

ANNUAL REPORT-2004-2005

OF SARPV-BANGLADESH

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About SARPV-Bangladesh

Social Assistance and Rehabilitation for the Physically Vulnerable, in short SARPV, is a private voluntary social change organization. It is devoted to set up a framework towards mainstreaming physically challenged communities in particular and children, women and older persons who are marginalized in general in our society. Md. Shahidul Haque, personally physically challenged, formed this organization in 1989 with the support of his fellow friends who identified with him. That year SARPV conducted its research on disability in a tornado affected area, first of its kind- disaster and disability.

Extensive community level work started in 1991 through the first-ever relief operation in response to a devastating cyclone towards preventing avoidable disabilities and supporting trauma victims in southern coastal regions of Bangladesh.

SARPV considers disability a development issue- cutting across all development sectors; not a welfare or charity issue. SARPV has experience in disability prevalence-studies; advocacy and lobbying targeting community level changes; sustaining community level development changes; post disaster disability sensitive relief and rehabilitation programme; research into disabling situations and causes and attitudinal factors around disability; resource center management; mainstreaming disability equality; inclusive education; and rickets prevention. SARPV is developing networks at home and abroad raising voices of persons with disabilities for increased inclusion. SARPV works direct with local organizations, local community and other stakeholders for promotion of inclusion of persons with disabilities.

Our Vision

SARPV dreams of a society where persons with



disabilities can grow to their full potential despite functional and rights and opportunities in the mainstream of the activities, and where persons with disabilities enjoy equal rights and opportunities.

society. Environmental limitations and participate to their full capacity in social

Our Mission

Missions of SARPV are: to create mass awareness about disability with a focus on inclusion and prevention; and to support for development of role models, from staff and members with disabilities through training and exposure; and to develop model programs where persons with disabilities gain self-reliance and thus are integrated in the mainstream on equal terms.

SARPV has been predominantly an advocacy organization. SARPV promotes the voice of people with disabilities to that effect. SARPV works to upgrade the socioeconomic condition of the persons with disabilities and the marginal community (women and children) of Bangladesh through promotion of their sustained access to appropriate capacity building and income opportunities. SARPV works for social commitments of the business sector so that the businesses support the most vulnerable sections of the community like persons with disabilities.

Highlight of Activities!

Inclusive Education Center: Prodipaloy

Prodipaloy, the school for children with or without disabilities, started in 1999 with twelve students when they needed to stay at SARPV Chakaria office for daylong Rickets trial over a period of two years. It became the pioneer inclusive education center in Cox's Bazaar region with the support of AEM- France. Classes from nursery to five are run for 141 students and amongst them 43 students have different types of impairments. Last two years, several students won awards and scholarships at national level contests. While grade-four student Rozina was promoted to class six and admitted in a high school in 2004, Prodipaloy opens class five in 2004. Seven students with disabilities continue now higher education in local schools after completing primary education in Prodipaloy. In Chakaria, it's a start!



Seeing in the Dark

SARPV jointly with Healthlink Worldwide-UK and a British artist named Simon Allen organized a different exhibition in December 2003 at Dhruvad gallery in Dhaka with part support of the British Council Dhaka. The exhibition was again staged in demand from the people in the second largest city Chittagong in August 2004 with the part support of Action Aid Bangladesh and Chittagong Society for the Disabled (CSD).



This might be the first ever such exhibitions have taken place in Bangladesh. Celebrities and professionals found it very strong in communicating the very message that we are used to developing a very discriminating environment all around us. The exhibition content was designed and fully ran by youths with disabilities, in particular youths with visual impairments; with roles including those of guides, actors, sound operators, receptionists and spokespersons for the media and visitors

The aim was to allow visitors to experience the city from the perspective of persons with disabilities. An art gallery swathed with black-out material was turned into a darkroom, there is only sound to let you know of movement, only the touch of blind guide to help the visitors move from room to room filled with daily living installations. As part of any ongoing advocacy and awareness campaign, 'Seeing in the Dark' has potential to involve the right audiences. Innovative awareness and advocacy tools of strong inclusive aspects like disability photo-stories by persons with disabilities have been experimented.

