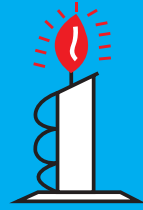
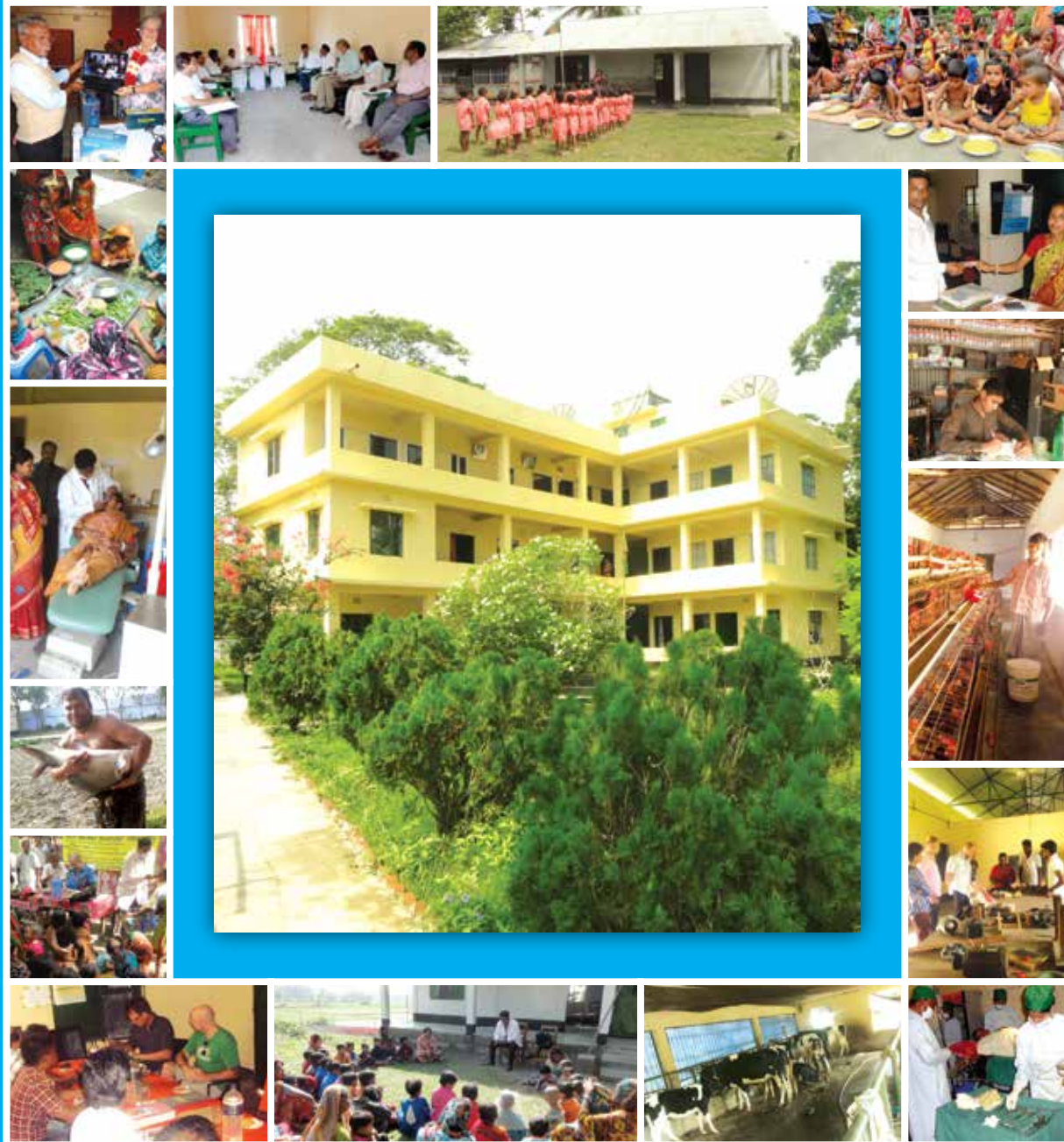


