

YEARLY REPORT 2011



ALOSHIKHA

Rajihar Social Development Centre
Rajihar, Agailjhara, Barisal

Annual report - 2011



MESSAGE FROM THE EXECUTIVE DIRECTOR

Aloshikha RSD Center is very much glad to presenting the Annual Report of the year 2011. Aloshikha means the flame of the candle which brings light in the darkness of illiteracy, social, economical and health problem, since over the 27 years Aloshikha RSD Center is trying to solve these problems in our working area through our integrated program and project. We are still trying to ignite the light to the community people, to improving step by step their living condition.

The achievement we have made this year that were only possible to commitment from our dedicated board members, skilled and efficient staffs and support of foreign donors-agencies and well cooperation of other NGOs who were immensely worked in our areas and also we are grateful to Bangladesh Government for amazing cooperation. We like to thanks and congratulation all those who helped us to fulfill our dream.

A handwritten signature in black ink, appearing to read 'James Mridul Halder'. The signature is stylized and somewhat cursive.

James Mridul Halder
Executive director.

Aloshikha Rajihar Social Development Center

Annual Report - 2011

Introduction:

We never thinking this planet can be fragments by the narrow feelings of communalism or political conflicts. We live in one of the poorest country in south Asia where a limited scope of access our basic needs. We have to face various critical problems due to geographical point of view and over populated situation in the country where poverty is perpetual. In the context of the Aloshikha RSD Center has taken meticulous development initiatives to address the plight and problems of vulnerable poor community in the southern part of Bangladesh and covering the three districts. The Aloshikha RSD Center Bangladesh is a well reputed social development NGO working to empower the rural poor in the southern part of Bangladesh since 27 years. The Aloshikha come into being after liberation war of Bangladesh. In 1985 a social development program was launched to assist the poorest in community development mainly to improving health and sanitation, child education and women economic activities. During the year the Aloshikha was the leading non-government agency in the southern part of Bangladesh. It is also created with introducing many major innovations like deep tube well installation and latrine production and distribution was remarkable services among the poor community and promoting child education are most famous innovation. By the late 1995 an integrated comprehensive program superseded its sect oral work, focused on concentrated group organization of the poor, emphasizing social, education and economic elements. Since the Aloshikha successes have included the community based health and sanitation program to improving life on the out reach and remote villages are raising awareness of women rights and women empowerment, promoting savings, credit and skill training to improve the livelihoods of the poor section of the community. The Aloshikha program continues to evolve and innovate; current realities mean the program now comprises a range of various projects and financing large and small, which all contribute to a common objective. However, we are always encouraging to the local communities to developing all form of education in general or vocational education that could be make them smart and expertise to engaged any job or self supportive or self-employments (MVTC) program.

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 Gopalganj, 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.
- To create employment opportunity and job replacement among the local unemployed youth both the girls and boys and to export skill work force to the international labor market a vocational training center has launched in the Aloshikha complex.

Special events for 2011.



Construction of new cavity is for two storied hospital building within the Alosikhya complex. It had an opportunity to construct a new two storied building by supporting the Embassy of Japan in Bangladesh. Hope so it will be creating low cost health service delivery among the rural poor community.



The MCC team helps in to Sukanto a boy who needs to be heart operation.). The team of medical checks for the children (MCC) the Netherlands one of the renowned charity health service provider in the Netherlands. In the last five years the team was exclusively checks in to the pre school children and provided them free medication according to their project plan. In the current year the team able to find out one of pre school student Sukanto who is suffering serious heart diseases and operation should be necessary. In view of the team instantly donated one thousands EURO as operation cost and referred to Dhaka for save the life through heart operation.



The picture shows the Joost family Netherlands.

The Executive Director of Aloschikha and his better half Mrs Martha Halder went to the Netherlands in the month of September 2011. They were also visited house of Joost who is very well known as one of important advisor of Aloschikha RSD Center Bangladesh. It was a courtesy family visit that took place on 12 September 2011.



The Executive Director immensely visited one of Primary school in the Netherlands and also visited house of Corrine and get together with all family members.

Mrs Corrine one of the important well wisher of Aloshikha RSD Center and her dedication and dynamic service was really incomparable that we never forget. In the picture shows that Mrs Martha Halder the Chairman of the Aloshikha wishes many happy returns to the entire family members in the Netherlands.



