

2019-2020 Annual Report



Health Sector
Dhaka Ahsania Mission



DAM Health Sector Publication

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ACRONYMS AND DEFINITIONS

AMIC	Addiction Management and Integrated Care
ARV	Antiretroviral drug
BCC	Behavior Change Communication
BDHS	Bangladesh Demographic and Health Survey
BRAC	Bangladesh Rural Advancement Committee
BROA	Bangladesh Restaurants Owners Association
CBT	Cognitive Behavioural Therapy
CRHCC	Comprehensive Reproductive Health Care Centre
DAM	Dhaka Ahsania Mission
DNC	Department of Narcotics Control
DGHS	Directorate General of Health Services
DGFS	Directorate General of Family Planning Services
DOT	Directly observed treatment
DOTS	The internationally recommended strategy for TB control
ESD	Essential service delivery
FDTC	Female Drug Treatment Centre
HIV/AIDS	Human Immune Virus/Acquired Immune Deficiency Syndrome
HNPSPD	Health Nutrition and Population Sector Development Programme
HRD	Human Resource Development
ICCDR,B	International Center for Diarrhoea Disease Research
MDR-TB	Multidrug-resistant TB
MDG	Millennium Development Goal
MOHFW	Ministry of Health and Family Welfare
NGO	Non-governmental organization
NASP	National AIDS/STD Programme
NTP	National Tuberculosis Control Programme
PHCC	Primary Health Care Centre
RH	Reproductive Health
SDG	Sustainable Development Goal
STI	Sexually Transmitted Infection
TC	Therapeutic Community
TB	Tuberculosis
UPHCSDP	Urban Primary Health Care Service Delivery Project
UNODC	United Nations Office on Drugs and Crime
UNAIDS	United Nations AIDS
UNFPA	United Nations Fund for Population Activities
UPHCP	Urban Primary Health Care Project
USAID	United States Agency for International Development
USG	United States Government
WB	World Bank
WHO	World Health Organization



MESSAGE FROM THE PRESIDENT DHAKA AHSANIA MISSION

The last year has been a very difficult year for all of us. COVID-19 pandemic and its multifactorial burdens affected all lives. However, the projects, programs and institutions of Dhaka Ahsania Mission Health Sector remained committed to contribute to the well-being of Bangladeshi people through their integrated services. This Annual Report of activities of the Health Sector from July 2019 – June 2020 highlights the performance and progress of one of DAM's core sectors.

This is also a milestone year for the Health Sector as it has stepped into its 30th year of services in 2020. The dedication and commitment of its staffs since its establishment have accumulated to this grand achievement. Our Health Sector is standing upon the strong support and cordial collaboration received from numerous Government agencies, national and international NGOs, donors, voluntary organizations, development partners and philanthropic individuals. I thank all of them for being with us in achieving the cherished goals of peace, progress, unity and development of social and spiritual life.

I congratulate the Health Sector team for their loyalty and hard work; especially for their continuous and dedicated efforts to ensure seamless services even during a global pandemic like COVID-19. I encourage them with the hope that they would continue pursuing the spirit of selfless services to the suffering humanity which is the cardinal principal of DAM.

A handwritten signature in black ink, appearing to read 'K. Rafiqul Alam'.

Kazi Rafiqul Alam
President
Dhaka Ahsania Mission



MESSAGE OF THE EXECUTIVE DIRECTOR DHAKA AHSANIA MISSION

Dhaka Ahsania Mission over last six decades has been effortlessly contributing to the social and spiritual development of the human community. Health Sector, being one of the core sectors of the organization, added much diversity to the services that DAM has been providing for the well-being of underprivileged community throughout Bangladesh.

Like all others across the globe, the year has been a challenging year for us. Global pandemic of COVID-19 made limited many of our planned activities, but also provided us with a unique opportunity to expand services through innovative approaches.

DAM Health Sector works through a timely well planned work strategy which covers a wide range of services including Expanded Service Delivery (ESD+) package, prevention and treatment of communicable and non-communicable diseases, nutritional improvement, treatment and rehabilitation of Substance Use Disorder, social rehabilitation of prisoners, mental health promotion and emergency health responses. Many institutions in this sector have been ensuring specialized services for both urban and rural communities.

The year 2020 also marked celebrating the 30th year of the Health Sector. Despite the constraints of the unprecedented situation, DAM Health Sector has maintained harmony through its outreach-based and institutional services for the suffering community in its 30-years' journey.

This Annual Report of July 2019 – June 2020 provides an account of progress and challenges, lessons learnt and future insights. It also records the innovative approaches and ideas that the teams adopted during implementation of activities.

We are grateful for the supports that we received from kind-hearted individuals, philanthropic organizations and development partners on our endeavors. DAM also congratulates the efficient teams of Health Sector and its worthy competent leader for their coordinated journey towards excellence and actions contributing to DAM's motto Divine and Humanitarian Service.

Dr M Ehsanur Rahman

Executive Director
Dhaka Ahsania Mission



MESSAGE FROM THE EDITOR DHAKA AHSANIA MISSION

Health Sector is one of the core sectors of Dhaka Ahsania Mission. It is still a growing sector with strong dedication. It has obtained glorious national and international reputations through its multidimensional activities for the betterment of human life. The sector has been providing wholesome services for primary healthcare, treatment and prevention of Substance Use Disorder, tobacco-control activities, nutritional improvement, prevention and treatment of communicable and non-communicable diseases, mental health services and care for the elderly.

Our journey began 30 years ago with the supports of well-wishers, developing partners, and Government of Bangladesh. We envisioned equal and improved health and well-being for all Bangladeshi people. And we have been pursuing our vision ever since. We planned to celebrate Health Sector's journey and achievements with all our stakeholders this year; however the global pandemic of COVID-19 has limited the scopes for such celebration. But we took this opportunity to even diversify our activities to reduce the physical, psychological, economic and social burdens that this pandemic has brought upon us.

Health Sector has been running eleven projects and programs, seven institutions and one specialized training program currently. Many are in the pipeline. We have modified and updated our services with the help of modern technology and innovative ideas. Through all our combined efforts, our aim remains to serve humanity and to materialize our vision of creating peaceful societies where harmony will prevail and devastating health, tobacco, and drug-related harms will not exist. This Annual Report of July 2019 – June 2020 contains brief accounts of the Sector activities that we implemented over this year.

Our team is grateful for the help and support that we are fortunate to receive from donors, Government, sponsors, collaborative partners, advisory committee members, colleagues, and valued clients. I proudly present the Annual Report bearing the results of the team efforts that we put in together for the betterment of the society that we live in.

Iqbal Masud
Director, Health Sector
Dhaka Ahsania Mission



Executive Summary

Health Sector is one of the core sectors of Dhaka Ahsania Mission (DAM). Health Sector has been contributing through primary health care services based on the national expanded Essential Services Delivery (ESD+) package, treatment & rehabilitation of substance use disorder, tobacco-control activities, tuberculosis control activities, nutritional services, prevention & treatment of communicable & non-communicable diseases, and mental health services. Health Sector of DAM also contributing to achieve SDGs as a whole, particularly Goal 3 of SDGs following strategy plan (2015-2025) of DAM

Urban Primary Health Care Service centers were established in the urban areas of Mirpur, Hajaribug, Dhaka and Cumilla city. Maternal & child healthcare issues, reproductive & adolescent healthcare, nutritional monitoring, vaccination & distribution of supplements and other services were provided during the year. Underprivileged population of Savar and Satkhira municipalities were brought under the same health coverage through voucher scheme. BNA project has been contributing to improve the nutrition outcome for children under 5 years of age, pregnant and lactating mothers, and adolescents in Patuakhali district.

DAM Health Sector runs anti-tobacco program in order to participate in achieving the “Tobacco-Free Bangladesh by 2040” goal. Due to DAM advocacy, several government institutions are taking smoke-

free measures for their facilities. A very important survey was done to see the level of compliance with Bangladesh Tobacco Control Law in restaurants all over the country. The result of the survey has become a very strong weapon to fight for stronger steps against tobacco usage.

The Health Sector is concerned with provision of mental health and vocational training support for the prisoners, thus contributing in reduction of recidivism. DAM Health Sector is always one of the firsts to aid the people in crisis. Continuing its aim to help the humanity, Health Sector arranged nutritional & general healthcare screening and treatment services for the Rohingyas of Cox's Bazar.

Treatment and rehabilitation of patients with SUD is another important initiative of Dhaka Ahsania Mission. Addiction Management and Integrated Care (AMIC) has been providing services through three centers – Gazipur and Jashore for males, and the Dhaka center for females. Detoxification, clinical treatment, consultation on mental and general health issues, counseling, psychosocial education on harmful effects of drugs and other skill development are provided in all the centers. DAM Health Sector plays very important role in rehabilitating the patients on recovery. A specialized mental health service center – Monjotno, has been running successfully providing support for different psychological issues.

Tuberculosis clinics in Uttara and Khilkhet of Dhaka city provide diagnostic and DOTS services

for the patients. Non-communicable disease like hypertension, diabetes, cardiac problems and other general health issues are also addressed through project activities. Ahsania Mission Cancer and General Hospitals in Uttara and Mirpur are state-of-art facilities for specialized cancer treatment. Equipped with all modern amenities, Hena Ahmed Hospital in Munshiganj and Monasef Ahsania Health Center in Tongi also provide medical services for several ailments. Cesarean section delivery, along with other maternal health services including special care during and post-delivery are offered.

As capacity development initiative for addiction professionals, DAM Health Sector has received accreditation from Global Centre for Credentialing and Certification (GCCC) and it has successfully run training sessions for third batch of participants working in the field.

During this reporting time Health Sector started new project Drug Abuse Resistance and Understanding (DARAU) Project. The project is focusing on prevention to combat drug abuse demand reduction. Through strengthening the Civil Society Engagement, Media mechanism and enforcement of laws, policy and photocell which are available and increase fund allocation for combating drug abuse through sensitizing and influencing the local government including the politicians of Rajshahi and Natore districts.

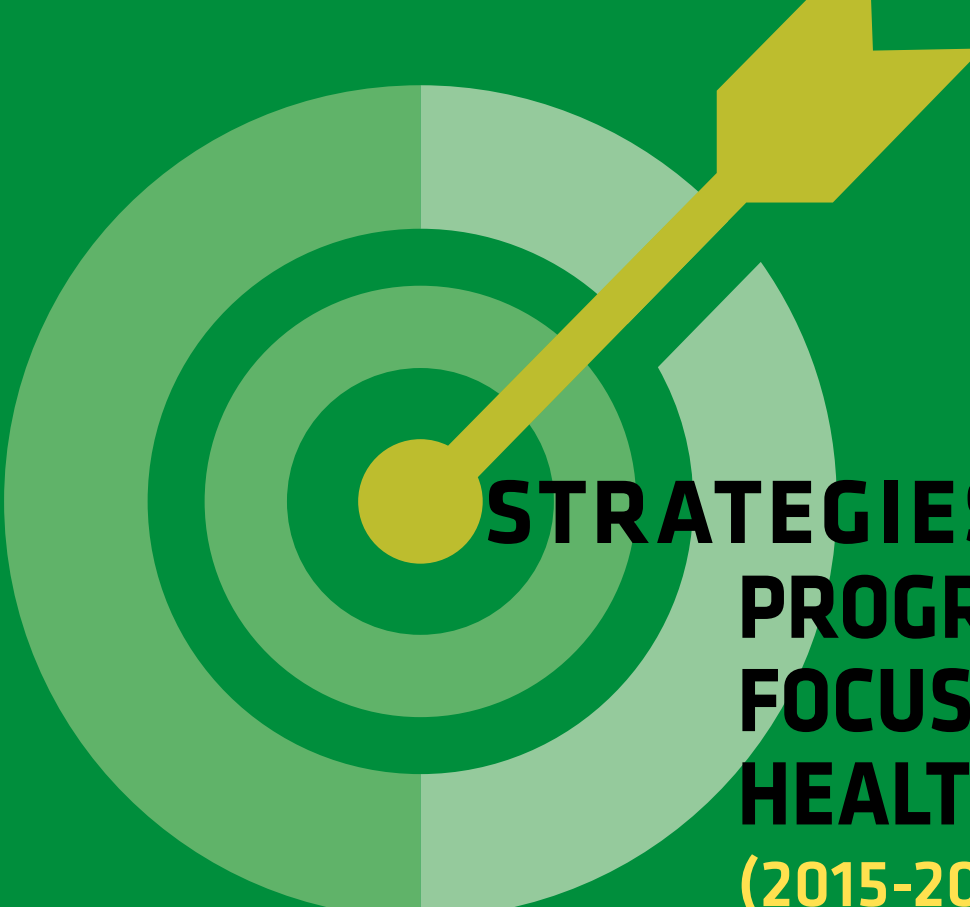
HEALTH IN THE SDG ERA



World Health Organization

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STRATEGIES AND PROGRAMMATIC FOCUS OF THE HEALTH SECTOR (2015-2025)

Strategies and Programmatic Focus of the Health Sector (2015-2025)

Dhaka Ahsania Mission (DAM) was established in 1958 by the eminent educationist, social reformer and spiritual leader, Hazrat Khan Bahadur Ahsanullah (Rm) in 1958. Health Sector is one of the core sectors of DAM. Its commitment is to bring a change and to ensure the support and care required for harmonious life. With the cooperation from different government offices, national & international NGO's, donors, voluntary organizations and kind-hearted individuals; the Health Sector strive to affirm well-being.

Development of Health Sector Strategy Paper

Health Sector developed a Strategy Paper in a "Review and Planning Workshop" during 16-20 January, 2016 with the aim to reduce health risks, thus improving the quality of life and livelihood of general population. Keeping the Sustainable Development Goals (SDGs), especially the "Goal 3: Good health and well-being" in mind, Health Sector takes Government initiatives and DAM concerns under consideration while implementing its activities. The Strategy Paper identified the following priorities for the Sector's services for the decade -

■ **Ensuring Essential Service Delivery (ESD) package for women and children through field-based programs and institutional services (hospital, maternity centers etc.)**

- Maternal healthcare
- Population and family planning services
- Neonatal care
- Child health care
- Reproductive health care including Sexually Transmitted Disease and Reproductive Tract Infection
- Nutrition

■ **Expansion of the prevention and curative services for communicable diseases**

- o Prevention of STI, HIV and AIDS
- o Prevention of water-borne diseases
- o Prevention of Hepatitis and TB

■ **Scaling up the addiction management treatment services and prevention programs for substance and tobacco use**

- o Treatment of Substance Use Disorder
- o Prevention of SUDs
- o Tobacco control programs
- o Capacity development of addiction professionals

■ **Strengthening the Non-Communicable Disease (NCD) care programs**

- o Prevention of cancer
- o Prevention of hypertension
- o Prevention of diabetes

■ **Prevention of death and injuries from Road Traffic Accidents (RTA)**

- o Policy advocacy and enforcement
- o Awareness programs

■ **Strengthening the treatment of mental health issues and promoting sound mental health**

- o Counseling
- o Development of the counseling manual
- o Awareness programs
- o Observing significant days
- o Policy advocacy
- o Capacity development
- o Information, Education, Communication (IEC) materials development

Reviewing the Health Sector Strategy Paper

Health Sector Strategy Paper was reviewed during 27-29 November, 2018 at the Base Training Center, Sonargaon, Narayanganj; where the team decided addition of the following core care areas for wholesome health services –

- Care for elderly people
- Care for autistic children
- HIV testing in the border areas and performing advocacy on this issue
- Establishing health camps in the border areas
- Dental and eye care
- Healthcare financing

After reviewing the Strategy Paper, Health Sector has already introduced nutritional services and established care home for senior citizens. It is also in pursuit of achieving all its target service areas by 2025.





AMIC at its 30th year: Evolution and Milestones of the Health Sector

Dhaka Ahsania Mission (DAM), since 1958, contributes to the country's upliftment through its social development functions. Its instrument for implementing activities in prevention and control of drug abuse is the Addiction Management and Integrated Care (AMIC), which proudly steps into its 30th year in 2020 as the *Health Sector*. Its significant role was lauded on 22 February 2020 by Mr. Asaduzzaman Khan Kamal, Honourable Minister for Home Affairs, in his Chief Guest's speech at a program in Dhaka. Attended by the heads of the Prisons and Narcotics Control Departments, Ahsania University of Science and Technology (AUST) and DAM, the program was held at AUST auditorium. He added that achievement of Honourable Prime Minister Sheikh Hasina's *Vision 2041* is possible only if the country's youth are protected from the menace of drugs. He praised AMIC's Female Drug Treatment Center and called upon all to take note of their wards' troubles and urged for taking its help if needed.

DAM, in 1990, started a program titled "Ahsania Madokota Protirodh o Niontron Kormoshuchi (Drug Prevention and Control Program), AMIK in Bengali. Its goal was to create a peaceful society where

social harmony will prevail and devastating health hazards from tobacco, drugs and HIV will not exist. In 2004, DAM changed AMIK into AMIC (Addiction Management and Integrated Care) with a view to preventing/controlling tobacco, drugs and HIV/AIDS – demons that gradually took epidemic forms in society. The main objectives of AMIC were to undertake essential demand reduction measures for protecting people from drug addiction, and establish and operate drug detoxification and treatment centers for the sufferers.

In 2011, AMIC felt it had potentials to extend its services to a larger population. It undertook community based participatory interventions with activities in prevention of communicable and non-communicable diseases keeping synergy and coherence with mainstream Government and other actors having similar programs. It also improved access, equity, quality, utilization and institutional sustainability of Primary Health Care (PHC) services particularly for the poor, women and children. Thirdly, it began to advocate and bargain with the Government to formulate and implement tobacco and drug prevention laws and policies and undertake measures to combat their harmful effects. Lately, AMIC and its coordinating body -- Health Sector -- expanded its activities beyond drug-related prevention and treatment and emerged as a core actor in the field.

