethnicity.

Contents

A note from the Executive Director	2
Acronyms	3
Mission Statement	4
SJA: Milestone	5
SJA: At a glance	6
SJA: An Overview	7
SJA Working Area	8
Community Mobilization Project to End Violence Against Women (CMPEVAW)	9
Removing Cultural Barriers and Promoting Rights of Children with Disabilities (RCBPRCD)	14
HIV and STI Prevention Project-MODHUMITA	19
Provision of Essential Services to Street-Based and Hotel/Residence-based female sex workers in selected district of Bangladesh, GF -909	26
Provision of Essential Services to Street-Based and Hotel/Residence-based female sex workers in selected district of Bangladesh, GF-908	34
HIV/AIDS Prevention Service Project for Hotel and Residence based sex workers-HAIS	38
Early Childhood Development Support Program-Bangladesh (ECDSP-B)	41
Post Literacy and Continuing Education for Human Development Project-2 (PLCEHD-2)	44
Efforts for Capacity Building of Community Based Organization (ECCO)	49
Community support systems (ComSS), Maternal and Neonatal Health Project	50
Enhancing Environmental Health by Community Organization (EEHCO)	54
Proximity Service for a full participation with disabilities in all spheres of life	56

A Note from the Executive Director

SJA has gathered 20 years of grassroots level experiences so far in the vast arena of human development. The experience it gained through the implementation process of activities, projects and programs have enabled us to become a SJA of today from a beginner. SJA always keeps itself update with the changing circumstances of development trends, ideas, ideology and examines and cross-examines the needs of them on the ground and the people in particular.

In this reporting year 2010, SJA has accomplished successfully with a lot of challenges and it has expanded the area coverage to all over Bangladesh with the consortium approach and incorporated the different renowned organization of Bangladesh as implementing associates.

SJAs successful implementation of program activities shows through this yearly report of 2010

We are grateful to all our past and present well-wishers, supporters, Donors, the Government of Bangladesh, partner organization, our community level stakeholders, members of the General and Executive Committee who have extended and have been extending continued supports to SJA. I personally acknowledge my heart rending gratitude to all of them. I also express my warmest wishes to all my colleagues and all staff members and volunteers and specially those who put their endeavors in this report.

A H M Faisal Ahmed
Executive Director

ACRONYMS

AAB	Action Aid Bangladesh	MCH	Mother and Child Health
AAS	Ashar Alo Society	NID	National Immunization Day
AIDS	Acquired Immune Deficiency Syndrome	OCC	One-stop Crisis Center
AP	Action Plan	O&M	Operation and Maintenance
AKF	Aga Khan Foundation	PE	Peer Educator
CBO	Community Based Organization	PFT	Project Facilitation Team
CEDAW	Convention on the Elimination of all forms of Discrimination Against Women	PHA	Positive HIV-AIDS
CWDs	Children with Disability	PLP	Participatory Learning Process
CM	Change Maker	PRA	Participatory Rapid Appraisal
CMEVAW	Community Mobilization to End Violence Against Women	PWDs	People with Disabilities
CAS	Community Situation Analysis	RBA	Right Based Approach
CT	Counseling and Testing	RD	Reflective Dialogue
DILARA	Deaf in Literacy and Rights Academy	RW	Ring Well
DIC	Drop in Center	RH	Reproductive Health
DRCD	Decentralized Resource Centre on Disability	RTM	Research, Training and Management
DTW	Deep Tube-Well	SBC	Strategic Behavior Change
DV	Domestic Violence	SDO	Social Development Officer
EC	European Commission/Executive Committee	SMC	School Management Committee
FGD	Focus Group Discussion	SS	Safer Sex
FP	Family Planning	STAR	Stepping Stone and Reflect
FIVDB	Friend in Village Development Bangladesh	STI	Sexually Transmitted Infections
GO	Government Organization	STW	Shallow Tube-well
GF	Global Fund	SUST	Shahjalal University of Science And Technology
HBS	Hotel Based Sex worker	TB	Tuberculosis
HH	House Hold	TOT	Training Of Trainers
HI	Handicap International	UP	Union Parisad
HIV	Human Immune-deficiency Virus	USAID	United States Agency for International Development
HP	Hygiene Practice	USTF	Union Sanitation Task Force
IEC	Information, Education and Communication	VAW	Violence Against Women
IFG	Infiltration Gallery	VCT	Voluntary Counseling and Testing
IGA	Local Govt. Institute	WS	Water and Sanitation
IHC	Integrated Health Centre	WSP	Water Safety Plan
M&E	Monitoring and Evaluation	WSTF	Ward Sanitation Task Force
SCUSA	Save the Children USA	DMC	DIC Management Committee

Mission Statement

SJA deals with people in distress, who are poverty stricken, socioeconomic ally marginalized, illiterate, disables, discriminated due to gender, creed, ethnicity and so and thereby excluded. Women and children, the most vulnerable group of the population, are the primary concern of SJA. The organization promisingly and persistently works to uplift the downtrodden, and to bring sustainable changes in the lives of the deprived people.

SJA is committed to establish well organized community of healthy and literate individuals who are both motivated and empowered to develop/improve their socioeconomic status. SJA firmly believes that through partnership and active participation, local people can develop their own capacity to make productive use of local resources, wise use and conservation of natural resources.

SJA desires to help people in rediscovering/regenerating their hidden potential by promoting human rights, dignity, gender equality and creating healthy living environment.

In the complex process of human development SJA remains open in learning and sharing of knowledge and skills, in partnership building with organizations, Government institutions, development partners for being ever unsaturated in the development process.

SJA upholds humanity and gives importance to and values human potential and discourages any sort of sectarianism. SJA maintains gender balanced staffing, encourages their development/improvement and broadens their commitment level towards the grassroots where the inspiration of SJA remains/belongs to.

SJA Milestone

- 1991 Emergence of SJA
- 1992 Youth focused skills training and development
- 1994 Non-formal education for underprivileged children & adults
- 1995 Incorporation of health and family planning
- 1998 Introduction of disability program
- 1999 HIV/AIDS prevention
- 2001 Integration of human rights issues as part of development
- 2003 Strategic shift to rights based approach
- 2005 End violence against women
Connect deaf people to rights and opportunities
- 2008 Program expansion in Chittagong Division
- 2009 - Introduction of Early Childhood Development(ECD) Support Program
- Program expansion to entire Bangladesh
- 2010 Post Literacy and Continuing Education



SJA: At a Glance

Program Infrastructure	
Central Office	01
Project Office	03
PRT Center	02
Community Clinic	01
DIC/IHC	27
School of Deaf Children	02
Training Facility	02

Program Coverage	
Districts	30
Upazilas (sub-districts)	72
City Corporation	06
Paurashava	21
Villages	1710
Urban Slums	30
Population Covered	1.42 million

Human Resources	
Senior-level Staff	15
Senior Mid Level	40
Mid-level Staff	64
Front Line Staff	112
Support Staff	108
Total Staff:	339
Part time	868
Grand Total:	1207

Development Sector
Health and Population
Education
STI and HIV/AIDS
Disability
Water and Sanitation
Gender and Human Rights

Annual Expenditure	
Year	Amount in Taka
2006	19726353.00
2007	29392265.00
2008	61847692.00
2009	83708774.00
2010	92,460,380.00

SJA: An Overview

Sylhet Jubo Academy (SJA) came into existence/emerged in August 1991 by a small band of philanthropists/volunteers and social workers, led Mr. A H M Faisal Ahmed, a former United Nations Volunteer, Their aim was to develop a local based non-political development organization that would operate at grassroots level to address the real needs of socio-economically marginalized community people.

The nomenclature signifies 'a working and learning center of youths of Sylhet' and in that way the organization made its appearance with youth training activities in orders to develop young

people's skills and thereby flourishing their economic prospects.

Since then, SJA is in the journey of stream of human development activities and has involved itself in



development innovation along with quantitative and qualitative expansion. The organization now focuses its efforts on Human Rights, Good Governance, Childhood Development, combating diseases like STI and HIV/AIDS, malnutrition; social wounds like poverty, illiteracy, unemployment and issues like disability, health, environment, income and employment generation, water and sanitation, gender sensitization and stop violence against women and children.

SJA is legally registered with the NGO Affairs Bureau, Department of Social Services and Joint Stock Company of the Government of Bangladesh.

Community Mobilization to End Violence against Women Project

Location of the Project

Division	District	Working Areas	
		Upazila/ Pourashava	Union/Ward
Sylhet	Sylhet	Sylhet Sadar	10 Ward of City Corporation
		Biswanath	8 Union
		South Surma	2 Union
		Jointapur	3 Union
	Moulvibazar	Moulvibazar	9 Ward
		Sreemangal	9 Ward
		Kulaura	9 Ward
	Hobigonj	Hobigonj	9 Ward
		Chunarughat	2 Union
		Bahubal	2 Union
	Sunamgonj	Sunamgonj	9 Ward
		Derai	9 Ward
		Bisamberpur	9 Ward

- Funded by : OXFAM GB - Bangladesh
- Duration of the project : 1st April-2010 to 31st March 2011
- Numbers of staff & Volunteers : Project Coordinator-1, Accountant-1, Campaign Organizer-4, Field Traomer-1
- Funding Agency : Oxfam GB Bangladesh (Gender Program)
- Target beneficiaries : All class of people in our working area, population- 8,52,339
- Implementing areas : Under this project, the work implemented in the following districts of Sylhet Division:- Sylhet, Sunamganj, Moulvibazar and Hobiganj
- Goal of the project : To seek a fundamental shift in people's ideas, beliefs, attitude and behavior by challenging behavior, providing alternatives and supports to end violence against women within the society.



- Objective of the project : To achieve the goal following specific objectives has been set-up:
- i) To create an environment to break the silence of DV and to recognize the DV issue as public;
 - ii) To create an enabling situation through raising awareness where people in the community will be able to seek the alternative.
 - iii) To reduce the incident of VAW specially DV against women by creating positive environment.
 - iv) To bring more positive gender relationship.
 - v) To create an effective alliance with a view to sustain the change/positive behavior within the community.
 - vi) To build an effective network to spread the CMEVAW project throughout Sylhet division by campaign activities.
- Implementation strategy :
- a. Word and Union forum Formation
 - b. Community mobilization & involvement with the project.
 - c. Identifying the influential social actors.
 - d. Community mobilization through cultural activities.
 - e. Creating Change makers who are the central of the project.
 - f. Establishing and strengthening Networking bodies.
 - g. Developed & distribution IEC & BCC materials.
 - h. Advocacy Program.
 - i. Coordination & collaboration with GOB officials, Law-enforcing agencies, Health department and Judiciary through formal & informal meeting and contact
 - j. Monitoring the situation of VAW through news paper, monitoring hospital, court and law enforcing agencies
 - k. Alliance Formation Upazila to District level
 - l. Event wise campaign activities
 - m. Situation analysis
 - n. FGD (focus group discussion)
 - o. RD (Reflective Deluge)
 - p. Refers the survivors to the Legal Aid Agency



Activities of the project:

In the whole year project activity implemented by two ways: Regular Activity and Campaign Activity

Regular Activity:

SI No	Activity	Objective	Participants
01	Staff Meeting	Capacity building	Project Staff
02	Staff Orientation	Capacity building	Project Staff
03	Staff Orientation (Other Project)	Capacity building	Other Project Staff
04	Meeting with UP member	Awareness building about gender and DV	UP member and Chairman
05	Meeting with School managing committee	Awareness building about gender and DV	School managing committee member
06	Seminar with school level teacher and Student	Awareness building about gender	Student and teacher
09	Quiz competition with school student	Awareness building about gender by drawing	School student
10	Seminar with college student teacher	Awareness building about gender discrimination and DV	College student and teacher
11	Advocacy workshop with university teachers & students	Awareness building about gender discrimination and DV	University teachers & student
12	Debate with university student	Awareness building about gender discrimination and DV	University student
13	Youth Club orientation	Capacity building about DV and gender	Youth club member
14	Meeting with municipalities	Capacity building about DV and gender	Chairman, member's
15	Meeting with UP level CM group	Capacity building about DV and gender	Men/ women/ adolescents
16	Change maker creation	Networking	Community people
17	Change maker conference	Raise CM voice	Change makers
18	IEC,BCC materials	Message dissemination	Community people
19	Alliance building	Networking	Focal persons
20	Responsive work to End VAW.	Response to protect VAW	Victims
21	Exchange visit	Capacity building and Learning sharing	Staff & Change makers

Campaign Activities:

SI no	Activities	Objective	Target people
1	Organizing cultural program (Folk song, Street theatre, Mass Gathering)	Message dissemination through popular event	Community people
2	Day Observation (AIDS Day, Disability Day, Women's Day, Rokeya Day etc.).	Message dissemination	Community people
3	Rally	Message dissemination	Mass people
4	Pestering	Message dissemination through poster	Community people
5	Cable telecast	Message dissemination through Cable TV.	Community people
6	Transport campaign	Message dissemination through Transport painting	Mass people
7	Human Chain	Message dissemination	Community people
8	Human in black	Message dissemination	Community people

Campaign activities:

- 1 June – July Campaign- 25th June to 10th July.
- 2 November – December Campaign- 25th November to 18th December.
- 3 March Campaign- 1st march to 20th march.