The SK Foundation the Netherlands is one of the imperative donor and development partners of the Aloshikha RSD Center in Bangladesh. The Chairman and Executive director of the Aloshikha jointly visited the SK Foundation office in the Netherlands and including SAKO foundation Chairman.



Mr. James Midul Halder and Mrs Halder closely talking in the SK Foundation Office in the Netherlands.



A meeting was held on at Aloshikha head office level together with the Doctor of the World team and Aloshikha key level staffs.

It was a remarkable discussion where possibilities to rejuvenating the rural poor cleft palate and post burn contracture patients through plastic surgery operation. Eventually the team was agreed with us, to work on the issue in collaboration with government and non government level.



The Executive Director exclusively visited to the MAX Foundation with all board members the Netherlands.

The MAX Foundation the Netherlands one of the world renowned charity organization devoted to working on safe water use and sanitation and hygiene promotion in the poorest country of all over the glob. In Bangladesh the Aloshikha RSD Center was the first development partner and had an opportunity to working together to access safe water use and sanitation and hygiene promotion at rural level among the most vulnerable poor community through deep tube wells installation and latrine distribution. Hope so the endeavor made able to reduced child mortality and ensure safe water use and promoting hygiene practice in the area.



The picture shows the James Halder and Mrs Halder both are visited Meieke house the Netherlands. She was wife of Mr.Har Beurskness the Chairman of Aloshikha foundation and also Development Advisor of Aloshikha RSD Centre Bangladesh.



Mr. KC Biswas received a violin from the Chairman of Aloshikha foundation the Netherlands.

Mr. Har Beursknes is the Chairman of the Aloshikha Foundation the Netherlands one of the most important and potential source of funding for all out development endeavor of Aloshikha. He felt that multidimensional cultural heritage and traditional music also the integral part of the cultural development. In the light of that one violin he carrying from the Netherlands and presented to Mr. K. C. Biswas and expecting on listen to wail and canorous traditional tune.



The Executive Director Mr. Jams Mridul Halder and Mrs Martha Halder were passed off their emotional time out side of the Ben Ernst/Annette Pelgrim house the Netherlands.

Mr. Ben is one of the vital advisors of the Aloshikha from the very beginning of its development journey. He is only the dreamer of established of PRIMA -I system at out reach and remote villages to ensuring pre primary education. He was known as man of fine test in our locality and extraordinary intellectual sagacity and remarkable for his special contribution and holistic services to the Aloshikha RSD Center Bangladesh.



Medical checked-up by Maaike for pre school children (2011).

In the last 5 years the MCC team the Netherlands were checked our pre school students at the remote villages by providing their free medication and primary health care education. It was a meticulous approach for poor out reach disadvantaged children. The team was leaded by Maaike who is remarkable for her dynamic and holistic service that created the program more luminous and enliven in Bangladesh.



The Alosikhha always to believe to conserving the countries biological diversity. It is crucial that over the years Bangladesh has lost both land and water ecosystems along with the different forms of they contain. It is needless to say that day after day and year after years many spices of plants and animals are on the verge. It is the appropriate time for urgent need of saving the biodiversity. In view of the organization has started Spotted Deer conservation program that was a very small program and initially only two spotted deer has taken on trail basis conservation program. So far, after one year the deer couple gives us one young calf of deer. However, actually deer are a unique group of mammals recognized for their grace of beauty. They are mostly the inhabitants of forest and grass land.



Dr. Mr. N.P.J. (Jo) Vreuls donation to scissors equipment of Alosikhha hospital (Maria Mother and Child Health care

The Maria Mother and Child Health Care Clinic is a low cost health service delivery institution. It is one of the important programs which is running under the shadow of the Alosikhha RSD Centre and always devoted to service in to the poor community people in the area. Until very recently Dr. Mr.N. P. J.(jo) Vreuls who came to this clinic from the Netherlands and kindly may considered us some potential medical equipments that were very essential to the operation table and relating other uses.

ABM Siddiqure Rahman one of curricula specialist of Bangladesh Technical Board who have come to the Center for inspection in view of released registration for vocational training center and approval of trade courses.