Since 2011, the Health Sector, with a workforce of 411 personnel, has played a major role in the relevant field. It makes an impact in the country's public health, under the perspectives of Millennium and Sustainable Development Goals, especially to achieve "SDG Goal 3: Good Health and Well-being for people of every societal level". The worldwide pandemic of Covid-19 prevented the Health Sector's other programs for the year, like holding several rallies, seminars and human chains, and organizing propagation camps. Some programs are still on the card in the event of an early eradication/control of novel corona virus.

Key Milestones of the Health Sector

Decade 1990 – 2000

- Initiation of Madokota Protirodho Niyontron Kormosuchi (Drug Prevention and Control) program

- Implementation of addiction prevention, tobacco Control, and HIV/AIDS prevention activities
- Formation of 21-member central and 402 branch committees in 54 districts and 150 sub-districts designated for anti-drug movement throughout the country
- Initiation of the first donor funded project for strengthening anti-drug activities
- Establishment of the first community-based detoxification camps in five cities under United Nations Drug Control Program (UNDCP)
- Formation of the first Recovery self-help group
- Initiation of Training on "Community-based Drug Demand Reduction and HIV/AIDS Prevention In Bangladesh" in collaboration with Department of Narcotics Control (DNC) and ESCAP-Bangkok
- Initiation of the project on preventing drug abuse and HIV/AIDS amongst young people in South Asia by UNODC and ROSA



Decade 2001 – 2010

- Sensitizing and influencing the Secretary of the Ministry of Posts and Telegraph to release a commemorative stamp on World No-Tobacco Day of 2001, and to declare the premise as "No Smoking Zone"
- AMIC was honored with Bangladesh Anti-Tobacco Alliance Award for its Tobacco Control program
- Establishment of Ahsania Mission Drug Addiction Treatment and Rehabilitation Center in Gazipur
- Expansion of its services among the HIV/STI risk



population with the funding from Family Health International (fhi360), USAID

- DAM declared all its offices as smoke-free
- Initiation of “Smoke-free Public Transport” campaign with Bangladesh Inland Waterways Transport Corporation (BIWTC)
- Initiation of HIV/STI and drug-related prevention activities inside prisons with the collaboration of UNODC and ROSA
- Establishment of Drop-in Centers (DIC) for female drug users and female sex partners of male drug users
- Establishment of Ahsania Mission Drug Addiction Treatment and Rehabilitation Center in Jashore

Decade 2011 – 2020

- Initiation of Voluntary Counseling Testing (VCT) laboratory in the Gazipur treatment center with the support from fhi360
- Formation of “Support Group” for parents and family members of drug dependent patients
- Commencement of “A Step Towards Smoke-free Dhaka City” with Campaign for Tobacco Free Kids (CTFK) under Bloomberg Initiatives
- Establishment of Outreach and Drop-in Centers (ODIC) with the support from Colombo Plan Drug Advisory Program (CPDAP)
- AMIC was awarded the first prize for its drug addiction treatment program by the Department of Narcotics Control (DNC) of Ministry of Home Affairs
- Initiation of the Primary Healthcare Services by the Health Sector in collaboration with Ministry of Local Government, Rural Development and Co-operatives
- Initiation of TB Control Program under GFATM (Global Fund to Fight AIDS, Tuberculosis and Malaria)
- Establishment of Ahsania Mission Female Drug Addiction Treatment and Rehabilitation Center in Dhaka
- Initiation of “Improvement of the Real Situation of Overcrowding in Prisons in Bangladesh (IRSOP)” project with collaboration with Ministry of Home Affairs and Bangladesh Prison Directorate
- DAM was recognized as the first Bangladeshi NGO as education provider by International Centre for Credentialing and Education of Addiction Professionals (ICCE)-Colombo Plan;
- Establishment of Hena Ahmed Hospital in Munshiganj
- Initiation of emergency health responses for the Forcibly Displaced Myanmar Nationals (Rohingya) population in Cox’s Bazar
- Accreditation of six internationally certified Addiction Professionals from AMIC
- Initiation of health and nutrition voucher scheme for poor, extreme poor and socially excluded population of Savar and Satkhira municipalities
- Establishment of MONOJOTNO Center for mental health and drug addiction counseling services
- Initiation on research activities on issues related with drug abuse and tobacco control
- Initiation of UN-ited Family Skills Program in Bangladesh with UNODC
- Initiation of Drug Abuse and Understanding Project (DARAU) project with funding from USAID
- Initiation of Feed the Future Bangladesh Nutrition Activity (BNA) Project
- Establishment of Hena Ahmed Shanti Nibash, a residence for senior citizens in Munshiganj
- Establishment of Monasef Ahsania Health Center in Tongi
- Formation of Ahsania Mission Sastho Shurokkha Forum to ensure quality health services for poor and marginalized population

Health Projects





Urban Primary Health Care Services Delivery Project-II

Dhaka Ahsania Mission (DAM) Health Sector is one of the service providers and it has been collaborating with the Government of Bangladesh with the second phase of Urban Primary Health Care Services Delivery Project (UPHCSDP-II) since August 2019. With the motto - “Shebar Alo Shobar Kche”, the project aims to improve the health status of urban population, especially the poor through improved access to and utilization of efficient, effective and sustainable Primary Health Care (PHC) Services from Primary Health Care Centers (PHCC) and Comprehensive Reproductive Health Care Centers (CRHCC) having proper OT facilities with the help of full-time specialist physicians (gynecology and obstetrics), pediatric consultants, medical officers, skilled nurses and paramedics.

Project Area and Population

Dhaka Ahsania Mission (DAM) Health Sector is implementing UPHCSDP-II project in four partnership area those are- Dhaka South City Corporation (DNCC) PA-3 (Mirpur); Dhaka South City Corporation (DSCC) PA-3 (Hazaribagh); CoCC PA-1 Cumilla and RCC PA-1 Rajshahi. The targeted populations for providing primary health

care services are 1,97,879 in DNCC PA-3; 3,25,140 in DSCC PA-3; 2,03,548 in RCC PA-1 and 3,67,726 in CoCC PA-1.

Project objectives

- Improving the accessibility (financial and physical) to PHC services in the urban areas
- Ensuring the provision of quality PHC services to urban populations. The project ensures Essential Service Delivery (ESD+) package focusing maternal and child health in urban areas, particularly for the poor
- Increasing the utilization of PHC services by the urban poor, especially women, new-born babies and children
- Strengthening institutional arrangement for delivering PHC services in urban areas
- Increasing capacity of the Urban Local Bodies (ULBs) to ensure delivering PHC services, according to their mandate
- Increasing sustainability of urban PHC services by strengthening ownership and commitment of the ULBs, particularly for the poor

Services providing from the project

The project delivers the following services for the target population.

- **Maternal Healthcare Services:** Maternal services are provided for pregnant and lactating mother on their health issues through static and satellite points on antenatal checkups, and discussion on safe delivery.
- **Neonatal and Child Healthcare Services:** Under neonatal and child health care, guardians were counseled about care for the newborn, exclusive breast feeding, ARI etc.
- **Adolescent Healthcare Services:** It is an important component of the UPHCSDP-II and the adolescents were informed about TT and other vaccination, and about the harms of early marriage. They were provided with iron supplementation, blood grouping, and counseling on different issues.
- **Reproductive Healthcare Services:** Several Reproductive Tract Infection/Sexual Tract Infection, HIV, identification of cervical cancer, breast cancer, fistula and other reproductive tract

diseases and cancer prevention programs were organized during the reporting year.

- **Population and Family Planning Services:** Supported by the Directorate of Family Planning, UPHCSDP-II, Mirpur provides family planning services to eligible couples. These activities include providing temporary and permanent methods of contraception, counseling and awareness raising campaigns among the risk groups.
- **Nutritional Services:** Nutritional services include nutritional counseling, prevention of malnutrition and providing food supplementation for mother and child based on BMI for adults and adolescent, as well as growth monitoring chart for under-five children.
- **Limited Curative Care:** UPHCSDP-II, Mirpur provides basic first aid for common injuries, general treatment and treatment of medical emergencies from both PHCC and CRHCC.
- **Behavior Change Communication (BCC):** UPHCSDP-II, Mirpur has been working both in field and community to change the health related ideology among the target population. It organized health education session, weekly group meeting in every satellite center, quarterly satellite support group meeting etc.
- **Diagnostic Services:** There is a pathological laboratory in all PHCC and CRHCC.
- **Services for Violence Against Women (VAW):** UPHCSDP-II, Mirpur provides counseling and referral supports for victim clients. Every single incident of VAW was handled delicately at PHCCs and CRHCCs.
- **EPI Services and NID Programs:** Observing Expanded Program on Immunization (EPI) and National Immunization Days (NID) were important parts of the project activities. During this period, national Vitamin A plus campaign and de-worming week were also observed with due importance.
- **Organizing Awareness Programs:** UPHCSDP-II, Mirpur organizes many events for raising awareness among the community people on several health and well-being issues.

Since the initiation of the project activities since 1 August 2019 to 30 June 2020 UPHCSDP-II, following services has provided from four partnership area –

Name of the Services	Number of Services Received			
	DNCC PA-3 (Mirpur)	DSCC PA-3 (Hazaribagh)	RCC PA-1 (Rajshahi)	CoCC PA-1 (Cumilla)
Antenatal care	20653	18744	8628	10,405
Total delivery care (NVD and CS)	1062	1196	489	1,008
Delivery care (NVD)	668	871	243	843
Delivery care (CS)	394	325	246	165
Postnatal care	6286	4848	2089	2,871
Neonatal care	3685	3312	1439	1436
Menstrual regulation (MR)	716	856	65	266
Post abortion care	24	78	03	18
Family planning services	17400	10018	5022	16,997
Services for Violence Against Women (VAW)	344	223	47	310
Adolescent healthcare	7988	10092	4358	7,728
RTI/STI care	4521	6791	1867	5,614
Other reproductive healthcare services	1843	5669	3844	5,395
Child healthcare (EPI/diarrhea/ARI)	33699	48849	8194	41,572
Nutritional services	413	5999	1489	2820
Limited curative care	22613	48986	31827	38915
Diagnostic services	6002	19193	11074	24,101
Behavior Change Communication	105988	6700	28557	82,625

Significant Activities from UPHCSDP-II

- **Project Inception Meeting:** All partnership area of UPHCSDP-II organized project Inception Meeting in respective project area. Project staff, related stakeholder, representative from project implementation unit, representative from project management unit and some of project beneficiaries attended the inceptions meeting.
- **Vitamin A+ Campaign:** It is a government program and this campaign was held on 11 January 2020, and the objective of the campaign was to reduce the incidences of night blindness and Vitamin A deficiency among children under-5 years of age. This campaign also disseminated several messages regarding child nutrition, which aimed at reducing child mortality and morbidity rate. It has also distributed 100,000/IU Vitamin A capsules to children of 6-11 months of age and 200,000/IU capsules to children of 12-59 months of age from all partnership area.
- **Observing Family Planning Week:** All (04) PA area of UPHCSDP-II, observed the Family Planning Week, during 7-12 December, 2019. A few awareness programs involving the local community and several local schools and colleges were organized to prevent early marriage, which would eventually lead to the prevention of early pregnancy. The project also distributed different types of long-term family planning methods among service recipients.
- **Evening EPI Session:** EPI program is a regular national immunization program which usually takes place during daytime. Health Sector's UPHCSDP-II is among a very few organizations who conduct these sessions during evening for the convenience of working mothers across the country. We are also proud to be one of the few facilities that have been running continuous EPI sessions even during the COVID-19 pandemic. This service is available in CRHCC of Mirpur from 4:00 pm to 8:00 pm.



- **School-based Awareness Programs:** All partnership area of UPHCSDP-II, organized several campaigns in local schools to spread awareness about nutrition, personal hygiene, menstrual hygiene, deworming, prevention of early marriage, hand-washing routine etc. During the early stages of COVID-19 pandemic, it has also organized several awareness programs. Orientation on hand-hygiene, respiratory hygiene, and other awareness messages were disseminated for the local people through these programs in schools and colleges.
- **MoU with Prism Bangladesh and MSF:** From DSCC PA-3 (Hazaribagh) two MoUs (Memorandum of Understanding) were signed. As a part of operational and maintenance plan for medical waste management under this project, the first MoU was signed with Prism Bangladesh for external cleaning and ultimate disposal of medical waste. The project signed the second MoU with MSF for the provision of health services, especially their deliveries to the beneficiaries of MSF.
- **Community Participation:** As a part of the awareness raising activities, user forum and WUHCC were formulated in each PHCC which conducted quarterly basis meeting. Adolescent club and self-help group was also established under CRHCCs and/or PHCCs. These were formed to act as driving force in establishing and practicing client-centered service centers. The project has listed faith-based organizations like Imam Samity for disseminating health messages to the general population. The project has formed such groups in each project area.
- **Awareness Session on the Importance of ANC:** Awareness raising sessions were organized in different PHCCs of four UPHCSDP-II project area. Pregnant mothers and their guardians attended these sessions. Physicians of PHCC discussed about the importance of Antenatal Care (ANC) in time, birth planning, danger signs of pregnant mother etc.
- **Capacity Development:** All (04) UPHCSDP-II project area organized training sessions on different topics like monitoring, supervision and reporting system in URKS, financial and administrative management, store management, ICT, BCC, Infection Prevention, Good governance, family planning activities, Gender mainstreaming and counseling. Related project staff received trainings, increased their knowledge and working smoothly.
- **Health Education Session:** Ten Service Promoters

and Field Supervisors under the project conducted courtyard sessions through satellite clinics in all project area. The discussion topics were pregnancy care, ANC, PNC, food and nutrition for pregnant women, exclusive breastfeeding, EPI, ARI, Diarrhea, RTI/STI, family planning, iodine salt etc.

- **Celebrating Mujib Year:** To celebrate Mujib year all (04) UPHCSDP-II project areas have been taken some significant initiatives like- Free health camp, discussion meeting, hanging festoon, banner, setup Signboard etc.
- **Continuation of Services during COVID-19 Pandemic:** All (04) UPHCSDP-II project areas have been providing all services during COVID-19 pandemic through all CRHCC and PHCCs. Health Sector has also arranged adequate PPE including hand gloves, hand-rubs, face masks, and face shields for all physicians, nurses and health workers.
- **Observing Significant Days:** All partnership area of UPHCSDP-II observed following days with a festive mode and with some special activities:

Attended national program on the occasion of World AIDS Day on 1st December. Participated rally on this day and arranged discussion meeting.

Observed International Women Day on 8th March. Arranged meeting with ANC mothers focusing on safe motherhood, women rights etc.

National Mourning Day on 15 August. All CRHCC and PHCC has been provided free health services to the patient on that day. Banner was also hanged with the slogan of the national mourning day.

The birthday of Banglbandhu Sheikh Mujib was also celebrated in all partnership area. A part of celebration this day free health camp was organized in all CRHCCs and PHCC.

Special Activities during COVID-19

All partnership area of UPHCSDP-II, has been continuously providing all its healthcare services, without any disruption since the beginning of the COVID-19 outbreak. All of its staff members have been properly equipped with Personal Protective Equipment (PPE) and had taken necessary Infection Prevention and Control (IPC) precautions. Set-up

handwashing facility for hand hygiene in front of all PHCC and CRHCC for staff and patients, using shoe cleaning tray, place glass barrier in reception desks & counselor desks and established digital non-contact temperature measurement system. Social distancing is also maintaining in all services center. To ensure IPC five members IPC committee has been formed in each partnership area. Arranged necessary training and orientation to the project staff on basic information about the disease hand hygiene and respiratory practices to work in COVID 19 situation. Distributed leaflet and miking in project target area to raise mass awareness on COVID 19.



Innovative Activities:

- **COVID-19 Awareness Trainings and Orientations:** Even before COVID-19 affected Bangladesh, UPHCSDP-II, Mirpur started organizing orientation and awareness programs on basic information about the disease, hand-hygiene and respiratory practices. It also distributed leaflets in slums, local communities, and several schools containing preventive messages for COVID-19.

- **Hand Hygiene Practice:** All (04) partnership area of UPHCSDP-II practicing proper hand hygiene in all its service centers from the beginning of February 2020 as precautionary measure, even before this disease was declared as a pandemic.
- **BCC Activities:** All (04) partnership area of UPHCSDP-II developed various posters and festoons regarding personal hygiene and social distancing, and posted them in all the service centers.
- **Hotline and Information Booth:** UPHCSDP-II, Mirpur set up an information booth and a hotline service in its CRHCC where any information or query regarding COVID-19 was addressed.
- **Distribution of Food Packages and Sanitization Items:** All (04) partnership area of UPHCSDP-II distributed food packages and necessary sanitization equipment to the poor people in the working area, which included economically vulnerable staff members of the project itself with the help of Ahsania mission Shastho Shurokkha Forum (AMSSF). A total of 183 (Mirpur-43, Hazaribagh-50, Rajshahi-43 and Cumilla-47) economically vulnerable health workers of the project received packages twice in last few months. DAM also provided relief for the listed red-card holders under this project.
- **Formation of IPC committee:** All (04) partnership area of UPHCSDP-II, has formulated an IPC committee, which consists of five members. The committee is assigned to develop and implement

systems for improving IPC measures across the health facilities/centers. The committee maintains the supply chain of all logistics and PPE, which were needed by the health professionals in order to keep themselves safe. It also constantly updates the staffs about COVID-19 and IPC related measures.