June – July Campaign Activities:

SI No	Activity	Number of event	participant
01	Spot and scroll telecast through cable network.	04	80000
02	Postering	8000	200000
03	Door to door campaign	08	4000
04	Human Rally	01	300
05	Press Conference	01	20
06	Scroll Telecast	04	-
07	Folk Song	02	2000
08	Transport campaign	02	4000
09	Street theatre	02	2000
10	Football Match	01	5000

November – December Campaign Activities:

SI No	Activity	Number of event	participant
01	Press conference	01	--
02	International Women's Violence Prevention Day celebration	01	2000
03	Door to Door campaign and School visit	08	3000
04	Post card distribution	4000	4000
05	Folk song	04	10000
06	Street drama	02	4000
07	Human Rally	01	300
08	Transport campaign	04	8000
09	Street Meeting	09	2000
10	Day Observation (AIDS Day, Disability Day, Rokeya Day).	03	20000
11	Quiz Competition	01	450
12	Human chain	01	300

March Campaign Activities:

SI No	Activity	Number of event	participant
01	Sharing meeting with Journalist	01	18
02	Door to Door Campaign	04	150
03	Door to Door Campaign	08	3000
04	International women's Day celebration	01	500
05	Celebration Dowry free couple marriage	01	500
06	Mass Gathering	01	1000
07	Sport and scroll telecast through cable network	02	20000
08	Street drama	02	2500
09	Folks song	02	1000
10	Transport campaign	04	20000
11	Campaign Rally	01	300

Project Impact:

- SJA management committed to mainstreaming the DV/VAW issue within the organization
- Strong ties with grassroots people, local government. Citizen groups and other self help groups.
- Community people now talking regarding the VAW/DV issue.
- CM is practicing positive behavior within their families.
- The relationship between husband and wife within working area healthier and increasingly non-violent.
- DV issue is being increasingly discussed in various forums in Sylhet.
- Mass awareness raised in Sylhet through the Campaign event.
- Victim comes for legal support
- Change Maker is now willingly participating in arranging WE CAN Campaign.
- Prevent a number of early marriages within the community with the active cooperation of change makers.
- Alliance formed to protest DV and their acting their role.

Removing Cultural Barriers and promoting Rights of Children with Disabilities (RCBPRCD)

- Location** : **Urban Area:**
House – 03, Road – 14, Block-D, Shahjalal Uposhahar, Sylhet-3100
- Rural Area:**
Hazi Motahir Ali Villa, Ahmed Khan Road, Cita Fulbari, Golapgonj
- Geographical coverage** : Sylhet Sadar and Golapgonj Upazilla
- Project Goal** : Sylhet Jubo Academy deals with different types of Program Implementation. As a result, it has a vast opportunity to observe so keenly the actual field situation. SJA Management Committee Members felt urge to provide service to the disabled children around us finally, they took initiative and started work for disabled children, funded by Action Aid Bangladesh.
- To promote an inclusive society where children with disabilities participate in every sphere of life free of cultural barriers
- Objectives** :
- To strengthen livelihood capacities of families of children with disabilities;
 - To promote access to education of children with disabilities on equal basis with others.
 - To promote access to health care facilities that address special needs of children with disabilities.
 - To protect Children with disabilities from violence and abuse at private and public spheres;
 - To promote access to sports and recreational activities of children with disabilities on equal basis with others.
 - To promote ideas of human rights of children with disabilities in all spheres of society.
- Project Duration** : 3 years, 2008-2010
- Total Students** : 64 Disable Students



Activities and Progress in reporting period

1. Supporting access to education for children with disabilities and promoting inclusive education

SJA under RCBPRCD project operate two Special School for Children with disabilities. One school at Sylhet City Corporation and the another at Golapgonj. Students get facilities mostly ages between 5-18. They come here are mostly deaf, but there are also students with intellectually disable, children with physical problem and autistics. During the reporting period, due to dropout and mainstreaming process, the current numbers of students at City Corporation School are 34 and at Golapgonj are 30. These students are provided pre-primary and primary education. Teachers are specially trained in Sign Language. For deaf children we introduced books under national curriculum through Sign Language. We do aware the students where UNCRPD works as a guiding principles.



In 2010 through Consulting with the UNO at Sylhet Sadar and Golapgonj Upazila we collected 70 set of books (Under national curriculum board) of different classes for disable students of both schools. In 2010 these students showed gradual improvement in four exams held quarterly. SJA provided snacks for the students at interval. To promote access to education of children with disabilities SJA selected 10 schools in Sylhet and Golapgonj. During 1st quarter, we have met with school teachers & SMCs and as a result,



SJA are able to admit disable students to mainstream schools. During 1st quarter, we admitted six students at mainstream schools, five in Sylhet and one at Golapgonj. In 2010, we admitted thirteen (13) students at our schools. Ten (10) students at Sylhet and three (3) students at Golapgonj. To continue education we supported our eight (8) students providing scholarship to league with Upazilla Social Welfare Department in Golapgonj. On 10 June 2010, eight students received scholarship; Upazilla Social Welfare Officer of Golapgonj Upazilla was present at the scholarship awarding ceremony.

SI #	Activities	Location	Output/achievement (Jan-Dec'10)
1.1	Enrolment in to mainstream formal/non-formal and special education institutions	Sylhet and Golapgonj	64 children
1.2	Providing scholarship and supports for continuing education	Golapgonj	8 children
1.3	Operating special school for sign language user & children with intellectual and multiple disabilities	Sylhet and Golapgonj	2 schools

2. Supporting CWDs with therapeutic services, assistive devices and access to health care services



SJA provided therapy at every Saturday in Sylhet and at Golapgonj at every Thursday at our schools. SJA also provided home based therapy services for those who are unable to travel. In 2010 SJA provided therapy to 190 people. During the reporting period, one hundred and four (104) female and eighty six (86) male received therapy in Sylhet and Golapgonj. After receiving therapy they felt better. Many of them now

doing something, moving and walking, after all their condition are better. In 2010, SJA



referred for health checkup, therapy and physical test referred 3 children with disabilities to DRCD and Jalalabad Punarbason Kendra. SJA referred a child with cleft lip and cleft plate to CDD, Saver, Dhaka. But since his parents did not know how to take service from CDD, for this reason SJA helped and guided them all the way through. SJA with its own fund provided 1 assistive device (Wheel Chair). Besides

that, under this project SJA identified 39 children with disabilities. Among them 14 are deaf, 8 are intellectually, 13 are physically disable and 1 is blind.

Quantitative report:

SI	Activities	Location	Output/achievement (Jan-Dec'10)
2.1	Referral Services	Sylhet	3 children
2.2	Support for Surgery	Sylhet	1 children
2.3	Distribution of Assistive Device	Golapgonj	1 children
2.4	Primary therapy services	Sylhet and Golapgonj	190
3.1	Primary care orientation to the family members	Sylhet and Golapgonj	32 participants
3.2	Meeting with caregivers	Sylhet and Golapgonj	16 meetings 277 participants

3. Providing counseling for parents, parenting/caregiver training, and promoting parent platform:

During this reporting period, to ensure Primary health cares and rights of CWDs, SJA oriented fifteen family members of CWDs. These children are mostly deaf and physically disables. Their family members were unaware about primary care and their rights. After orientation they are conscious of taking primary care of their child.



Care Giver Meeting:

In 2010, SJA organized 16 meetings with Care Giver Groups in Sylhet (10 meeting) and Golapgonj (6 meeting) and average participant were 17. During the meeting, we discuss some issues on related subject-studies, health, rights and contemporary issues related to disabilities etc. They also shared their views and opinions. After discussion with the parents we come to know that they need some special supports for the betterment of their children with disabilities.



These special supports they sought are-

- Permanent opportunity for education
- Easy transportation facility
- Stipend for their children
- Income generating opportunities for family member.

4. Campaign for the ideas and awareness rising of human rights of children with disabilities

To promote the rights of the disables and to protect them from violence and abuse at private and public spheres, we have organized counseling and awareness/Court yard meeting in Sylhet and Golapgonj. During the reporting period, SJA took total twelve (12) meetings with community people in different place in Sylhet and Golapgonj. There SJA discussed about disabilities, type of disabilities, way to avoided disabilities, our roles and duties for disables and aware people about UNCRPD.



We observed various day with district Social Welfare department, City Corporation, DC Office and NGOs. SJA observed National Disability Day and 3rd World Autism Awareness day on 2 April 2010, World Literacy Day on 8th September 2010, Child Rights Week on 4-10 October 2010, White Cane Safety Day on 10 October 2010 with District Social welfare department, City Corporation, DC Office and other organizations workings with disabilities.



SJA observed 19th International Disability Day on 3 December 2010 at Golapgonj where children with disabilities and their parents, Chairmen of Press Club and Journalists were present. The total participant of this program was 55.

In Sylhet, SJA observed this day with District Social welfare department, City Corporation, DC Office and other organizations workings with disabilities where participated fifty of disabled child. The Chief Guest

was Mr. Bodor Uddin Ahmed Kamran, Mayor of Sylhet City Corporation.

Quantitative report:

SI	Activities	Location	Output/achievement (Jan-Dec'10)
4.1	Organizing Court yard meeting	Sylhet and Golapgonj	12 meeting Average participants were 16
4.2	Observation of National Disability Day and World Autism Awareness Day, Child Rights Week, World Literacy Day, White Cane Safety Day, International Disability Day, World Mental Health Day, World Dignity Day	Sylhet and Golapgonj	5 days

5. Promoting sports and recreational activities for children with disabilities

SJA maintain regular liaison with GoB Officials specially DC office, UNO, Social welfare and Education department. SJA has buildup



functional linkage with NGOs working with children with disabilities, for example SJA is a member of NASPD, BSAF and NFWDO etc.

Divisional Sports Competition held in 21st December 2010 organized by NASPD & Action Aid Bangladesh Jointly where our 40 participants participate in different events among them 8 got first 7 got second and 2 got third prize. Parents took their children to the competition from part of their responsibilities and enthusiasm.

Quantitative report:

SI	Activities	Location	Output/achievement (Jan-Dec'10)
5.1	Establishing National and international linkage		National organizations: NFWDO, CDD, NASPD
5.2	Facilitate children for participating in Divisional and National sports	Sylhet	40 Children

6. Other Activity

During 1st quarter, we admitted eleven students to Sylhet Shishu Academy in art department, some of them are really done well in drawing.

Through liaison with Social Welfare Department of Sylhet, we were able to collect 66 ID card for our disables students.

SI	Activities	Location	Output/achievement (Jan-Dec '10)
6.1	Admit to Shishu Academy	Sylhet	11 children
6.2	National Disable Identity Card Collection	Sylhet and Golapgonj	66 ID Card



HIV and STI Prevention Project (MODHUMITA)

- Funding Source / Donor : Family Health International (FHI)
- Target beneficiaries : Hotel Based Sex worker and their clients
- Goal of the Project : To reduce the risk of STI and HIV transmission among hotel based Sex workers and their clients in the cities of Sylhet and Sreemangal municipality.
- Total Staff : PM-1, Admin and Finance-1, Center Manager-2, Counselor-1, Paramedic-1, Trainer-1, Office Assistant-1, Outreach Supervisor-3, Sputum Collector-2, Peer Educator-8, Peer Volunteer – 8, Office Helper-1, Cleaner-2
- Implementing area : Under this project there are two Implanting Center, one in Sylhet City Corporation and another in Sreemangal.
- Objectives of the Project
- Create a supportive environment for working with prostitutes through social mobilization.
 - Increase competency of project staff on project management and behavior change.
 - Promote risk elimination and risk reduction practices among prostitutes and their clients through outreach and IHC.
 - Provide quality STI management services for hotel-based prostitutes and their clients/Partners.
 - Create VCT services options for hotel-based prostitutes.
 - Increase utilization of IHC services by hotel based prostitutes.
 - Strengthen referral networks for other services for prostitutes and their clients.
 - Increase knowledge, skill and access to products for correct and consistent use of condom in high risk sexual encounters.
 - Create access to TB diagnosis and directly observed treatment services among most-at-risk population (MARPs) and their clients by linking them with Government TB hospitals and clinics and NGO supported TB centers.



Activities of the Project:

Four Major Activities

Outreach Activities:

Outreach Activities consists of four different activities such as- outreach counseling, outreach training, outreach contact with sex workers and their clients and finally comes condom and lubricant distribution in the field.

IHC Activities:

Condom and lubricant also distributed from the Integrated Health Center (IHC). There is a recreation room here in the IHC used as a gathering room of visiting sex workers who can take recreation here in this room. IHC based training and counseling also arranged in the IHC

STI Clinic:

Counseling, STI Treatment, Free Medicine, Condom and Lubricant distribution and Follow Up etc.

