

Annual REPORT 2014



Sylhet Jubo Academy (SJA)

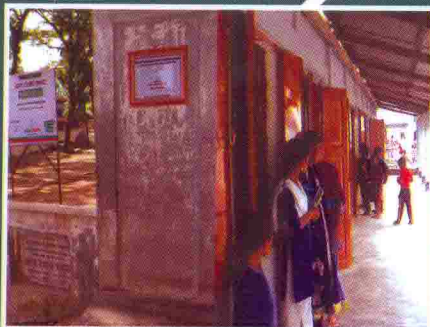




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A Note from the Executive Director

Being a national level organization, SJA has completed 24 years with so much attributes and gathered adequate grassroots level experiences so far in the vast arena of human development. SJA today is quite a lot different, innovative, remarkably expanded from the beginner under which lies the team work, strong team building process, hard work of dedicated human resource along with accountability in the implementation process of activities, projects and programs.

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.

Development is a lifelong journey to me towards transformation of the life of poor and vulnerable that ultimately contributes in national growth and development. We do hope to continue our progress with more innovative approach.

In this reporting year 2014, SJA has accomplished successfully with a lot of challenges which is shown in this yearly report of 2014.

We are very 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 continuous support 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 especially those who put their endeavors in this report.

A H M Faisal Ahmed
Executive Director

Vision:

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

Mission:

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.



ACRONYMS

AAB	Action Aid Bangladesh	NID	National Immunization Day
AAS	Ashar Alo Society	OCC	One-stop Crisis Center
AIDS	Acquired ImmuneDeficiency Syndrome	O&M	Operation and Maintenance
AP	Action Plan	PE	Peer Educator
AKF	Aga Khan Foundation	PFT	Project Facilitation Team
CBO	Community Based Organization	PHA	Positive HIV-AIDS
CEDAW	Convention on the Elimination of all forms of Discrimination Against Women	PLP	Participatory Learning Process
CWDs	Children with Disability	PRA	Participatory Rapid Appraisal
CM	Change Maker	PWDs	People with Disabilities
CMEVA	Community Mobilization to End Violence Against Women	RBA	Right Based Approach
CAS	Community Situation Analysis	RD	Reflective Dialogue
CT	Counseling and Testing	RW	Ring Well
DILARA	Deaf in Literacy and Rights Academy	RH	Reproductive Health
DIC	Drop in Center	RTM	Research, Training and Management
DRCD	Decentralized Resource Centre on Disability	SBC	Strategic Behavior Change
DTW	Deep Tube-Well	SCUSA	Save the Children USA
DV	Domestic Violence	SDO	Social Development Officer
EC	European Commission/Executive Committee	SMC	School Management Committee
FGD	Focus Group Discussion	SRHR	Sexual and Reproductive Health & Rights
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
MCH	Mother and Child Health	DMC	DIC Management Committee

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
2012	Introduction of Eradication of Hazardous Child Labor of Bangladesh Project (EHCLBP)

SJA: At a Glance

Program Infrastructure	
Central Office	01
Project Office	08
PRT Center	01
Community Clinic	01
DIC/IHC	18
School of Deaf Children	02
Training Facility	03

Human Resources	
Full time Staff	239
Part-time Staff	42
Male & Female Ratio:	
Total Male Staff	78
Total Female Staff	203
Grand Total:	281

Annual Expenditure	
Year	Amount in Taka
2010	209,025,005.00
2011	170,069,325.00
2012	130,772,689.00
2013	110,509,920.32
2014	60,773,751.15

Program Coverage	
Districts	10
Upazilas (sub-districts)	22
City Corporation	03
Paurashava	13
Population Covered	1.48 million

Development Sector
Health and Population
Education
STI and HIV/AIDS Prevention
Disability
Water and Sanitation
Gender and Human Rights
Climate Change Adaptation and Mitigation
Nutrition

SJA: An Overview

Sylhet Jubo Academy (SJA) has been emerged in August 1991 by a small group of likeminded 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.