- **Supporting COVID-19 Positive Patient:** One of the staffs of the UPHCSDP-II, DSCC PA-3 was tested positive for COVID 19. DAM supported him to get admitted in designated hospital for COVID-19 treatment. The organization also supported his family during their difficult time. He has now recovered from the disease.
- **Celebration of New Year:** UPHCSDP-II, Mirpur celebrated the New Year 2020 to motivate its hardworking and dedicated staffs. The project also observed International Women's Day, which was a glorious and alluring celebration to encourage the female staff in achieving gender equality within all project activities.

Achieved Awards

UPHCSDP-II, Cumilla has awarded certificate for its outstanding contribution in family planning activities (Clinical Method) on 11 July 2019. The certificate was handed over by Md. Mahbubul Karim, Deputy Director of Family Planning, Cumilla to the Project Manager, Sumon Kumar Saha of UPHCSDP-II, CoCC, PA-01. DAM has been running family planning activities since 2013 under UPHCSDP in Cumilla.





Improvement of the Real Situation of Overcrowding in Prisons (IRSOP) Project

BACKGROUND

Overcrowding of prisons by 200% in Bangladesh worsens the situation for prisoners on a large scale. There are 3.5 million cases backlogged in courts which lack coordinated approaches of criminal justice institutions. Rehabilitation for the prisoners is very important to reduce recidivism. Dhaka Ahsania Mission (DAM) has been providing drug addiction related supports and rehabilitation for reintegration of the prisoners through Improvement of the Real Situation of Overcrowding in Prisons (IRSOP) in Bangladesh Project since 2014. Because of a long trustworthy working relationship with GIZ and Prison department, a new contract has been signed between DAM and GIZ (Deutsche Gesellschaft für Internationale Zusammenarbeit) which is effective until March 2021.

Goals

The goal of this project is to reduce recidivism through rehabilitation of the prisoners and bringing them back into the mainstream of the

society; thus reducing overcrowding through reducing inflow into the prisons.

Project Area and Population

The beneficiaries of this project are poor, marginalized, helpless prisoners with Substance Use Disorder (SUD). The current phase has been being implemented in four prisons –

- Dhaka Central Jail, Keranigonj
- Kashimpur Central Jail 1 and 2
- Kashimpur Female Central Jail

The actual capacity of four working prison is 7338, but the existing prisoner number is 13681.

Activities

• Referral Services

Drug Referral has become one of the most important activities to reduce the flow of reoffending drug related cases. Prisoners are provided with counseling and medical supports in groups of 10-15. During the reporting period, 289 Prisoners (202 male, 87 female) received counseling inside the prisons, 14 (all male) were referred for medical supports inside the prison due to extreme withdrawal symptoms.

Major trades of the skill development trainings

- Horticulture and Nursery Development
- Electrical and House Wiring
- Cooking (fast food and bakery items)
- Furniture making (Partex and Plywood)
- Mushroom Cultivation

• Life Skill Education

Life skill trainings help the prisoners to improve their knowledge and to obtain critical thinking ability. Training sessions took place daily for two hours, for five days a week and 474 prisoners (male 373, female 101) participated in them.

• Income Generating Training

To reduce recidivism and ensure sustainable rehabilitation, IRSOP organized training on some

demandable and income generating trades where 111 prisoners (male 88, female 23) participated. Certificates were given after successful completion of the program.

• Peer Volunteer Training

Peer Volunteer Training is a unique innovation of the project. The main focus of this training is to build capacity of some convicted prisoners to support prison staffs to identify prisoners for counseling; to provide information on drug addiction treatment and withdrawal management; to observe general health conditions in order to identify risk factors of HIV/AIDS and other diseases. Each group has 20 members. Two such trainings took place with 40 prisoners from Kashimpur Central Jail 1 and Female Central Jail during the reporting period.

Basic Training on Drug Addiction Treatment and Management for Prison Staffs

To provide better support to drug addicted prisoners, two trainings on “Basic Drug Addiction Treatment and Management” for prison staff were held in 2019. A total of 41 participants attended the sessions. Brigadier General AKM Mustafa Kamal Pasha, Inspector General of Prisons was the Chief Guest of the inauguration program. Training was conducted by several internationally certified addiction professionals, clinical psychologists and physicians. Participants attended several sessions on current situation of drug addiction in Bangladesh, many aspects of SUD, co-occurring diseases, medical care and ethical issues.

Home Visit for Sustainable Rehabilitation

Project team performed home visit to assess the needs of released prisoners for providing material support through collaboration of the stakeholders. Moreover, during the reporting period, the project team performed an inspection visit to the workplace of an energetic and committed beneficiary who is trying to change his economic condition. He was given a sewing



machine from DAM Zakat Fund in 2019 as a part of the sustainable rehabilitation. The team visited him to inspect his self and financial development. He has been earning monthly 10,000 BDT using the training he received from the project.

Contents of drug counseling:

- Rapport build up with prisoners
- Craving and relapse prevention
- Motivational sessions
- Learning assertiveness
- Decisional balancing techniques
- Social reconnection
- Planning and goal setting

Case Coordination Committee (CCC) Meeting

The Case Coordination Committee (CCC) is a forum of Criminal Justice Institutions and Civil Society representatives. Its objectives are to discuss the problems of criminal justice system, to find out local solutions, to tackle the case backlog, to monitor the progress of the IRSOP project activities, and to report

to the national Project Steering Committee (PSC) and Advisory Committee. As a member of this committee, DAM regularly attended the meetings to share monthly updates and to seek rehabilitation supports. Due to COVID-19 pandemic, CCC meeting could not be held from March 2020.

Observing Significant National & International Days

IRSOP team observed “World Mental Health Day” on 10 October 2019 by organizing awareness meetings on mental health issue and suicide prevention at three working prisons. The participants emphasized on the importance of mental healthcare and how to prevent destructive behavior. Respective Senior Jail supers, Jailors and other prison personnel were present during the occasions.

COVID-19 Response

• Leaflet Distribution

During the COVID-19 pandemic, Health sector developed awareness leaflets and as a part of this initiative almost 700 leaflets were distributed to four working prisons of DAM-GIZ-IRSOP project.

- **Distribution of PPE Kits and IR Thermometer**

As part of COVID-19 prevention and to ensure health and hygiene measures of the prisons IRSOP project has provided 172 pcs of full body gowns, 17200 pcs of gloves, 8600 pcs of masks, 172 pcs of goggles and 68 pcs of infra-red thermometers to healthcare workers in 68 prisons across the country in May 2020.

- **Distribution of Food Packages among the Released Prisoners**

As a rapid response of COVID-19, DAM-GIZ-IRSOP project has distributed food packages and health hygiene support among 30 prisoners (25 male, five female) and their families in Dhaka area during June 2020. The selection criteria of the beneficiaries to be supported with such packages were women-led household, unemployment, daily income less than 500 BDT etc.

- **Agreement between DAM and International Committee of the Red Cross (ICRC)**

To provide an online –based “Orientation Training on COVID-19 Preparedness including Stress Management for Medical and Non-Medical Staffs in Prisons” in 68 prisons in Bangladesh through IRSOP project, an agreement was signed between DAM Health Sector and International Committee of the Red Cross (ICRC). The trainings are taking place regularly from July 2020 by the Health Sector personnel..

- **Online Training to PNGOs of the IRSOP Project**

As a part of COVID-19 response, an online-based “COVID-19 Preparedness and Stress Management for Development Workers” orientation was provided to PNGOs of IRSOP Project in June 2020. A total of 158 participants from 28 districts of BRAC, Rangpur-Dinajpur Rural Service (RDRS) Bangladesh, Madaripur Legal Aid Association (MLAA) and Bangladesh Legal Aid and Services Trust (BLAST) participated in the sessions, where 103 were male and 54 were female. The training contents were as follows –

1. SARS-CoV-2 and preparedness for preventing COVID-19

2. Personal Protective Equipment (PPE)

3. Stress in pandemic situation its management

4. Social stigma related to COVID-19 and how to prevent it

5. General information for COVID-19 prevention for prisoners.

Significant Innovative Activities

- **Case Conference Meeting for Sustainable Rehabilitation**

To ensure sustainable rehabilitation and strengthen coordination among partners, a new initiative of “Case Conference Meeting” was initiated which is beyond the project activities. Its objectives are to ensure coordinated support, and to explore the need and assist as per need of the released prisoners. During the reporting period, 19 cases were discussed in such meetings.

- **Awareness Raising Activities on COVID-19 for Released Prisoners**

As part of COVID-19 prevention, IRSOP project has been disseminating awareness messages among the released prisoners since April 2020. It attracted the attention of GIZ, who has included it to the renewed contract as a regular activity for all PNGOs. DAM Health Sector has developed the information package used in this activity. A total of 138 released prisoners (male 121 and female 17) received the information through telephone and at prison gate by Rehabilitation Supervisors cum Counselors (RSCC) of DAM-GIZ-IRSOP in all four working areas.

Success Story: Success through skills development

Rimon (pseudo name) is a 23 year old young man. Youngest of seven siblings, he grew up in his village with his parents. He came to Dhaka after his HSC examination. As a son of a middle-class family, Rimon dreamed that he would secure a good job and would contribute to his family after completing his studies. But cruel destiny hindered his dreams. Unfortunately

he was arrested by police as a suspect in a political case and was sent to jail. After this, the sky of misfortune collapsed upon his head. Rimon was introduced with the Rehabilitation Supervisor cum Counselor (RSCC) of IRSOP project in Kashimpur Central Jail 2 and received information about the project services. He expressed interest in technical and vocational skills training. After his release on bail, he contacted with the RSCC and decided to take training on “Basic Computer Skills”. He got himself admitted in three-month long training program and successfully completed with certification.

After completing his training, Rimon has been working as a showroom manager of the renowned RFL Vision Showroom by using his acquired knowledge of computer skills and earning 18000 BDT monthly. He also completed his graduation. Now his confidence and faith have increased and he believes that the present working experiences, skills will help him to get even a better job in future.

Rimon is thankful to Dhaka Ahsania Mission, Prison Authority and the IRSOP project for assisting him and giving the opportunity to fulfill his future.





Health and Nutrition Voucher Scheme for Poor, Extreme Poor and Socially Excluded People (PEPSEP) Project

Background

Dhaka Ahsania Mission (DAM) partnering with Christian Aid (CA), started the “Health and Nutrition Voucher Scheme for Poor, Extreme Poor and Socially Excluded People (PEPSEP)” project to address the health and nutrition needs of the poorest of poor in urban areas of Bangladesh, which are directly linked with the global objective of European Union and UN Sustainable Development Goals (SDG) - 3. The project started in February 2018 and will be in effect until January 2021.

Objectives

The goal of the project is to improve health and nutrition status of urban poor. The project has been implementing its services with the following specific objectives –

1. Establishing system for sustainable primary healthcare and nutrition voucher scheme approach for the urban poor at Savar

and Satkhira Municipalities

2. Increasing access and utilization of comprehensive primary health and nutrition care services by the urban poor.

Project Area and Population

The project has been addressing the health and nutrition needs of poor, extreme poor and socially excluded people from two municipality areas – Savar from Dhaka Division and Satkhira from Khulna Division. These communities were targeted based on the principles of Sustainable Development Goals (SDGs) 'Leave No One Behind'. The target population of the project is 32,087 beneficiaries of 6,417 households, where Savar has 21,099 beneficiaries covering 4,219 HHs and Satkhira has 10,988 beneficiaries covering 2,198 HH.

Activities

During the reporting period, PEPSEP project completed the following planned activities –

- According to the targeted population of 32,087, PEPSEP has reached almost 25,000 beneficiaries within June 2020. The project also distributed 6,417 health and nutrition voucher cards among the targeted beneficiaries.
- Privet healthcare facilities have been identified, categorized and empaneled under the project. Privet Health Service Providers (PHSPs) such as management staffs, physicians, nurses, medical technicians have been trained on health voucher approach, service packages, SOPs, QATs, monitoring and evaluation, financial management, web-based and android applications and implementation criteria of PEPSEP voucher scheme. At the beginning of PEPSEP health and nutrition voucher services, 31 PHSPs were empaneled and but at end of the June 2020 the number reduced to 20.
- PEPSEP ESD+ services were provided as medical services for 46% of the total, as doctors' consultation for 40% of the total and as diagnostic services as 14% of the total services.
- PEPSEP project moved further to enhance the health seeking behavior of targeted beneficiaries through community mobilization as courtyard meeting, BCC material distribution, popular theaters, video shows and door-to-door visits.

- For project promotion and increasing awareness among the target beneficiaries, PEPSEP team has developed a rapport with tertiary stakeholders like District Commissioner officials, Civil Surgeon/Upazila Health Officer, district/upazila administrative officers, district/upazila family planning and social welfare officers, Municipality mayors, Municipality CEOs/secretaries, Municipality Councilors, Ward Committee Members, local social elites, health professionals, journalists, human rights activist and local NGOs.

In view of the above, PEPSEP project has been working in multi-directional approaches outlining the links and synergies with the vision of strengthening the targeted beneficiaries for the sustainability of this project activities in future.



Development of Municipality Health Policy

One of the goals of sustainable development is to make cities inclusive, safe, resilient and sustainable. As per the Local Government (City Corporation) Act 2009, all City Corporations and Municipalities are made responsible to provide for their people's health services. Unfortunately due to the shortage of resources, Municipalities are not being able to provide the health services properly. They also lack policies

regarding health and nutrition issues. PEPSEP project has been proposing to provide the supports to enable the LGIs to achieve the goals of the Government, as well the SDGs. In this context, DAM has mobilized to support Savar and Satkhira Municipalities, so that they can be self-sufficient to lead health services by developing a comprehensive health policy.

BCC Materials Development for Project Promotion and Increasing Awareness

Currently there is a desperate need of BCC materials for the project beneficiaries which are essential to make them aware about the beneficial changes in their behaviors. PEPSEP project has developed BCC strategy and audio-visual materials through consultation process. Further BCC materials on health, nutrition, family planning and NCDs are being developed with the direction from the strategy as flipcharts, handbills, brochures, booklets, stickers, billboards etc.

COVID-19 Response

COVID-19 pandemic has severely affected the minority groups in Savar and Satkhira Municipality areas. Project beneficiaries are also among the sufferers. The Government of Bangladesh has given some guidelines and public notices urging all local NGOs/INGOs to come up and stand by each other to ensure services for the suffering minority poor families.

On that perspective, DAM Health Sector, through the PEPSEP project volunteers, conducted awareness raising events at the grass-root levels before the pandemic hit our country. COVID-19 has also been taking physical, psychological, economic and social tolls on the people of Bangladesh. To reduce the suffering, PEPSEP project distributed Eid gifts among 300 poor families of Savar area on 24 May 2020. Local Government leaders and Health Sector representatives were present during the occasion. Food items (rice, pulses, cooking oil, potato, salt, onion) and hygiene products (bath and hand soaps, sanitary napkins, reusable masks, detergent powder) were distributed among the beneficiaries.



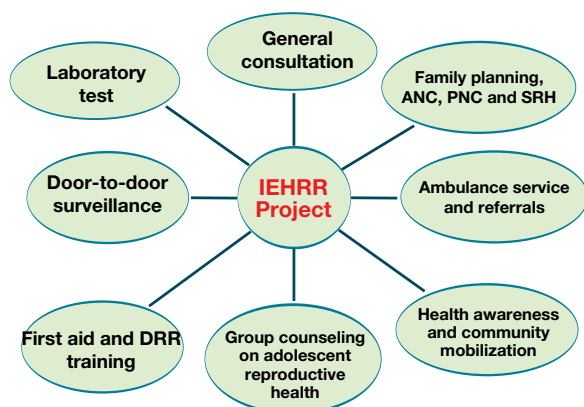


Integrated Emergency Humanitarian Response to the Rohingya and Host Population in Cox's Bazar (IEHRR) Project

BACKGROUND

The humanitarian situation for Rohingya refugees remains dire and they are one of the most vulnerable groups due to lack of healthcare system, personal hygiene, water, sanitation and shelter. Considering the issues, Dhaka Ahsania Mission (DAM) Health Sector has stretched out to provide primary healthcare support to Rohingya refugees since 1 September 2017 with its own funding. Later the project received funding from DFID and UKAID. IEHRR project is now on its Phase III as a consortium approach managed by UNOPS and Christian Aid (CAID). Health Sector has been providing its services in camps – 12, 13, 14, 15 and 19 through four Static Health Posts and six Satellite Health Posts.

Key Services of the IEHRR Project



Activities and Services

During the reporting period, a total of 156,274 consultations were provided through IEHRR health posts. Among these, over 98% was provided to the Rohingya community and 55% of them were female.

Some of the IEHRR services according to category are as follows –

Name of Service	Number of Services
Laboratory and diagnostic test	4030
First aid and DRR training	4
Door-to-door visit and surveillance by CHSWs	10454
Health awareness and community mobilization	6
Group counseling and adolescent training	13
ANC and PNC services	3952
Family planning counseling and SRH services	38939
IEHRR staffs who received training for capacity development	23

Health posts have also provided consultations to the members of the host community, primarily at Camp 12, 15 and 19. Static Health Posts have served almost 52% of the total services. About 0.5% of the service recipients had one or more types of disability.

COVID-19 Preparedness and Response

In response to national COVID-19 preparedness and response, the IEHRR project has been providing the following services according to DGHS and WHO guidelines in order to reduce risk of contamination and to prevent COVID-19 in camps – 12, 13, 14, 15 and 19 among the Rohingya and host community.