VCT Service:

Free Blood Testing facility for every sex worker to prevent HIV/AIDS and STI, Counseling on HIV-AIDS and STI and Refer for Treatment.

Other related activities:

- ◇ Create a supportive environment for working with sex workers through social mobilization
- ◇ Increase competency of project staff on project management and behavior change
- ◇ Promote risk elimination and risk reduction practices among prostitutes and their clients through outreach and IHC.
- ◇ Provide quality STI management services for hotel-based prostitutes and their clients/Partners.
- ◇ Start VCT services for hotel-based sex workers.
- ◇ Increase utilization of IHC services for hotel based sex workers.
- ◇ Strengthen referral networks for other services for sex workers and their clients
- ◇ An attempt to make aware the vulnerable target people about health and importance of safer sex.
- ◇ Create access to TB diagnosis and directly observed treatment services among most-at-risk population (MARPs) and their clients by linking them with Government TB hospitals and clinics and NGO supported TB centers.

Sensitization Meeting with Hotel Manager and owners in Sylhet:

Sensitization meeting with hotel manager and owners was held on 17th February' 2010 at SJA training room, in Sylhet on the HIV-AIDS and STI prevention. Sensitization meeting presided by Shazzadur Rahaman faruque. In this meeting 21 hotel manager and owners are participated. During this meeting first of all we are given brief idea on Sylhet Jubo Academy and HIV and STI prevention (Modhumita)Project and discussed about the what is the HIV-AIDS ,STI and TB.



World TB Day Observation (Sylhet): **“On the Move against Tuberculosis**, “Innovate to accelerate action” Sylhet Jubo Academy (SJA) observed (24th March'2010 in Sylhet and Sreemangal) world TB Day-2010, with deferent events and program like street meeting, Rally (Individual), Rally with Civil Surgeon office and others NGO.

Opening Rally and Discussion Meeting on WTB Day:

On TB Day 2010, SJA has organized a rally from Modhumita Center. The rally was led by Nishi Kanta Chanda, Project Manager. After rally a meeting was held on the observation of World TB Day in Modhumita Center, where related issues were discussed.

Report on Awareness raising meeting with local club Members and Police in Sylhet:

Awareness raising meeting with local club held on the 25th July 2010 at Islampur Sporting club, Islampur, Sylhet. 19 club members attend in this program.

Sensitization meeting with Police held on the 27th November 2010 at South Surma, Kodomtoli fari, Sylhet 17 police constables and officers attend in this meeting's. SJA Centre Manager Romendro Narayan Das, Metal rani Hur, Trainer, Md. faras Uddin, Outreach, attend in this Meeting. Session Facilitated by Md. Faras Uddin and Romendro Narayan das.



Basic/Refreshers Training on peer education and outreach activities Report

Basic/Refreshers Training on peer education and outreach activities for HIV and STI prevention held on the 11, 13 and 15th November 2010 in Modhumita Centre, Sylhet. Total 18 Project Staff of Sylhet Modhumita Center participate in this training (peer educators, Peer Volunteer, outreach Supervisor, Trainer, Counselor, and Center Manager)



World AIDS Day Observation (Sylhet): Stop Aids Keep the Promise:

Universal Excess and Human Right .

Sylhet Jubo Academy (SJA) 1st December 2010 observed world AIDS Day-2010, with deferent events and program like street meeting, Rally and colorful activities all around the country where the HIV Prevention program implemented by the respective Organization



HIV-AIDS coordination committee of Sylhet and participates to the AIDS fair of District Information Office of Sylhet with a vast stall a Volunteer Recognition Ceremony 2010 took place on 29th September 2010 at SJA Training Room, Modhumita Centre, Sylhet. Word counselor Advocate Salem Ahmed, Sylhet City Corporation was present in the program as Chief Guest. The meeting was presided over by AHM Faisal Ahmed, Executive Director, SJA.

The objective of the program was to honor who had supported SJA to implement their program smoothly and for keeping a significant rule to prevent HIV/AIDS.



Report on Sensitization meeting with Journalist in Sreemangal

Sensitization meeting with journalist held on the 20 May'2010 at SJA Training room, Sreemangal. 10 journalist attend in this meeting. At first Md. Mizanur Rahman, IHC Manager, opening the session and given project brief. Another session facilitated by Md. Mohasin, outreach Supervisor. They are discussed about, Service facility in Modhumita center, HIV-AIDS, STI and TB, Present situation for HIV/AIDS & STI in Sreemangal and VCT service.



Report on Project Facilitation Team (PFT) Meeting in Sreemangal

Project Facilitation team (PFT) meeting held on 25th September'2010 at 11.00 am at Sreemangal project office, Sreemangal. The meeting presided by Dr. Horipad Roy, UHFPO, Sreemangal. Others PFT Members attend in this meeting.



Additional Performance achieved:

Participation on NID:

SJA has strong involvement and participation on NID for polio immunization. Regarding NID we are operating two center of vaccination one is in Sylhet IHC and another is front of SJA Head office. During the period we are vaccinated more than 1000 under five years children.

Participated World Population Day Fair in Sylhet:

World Population Day'2010 held on 11th July'2010 in Sylhet. HIV and STI prevention-Modhumita Project and others health related project of SJA Participated 3 days long Information Fair (14 to 16July'10) in Stadium gate, Organized by District Information office, Sylhet. With a vast a arrangement, Our staff present here with a lot of IEC and SBC Materials on HIV and STI, and Maternity Health related books. They also gave spot counseling and ABC message etc. Every day more than One thousand people were visited our stall.



Target wise achievement

Sensitization Activities:

SL #	Name of activities	Number of activities					
		Sylhet			Sreemangal		
		Target	Event	Partici pants	Target	Event	Partici pants
01	Sensitization meeting with Religious leader	01	01	18	01	01	15
02	Sensitization Meeting with Hotel Managers & owners	02	02	43	02	02	21
03	Sensitization meeting with Journalist	01	01	20	01	01	10
04	Recognition Ceremony	01	01	60	0	0	0
05	Sensitization Training with Police	01	01	17	01	01	16
06	Sensitization Meeting with Local Clubs	02	02	38	02	02	29
07	World TB Day Observation	01	01	100	01	01	35
08	World AIDS day Observation	01	01	1500	01	01	150
09	World Tobacco Day observation	01	01	300	0	0	0
10	World Health Day Observation	01	01	400	0	0	0

Co-ordination Meeting:

Coordination Meetings were hold in Modhumita Centers situated in Sylhet and Sreemangal. Project Facilitat6ion Team Meeting hold twice in the year in Sylhet and four times in Sreemangal in the implementing year 2010 as target. Twelve Meeting on FHI- IA Monthly Sharing hold at Sylhet Modhumita Center.

Training Activities:

SL #	Name of activities	Number of activities					
		Sylhet			Sreemangal		
		Target	Event	Partici pants	Target	Event	Partici pants
01	Orientation on waiting patient	96	64	690	36	28	266
02	Practice Session	0	16	12	0	49	04
03	Site worker orientation	12	12	24	12	12	10
04	Literacy class	0	32	12	0	0	0
05	Group Session	0	75	952	0	70	408
06	Refreshers training on peer education and outreach for HIV prevention	02	02	33	0	0	0
07	TB Orientation	01	01	15	0	0	0

Staff Training Received:

SL #	Name of activities	Number of activities					
		Sylhet			Sreemangal		
		Target	Event	Partici pants	Target	Event	Partici pants
01	Refreshers Training on Peer education and outreach activities	0	01	14	0	0	0
02	Supportive supervision Training	01	01	01	01	01	01
03	TOT on Peer education and outreach activities	01	01	01	01	01	01
04	STI Case management Training	01	01	01	0	0	0

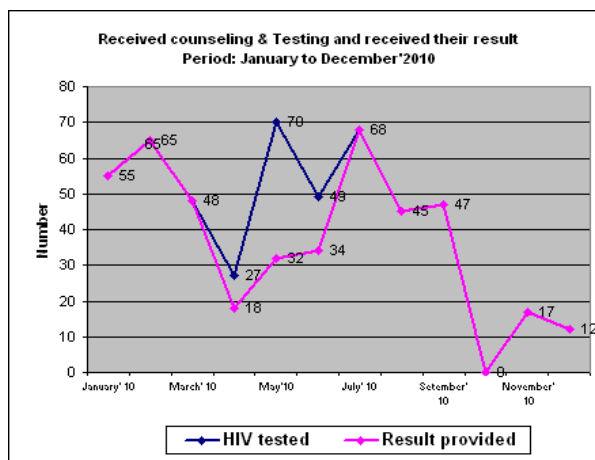
Clinical Achievement:

SL #	Name of activities	Sylhet		Sreemangal	
		Target	Achieve	Target	Achieve
01	STI Session	96	64	36	28
02	HBSW attend at STI Clinic	882	690	324	266
03	STI Patient Treated	530	451	198	191
04	STI Counseling	882	690	0	266
05	Patent refer for general health	0	221	0	46
06	Condom distribution through STI Clinic	0	17,237	0	6,369
07	Condom demonstration through STI Clinic	0	1,163	0	521
08	Lubricant distribution through STI Clinic	0	0	0	0

VCT Achievement:

In the implementing year, our VCT target was 384 FSW in Sylhet and 192 in Sreemangal. We were able to provide service to 327 FSW and 186 client of FSW in Sylhet. Besides in Sreemangal, 176 FSW and 156 client of FSW took service from Modhumita Center We were able to provide 100 % (percent) HIV test result in the project year except the second quarter. The graph shows below our month wise HIV tested result provided.

Month	HIV tested	Result provided
January' 10	55	55
February' 10	65	65
March' 10	48	48
Apr'10	27	18
May'10	70	32
June' 10	49	34
July' 10	68	68
August' 10	45	45
Setemember' 10	47	47
October' 10	0	0
November' 10	17	17
December' 10	12	12



IHC Achievement:

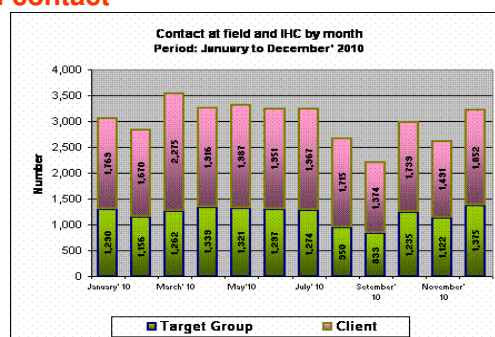
In the year 2010, Modhumita Integrated Health Center (Modhumita IHC) in Sylhet was visited by 4,080 HBSW and 94 of them out of hundred took membership card from the IHC. Condom distribution and demonstration were gradually 61,584 and 2,024. There were 4,080 counseling session completed all through the year. On the other hand, in Sreemangal IHC, 2,849 HBSW visited the IHC and 40 of targeted 50 members took membership card. 41,305 and 345 pcs of condom distributed and demonstrated respectively among sex workers all around the year.

Outreach Achievement:

SL#	Name of activities	Sylhet		Sreemangal	
		Target	Achieve	Target	Achieve
01	Sex Worker Reach	550	531	250	271
02	Sex Worker Contact	10,500	10,358	4,500	4,096
03	Client of Sex Worker Reach	13,760	11,475	6,240	5,123
04	Client of Sex Worker Contact	15,000	15,256	7,000	6,450
05	Sex Worker refer for general Health check up	0	221	0	46
06	Client refer for STI	0	487	0	62
07	Condom distribution through outreach activities	0	3,28,380	0	1,18,644
08	Condom demonstration through outreach activities	0	5,220	0	1,438
09	Lubricant distribution through outreach activities	0	0	0	0
10	Men client leaflet distribution	0	1,377	0	473
11	Sex Worker referral card distribution	0	650	0	440
12	Modhubarta Distribution	0	0	0	0
13	Client referral card distribution	0	487	0	62
14	Partner referral card distribution	0	60	0	36
15	Safer sex kit distribution	0	0	0	0

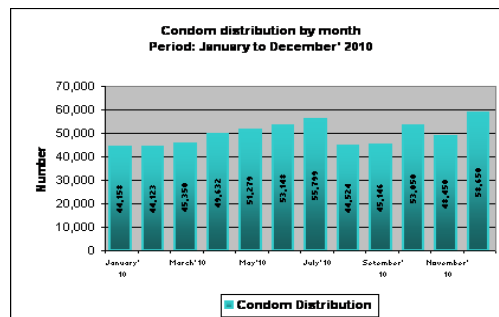
Month wise total contact

Month	Target Group	Client
January' 10	1,290	1,769
February' 10	1,156	1,670
March' 10	1,262	2,275
Apr'10	1,339	1,916
May'10	1,321	1,987
June' 10	1,297	1,951
July' 10	1,274	1,967
August' 10	950	1,715
Setember' 10	833	1,374
October' 10	1,235	1,739
November' 10	1,122	1,491
December' 10	1,375	1,852



Condom Distribution Sylhet and Sreemangal

Month	Condom Distribution
January' 10	44,158
February' 10	44,123
March' 10	45,350
Apr'10	49,632
May'10	51,279
June' 10	53,148
July' 10	55,799
August' 10	44,524
Setember' 10	45,146
October' 10	53,050



Best Practice:

Peers can't Sex without condom and they do STI check regularly.