Annual Report 2013



ALOSHIKHA

Rajihar Social
Development Centre



Rajihar, Agailjhara, Barisal, Bangladesh



MESSAGE FROM THE EXECUTIVE DIRECTOR

Aloshikha has passed a challenging and very productive year of 2013. We would like to express our thanks and appreciations to all of our stakeholders, volunteers, policy makers, donor communities and various networks and conditions for their it reflects in the vision of Aloshikha, it is committed to continue its support for the underserved and marginalized people especially in the hard to reach areas. It gives me great satisfaction to see that we have been able to serve the most in need people of Bangladesh in the areas of education and reproductive health and vocational training and education and rights. Once again our staffs have shown their dedication and hard work. But we do believe that more need to be done and for this we are constantly undertaking improve projects and initiatives under various programs in response to the needs of our beneficiaries. In order to all funding agencies and donors are requested to fund us to embark on activities for the marginalized and disadvantaged people who were deprived from services and victims of social inequality.

We had to face challenges in accomplishing the planed activities. Limitations and challenges have been mentioned in this report with an indication of ways to overcome those. The needs of our service users are at the heart of everything we do and as you learn more about our values you will understand why offering quality services is integral to what we do and what we are.

2013 was a momentous year for Aloshikha RSD Center Bangladesh. Just we celebrated 36 years of operations from our inception, and that has been a challenging journey, with active support from the people of the southwest region and generous support from development partners. We have made significant differences to the lives and landscape of this disadvantaged region.

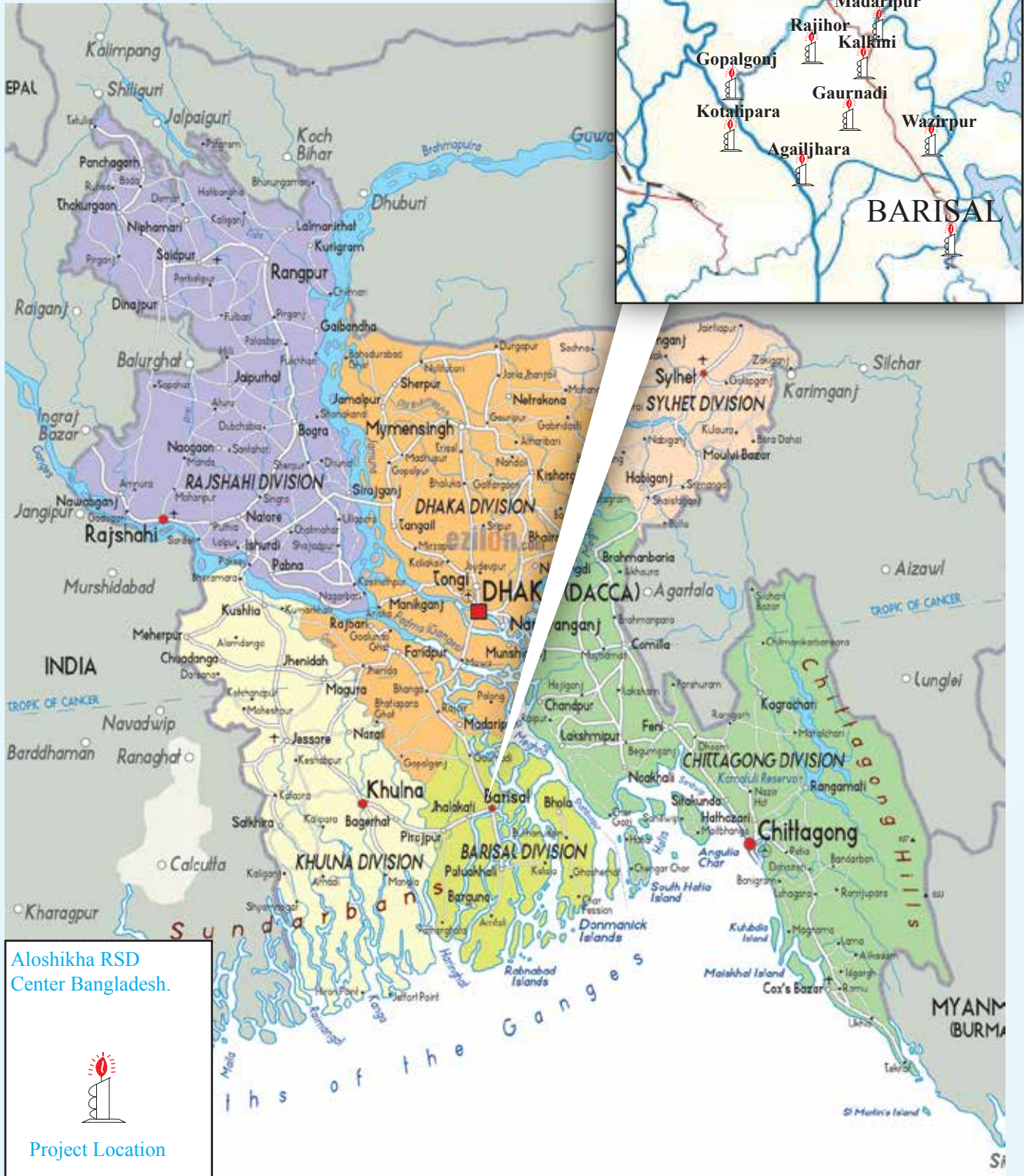
I am sure this annual report will justify our effort and once again prove that given the opportunity we can make differences in people's life. I am looking forward to next year for more exciting achievements. I would like to extend my thanks and gratitude to responsible colleagues who worked hard to publish this report.