- Installation of hand washing points at different places of the camps
- Raising awareness through conducting audio sessions
- Raising awareness through leaflet distribution
- Raising awareness through door-to-door visits and one-to-one counseling
- Ensuring adequate Personal Protective Equipment (PPE) for all health personnel
- Conducting training on COVID-19 preparedness and response
- Initiation of ambulance service for COVID-19 patient referral
- Ensuring rational use of PPE
- Formation of Infection Prevention and Control (IPC) Committee to overlook the IPC precautionary measures across working camps

Capacity Building Initiatives

During COVID-19, Health Sector has provided four trainings to the IEHRR staffs and CHWs, among which two were for a total of 82 staffs on COVID-19 management and IPC as a part of preparedness and response measure. Later, 39 CHWs received two trainings on COVID-19 preparedness and response, which included discussion on “Enhanced Community-based Surveillance for COVID-19 Preparedness and Response”. Trained according to the international IPC guidelines, CHWs are performing field work maintaining social distancing measures.

Four Family Planning Counselors and a paramedic received training on COMPASS for Kobo Collect from CAID (Accountability Department) to collect complaints/feedbacks and rumors/myths on COVID-19.

Awareness Raising Activities

Physicians, paramedics, midwives, family planning

counselors and CHWs were very vocal to raise awareness among the camp dwellers and host community through discussion, orientation, motivational speech, collection of feedback and rumor, and conducting practical sessions on physical/social distance maintenance, practicing cough etiquette, hand washing and use of the masks to prevent COVID-19. A total of 1484 sessions were conducted on these issues, where 7447 (53 % were female participants) attended. Soaps were also distributed during such events. Three camps played audio messages in Rohingya language to disseminate information about COVID-19 at the health posts, which reached almost 5777 patients. CHWs also disseminated relevant information through their mobile phones. Hand washing points have been installed in 10 Health Centers at the entrance to increase the practice of hand hygiene among the patients.

Innovative Activities of IEHRR Project

Feedback from the Beneficiaries

In front of each health post, a feedback box has been installed which are addressed by the IEHRR Project Coordinator. There is also an active mobile phone designated for each box for any verbal feedback/complaint. Each feedback is first entered into a register kept by the Project Coordinator, and then it is evaluated. Issues are resolved at project site when possible, and when needed they are presented to the higher management. During April – June 2020, 134 feedbacks and 49 rumors were collected from five camps, which were immediately addressed.

Participation and Award

IEHRR project of the Health Sector has been awarded by UNICEF and CiC of Camp - 12 for its active participation in C4D program through its health services.





Feed the Future Bangladesh Nutrition Activity (BNA) Project

BACKGROUND

Dhaka Ahsania Mission (DAM) has been implementing Feed the Future Bangladesh Nutrition Activity (BNA) project at Patuakhali District since 2018; which is designed to empower and support market and community actors to address underlying causes of malnutrition in the Zones of Interest (ZOI). BNA contributes to the improvement in nutrition outcomes for children under-5, pregnant and lactating women, and adolescents (girls and boys) in the country's Feed the Future (FTF) ZOI. It is a five-year long project funded by USAID. DAM has been implementing the activities in Patuakhali Sadar, Mirzaganj and Kalapara Upazilas.

Significant Activities

Base-line Survey and Homestead Gardening Data

During July – September 2019, base-line surveys on Rapid Market Assessment (RMA) and Deep Dive were conducted in growth centers. Homestead gardening data were collected from the local

community within 18 – 22 September 2019. These reflected the current real scenario in the implemented areas regarding nutritious food consumption, its production and growth center related information.

Meeting with Fish Business Association

Kalapara growth center is reputed for the fish supply throughout the whole country, and the Fish Business Association has a great impact on market system development. BNA arranged a discussion meeting with the Association members to share project goals and activities on 28 August and 18 September 2019. Issues on fish sources, fish storage problem, draining situation, market management committee support, market environment etc issues were also discussed in the meeting.

Training Workshop on Market System Development

A four-day long training/workshop took place in Khulna for BNA team during 7 – 10 July 2019. The participants received training regarding the Market System Development (MSD) and other project related activity implementation. They also received firsthand field experience regarding the learning from the sessions.

Vendor Meeting at Growth Centers

To increase consumption of nutritious, diverse, and safe food in rural households and to increase their access to safe foods in local markets, six vendor meetings in nine GCs (Mohipur bazar, Kalapara bazar, Banatibazar, BhoYang hat, Kathaltoli bazar, Subidkhali hat, Khatasia bazar, Khasherhat and Pukurzana bazar in Mirzagonj, Kolapara and Patuakhali sadar Upazila) took place during October – November 2019.

A total of 389 selected vendors, market management committee representatives, agro-input retailers, and WASH activists participated in the events to discuss BNA project activities, function of growth centers, toilet facilities, drainage system improvement and improved water supply facilities as well as overall cleanliness of markets. The committee agreed to help BNA project if the project authority provides assistance to improve the overall cleanliness of the market. Later, 195 interested vendors registered through SMS, phone call and direct visit to work alongside BNA project.

Training for Religious Leaders on Nutrition, WASH and Women Empowerment

As a part of community awareness building on nutrition, WASH and male involvement in the household work and decision making through Friday Khutba sermon, seven Imam trainings took place with the collaboration of Islamic Foundation (IF) at significant GCs in Mirzagonj, Kolapara and Patuakhali sadar Upazila during the reporting period, where 179 imams participated. They discussed on knowledge, skills, information about food and nutrition, male involvement in the household work and decision making, and WASH issues in the light of Holy Quran and Sunnah. Participants emphasized that the Khutba should not be limited with listed 52 oriented conventional topics, and they should also incorporate relevant newer and social developmental issues.

It seemed that most Imams lack clear ideas about NGO and other developmental actors; so it is necessary to increase interpersonal communication to involve them in such activities.

Quarterly Coordination and Progress Review Meeting



The first quarterly coordination and progress review meeting was held on 30 December 2019 at BRAC Learning Center, Faridpur. Technical Directors of the working areas, Upazila and outreach specialist from each IP, select field staffs from Abt and iDE, Technical Advisors and administrative staffs participated in this meeting. DAM BNA team presented the Q1 key achievements and progress report in the event. At the end of the meeting the CoP, DCoP and SINA of the BNA project delivered their valuable speeches and declared the closing remarks.

Prototyping Nutritious Values of Local Fruits in BNA Working Areas

According to BNA work plan, a prototype has been conducted with community women and agro input retailers during 19 – 22 January 2020 in Patuakhali to see the local fruit intake behavior, seed collection

status as well as knowledge on nutritious value of local fruits and seed preservation at home.

Linkage Meeting with GO-NGO Officials

BNA DAM organized an orientation program on 22 January 2020 at Patuakhali Sadar and on 29 January 2020 at Mirzagonj upazila for Union and Upazila level GO-NGOs officials. BNA team, market management committee, business association members and latrine producers actively participated through question/answer and opinion on program implementation.

Training on Water, Sanitation and Hygiene (WASH)

A two-day training program on WASH for BNA project staff was organized and facilitated by iDE (technical partner) on 16 – 17 February 2020. Basic implementation knowledge on water pollution, water-borne disease, water treatment, negative



consequences of unimproved latrine, components of sanitary latrine and hygiene practices and women empowerment issues were demonstrated through interactive sessions.

Training for Latrine Producers

Three-day training for latrine producers took place on 24 – 26 February 2020 where 17 registered latrine producers from nine GCs participated. A field visit was also organized at Jashim Sanitary Mart, one of the successful sanitary marts in Bangladesh.

Tea-stall Meetings at Growth Centers

As a part of public awareness building on nutritious, diverse and safe food intake behavior, its demand creation and supply, WASH practices, good agriculture practices, women empowerment through homestead gardening, BNA team has been organizing tea stall

meetings at different growth centers in Kalapara, Mirzagonj and Patuakhali sadar Upazila since January, 2020.

Good Agriculture Practice (GAP) Training on Homestead Gardening

DAM-BNA project organized GAP training for agro input retailers on 9 March 2020 at Kalapara and on 10 March 2020 at Patuakhali Sadar Upazila to increase their skills in business plan, safe handling of fertilizer, organic management of insecticide and pesticide and to help community women on homestead food (fruits & vegetable, animal source) production, food preservation and doption of improved technology in agriculture.

Training on Business Plan Development for Vendors

BNA-DAM organized training on business plan development for registered vendors at different GCs



during January – February 2020. Its objective was to build capacity of rural market actors to improve access to nutritious foods, agro-inputs and WASH products.

Training for Vendors for Sustainability of BNA Activities

Kalapara GC is one of the biggest growth centers of Patuakhali district, which consists of 1556 permanent shops. As per recommendations from Kalapara Municipality Cooperative Business Association, BNA-DAM team organized eight vendors meetings with seven subcommittees to meet the project objectives. Vendors raised several issues and presented demands during the training sessions, which the BNA team has been trying to mitigate ever since.

Observing International Women's Day 2020

Addressing the motto “I am Generation Equality: Realizing Women's Rights” of International Women's Day 2020, DAM-BNA organized several events at GCs and schools including rally, street drama and discussion meeting. The street drama was based on women empowerment “We need changes...” was staged in BNA working area schools.

COVID-19 Response

Establishing Hand Washing Stations

DAM-BNA team has established 18 hand washing stations (three permanent, 15 temporary) in nine GCs of the working area, with collaboration of Market Management Committee (MMC) and Business Associations. Two basins have been installed in each

station, where 300 – 500 people can wash their hands properly each day.

Raising Awareness on COVID-19

DAM-BNA project started miking at Community level, leaflet distribution and text message dissemination among different stakeholders to raise awareness against COVID-19. Text and voice messages are still being disseminated from BNA project among different vendors, religious leaders and market stakeholders to continue with IPC measures.

Distribution of Cleaning Materials in Mosques

For social safety and reduction COVID-19 effects at community level, cleaning materials were distributed in the mosques of the nine GCs, where 189 mosques ensured proper distribution of soaps, surface and toilet cleaners. Mosque authority and Imams instructed their congregations to maintain proper hygiene inside mosques and all other places to prevent COVID-19.

Social Distancing at Growth Centers

GCs can be a focus for COVID-19 spread as these are the places of mass gathering. BNA-DAM took the initiative for marking in front of shops at nine GCs which ensures at least three feet distances between the customers themselves and with the vendors. Vendors are also influenced to maintain and ensure the social distance for safety. Market Management Committee and other stakeholders appreciated such initiative during the crucial situation of COVID-19.





Drug Abuse Resistance and Understanding (DARAU) Project

BACKGROUND

Drug dependence has spread throughout the whole world as a social epidemic. Irrespective of ages and occupations, this vice has been very rapidly increasing among all. Drug Abuse Resistance and Understanding (DARAU) project is being implemented to strengthen existing anti-drug laws, policies and protocols and to raise mass awareness against this dreadful habit in Rajshahi and Natore Districts. Light House consortium partnering with Dhaka Ahsania Mission (DAM), APOSH and NSKS have been implementing the project since November 06 2019, which is funded by USAID and UKAID along with technical assistance provided by Counterpart International.

Objectives

The project aims to combat drug abuse in Rajshahi and Natore districts with the objective –

1. To create awareness on the adverse effects of drug abuse at family and community level in Rajshahi and Natore through

social mobilization

2. To introduce policy measures and increase fund allocation for combating drug abuse through sensitizing and influencing the local government including the politicians
3. To develop and strengthen CSO engagement mechanism for enforcement of law, policies and protocol available

Project Area and Duration

The project is being implemented at all Upazilas of Rajshahi, eight Wards of Rajshahi City Corporation, and 6 Upazilas of Natore. Its activities will continue until 05 November 2021.

Significant Events

DAM plays an active role in implementing the objectives of the project, including advocating with civil society networks, media, national and local government representatives, and policymakers on related issues. By this project, the common folk of the designated area comes to know about the negative impacts of drug addiction. Standing beside the local people as well as Government, DARA U project makes a significant impact in the social movement against drug abuse.

- **Project Inception Meeting in Rajshahi**

With a view to supporting Civil Society (CS) to engage in advocacy and networking initiative complementing Government of Bangladesh (GOB) efforts to combat

drug abuse, DARA U Project Inception Meeting was held on 11 February 2020 in Rajshahi. Local Government representatives, policy makers, DNC officials, Civil Surgeon, District Education Officer and other relevant stakeholders joined the meeting. The participants of the meeting varied from GO, NGO, media, transgender/other gender, ethnic minority, LGL, academia, women activists, right-based organizations. The commitment of the participants was noteworthy through their understanding of the project goals, objectives, and activities for combating drug abuse through different approaches.

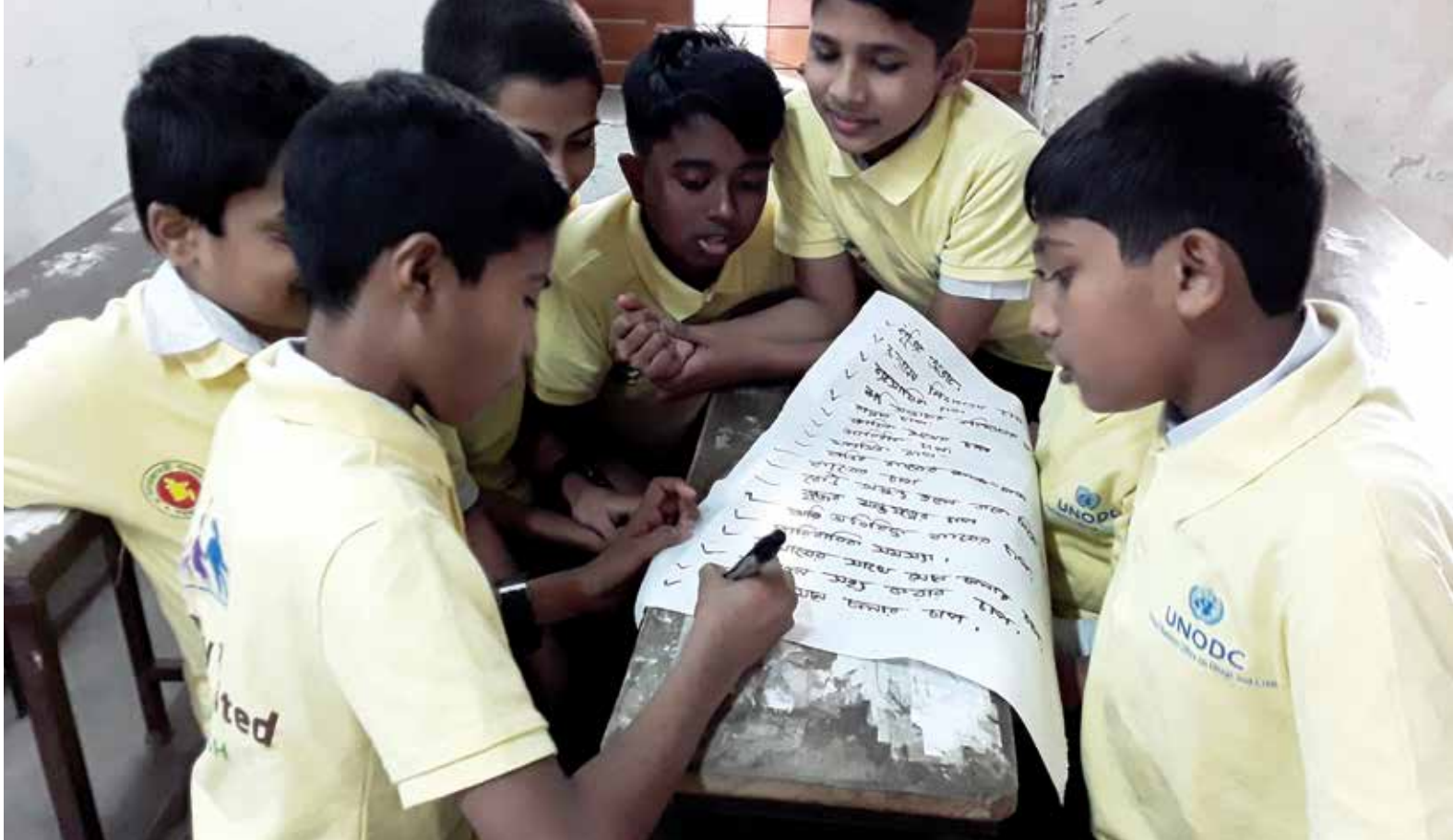
- **Observing International Day against Drug Abuse and Illicit Trafficking**

To observe the International Day, DARA U project organized different events in Rajshahi and Natore such as anti-drug message dissemination through Miking, online seminar with the participation of different stakeholders, and online quiz completion for youth group.

- **Consultation Meeting to Review the Draft Rules under the Act**

On 13 January 2020, a consultation meeting was held in the meeting room of DAM Health Sector to provide feedback on the draft of "Private Drug Addiction Treatment Center, Counseling Center and Drug Addiction Rehabilitation Center Rules 2019". DARA U project representatives and National Drug Amendment Committee members participated in the review meeting.





UN-ited Family Skills Program in Bangladesh

BACKGROUND

Over 35,000 parents and children from 23 countries have participated in the UNODC family skills initiative. This evidence-based training program has proven highly effective in preventing substance use disorder and other risky behaviors among children. UNODC experience of working on this issue during 2010 – 2017 generated two main needs; first is the need for a family skills program addressing the needs of those in challenged settings (refugees, internally displaced, residence in conflict/post-conflict zones, rural areas etc.); and the second is the need for a universal family skills program designed for the needs of low and middle-income countries. Keeping the second need in mind, Indonesia and Bangladesh became the first participants as piloting sites.