HIV Prevention and Control among High-Risk Populations and Vulnerable Young People in Bangladesh

Expending Provision of Essential Services to Street Based and Hotel/Residence Based Female Sex Worker in selected district of Bangladesh, Service Package # 909, under RCC 1st phase

- Introduction** : Under GFATM 909 package DNS consortium and its associate Sylhet Jubo Academy (SJA) along with other associate partners started a journey from March 2008 to achieve the goal means reduce risk of HIV-AIDS among the high risk population and vulnerable young people in our country by Provision of Essential Services to Street Based and Hotel/Residence Based Female Sex Workers in selected district of Bangladesh. SJA has started provision of essential services to the targeted intervention with having vast long-time related experience on it, through implementation of **8 (eight)** DICs in 5 districts of Chittagong division and Dhaka City Corporation.
- Under Chittagong division the 7 DICs located at Chittagong Sadar, another 1 (one) DIC located under Bangshal thana of Dhaka city.
- Total Staff** : Project Coordinator-1, Finance Officer-1, DIC Coordinator-8, Outreach Supervisor-8, Outreach Worker-37, Cleaner cum Guard-8
- Goal** : Coverage, quality & comprehensiveness of intervention for vulnerable population at highest risk of HIV in Bangladesh increased.
- Objective** : To provide essential services to street-based and Hotel/Residence based female sex workers Population at highest risk and vulnerability in selected Districts of Dhaka, Chittagong & Khulna Division skilled up rapidly.

Activity and Achievements of GF -909 project:

In this year SJA has done lot activities following accelerated work plan with some additional activities. Activities and achievement is given bellow in details:

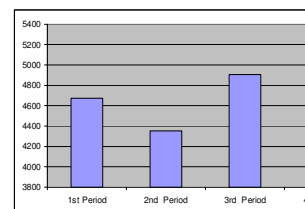
SL	Assignment/ Activity	Project Target	Project Achievement	Comments
1.2	Provide essential services for female sex workers (FSW)	2150 SWs	2097	Achieved 97.53%
1.2.1	Establish and operate drop in centres for Female sex worker	3 drop in centres established and operated	3	Achieved 100%
1.2.1.1	Start-up advocacy with community gatekeepers and stakeholders to support outreach and DIC operation	90 people attended 3 advocacy sessions (one per DIC established) for DIC operations	77	Achieved 85.55%
1.2.1.2	Refurnish DICs from R6 from phase 2 (furniture and fixtures)	Out of total 08 DIC 05 DIC will be refurnished (for 4 years)	5	Achieved 100%
1.2.1.3	Recruiting cost of DIC	96 DIC month cost	96	Achieved 100%
1.2.1.4	Retain staff for R6 DICs	96 DIC month staff salary	96	Achieved 100%
1.2.1.5	DIC monitoring, reporting, field supervision, etc.	34 per quarter M&E cost	32	Achieved 94%
1.2.2	Establish and operate outreach offices			
1.2.2.8	Train PE/ORW	25 PE /ORW Trained	15	Achieved 100%
1.2.2.12	Refreshers for DIC in Charge	08 DIC In-charges received refresher training	8	Achieved 100%

SL	Assignment/ Activity	Project Target	Project Achievement	Comments
1.2.2.13	Refreshers for Outreach Supervisors (OSs) (approx. 1 OS/6 PE)	5 OSs received refresher training	5	Achieved 100%
1.2.2.14	Refreshers for PE/ORW (approx. 1 PE/35-40 SW)	42 PE/ORW received refresher training	39	Achieved 95.23%
1.2.2.16	Provide outreach peer education to FSW (twice monthly)	36,068 time FSW contacted (70% of total 2150 contacted twice in each month in throughout the project period)	35042	Achieved 97%
1.2.2.17	Group education session at DIC with FSW	340 group sessions with FSW for services, counseling, etc. (15 FSW / Session/ quarterly)	999	Achieved 293.82%
1.2.2.18	Provide STI management services for FSW	2631 cases managed (65% using consistent condom increased to 75% over the project period. Non condom users will have treatment quarterly ones)	1357	Achieved 51.57%
1.2.2.19	STI Services for regular partners of FSW	263 cases managed for STIs, (approx. 10% of the partners will get treatments)	42	Achieved 15.96%
1.2.2.20	Provide general health management services for FSW	56 of cases managed for general health problems (10% SWs treated for GH/Quarter)	1383	
1.2.2.24	Provide male condoms for sex workers through Social Marketing initiatives	1,562,873 condoms purchased by SW or their clients through Social Marketing initiatives	604341	Achieved 38.66%
1.2.2.27	Referral services for VCT	80 FSWs referred for VCT service (5% of FSW referred to VCT per year)	131	Achieved 163.75%
1.2.2.29	Orientation of facility manager and service providers for ensuring services for sex workers at selected facilities (10 per facility)	87 service providers and facility manager oriented	87	Achieved 100%
1.2.2.30	Referral services for maternal & child health care (5% of targeted SW per year) for FSW and their children	55 FSW and their newborn referred for MCH services	60	Achieved 109%
1.2.2.31	Referral services for EPI (Expanded Programmer of Immunization) services for children of FSW	11 children of FSW referred for EPI services	88	
1.2.3	Creating enabling environment			
1.2.3.3	Meetings with DIC Advisory Committee for creating an enabling environment	229 people attended in 107 meetings (10 participants in each meeting)	666	Achieved 290%
1.2.3.4	Conduct advocacy and sensitization meetings for local administration, community leaders, religious leaders, parents, and civil society on harm reduction issues for injecting drug use and safer sex work issues-round tables, workshops and advocacy meetings	1333 participants attended 281 community-level meetings (15 person/meeting) to support interventions with FSWs	1416	Achieved 106%
1.2.3.5	Skill building training of FSWs on income generation activities	105 FSWs trained on income generating activities (5% of FSWs per year)	109	Achieved 103%
1.2.3.10	Observing WAD, International Women Day, Independence Day along with SHG / CBO	464 people from CBOs reached through days observation over the project period	526	Achieved 113%
1.2.4	Implement programmer delivery at field level (SR/SSRs)			
1.2.4.1	Recruit and retain staff	13 person months salary	13	Achieved 100%
1.2.4.2	Provide Rent and utilities cost	13 months cost	13	Achieved 100%
1.2.4.4	Program monitoring visit	0 monitoring visits	0	

Assignment # 1.2:

Provide essential services for female sex workers (FSW):

In this period SJA has been provided essential services to 2097 FSW through Outreach and DIC Based BCC activities like One to one session, Group Session and others instead of targeted 2150. The achievement of the activities is 97.53% because some of the FSW are dropped out and being mobile among the targeted FSW from their spots/area. The achievement has been given below as per categories (settings) of SW's



Assignment #1.2.1: Establish and operate drop in centers for Female sex worker:

In this period SJA has been Establish 3 new DIC's in Comilla Sadar DIC, Teknaf DIC under Cox'sbazar District & Chankharpul DIC under Dhaka City Corporation. These DIC's are functioning properly as per DNS consortium guideline.

Assignment #1.2.1.1: Start-up advocacy with community gatekeepers and stakeholders to support outreach and DIC operation:

In this period SJA organized 4 advocacies with community gatekeepers and stakeholders meeting where 116 persons total were participated. Information's of these meeting are given below;



Assignment # 1.2.2.8: Training PE/ORW:

Under this assignment as per work plan in this year, target for SJA, organize a peer educator basic training for all new (15) Peer Educators. SJA has organized 2 days long basic training on peer education for POWs at SJA DIC training venue. During these trainings trainers taking different session as follows training schedule and module of this training and discussed about training methodology and objective, problem & expectation of life, sickness and cause of sickness, profession and sex worker profession, sexual and productive parts of human body, STI, HIV-AIDS in detail, preventive measure of STI and HIV-AIDS, Condom Promotion and demonstration, Safer Sex, Effective Communication, Legal issues and empowerment, responsibility and role of Peer Educator, DIC services, Outreach activities and so on.

These trainings were conducted following Peer Educator Module by 3 Master Trainers of SJA who are trained on Master Trainers Training. The trainers are used the following methodology to conduct their sessions: ▪ Lecture ▪ Question & Answer ▪ Group Work and Presentation ▪ Demonstration ▪ Short Drama ▪ Pre test and post test and etc.

Assignment # 1.2.2.14: Refreshers for PE/ORW

SJA also organized 2 days long refresher POW training. This training organized for some disadvantage and newly joined PE. The participants of the training were 39 peer educators from the different DIC. During these trainings trainers taking different session as follows training schedule and module of this training and discussed about training methodology and objective, problem & expectation of life, sickness and cause of sickness, profession and sex worker profession, sexual and productive parts of human body, STI, HIV-AIDS in detail, preventive measure of STI and HIV-AIDS, Condom Promotion and demonstration, Safer Sex, Effective Communication, Legal issues and empowerment, responsibility and role of Peer Educator, DIC services, Outreach activities and so on.

Assignment # 1.2.2.17: Group education session at DIC with FSW:

In this period SJA has been conducted 501 group session where was participated 6843 FSW from different settings like Hotel and Residence. DIC Coordinator and Outreach Supervisor conducted the session following different topic on need based like HIV/AIDS basic information, STI and Importance of STI treatment, Condom promotion including information about condom availability and importance of the consistence condom uses, DIC services, DIC roles and responsibility of FSW to maintain and utilize of the DIC services and etc. By the group session FSW has given clear understanding about the DIC and DIC services which is increasing their attention to attend at the DIC regular basis. During the period SJA has achieved about 147% against the target. Although, achievement is higher than target but service providers or responsible DIC staff has feel that the group session is very crucial activities to increasing DIC visit and DIC service utilization by FSW.



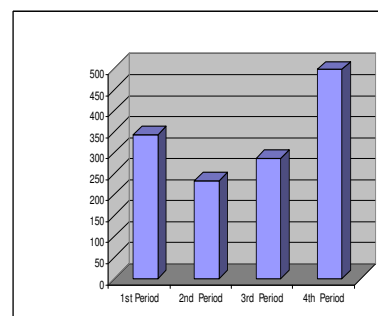
DIC name	Group Education	Dec 2009 to Dec 2010				Total
		1st Period	2nd Period	3rd Period	4th Period	
Cox's Bazar	Group	57	41	31	30	159
	Participant	300	256	190	181	927
Khagrachori	Group	47	37	23	35	142
	Participant	314	260	243	207	1024
Halishahar	Group	45	37	37	37	156
	Participant	437	300	281	310	1328
Askerdighi	Group	50	37	37	34	158
	Participant	349	294	261	218	1122
Chandpur	Group	42	35	33	36	146
	Participant	221	248	257	295	1021
Teknaf	Group	-	19	24	24	67
	Participant	-	121	172	200	493
Comilla	Group	-	18	36	36	90
	Participant	-	94	217	219	530
Dhaka	Group	-	20	24	24	68
	Participant	-	102	118	178	398
Total Group		221	244	245	256	501
Total Participant		1621	1675	1739	1808	6843

Assignment # 1.2.2.18: Provide STI management services for FSW:

SJA has been managed 1357 STI cases in this period with all of standard procedures like treatment with DOTs and free medicine, counseling and referral. All of session of STI clinic has been conducted recognized and trained medical service providers and the medical providers has followed National Guideline for STI syndrome management and infection prevention procedure. The FSWs are feel comports and getting cured by the treatment from the DICs.

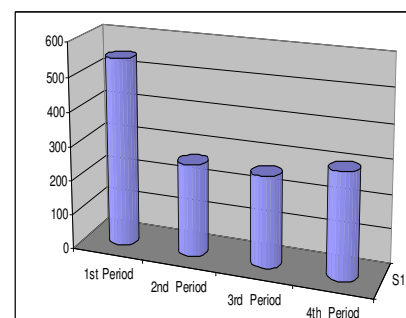
As per work plan in this period was target 2631 STI cases and achieved 1357 it is about 51.57% . The STI trends and re-infection is decreasing day to day for exclusive treatment and follow up through whole DIC services including outreach activities

DIC name	Dec 2009 to Dec 2010				Total
	1st Period	2nd Period	3rd Period	4th Period	
Cox's Bazar	63	60	83	74	280
Khagrachori	6	41	14	0	61
Halishahar	62	32	33	51	178
Askerdighi	82	36	32	54	204
Chandpur	130	62	55	61	308
Teknaf			35	111	146
Comilla			10	77	87
Dhaka			24	69	93
Total STI	343	231	286	497	1357



Assignment # 1.2.2.19: STI Services for regular partners of FSW:

During this period SJA has been provided 42 Partners management for STI through referral services. SJA has been developed referral linkage with local recognize service providers organization or individual formally who are renowned on STI management particularly clients of FSW and male. Although, the achievement is very low against target because SJA has been started this services after competition all of formal process like service and facility mapping, introductory meetings, meetings for formal MOU and this service will be increasing day to day.



