





Annual report - 2009

MESSAGE FROM THE EXECUTIVE DIRECTOR

We live in an age of rapid change that is having a major impact in the daily lives of people all over the world. Globalization is making the world both the smaller and richer .Peoples, companies and countries are sizing the opportunities and presented them by new technologies, division of labor, demand of new products. As we know two and half billion of people all over the world still have to live on less than two dollar a day. Most of the poor people are women. Lack of decent work lack of decent income almost always goes hand in hand with inadequate access of education, Safe drinking water and health and necessary other basic services. Climate change and environment degradation impact are most severely poor. Millennium development goal MDG represents a broad agenda for development but on current performances many of the country will not achieve them like Bangladesh. Human rights to the development cooperation are key issue based on the sub divisibility of political human rights. The development experts have rightly pointed out that poverty is the key factor for development. So, poverty reduction is common concern us all. Poverty is an unnecessary disgusting waste of human life. It creates problems themselves. Poverty is the dark cloud hanging over both the Bangladesh and other developing countries. Our government has committed themselves to poverty reduction and economic growth. But are not managing to provide essential services to the entire population. Partly because of lack of financial resources and capacities.

I hope, this publication will useful for decision makers, planers and policy makers and all development workers all over the Bangladesh

James Mridul Halder Executive director.

Aloshikha Rajihar Social Development Center Annual Report - 2009

Introduction

Towards a better tomorrow is an introduction to the Aloshikha and for all health and sanitation professionals. This document will hopefully inspire and provoke as well as illuminating more child oriented institution and human rights culture to permeate all health and sanitation activities

Over the 24 years now, Aloshikha has continued to serve and work towards the improvement of the well being of the common people. It has thus been able to serve the rural people with its multi- faceted programs, which have enabled the organization to grow, but the latter has also influenced the former and as such facilitated Aloshikha to grow while serving.

We are encouraging to the local communities to development of different forms of education, including general and vocational education make them available and accessible to every child and take appropriate measures such as the introduction of free education and offering financial assistance in case of needs.

This report is a testimony to the fact that with a synergetic approach towards development with support from the donor community and the local people a lot can be done to improve livelihoods.

Aloshikha Mission statement:

Aloshikha is a Bangladeshi non-profitable humanitarian non-government organization supporting the holistic development of poor and landless people in the rural marshlands between Gopalgonj, Madaripur and Barisal.

Aloshikha will support the development in the following ways:

- ❖ To create awareness on the importance of child and blow education among local people.
- * To create awareness on health, sanitation, women development issues and community problems among local people and to encourage them to change the present situation.
- ❖ To organize targeted poor people in small groups and make them skilled through education, training's workshops and meetings etc.
- To encourage and motivate poor people to take steps to reduce their problems, improve their health conditions and their income.
- ❖ To encourage and support the poor people to start their own activities in order to create their own income, so that they will become self- sustained.
- * To provide among children and their development through nutrition coverage, child health education, nutritious food, creativity materials etc.
- To provide the safe water supply for hygienic health through the DTWs and distribution sanitary latrine to the community people as sanitation coverage.
- ❖ To encourage and convinced to the community people to provide renewable energy as solar system technology for alternative electricity.

Special events for 2009.



ALOSHIKHA WIN THE NATIONAL GOLDEN VICTORY AWARD -2009, BANGLADESH

1. James Mridul Halder Executive Director of Aloshikha RSD center, receiving MAPSAS National victory golden award 2009 by the Government of Bangladesh in recognition of special contribution on child education Program. It was a very prestigious reward that was wined by the Aloshikha. The awarding ceremony was held on at National press club Dhaka Bangladesh and also it was broadcasted in different National and private TV channel and also comes to publish in National dailies and magazines where Aloshikha openly mention the names of SK Foundation for its long time support to Aloshikha to implementing child education development projects. The program was presided by the Parliament whip of Bangladesh government parliamentary secretary.