A handwritten signature in black ink, appearing to read 'James Mridul Halder', written over a horizontal line.

James Mridul Halder
Executive director.

Core Values:

- Innovation
- Empowerment
- Comprehensiveness
- Compassion, loyalty and commitment.
- Equality and participation
- Integrity, dedication, and professionalism.
- Responsibility, accountability and transparency.



Welcome to Aloshikha RSD Center Bangladesh.

Annual Report – 2013

Introduction

Empowering the rural poor is a prerequisite for sustainable development and exercise of their rights. It requires challenging exclusion, discrimination and exploitation of and against the landless, women, indigenous people and other dispossessed. The Aloshikha RSD Center Bangladesh is a professionally managed not for profit making charity based social development organization, registered with the social welfare ministry, NGO Affaires Bureau, micro credit regulatory and also affiliated by the ministry of health and family planning department in Bangladesh. The Aloshikha is committed to address various social and economic problems of the economically depressed and vulnerable groups in general. Empowerment of communities is a central focus issue of all Aloshikha's development initiatives. Over the years, the organization has extended its geographical, beneficiary and programmatic coverage quite significantly. The long term development program now includes education both non formal and vocational training education, micro finance, poultry and fishery and water supply and sanitation. All this work is aimed at supporting disadvantaged poor people. Over the year we have to face many difficulties and challenges with political unrest and natural disaster as well as financial constraints.

In 1985 a social development program was set out 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 which 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.

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:

1. To create awareness on the importance of child and blow education among local people.
2. To create awareness on health, sanitation, women development issues and community problems among local people and to encourage them to change the present situation.
3. To organize targeted poor people in small groups and make them skilled through education, training's work shops and meetings etc.
4. To encourage and motivate poor people to take steps to reduce their problems, improve their health conditions and their income.
5. 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.
6. To provide among children and their development through nutrition coverage, child health education, nutritious food, creativity materials etc.
7. To provide the safe water supply for hygienic health through the DTWs and distribution sanitary latrine to the community people as sanitation coverage.
8. To encourage and convinced to the community people to provide renewable energy as solar system technology for alternative electricity.
9. 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.