Assignment # 1.2.2.20: Provide general health management services for FSW:

1383 General Health service provided in this period through clinical services with treatment and essential medicine. Children and female family members like mother and mothers in law also attend the clinic for general services. seeking behaviors of FSW. Under this assignment, there is no target because it's a continuous activities and intention to developed linkage with health services facilities and FSW.

DIC name	Dec 2009 to Dec 2010				Total
	1st Period	2nd Period	3rd Period	4th Period	
Cox's Bazar	136	35	39	25	235
Khagrachori	3	26	8	0	37
Halishahar	150	72	72	60	354
Askerdighi	146	71	64	88	369
Chandpur	113	63	55	61	292
Teknaf			12	0	12
Comilla			4	11	15
Dhaka			9	60	69
Total General	548	267	263	305	1383

Assignment # 1.2.2.24: Provide male condoms for sex workers through Social Marketing initiatives:

604341 pieces of condoms has been sales in this period through social marketing among the FSW by Outreach Workers and Depot holders as per procedures of condom promotion and marketing. Along with condom sales and marketing outreach workers and depot holders has given basic messages like why and how use to condom, what is the importance of condom use and it is how to help protect STI and HIV, how to preserves condoms and where is available different branded condom without any obstacles etc.

1,562,873 pieces of condom was targeted to sales in this period as per work plan but we achieved 38,66%. Although, achievement is low against the target but FSW collect condoms from the market or out sources due to effective condom promotion and peer education.

DIC name	Dec 2009 to Dec 2010				Total
	1st Period	2nd Period	3rd Period	4th Period	
Cox's Bazar	20170	20510	18880	21150	80107
Khagrachori	12445	11287	10683	11310	45725
Halishahar	29190	34600	41050	45050	149890
Askerdighi	32912	35712	41552	44106	154282
Chandpur	22735	22629	25797	29523	100684
Teknaf	-	3007	7640	8900	19547
Comilla	-	5455	10742	13538	29735
Dhaka	-	4970	7603	11195	23768
Total Condom	117452	138170	163947	184772	604341

Assignment # 1.2.2.27: Referral services for VCT:

SJA has been provided 131 VCT services through referral services in this period among the FSW. SJA has developed referral linkage with the recognized VCT service providers organization formally like AAS, Jagori (ICDDR,B) and FPAB.

80 VCT services were targeted as per work plan for SJA in this period and achieved about 163.75%. Among the FSW has been increasing seeking of VCT services for counseling and outreach activities but not available recognize VCT centers or service providers in convenient distance of DIC or DIC catchments areas.

Assignment # 1.2.2.29: Orientation of facility manager and service providers for ensuring services for sex workers at selected facilities (10 per facility):

SJA has been conducted 7orientation of facility manager and service providers in this period where was attend 87 participants from the different service providers organization and individuals as per service and facility mapping. During this orientations facilitators has been discussed on ensure and accessibility all of services with quality and dignity, strengthen the referral linkage among SJA DICs and the service provider organization



Assignment # 1.2.2.30: Referral services for maternal & child health care (5% of targeted SW per year) for FSW and their children:

During this period SJA has been provided 60 MCH services instead of targeted 55 MCH services through referral services among the FSW. Under this assignment has given services to only pregnant FSW and their infant. The clinic service providers has referred to the referral center for the MCH services with counseling and given all information about referral organization or individual.

Assignment # 1.2.2.31: Referral services for EPI (Expanded Program of Immunization) services for children of FSW:

SJA has been provided 88 EPI services through referral services among the children of FSW who are in less than 1 year. From the DIC identified and track the FSW with under 1 year children and given motivation and peer education for vaccination under EPI and they are referred to DIC and DIC respective staff or clinical service provider has referred to respective referral services where is available EPI services. Before doses competition of vaccination, outreach workers and respective staffs are taking under follow-up for complete the doses in time.

Assignment # 1.2.3.3: Meetings with DIC Advisory Committee for creating an enabling environment:

SJA has conducted 96 meeting with DIC management committee in this period where were participated 666 members from the respective DIC management committee of respective DICs. During this meeting DIC Coordinator shared the DIC performances, constraints and future plan and activities of DICs.

Assignment # 1.2.3.4: Conduct advocacy and sensitization meetings for local administration, community leaders, religious leaders, parents, and civil society on harm reduction issues for injecting drug use and safer sex work issues-round tables, workshops and advocacy meetings:

As per work plan SJA has organized 8 local level advocacy meeting where was participated 359 from the different profession from the surrounding of respective DICs like governmental official, police, journalist, local elites, LGI representative, NGO representatives, Physicians, Lawyers, Hotel Manager and Owners, CBO leader of FSW, Pimp, FSW and others, All of meeting has conduct as per scheduled and discussed different topics with guidelines of advocacy and concept note. Most of the participants has shown positive response to support and strength the DIC activities.

Assignment # 1.2.3.5: Skill building training of FSWs on income generation activities:

One of the major activities of the project is to develop sex worker's skill on alternate income generation. For capacity building of FSW SJA has organized 7 capacity building training on Swing and Block-boutique in this period instead of targeted 7 where was participated 109 FSW from the respective DIC listed FSW.



Assignment # 1.2.3.10: Observing WAD, International Women Day, Independence Day along with SHG / CBO:

SJA observed “World AIDS Day-09 & 10” in Chittagong city and out side in coordinating with other packages and concern administration in respective area /district smoothly. SJA has formed a “Convening Committee” to observe the day effectively. SJA participate in the district rally and discussion meeting at about 200 hotel and residence based sex workers and staff members. SJA also participate in the divisional/ district/ level rally and discussion meeting in Chittagong division at selected geographic area, where DIC’s established. Distributed of IEC/BCC materials like T-Shirt, Posters, Leaflets, Banner, etc in working area,



Observed International Mother Language Day-2010

The nation pays mark of respect to the language movement martyrs who sacrificed their lives for the mother tongue 58 years ago. President Zillur Rahman placed wreaths at the central Shaheed Minar one minute past zero hours amid to pay homage to the language movement heroes. SJA observed International Mother Language Day-2010. Hundreds of sex workers and staff members thronged the Shaheed Minara across the 05 DICs area under package 909 to pay the respect to the language movement martyrs.

Observed World Health Day-2010

SJA observed World Health Day-2010 in Chittagong city and out side in coordinating with other packages and concern administration in respective area/district smoothly. SJA has formed a ‘Convening Committee’ to observe the day effectively. SJA participate in the district rally and the discussion meeting at about 150 hotel and residence based sex workers and staff members. SJA also participate in the divisional/ district/ level rally and discussion meeting in Chittagong division at selected geographic area, where DIC’s established.



SJA visitors:

During the implementing period SJA implementing Program has visited by GOB-MHOHFW officials, some Save the Children-USA official, DNS consortium project team, Global fund delegates and others. Visitor’s visited Chittagong DIC’s.



Conclusion:

SJA accomplished with 100% achievement of all the assignment with some challenges and barriers. DIC’s are established on time and implementing effectively for provides services to the sex workers. By the services of DIC’s most of the SW’s are highly aware about HIV-AIDS, STI and they also knew, how to prevent and protect it

Expanding Provision of Essential Services to Street Based and Hotel/ Residence Based Female Sex Worker in selected district of Bangladesh, Service Package # 908, under RCC 1st phase

- Implemented by : Sylhet Jubo Academy (SJA)
- Funded by : Save the Children USA
- Introduction : Under GFATM 908 package BWHC consortium and its associates like Sylhet Jubo Academy (SJA) started a journey since March 2008 to achieve the goal means reduce risk of HIV-AIDS among the high risk population and vulnerable young people in our country by Provision of Essential Services to Street Based and Hotel/Residence Based Female Sex Workers in selected district of Bangladesh. SJA has started The project provision of essential services to the targeted intervention with the previous vast experience on it. Since March 2008 through DIC implementation in the 7 different places of Sylhet division which are Sylhet Sadar, South Surma and Gowainghat Upazila of Sylhet district, Sunamganj Sadar and Chattak Upazila of Sunamganj district, Moulvibazar Sadar Upazila of Moulvibazar district and Habiganj Sadar Upazila of Habiganj district.
- Goal : Coverage quality & comprehensiveness of intervention for vulnerable population of highest risk of HIV in Bangladesh.
- Objective : Rapidly Scale-up HIV essential services to street based and hotel/Residence based female sex workers in selected district of Bangladesh.
- Total Staff : 1 PC, 1 Finance and Admin Officer, 8 DIC Coordinator, 9 Outreach Supervisor, 48 Outreach Worker, 8 Support staff, 8 Cleaner
- Implementing area : In Sylhet Division there are 7 DICs and 1 Outlet and another one in Dhaka Division.

DICs In Sylhet Division

Upshahar DIC
Badambagicha DIC
Chatak
Hobiganj
Jaflong
Sunamganj
Moulvibazar
Akhalia Outlet

DICs in Dhaka Division

Shabujbag DIC



DIC Monitoring, Reporting, Field Supervision etc: Following the monitoring and supervision plan Coordinator and Admin & Accounts Officer of SJA have been visited different DIC. Through these visit they provided different technical support to the DICs so that the program run smoothly and enhance staff capacity. As a result, quality of services and process documentation at DIC level improved.

Provide outreach peer education to FSW (twice monthly): In this year conducted 28293 times outreach peer education to FSW through out reach activities and services like one to one session, group session, condom promotion and demonstration and follow up. Beneficiaries become more aware about services.

Group education session at DIC with FSW: At DIC level 185 group sessions has been held in this period. Different selected and potential issues have been conducted in these meetings. Mainly DIC Coordinator, Paramedic cum Counselor, Outreach Supervisor and Outreach Workers are conducted the sessions. Through these meetings increased and improved participants' commitment and skill.

Provide STI management services for FSW:

Through DIC Clinic Paramedic cum Counselor has been given treatment of 746 STI cases in this year. The paramedic cum counselor has given treatment as follows national STI treatment guideline with DOTs.



STI services for regular partners of FSW: 189 STI cases have been treated of regular partners of FSW. The paramedic cum counselor has been tracing regular partner of FSW who are already suffered then she referred to the regular partners of FSW through outreach supervisor/Outreach Worker to our selected referral center/ Physicians for treatment. DIC manager, Outreach supervisor and treated FSW are ensured the treatment of referred regular partners of FSW. Some of partners treatment consultancy has been given with free of cost because in the Sylhet City Corporation area SJA had developed strong referral networking with the service providers organization and individual and makes MOU with them for ensuring STI management of FSW partners.

Provide general health management services for FSW: During this period 1284 cases have been managed of general health. In 250 GH cases, some children, mothers of FSW are included with FSW. The paramedics cum counselor of the DIC gave treatment with prescription to FSW as well as their children and mothers.

Provide male condoms for female sex workers free of cost. Outreach workers distributed condoms during their field level activities like one to one session, group session and follow up activities. A little percentage of distributed condoms is used for condom demonstration because outreach worker and paramedic cum counselor demonstrated condom before distribution in the cases of new and un-skilled FSW.

Provide lubricants for sex workers: During their activities Paramedic cum counselor and Outreach Worker distributed lubricants among the FSW. Lubricants are given on the basis of FSW needs.

Referral services for VCT: In this reporting period 265 FSW have been tested for HIV through our referral activities. They are referred from different DIC of SJA to our referral network VCT services providers' organization like SJA Modhumita, SMC Modhumita, and AAS Modhumita for HIV test. DIC Coordinator and Paramedic cum counselor maintain all VCT referral procedure and necessary documents.

Referral Services for MCH: pregnant FSW are referred to the MCH service provider's organization who are also under our referral network like Smiling Sun Clinic-SSKS, MSCS through our referral. The pregnant FSW are getting Antenatal Care under follow up of outreach worker and paramedic cum counselor.

Referral Services for EPI: For immunization Children of FSWs has referred to the nearby EPI Center of DIC through our referral services. Mother of those immunizing children usually under regular follow up of Outreach Worker, Outreach Supervisor and Paramedic cum counselor

Conduct advocacy and sensitization meetings with Legal Aid Agencies: SJA organized local level advocacy meeting at their DIC level. In these meetings stakeholders from different professional and occupations like GOB administration, LGI representative, Teacher, Journalist, Police, Religious Leader, Club Member, Pimps, Social Workers, Community leaders, Business Man, NGO representative, Physicians etc were participated.

The detail information of advocacy meetings is given bellow:



Day Observation: World AIDS Day is a time of reflection- to remember the friends and loved ones lost to AIDS, to heed the lesson learned over the year, and to take stock of the progress made to provide a comprehensive response to the epidemic.

December 1 was chosen because the first case of AIDS was diagnosed on this day in 1981. Since then, AIDS has killed more than about 30 million people, making it one of the most destructive epidemics in recorded history. Despite recent improved access to antiretroviral treatment and care in many regions of the world, the AIDS epidemic claimed to snatch an estimated 2.1 million lives in 2010.