Two storied building open by Mr. Har Beursknes, Chairman of the Aloshikha Foundation, the Netherlands

In 2009 Mr. Har Beursknes Chairman Aloshikha Foundation, the Netherlands was inaugurating two storied extension building of Maria Mother & Child Health Care Clinic. This two storied building's 1st floor for OT and 2nd floors will be use for solvent peoples whose are can be use as cabin.



It had a dream of the Aloshikha RSD Center to set up a one Vocational Training Center under the shadow of Aloshikha Complex. A study shown that a large number of adolescent and unemployed boys and girls in the locality do not go to school nor can they be employed for the lack of suitable job skills. As a result they remain unemployed and are not contributing to the development process. Eventually, the dream has fulfilled and set up a vocational training center. This center aims to train these youngsters on useful trades, which enable to find a job or become self-employed. We hope that, after one year training courses on different trade students will be more skill and become export manpower. It could be open a new door of opportunity in this locality.



Certificate of Health & Family Planning Ministry

Bangladesh is a population densely country. Population control is a burning question of all over the country. In this view point of Aloshikha RSD Center has started health and family planning work in their respective field to raise mass awareness among the community people and convinced them to adopt family planning method. As in recognition of flowing work the Aloshikha had an opportunity to received one registration certificate from the Ministry of Health and Family Planning Department, Bangladesh Government in 2009. No doubt, it will be inspired and provoke our performances in the locality.



MCC team are enjoying exclusively among the pre-school students

6. Aloshikha Rajihar Social Development Center (ARSDC) under Agailjhara Upazila of Barisal has initiated a medical check-up program for children around eight hundred preschool student (playgroup) those are living under poverty level. All the pre-school in project areas has strongly monitored and supervised by the Aloshikha. It had a merely significance and meticulous program which is influenced us to combating and encountering the child mortality and child diseases in our locality. One Dutch child specialist team along with nine members has provided free medical services and medicines among the six hundred pre-school children around the twenty schools. It was leaded and guided by the MCC team leader Dr. Joep the Netherlands.





Kotalipara, Gopalgoni 29 June 2009. A renowned NGO the Aloshikha RSD Center has declared 100% sanitation coverage at MAX area Jhutia village in Kotalipara Upazila under Gopalgonj district. In this reason a view exchange seminar was held on 29.06.2009 at MAX area Jhutia registered primary school, where Mr. Kabir Mahamud Upazila Nirbahi officer was the special guest and Babu Bimol Krishna Biswas Upazila Chairman of Kotalipara was the chief guest in the event. They have considering their speech to the audiences that, why sanitation and hygiene promotion is needful to our daily life. The organization started before sanitation work on MAX area Jhutia village there has been 80% open defecation and most of the more people of the locality were used lake, marshy, pond or cannel water as to their daily domestic life. It is needless to say that the color of water had a like as trickle. In this sequences the organization has made a birds eye survey among the 250 (two hundred and fifty) families in Jhutia village to address their plight and problems especially the sanitation and safe drinking water supply to the community. Hence, the Aloshikha has declared the Jhutia village as MAX area for 100% sanitation coverage. In 2008 to 2009 the organization had an opportunity to provide 20 deep tube wells and 400 hygienic latrines among the community people for access safe drinking water and sanitary latrine uses. The local community people also requested to the Aloshikha to include Bhuter bari and Bhagal bari villages to declare as MAX Area for 100% sanitation coverage in near future. This program makes a wave in the locality.

A. Community based health & sanitation program

Soft ware program/sanitation rally:



Culture show (pop song) at Paysa

The cultural show is one of the important alternative media for raise awareness on health hygiene sanitation, safe water use, arsenic and HIV/ AIDS etc.

Aloshikha organized a number of rally and seminar to observe various special days. Poster, festoon, banner, cartoon etc. containing important messages were printed and displayed in the working areas to draw attention of the community people on the central theme of the

special day.



Sanitation rally 2009

To draw attention of the community people on health, hygiene, sanitation and water issues the Aloshikha organized a colorful rally at Agailihara Upazila complex to observe the sanitation month in October 2009. The rally moved around the Upazila in different roads and markets along with three thousands people including male and female. Aloshikha staff, volunteers, culture team members, govt. officials, civil society people also took part in the rally holding banners, festoons, head caps, etc for rising awareness on health and sanitation issues.