Women rights:

The situation of women in Bangladesh is still one of insecurity, low social status and economic dependence. But many women believe equality, equal rights, freedom from violence, free choice and full participation in all areas of society, political and work should be more than just dreams. The Aloskhikha agrees and actively promotes women and women's issues in everything it does areas of concern for poor rural women include: their legal rights, gender equality at family and community level: domestic violence: sexual harassment and rape: reproductive health provision, trafficking of women and girls and migrant women, early marriages and dowries. Awareness raising advocacy campaigns and practical projects are carried out across the spectrum stakeholders.

Village Health Club Forum (VHCF)

The Aloskhikha supports VHC Forum for our members our staff and women professionals. The goal at women club level is to ensure that women are fully involved in the running of their own organizations, influencing policy and financial decisions to benefit families and not just men. As result in the target areas have found with a large number of women in community leadership roles and on elected political bodies.

Promotion of Self Migration and Rights:

The program particularly focused on promotion of self migration and rights of Bangladeshi migrants workers: pre-departure, post- arrival and reintegration assistance for migrants to the Middle east countries. The program aims to establishing of pre-departure services and assistance in destination countries and upon return for Bangladeshi migrant workers and their families, including awareness rising on safe migration and prevention of undocumented migration/trafficking in Bangladesh society in general. The main objective of this program is to promoting supportive environment for migrant workers and their families at all stages of migration with regards to respect for the rights and dignity.

1. Special events for 2013.

Aloskhikha has given priority to strengthening for networking and advocacy with policy makers on vibrant development issues. This included taking the lead in promoting fair budget allocations for the neglected southwest region and also works to ensure transparency and fair allocation of local public resources. These key measures with support from civil society are vital to ensure effective governance. In order to Mrs Ans Beek who is one of senior expertise from PUM International the Netherlands exclusively visited Aloskhikha in early December 2013. The main focus of this visit aims to improving VTC teachers' responsiveness to students needs, increasing student's enrollment and strategically strengthening VTC curriculum based on BTEB policing, and upgrading how to be access internet facilities. Eventually she donated one laptop for free internet access and also given some equipments for practical class learning for VTC students as well.



VTC Vice Pricipal received a laptop from Ans Beek

2. Deer conservation program

The Bangladesh is recognized as a country most vulnerable to climate change. Natural hazards such as floods, increasing rainfall, rising sea levels, and tropical cyclones are expected to increase which may seriously affect agriculture, water and food security, human health and shelter. As a result many of animals and plants are now in threat on the verge. In view of Aloschikha feel much more interest to conserve the countries bio- 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 species 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 since 2011 with two Deer as one male and one female. It had a very small program and trail basis conservation program. So far, after one year the deer couple gives us one young calf, and now increasing number of 10 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.



Deer conservation center at Aloschikha premises

3. Climate Change

The Bangladesh is recognized as a country most vulnerable to climate change. Natural hazards such as floods, increasing rainfall, rising sea levels, and tropical cyclones are expected to increase which may seriously affect agriculture, water and food security, human shelter and livelihoods. Climate change adaptation and food security continues as priority areas as organization seeks innovative ways of mitigation the impact of a changing climate. Disaster and flood proofing homesteads of vulnerable river household strengthening their food and livelihood security and piloting exciting new crop varieties are among the major contributions. Improving quality of life also features strongly we run very effective health and education programs which reach out of thousand individuals.



Patrick & Mark Bath Arranged a Climate Change Training

4. Mr. Joost Verwilghen & Peter

Mr. Joost Verwilghen one of our esteem Advisor and Mr Peter and in the period of time one of their friend also visited Aloshekha in early Jun 2013. A round table discussion was held on together with key staff of the organization which aims to improving the rural health interventions. They highlighted that one new health innovation project that shall be run in Bangladesh shortly, and in the period of time Aloshekha will be the one of tangible development partner of that project they told. Eventually they moved on and carefully looked all of on going project activities of Aloshekha RSD center Bangladesh and put on their valuable comments.