HIV and STI Prevention Project (MODHUMITA)

SJA has been implementing this project in Sylhet City Corporation and Sreemangal Municipality of Moulvibazar District for the most vulnerable community "Hotel Based Female Sex workers and their Clients" since 2003 with the financial and technical support of Family Health International (FHI360)/USAID. This is to mention that this project is a continuity of an initiatives which was started 2003 with the mane of Impact, then BAP and finally MODHUMITA. This means SJA has been implementing this project as a strong sub-guarantee of (FHI360)/USAID for long 11 years.

Goal of the Project:

To reduce the risk of STI and HIV transmission among hotel based Sex worker and their clients in the cities of Sylhet and Sreemangal municipality.

Objective of the Project:

1. Create supportive environment for HIV and STI prevention through social mobilization.
2. Increase competency of project staff on project management and behavior change.
3. Promote risk elimination and risk reduction practices among street-based and hotel-based female sex workers and their clients through outreach activities and Modhumita health centers.
4. Provide quality health service including STI management for hotel based and street based sex workers and their partners/clients.
5. Create a structured Quality Assurance and Quality Improvement (QA/QI) system.
6. Provide high quality HIV counseling and testing (CT) services.
7. Create awareness for TB diagnosis and directly observed treatment services among SJA clients.
8. Strengthen linkages and referral networks of the services for sex workers and their clients.
9. Promote knowledge, Skills and access to products for correct and consistent use of condoms.
10. Improve medical waste management.



Activities of the Project:

Four Major Activities

Outreach Activities:

Outreach Counseling, outreach Training, outreach contact with sex workers and their clients, outreach Condom and lubricant distribution, counseling on TB & FP, TB test and DOTs through referral.

MHC Activities:

Recreation (Shower, game, Watching TV, Taking rest etc), MHC Based Training, MHC Based Counseling, condom and lubricant distribution, provide FP method through SSFP satellite clinic.

STI Clinic:

Counseling, STI Treatment, free medicine, condom and lubricant distribution Follow Up.

VCT Service:

Blood Test for HIV and Syphilis, counseling on HIV-AIDS and STI, PLHA refer for treatment.

Activities as per Objectives:

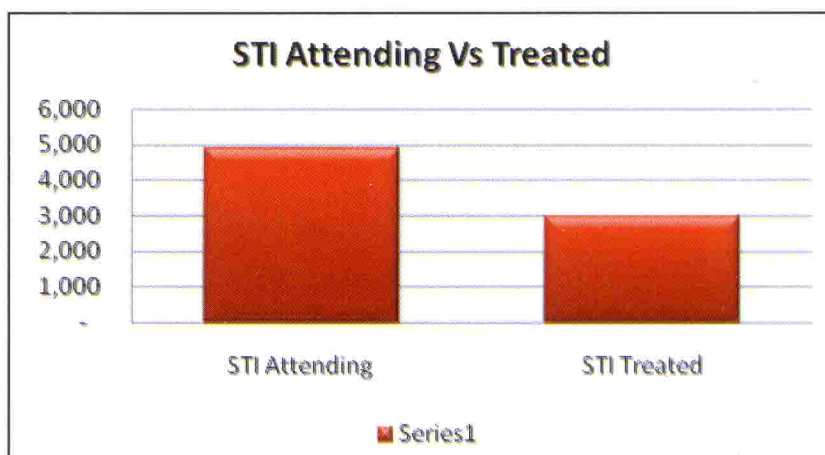
1. Promote local community activities.
2. Collaborate with faith-based initiatives for HIV prevention.
3. Convene joint sensitization/advocacy meeting with local administration, police, religious leaders, community leaders and other influential people and awareness raising meeting.
4. Day Observation.
5. Flying Squired: a response to crisis management.
6. Create regional media forum.
7. Trainings for peer educators, peer volunteers, proxy peer educators, outreach workers and other relevant Modhumita Health center based staff.
8. Outreach activities at cruising spots, hotels and gathering places of the clients.
10. Peer Graduation & Partner Management.
12. Syphilis Screening & Promotion of SBC materials.
13. Create a structured Quality Assurance and Quality Improvement (QA/QI) system.
14. Provide high quality HIV counseling and testing services for hotel based female sex workers.
15. Create awareness for TB diagnosis and directly observed treatment services among hotel based female sex workers.
17. Refreshers on TB and TB/HIV co-infection & strengthening family planning at the MCH.
19. Strengthening linkage and referral networks of the services for sex workers and their clients.
20. Integrate general health and other services not available at Modhumita Health Center.
25. Improve medical waste management.