Straight leg project

Though the project title sounds queer, SARPV with the generous voluntary services and support of its French friends, has straightened the bowed legs of 215 rickets affected children so far, sometimes even after two or

three surgical operations. This is the final level treatment offered to heavily bent bones the children endured due to Rickets. When a young mother found again that her child stood straight, she cried loudly in praise as she embraced and blessed our young male worker of same age- to us rickets work is simply taboo breaking. And more, disabilities arising out of Rickets can be prevented. Capacity of local people has increased - they have their known youths trained in rickets prevention campaigns- physiotherapists, prosthesis experts, and assessment and prescribing authorities. A physiotherapy centre, an assistive device production centre and trained Chakaria people now work for rickets there.



Liza at the of 4 year

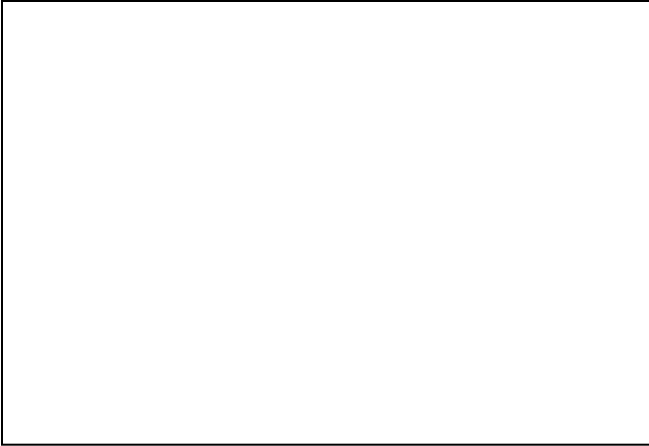
Liza at the of 7 year

Missions in Actions

We work for capacity



building of persons with disabilities as well as non-disabled persons



SARPV is a learning based organization where persons with disabilities develop themselves as role models for achieving their rights. SARPV tries to open up scopes for persons with disabilities through its programmes, projects and activities by arranging representations and exposures, involving the media too, exchange visits and on-the-job-training. Role models work as disability activists when they continue their jobs in other organizations.

We advocate for 'inclusion' through closely working with development and business organizations

Besides developing role models and model projects and programs of inclusion, SARPV does advocacy for 'inclusion' through reviewing strategies and scopes of development organizations and suggesting ways to be inclusive. Towards sustaining it entails building and strengthening functioning networks and alliances. SARPV has experienced in making development organizations practice inclusion through incorporating disability dimensions into their programs and policies and doing a disability checks, and promoting persons with disabilities into respective workforce. SARPV do advocacy for mainstreaming disability equality as a sectoral development challenge for all development agencies.

"I met with the infrastructure people. Maybe one of the issues they were working on didn't really deal with the issue of disability, building dams or something like that, but of the six issues, five are related [to disability]. Then the question is can you do all five at once? So one of the things we talked about is, all five could benefit, but let's start with one or two things so that people begin to get a better understanding of what we mean when we say to include a disability lens, so that people can begin to learn by experience what to do." *Judith Heumann*



সাংবাদিকদের প্রশ্নের উত্তর দিচ্ছেন ফরাসী রাষ্ট্রদূত মি. জ্যাক আন্দ্রে কস্তিল্হেস

INTRODUCTION

SARPV is an advocacy organization. The strategy is to work mainly with a wide range of development organizations. SARPV draws attention of the stakeholders, local and international, that by ignoring persons with disabilities and their rights, damages are made to families they live in, and their economic bases are affected. Through dialogues with and training on disability equality for multi-professional groups like architects, physicians, bankers as well as local government representatives, policy makers, ministries, community leaders and development activists, SARPV is doing its advocacy. It entails developing networks with different agencies and development partners. SARPV conducts training workshops on disability advocacy, communication, awareness, mainstreaming, and Rickets prevention. SARPV runs following projects and programs in this area other than regular campaigns:

1. Communicating for Advocacy (CfA)
2. Abilis-SARPV partnership
3. CEDAY (Coalition of Elderly, Disabled and Youths)

MAJOR OBJECTIVES

- To mainstream disability equality amongst development organizations and to strengthen effective capacity of community development organizations to address disability issues towards increased inclusion
- To increase south-south and south-north learning and skills transfer on training, networking and organizational capacity
- To strengthen the voice towards ensuring rights of persons with disabilities in programs and projects

- To support and strengthen the capacity of the grassroots level self-help groups of people with disabilities with the support of youths and older persons and the local government.