A. Community based health & sanitation program

The Community Based Health and Sanitation Program one of the important activities rather than other projects of Aloshikha RSD Center. The project was supported by the Simavi the Netherlands since 2007 and still activating in the rural target area. In the late 2007 the project was started to promote safe water use and sanitation and hygiene promotion among the rural community. Most importantly the project has the provisioned in the part of soft ware activities to ensuring child and women rights advocacy program through cultural show by organizing cultural team, form of village Mother Club and to organizing adolescent groups. According to the project there are 200 Mother club were formed per year (one mother club consists of 30 rural active women) and subsequently as of total 1000 Mother club were formed in the last 5 years. It is estimated that as of total 30000 thirty thousand rural women are much aware and better informed their rights and related other important issues and key message were strongly disseminated by the health facilitator among the rural women community.

In the last five years there has been 180 adolescent groups were formed (one group 20 adolescent girls) and as of total 900 nine hundred adolescent groups formed in last five years. It means approximately 18000 eighteen thousand adolescent girls were better informed their reproductive health and sexual rights including other relating issues and key messages which disseminated by health facilitator as to their working schedule.

Soft ware program/sanitation rally:

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.



Culture show (pop song) at Vhurgata



*Village health club groups leaders
Training for Health sanitation*

It was to provision of the Community Based Health and Sanitation Project there are 200 Mother club were formed per year (one mother club consists of 30 rural active women) and as of total 1000 Mother club were formed in the last 5 years. It is estimated that as of total 30000 thirty thousand rural women are much aware and better informed their rights and related other important issues and key message were strongly disseminated by the health facilitator among the rural women community.

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Staff development Training

Training is crucial to be any development approach in view of the Alokikha arranged training for its staffs on water, sanitation and hygiene practice in its office premises by an expert trainer. A total of 26 staffs were participated in this training. The training was for 7 days long. Pre-test and post-test sessions were arranged among the trainees. The average marks obtained in pre-test was 40% while it was 90% in post-test session. The result indicates that this training helps the trainees to gather and increase knowledge on water, sanitation and hygiene practice. This training will help the participants to conduct relevant sessions at field level as well as they would be able to deliver proper and appropriate information in any events.

Though the Bangladesh is low prevalence of HIV/ AIDS in spite of as of total 20 batches of HIV & AIDS orientation organized from the project running the working period that including 1st year, a total of 10 batches of orientation completed so far from the project whereby a total of 400 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



HIV/AIDS Training

To aware adolescent girls about reproductive health, reproductive health education sessions will be arranged among adolescent girls by forming adolescent groups in intervention areas. An adolescent group is consisted of 15 adolescent girls. Paramedics Volunteer recruited for satellite clinics conducts education sessions among adolescent groups. Community Health Facilitators also assist them to conduct these sessions. One Paramedics Volunteer conducts 2 sessions in every day and works on it for 5 days along with 1 day work in satellite clinic in every week. As a result one Paramedic conducts 40 sessions with 40 adolescent groups in every month.



Adolescent group workshop

A total of 220 adolescent groups are formed in working areas by 12 Paramedics Volunteers where a total of 3300 adolescent girls are enrolled in education sessions during the reporting period. There is a target to arrange 2640 education sessions with adolescent girls which are achieved properly during this reporting period



Doctor checking the children into the satellite clinic.

Satellite Clinic. The Satellite Clinic was established by the Aloshikha RSD Center and main focus of the program is to ensuring primary health care service as remote areas by providing health and family planning services among the poor population. Specific aims of these clinics are to provide health and family planning services to rural residence that live far away from medical facilities, to make people aware of services available at the Satellite clinic centers, and to provide liaison services to village level field workers. The average clinic have seen at the 12 satellite facilities is 24 days in a month, many of whom referred by family welfare assistants active in the community.

Satellite Clinic are an effective way to provide basic primary health care services to people living in out reach areas particularly women and children. A satellite clinic is a small boat that carries a team of one paramedic one health educator and or nurse including one medical doctor to remote areas. These group set scheduled weekly clinic in a designated area in most of the remote areas which is communicated to the remote area dwellers ahead of time, through community health workers.

The organizations family planning program has a special focus on long term methods and offers motivation and counseling contraceptives distribution (oral pill and condom) NSV, tubectomy, injectables and inserting Norplant and IUD to ensure uninterrupted availability. It is very common to found that the areas majority of populations are malnourished,

A Case Study of Nasima Begum about family planning and reproductive health.