Mr. Joost Verwilghen and Peter with the VTC staff's Meeting

5. Maarten Verbruggen

Mr. Maarten a development professional and one of his friend Omi visited Aloshekha VTC electrical trade class room, and like to extend solar home system to the out reach poor community for lighting purposes as an alternative electricity to the off grid areas. Primarily they intend to provide only 10 solar home panels for 10 families, and there cost sharing could be as subsidized basis with both the parties. If have seen this program is more effective than another 10 family could be include for second phase and given them further 10 solar panels for lighting purposes they told.



Mr. Maarten and his friend visited the VTC electrical department

6. Doctor of the World

A medical team of Doctor of the world the Netherlands a well reputed medical surgery team came to Aloshekha in early 3 March 2013, and to feasibility study for one medical camp on plastic surgery who are economically insolvent and vulnerable with post burn contracture and cleft left and cleft palate patients. Dr. Jef the team leader and Mrs Johana the coordinator of the team, and finally they express to make a plan for setout a surgical camp shortly in collaboration with jointly Barisal Sher-e-Bangla Medical College Hospital and A;loshikha RSD Center Bangladesh. In view of a discussion session were took place on Maria Mother General Hospital.



Mrs. Johana and Jafe together with the hospital staff's meeting

A Case Study of Sohel Howlader student of VTC since 2013 1st batch .

I am Sohel Howlader and my age is only 18 years and still I am unmarried an ebullient young boy and by religion Islam. We are living at Nagarbari village under Agailjara sub-district and in the district of Barisal, Bangladesh. My father is a cultivator and my mother also a household wife. I, the second son of my family including another one elder brother also, and have one younger sister. We are not just rich enough or there had not been suitable any scope for income. That is why I don't have able to continue my education after passing the SSC examination, and partly because of poverty as well as adverse surroundings. In that sequence I come to know that two years long electrical training course will be held on Alohikha Vocational Training Center. I think that this training is very



important for my alternative source income generation and possible to self employment. In the light of I was took admission to the Electrical Trade course, and the training center had not been far away my home, so easily I went there with bi-cycle and matter of only 20 minutes travel.. However I was engrossed my mind to learn about electrical trade technology. Eventually I was successfully passed the two years long Electrical Trade course with well cooperation and an active assistance by the all of instructors of that center. I was really grateful to all of them who are helps me to fulfill my dream. Afterwards I was able to buy a singer machine from local market and begun to start as professionally home based dress making business, and as a result near about four to five thousand taka now I earned per month through utilize this technology. Some of my friends and neighbors are now feel much more interest, and like to receive such training for way of alternative income generation.

Sohel Howlader

VTC Student

Nagarbari, Agailjhara
Barisal, Bangladesh

B. Computer Training Program



Computer training is going on....

The Bangladesh is now digitalized country and most of the more young students are depended on computer due to their studies and employment. We can not think that without computer any government or non government office do not have activated their program. So computer is necessary for all to learn it . In the light of the Aloshikha has been provided skill training in computer course by providing two Computer Trainers as such Mr. Idrish khan and Mr. Samson who were trained up on computer technology from Techno Touch System Ltd. Dhaka. Presently the Aloshikha has been completed as of total 12 batches where by each batch consists of 8 students both the girls and boys including 96 participants with skill in computer training -2013.

C. Integrated Rural Health Support Programme



Checked-up pregnant mother with motivational work



Hotchpotch cooked on at Nutrition Camp for malnourished children

The Aloshikha RSD Center always gives more emphasis towards the child health care and nutrition's deficiency. The program is funded by the SAKO Foundation the Netherlands which continue to help us to work for health motivators to address the plight and problem of child health care services at field level. 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. This year Aloshikha was organized 12 nutrition camps at different villages among malnourished babies where 372 malnourished mothers were present during nutrition camps. We motivated to the mothers about the cause malnutrition and its consequences.