APPROACHES

- Listen to grassroots level practices based on generic guides say on advocacy or communication or mainstreaming and enhance learning through sharing resources and disseminating project lessons to stakeholders across the sector
- Arrange regional and national workshops meetings and planning sessions towards compilation of information, knowledge and experiences through developing effective capacity in information exchange by health and development agencies, south-south and south-north learning, organizational capacity
- Counsel organizations and agencies in all phases of the project and program development towards increased inclusion
- Networking amongst grassroots organizations towards increased exchange and shared interests

OUTCOMES

- √ Practical training guide ‘Communicating for Advocacy’ developed and adapted with regional input in Bangla from English.
- √ SARPV and its partner NGOs and Community Groups have increased access to and confidence in proven communication tools, skills and processes and reviewed respective tools and materials.
- √ 20 organizations involved at least one person with a disability as key management person for IGA programs of persons with disabilities. Job opportunity has increased at the community level, and programs that directly support persons with disabilities in income generation promote visibility.
- √ Physical/infra-structural accessibility has improved in offices of the community development organizations who became Abilis partners.
- √ Constitutional inclusion of a person with a disability in each committee of the Federation of NGOs in Bangladesh has been made in to effect.
- √ Confidence has been seen amongst the people with disabilities that they can change their life only with small initiatives.
- √ An informal national network with regional linkages has evolved successfully. Disability sensitivity and informed actions around disability increased amongst participating organizations.
- √ More than 80 organizations in Bangladesh and 40 organizations in India and Thailand trained on disability mainstreaming based on a generic advocacy guide. Regional and national workshops compiled experiences from the grassroots.
- √ Dhaka University authority has been approached to and made aware about inaccessibility aspects of Shahid Minar (the language martyrs’ monument) after two repeated years’ show-down of wheel chair users on 21 February (International Mother-tongue Day).
- √ Strong tools like ‘Seeing in the Dark’, photography work by youths with disabilities have evolved.

LESSONS LEARNT

- Any advocacy work at any level can bring in results through strong follow up involving the right stakeholders.
- Local level advocacy campaigns can reduce abuse of women and make local authority more responsive to local women’s problems.
- Sharing of experiences in advocacy work helped develop a wider understanding amongst a large number of organizations: what advocacy is and is NOT, what advocacy can and CANNOT do.
- Advocacy is a process where people from all strata can take part in starting at any level. Lobbying is an important part that results in a legal basis.
- Quality education of the people with disabilities can promote participation of people with disabilities.
- Most challenges were to complete bureaucratic formalities for approval by new grassroots initiatives.
- People with disabilities if got the opportunity they prove to be competent; provisions need to be accommodating.
- Opportunity and user friendly (disabled persons’ needs sensitive) environment of the work can promote visibility of persons with disabilities.

- Through issue proliferation and joint work from a common platform mainstreaming targets can be achieved.

Project CfA (Communicating for Advocacy: Strengthening Capacity for Health and Development Advocacy in Asia)

The project “Communicating for Advocacy”, match-funded by DFID-UK, primarily sets four key partners namely Cambodian Health Education Media Services (CHEMS), Healthlink Worldwide-UK (HLWW), Health Action Information Network-Philippines (HAIN) and SARPV to work together from mid 2002 with broader objectives:

- to develop effective capacity for information exchange by health and development organizations
- to support advocacy and facilitate south-south and south-north learning and skills transference amongst stakeholders around organizational capacity related to rights based advocacy.

SARPV as a key partner has worked directly with seven core partners in Bangladesh, India, Nepal and Thailand. Regional and national workshops and subsequent enhanced exchanges and communication and documentation of process and project lessons compile a grassroots experience contributing to a regional version of the guide on advocacy and communication. In September 2005 as key partner SARPV will also be holding an ‘**International Plenary**’ in Bangladesh.