I am Nasima Begum and my age is only 40 years. My husband's name is Malek Hawlader and he is 50 years old. We are living at village of middle Bakal, Agailjhara Upazila under Barisal District Bangladesh. We have two daughters and one son. My daughter and son are still studied education in school levels. However, I am surely one of household wife and happy with my limited worldly goods and surroundings.

One day Mrs Rina Baroi who is one of the development worker and health facilitator from Alosikhha RSD Center came to my home and request me to join as to Gondharaj adolescent group that was newly formed in our area and one of my daughter also member of the adolescent group. Eventually I was joining in the group and come to know one meeting will be held on monthly one time as selected day. However one of the meetings the health facilitator was immensely explains about why family planning to be need and how to be applying family planning method and reproductive health and why more children are cause of poverty what reason behind the children are not to be educated and what barrier to play their cognitive development. I was amazed and surprised to know about such information. Before joining the group I was not much enough informed about how to be applying family planning method and reproductive health.. Now I better informed and have much knowledge on the issue. I went to the group regularly in selecting day. Just I am trying to ventilate this key message to our relatives and neighbors to follow on the issue in their daily life. In a word I was very grateful to health facilitator of Alosikhha RSD Center to her presented such meticulous approach that able to inspired me to change my daily life style in better way.

100% Sanitation coverage declaration hardware & software programs Bhagalbari & Bhuterbari:



The Alosikhha RSD Center was declared 100% sanitation coverage at Bhuterbari and Bhagalbari villages through installation deep tube wells and constructed sanitary latrine. The news was published different media and daily news papers and that supported by the Max Foundation The Netherland.



Bhagalbari & Bhuter bari 60 deep tube wells installation

B. Computer Training Program & Credit Union Training:



Computer training examination

Mr. Har Beurskens Chairman of Aloshikha Foundation the Netherlands was donated 8 modern 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 Mr. Samson from Techno Touch System Ltd. Dhaka. Presently the Aloshikha has been completed 3 batches including 15 participants with skill in computer training -2011.



Credit monthly meeting

The Aloshikha RSD Centre Bangladesh has started its journey on Development Training Credit Union Program Particularly 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 500 members as an average size. It was duly supported by the Aloshikha Foundation the Netherlands as a pilot and demonstrative program.

C. Integrated Rural Health Support Programme



Health Motivator carefully measuring weight of pregnant mother



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 372 malnourished mothers were presence during nutrition camps. We motivated to the mothers about malnourished cause and consequences.



Receiving money from resistance fund for treatment

The resistance fund one kind of emergency support for medical treatment who are financially stagnant and economically disabled and in the view of the Alosikha has received a resistance fund from the SAKO Foundation (The Netherlands) for which vulnerable local people can overcome the emergency situation easily. In the last year we able to provided medicine for treatment and cash money among the at least 419 vulnerable people in the community.

D. Education program (Kindergarten school):

In 2011 three Kindergarten school had an opportunity to receive 450 numbers of students and the authority is trying to provide them as quality education and included creativity activities on regular basis for their cognitive development. A parents meeting was held on school premises yearly 3 times with a view to how they achieved quality education. In Bangladesh all the Kindergarten schools are mainly academic oriented and we put little emphasis on extra curricular activities towards the students. In addition the organization has able raise voice against the child abuse and child trafficking and their rights, road safety and to promoting their cultural heritage.



3 Kindergarten school teachers

E. Pre-school program

It goes back 15 years the Aloshikha is operating 40 pre schools in the different part of the Barisal Madaripur and Gopalganj district. According to provision of the project every pre school have 30 children age about 5 to 6 and course duration of two years only. It is estimated that after two years of learning about 600 children able to admitted to the government primary school. During the learning period children were better informed about their rights and abuse and child labor and trafficking and related issues. In our 40 pre school a total of 1200 children were enrolled every day during school period. They are getting free medical check up and quality sanitation and hygiene facilities and nutritious feeding facilities.



New Uniform for the pre-school children



Feeding program for pre-school students

Aloshikha at a glance of pre-schools & Kindergarten information 2006-2007-2008-2009-2010-2011:

| Year | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |
|-----------------------|------|------|------|------|------|------|
| Pre-schools | 40 | 40 | 40 | 40 | 40 | 40 |
| Pre-school students | 1200 | 1200 | 1200 | 1200 | 1200 | 1200 |
| Kindergarden (School) | 1 | 2 | 3 | 3 | 3 | 3 |
| Kindergarten students | 115 | 270 | 460 | 380 | 410 | 450 |
| Kindergarten teachers | 7 | 13 | 17 | 17 | 21 | 21 |
| Pre-school teachers | 40 | 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 Gopalganj. 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 2011.