Accomplishments, Highlights and Constraints:

Objective 1: Create supportive environment for HIV and STI prevention through social mobilization

SL#	Activities	2014	
		Target	Achievement
1	PFT Meeting	17	17
2	Meeting with religious leader	10	10
3	Meeting with Police	12	12
4	Meeting with journalist	5	5
5	Meeting Local guardian (LG)	8	8
6	Meeting with school authority and student	4	4
7	Community dialogue with stakeholders	3	3
8	World AIDS day observation	10	10
9	World Health day observation	0	5
10	World Women Day Observation	0	5
11	World Population Day	0	5
12	Volunteer recognition	8	8
13	World TB day observation	5	5
14	Block & Batik training	4	4
15	Sewing training	3	3
16	Monthly Sex workers gathering	43	43
17	Quarterly game competition	18	18
18	Sensitization meeting with Local Club	4	4
19	Awareness raising meeting with hotel authority	4	4

STI Attending	STI Treated
4,935	3,015



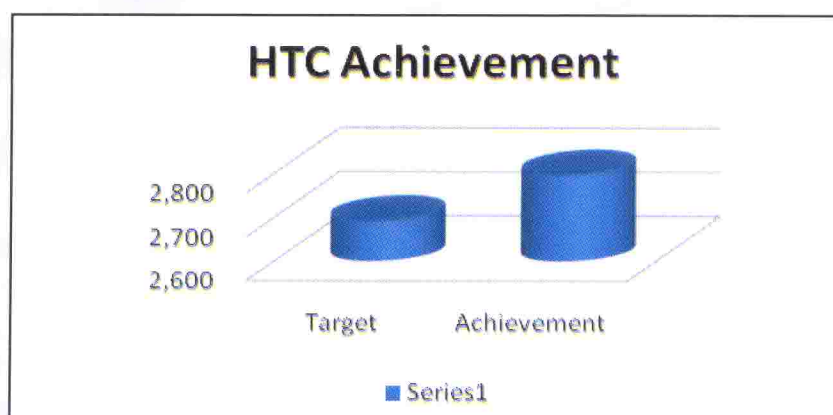
Smiling sun Satellite clinic:

SL#	Name of activities	2010 - 2014
1	# of Patient Treated	
	MHC Sylhet	948
	MHC Sreemangal	55

Provide high quality HIV counseling and testing (CT) services Create options for VCT services for hotel based Sex worker:

SL#	Name of activities	HTC Target Vs achievement	
		2010 - 2014	
		Target	Achievement
01	# of HTC		
	MHC Sylhet	2,471	2,271
	MHC Sreemangal	220	525
02	# of HTC result provided		
	MHC Sylhet	2,471	2,271
	MHC Sreemangal	220	525

Target	Achievement
2,691	2,796



Best Practice:**Condom Procure by hotel authority from Local Market:**

Usually sex workers do not use condom during sex. Considering this, Modhumita Project has strengthened their outreach activities by peer educators and outreach supervisors. They disseminate information to pimp, hotel authority and sex workers on HIV/AIDS, STI, and TB. On the other hand peer educators facilitated the SBC session through one to one and group session. As a result Pimps, hotel authority and sex workers gathered enough knowledge on HIV/AIDS, STI, and TB. Therefore, the hotel authority procures condoms regularly and the sex workers do not sex without condoms. Now every sex workers consistently use condom during sex.