In our country, 1495 people living with HIV/AIDS (reference-GoB reports). As well as in Sylhet, AIDS has killed 121 people who are male 71, female 14 and children 3, Transgender 1 and living with HIV 350 people

Street Meeting and Opening the SJA rally: We organized a street meeting just before the rally at front of SJA head office where is attend Dr. Iqbal Hussain, Director of Health, Sylhet. Commissioner of Sylhet City Corporation as chief guest, Honorable guests is taking speech at the meeting regarding importance of World AIDS observance. In the chief guest speech, He takes oath for the active participation to prevent HIV/AIDS activities. After the meeting chief guest inaugurated the SJA rally by cutting the red ribbon.



DIC based planed activities of SJA: All DIC of SJA has observed World AIDS Day 2010 by doing planed activities:

Participated GoB rally and discussion meeting at Sylhet: SJA rally was merged with the GoB rally. This rally was organized jointly who are Sylhet District HIV/AIDS prevention Coordination Committee (SJA is the one of member of this committee), Sylhet Civil Surgeon Office and Sylhet City Corporation. This rally was inaugurated by Mayor of Sylhet City Corporation where was participated different organization, government departments, national and international NGOs, CBOs, clubs and movements, individuals with colorful banner, festoons, posters, caps, masks, musical instruments etc. This rally was started from the Sylhet



Civil Surgeon Office and to end at District Council Auditorium. After the rally a discussion meeting was held at District council auditorium, Sylhet. In this meeting also attend City Corporation Mayor as chief guest.

DIC based events/activities for the observe World AIDS Day 2010: DIC, s has observed the World AIDS Day 2010 doing some planed events/activities:

Discussion meeting: Followed by rally a discussion meeting took place at Conference Room of Sylhet City Corporation at 11: 30 am where 200 participants attended the meeting. Chaired by Civil Surgeon Dr. M. Faj Ahmed, Deputy Director Family Planning Shaha Bidhan Chandra, Deputy Director Sylhet District Information Office Julia Jesmin Mele, Chief Medical Officer Sylhet City Corporation Dr. Sudamoy Mojumder, Dr. Salay Ahmed of Osmani Medical College were present in the meeting as special guest.



From the outset of the discussion meeting, Regional Director Shimantic Parvez Alam delivered the welcome speech remembering the contribution of the members of the committee.

Display Colorful thematic painting (AIDS and I) at the DICs: All DIC are displayed thematic painting (AIDS and I) on 1st December 2010 which are painted by all staff of DIC and some peer for aware to another and revisit our thinking about HIV/AIDS prevention activities.

Making candle light, keeping 1 minute silent and singing a song at the DICs: Opening wish by Joton Kumar Bhomic Field Operation Manager, Maamoni Project, Save the Children, USA

Discussion Meeting with DIC management committee and others: All DIC of SJA has organized World AIDS Day 2010 discussion meeting with DIC management committee and others at the all DIC on 1st December 2010.

Outcomes: Observed the World AIDS Day 2010, increasing awareness on HIV/AIDS, some individuals are taking oath to the participate HIV/AIDS prevention activities, involved some elites, student, teacher, youths and religious leader at this activities, lot of message disseminated of HIV/AIDS to mass people. By observed this day is important in reminding people on the current situation, that HIV has no gone away, and that there are many things yet to be done. Everyone in our society has an important role play to prevent HIV/AIDS; because each and every single person and their action can make a difference.

HIV/AIDS Intervention Services under HNPSP Hotel and Residence Based Sex Workers Package Package- 12

About the project : HIV / AIDS Prevention Project (HAPP) started in August, 2004 to prevent HIV infection among high risk population in Bangladesh under UNICEF management. HIV / AIDS Prevention Project HAIS targeted different kind of High Risk group, they are Hotel and Residence Based Sex Workers. SJA consortium formed with involvement of other three national NGO (KMSS, HELP and BAPS) who have vast experience in the field of HIV / AIDS Prevention To continue current HIV/ AIDS Prevention / Intervention services to the specific High Risk Behavior Groups(RHBG) vulnerable to HIV/ AIDS infection in specific locations without discriminating and stigmatizing which were managed by UNICEF earlier.

After the successful completion of the Project implementation and activities during the period of 22, December 2009 to 30 June 2010 by SJA consortium, NASP extended the project period from 1st September 2010 to 31 December 2010 and then signed an agreement between NASP and SJA consortium for extended period to implement the HAIS, Package -12 project.

Total Staff : PM-1, PMO-3, Finance and Administrative Officer-1, MIS Officer-1, Quality Assurance Officer-2, Advocacy Officer-1, Admin Assistant-1, DIC Manager-12, Medical Officer-12, Paramedic-12, Counselor cum Health Educator-12, Outreach Supervisor-12, Peer Educator-12, Peer Volunteer -36, Aya/ Guard/ Messenger -38.

Minimum Services Provided by the Consortium :

- Searched and identified the TG in Project area twice in a week and updated records once in a month.
- BCC session on HIV/AIDS and STD has taken twice in a month for made the conscious about their health create awareness among them about the use of condom.
- Took session on sexual health checkup once in a month for TG.
- Took group session on the rights life skills once in a quarter.
- Formation of self help group to help the TG to take their own initiatives.
- A discussion meeting holds once in a month to make aware the TG about the Civil Society.
- Gave treatment and diagnose to the TG and took STI and VCT session with them three in a month.
- Provide the Target Group need based simple ailment treatment and referral services everyday.
- Provide follow-up services to the TG who were referred to take treatment completely.
- Arranged skill development training for Peer Educators and Peer Volunteers, so that, they can develop their capacity.

- Expected output :
- Increased STI treatment seeking behavior among the sex workers.
 - Covered SWs are participated actively and regularly in the health Education Session and Counseling
 - Established affective referral networking among the VCT services completely through referral.
 - Increased knowledge of proper use and take benefits of condom uses.
 - Madams, Land Lords and Hotel Owners are actively participated in every sensitization and Advocacy Meetings
 - Build up liaisons with the service provider organization and Government officials and; ensured participation in the Advocacy.
- Expected outcomes :
- Reducing trend of STI
 - Increased their knowledge level about high risk behavior, prevention measure of HIV and STI.
 - Persistent condom utilization rate increased.
 - SWs easy access increased in the Government service Facilities.
 - Improved and changed attitude of the LGO towards SWs
 - Sensitized and increased service seeking behavior about VCT.
- Strategy and approaches :
- To achieve the objective of the consortium, following strategies were taken to Implement its activity:-
- Introduce a two- prong service delivery approach i.e. clinic service and community intervention with BCC approach.
 - Combining key prevention interventions with care and support initiatives BCC
 - Conduct BCC session on targeted issues relevant to HIV/AIDS.
 - Peer Education.
 - Advocacy and Networking.
 - Involving Sex Workers networking forum and other self help groups from the respective area
 - Extend support to the SHG through partnership
 - Introduce promotional and motivational activities among Sex Workers.



Achievements

STI Management: As Project plan for the period, it was planned that 80% person will receive STI treatment, but in the implementing period it was found that 94% (percent) took treatment. Trained Medical Officer and Paramedic provided the service among the TG.

Voluntary Counseling and Testing (VCT) and Referral: The fixed target of VCT and referral service for TG was achieved According to the Project Plan.

Condom and Lubricant promotion: Condom and Lubricant promoted target wise. Mostly sex workers received condom as they need and that's why, the achievement percentage was 90% (percent).

BCC Session: Peer Educators were targeted conducting 12 group sessions with the beneficiaries in the project phase. For smooth intervention project, 90 Peer Volunteer were involved in assisting peer education on Behavior Change Communication.

STI Counseling: One trained up full time Counselor were appointed in each DIC for STI counseling issue according to the Project Design.

Advocacy initiative: HAIS Project, Package -12 of Sylhet Jubo Academy has completed its pre scheduled Advocacy meeting through the DICs.

Capacity Building Activity: SJA Consortium arranged a two days long staff orientation for all DIC Manager on February 28, 2010 in CARITAS, Mirpur, Dhaka. 30 DIC Managers and Project Management staff was present there.

Training Provided by PHD / UNICEF: Peer Educators and Peer Volunteers received a 5 days long training by PHD/UNICEF. The training was residential where 120 participant participated in PSTC and Nari Moitre venue, Dhaka. PHD also organized 5 days long training for 30 Outreach Supervisor whom were oriented on Monitoring and Supervision.

Program Visit: During the implementing period of the project, its activities particularly the DIC has been visited by project staff, SJA Management team along with the Executive Director of SJA, respective partner organization as well as NASP and MoHFW personnel.



Day Observation: SJA Consortium has followed deferent days in the year 2010. In the World AIDS day, the Sylhet Jubo Academy Head Office and all the DICs arranged a colorful Program, discussion meeting and participated in the AIDS Fair. Not only that in the following year SJA Consortium organized Victory Day Observation with colorful events, rally and discussion meetings etc.



Early Childhood Development Support Program-Bangladesh (ECDSP-B)

- Project Duration : May-2009 to March-2013
- Implementing by : Sylhet Jubo Academy (SJA)
- Primary Partner : Friends in Village Development Bangladesh (FIVDB)
- Funded by : Canadian International Development Agency (CIDA) & Aga Khan Foundation (AKF)
- Total Staff : 1 Team Organizer, 1 Accountant, 2 Program Officer, 1 Support staff, 10 ECD Teacher and 10 ECD Support Teacher
- Implementing area : Sylhet Sadar and Golapgonj Upazila
- Project Goal : The goal of the Early Childhood Development Support Program-Bangladesh (ECDSP-B) is to contribute to the improved quality and delivery of service in education appropriate to the needs of the poor, particularly women and children and to their increased access to these services.
- Objectives :
- To ensure that young children have safe places to play where their development and educational needs can be met.
 - To prepare children socially, emotionally and intellectually for later education.
 - To enable older siblings or adolescent mothers to attend educational activities.
- Target beneficiaries :
- Direct beneficiaries:**
- Parents and their children aged between 5-6 years.
 - Teachers/ Co-Teachers.
- Indirect Beneficiaries:**
- Other family members of children, teachers and co-teachers
 - Local Community
 - Committee (CMC, Program Support Group)
 - Local elites
- Project coverage Area :
- Number of Union- 03 (Shilam & Muglabazar in South Surma and Rampasha in Bishwanath Upozila)
 - Number of Upazila- 02 (South Surma and Bishwanath)
 - Number of District- 01 (Sylhet)
- In total Centre in the existing coverage : 20 ECD Centre

Human resource:

Full time staff	Quantity	Part time staff	Quantity
Team Organizer	01	Teacher	19
Program Officer	03	Co-teacher	17
Accountant	01	-	-
Support Staff	01	-	-
Total Project Staff		06+36 = 42	

Specific Project Location for Jan/2011 to Dec/2011:

Per-School:

District: (Number of Dist.-1)	Upozila: 2 (Number of Upozila-2)	Union: (Number of Union -3)	Village: (Number of Village -10)	ECD Center: (Number of Center-20)
Sylhet	South Surma	Shilam	Mukterpur	- Mukterpur ECD Center - Khoraria ECD Center
			Tilapara	- Poschimpara ECD Center - Tilapara ECD Center
			Dalipara	- Dalipara (Shift-1) ECD Center - Dalipara (Shift-2) ECD Center
		Muglabazar	Mahmudabad	- Mahmudabad ECD Center
			Horgouri	- Horgouri ECD Center
			Negal	- Kondiyarchor ECD Center
	Bishwanath	Rampasha	Rampasha	- Rampasha ECD center - Kunapara ECD center
			Jomserpur	- Jomserpur-1(Shift-1) ECD Center - Jomserpur-1(Shift-2) ECD Center - Jomserpur-2(Shift-1) ECD Center - Jomserpur-2(Shift-2) ECD Center - Jomserpur-3(Shift-1) ECD Center - Jomserpur-4(Shift-2) ECD Center
			Katlipara	- Katlipara (Shift-1) ECD center - Katlipara (Shift-2) ECD center
			Mujraipara	- Mujraipara ECD center

Parenting: Number of parenting- 20 in this same pre-schooling location involve with fathers and mothers.

CMC: Number of Centre management committee- 15 considering of shifting centre involve with local community people.

Other Activities:

- Monthly Meeting
- Organization development training
- Cluster training
- Basic training on ECD; Pre-school & Parenting
- Refreshers training for teacher and co-teachers
- Gender training
- Training on developing low cost materials
- Community training on child raring & caring
- Meeting with others service providers
- Meeting with GO & NGO's
- Meeting with local Govt. authority
- Best teachers performance award
- Cross learning visit
- School dress preparation & distribution
- Annual sports & cultural program
- Day Observation
- Transition to primary school
- Monitoring & Evaluation

Output Result: Application of effective Gender sensitive ECD programming

To achieve the output result SJA will replicate FIVDB's ECD model and SUCCEED's parenting session through contextually in a sustainable and affordable mechanism. The major intervention of ECD program will be

- Pre School
- Parenting session

Implementation Strategy:

SJA implementing the project through cost effective and sustainable mechanism where capacity building, sharing responsibilities, efficient resource allocation will be considered as the main strategy.