Civil society training

To strengthen the sanitation and hygiene movement in Bangladesh, Aloshikha also organizes workshop with the civil society in the working areas. In our on going project, a total of five (5) workshops were organized as such with the civil society members whereby a total of 150 civil society members came to informed and motivated about their role and responsibilities in attaining environmental hygiene and sanitation in the community. Aloshikha Field Coordinators facilitated the workshop with the civil society.



Village health club training (VHC)

In our on-going project, a total of 150 VHCs have been formed newly in 1st year, whereby the total VHC have been reached to 500. The purposes of forming a VHC are to assist community to assess health, hygiene and sanitation status and safe water use in their respective villages; disseminate health related information; and help Community Health Facilitators (CHFs) of Aloshikha in organizing courtyard meetings. With support from VHCs, Aloshikha has been organizing health education sessions in each working village.



HIV/AIDS training

A total of 48 batches of HIV& AIDS orientation organized from the project running the working period that including 1st year, a total of 96 batches of orientation completed so far from the project whereby a total of 2,880 people were informed the basic information on HIV AIDS. People from different groups including male and female, community leaders, school teachers, religious leaders, social workers, cultural workers, etc. were participated in the orientation on HIV &AIDS. It had one-day orientation course by the FC



TMC training

Training for Tube well Maintenance Committee (TMC) is a regular activity of the project. During implementation period, a total of 8 batches of TMC training conducted by Aloshikha whereby a total of 120 TMC members (60 men & 60 women) were trained for the TMC Training. It was 1-day long training where the importance and maintenance of tube well topics with the participants. From starting of the project, a total of 16 batches of TMC members training have been conducted so far whereby a total of 480 TMC members have been trained.



Staff Development training

One batch of training on gender development was organized by the Aloshikha staff. The training was held at the head office of Aloshikha 28 nos. of selected staff had participated in the training. Main contents in this training were evolving role of men and women and gender discrimination, women rights and women empowerment, gender violence and sexual harassment of women, etc. The training was conducted by Aloshikha Training Coordinator and one facilitator from Dhaka. The duration of this training was Seven days long.



Advocacy workshop with (LGLS) training

For greater mobilization and support to the sanitation and hygiene movement in Bangladesh at UP level, Aloshikha organized advocacy workshops with the UP officials. Over the r project period, a total of 11 workshops were organized as such whereby a total of 330 UP chairmen and members and other influential persons from the local community were advocated in favor of sanitation and hygiene movement. The advocacy workshops were organized at the branch office level and were facilitated by the Field Coordinators and Training Coordinator with support from ED and Project Coordinator. The main focus of the advocacy workshops was the evolving role and responsibilities of UP in achieving CLTS (Community Lead Total Sanitation) movement that is running currently in Bangladesh



Doctor. Checking the Children at the satellite clinic

Satellite clinics organized in 10 different spots in the PRIMA building; and the clinics were held once in a week in the PRIMA buildings on a rotating basis. The clinic remained open for 5 hours in each working day.

Hardware programs:







latrine distribution by the health facilitator

Installation of community latrine is one of the key activities of this project. In the period a total of 600 latrine (5 rings and 1 slab) sets have been distributed from the project. Aloshikha setup its own facilities at the branch office level for the production of latrine materials (ring and slab) recruiting local masons. Aloshikha distributed the rings and slab free of costs; where the community people shared all other costs such as carrying costs, installation costs and the costs for construction of shed and fence. For each community latrine, a committee has been formed to oversee the maintenance of the latrines.



To raise mass awareness on health, hygiene, sanitation, safe water use, arsenic, HIV/AIDS, etc. billboards construction is one of the major activities of the project. Accordingly, a total of 100 billboards have been constructed for the project at the roadside, rural growth centers, in front of schools, and other prominent places where people are gathering and at least they know the key messages from the billboards.