Dhaka Ahsania Mission (DAM) has been developed a contract with UNODC to implement the UN-ited Family Skills Program in Bangladesh in collaboration with the Ministry of Education. The activities took place from December 2019 – March 2020.

Objectives

Objective of the present study was to test the effectiveness of the UN-ted Family Skills Program in improving parenting skills, ensuring caregiver and child well-being, and cultural acceptability.

Project Area and Duration

For the pilot phase of the program, prestigious Tejgaon Government High School from Dhaka city was selected and 29 of its pupils (15 male, and 14 female) from Class V – Class X and their family members/ primary care givers we enlisted to attended the sessions.

Activities

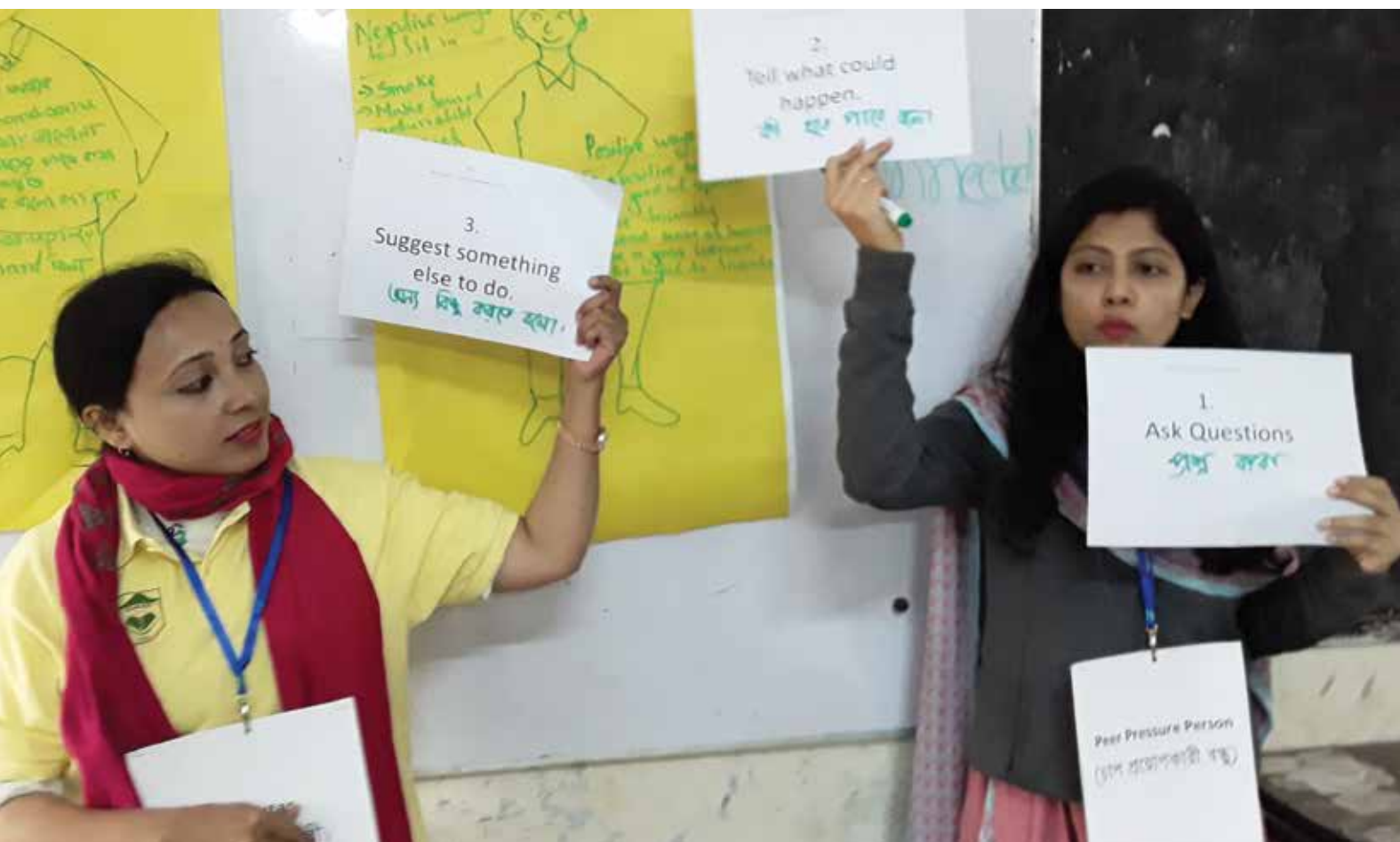
The pilot phase had a total of four training sessions and three data collection events. Four structured questionnaire with scales were translated from English to Bengali under the supervision of UNODC to be used as data collection tool. Health Sector research

team had collected data on the first occasion before the trainings began. The questions were on basic demographic data and regular parenting behavior.

Following that, 12 experts who had received UNODC training on this activity, conducted four training sessions in four weeks. Completing the training schedule, two events of data collection took place using the basic questionnaire to determine the changes in parenting styles and children's behavior, and to see how much information the participants can retain on the long run.

Future Activities

Health Sector research team has presented the collected and sorted data to UNODC research team for analysis. Both their collaboration is ongoing to publish the findings as a scientific article; which will be used to design future related activities in Bangladesh.





Tuberculosis (TB) Control Program

BACKGROUND

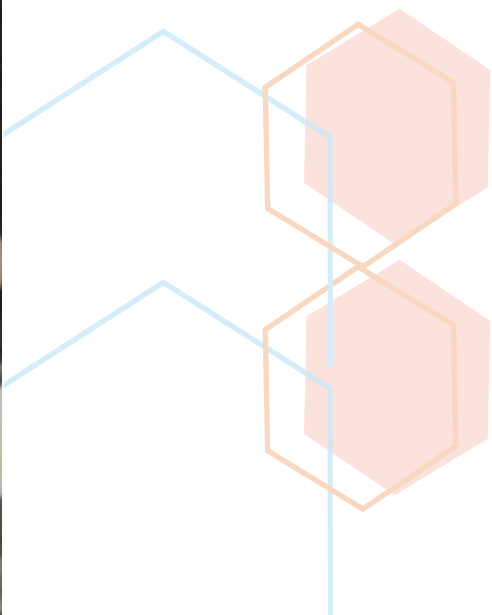
Dhaka Ahsania Mission (DAM) has been implementing GFATM (Global Fund to Fight AIDS, Tuberculosis and Malaria) funded TB Control Program through BRAC from January 2013 at Ward 1 and 17 under Dhaka North City Corporation. The program's target population is 249,381.

Activities

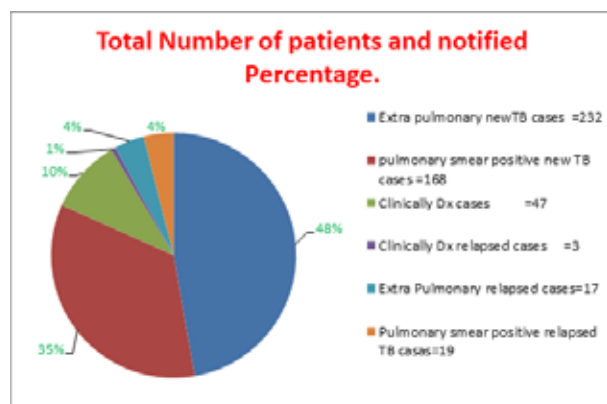
DAM provides free TB treatment services among the target population. It has also been conducting different advocacies and social mobilization programs to raise awareness and increase knowledge about TB in the community of the project area. Treatment is being provided as DOTS service.

Centers and Services

DAM has been operating one DOTS and Ziehl-Neelsen (ZN) microscopy center in Uttara (Ward 01) and one DOTS and Ziehl-Neelsen (ZN) microscopy center in Khilkhet (Ward 17) where

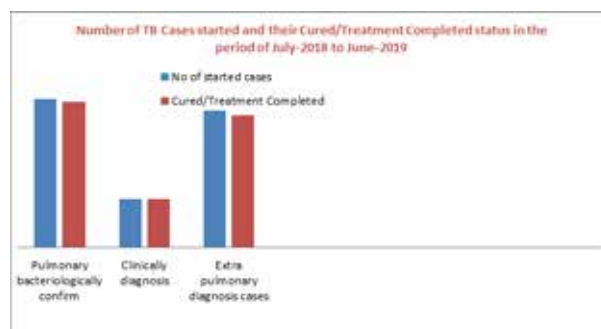


sputum samples of suspected patients are tested for Acid Fast Bacilli (AFB) to diagnose TB. During the reporting period, DAM tested 1901 presumptive TB cases (suspect) and detected bacteriologically confirmed 116 pulmonary TB cases.



Treatment success rate is tremendous. During July 2018 – June 2019, DAM notified a total of 575 TB cases and provided DOTS to all of them. The treatment success rate of Drug Sensitivity (DS) TB was more than 98%.

DAM notified 168 pulmonary smear positive new TB cases, 19 pulmonary smear positive relapse TB cases, 47 clinically diagnosed cases, 3 clinically diagnosed relapsed TB cases, 232 extra-pulmonary new TB cases and 16 extra-pulmonary relapsed cases. There were a total of 485 TB cases handled through the TB Control Program during the reporting period.



Other Significant Activities

For detecting pulmonary smear negative TB, EPTB, child TB and DR/MDR TB, DAM provided financial support of BDT 91,910 to 215 patients during the reporting period, who were diagnosed with TB, and they also received free treatment from the DOTS centers.

DAM also conducted orientation for Graduate Private Practitioners (GPP) where 20 GPPs participated.

DAM observed World TB Day and took part in the national rally. TB Control Program also organized outreach sputum collection camps, yard discussion sessions and provided community health education in the slums and hard-to-reach areas of the city. Furthermore, DAM visited Government and private hospitals, GPP, pharmacy holders, clinics and diagnostic centers to observe and orient the staffs about diagnosis and treatment of TB.



Case Study:

Ramjan's Freedom from TB

Ramjan is 17 a years old student from Bottola, Fokirbari of Khilkheth area under Dhaka North City Corporation. When he became severely sick, his father took him to a hospital where he was admitted for three days with severe vomiting and coughing up of blood. At the time of release, doctors advised him for an AFB Test. Then Ramjan's father brought him into DAM Khilkheth DOTS center as a TB Presumptive on 20 August 2019. Respective staffs checked his sputum for AFB through ZN Microscope and found AFB positive in both sputum samples. Ramjan also had TB signs and symptoms of low grade fever, coughing up of blood, weight loss, loss of appetite and physical weakness> He was diagnosed as a bacteriologically confirmed TB Case. Ramjan had no previous anti-TB treatment history. According to the advice of the project physician, he was started on ant-TB treatment by Category 1 on 21th August 2019. DAM provided all anti-TB medicines with health education. Patient's body weight was 40 kg at that time.

Ramjan was under regular follow up according to the NTP guideline. Program staff checked his sputum after completion of the first two months of treatment on 19 October 2019. The follow up result was also positive. DAM continued next four months of treatment as per the guideline.

Gradually Ramjan's physical condition was improving and body weight started to increase. Rest of the follow up sputum samples tested negative from the fifth month to the end of the treatment course. He was declared as a cured patient on 16 February 2020. Now Ramjan is well and he is leading a healthy life.

Ramjan's recovery was possible due to uninterrupted full-course treatment and proper guidance. His family was very caring after the counseling they had received from the TB Control Program about the disease and its management. All of them are now very happy and satisfied with the treatment procedures. Ramjan is an example. At the same time, Ramjan's story reminds us the importance of proper TB treatment. Emphasis should be given on knowledge sharing, facilitating proper diagnosis and early treatment of the disease.

আজই আওয়াজ তুলুন

তামাকমুক্ত দেশ গড়ুন



স্বাস্থ্য সেক্টর
ঢাকা আহুতানিয়া মিশন

Tobacco Control Program

BACKGROUND

Bangladesh is one of the largest tobacco consuming countries in the world, which faces considerable problems in health and economic consequences. To protect people from secondhand smoking, and to protect children and youth from ill tactics of Tobacco Industries (TI), DAM Health Sector started its Tobacco Control Program in 1990 which has become one of its core programs. Health Sector has been implementing “Mainstreaming the Tobacco Control Law for Sustainable Implementation and Countering TI Tactics and Advocacy for Tobacco Tax Policy Reform” funded by Campaign for Tobacco Free Kids (CTFK) in national and sub-national (Dhaka City Area) levels. The project focuses on creating mass awareness; performing advocacy with policymakers and other stakeholders; capacity development; mainstreaming and sustainable implementation of the law.

Creating Awareness

DAM has conducted four online live talk-shows on various tobacco control issues through social media (Facebook and YouTube) platforms. Honorable Prof. Dr. AFM Ruhul Haq, MP and former

Health Minister; Prof. Dr. Arup Ratan Choudhury; Dr. Sayed Mahfuzul Huq, National Professional Officer (NCD), World Health Organization (WHO); Mr. Muhammad Faruk Khan, MP, former Tourism Minister; Professor Dr. Md. Abdul Aziz, MP; Mrs. Roxana Quader, former Additional Secretary, LGD; Dr. Md. Nasiruddin Ahmad, former NBR Chairman; Mr. Kazi Firoz Rashid, MP, former Minister; Dr. Kazi Kahliquzzaman Ahmad, Economist and Chairman, PKSF And Dr. Muhammad Abdul Majid, Former NBR Chairman and speakers took part in discussions. The discussion sessions reached more than 36,000 people.

DAM has developed more than 50 templates on tobacco related issues during COVID-19, e-cigarettes, law implementation, secondhand smoking, LGD guideline, tobacco-free hospitality sector, smoke-free public transports, tax and the statements of honorable MPs on tobacco-control issues. These were shared in the social media to reach more than 20,000. A total of 248 news articles on anti-tobacco issues were published during the reporting year. Other reports and articles were also published in print and online media. DAM has published survey factsheets, LGD Tobacco Control Guideline for advocacy and awareness rising.

Performing Advocacy for Adopting Tobacco-Control Policies

During the reporting period, DAM conducted numerous advocacy works with Bangladesh Dokan Malik Somity on banning display and advertising of tobacco products at points of sale. DAM and Bangladesh Shop Owners Association (BSOA) jointly organized a discussion meeting on dissemination of “Big Tobacco Tiny Target Bangladesh” report on 20 July 2019. A total 35 BSOA members participated in the meeting. DAM also shared the factsheet with policymakers and government officials for initiating policy reform and implementation against the TI tactics to protect the young generation from tobacco-use.

DAM conducted intense advocacy with Ministry of Education, University Grants Commission, universities (Dhaka University, BRAC University, AUST), and NTCC to stop “Battle of Mind” event or any other initiative by TI targeting the youth. It made the universities to stop the British American Tobacco (BAT) sponsored event. Renowned actress Suborna Mostofa has recently acted in a Bengali cinema, “Gondi”, where

her role was seen smoking in few scenes, which unfortunately encourages the viewers, particularly the young generation to use e-cigarettes/vape. DAM has submitted a letter to NTCC for taking actions against showing those specific scenes more than four times.

Capacity Development

An orientation meeting on “Tobacco-free Hospitality Sector Strategy” took place by Bangladesh Tourism Board with the support of DAM and CTFK. During the reporting period, Bangladesh Road Transport Authority (BRTA) conducted six trainings on Tobacco Control Law for vehicle drivers, with the technical support from DAM, where 727 drivers received orientation on the topic.

Mainstreaming and Sustainability

DAM has taken initiatives for mainstreaming the TC issues in various Government and Non-government institutions through providing necessary support for developing a common guideline for LGI tobacco-control initiatives, and approval of the guideline. Dhaka South and North City Corporations (DSCC, DNCC) have allocated budget for tobacco-control, specifically in 2019-2020 financial year. Ministry of Civil Aviation and Tourism (MOCAT) has circulated notices to its institutes/associations and all (1-5 star) hotels to implement tobacco-free hospitality sector strategies. Ministry of Education has provided directives to Directorate of Secondary and Higher Education (DSHE) and UGC for taking active initiative on banning tobacco product sale near educational institutes. DSHE also circulated a notice to all institute heads for implementing the directives about selling and displaying tobacco products near and inside their premises. BRTA has directed its training institutes to incorporate Tobacco Control Law in their existing training manuals. Bangladesh Inland Water Transport Authority (BIWTA) has circulated a notice to all water transports to keep them smoke-free and to display “No Smoking” signage as per law.

Tobacco-Free Savar and Satkhira Initiative

Tobacco-free Savar and Satkhira is the innovative initiative of DAM that aims at making these two cities as models with tobacco-free healthy environment for next generation. Honorable Mayor of Satkhira Municipality has already declared the Municipality premises as smoke-free. He also circulated a public

notice banning tobacco product sell within 100 yards of educational institutions. Satkhira 31 Ansar Battalion has also declared its campus “Smoke-Free”.

Research Initiative

DAM and Daily Alokito Bangladesh newspaper organized a roundtable discussion with journalists on dissemination of the Big Tobacco Tiny Target Bangladesh study findings and its recommendations on 27 July 2019. DAM conducted two surveys - “Baseline survey at public place (restaurants) in Dhaka City to see the compliance of the tobacco control law” and “Baseline survey at public transport (buses) in Dhaka City to see the compliance of the tobacco control law” during the reporting year. The surveys were conducted at 371 restaurants and 417 (22 routes) buses in Dhaka City. The study showed that 98% restaurants and 100% buses did not comply with the law in the Dhaka City. DAM has also been conducting a Rapid Situation Analysis on e-cigarette use in Dhaka City to get insights about the present scenario of its use and market. DAM has already conducted three focal group discussions (FGD - 02 male and 01 female) on this purpose.