Project Abilis-SARPV Partnership

The ABILIS FOUNDATION based in Finland started to promote equal opportunities, independent living, human rights, and economic self-sufficiency of people with disabilities. They provide grants for grassroots projects of disability organizations. In 2001-02, Abilis board looked for a partner organization in Bangladesh and held view-exchanging meetings with local leading disability organizations and networks and selected SARPV Bangladesh to work as their representative. The main purposes of SARPV-ABILIS partnership programme is:

- to facilitate and provide financial support to the Disability concerned grassroots organizations and self-help disabled people’s organizations
- to achieve equal opportunities, human rights, independent living and economic self- sufficiency of the people with disabilities in Bangladesh.

Though total 8 projects in 2004 and 6 projects in 2003 have been approved, the allocation for Bangladesh by Abilis Foundation Finland is increasing ever since it has started. Now the approved projects stand at 21 in number.

Winding up

This was a beautiful program to strengthening the self-help group of disabled people and to engage many community development organizations to take this responsibility. I think in Bangladesh it was a pioneer program in the mainstreaming disability in the development program was initiated by the support of the Abilis foundation.

Community-based Development Initiatives



INTRODUCTION

In Chakaria, southern part of Bangladesh between Chittagong and Cox's Bazaar, on the eastern shore of the Bay of Bengal through a relief program after the unprecedented devastating cyclone of 1991 SARPV started work direct with severely injured people and persons with disabilities. SARPV had to extend its trauma response beyond the relief and rehabilitation period and community development initiatives in Chakaria. SARPV has started regular community based program (popularly termed as **CBR- Community based Rehabilitation**) to form a positive attitude towards and actions for persons with disabilities. From 1995 SARPV began awareness raising on local issues like Rickets and disseminating the disability information on a wide scale.

MAJOR OBJECTIVES

- To strengthen capacity of local communities to address disability issues
- To strengthen capacity of people with disabilities towards their increased participation
- To mobilize community resources towards a disability sensitive approach in practice

APPROACHES

- Economic development strategies
 - Forced savings and soft loans services;
 - Skill training on local trades and businesses of local commodities
 - Income generating/ Employment related projects
- Social development strategies
 - Awareness on disability, health, water-sanitation, agriculture, environment, education, Rickets
 - Services of assistive devices
 - Group techniques for organizing marginalized people with or without disabilities

- Promotion of education for children with disabilities (Stipends and Funds for students with disabilities in local schools)
- Model rural household approach and work with respective families while we target persons with disabilities
- Community participation
 - Meeting with local leaders for changes in policies and practices
 - Disability orientation for service providers and local development partners
 - Awareness and advocacy campaigns involving schools, local government and authorities

OUTCOMES

- √ 57 SABGEE groups has functioned and 56 community groups are functioning at present in, most of which persons with disabilities are leading
- √ 1209 families of 63(at present 56) CBR groups have been reached through sanitation programme and 25 tube wells are provided with the help of NGO forum on 2004
- √ Every children from families in our contact attend schools, and increased number of students with disabilities are coming to schools and in 2005, 13 disable students have admitted in school.
- √ More disability focus programs and disability-specific organizations have evolved in that region.
- √ Ramps are set up on middle Chakaria primary school, Chakaria union office, Chakaria Degree College, Chakaria new market, Chakaria government hospital, and at ten homes
- √ Provided vegetables seeds to 200 families for the vegetable cultivation on homesteads and plants to 219 families for plantation.
- √ 'Funds for Students with Disabilities' have been set up in nine schools at Chakaria.
- √ 88 people with disabilities have joined income generating activities and 12 people with disabilities got employed with loan facilities.
- √ Helpful equipments are provided to five persons for their accessibility.
- √ Training on agriculture was arranged for 300 persons through 10 groups and calcium rich vegetables cultivation initiated in 1153 families.
- √ Video show about Rickets was arranged by CBR project as Rickets prevention campaign.
- √ Micro-credit support are given to 402 persons in agriculture, 240 persons in small trade, 78 persons in Rickshaw, 29 persons in handicrafts, 19 persons in spinning, 11 persons in dairy firm and 17 persons in others sectors.

LESSONS LEARNED

- Model rural household concept is helpful in designing a sustaining community development initiative.
- Transportation for people with disabilities is a major barrier to inclusion.
- Local administration and government have resources that can support community based development initiatives. Community organizations should pro-actively work as facilitators for dispensing such services.
- Local administration and government must be kept informed and involved in community development work.
- Persons with disabilities are receiving little micro-credit support from major development organizations.
- Accessibility for the persons with disability is very important for their independent movement.