Deep tube well Installation system

For the project deep tube-wells (DTWs) have been installed in the different areas under three districts of Aloshikha. It cost Tk.38,000 to install each DTW of which community people share was Tk.8,000. A local contractor who nominated by Aloshikha and installation the DTWs with active participation of the community people.



Peoples enjoying drinking water after set-up a Deep tube well

A Case Study of Behaviour change



I am Bulbuli sarker age in about 35 years and I am household wife. Myhusband name is **Francis** sarker, age in 45 years village Rajihar, P.SAgailjhara, District Barisal, Bangladesh. He is a cultivator, we have a three son and one daughter.

deeply involved with Chandar Alo Village Health Club that ware organized by the one of health facilitator Aloshikha R.S.D Center. One day she was came to our mother club and began to disseminated and depicted on various problems of daily life as well as different issues. Behavior changes one of the most important issues we think. Be fore we did not know about the practices of behaviour. Now we are better informed by the Aloshikha health facilitator that how we could be covered our food, hand washing before taking daily meal, how to be wash both the hands with soap or ash back to latrine They provide basic health check-ups and other related services.

This is not only true for behaviour change, but also in relation to all issues of health and development. However, after her comment, we become aware of behaviour change and just we are trying to spreads this key message to our community as well as our relatives and neighbors and others to be ware of behaviour change. Every body should have to know what is behaviour change as long as to their living and life.

B. Computer Training Program

Computer Training:

> Mr. Har Beurskens Chairman of Aloshikha Foundation the Netherlands was denoted 13 reconditioned computers to the Aloshikha RSD center Bangladesh with a view to skill training in computer for unemployed youth (both the girls and boys) in target area and for job creation. In the light of the Aloshikha has been provided skill training in computer course on two Computer Operator Mr. Idrish khan and next Ms. Shikha Sarker from Techno Touch System Ltd. Dhaka. Presently the Aloshikha has been completed 4 batches including 16 participants with skill in computer training - 2009.



Computer training

Credit Union Program



The Aloshikha RSD Centre Bangladesh has started its journey on Development Training Credit Union Program Practically in 2007 under three districts which is located in south west part of Bangladesh. As a member-owned, not for profit financial cooperative, Development Training Credit Union Program is committed to our members. We will uphold our fundamental responsibility to actively serve our people within our field of membership, and as appropriate, the communities they live in. We will treat all members with respect and dignity. The Aloshikha has been organized seven credit union program in their respective areas. The chief accountant of Aloshikha was conducted monthly meetings. One credit union consists of 200 members as an average size. It was duly supported by the Rabobank Foundation the Netherlands as a pilot and demonstrative program.

C. Integrated Rural Health Support Programme

The Aloshikha RSD Center always gives more emphasis towards the child health care and nutrition's deficiency. In order to the Organization had an opportunity to receive continue support from SAKO Foundation that has obviously strengthening the capacity of outreach works among our Health Motivators. In the light of their visits to take the feedback of the community based health activities through field visits with health motivators and organizing the nutrition camp in the village. Last years Aloshikha was organized 12 nutrition camps at different villages among malnourished babies where 360 malnourished mothers were presence during nutrition camps. We motivated to the mothers about malnourished cause and consequences.



Health Motivator carefully measuring weight of pregnant mother.



Nutrition camp



Receiving money from resistance fund for treatment

Aloshikha has received a resistance fund from the SAKO Foundation (The Netherlands) for the poor patients whose are not able to bear the treatment costs

Integrated Rural support program:

Year	2004	2005	2006	2007	2008	2009
Monthly activities Monthly group-meetings discussion issues on hygiene, HIV, Antenatal care, growth monitoring and malnourished babies survey etc	2549	2740	2720	2830	2920	2885
Nutrition-camps for malnourished babies (annually)	12	12	12	12	12	12

D. Education program:

1. Maria Child Care Biddanikaton (Rajihar)

In 2009 Maria child Care Biddanikaton had an opportunity to receive 110 numbers of students and still trying to provide them as quality education and included creativity activities on regular basis. A parents meeting was held on school premises yearly 3 times with a view to quality education. In Bangladesh all the Kindergarten schools are mainly academic oriented and we put little emphasis on extra curricular activities towards the students.