COVID-19 Initiatives

Tobacco Control Program has taken different

initiatives during COVID-19 pandemic such as letter campaign, SMS campaign, social media campaign, publishing articles and news etc. DAM has sent 21 letters signed by different professionals and anti-tobacco activists; and distributed more than 1000 SMS to the Honorable Prime Minister demanding withdrawal of Ministry of Industry’s directive and imposing temporary ban on the marketing and sale of tobacco products during COVID-19 pandemic. DAM has issued a legal notice to the Secretary of the Ministry of Industry against the circular in favor of tobacco companies. DAM has developed 21 templates and two videos for social media platforms on tobacco-related issues during COVID-19. DAM has sent a request letter signed by the organization President, Mr Kazi Rafiqul Alam, on tobacco taxation to 70 MPs, NBR Chairman, and the Finance Minister through email along with tax proposal and recent WHO template regarding increased risk of tobacco-users for COVID-19.

Recognition and Award

Dhaka Ahsania Mission received World Health Organization (WHO) Regional Director’s Special Recognition Award, honoring its contribution in tobacco-control work in Bangladesh. This was announced on the occasion of World No Tobacco Day 2020.





Enhancing Resources and Increasing Capacities of Poor Households towards Alleviation of Their Poverty (ENRICH) Project

BACKGROUND

ENRICH project has been uniquely designed to ensure sustainable development of the poor with the aim to facilitate the best utilization of the existing capabilities and resources at poor households. It also enhances the capability of the underprivileged population with a view to enabling them to come out of poverty and moving toward a dignified life. The project not only provides primary healthcare services, but also endeavors on education, training and financial assistance programs for the people in designated areas.

Funding and Target Population

DAM has been implementing the ENRICH project with the funding from Palli Karma Shahayak Foundation (PKSF) at the Sukundi

Union under Monohardi Upazila of Narshingdi district. It started its activities in July 2014.

Activities and Services

Household Survey and Distribution of Treatment Card

Health Volunteers and Health Assistants conducted a base-line survey to collect health-related data from the poor, and 5300 health cards were distributed among them.

Free Healthcare and Social Services

- Weekly Satellite Clinics were organized where expert physicians provided free treatment to 14273 patients. Specialized camps on eye care, dental care, cardiac problems and Diabetes management were organized. A total of 6200 patients received treatment from 15 such health camps.
- With the support of the Sitesavers, Dhaka Progressive Lions Club and PKSF; 205 patient received cataract surgery and 12,000 above 5 year old (>5yo) children and adults received de-worming medicine free of any cost.
- ENRICH project installed 200 sanitary latrines and 18 tube-wells in the project area.
- Target population were provided with Albendazole (39,900 tablets to 19,400) for de-worming, iron supplements (35,200 capsules to 7,150), Pushtikona (10,190 tablets to 3,525) and Miracal (4,010 tablets to 805) free of any cost.

- DAM helped rehabilitating two beggars to social mainstream through the project during reporting year.

E-Health and Telemedicine Service

ENRICH project provided innovative e-health services through telemedicine project for improving the primary healthcare situation of the population residing in remote areas.

Community Awareness Programs

Health Assistants and Volunteers conducted 2,215 community awareness programs to inspire healthcare seeking behavior for accessing quality healthcare services for safe delivery, maternal and child healthcare, non-communicable disease control, nutrition, violence against women and other issues.

Healthcare Financing Strategies

DAM operates loan scheme for the target population to enable them in improving their health and nutritional status.

Mass Awareness Campaign

Youth Forum of ENRICH project conducted various campaigns on chikungunya virus, immunization, safe environment and anti-tobacco issues to raise awareness among people in the project area through arranging POT song, rally and human chain formation.



WASH Sector





Dhaka Ahsania Mission WASH Sector

IMPROVING THE ENVIRONMENT IN AND AROUND JAMTOLI ROHINGYA CAMP

Objective

To improve the environmental conditions of Rohingya refugee camps and host community in Jamtoli and its adjacent village Mosarkhola.

Duration: The project duration is one year.

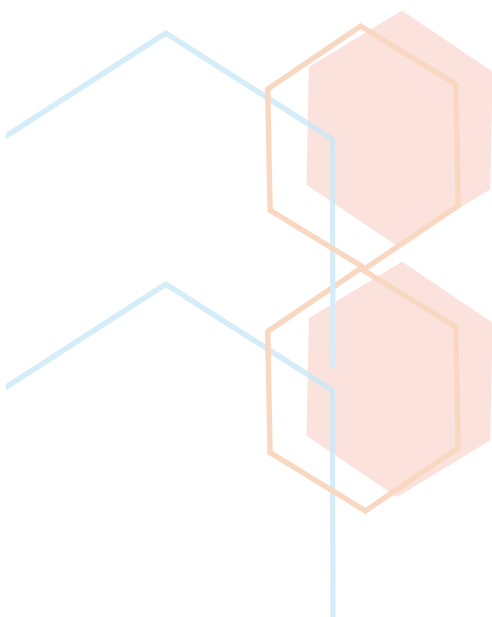
Target Area: Jamtoli Camp as well as the neighbouring host community village Mosarkhola.

Population: The project aims to reach 21,218 beneficiaries.

Available Services: Clean water, sanitation facility and livelihood opportunity for the beneficiaries.

Activities:

- Providing borewells to the beneficiaries for their water needs.
- Providing sanitary latrines to the beneficiaries.



- Providing hygiene sessions to the beneficiaries for behavioral change.
- Providing driots and vegetable seeds and saplings, along with bags so that beneficiaries can grow bag-gardens, even at the absence of available spaces around their households.
- Re-excavating logged up canals and providing bamboo bridges to provide proper drainage and alleviate sufferings of the beneficiaries.

Significant Achievement: The beneficiary communities now have access to basic WASH facilities, as well as getting a regular nutritious diet.

Significant Innovative Activity: Bag gardening has been mainstreamed and the beneficiaries have now been growing vegetables and fruits on their own, and selling surplus crops in the market.

MAX NUTRIWASH PROJECT

Objective

Providing support to the inhabitants of 11 unions of Patuakhali Sadar and Galachipa Upazilla, as well as

capacity building of duty bearers to make the children stunting free, thus improving the overall health status of the beneficiaries.

Duration: The project duration is three years.

Target Area: Seven unions in Galachipa, one union in Rangabali, one union in Patuakhali sadar and two unions in Dashmina.

Population: The project aims to reach 1,98,455 beneficiaries.

Available Services: Clean water, sanitation, nutritional food for kids and hand wash basins.

Activities:

- Providing hygiene sessions to the beneficiaries for behavioral change.
- Providing nutrition-related awareness rising sessions to the beneficiaries.
- Providing borewells to support the water needs of the community.
- Providing sanitary latrines, bathing chambers including MHM facilities.
- Mainstreaming hand washing devices (maxi-basin).



- Capacity building of local government duty bearers.
- Forming and capacity building of local entrepreneurs so that they can provide and supply the hardware products needed for the project.

Significant Achievement: The villages are moving towards a healthy phase. The beneficiaries have now developed ownership of the project activities and are actively working towards a healthy tomorrow.

Significant Innovative Activity: Implementation of low-cost maxi-basins, which are hand washing devices.

AMADER KALAROA PROJECT

Objective

A Paurashava-led community-managed sustainable service delivery model for small coastal town has been developed to increase access to WASH of the people living in Kalaroa Paurashava through developing capacity of the Paurashavas and other service providers influencing rights-based approach toward pro-poor policy; and increase investments for community managed sustainable WASH in focus of coastal nature and possible climate change impact.

Duration: The project duration is eight years.

Target Area: Kalaroa Paurashava under Satkhira district.

Population: The project aims to reach 28,645 beneficiaries.

Available Services: Clean, arsenic and iron-free potable water.

Activities:

- Installation of 100 water treatment plants that filtered water free of arsenic and iron contamination.
- Awareness raising sessions in the community to ensure the beneficiaries' access to basic WASH services.
- Capacity building of both the beneficiaries and duty bearers.

Significant Achievement: This project has been instrumental in providing supports enabling the Paurashava to declare the area under 100% clean water coverage.

Significant Innovative Activity: The water treatment plants have been designed jointly with WaterAid Bangladesh so that it is best suited for use in the project area.



SUSTAINABLE WASH PROVISION IN SATKHIRA (SWAPS)

Objective

The overall objective of the project is to improve the health status by supporting fresh water supply, nutrition and sexual health conditions of targeted population in Kaligonj Upazila with provision of hygiene, sanitation and water services through community empowerment with the support of local government and other stakeholders.

Duration: The project duration is one year.

Target Area: Dakshin Sreepur and Kusholia Union under Kaliganj Upazilla of Satkhira district.

Population: The project aims to reach 10,370 beneficiaries.

Available Services: Clean and potable salinity free drinking water.

Activities:

- Installation of two reverse osmosis water treatment plants.
- Developing one-time market linkage with local entrepreneur(s) and other commercial points for water business.
- Awareness raising sessions on water safety plan.

Significant Achievement: This project ensured the

beneficiaries to have access to potable water.

Significant Innovative Activity: Development of water business entrepreneurs who are delivering water to the beneficiaries directly at their doorstep.

NALTA SHARIF PIPE WATER SUPPLY SYSTEM

Objective

Providing clean water to the people living around Nalta.

Duration: The project duration is 11 years.

Target Area: Nalta, Magor Ali, Sonartekari, Shanpukur, Chadpukur, Ponditpara, Bishwalaxmi, Choumohoni and Purbo Nalta village.

Population: The project aimed to reach 475 beneficiaries.

Available Services: Clean potable water.

Activities:

Providing potable water to the beneficiaries.

Significant Achievement: The beneficiaries now have access to clean potable water.

Significant Innovative Activity: Establishment of a mini scale water pipeline system which ensures water directly in the beneficiaries' living quarters.



Health Institutions





Ahsania Mission Cancer and General Hospital, Uttara

BACKGROUND

It is estimated that there are around 2.5 million cancer patients in Bangladesh and about 200,000 new cases are being added every year out of which 150,000 die. Facilities and resources available for detection and treatment of cancer are very limited in Bangladesh. Management of cancer patients is a multi-disciplinary one. The absence of multi-disciplinary approach can be identified as a major handicap in the effective treatment of cancer patients.

In this backdrop, Dhaka Ahsania Mission (DAM) undertook a bold initiative to build a 500-bed world-class cancer hospital in Bangladesh at Sector-10, Uttara, Dhaka. It was inaugurated on 9 April 2014 by the honorable Prime Minister of the People's Republic of Bangladesh, Sheikh Hasina. It is situated on the bank of river Turag, where more than 15 million people live with limited access to healthcare services. It is a fifteen storied building having facilities for the treatment of both cancer patients and general ailments.

Sponsor

DAM is the main project sponsor. However, from funding perspective, only 14.8% of the total capital was contributed by DAM as of the end of the last financial year. Residual is funded by grants from Government of Bangladesh (43.3%), and corporate and individual grants (41.9%).

Facilities

The super-structure of AMCGH has already been installed in Phase-I of the project and the hospital commissioned operation in April 2014. Currently the hospital has 250 operational beds (oncology), 23 outpatient consultation rooms, and four operation theatres. It has a visible plan to launch a 50-seat Medical College in the same compound and also a Nursing Training Institute. Within the Phase-II, our plan is to ensure expanding indoor bed number, increasing OT numbers, 13-bed NICU and 11-bed CCU installation and to start Medical College and Nursing Institute activities.

Objectives

- To provide high quality diagnostic and therapeutic care to mitigate the suffering of cancer patients
- To ensure effective screening, diagnosis and treatment to reduce cancer related mortality
- To improve the quality of life for cancer patients through support, rehabilitation and palliative care
- To improve effective cancer control in Bangladesh through research

- To organize and conduct structured hands on training courses for professionals
- To create database for cancer patients and online inflow of information
- To save foreign currency by minimizing cancer patients going abroad for treatment
- To develop the institution as “Centre of Excellence” in the field of cancer control
- To provide 30% treatment and care facilities to less affluent patients at affordable cost as well as to make provision of free treatment for the poor patients
- To run the hospital on “No-Profit, No-Loss” basis with the provision to utilize any operating surplus for subsidizing the treatment cost for poor patients

Services

AMCGH is a specialized hospital for cancer treatment. Although it simultaneously provides general healthcare services, its focus is to attend the cancer patients to make their lives better and of quality.

Diagnostic Services

Diagnosis is the first step for managing a medical condition. AMCGH has state-of-the-art diagnostic facilities to detect cancer at any age. Specialized treatment facilities are present and the patient can receive world class cancer therapies in the hospital.



Diagnostic Services for Cancer Patients during July 2019 – June 2020

Cancer name (primary)	No. of patients	Cancer name (primary)	No. of patients
Brain Tumor	8	Carcinoma Nasopharynx	17
Bronchial carcinoma	4	Carcinoma Unknown Primary	147
Bronchogenic Carcinoma	4	Diffuse large B cell Lymphoma	7
CA Prostate	98	DLBCL	35
Ca Anal canal	9	Embryonal Carcinoma	36
Ca Ascending colon	21	Generalised lymphadenopathy	15
Ca Base of The tongue	158	Glioblastoma	2
CA Breast	1011	HCC	12
Ca Buccal Mucosa	104	Hepatocellular carcinoma	13
CA Cervix	461	Hodgkin Lymphoma	74
CA Colon	117	Malignant	56
Ca endometrium	15	Mediastinal Germ cell tumor	13
Cholangiocarcinoma	23	Metastatic CA	49
Ca Gall Baldder	169	Molar Pregnancy	10
Ca Gastro esophageal Junction	20	Multiple Myeloma	36
Ca pharynx	10	Myelodysplastic syndrom	5
CML Blast crisis	13	Nasopharyngeal carcinoma	41
CA Larynx	204	Non Hodgkin Lymphoma	109
CA Lung	740	Ovarian	6
CA Ovary	150	Periampullary carcinoma	21
CA Piriform Fossa	100	Peripheral neuro-ectodermal tumour	11
Ca Tonsil	70	Pre B ALL	39
Ca Liver	7	Recurrence of CA	20

Cancer name (primary)	No. of patients	Cancer name (primary)	No. of patients
CA oesophagus	154	Recurrent	19
Ca Oropharynx	10	Relapsed AML	7
Ca Recto sigmoid junction	15	Renal RCC	12
CA Rectum	158	Sarcoma	71
CA Sigmoid colon	18	Sinonasal carcinoma	20
Ca Stomach	306	Soft tissue	36
Ca Thyroid	30	CUP	8
Ca Trachea	9	T Lymphoblastic Leukaemia	5
Ca transverse colon	14	Testicular carcinoma	9
CA Urinary bladder	115	Thymoma	6
Ca Vagina	4	Yok sac tumour	9
Ca Vocal cord	9		
Carcinoma Pancreas	48		
Total	5401		

• Other Services

Patient's Information	
Outdoor Patient Visit	130880
Cancer Patient Registration	4745
Indoor Admission	3521
Number of Registered Discount Patient	16239
Treatment Method	Number of Service (July 2019 – June 2020)
Radiotherapy	69025
Surgery	8958
Chemotherapy	18015
Brachytherapy	748
Diagnostic Methods (Imaging)	Number of Services (July 2019 – June 2020)
CT Scan	2531
MRI	1395
X-Ray	8698
USG	4495

Diagnostic Methods (Laboratory)	Number of Services (July 2019 - June 2020)
Hematology	21148
Transfusion Medicine	3177
Clinical Biochemistry	49855
Microbiology	975
Histopathology	1207
Immunology	6819
Clinical Pathology	2601
Serology	2703
Immunohistochemistry	111
Cyto-Pathology	458

- Awareness Activities against Cancer

AMCGH team puts their effort to create awareness, and advises and refers marginalized people with the risk of breast cancer. A mobile mammography unit works to ensure best services for examination and screening of such fatal disease.

Project Strength

- AMCGH is the largest specialized private cancer hospital in Bangladesh. With more focus and resource allocation for developing strong cancer care capabilities, AMCGH will attract many doctors who wish to specialize in the field of oncology.
- Cancer is the sixth cause of mortality in the country. It is evident that the current cancer treatment infrastructure, from private and public sector put together, falls short. Whereas AMCGH offers specialized treatment facilities through accommodating larger number of patients. This is a huge scope for the hospital to develop professional capacity through experience and training.
- DAM has the local knowledge and understanding of the market dynamics which are prevalent from governance and management perspective. Moreover, DAM has gained the general trust and confidence of the population for its various philanthropic activities over the period of 50 years. It helps to attract considerable Government grant and public donations to make the project successful.

- Strong strategic partnership with the Government of Bangladesh, development mandate and extensive collaboration with public healthcare system enable competitive pricing ability to optimize patient-flow.
- AMCGH is a large establishment with general and cancer treatment facilities. The hospital also stands to profit from segments other than oncology.



Skilled Human Resource

- Recruitment is an ongoing activity for AMCGH which is complemented by training programs in all fields of the hospital care services. The planned training program of AMCGH covers the following-
- Training for key physicians, nurses and paramedical technicians in the field of oncology for at least six months in established cancer hospitals abroad.
- Training abroad in the field of oncology, particularly in the field of radiation and chemotherapy. This training is targeted for specialist physicians who have already acquired that skill locally.
- Moreover, the management is aware that retaining skilled human resource is a challenge. As a result the hospital has allowed the full-time employee doctors to practice at the hospital premises under the consultant compensation framework after office hours.



Ahsania Mission Cancer and General Hospital (AMCGH) Mirpur

BACKGROUND

Bangladesh has been suffering from burden of non-communicable disease. There are 13 - 15 lakh cancer patients in Bangladesh. Ahsania Mission Cancer and General Hospital (AMCGH) Mirpur was established in 2001. The hospital is situated in Khan Bahadur Ahsanullah Road, Plot no-M-1/C, Section-14, Mirpur.