SJA following the principles/main concept of Shishu Shreny of Primary Education Program of FIVDB and Parenting Session of Succeed Project that is implemented by FIVDB. To carry out the model and mitigate the risk context specific strategies will be taken.



Post-Literacy and Continuing Education for Human Development Project-2 (PLCEHD-2)

Project Phase	: 2 (two)
Project Cycle	: 1 (one)
Coverage area	: Division: Sylhet Upazila: Sylhet Sadar (Sadar and South Surma), Biswanath, Balaganj, Golapganj, Fenchuganj, Bianibazar, Kanaighat, Jointapur, Gowinghat, Companyganj and Zokiganj.

Preface:

“Literacy for All” is a human right and essential for human development.. The constitution of the Country has clearly spelt the kind of the basic education the country must have and it enjoins upon the government to impact such education within a given time frame. As a signatory to the world conference on EFA held in Jomtien in March 1990, World Summit for Children held in New York in September 1990, EFA Summit on Nine high population Countries held in New Delhi in 1993, the Government of Bangladesh was committed to achieve 62% literacy by the year 2000 AD.



To fulfill the commitment, Ministry of primary and Mass Education (MoPME) through Directorate of Non-Formal Education (DNFE) undertook 4 NEF project including Post Literacy and continuing Education projects.

The purpose of post literacy and continuing education project is (as the name suggests) to provide post literacy and continuing education to the neo literate covered under different Non-formal Education projects and any others program organized by CBAs or NGOs and primary school dropouts. In the post literacy course the objective is to consolidate, upgrade and fine-tune the acquired skills of neo literate and in the continuing education course the objective is to consolidate, upgrade and fine-tune the acquired skills of neo literate and in the continuing education course the objective is to provide them with skill training room the list of available and suitable skills considering the market demand and supply situation. The post literacy course will virtually work as a bridge between basic literacy and continuing education and will facilitate the basic literate to go for continuing education.

Continuing education is a broad concept, which encompasses all learning opportunities. In this project the continuing education course includes skill training, awareness as well as increased practice of basic literacy skills by the neo literate. The purpose of continuing education is to improve the quality of life of the learner's through enhanced income and greater enlightenment, which would lead to general development of the quality of life the learners and the society as a whole



Recently Sylhet Jubo Academy (SJA) signed a MoU (dated 4 April, 2010) with Director General, Bureau of Non-Formal Education (BNFE) to implement PLCEHDP-2 project in 11 upazilas of Sylhet district under Sylhet division. Along with its three (3) associates SJA has been implementing the Post Literacy and Continuing Education Programs in Sylhet district with the guidance and support of BNFE by adopting the implementation strategy of the approved NFE Policy framework.

Sylhet Jubo Academy (SJA) is an NGO deeply rooted with grassroots people; established in August 12, 1991 with the active initiative of local social workers. The major focus of the organization is the empowerment and emancipation of deprived people especially women & children. SJA aiming the empower the deprived people through establishing environmentally sound society where every on has equal gender access, poverty

SJA's philosophy has always been to empower the most disadvantaged in the community through equipping them with the skills, resources and confidence to improve their own quality of life. Full participation from the community is a core feature of SJA's projects and the organization's success may be largely attributed to the community is a core feature of SJA's projects and the organization's success may be largely attributed to its flexibility in responding to the needs of the people.

SJA has long experience in providing services to address the Non-formal Education Program including Post Literacy. SJA has implemented NFE, (for both adult & children) program in the remotest areas of different part of Sylhet division with the support of DNFE, BRAC and other esteemed donors.

Statement of the project aim:

The Board objective of the project is to enhance the skill of the neo-literate and to improve the qualities of life of the learners through enhance income and greater enlightenment which would lead to general development of the quality of life of the learners and society as a whole.

The achieve the broad objective the following specific objectives has been setup:

- develop human resources of the country, to include the neo literates in the post literacy and continuing education programs.
- consolidate, maintain and upgrade the literacy skills the have acquired previously.
- help the learners to improve their acquired basic literacy skills through regularly involvement in post literacy activities and become aware of their rights and responsibilities.
- help the learners to improve their acquired basic literacy skills through regularly involvement in post literacy activities and become aware of their rights and responsibilities.
- motivate the learners to apply their skills at individual, family and group levels (in their productive, family and social role)
- make the learners aware of the availability of government and non-government facilities and derive benefits from them;
- organize training to develop skills at the local levels considering of learner's demand, demand for goods and services in the local market and available opportunities for skills training in the area;
- enhance the social standard of the neo literate by improving their living conditions and livelihood and make them as a productive citizen, eliminate gender disparity etc.
- establish social equitability expediting women empowerment.
- achieve literacy operational through continuous practices for self-employed so that the neo-literates do not revert to be illiterates.
- trained the neo-literates in trades and skills for which they have maximum potentialities.
- involve them in post literacy actives and to enhance their awareness of human rights and responsibilities.
- improve their quality of life to live with dignity in the society and involve them in modern professional's employment opportunities as well as agricultural or other works.

Approach and Methodology: Appropriate approach and Methodologies are following to achieve project objectives.

- i) Baseline information collection through survey: For the selection of the learners following specific criteria and to know the socioeconomic status of the baseline survey was conducted at the starting of the project covering the whole project areas i.e. eleven Upazila in Sylhet District.

- ii) Selection of Learners following specific criteria: Based on the survey result the learners are selected from among the neo-literate who has graduated from any of the DNFE program and any other program organized by CBOs or NGOs including primary school dropouts. The age group for the male and female learners was from 11 to 45 years. Priority was given of the age range from 15 to 25 years followed by 25/45 age groups to address age group specific needs.
- iii) Selection of competent project staff giving priority to the local candidate: All the project staffs have been selected following a competitive procedure i.e. on the basis of their academic qualification, aptitude, experience and competency through an interview process. As per project strategy priority was given to the local candidates to reduce drop out rates particularly for the position of Facilitator, Lead facilitator and Supervisor.
- iv) Formation of Centre Management Committee (CMC): Community participation always helps to achieve project result, considering this reality strategy has been taken to involve community people in the project implementation process. As a part of this process of involving community people in project management “center Management Committees (CMC)” has been formed at all learning centers’ with local guardians of the learners and local elite’s to ensure intensive local participation. The responsibilities of the CMC are to supervising of the center operation and immediate solution of local problems.
- v) Ensuring enabling environment in the learning Centre: Learners friendly environment is one of the pre-condition of quality/better learning. To ensure learners friendly environment place and space has been taken into consideration. Accordingly SJA has established 374 learning center (approx. space 22ft x 14 ft) a convenient location for the learners ensuring congenial environment for education with accommodation of the 30 learners and facilitators.

As per the prescribed instruction fumitory and other materials provided to the each centre. List of materials are:

Sl. #	Items	Unit	Quantity per Center
01	Wooden armed chair	Nos	1
02	Wooden Table for Facilitator	Nos	1
03	Long wooden table for learners	Nos	4
04	Long wooden table/ bench for learners seating	Nos	8
05	Wooden Shelf	Nos	1
06	Steel Almirah	Nos	1
07	Notice board	Nos	1
08	Sign board	Nos	11
09	Black board	Nos	1
10	Radio	Nos	1
11	Pad lock and key	Nos	1
12	Issue based Reading materials	Set	125

VI) **Learner’s friendly schooling time:** Most of the learners are engaged in their livelihood activities. So it is one of the important strategies to engage learners in the project without hampering their daily livelihood options, accordingly it is decided to run the learning centre six days in a week. In the week 2 days are for Post Literacy and 4 days are for continuing education.

Each center operates in 2 shifts daily, one for female learners and another for male learners. As the male learners are generally engaged in their income earning work in day time so male shift is in the evening time and female shift is in the day time after completion of their household and other works. Duration of each shift is for 2 hours.

VII) Appropriate course content and its duration:

In the continuing education course they are providing skills training on the basis of their choice, base line data, and income generation opportunities and future demands of goods and services in the local market and availability of training facilities.

Appropriate course content and standard materials has been selected and developed by the project authority. Supplementary education developed by different NGOs and academic institutions also selected and provided to the learners.

To continue the qualitative learning for selected learners and as whole to the learning center following materials already been supplied on timely to the each learning center:

Sl. No	Items	Remarks
01	Daily News Paper	2 news paper daily
02	Exercise book / khata (120 page)	1 in a month to each learners
03	Ball point pen	1 in a month to each learners
04	Chalk 1 box	2 box in a month
05	Duster	3 Nos.
06	Lantern(Large size)	6 per center
07	Ludu	2 per center
08	Chess	2 per center
09	Bagaduly	1 per center
10	Registers	8 nos. per center
11	Participants ID card	Individually all learners

VIII) Make the project staff competent to provide services effectively:

Master Trainer have been provided training from the project authority and intern trained Supervisor and Facilitators. After completion of Master Trainers Training, 16 Training Course for the Supervisors and Facilitator were organized at the Upazila level. Participants per training was in an average 31(Facilitator- 15 center x 2) and one Supervisor assigned for 15 Center. Another follow up course was also organized before starting the continuous Education (CE) for the same participan6ts in the same manner. However, additional training course may be organized as and when required for the replaced Facilitator and Supervisor due to drop-out.



IX) Super vision: In accordance with the decision / guidance of the Orientation meeting, a resource person cum Supervisor has been appointed as all time Supervisor of the Program. The Executive Director of INGO and its associates and as well as the other senior officials of concern NGOs are also pay visit the program areas on regular basis.

Monitoring: As per the structured Monitoring Mechanism is built in the project, representatives of the Deputy Commissioner, Officials of Upazila administration, AD and PO of District BNFE Office, DPC, UPC are Supervising and Monitoring the Program activities regularly and intensively. Besides this BNFE are also doing routine monitoring. The progress of activities of each center is collecting in the format designed by BNFE and the collected information are providing to the District Coordinator.

Apart from the structured Monitoring mechanism in built in the project SJA also doing regular monitoring through:-

- Field visit
- Focus group discussion with different Stakeholders
- Report review
- Monthly and Quarterly Staff Meeting
- Internal Audit
- Interview with direct beneficiaries



Challenges Faced: Due to natural calamities, (Especially heavy rain-fall lake and flood) baseline survey and center establishment period take more time

Conclusion: With full effort of SJA Personnel, Project team, BNFE district Officials and Community people, the project launch successfully and the learning center starts operation from November 1, 2010. Deputy Commissioner, Sylhet officially inaugurated the learning center.



Effort for Capacity- building of Community based Organization (ECCO)

Location of the Project	:	District Sylhet	Upazila Biswanath	Union Biswanath & Rampasa
Project Duration	:	January 2008 to February 2013		
Number of Project Staff	:	Songlap Supervisor-1, Songlap Animator-15, Accountant-1		
Donor	:	Stromme Foundation		
Target Beneficiaries	:	Poor & School drop out student		
Goal of the Project	:	CBOs are capable in the implementation of development interventions.		
Objective of the project	:	<ul style="list-style-type: none"> • To build up management skills of the participating organization through formation of organization al politics. • To build up capacity of financial resource management by strengthen the potential of the staffs • To develop human resource to better performs CBOs activities with their respective community. • To expand out reach of the beneficiaries/ own community and generate income and employment through micro finance support • To increase development skill of the beneficiaries through life education. • To establish linkage with civil society for established their rights • To mobilize resources through local elected bodies 		
Implementation Strategy	:	Motivation, Sanglap center set up, Meeting & Home visit		
Activities of the project	:	<ul style="list-style-type: none"> - Total 15 sanglap center runing under this project - There are three types of activities, first six months awareness build up, second three months education and last three months training for income generate activities. - Awareness build up and education program are finished. At present it has run sew training. - On the other hand regularly meeting with adolescent guardian - Give money among the high school drop out girls for readmission and provide text book. 		
Target wise achievement	:	Subject	Target	Achievement
		Sanglap Center	15 Sanglap Center	15 Sanglap Center
		Adolescent	375 person	375 person
		Refreshers Meeting	6 Meeting	5 Meeting
		SST Meeting	45 Meeting	40 Meeting
Project Impact	:	<ul style="list-style-type: none"> • Raise awareness to community people about non-formal education. • Adolescent now realize the important of life skill education. • GOB offices also involve our program. • Students are directly benefited by scholarship • Dropped adolescent received life skill training. • Adolescent make themselves to fate for struggling. 		

Providing support for quality planning, implementation and monitoring of community support system (ComSS) interventions.