DISABILITY INFORMATION AND SERVICES CENTER



INTRODUCTION

Main aims of Disability Information Service Center (DISC) are to solve the information gap regarding disability issue in Bangladesh. Lack of information causes different types of disability and increasing the rate of disability gradually day by day. Most of the rural people of the country do not know about disability, why it happens / what is the cause, what are the solutions to these problems etc. Moreover, general people and also the service providers, caregivers of disabled persons do not know what are the existing facilities for the persons with disability. They have no access to primary health care, education, and such other general human rights. The proposed project will provide this information and will contribute to reduce the communication gap regarding disability issue.

MAJOR OBJECTIVES

·Increased awareness and information dissemination to persons with disability, care-providers, family, organizations working with disability and mass people through:
Publishing Bangla newsletter on disability (adaptive version of Disability Dialogue), Setting up a Disability specific national library,

Making disability information available through web presence (online Bangla library),

Developed participation, dialogue and information exchange among the persons with disability, care providers, family, organizations working with disability, policy makers through workshops, seminars, meetings, visits and other exchange programs

·Improved networks among local, national and regional organizations working in the similar field (disability, information, public awareness) and availability of database and directory of local resources regarding disability

·Enhanced participation of persons with disability through involving media both electronics and Print.

APPROACHES

Translation, Production and distribution of Bangla newsletter "Notun Duar" (adapted Disability Dialogue) in print

Development of a library specially on disability including database of resources and directory of local resources

Develop and maintain a disability website and an online Bangla library for local uses

Anticipate regional network among local, national and international information centers

Arrangement of workshops

Produce TV and radio programs and video documents on disability

OUTCOMES

DISC, the information service wing of SARPV is working since 1996. With support from SARPV, DISC already made a wide collection of local and international newsletters, books, journals, posters, audio and videocassettes, etc. It also developed expertise in producing newsletter on disability. The proposed project will give an opportunity to be more experienced in this sector and also in modern documentation.

LESSONS LEARNED

SARPV is working on disability issue for last twelve years. It has been found that information gap is the prime factor, which inhibits the development, participation, of the persons with disability.

There is information gap among the persons with disability themselves. There is information gap between the persons with disability and their families, their caregivers. There is also information gap among the persons and organizations working with disability and also in the community.

These caused the backwardness of the persons with disability and this new initiative will provide necessary information to solve those problems.

Financial Support is one of the main constrain to run this program as till it has not been initiated in any development and educational institute.

Under DISC there is also other program has been launched what Web could not properly circulated like Photo voice and seeing in the dark.



INTRODUCTION

In 1991, when SARPV started working in Chakaria, negligibly few children with disabilities would go to school. In 1999, the school named 'Prodipaloy' was established for the education of Rickets affected children numbering only twelve. Seven teachers, five van pullers and two support staff runs the day-to-day operation of Prodipaloy. Besides the provisions for uniforms, transport and extra-curricular books, Prodipaloy students are regularly checked for the primary health-care services and treatment. Besides academic pursuits, students of Prodipaloy develop themselves on cultural and sports side. The school is different because of its direct work with the students' families. Other than this we work with other local schools to initiate: funds for disabled students and stipends for disabled students.

MAJOR OBJECTIVES

- To set up an inclusive education center
- To promote enrolment of children with disabilities in education
- To encourage government and private schools to ensure education of children with disabilities

APPROACHES

- Prodipaloy follows national curriculum with additional focus on health-hygiene-nutrition
- Well planned extra-curricular activities and exposure in national arena (competition, contests)
- Work with children's families and organizing monthly parents' meeting
- Home gardening, poultry for better nutrition and better water-sanitation at respective houses for good hygiene

OUTCOMES

- Prodipaloy students started getting primary education free books through local education office from 2005.
- Avoidable disability through better primary health and education and Rickets issue have been practiced as part of syllabus.