Cancer is one of the most frightening and debilitating conditions. AMCGH, Mirpur provides comprehensive and collaborative teamwork against cancer. The services are for everyone; especially the poor, women and deprived population receive priority.

Services

Pathology, microbiology, biochemistry, immunology, histopathology tests are done in the state of art laboratory. Radiology & Imaging department also has excellent imaging technology including X-ray, mammography, color doppler, echocardiogram, ultrasonogram, colposcopy etc.

Oncology Unit

AMCGH, Mirpur has a strong oncology unit which offers services to adult and children with ALL, AML, NHL and other cancers. Monthly VIA camp are



organized where colposcopy and pap smear are done for early detection for cervical cancer. Breast cancer center provides support through expert physician.

Facilities

Out-Patient Department (OPD)

Different disciplines such as medicine, cardiology, respiratory medicine, ophthalmology, ENT, surgery, gastroenterology, palliative care, family medicine, physical medicine, physiotherapy, gynecology and Obstetrics, pediatric etc; of the AMCGH OPD provide services for general health conditions.

Specialized Unit

State-of-the-art Intensive Care Unit (ICU) was established in 2015 which provides cheapest but high standard clinical support through advanced amenities.

Maternal and Child Health Care

Gynecology and Obstetrics department delivers a whole range of maternal and child healthcare services like ANC, PNC, NVD, Caesarian section, hysterectomy, oophorectomy and other maneuvers. Advanced machines were installed for better services.

Dental Unit

Dental department provides various dental and maxillofacial treatments such as scaling, tooth filling, tooth extraction, root canal, crown, bridge work, artificial teeth replacement, minor oral surgery, cyst, oral tumor operation etc.

Health Check-up Package

A complete health package for screening of Communicable and non-communicable diseases is present at a reasonable price.

Blood Bank

AMCGH, Mirpur has a blood bank that provides services to meet the needs. Blood donation programs are also organized regularly.





Hena Ahmed Hospital

BACKGROUND

Hena Ahmed Hospital is situated at Alampur village of Hasara union, Sreenagar upazila, Munshigonj. The hospital started its activities from May 2016. Hena Ahmed Hospital was established with the financial aid from Ms. Hena Ahmed – a local philanthropist, and it has been being managed by DAM Health Sector ever since. The hospital started its journey to render essential healthcare services to the needy, poverty-stricken people of Hasara, Sekhernagar and Badoikhali union in Munshigonj at an affordable cost. The 20-bed Hospital provides 24-hour emergency services, indoor and outdoor services, injury management and family planning services, diagnostic services through laboratory investigations including Ultrasonography and X-ray; and follow up consultations with specialist physicians. Patients can buy medicine and surgical items from its pharmacy at low cost.

Services



Healthcare Services at the Hospital

During July 2019 – June 2020, HAH provided healthcare services to 7,392 patients with different ailments. Specialists on gynecology and obstetrics, neuro-medicine, pain and diabetes are delivering their services regularly at the hospital.

Other Services

HAH established laboratory for quality investigations, which recently procured a Sysmax Brand Cell Counter machine. With the help of this machine, the quality of investigations has been highly improved. The hospital also runs 24-hour USG, ECG and X-ray services. Other diagnostic, pathological tests are done on regular basis.

Moreover, through the Service Promoters, HAH has been conducting BCC activities on violence against women, nutrition, and gender equity for health and rights and entitlement for health services at household levels to improve health seeking behavior.

Medical Camps

The hospital has organized three medical camps during the reporting period on the following specialties for the people of Sreenagar and Serajdekhan Upazila in Munshiganj –

Details	Date	Total Patient
Medicine & Kidney Camp	13.09. 2019	205
Blood Sugar & Grouping Camp	15.02 2020	305
Child Camp	21.02 2020	150

Significant Achievement

During the reporting period of July 2019 – June 2020, Hena Ahmed Hospital has delivered 80 babies under the supervision of obstetrician consultant through normal and Cesarean section operations. All the babies and their mothers are in good health. Additionally, HAH has started 24-hour X-ray services during this period.





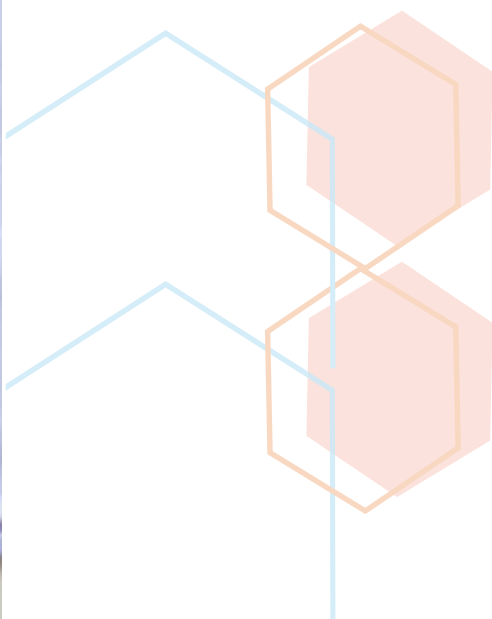
Monasef Ahsania Health Center

BACKGROUND

Established in May 2019, Monasef Ahsania Health Center is situated in Kamarjuri Village, near the National University, Gazipur. It was founded in February 2015 by Al-Hajj Md. Alauddin, a UK citizen from a respectable local family, who named this health center after his father, late Al-Hajj Md. Monasef. later it was handed over to the Health Sector. The center is well-known for providing standard and affordable healthcare services with its utmost priority for patient satisfaction.

Objective

Monasef Ahsania Health Centre believes that providing healthcare is a true humanitarian endeavor and it brings great joy to positively impact the society with outstanding healthcare facilities at affordable costs. Its mission is to continue providing high-quality medical support to the community and support social goodwill through philanthropic events. With the vision to being a pioneer



healthcare service provider in a hale and hearty community, it has been providing quality services for the local people.

Services

General Healthcare Services

During July 2019 – June 2020, Monasef Ahsania Health Center has provided exemplary services, enabled by expert physicians and resourceful staffs. More than 1250 patients received services from the center on –

- Reproductive and maternal healthcare
- Child healthcare
- Diabetes treatment
- Skin and VD treatment

Diagnostic Services

Monasef Ahsania Health Center provides a comprehensive range of high-quality diagnostic tests, delivering accurate and authentic reports for the patients through –

- Hematological test
- Urine test
- Ultrasonogram
- ECG

Pharmacy

The center presents a plethora of medicines manufactured by renowned companies in its pharmacy. It tries to ensure that all types of medicines are available at reasonable prices in here.

Activities and Significant Events

Monasef Ahsania Health Center carried out many activities throughout the year for the benefit of the community, embarking on a socially altruistic and philanthropic journey.

- Free Blood Group Testing Camp on 18 and 28 January 2020 and 18 February 2020; which provided authentic blood grouping for 510 people.
- Free Eye Camp on 26 February 202; which provided free eye check-up for around 120 people.
- Vitamin-A Capsule Campaign on 25 January 2020; which provided Vitamin-A capsules among a total of 314 children of 6 month to 5 years.
- Satellite Meeting on 01 November 2019, 18 December 2019 and 16 February 2020; regarding common diseases of winter season, common diseases of women, and COVID-19. Physicians spoke on these topics during the occasions and other staffs were present as facilitators.
- FreeHealth-card Distribution on 07 January 2020; which provided free health cards for almost 45 poor people. With this card, all the facilities of MAHC are completely free of cost for them.
- MOU with Industrial Garments Companies on 10 March 2020 between MAHC and MR Sweaters to provide easy healthcare access to its employees.
- Free Medical Camp on 27 September 2019; which provided free consultations to above 80 patients with gynaecological problems. They were also offered free medicine and 30% discount to all pathological tests.

To conclude, Monasef Ahsania Health Centre has become an appraised and well-regarded healthcare facilitating organisation. Its dedication lies concrete and honest for all the patients, and their satisfaction and betterment are the main objective of the center.





Ahsania Mission Drug Addiction Treatment and Rehabilitation Center, Gazipur

BACKGROUND

Substance Use Disorder (SUD) is a serious and complex problem that affects personal, family and social lives of a person. Its treatment requires proper care which addresses all the issues and offers solutions to ancillary problems. Ahsania Mission Drug Addiction Treatment and Rehabilitation Center in Gazipur is the first of three such centers of DAM Health Sector, which was established in 2004 with the financial support of UNESCO, Paris and DAM UK. The center is situated close to Bhawal National Park near Gazipur–Mymensingh highway. It is in a four storied building situated on about two acres of land in Gazaripara, Gazipur; with all necessary modern facilities that meet the requirements of treatment procedure, relaxation, recreation, religious practice, library and provision of indoor and outdoor activities. It has a 100-bed capacity. The treatment is provided in a non-smoking environment. The center is managed



through Center Manager, physician, psychiatrist, counselors, Case Manager, administrative and others staffs.

Treatment Approach

The center provides six-month long residential treatment starting with first 14 or 21 days for detoxification. It is a process of clearing the substances and their toxic forms from the body. DAM has been following evidence-based medical detoxification procedures to safely manage the acute physical symptoms of withdrawal. During pre-treatment phase, clients go through detailed medical and psychological screening, symptomatic withdrawal management, assessment and physical treatments.

Treatment phase starts after detoxification program. This is followed by 166 days rehabilitation services. During this time, center provides mental health services, physical treatment, counseling, psychosocial education, individual and group therapy etc. Counselors enhance client motivation with the psychological support to face the challenges at every stage of a drug-free life. Client families are also offered to join family counseling sessions. Provision of psychosocial education is also an important part of the treatment. Clients receive information on harmful effects of drugs, HIV/AIDS, tuberculosis and other infectious diseases, overdose, life-skill education, stress management, anger management etc. As after-care service, clients are offered to attend anti-drug and social events organized by the center, annual recovery get-together program, outdoor counseling, family therapy, psychiatric treatment and group

counseling after completing the treatment course. DAM has been following treatment approach as appropriate of the individual's age, sex, ethnicity and culture.

Moreover, DAM has been conducting pre-admission screening performed by trained staff to assess the physical conditions of clients before admission, to rule out the risk of communicable diseases and any potentially life-threatening diseases which would require immediate secondary or tertiary hospitalization.

Client Demography

During the reporting period, 146 patients were admitted at Gazipur center, among which 36 patients were under follow up, and 96 patients completed their treatment course. A total of 84 patients were dropped of in the middle of their treatment. DAM continuously help economically vulnerable patients through fee discounts, which 33 patients received during the reporting year. Currently, 62 patients are admitted in the center and their socio-economic, substance use and risk factor related information are given below:

Significant Events Family Education Meeting

It is very important for family members to know about SUD, reasons behind SUD and how it affects families, society and how to prevent it. Gazipur center arranges regular monthly family education meetings awareness where experts discuss these issues with the family members of SUD patients. A total of seven

such meetings took place at the center during the reporting year.

Observing Significant Days

Gazipur center has observed the International Day against Drug Abuse and Illicit Trafficking 2020 and organized events reflecting its theme “Better Knowledge for Better Care”, International Mother Language Day, Pohala Boishakh, Independence Day, Recovery Month, Victory Day, and New Year’s Celebration with joyous participation of the center staffs and patients.

Recovery Month

Gazipur center celebrates Recovery Month during September in every year to increase awareness and understanding of mental disorders and SUD and to celebrate the recovery lives of patients. Many patients who completed treatment joined the various colorful events arranged during the month. A football match was held between the patients on recovery and the patients who were under treatment as a part of the celebration, where the former won the match.

Awareness Programs

Gazipur center has organized discussions meeting with school/college students on anti-drug expeditions, performed anti-drug advocacy, distributed leaflet/sticker/brochures, established information center and ran month-long campaign to raise awareness against SUD.

Recovery Get-Together

Every year, Gazipur center organizes Recovery Get-together program for motivating the patients on recovery to obtain and maintain their physical and mental strength to avoid substance use.

Recreation and Entertainment

Gazipur Center arranged various Indoor and outdoor games and cultural events for the overall development of the physical and mental well-being of the patients during this year.

Medical Services

Gazipur center provides all psychological services as well as regular medical services. A total of 106 blood samples were referred to Monasef Ahsania Health Center during this year for medical tests. Psychological treatment were provided to 533 patients through psychiatrists and 809 general medical consultations were provided through physicians and other healthcare workers.

Gazipur center has been providing quality services through the strong support of the Health Sector and the dedication of its staffs. The center has been struggling with difficulties due to COVID-19 pandemic since March 2020 but it has shown strength and determination to continue its services for the wellbeing of unfortunate SUD patients of the country.





Ahsania Mission Drug Addiction Treatment and Rehabilitation Center, Jashore

BACKGROUND

Ahsania Mission Drug Addiction Treatment and Rehabilitation Center is situated at Vakutia of Jashore dsitrect in a suitable location of nine bigha area. It has been providing service since 2010 in a spacious five storied building. It has a 75-bed capacity and 96 clients have received services during teh reporting year. Alongside all necessary treatment facilities for Substance Use Disorder (SUD) patients, the center has options for recreation, playground for outdoor games, indoor games facilities, musical instruments, library facilities and prayer room. For SUD treatment, the center follows evidence-based multidisciplinary approach.

Treatment Approach

Each patient receives the highest priority during the course of treatment, which is based on individual's strengths rather than deficits, choices, individual needs, trauma, life experience and skill. Treatment starts with 14 days of detoxification to get the substance out from the patient body. And the patient goes through medical and psychological screening, assessment and physical treatments. After that, patient takes part in individual counseling, group counseling, psychosocial education sessions, life-skill trainings etc. For the benefit of the patients, combination of multiple evidence-based practices such as therapeutic community, narcotic anonymous and other behavior shaping tools are being used in the process. Each patient is also motivated to take part in regular follow up services by the center after completion of treatment program.

Services and Activities

During the reporting year, 87 patients have completed graduation among the total of 96 patients. Due to various reasons, nine patients were dropped-out, and 205 patients were referred (dental-62, cardiac-25, other - 118) to other treatment facilities.

A total of 171 psychiatric services were provided with monthly follow up by psychiatrist. 705 individual, 44 group and 53 family counseling as well as 12

family education meetings were held as supportive therapy for dependents undergoing withdrawal and treatment. As daily activities, 311 morning meetings were organized, 390 psychosocial education sessions took place on relapse factors, sober life, life-skill, values, anger management, HIV and STI effects etc. Another 52 self-evaluation, 726 quiet self reflecting sessions, 52 group evaluation, 230 NA meetings and 365 night sharing sessions were also held at the center.

As part of the after-care services, Jashore center celebrated two sober birthdays. A total of 789 recovery follow-up advices and tele-counseling services were provided to patients during the reporting period. 115 of our previous patients who are currently on recovery visited the center. In this year, the center has provided job for two patients who completed their treatment course as a part of rehabilitation initiative.

Significant Events

Family Education Meeting

During the reporting period, 10 family meetings were conducted with the family members of the patients under treatment, during which discussion on SUD, drug dependency, recovery journey, relapse prevention, family responsibility for SUD patients took place.



Prevention Activities

To raise awareness on tobacco and SUD among students and teachers, Jashore center organized four awareness programs in Satkhira CT College, Satkhira; Jashore Education Board Model School and College, Jashore; CDF Vhabon Raipara, Jashore; and Nowapara Institute, Jashore. An anti-drug concert was organized at Jashore Town hall ground in collaboration with the District Narcotics Control Office.

Observing Significant Days

Jashore center celebrated various national and international days in collaboration with local administration - International Day against Drug Abuse and Illicit Trafficking on 26 June 2020; International Women's Day; World No Tobacco Day; World AIDS Day; International Mother Language Day; Bengali New Year; Victory Day, Independence Day, and Eid. Events such as discussion meetings, rally, human chain formation, sports competition, cultural function and campaigns were organized during occasion. On the founding anniversary of Department of Narcotics Control, a seminar and rally were also organized.

Completion of Graduation and Celebration of the Anniversary of the Center

A large number of patients completed their six-month

long treatment course and the recovery rate was also higher than that of the previous years. The center also celebrated its 10th anniversary.

Celebrating Recovery Month

Jashore center celebrated the “30th National Recovery Month” in September 2019. A discussion meeting titled “Tales of the Winners” was organized for the patients on recovery to share their journey, where almost 35 patients participated. Mr. Bahauddin Rana, Deputy Director, District Narcotics Control Office, Jashore; and various print media personnel were also present during the meeting.

Observing World mental Health Day 2019

World Mental Health Day 2019 was celebrated with the theme “Improving Mental Health and Preventing Suicide” at the Jashore center, where almost 45 family members of the patients with mental disorders took part. Dr. Md. Abdus Salam Selim, renowned psychiatrist of Kushtia Medical College, honored the occasion as the Chief Speaker.

Gazipur center has been providing quality services through the strong support of the Health Sector and the dedication of its staffs. The center has been struggling with difficulties due to COVID-19 pandemic since March 2020 but it has shown strength and determination to continue its services for the wellbeing of unfortunate SUD patients of the country.

Case Study

I am Arifur Rahman and I am 34 years old. My family lives in Balia village of Jigorkacha Upazila. I am the eldest son of my family. My father is a very renowned teacher in our village. I was very good with my studies and achieved very good result in high school in 2002. Then I moved to Jashore to attend college.

After getting admitted in a college in Jashore, I started to fall in the grips of drugs. I started to smoke cannabis with cigarettes and got involved with other anti-social activities influenced by my friends. Day by day, my addiction was increasing. After a while, my physical condition got very bad, but still I continued using the drugs until 2014.