Maria Child Care Biddanikaton (Rajihar).

2. Maria Child Care Biddanikaton staff with SAKO board member



Satla Nayakandi kindergarten school

E. Pre-school program.

Aloshikha is continuing 40 pre-schools since long and number of the students 1200. In our 40 pre-schools about 1200 students are getting quality of education by our competent teachers as well as free medical check-up, quality sanitation and hygiene facilities and nutritious feeding facilities. Our pre-school program is being continued supported by SK Foundation (the Netherlands). Aloshikha also offers a feeding programme for children where they are feeding milk and eggs four times in a week for ensure the nutrition deficiency.





Students Pity for pre-school children

Feeding program for pre-school students



Doctor checking the pre-school students

Aloshikha at a glance of pre-schools information 2004-2005-2006-2007-2008-2009:

Year	2004	2005	2006	2007	2008	2009
Pre-schools	40	40	40	40	40	40
Pre-school students	1200	1200	1200	1200	1200	1200
Kindergarden (School)	1	1	1	2	3	3
Kindergarten students	77	107	115	270	460	380
Kindergarten teachers		7	7	13	17	17
Pre-school teachers		40	40	40	40	40

F. Micro-credit program

The Micro-credit program is growing annually. Aloshikha working area are the remote villages in Agailjhara, Wazirpur, Kalkini, Kotalipara, Rajoyer and sadar Gopalgonj. In this low land area Aloshikha is reaching the poor communities and families. However Aloshikha could not fulfill all the demands of the beneficiaries.

The training program for beneficiaries and supervising, office staff and management will be continued in 2009.

The integrated approach of Aloshikha makes it possible to give a broad support to microcredit beneficiaries. Not only practical training on small business activities, technical training and support are given by Aloshikha, but also preventive, primary and curative healthcare are offered by Aloshikha. Many children of micro-credit group members are attending Aloshikha pre-schools.





Tailoring for income generating project

Receiving cash a group member

Micro-credit program:

<u>Micro-creait progr</u>	<u>am:</u>					
Year	2004	2005	2006	2007	2008	2009
Groups	342	395	341	332	395	444
Group-members	5,814	5,925	3,347	3,500	3754	3405
Loan amount	77,55,000	72,92,000	50,51980	67,0000	78,0000	-
Saving amount	22,11,882	23,30,741	27,74,137	27,0000	35,0000	-
Loan disburse	-	-	-	-	-	56,04,000
Loan out standing	-	-	-	ı	ı	72,43,700
Savings collection	-	-	-	ı	ı	9,81,966
Saving balance	-	-	-	-	-	43,84,481

G. PRIMA program.

A large numbers of people were presence during opening hour of PRIMA, where people were very much eager and welcomed to Aloshikha for their positive rolls. These PRIMA buildings will be used for multipurpose works after hand over to the community people and before Aloshikha will execute school cum satellite clinical program 2009 total 36 PRIMAs were established in our activities areas.



H. Agriculture:

Since 15 years ago Aloshikha was demonstrated to the community people for poultry farm business and it was very neglected business to the community people at that time with manifold problems such as bad smile from poultry faces, soft meat and only water inside an egg. So, Aloshikha has been achieved stupendous success through motivation and represented to the community people as model that it is a one kind of profitable business. Today there are many small poultry farms are being established surroundings areas behold with attention as model of Aloshikha poultry farm. It is really indeed, that community people have recognized as a pioneer of Aloshikha on poultry business.

In 2009 the profits of the poultry farm were increasing, although the marketing situation for broiler were very difficult, because of low meat-prices.

The dairy farm is a long-term investment and will be profitable from 2009. The number of cattle increased, several calves were born in 2009. This Aloshikha dairy farms also a model for the communities people because we are always with the community people for any kinds of facilities to establish small diary farms. Though it is a long-term investment but it is an old tradition for cow rearing among the community people.