- After repeated appeals to Prime Minister, local planning meeting and seminar, the stipend issue for the students with disabilities came to notice of stakeholders and audience and it has been already included in the final PRSP.
- Prodipaloy got the registration of KAB (Kindergarten Association of Bangladesh) for its standard of teaching and 11 students of Prodipaloy got the primary scholarship from KAB and local CHUKAS (Chakaria Upazilla Kindergarten Shikkhak Samity) scholarship examination in 2003, 2004 & 2005, some of them got scholarship from both KAB & CHUKAS.
- 5 students trained in photography and participated with their work 'Amader Kontho' (our voices) in an international photo festival titled Chobi Mela III in 2004 at Dhaka, at DFID Head Quarters building in London-UK on the international disability day the 3rd December 2004.
- Students of Prodipaloy won award in national (organized by Toitomboor's vision 2020 and CDC-Chittagong) and international essay competitions in 2003, 2004, 2005 and in a national drawing competition Dristi Mela, 2005.
- At national level drawing competition organized by NFOWD, two students won awards; and two students at another divisional level contest.
- From 2004, class five has been opened in Prodipaloy and 7 students promoted from Prodipaloy to different high school in 2004 and 2005.
- Prodipaloy students participated in national parade competition in Independence & Victory day in 2005 and in National Children Cultural Prize Competition, 2005 and received prizes and crest.
- Land has been purchased and a model school building being built considering the issue of accessibility. building. UNO of Chakaria inaugurated the foundation program of the new school building.
- Prodipaloy students join also Rickets prevention campaign through live drama and at various Mela like Falaz Brikka.

LESSONS LEARNT

- Young learners can successfully introduce better living practices in respective families if motivational campaigns by community workers and teachers are carried out in parallel
- Preventive practices introduced by young learners to respective families work better
- Transport vehicles like rickshaw vans have been pivotal for students with disabilities to regularly attend classes even from distances and non-disabled children are also benefited from it
- Parents of non-disabled children are more interested to enroll their children in inclusive education like Prodipaloy for its overall better care and support of standard
- Students with disabilities in general are increasingly having education when they find their fellows are more active in different capacities
- The extra-curriculum activities of Prodipaloy students is remarkable and this type of progress is increasing day by day.

Rickets

Remedy



Prevention



Treatment



Rickets and an appeal: Let us prevent disability due to Rickets among the children by giving nutritious foods with vitamins to pregnant women, lactating mothers and infants.

INTRODUCTION

During its disaster response targeted for persons with disabilities SARPV noticed an abnormal prevalence of Rickets in Chakaria in 1991. While now around 9% of below 15 years children show clinical signs of Rickets due to deficiency of calcium. The prevalence is increasing every year in the coastal district of Cox's Bazaar in Bangladesh, that has shown a high incidence of Rickets. However, far more children are at risks, what is evident from extensive clinical and pathological test. In order to effect wider community level changes in food habit that support prevention of Rickets, live drama, video show and whole family training and demonstration on production of calcium rich agricultural produces and its seeds were carried out targeting the public under an awareness campaign on prevention. In awareness, major two partnership collaborative projects between SARPV were with:

1. Cimmyt-Bangladesh on Agro-food and Education on high calcium nutrition, and
2. Directorate of Agriculture Extension (similar short-duration multi-party project)

Besides awareness campaigns, from 2001, AMD, KDM of France and SARPV started together providing services of surgery and medication, physiotherapy, assistive devices, and the Calcium supplementation programmes and jointly with Shahidul Association of France the researches on Rickets. Major projects are:

1. Straight leg project (clinical and pathological surgery, calcium supplementation)
2. Physiotherapy services
3. Assistive device production and distribution services
4. Rickets centered research

MAJOR OBJECTIVES

- To raise awareness about Rickets locally amongst the suffering communities, nationally and internationally amongst the right audiences
- To increase production and consumption of calcium rich food or vegetable in Cox's Bazaar region
- To ensure prevention of Rickets through easy popular solutions
- To arrange provisions of treatment (surgery, assistive devices, medicines) for Rickets patients
- To initiate researches into causes and services of Chakaria Rickets