Green vegetable are processing before Nutrition camp



Health motivator & supervisor gathering together with mother and children for motivation the nutritious food and display the different card

The resistance fund one of an emergency support for medical treatment who is financially stagnant and economically vulnerable.

Aloshikha 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.



Receiving money from resistance fund for the treatment

D. Education program (Kindergarten school):



Children are playing in the school campus

We felt that education is important for all and without education none can take part to the Nation building process. It is crucial that quality children education means the Kindergarten education. The Kindergarten education system is costly rather than government primary education in rural context. The Aloshikha has started initially one kindergarten school within its campus, eventually it came in to three kindergarten school in different places. The main focus of the program is to ensure quality

education and include 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 among 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 and 21 teachers

E. Pre-school program



New Uniform for the pre-school children



Feeding program for pre-school students

It goes back 15 years the Aloskikha is operating 41 pre schools in the different part of the Barisal 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 41 pre school a total of 1230 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 (Milk,Egg & Fruit).



41 Teachers Gathering

Aloskikha at a glance of pre-schools & Kindergarten information 2008-2009-2010-2011-2012-2013:

Year	2008	2009	2010	2011	2012	2013
Pre- schools	40	40	40	40	41	41
Pre- schools Students	1200	1200	1200	1200	1230	1230
Pre-schools teachers	40	40	40	40	41	41
Kindergarten (School)	3	3	3	3	3	3
Kindergarten students	460	380	410	450	415	347
Kindergarten teachers	17	17	21	21	21	21

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 2013.

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

Year	2008	2009	2010	2011	2012	2013
Groups	395	444	373	390	382	360
Group-members	3754	3405	2954	3054	3016	2098
Loan disburse	-	56,04,000	1,27,46,000	1,85,15,000	1,63,16,000	33,93,400
Loan out standing	-	72,43,700	82,16,480	1,12,92,490	1,09,72,000	67,24,951
Savings collection	-	9,81,966	16,55,003	24,61,600	19,63,500	5,96,369
Savings balance	-	43,84,481	45,42,886	56,79,891	53,33,500	28,81,236

G. Fishing program.



Aloshikha Fishing Program

The fish play an important role in the Bangladeshi diet constituting the main and often irreplaceable animal protein source 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 Aloshikha 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 boiled 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 2013 -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 2013 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 close-down.

Poultry Agriculture:

Year	2008	2009	2010	2011	2012	2013
Total Eggs	2,51,240	1,50,178	2,27,841	1,63,105	1,75,150	1,35,839
Total Broiler	1000	427	-	-	-	-
Total layer	1400	1056	751	1690	1200	1378

Dairy and milk production:

Year	2008	2009	2010	2011	2012	2013
Milk Kg.	3254	1872	3814	1742	820	1406
Total Cows	12	9	6	9	12	9
Artificial insemination centre	1199	1260	1563	1762	2130	1950

I. Dental Service under

Aloshikha R.S.D centre



A dental Doctor's motivational work for the children

The Aloshikha Dental Clinic was established to bridge the gap between the ever increasing demands for dental care and education service delivery both the Urban and rural areas. The Dental Clinic is located at Rajihar village under Agailjhara Upazila in Bangladesh, the Clinic cum Maria Mother and Child Health Care Clinic that blends the best of traditional and modern techniques backed by good qualities facilities like well-equipped clinical dental department and, have general health care service delivery facilities. The Clinic is important and remarkable for its panoramic location and low cost improved service delivery to the clients.

It was an urgent need for basic dental health care and education in the remote region in Bangladesh. This program has expanded over only the three month past to encompass the entire local community. It is estimated that over 500 people have been instructed in proper oral dental care practices and behavior modification in order to over 1000 one thousand people were better informed by providing necessary communication and information. More importantly in terms of we able to convinced to the local community people who are not much informed to use toothbrush/ toothpaste for which supply has been made available, so every person can receive such materials and their financial limitations do not hinder their right to proper oral dental health care and education. A study is shown that it should to need receive training for local community people who are not much aware on the point of issues. It could be much better to make the training more significant to include in the training component on proper brushing techniques from public oral dental health professional prior to them arrival in dental clinic at Aloshikha Campus. In view of what we have done over the period on dental care and education that given below on table content.