Lessons Learned/Recommendations

During the period of project implementation SJA found the followings as lesson Learned are:

01. The hotel owners and management are playing crucial role for the project, and need to give them more emphasis and increase their involvement in project intervention to achieve the project goal.
02. Collaboration and coordination activities with different stakeholders are helpful to create awareness level and also get necessary support for the project.
03. Advocacy and sensitization with Administration, Law enforcement agencies, Local elites, LGI, NGO's and other potential stakeholder are useful in personal contact rather than formal group meeting or workshop.
04. IEC/SBC Materials of the organization like stickers, booklet, leaflet, brochures, poster flip chart, photo Album, Magazine etc are very much effective to contact, communicate, motivate and advocate the stakeholders.
05. Frequent communication, formal-informal contacts are effectual for the project.
06. Functional educational is useful to make literate, build confident and efficient to the peer educators and also create conceptual level of understanding for better professional development.
07. For condom promotion among the sex workers and their clients qualitative efforts required (Counseling, one to one education, motivational activities etc.)
08. Volunteer Recognition very helpful for GO/NGO seeking support
09. Vocational Training very useful for Sex workers Job replacement.



GF # 908, Expanding Provision of Essential Services to Street, Hotel and Residence Based Female Sex Workers

Under GFATM 908 package associate of BWHC consortium 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 with the financial support of GFATM/Save the Children-USA. SJA has started provision essential services to the targeted intervention with the previous vast experience on it since March 2008 through DIC implementation. Project activities implemented through 8 DICs and 1 Outlet which are situated in the different district of Sylhet and Dhaka Division. These are Shahjalal Upashahar, Badambagicha, Akhalia (outlet) and Jaflong (Guainghat upazila) of Sylhet district, Hobigonj sadar upazila of Hobigonj district, Moulovibazar sadar upazila of Moulovibazar district, Upazila Chattak and Sadar upazila of Sunamgonj district and Sabujbag of Dhaka district.

Duration of the Project: March'2008-November'2015

Table: Setting and DIC/ Outlet wise number of SW reached by SJA:

# of Code	Name of DIC/ Outlet	Street Based SW	Hotel based SW	Residence based SW	Total	Remarks
77	Chattak	131	0	187	318	
78	Hobigonj	13	0	233	246	
79	Jaflong	0	0	315	315	
80	Moulovibazar	0	20	252	272	
81	Sunamgonj	51	0	236	287	
83	Sylhet Sadar	56	38	158	252	
104	Badambagicha Ambarkhana, Sylhet	89	46	109	244	
105	Akhalia Outlet	0	40	114	154	
Total:		340	144	1604	2088	

Key accomplishments over the Project Period

SJA has been working with 2088 Female Sex Worker through 7 DIC and 1 Outlet in Sylhet division. Among them Street based are 340, Hotel based are 144 and Residence based are 1604. To prevent HIV/AIDS and ensure safer sex SJA provided different services to them so that they can enjoy better quality of life. SJA are trying to create an environment which support them positively to enjoy their rights and entitlements. SJA has an initiative of different life-skill training to create employment opportunities of FSWs.

- a. Establish and operate drop in center for Female Sex Workers.
- b. DIC Monitoring, Reporting, and Field Supervision etc.
- c. Training PE/ORW & Refreshers for PE/ORW.
- d. Advocacy and Sensitization at district level with relevant departments and stakeholders.
- e. Provide outreach peer education to FSW (twice monthly).
- f. Group education session at DIC with FSW.
- g. Provide STI management services, general health management services for FSW.
- h. STI services for regular partners of FSW.
- i. Provide male condoms for female sex workers free of cost.
- j. Social Marketing Condom distribution.
- k. Provide lubricants for sex workers.
- l. Referral services for VCT, MCH and EPI.
- m. Meeting with DIC Advisory Committee for creating and enabling environment.
- n. Conduct advocacy and sensitization meetings with Legal Aid Agencies.
- o. Picture of the Training Program:



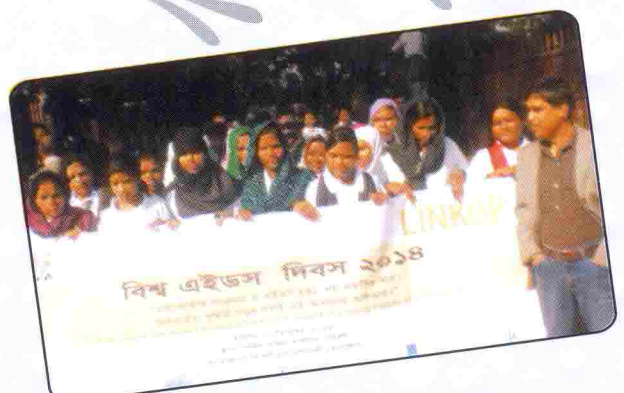
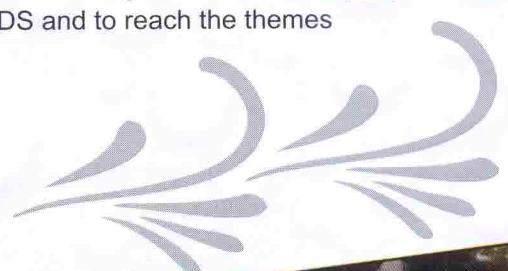
Day Observation:

Each year, SJA has observed World AIDS Day with lot of colorful events as well as GoB and others, SJA has observed colorful, joyous and festive World AIDS Day 2014 regarding the international theme "Universal Access and Human Right" for the year 2014 and " Getting to Zero: Zero New HIV infections. Zero discrimination & Zero AIDS related deaths" with the following events:

- SJA organized a vast rally for the four projects, GF # 908, HIV and STI prevention project-FHI, Link Up and Community Mobilization Project to End Violence against Women.
- Daylong Exhibition, Cultural Program and film show on HIV/AIDS at DIC level.
- Organized Planed DIC Based Events like Discussion Meeting of World AIDS Day with DIC management Committee and others, taking oath from different stakes for the participation HIV/AIDS prevention activities at the DICs making candle light at the DICs for hope, 1 minute keeping silent for deep condolences of all people who are dead by AIDS till now.

Discussion Meeting:

Followed by rally discussion meeting took place at all DICs. In these meetings, participated member of DAC, Local elite, Os and Sex Workers. At the outset of the discussion meeting, DIC Coordinators welcomed all the participants. They discussed about epidemic of HIV/AIDS, how to control and prevent HIV/AIDS from the society. They do oath to work together to aware people about harm of HIV/AIDS and to reach the themes



Case Study of Aysha Begum:

Aysha is a symbol of well and woe in the society. Aysha was a daughter of a very poor family. Their permanent address was kalmakanda in sylhet. When she was five her father left them and get marry another woman. In this circumstance her mother becomes helpless. They had no any property what helps them as financial support. By no means her mother left their inhabitant and came to the Guchchagram of Jaflong union under Goinghat upazila of Sylhet district. Here her mother worked as a stone crashing labour with other neighbours and through this means they were passing their lives with well and woe. Aysha was growing up in the village Guchchagram nearby the Indian border. Due to nearby the border, many women in the village were involved with the black-marketing. Once Aysha introduced with a woman who was a blacker. Talking with her she had an interest to cross the borderline and bring Indian goods in view to business. She did not even imagine that the woman was a great fraud. One night, they cross the border line and entered into the Indian jurisdiction. The woman was very clever also. She handed over her to a Border Security Force and left away in Bangladesh. The soldier brought her into their camp and captured her. In this camp most of the soldiers did sex her. Then Aysha was fifteen. After a month she becomes able to escape from the camp with the help of another Bangladeshi woman. Coming back to her home at Guchchagram, she saw her mother got marry and left the village with her newly bride.

Aysha become alone and helpless. No one in the village who helped her. She did not back to her mother. By no means, she engaged her with sex trade. Day by day, she involved herself with black-market with others women. Usually at dead of night she alone or with other women who are involved with blacking crossed the borderline carefully so that BSF could not tress them. If BSF arrest them they do sex them to manage them. And this way they bring Indian item of cosmetics, and various kinds of drugs like wine, opium, cannabis even heroine also. She sells these among the youth nearby Tamabil border and do sex around the jurisdiction.

She yet not marries. In 2008, Aysha become introduced with an Outreach Worker name Nazma of Jaflong DIC. Through effective one to one Nazma provided her important messages about HIV/AIDS and condom for safer sex. She become motivated at Nazma's services and behaves and involved with the project activities. Before involved with the project she had been suffering from various sexual diseases. She could not share her physical circumstances with others because of villagers let her abide to go away. As participants of the project Aysha feels free to share everything with the project staffs. She comes regularly in the DIC and receives services available in the DIC like bath, rest, games, TV watching, and also STI services. She becomes known about HIV/AIDS, how it spreads and how not spread. She received STI treatment and living health life. She knows about importance of condom use and she follow the motto "No condom, no sex" . When asked what she feels about life, Aysha reports, "I actually hate sex trade. I did not want to involve like such occupation. But an incident that happened at the Indian camp, this pains me all time. This incident abides me to engage with the occupation. I hate that woman and frauds men in the society." Behaves and entertainment of the DIC staffs and confidentiality and DIC level services including STI pleased me very much to the project.