Staffs Monthly meeting

The integrated approach of Aloshikha makes it possible to give a broad support to micro-credit 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.



loan disburse

Micro-credit program:

| Year | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |
|--------------------|-------|-------|------|-----------|-------------|-------------|
| Groups | 341 | 332 | 395 | 444 | 373 | 390 |
| Group-members | 3,347 | 3,500 | 3754 | 3405 | 2954 | 3054 |
| Loan disburse | - | - | - | 56,04,000 | 1,27,46,000 | 1,85,15,000 |
| Loan out standing | - | - | - | 72,43,700 | 82,16,480 | 1,12,92,490 |
| Savings collection | - | - | - | 9,81,966 | 16,55,003 | 24,61,600 |
| Saving balance | - | - | - | 43,84,481 | 45,42,886 | 56,79,891 |

G. Fishing program.



Actually the fish play an important role in the Bangladeshi diet constituting the main and often irreplaceable animal source food in poor rural households. The study addressed the dietary contribution of fish to vitamin A, calcium and iron intakes and the potential of integrating small indigenous fishes. In the light of the Alosikha has undertaken fish cultivation program in its own water bodies both the high varieties and local indigenous species.

Rice and fish dominate the diet of Bangladeshis to such an extent that the old common proverb "machee bhatee Bengali" which can be translated as " Fish and rice make a Bengali" continues to hold true. Fish is an essential and irreplaceable food in the rural Bangladeshi diet. Together with boils rice, this is eaten at least twice per day with small amount of vegetables and fish make up the typical meal.

Bangladesh is dominated by floodplains and rivers, which are rice ecosystems for fresh water fish. The floodplains which comprise over half of the country, are inundated annually during the monsoon season, and agriculture and natural fisheries complement one another. In the monsoon to post monsoon season (June to November) the floodplains provide an ideal habitat for the wide diversity of wild fish species, whereas in the dry season, the land is cultivated with rice. However, the importance of fish as a rich source of animal protein is well established and this is frequently used to justify fish as a valuable food, whereas very little attention has been given to the role of fish in supplying vitamin A and minerals in the diet.

H. Poultry and Dairy Program:



Poultry Farm

Since 18 years ago Aloshikha inspired to the community people for poultry farm business and it was much neglected business to the community people due to 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. Presently it seems to be a profit making program since 2011 -2000 by reared up high breed layer hen that were both the purposes table and eggs.



Dairy farm

The Aloshikha has started its cow rearing program through Dairy Farm concept since 2011 and initially grassing for 9 cows, in view of to ensure pure milk production and sustainable supply to the local community as low cost. Unfortunately the program had not been profit making due to some adverse environment such lack of cow feed and inadequate grass land, low-lying flood prone area and have not seen abundantly high land where cows are grassing freely. In the following reason behind the program will be gradually going to be closed down.

Poultry Agriculture:

Poultry increasing rate:

| Year | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |
|---------------|----------|----------|----------|--------|--------|--------|
| Total eggs | 1,97,317 | 2,00,000 | 2,51,240 | 150178 | 227841 | 163105 |
| Total broiler | 1200 | 2000 | 1000 | 427 | - | - |
| Total Layer | 1050 | 1800 | 1400 | 1056 | 751 | 1690 |

Dairy and milk production:

| Year | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |
|--------------------------------|-------|-------|------|------|------|------|
| Milk kg. | 4,272 | 4,170 | 3254 | 1872 | 3814 | 1742 |
| Cows | 28 | 18 | 12 | 9 | 6 | 9 |
| Artificial insemination center | 773 | 800 | 1199 | 1260 | 1563 | 1762 |

I. Maria Mother & Child Health Care Clinic program

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 14 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 Alosikhka Foundation in the Netherlands who has accomplished and disposed innumerable activities for the hospital of Alosikhka since long and still his vigilant eye for whole activities of Alosikhka with soft hearted.

A semi-pucca hospital named "Maria Mother & Child Health Care Clinic was constructed near the Alosikhka head office at Rajihar Union in 1997. In this hospital some advanced medical equipment were installed to serve the people in the working areas of Alosikhka. This working area 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 Alosikhka 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. Alosikhka 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.