APPROACHES

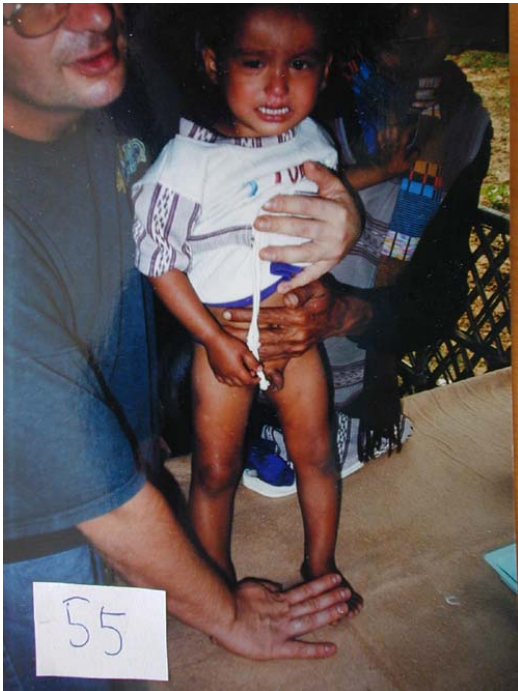
- Live drama presentation in local language by trained community people
- Public shows and transmission by broadcast media of video drama on standard language
- Demo plots in SARPV's Kumary Farm and in villages at farmers homesteads
- Whole family training on food habit and homestead use of production of high-Calcium vegetable
- Collaboration with projects and programmes of other GO-NGOs
- Awareness campaigns targeting different stakeholders using different print IEC materials
- Providing treatment to the Rickets patients through nutritional advice, medicine, assistive device, physiotherapy and surgery
- Involvement of wide range of scholars and expert in Rickets prevention campaigns and its causes

OUTCOMES

- √ Collaborative support and small initiatives from different corners by diverse social actors are coming out around Rickets and people are more aware about Rickets at present
- √ Popular practices of Rickets prevention involving Calcium supplementation by addition of edible 'Chun' in rice-cooking pot is increasing
- √ Cultivation of calcium rich vegetable has increased
- √ Pregnant mothers are becoming more aware about extra care needed by herself
- √ Decrease in occurrences of common unhygienic diseases is observed
- √ People use better sanitation more because of campaigns that diseases like diarrhoea, pneumonia could trigger calcium deficiency
- √ Nutrition, Health-hygiene, Child upbringing practices amongst target families are improving
- √ From 54 Rickets patients 49 children has been cured by surgery 100% and rest 6 has been cured up to 80%.
- √ Out of other 197 patients 185 has been 100% cured- legs straightened, by surgery.
- √ By using Brace out of total 155 Rickets patients 141 has been cured.
- √ During 2004 & 2005, 300 children of Chakaria & Cox's Bazar are taking Nutritional treatment and already achieved a positive change.
- √ From 1768 Rickets patients 50% have benefited by taking medicine and calcium tablet, 30% has been cured.
- √ 80% patients- older persons, polio patients and many others benefited from Physiotherapy.
- √ An independent physiotherapy team of 11 local persons has developed that also handle post-surgical physiotherapy services and also has established physiotherapy & assistive device center.
- √ Consultation has been made and possible referencing of Rickets children to hospital and health agents.

LESSONS LEARNT

- Drama can work good for a huge audience and there is in fact less opportunities for such recreations in rural areas
- Live drama and video show have penetrated Rickets message through a wide range of areas (patients now come from Chittagong, Cox's Bazaar districts and neighboring Rangamati, Noakhali, Banderban)
- Variety of approaches is required for a popular level changes to take effect around food habits
- Chakaria Rickets at primary stage can be prevented from deterioration through calcium supplementation
- Especially if pregnant mothers take calcium rich food, Rickets possibility can decrease.
- Physiotherapy, Calcium supplementation through regular food, better health-hygiene and nutritional practices, Brace and assistive device support can decrease deterioration of bones due to Rickets.
- Advices nutritional, medicine and assistive device require strong follow-up for practice.
- Assistive devices and medicines after surgery can cure better and easily.
- Rickets being a disease of developmental period, it needs long-term treatment for cure.
- Ignorance and illiteracy of mothers affects long-term (procedural) treatment of their children
- Though Rickets is happening in both rich and resource poor families, because of poverty later run more risks to more children with Rickets causing disability in the long run.
- Six successive plaster casts can cure clubfoot patients at a very age without surgery.
- Physiotherapy services are on high demand in many areas.
- Rickets is a well known issue and people are ready to collaborate their efforts on this, any nutritional campaign in Cox's Bazaar, Chittagong or coastal districts can success if blended with Rickets campaigns.