Lesson Learned:

During implementation of the project some lessons have been learned. On the other hand some problems/ issues are coming in to focus. These lessons/findings will help us to think about a new or changed strategy, which will help immensely in implementing this type of projects in future:

- Low salary limit is the main cause of staff-drop out which is not enough at present context of Bangladesh
- It is much more effective to disseminate information about HIV/AIDS through folksong/ street show/film show etc to the mass people at a time.
- Irregular fund flow frustrated and demoralize staffs as a result reduce quality of services and staff productivity
- 6day duration for IGA training such Tailoring, Nakshikathan is not enough, so they could not able to adequate skill for producing quality products.
- Some SWs want to change their current occupation and back to the mainstreaming if they have alternative scope of income.
- Targeted community might be more empowered and interactive through SHG. To do that they need extensive capacity building support. So, provision of more training, network with different alliance, CBOs, legal organization is important for empowering this target group.
- Monitoring and Evaluation, Training, Reporting, Coordination and other related many activities properly done are essential. But only Coordinator maintains these activities. So, additional supporting staff for partner would definitely strengthen qualitative activities.

GF #909, Expanding Provision of Essential Services to Street Based and Hotel/ Residence Based Female Sex Workers in Selected District of Bangladesh

Under GFATM 909 package associate of DNS consortium 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 provision essential services to the targeted intervention with the previous vast experience on it since March 2009 through DIC implementation. Project activities implemented through 8 DICs in the different district of Chittagong and Dhaka Division. These are Cox's bazar, Khagrachari, Haliashahar and Askerdighi under Chittagong district, Chandpur, Teknaf under Cox's Bazar district, Comilla and Chankherpul of Dhaka district. In this reporting period sja has implemented the project covering whole chittagong division.

Duration: March'2008-November'2015

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.



At A Glance Sex Worker Reach:

DIC Name	Setting (1-Street, 2 -Hotel, 3 -Resid)	Mother listed	Total Reach	Total contact
Cox's Bazar-1	2	146	146	146
	3	155	155	155
Cox's Bazar-2	1	176	176	176
	2	00	00	00
	3	90	90	90
Bandarban	1	198	198	198
	2	21	21	21
	3	71	71	71
Rangamati	1	198	198	198
	2	21	21	21
	3	71	71	71
Khagrachari	1	10	10	10
	2	74	74	74
	3	147	147	147
Haliashahar	1	0	0	0
	2	127	127	127
	3	183	183	183
Askardigi	1	0	0	0
	2	102	102	102
	3	158	158	158
Teknaf	1	48	48	48
	2	57	57	57
	3	136	136	136
Street		609	609	609
Hotel		538	538	538
Residence		957	957	957
Total		2104	2104	2104

Key Accomplishment over the Project Period:

- a. Establish and operate drop in centres for Female sex worker.
- b. Monitoring, reporting, field supervision etc for DIC.
- c. Refreshers training for O/S.
- d. Refreshers training for PE/POW.
- e. Provide outreach peer education to FSW (thrice in each month).
- f. Group education session at DIC with FSW.
- g. Provide treatment of STI episode (STI medication).
- h. Provide STI management services (service management).
- i. STI Services for regular partners of FSW.
- j. Provide general health management services for FSW (medication).
- k. Provide general health management services for FSW (Service Management).
- l. Provide male condoms for sex workers through Social Marketing initiatives.
- m. Procure and distribute Lubricants for sex workers.
- n. Provide VCT service to FSW through referral to other centers, newly established centers and satellite sessions.
- o. Referral services for maternal & child health care.
- p. Referral services for EPI (Expanded Program of Immunization) services for children of FSW.
- q. Meetings with DIC Advisory Committee for creating an enabling environment.
- r. 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.
- s. Skill building training of FSWs on income generating activities.
- t. Provide legal service for FSW and develop support groups in collaboration with rights and legal organizations.
- u. Legal Aid support creation session.
- v. Day Observation.