Doctor and nurse were prepared for caesarian operation.



In collaboration with Government and Aloschikha organized by permanent family planning system.

The Bangladesh is one of the largest densely populated countries as to its geographical area. In that sense over population is another social issue that we faced everyday. In the view of point the organization has started family planning program including reproductive health and sexual rights of young adults in their target respective area. The main objective of the project was to controlled population by providing family planning method and raising mass awareness on the issue among the community. The organization has affiliated from the Ministry of Health and Family Planning Bangladesh Government on August 3-2009. The program has possible to achieve a stupendous success on the field levels family planning activities in collaboration with Bangladesh government family planning departments. Over the year it had possible to provided permanent birth control system through tubectomy for 51 women and vasectomy for male 5 and IUD for women-8 and implant provided to the 16 women that was merely praiseworthy task for the organization.

Health:

Maria Mother & Child Health Care Clinic patients statistic:

| Year | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |
|--|------|------|------|------|------|------|
| Female | 3100 | 3231 | 2981 | 2384 | 2373 | 2660 |
| Male | 2100 | 2066 | 1576 | 1014 | 869 | 936 |
| Child | 907 | 1383 | 979 | 739 | 954 | 765 |
| Total = | 7702 | 7058 | 5536 | 4137 | 4196 | 4361 |
| Deliveries | 193 | 188 | 206 | 229 | 217 | 288 |
| In-door patients | 303 | 378 | 490 | 582 | 957 | 1055 |
| Out-door Patients | - | - | - | - | 3439 | 3306 |
| Appendices | - | - | 66 | 131 | 177 | 318 |
| Caesarian | - | - | 83 | 152 | 243 | 337 |
| Minor OT | - | - | 17 | 25 | 33 | 55 |
| Ultrasound through the pregnant mother | - | - | 356 | 374 | 353 | 475 |

J. MVTC Program

The Aloskhia is operating one vocational training center within its complex. The main focus of the program is to create job replacement among the rural unemployed youth, both girls and boys. Until very recently, the Center has affiliated from the Bangladesh Technical Education Board (BTEB) as SSC Vocational Course. In respect of only four trade courses are activating such as Mechanical, Welding Fabrication, Tailoring and dress making and Electrical out of welding trade, other three trade has been approved by the Bangladesh Technical Board. According to the requirement and curricula of the technical Board, every trade course has the 30 students as both the girls and boys. The center has been able to convince the local unemployed youth that vocational education is only the resource for income generating process and job facilities at national and international labor market.



Final examination of vocational training center was held on 2010-2011.

Mr. Sultan Ahamed, one of the high officials, came from the Bangladesh Technical Education Board and visited our vocational training center in view of approval of trade courses and affiliation, which would be upholding legitimate linkage between both the Center and the Board.



Mechanical trade. In 2011, 15 students were enrolled in the Mechanical trade. Out of 15 students, 13 students passed the final semester examination. Garments & tailoring. In the Garments and dress making trade, there have been 15 girls students appeared in the final semester examination but 13 were successfully passed the examination.

MVTC Program



Electrical trade. In the Electrical trade there had been 15 students were admitted out of that 14 students have been successfully passed the final semester examination which was held on February 2012.

Welding trade In 2011 there are 13 students were admitted in to the Welding Fabrication trade and out of the total student in the trade 12 were successfully passed he final semester examination.



Financial report:

Financial Report 2011

(No program activities)

| | Subject | Income | Subect | Expenditure |
|---|--------------------------------|--------------------|------------------------|--------------------|
| 1 | Micro-credit Service charge | 22,94,993/- | Staff Salaries | 80,04,940/- |
| 2 | Agriculture | | Electricity Bill | 2,60,473/- |
| | (a) Poultry | 32,000/- | | |
| | (b) Fishery | 1,42,000/- | | |
| | (c) Dairy | 18,000/- | | |
| 3 | Donation | 62,50,000/- | Diesel Bills | 2,78,620/- |
| 4 | Patients | 2,18,050/- | Telephone | 1,53,600/- |
| 5 | Students | 27,590/- | Maintenance & logistic | 2,85,000/- |
| | Total | 89,82,633/- | Total | 89,82,633/- |