Poultry:



Annual Report- 2009 21



Dairy farm

Poultry Agriculture:

Poultry increasing rate:

Year	2004	2005	2006	2007	2008	2009
Total eggs	2,52,000	2,72,000	1,97,317	2,00,000	2,51,240	150178
Total broiler	2100	2400	1200	2000	1000	427
Total Layer	2100	2000	1050	1800	1400	1056

Dairy and milk production:

Year	2004	2005	2006	2007	2008	2009
Milk kg.	10,220	10,950	4,272	4,170	3254	1872
Cows	31	37	28	18	12	9
Artificial insemination center	180	350	773	800	1199	1260

I. Maria Mother & Child Health Care Clinic program of Aloshikha

This hospital grant was obtained from the Government of Japan in 1997 for building and purchase and no administrative costs were included in this grant. Still we are working our activities since 10 years and all medical accessories using properly. We are proud and thanked to them for this grant

We are proud and thanked to the Chairman (Mr. Har Beurskens) of Aloshikha Foundation in the Netherlands who has accomplished and disposed innumerable activities for the hospital of Aloshikha since long and still his vigilant eye for whole activities of Aloshikha with soft hearted.

A semmi-pucca hospital named "Maria Mother & Child Health Care Clinic was constructed near the Aloshikha head office at Rajihar Union in 1997. In this hospital some advanced medical equipment was installed to serve the people in the working areas of Aloshikha. This working areas is situated in a low lying and ill-communicated areas where nearest health facilities as named government Thana Health Complex (THC) with limited medical services. Areas people are mostly depend on quack doctors, who are not as well trained as registered doctors and sever scarcity of the registered doctors. The above circumstances were the main reasons for Aloshikha to start a small hospital with advanced medical equipments and especial attention is given to the health condition of women and children.

This hospital started its services in January 1997 and although it is expected that eventually the hospital will be self-sustaining in the long run but it is impossible to be self-sustaining right from the start. Aloshikha hopes to reach this start of self-sustainability in shortest possible times.

Maria Mother & Child Health Care Clinic services though the trained health providers are as follows:

- a) In door/Out door 24 hours along emergency management
- b) Major/minor operation facilities
- c) Ante-natal, neo-natal and post-natal along incubation facilities
- d) Diagnostics facilities such as Ultrasound, Diathermia, incubator, ECG, X-ray, Blood, urine, stool, sputum etc.
- e) Resistance fund facility for the poor
- f) Patients referral (Ambulance) and out call facilities
- g) Family planning, safe motherhood, breastfeeding, HIV and hygiene counseling
- h) Audio/Video health conciseness program for out/in door patients
- i) Especial session on collaboration with the Bangladesh government such as EPT, NID, sterilization etc.



Being prepared for caesarian



In collaboration with Government and Aloshikha organized a meeting on health issues.

<u>Health:</u>
<u>Maria Mother & Child Health Care Clinic patients statistic:</u>

Year	2004	2005	2006	2007	2008	2009
Total patients	7212	7779	7702	7058	5536	4137
Female	3033	3024	3100	3231	2981	2384
Male	2031	1807	2100	2066	1576	1014
Child	1783	1795	907	1383	979	739
Total =	7212	7779	7702	7058	5536	4137
Deliveries	159	174	193	188	206	229
In-door patients	207	243	303	378	490	582
Ante-natal Patients	1	1751	913	631	856	907
Appendices	ı	-	-	-	66	131
Caesarian	ı	-	-	-	83	152
Minor OT	ı	-	-	-	17	25
Ultrasound through the pregnant mother	-	-	-	-	356	374

J. Special training for TBAs and Village doctors

In 2006 Aloshikha Foundation donated a grant for TBAs and village doctors training, which is being implemented by Aloshikha. It's a meticulous program because after receiving the training, trainees are trained to handle the patients with good care and easily they could find the risk factors. As consequences people are getting good health care and on the other hand pregnant women can be get medical assistance during deliveries period.