SI No.	Description	2012	2013
01	Motivational Work	720	859
02	Scaling	179	88
03	Extraction	186	41
04	Temporary Filling	267	82
05	Permanent Filling	97	84
06	Root canal Therapy	30	67
07	Dental Cap	12	17
08	Operculactomy	7	22
09	Pulpectomy	3	9
10	Partial Denture	6	16
11	Complete Denture	32	20
	Total	1539	1305

J. Maria Mother & Child Health Care Clinic program

This hospital grant was awarded from the Japanese Government in late 1997 for infrastructure development and purchase of materials but there had not been included any administrative cost in this grant. Still we are working our activities since over 16 years and all medical accessories using properly. In 1996 in order to reduce the gaps between health services and the community, and to raise awareness amongst the poor of available health program the Maria Mother & Child Health Care Clinic was established and later it comes to be a be a general hospital with strong referral system in the community of remote village under Barisal district in Bangladesh. During the design process of program staff of this general hospital has able to identify the health problems in the community. It also met with the Upazila health and family planning officer to identify the best approaches to meet the needs these vulnerable populations. Utilizing this community consultation approach that included inputs from local authorities has ensured increased by inform key policy and community makers. Under this project at least 12 female Health Motivators are working in the field levels and they are always active to identified primary health problem and recorded in to referral slips. Patients them take these slips to nearby Maria general hospital are given preferential treatment. For health parishioners, the use of the slips means doctors can quickly identify the issues of concern and more importantly see cases in need of treatment. However the main focus of the program is to provide low cost medical service delivery amongst poor section of people in the intervention areas, especially who are not able to access health services due to their acute poverty and adverse surroundings. In that cases the health motivators to take the responsibilities to identify gaps between the clients and provide them counselling what they should be done during pregnancy if any complicated have seen. They also to be active to provide how they reach postnatal and antenatal care and all sorts of primary health care services amongst poor community. Finally the hospital is registered with the Ministry of Health Bangladesh Government and recognized as 10 beds general hospital.



Beautiful world for the born child in the Maria Mother general hospital

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.



Dr. Rafiqul Islam (Novel) and the O.T team were prepared for caesarian operation.

Health:

Maria Mother & Child Health Care Clinic patients statistic:

Year	2008	2009	2010	2011	2012	2013
Female	2981	2384	2373	2660	2550	1149
Male	1576	1014	869	936	920	688
Child	979	739	954	765	650	481
Total=	5536	4137	4196	4361	4120	2318
Deliveries	206	229	217	288	385	202
In-door Patients	490	582	957	1055	1160	707
Out-door Patients	-	-	3439	3306	3115	1611
Appendices	66	131	177	318	362	249
Caesarian	83	152	243	337	370	325
Minor -OT	17	25	33	55	75	28
Ultrasound through the pregnant mother	356	374	353	47	375	1119

K. VTC Program

The Aloskha RSD Center 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 with the Bangladesh Technical Education Board (BTEB) as an 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 trade has been approved by the Bangladesh Technical Board. According to the requirement and curricula of the technical Board every trade course has 30 students, both 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.



Students & parents 6 monthly meeting with the teacher



Admission test 2013 January



VTC Teacher's Monthly meeting



Book distribution 2013 for the VTC students

The Aloskha Vocational Training Center is duly affiliated by the Bangladesh Technical Education Board. The Board has the responsibility to support to the center as to their provision as logistic and others support. In view of book distribution has completed among students of the vocational training center recently.