Day Observation:

SJA has celebrated different national and international Days like international Women's Day, National Girl Child Day, and Independent Day and others with different activities like colorful rally, discussion meeting and others.

Challenges:

- ❖ Political unrest (Strike/Blocked)
- ❖ Various local culture, language and local ruling class
- ❖ Find out and reach to hidden FSW (Chakma/Marma ethnic group); specially Rangamati & Bandarban Hill Tract.

Constrains:

- ◆ Achievement of periodical target with back locks in this unrest political situation.
- ◆ Obstacle activities monitoring and supervision visit in this unrest situation.

Overcome:

- ✓ All activities including outreach were running in spite of most risk.
- ✓ Extra time we engaged project activities, even though holiday.
- ✓ Ensure physical monitoring where it possible, otherwise we proper communicate through e-mail and or cell phone where it not possible.
- ✓ And we accomplished successfully our activities.

Some Pictures of the Activities:



Link Up: Better Sexual and Reproductive health & Rights for Young People Affected By HIV, Package # 2.8

Sylhet Jubo Academy (SJA) has been working for the people in extreme poverty, distress especially women and children who are excluded from the mainstream society. SJA has been implementing several program and projects in different development areas. The organization now focuses its efforts on combating diseases like STI and HIV/ AIDS, malnutrition, social wounds like poverty, illiteracy, unemployment and issues like disability, health and family planning, environment and climate change, water resource management, water and sanitation, gender sensitization and stop violence against women and children.

Currently, SJA has been initiated Better Sexual and Reproductive Health & Rights, Link Up Program with the financial and technical support of HASAB in Sylhet Division in order to promote Sexual and Reproductive Health Rights of the FSW who are socially excluded and are deprived from their health rights.

The key achievements of this project during this reporting quarter are as follows:

1. The mother list preparation has been completed and SJA covered the 4000 YKP.
2. YKP Platform has formed in Sylhet District.
3. SJA has been organized "Project Inception and Sensitization Workshop at Local Level" successfully where SJA able to sensitize a total of 42 participants from GO and NGO sector.
4. Need based orientation of Peer Educator, Volunteer and project personnel are ongoing.
5. Effective One to One and Group Sessions are going on which contributing a lot in raising awareness and sensitization among the key population.
6. Linkage with Marie Stopes and other GO-NGO are getting strengthened.
7. Link Up points have already been set up in project areas and numbers of satellite sessions are taking place.
8. Beneficiaries/Key Population are getting their need based health services and treatment from the Link Up Point as well as Marie Stopes Clinics.
9. Field visit of Peer Educator, Volunteer and project personnel is ongoing.
10. Project Personnel are taking part in different trainings, workshops and seminars organized by HASAB which has been contributing to increase their personal knowledge and skills as well as knowledge about Link Up.
11. Key Population is getting health services at free of cost that would ultimately contribute to their better sexual and reproductive health and rights.

Challenges: The key challenges are;

- Peer educators have a very low level of education that actually makes constrain to understand as well as filling up the mother list, daily recording formats & referral slips in some context.
- Target is large in terms of man power therefore Peer Educators are being overloaded to reach the FSW.
- The pimps or LG do not want to expose the FSW therefore it is difficult to reach them.
- Group formation of 10-12 members is difficult as the FSWs are mobile and they do not fixed living places.
- Sometimes YKP do not want to bear the travelling cost when they travel to Link Up Point and MSB service point.
- In some places the MSB Medical team are not giving proper time to the YKP.
- Peer Educator has a very poor salary and also they have no travel cost in the budget and therefore it is very difficult for them to do all the work.

Key Activities: The key activities of the project are as follows;

1. Mother List Preparation- completed 4000 population.
2. One to One Session.
3. Group Session.
4. Provide health services to the beneficiaries through Link Up Point.
5. Sensitization workshop at local level.
6. Training and monthly, quarterly staff meeting.