15 nos of TBAs are being prepared for receiving the training, which had been opened by Mr. Har Beursknes, Chairman of Aloshikha Foundation, The Netherlands

Village doctor training



Financial report:

Financial Report 2009 (No program activities)

	Subject	Income	Subject	Expenditure
1	Micro-credit		Staff Salaries	6200000
1	Service charge	1980000	Stall Salaries	020000
	Agriculture			
2	(a) Poultry	60000	Electricity Dill	144000
2	(b) Fishery	120000	Electricity Bill	144000
	(c) Dairy	10000		
3	Donation	4200500	Diesel Bills	96000
4	Patients	382650	Telephone	130000
5	Students	26000	Maintenance & logistic	199150
	Total	67,79,150	Total	67,69,150/-

Aloshikha R.S.D Center Board and staff

Alosh	kha Board
>	General board, 17 members
>	Executive board, 7 members
~	James Mukul Halder (Chairman)
>	Mr. James Mridul Halder (Secretary)
Advis	ory Board
*	3 members:
*	Mr. Joost Verwilghen
*	Mr. Ben Ernst
*	Annett's Pelgrim
Donoi	rs body
	Har Beursknes, Aloshikha Foundation, The Netherlands
	SIMAVI, The Netherlands
	SK Foundation, The Netherlands
	SAKO Foundation, The Netherlands
	MAX Foundation, The Netherlands
	CORDAID, The Netherlands

Staff:

General:	
Executive Director	1
Director clinic	1
Chief Accountant/Micro credit program	1
Assistant accountant	3
Computer Operator	3
Office assistant	3
Night guard	4
Total =	16

Micro-credit program:	
Micro credit director	1
Area Manager	6
Field Manager	18
Total =	25

Education program:		
Education coordinator		1
Pre-school teacher		40
Pre-school Supervisor		5
Kindergarten Headmaster		3
Kindergarten teacher		15
	Total=	64

Agriculture:	
Asst. Account	1
Poultry-staff	3
Dairy staff	2
Total=	6

Clinic program:	
Doctor	2
Nurse	4
Medicine salesman	1
Pharmacist	1
X-ray Technician	1
Pathology Technician	1
Sweeper	3
Total=	13

Integrated rural health support program	
Health supervisor	1
Health Motivator	8
Total =	9

Community Based Health & Sanitation program		
Program Director		1
Monitoring officer		1
Project officer		1
Training coordinator		1
Health facilitator		8
Paramedics		10
	Total =	22

Credit Union program		
Credit Supervisor		1
Credit Manager		7
	Total =	8
(Permanent Staff)	Total =	163

(as at December 31, 2009.)

Colophon

This annual report is a summary of the activities of Aloshikha R.S.D Center in the year 2009

Head Office

- > Aloshikha Rajihar Social Development Centre
- > Attn: Mr. James Mridul Halder
- > Executive director
- Village & Post: Rajihar
- ➤ Agailjhara
- Barisal district
- Bangladesh.
- ➤ Telephone: (88) 04323 56190
- ➤ Mobile: (ISD) 88 01711-548339, 01715-013099/01715-083487
- Fax: 88 04323 56190
- E-mail: <u>aloshikh@btcl.net.bd</u>, <u>jmhbd2003@yahoo.com</u>,
- ➤ Web side: www.aloshikhabd.org.

Communication Office

- * Mr. James Mukul Halder
- **❖** Chairman
- ❖ 17/1 Indra Road (ground floor)
- * Tejgoan, Dhaka 1215
- * Bangladesh.
- ❖ Mobile: 88-01711-541563 (ISD)
- Arr Phone: 0088 02 9120177 or 02 9138574
- ❖ E-mail: jmhbd2003@yahoo.com
- * Web side: www.aloshikhabd.org

Government Registration

- o Aloshikha R.S.D Center is registered with
- o The Department of social service of The People's
- o Republic of Bangladesh

Social Welfare

□ Registration Number 426/1985

Foreign Donation

□ Registration number DDS/FDO/R-324

Bangladesh Bank

□ Micro credit regulatory authority registration number 04982-01293-00242

Ministry of health and family planning

□ Family planning sector (Health ministry) Number – 251/2009



Yearly staff's conference for 2009