My family felt helpless. They received information about the Ahsania Mission Drug Addiction Treatment and Rehabilitation Center in Jashore through a family friend in 2015. They admitted me here in the same year. I completed the full treatment course in here and received graduation.

Now I am living a drug-free life and I have a job in a Government school of the locality. Everyone has a newfound love and respect for me seeing my transformation. I am very grateful for what my parents did for me, and especially thankful to “Ahsania Mission Drug Addiction Treatment and Rehabilitation Center” for appropriate treatment that helps me to lead a drug-free productive life for last four years.



Ahsania Mission Female Drug Addiction Treatment and Rehabilitation Center, Dhaka

BACKGROUND

Ahsania Mission Female Drug Addiction Treatment and Rehabilitation Center started providing its treatment services on 12 April 2014 for the female patients with Substance Use Disorder (SUD) of 18-50 years of age. The center has a capacity of 35 patients. Situated at its own building in Shyamoli, Dhaka, the female center is designed to meet clients' needs of clinical treatment, to facilitate family and community support and to prepare the female SUD patients to counteract other social conditions that impact healthy drug-free living in society.

The center provides its services with the objective to provide safe and evidence-based treatment and rehabilitation services for all women. Its services are based on client's strengths not deficits,

choices, gender- specific attitude, individual client need, trauma-informed, Cognitive Behavioral Therapy (CBT) and women empowerment with provision of necessary life-skills.

Treatment Duration

The center has 1-month long, 2-month long and 3-month long treatment programs. After completion of the treatment course, a patient can receive follow-up services from the center.

Patient Demography

The center provides treatment to female patients of 18-50 years of age suffering with SUD with or without mental health issues and behavioral problems. Patients younger than 18 and older than 50 years are treated following an age appropriate special method. During the reporting year, the center received a total of 77 patients from Dhaka, Chittagong, Munshiganj, Thakurgaon, Sirajganj, Savar, Mymensingh, Gazipur, Tangail, Khulna, Kishorgonj, Netrokona, Barisal, Sylhet, Dinajpur, Narayanganj, Sherpur, Bagerhat and Cumilla to provide evidence-based treatment.

Meditation and Yoga Sessions

Meditation has proven to be a powerful yet simple technique with many health benefits, including reducing stress and anxiety. It has become more acceptable for both SUD treatment and general wellness as a form of therapy. The center has started its meditation and yoga program by a professional trainer from 2019.

Services for Family Members

Addiction is called “a family disease” for good reason. Ahsania Mission Female Drug Addiction Treatment and Rehabilitation Center programs and services are designed to help not only people who have SUD but the entire family as everyone affected needs support, care and healing. Through a variety of psycho-social education programs, counseling sessions, and educational meetings, the center provided the following family programs to provide a patient under treatment with the opportunity to begin her own journey towards recovery –

- Family counseling - 248
- Family education meeting - 5
- Family group counselig - 4



- Couple counseling - 30
- Family day - 33

Due to the COVID-19 pandemic, the center has been providing all family services through phone and other virtual methods since March 2020.

Service Evaluation

To measure service satisfaction and to develop service quality, the center has started service evaluation activity. There are two evaluations forms developed for patients and their guardians to provide feedback, opinion and suggestion for further improvement.

Daily Activities

Daily activities of the center start with morning prayer. Prayers are also mandatory for all Muslim patients. Then patients take part in scheduled exercise session, morning meeting, two psychosocial educational sessions each day, TC (therapeutic community) activities, quiet self-reflecting time, night sharing etc. Individual counseling sessions and motivational therapy are also provided during daytime.

Recreational Activities

There are daily fixed schedule for recreational activities such as reading newspapers and books, watching TV shows, indoor games etc. The center also regularly organizes weekly and monthly cultural programs and observes different significant days through everyone's participation.

Awareness Campaigns

The center conducts various awareness campaigns at social media platforms and with different stakeholders. It handed over posters at seven Thana areas, pharmacies, educational institutions, hospitals and other public places of Dhaka city during the reporting period. Female center also runs an active Facebook page with 1933 followers.

Significant Events

Discussion Meeting on the Role of Psychiatrists

On 15 February 2020, the Ahsania Center organized a

seminar on the role of psychiatrists in drug addiction treatment. Firose Jeehan, Counselor of the center presented the key note. Associate Professor of National Institute of Mental Health, Dr. Helal Uddin Ahmed presided the seminar, where 12 psychiatrists and other addiction professionals participated.

Observing World Mental Health Day

The center and Monojotno Kendro of the Health Sector jointly organized a family education meeting on World Mental Health Day 2019.

Observing Women's Day 2020

The center observed International Women's Day on 8 March 2020 through human chain formation, organizing discussion meeting with in-house and patients on recovery and special cultural program.

Observing International Day against Drug Abuse and Illicit Trafficking

With the slogan "Better Knowledge for Better Care", the center organized an in-house sharing program on 26 June 2020 to observed International Day against Drug Abuse and Illicit Trafficking.

Celebrating Recovery Month

The month September is globally acknowledged as the month of recovery. The female center celebrated the month with the theme "Join the Voices for Recovery: Together We Are Stronger" through organizing a recovery sharing program titled "Winner's Story" on 22nd September 2019 with the participation of all female SUD patients on recovery who completed their treatment from the center. Ten such victorious shared their stories of how they won the battle against drug addiction, the obstacles they faced and the roles of their families.

Significant Events

During the reporting period, the center has followed up 200 patients who completed the treatment about their recovery journey. The center proudly notified that at least 100 of them are enjoying their drug-free recovery lives.



Hena Ahmed Shanti Nibash – An Initiative for Senior Citizens

Hena Ahmed Shantinibash, a residence for senior citizen, managed by the Health Sector of Dhaka Ahsania Mission (DAM), is situated at Alampur village under Hasara Union of Sreenagar Upazilla in Munshiganj District. Hena Ahmed Shantinibash was inaugurated on 22 June 2020 to ensure care, proper dignity, with the scopes for appropriate leisure activities and adequate health checkups for senior citizens of 60 years and above who are unable to live with their families for various reasons.

During the reporting period, essential furniture such as coat hangers, chairs, tables, mattresses, bed spreads, mosquito nets, pillows, TV, freezer, sofa,

and utensils were purchased. Various promotional materials like 10,000 leaflets, banners and stickers have been developed and distributed. As part of the promotional activities, Health Sector has communicated with different stakeholders and other senior citizen residences. Website and Facebook page for this initiative have been developed. The center has been identified, included and listed in Google Map. Standard Operational Procedure (SOP) and admission forms have been developed. The boundary works for the premises has also been completed during this period.

On 23 March 2020, a female senior citizen was admitted in Hena Ahmed Shanti Nibash and she has been enjoying the residential, food, treatment and other facilities. Many guardians have communicated with the center, visited the place and shown their interests to admit their loved ones. Many have expressed their plans for admission once COVID-19 pandemic situation is improved.

Special Initiatives





MONOJOTNO Center

Background

Sound mental health is a pre-requisite of wellbeing. However, the incidents of psychological disorders are increasing day by day. About 40% of Bangladesh population is in need of mental health services. Considering the scenario, DAM took a specialized initiative to enhance such facilities through establishing MONOJOTNO center in July 2018.

Services

The center has expertise to deal with numerous mental health problem; such as depression, anxiety, panic attack, Obsessive Compulsive Disorder (OCD), anger problems, psychosexual problem, concentration problem, relationship conflict, family conflict, couple conflict, social phobia, behavioral problems of children, drug addiction and other addiction related problems.

The center provides the following counseling and psychotherapy services:

- Individual counseling
- Group counseling
- Family counseling
- Couple counseling

Service Delivery

During the reporting period, the following services were provided –

Services	Number of services/sessions
Individual counseling	73
Family counseling	19
Follow-up counseling	08
Total sessions	100

Observing World Mental Health Day 2019

To observe the World Mental Health Day 2019, four-day long programs were organized by the center –

Family Education Meeting

Three family meetings took place at three SUD Treatment and Rehabilitation Centers in Gazipur, Jashore and Dhaka. Discussion panel members consisted of psychiatrists, addiction professionals, counselors, center managers; and family members and patients on recovery.

- **Discussion Meeting**

By focusing on the theme “Mental Health Promotion and Suicide Prevention” a discussion meeting was

organized, where Government representatives, DAM officials, Health Sector Director, mental health professionals, and development workers were present. The key note focused on the importance of mental well-being and prevention of suicide through combined effort. Discussants emphasized to promote mental health at grassroot level.

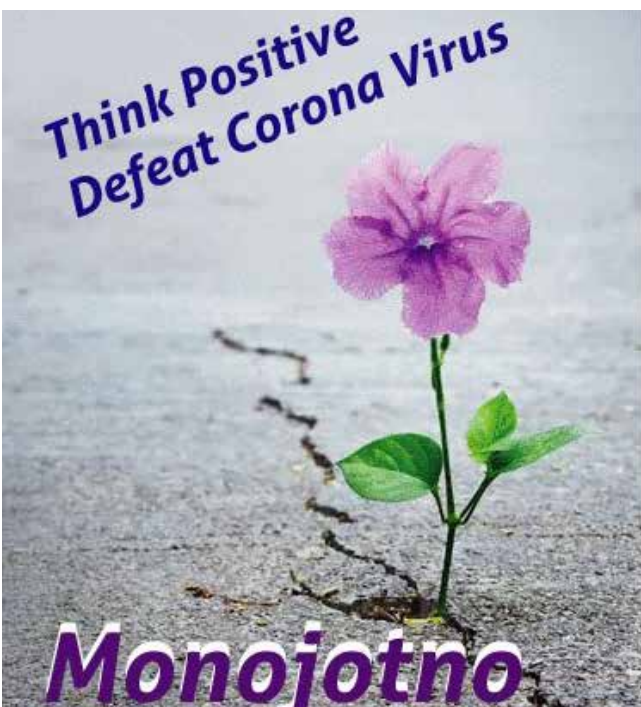
COVID-19 Response

- **Free Online Counseling Session**

DAM has always been at the forefront with humanitarian response in any crisis situation. And as a part of the COVID-19 response, and to meet the social responsibilities the organization holds, MONOJOTNO center has initiated free online counseling sessions. A total of 25 sessions has already been provided. Many patients have been receiving counseling for the panic caused by COVID-19 and on general mental health issues.

- **Awareness on Social Media**

For raising awareness on the importance of mental wellbeing in COVID-19 pandemic situation, MONOJOTNO center has been regularly sharing templates on social media platforms with beneficial messages on how to overcome panic, importance of mental strength, negative impacts of social stigma etc.



IMAGINATION is not Locked –down
CREATIVITY is not Locked –down
HOPE is not Locked –down
DREAM is not Locked –down
RESPONSIBILITIES is not Locked -down
RELATIONSHIP are not Locked –down
LOVE is not Locked –down
READING is not Locked –down
LEARNING is not Locked –down

Case Study:

Courage Defeats Hopelessness

Shafiq (pseudo name), 27 years old, married man, had been sufferings from SUD induced anxiety for one year. He used to take yaba and sleeping pills. He expressed that he had been suffering from hopelessness, irritation and excessive anger. He had some relationship problems; especially he used to feel extensive doubts towards his wife. His wife lived in USA as a US citizen. Shafiq was referred to MONOJOTNO center through a psychiatrist.

At first, center's clinical psychologist assessed his drug depnedence, anger issues and relationship problems through verbal assessment. Detailed histories of his dependence, upbringing, family condition, education and marital issues were recorded.

Due to his drug depneency, his daily life and family relationships were destroyed. His parents were very protective. They had very high expectation from Shafiq. He completed his MBA and was doing a good job. He married a lady with US citizenship chosen by his family. Their marriage took place over telephone. But few days later, Shafiq started to have doubt about his wife's behavior and he assumed that maybe his wife was having another relationship over there. Tis created a conflict in him, and he started using substances. He lost his job and fell in extreme depression. With these problems, he was admitted into a rehabilitation center, where he completed two-month long treatment. Unfortunately he relapsed after only three months. He was advised some medication, which he eventually stopped taking and became dependant on sleeping pills. He started taking yaba as well. At this situation Shafiq was brought to the MONOJOTNO center.

After the assessment of thorough history, therapist formulated a treatment plan after discussing with Shafiq and his family. Thought modification, psycho-education, problem solving skills, graded task activity, anger management, relaxation technique, recovery journey, ways to overcome relationship problems and other issues were discussed in detail during Shafiq's sessions. Family sessions were also conducted with his family memebtrs. Shafiq accepted and acknowledged all the infomration and he was focused to change himself. Through regular practice and psychotherapy, Shafiq realized that he could find solutions to his problems. He was fully focused to move to USA to be with his wife. He understood that using drugs and excessive anger will create barrier to build up his carrier. He expressed his gratitude towards the MONOJOTNO center for the tremendous support it provided during his crucial time.



Training on Universal Treatment Curriculum (UTC) for Substance Use Disorder

BACKGROUND

Global Center for Credentialing and Education of Addiction Professionals (GCCE) of Colombo Plan has recognized Dhaka Ahsania Mission (DAM) for enhancing the capacity of professionals for the treatment of Substance Use Disorder (SUD). A Memorandum of Understanding (MoU) was signed between GCCE and DAM in this regard on 09 October 2016.

Training Activities

The UTC basic level is a set of eight curricula covering the broad spectrum of SUD treatment on physiology and pharmacology of SUD, continuum of treatment for SUD treatment, overview of common co-occurring disorders of SUD, basic counseling skills, intake, screening, assessment, treatment planning, documentation, case management, crisis intervention and ethical considerations.

Training Methods

Training sessions were planned focusing active participation of all participants. Innovative methods like story-telling, question-answer, role playing, group work, visual presentation, lecture, open discussion, cooperative competition, stimulating games were used. Each day's session started with recap of the previous sessions. Participants could review the topics through question/answer. Practical examples, visual presentations, video clips etc. were used as aids.

Pre-training assessment was done at the beginning of training for each curriculum and post-training assessment took place after completing all the sessions. This provided an idea to the participants on how much they learnt through the training activities.

Closing ceremony

Official closing ceremony of training took place at the very last day of each training event. After completing the training sessions, post-training assessment and

their evaluation, certificates were distributed to all participants. During the informal closing session, honorable guests and master trainers delivered their valuable speeches, shared their feelings and expressed their appreciation to both the participants and organizers for the success of the training program. Participants also gave vote of thanks to the organizers for providing the opportunity to learn and gather experiences from each other through collective sharing and group work.

ICAP Examination

DAM is going to arrange the ICAP-I examination for the 2nd time and ICAP-II examination for the 1st time in Bangladesh. Already 12 candidates have registered for the examination. Both examinations were supposed to be held on 22 April 2020. However, the tests are currently suspended due to COVID-19 pandemic. DAM will arrange the examination when the situation normalizes.





Ahsania Mission Shastho Shurokkha Forum

BACKGROUND

DAM Health Sector has been running several projects/programs/institutions for the benefit and well-being of underprivileged population in our country. Its experience shows that often the poor cannot access the necessary health services as they cannot afford the cost. To ensure health services for all, Ahsania Mission Shastho Shurokkha Forum (AMSSF) has been formed in 2019 by the Health Sector to accrue fund for its multidimensional activities with the supports from kind hearted individuals and institutions.

Inauguration

On 17 November 2019, Health Sector launched “Ahsania Mission Shastho Shurokkha Forum (AMSSF)”. Chairman of the Standing Committee on Ministry of Environment, Forest and Climate, Mr. Saber Hossain Chowdhury, MP honored the occasion as the Chief Guest at the inauguration ceremony at DAM Auditorium in Dhanmondi, Dhaka. The Second Century Ambassador of Lions’ Club International, Lion Professor Dr. M. Fakrul Islam was also present at the event as Special Guest. The chief speaker of the event was

former District Governor of Lions' Club International (District 315 A2) Lion Sheikh Anisur Rahman. The inauguration program was presided by DAM President Mr. Kazi Rafiqul Alam while Director of the Health Sector, Mr. Iqbal Masud delivered the welcome speech. The forum started with 81 regular and lifetime members. Now it has a total of 102 regular members and 12 life members. Any individual or corporation can receive membership (regular, life or patron) by making regular or coeval monetary donation.

Formation of the Management Committee

The regulatory and financial activities of the forum will be managed by a 15-membered AMSSF Management Committee. Head of the Urology Department, Bangladesh Medical College and Hospital, Professor Dr. M. Fakrul Islam is the Chairman of this committee and Director of the Health Sector Mr. Iqbal Masud is the Member Secretary. Various prominent professionals such as physicians, business persons, social workers, bankers, retired career civil servants and private officials have been included in the committee. The donated fund of AMSSF will be used as per the advice

of the management committee members.

COVID-19 Initiatives

With the support of AMSSF, Health Sector provided food and grocery support to 50 economically vulnerable staffs of UPHCSDP-II DNCC PA-3 (Mirpur), 50 economically vulnerable staffs of UPHCSDP-II DSCC PA-3 (Hazaribag), 43 economically vulnerable staffs of UPHCSDP-II RCC PA-1 (Rajshahi), and 47 economically vulnerable staffs of UPHCSDP-II CoCC PA-1 (Cumilla) areas during COVID-19 pandemic. The Chairman of AMSSF Management Committee has provided messages to the mass people and health professionals about COVID-19 prevention through social media by uploading two video clips under the banner of DAM Health Sector.

Publication

With the support of AMSSF, Health Sector has published various communication materials such as AMSSF bulletin with all members' information, leaflets, membership form, AMSSF guideline and brochures.



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