Aloshikha R.S.D Center Board and staff

| |
|---|
| Aloshikha Board |
| ● General board, 17 members |
| ● Executive board, 7 members |
| ● Mrs. Martha Halder (Chairman) |
| ● Mr. James Mridul Halder (Secretary) |
| Advisory Board |
| ● 3 members: |
| ● Mr. Joost Verwilghen |
| ● Mr. Har Beursknes |
| ● Mr. Ben Ernst/ Annette Pelgrim |
| Donors body |
| ● Aloshikha Foundation, The Netherlands |
| ● SIMAVI, The Netherlands |
| ● SK Foundation, The Netherlands |
| ● SAKO Foundation, The Netherlands |
| ● MAX Foundation, The Netherlands |
| ● Japan Embassy, Dhaka, Bangladesh |

Staff:

| General: | |
|---------------------------------------|-----------|
| Executive Director | 1 |
| Chief Accountant/Micro credit program | 1 |
| Assistant accountant | 3 |
| Computer Operator | 2 |
| Office assistant | 3 |
| Night guard | 4 |
| Total | 14 |

| Micro-credit program: | |
|------------------------------|-----------|
| Micro credit director | 1 |
| Area Manager | 7 |
| Field Manager | 18 |
| Total | 26 |

| Education program: | |
|---------------------------|-----------|
| Education coordinator | 1 |
| Pre-school teacher | 40 |
| Pre-school Supervisor | 5 |
| Kindergarten Headmaster | 3 |
| Kindergarten teacher | 21 |
| Total | 70 |

| Agriculture: | |
|---------------------|----------|
| Asst. Account | 1 |
| Poultry-staff | 2 |
| Dairy staff | 1 |
| Total | 4 |

| Clinic program: | |
|------------------------|-----------|
| Clinic Director | 1 |
| Doctor | 2 |
| Nurse | 4 |
| Medicine salesman | 1 |
| Pharmacist | 1 |
| X-ray Technician | 1 |
| Pathology Technician | 1 |
| Sweeper | 4 |
| Total | 15 |

| 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 |
| Health facilitator | 6 |
| Paramedics | 12 |
| Total | 21 |

| MVTC Program | |
|-----------------------|-----------|
| Vice principal | 1 |
| Instructor | 4 |
| Ass. Instructor | 6 |
| Caretaker/Night guard | 4 |
| Total | 15 |

| Credit Union program: | |
|------------------------------|--------------|
| Credit Supervisor | 1 |
| Credit Manager | 7 |
| Total | 8 |
| (Permanent Staff) | Total |
| | 182 |

(as at December 31, 2011)

Colophon

This annual report is a summary of the activities of Aloshikha R.S.D Center in the year 2011

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, 01715-227525
- Fax: 88 - 04323 - 56190
- E-mail: aloshikhabd@yahoo.com/aloshikha@gmail.com
- Web side: www.aloshikhabd.org.

Communication Office

- Mrs. Martha Halder
- Chairman
- 8/Gha Sadhanpara East Rajabazer (1st floor)
- Tejgoan, Dhaka - 1215
- Bangladesh.
- Mobile: 88-01745734843
- Phone: 0088 - 02 - 9138574
- E-mail: aloshikhabd@yahoo.com/aloshikha@gmail.com
- Web side: www.aloshikhabd.org

Government Registration

Aloshikha R.S.D Centre is registered with the Department of social service of The People's Republic of Bangladesh

Social Welfare

- Registration Number 426/1985

Foreign Donation (NGO Bureau affairs)

- Registration number DDS/FDO/R-324

Bangladesh Bank (MRA)

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

Ministry of health and family planning

- Family planning sector (Health ministry) Number - 251/2011

Bangladesh technical education board (BTEB)

- (BACKBO (VUK/2011/4076 Dated: 19/12/2011

Pador:

- Europe aid ID: BD-2011-CYC-2001775404

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Yearly conference for 2011

Every year the Aloshikha RSD Center organized yearly conference within its complex. All of board members, staffs and out side distinguished guests are celebrated exclusively the event such as chief guest, Rita Sen, join secretary Ministry of establishment Bangladesh Government, Special guest Mr. Dipankar Biswas Upzila Nirbahi officer, Agailjhara, Barisal, Mr. Kanchi Lal Das Chartered Accountant, MD. Akramul Biswas, Executive Director ATMABISWAS and others.