L. Aloshikha Solar home system Program

The Aloshikha has promoted renewable energy program as such as solar home panel system due to constant load shedding from the government electric supply sectors. In terms of some off grid areas we also provided solar home system where electric supply chain is inadequate and difficult to connect electricity from the government or non government electric supply authorities, partly because of their insufficient materials and man power and limited power generation. After a study of feasibility the organization intend to establish some solar irrigation pump to ensure food security in the rural field level with joint discussion on farmers group. It is estimated that under the solar irrigation program cultivatable all land should be come in to three cropping system in a year. In order to how number of solar home panels we prodided to the rural community that are given below on table contents:



Mr. Maarten and his friend visited to solar home family.



List of Solar Distribution - 2013

SL No.	Name of Branch	Total House Hole	Word
01	Rajihar	34	25 - 100
02	Vhurgata	16	
03	Kadambari	12	
04	Kaligonj	10	
05	Pirarbari	31	
06	Sikerpur	24	
07	Panbari	18	
Total		145 Family	

Financial Report 2013

(No program activities)

Financial Report

	Subject	Income	Subject	Expenditure
1	Micro-credit Service charge	13,50,200/-	Staff salaries	76,50,000/-
2	Agriculture		Electricity Bill	3,60,000/-
	a) Poultry	1,23,500/-		
	b) Fishery	2,62,500/-		
	c) Dairy	3,200/-		
3	Donation	58,00,000/-	Diesel Bill	2,02,200/-
4	Patients	4,33,000/-	Telephone	86,500/-
	Students	5,500/-	Maintenance & Logistics	5,62,300/-
6	Solar service	8,83,100/-	---	---
	Total	88,61,000/-	Total	88,61,000/-

Aloshikha R.S.D Center Board and staff

Aloshika 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. Ben Ernst/ Annette Pelgrim
Martha Houpt, Netherland
Donors Body
SIMAVI, The Netherlands
SK Foundation, The Netherlands
SAKO Foundation, The Netherlands
Japan Embassy, Dhaka, Bangladesh
Private Donation (Anna Josephina Maria Beek), The Netherlands

Staff:

General:	
Executive Director	1
Chief Accountant/ Micro-credit program	1
Assistant Accountant	2
Computer Operator	2
Office Assistant	3
Night Guard	2
Total	11

Micro- Credit Program :	
Micro-credit Director	1
Area Manager	7
Field Manager	7
Care Taker	7
Total	19

Education program:	
Education coordinator	1
Pre-school Teacher	41
Pre-school Supervisor	4
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	3
Senior Nurse	4
Junior Nurse	2
Medicine Salesman	1
X-ray Technician	1
Pathology Technician	1
Sweeper	4
Total	17

Integrated rural health support program :	
Health Supervisor	1
Health Motivator	12
Total	13

VTC Program :	
Vice Principal	1
Instructor	4
Ass. Instructor	4
General Teacher	6
Caretaker/ Night guard	4
Part time Teacher	4
Total	23
(Permanent Staff)	Total 157

Colophon

This annual report is a summary of the activities of Aloshikha R.S.D Center in the year 2013

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, 01715013099
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: 88-01745734843/01711548339
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
Director of general health service, Hospital: Licenses – 3318, Dated: 28/11/2013
Director of general health service Diagnosis centre : Licenses – 7083, Dated: 28/11/2013

Bangladesh technical education board (BTEB)

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

Pador:

Europe aid ID: BD-2011-CYC-2001775404

The New Blood Donor Groups Picture-2013



Donate Blood Save Life



This is the Blood Group of the Maria Mother General Hospital. They are always ready to donate blood to anybody anytime.

Please everyone collect our Mobile Number from Hospital office file.

Yearly staff's conference for 2013



The Alosikha RSD Center is active to organized yearly conference in every year to its complex. All of board members, staffs and out side distinguished guests were celebrated exclusively the event such as, Rita Sen, join secretary Ministrie of establishment Bangladesh Government was the chief guest of the event. Special guest Police officer, Agailjhara, Barisal, Mr. Kanchi Lal Das Chartered Accountant, Mr. Sarder Harun Rana, President Press Club Agailjhara, and other media workers and local government elected representative and local common people.