About ComSS Initiative:

ComSS is a mechanism for establishing a system at the community level through collective efforts of the people, which aim to provide support to pregnant women and newborn for improved home care and support during emergency obstetric to prevent maternal and neonatal deaths. ComSS is also a mechanism that convey community health agenda to local service providers. The Community members have been instigating individually meets together and to assess their own situation. They perform identifying the problems/ obstacles of pregnant women and newborn and its possible solution in the respective communities. In addition, ComSS identify local resources, design and develop action plans, implement and monitor for community interventions.

Coverage of ComSS Intervention Area (**Sreemongal, Rajnagar, Borlikha Upazila**):

ComSS Catchments area	Sreemongal Upz	Rajnagar Upz	Borlikha Upz
CC Catchments population (Approx.)	1,35,185	68,995	56,855
Catchments CC	26	14	11
Catchments Union	08	07	08
Catchments village	122	76	74
Catchments village House Hold	26,217	10,269	8788

Activities under ComSS:

- ▶ **Household Counseling:** Conduct Household counseling by the Community Health Volunteer.
- ▶ **Court Yard meeting:** Conduct Courtyard Meeting by the Community health Volunteer in her catchments.
- ▶ **Support to EPI and Satellite session:** Community health Volunteer assist to HA, FWA and FWV for EPI and Satellite sessions.
- ▶ **CCMGs Meeting:** Meeting with CCMG members in each of 51 community clinics once in every two months
- ▶ **UH&FP Meeting:** Meeting with Union Standing Committee in each of 24 Union Parishad once in every two months
- ▶ **Preparation of Community clinic action plan:** All Community Group has developed own Plan in the respective community clinic.
- ▶ **Preparation of Union-MNH Action Plan:** Sharing workshop in each of 24 Union Perished to develop MNH action plan by different stakeholder to implement MNH activities
- ▶ **Monthly meeting and refreshers with volunteers:** Monthly meeting and refreshers organized with all the respective volunteers at Upazila level
- ▶ **Health Mapping:** Organized jointly with Community Group Members under each of 51 CCs and displayed in the respective CCs
- ▶ **Participation in meetings with various department of GOB:** Coordination meeting/NGO coordination meeting with each of 3 Upazilas, Upazila level health staff meeting, Upazila level FP staff meeting, Coordination meeting with UH&FPO Office and Family Planning office at Upazila level.
- ▶ **Volunteers Performance Rewards:** 4 Volunteers from each of 3 Upazila rewarded for outstanding performance twice a year
- ▶ **Upazila Taskforce Meeting:** 3 Taskforce Meeting with each of 3 upazilas once a year.
- ▶ **Own initiative by the CG :** Organized Mother Assembly and blood grouping campaign in the respective CC and to take initiative distribute Penny bank and raising fund for refer Complicated Pregnant women and New born baby who are representing from the extreme poor and vulnerable group.

Achievements:

Revitalization and continue meeting with Community Group (CG), Union Health Standing Committee and Other Events:

5.2. MNH Service delivery:

SI	Event	Target yearly (2009-10)	Total Achievement (2009-10)	Remarks
01	CG Monthly Meeting	612 Meetings	612	Bi- monthly meeting
02	UH&FP Committee monthly meeting	264 meetings	264	Bi- monthly meeting
03	Prepared MNH action plan in CC	51 CC	51	-
04	Prepared union MNH action plan in union	22 unions	22	-
06	Blood grouping by the CG	51 CC	22	CG initiated program
07	Organize emergency transport by CG	51 CC	51	-
08	Fund raising by the CG	51 CC	51	-
09	Penny bank distribution by CG	51 CC	37	CG initiated program
10	Organized mother Assembly by CG	51 CC	37	CG initiated program
11	Arrange Satellite session in the CC	51 CC	40	CG initiated program

SI	Event	Target yearly (2009-10)	Total Achievement (2009-10)	Remarks
01	# of registered pregnant women		11520	
02	Cash / kind help from CG to the pregnant women		5332	
03	Registered New born		1056	
04	Cash / kind help from CG to the new born		900	
05	Household Counseling conducted by CHV	Need based	36520	
06	Court yard meeting by Volunteer	10260 Court yard meeting	9520	
07	Work in EPI session by UF/Volunteer	Need based	7119	
08	Work in Satellite clinic session by UF/Volunteer.	Need based	1932	

Progress against Indicators from July to December 2010:

A total of 11 indicators were set to assess the progress of the ComSS interventions. Progress of ComSS intervention against those indicators is presented in a table below:

** Program MIS developed from July 2010.

#	Indicator	July '10	Aug '10	Sep' 10	Oct' 10	Nov '10	Dec' 10	Total	%
01	% of PW received at least 3 ANC service from a trained provider	405	468	653	582	339	398	2845	59
02	% of deliveries attended by skilled personnel	339	377	430	432	322	373	2273	47
03	% of PW received PNC by a trained provider within 2 days	351	397	450	413	150	154	1715	35
04	% of PW have filled up Birth Planning card	537	677	722	664	680	726	3906	81
05	% of Newborn received thermal care within 10 minutes	598	700	706	859	685	766	4314	90
06	% of Newborn received delayed bathing	584	689	699	848	561	733	4114	86
07	% of Newborn initiated breast feeding within 1 hour	605	702	720	877	787	779	4470	91
08	% of sick newborn received care by trained provider/skilled health personnel	10	15	10	18	15	21	99	02
09	% of women from the community who received care for maternal complications	114	143	153	165	178	217	970	20
10	% of functional Community support group in the union							114	100
11	% of Women from poor & vulnerable group participated in developing & implementation of CG Action plan							105	92

#	Other Information	July' 10	Aug' 0	Sep' 10	Oct'1 0	Nov' 10	Dec' 10	Total
01	Total delivery	624	728	748	921	828	921	4770
02	Total live birth	614	720	741	901	809	914	4699
03	Total still birth	10	8	7	20	16	10	71
04	Total newborn death	4	5	7	18	9	14	57



Case study- 01: A Tale of Jharna Begum's Delivery Moment

Gharna Begum (25) lives at Khilgaon village. This village is situated under Sindurkhan union in Sreemongol upazila of Moulvibazar district. Two years passed Jharna got married. Her husband Anawar Hossain is engaged in small business. There are five members in her family. In October 2009 Jharna felt that she was going to be mother. Her family members were very happy to inform this good news.



At that time Faima Begum went to Jharna Begum's house and discussed about her pregnancy and care. Faima Begum is Community Health Volunteer, provides service voluntarily in Dobagaon Community Clinic catchments area under Maternal Neonatal Health Initiative. Dobagaon Community Clinic is situated at Sindurkhan union. Faima Begum accomplished first and second counseling with Jharna. It was Jharna's first pregnancy, so she did not know properly how to care pregnant mother and neonate. After getting counseling, Jharna including her family members were aware about danger sign, birth planning and overall caring process of maternal and neonatal. Jharna started to save money in penny bank and stored necessary cloths and equipment as a part of birth plan. Her family also fixed Traditional Birth Attendants for proper delivery.

Over the time delivery pain was started according to expected date of delivery (EDD). Jharna's mother in law and her husband requested to Faima to present in delivery time. Faima was present in delivery moment. Though, Jharna did not feel major problem in her pregnancy period. But in her delivery moment arisen a danger sign. Jharna was suffering for severe delivery pain and 12 hours were passed. In this circumstance Jharna's family members were at a loss to determine what to do. TBA also could not overcome the situation by her long experience. Faima told Jharna's family members that it a danger sign and if they do not admit Jharna in hospital immediately, mother and neonate will die.

At last Jharna was admitted in hospital. It is to be mention here that Jharna's husband contracted a CNG puller to meet the urgency. Otherwise it was not possible to take way in hospital as immediate basis. Doctor checked up and took measure for her delivery. She delivered a daughter baby. She became a mother by normal delivery. Mother and neonate were under observation for few hours and they were released in the same day. Mother and daughter were sound. Jharna Begum and her family are very happy now.



Enhancing Environmental Health by Community Organization (EEHCO)

SJA implementing this project since April 2009 but it is the extension project of ASEH which was started on March 2005 with the technical and financial support of Water Aid Bangladesh (WAB).

Some Basic Aspects of EEHCO Projects:

EEHCO started its journey on April 2009 as an extension of ASEH. EEHCO is acronym of Enhancing Environmental Health by Community Organization. Title of the project proved that the main target group of this project is community's people. Some basic aspects of this project are as follows-

In primary stage EEHCO CBO meeting, Child forum meeting, tea stalls session etc. were arranged by the field workers. They also motivated people to set up hygienic latrine. In second stage base line survey was conducted when it was full rainy season. It created huge problems for the workers. Survey result was shared with Union Parishads and they made action plan according to this result. Third stage was very crucial for EEHCO because different dimensional works were done here. CBO assessment took place in this stage. We also reviewed CSA and CBO CAP in this stage. We installed STW and an IFG, renovated platform in this stage. Some training program also arranged in this stage. We are still working hardly so that we can achieve our target. Imam orientation and some platforms were repaired in the last stage of first year.

Goal:

Quality of life of the poor and disadvantaged people living in rural and urban communities enhanced.

Objective

Reduction in exposure to water and sanitation risk, sustainable improvement in hygiene behavior and empowerment of the poor and disadvantaged towards achieving WASH rights.

EEHCO expects five outputs will achieve after the completion of the project. This outputs are-

Output-1:

Poor and disadvantaged communities in selected rural and urban areas have access to, and control over (i) Safe and adequate water, (ii) environmental sanitation facilities, and (iii) are empowered to raise their voice to demand water and sanitation services.

Output-2:

Poor and disadvantaged people in selected rural and urban areas (i) adopted improved hygiene practices and (ii) empowered to raise their voice to demand improved hygiene services.

Output-3:

Poor and disadvantaged people and their organizations empowered to assert their rights and claim services from Government and other institutions.

Output-4:

Responses from local Govt. Institutions, Service Agencies, Partner NGOs and WAB increased towards sector reform and sustainable improvement in WASH service delivery.

Output-5:

Water supply, environmental sanitation and hygiene promotion policy and programmes of national and local Govt. included priority for the poor and disadvantaged communities.

Guiding Principles:

EEHCO guiding principles are inclusive, Participation, Governance, Learning and Exploring.

Activities

EEHCO has two categories of activity which are hardware and software. But it emphasizes on software activities so that community people can achieve their goal by developing their capacity. A table has presented below which focuses the activities of the reporting Project.

#	Hardware Activity
1	New STW installation
2	IFG installation
3	Platform Repairing
4	School Latrine Repairing
5	DAP Latrine installation
6	Latrine installation through Motivation
7	Solid Waste management

#	Software Activity
1	Base Line Survey
2	CBO Assessment
3	Community Situation Analysis
4	CBO Meeting
5	Community Action Plan Review
6	Arrangement of different types of trainings
7	Activate Hygiene promotion Catalysts
8	WSTF and USTF Meeting
9	Upazila Sharing Meeting
10	Rooted Advocacy
11	Observation of Sanitation Month
12	Observation of Hand Washing Day

Training:

Different types of training were provided in 2009 for capacity development of CBO and other stakeholders. A table is presented below to show training activities.

Name of the Training	Beneficiaries
CBO Leadership Training	1077
HP Catalysts Orientation	724
Teacher/SMC Orientation	92
Caretaker Training New	34
USTF Orientation	76
Student Forum Orientation	90
Imam Training	110
Orientation of HP Observation Group	362
WSP Campaign	6

Proximity Service for a full Participation with Disabilities In all spheres of life

- Project duration : August 2007- January 2010
- Supporting by : European Commission & Handicap International
- SJA gains long experience in working with disable people in Sylhet region. It is one of the disability development programs of SJA being implemented in Sylhet Sadar and Golapgonj Upazila of Sylhet district. Two experienced staffs are working to achieve the goal and objectives of the project.
- Goal : Help disable people and children becoming self-reliant through providing education, treatment and income generation service and support.
- Objective : The primary objective of the project is to make disable people self-reliant so that they no longer remain as burden to the families and society.
- Methodology of Support and Services : Treatment services are provided to PWDs in the working area through operating Mobile Unit while severe disabled children are referred to DRCD for better therapeutic treatment and support. Door to door counseling, therapy and follow-up supports and services are provided of PWDs.
- Activities : Activities of the project include physio-therapy, follow-up, counseling and cooperation to disabled children to be admitted into schools.

Activities	Target	Achievement
Identification of PWDs	40 PWDs	79 PWDs
Admission to Schools	10 disabled children	20 disabled children
Courtyard Meeting	50	185
Family Counseling	40 Family	40 Family in a month
Referral	-	30 for health and IGA support
Primary Therapy	40 PWDs	Every one has got primary therapy in a month
Provide assistive device	-	6

- Additional Performance :
- SJA organized 8 disabled children participated in the Sylhet Divisional Sports Competition for the Disabled Children where 1 child won 1st prize. Two among them won 2nd prize and 1 of the disabled children got 3rd prize in different events.
 - Observed the International Disable Day conjunction with RCBPRCD and EAW project of SJA
 - Observed International Mother Language Day by the participation of deaf children and their parents through arranging morning procession and offering floral wreath to the Language martyr Monument in Sylhet.