Jashim (3 years)



Jashim (5 years)

CBR Program through Credit

Introduction:

Through Credit at present Chakaria CBR program is based. One of the main targets is through this credit program to reach a large group out side of the disability to sensitize them on disability. There it has been proved that credit is a unique tool. Community Based Rehabilitation is a Program to erase the negative attitude towards disability, as it was the demand of People with disabilities.

Major Objective:

Strengthening capacities of SARPV for effective service delivery. Strengthening capacities of Group Members for effective implementation of program activities. Such as;

1. Education
2. Training
3. Awareness growing activity.
4. To provide Micro Credit for ensuring financial empowerment.
5. To strengthen the social development activates.

Approach and Activities:

- Prepared the CBR annual activity plan.
- Prepared 5 case studies for Annual Report.
- Old registration of saving and credit has been updated and opened new registration for year 2005.
- Management exchanged of five CBR groups.
- 14 farmers sent to farmers meeting.
- Meeting for preparing the Annual report.
- Taking photographs for Annual report.

Out Comes:

- 37 group meetings have been done as per group activity on rickets, disability, health, calcium rich food, group fund, and saving and credit related issue.
- One new group member with disability has admitted in a CBR group.
- 13 students with disabilities have admitted in Prodipaloy an integrated school for disabled and non disabled children.
- Regularity has maintained of donation on 17 CBR groups.
- Provided employment opportunity to 6 CBR group members with disabilities.
- Satisfactory paying off of a debt is a big achievement on this month.

Lesson Learnt:

Through credit it is possible to aware the maximum people on disability issue.

It is difficult to involve them directly any program where disabled people will be benefited

Through this program gradually it is possible to involve the community in the disability issue.

Credit is a tool to run and sustain the CBR program.

Through this program it is a process to reduce the knowledge gap between disabled Person and non-disabled persons.

STRENGTHENING HOUSEHOLD ACTIVITIES AND EXTENDED GARDENING

This project is a trial approach to supplement the outcomes of the SHABGE project with focus on household health while combining it more with SARPV's rickets prevention campaigns. It is understood, both livelihood status and rickets has direct relationship with health-nutrition-food habit and/or affordability-knowledge-practice. The project will look into how better nutrition and homestead hygiene can improve livelihood status. The project will put a major emphasis on monitoring small changes in livelihood practices.

SHABGE project has prompted the increased homestead use for production and subsequent consumption of horticultural produces by a good number of rural womenfolk. It has made progresses in areas of women's empowerment, implementing organization's capacity and rural households' food security. We plan to put more emphasis on livelihood issues like more hygiene and nutrition that better be handled by the rural households while utilizing implementing organization's special knowledge and experience more. SHABGE project will be complemented in these areas through completing this proposed project.

SHABGE partners have not yet addressed problem of Calcium-deficiency rickets, overwhelmingly prevalent in the project area. However, the agriculture-based solutions to this multi-facet problem have been envisioned by SARPV as a long-term strategy where SHABGE partners- organizations and rural womenfolk particularly the mothers, can initiate the pivotal role. The womenfolk we have working with particularly under SHABGE project in fact elaborated the ideas of programme interventions outlined here. The project has already discussed in several stages with its primary stakeholders, the rural womenfolk, the prospect of combined addressing of rickets threats and household chores for better livelihood.

Our understanding of SHABGE project is that strengthening of the households encompasses not only its increased physical and human resources (assets), but also its behavioral approaches to and better practices of health and living. Physical and human resources better be developed along with careful growth of the inter-linkages between these.

This particular project will strive to develop prototypes of households with food security, the target of the SHABGE project and also what is envisioned by SARPV in prevention of rickets, through putting emphasis on these inter-linkages between nutrition, homestead hygiene, and monitor the changes. Rights based approaches will be followed as usually in designing the project activities with particular focus on the rights of women and more emphatically persons with disability. However, children for ensuring more secondary adapters of the proposed campaigns.

APPROACHES and ACTIVITIES

- a) Promoting use of homestead gardens for production of high-Calcium horticultural produces, and Increasing household consumption of those
- b) Raising awareness of the targeted households on rickets, nutrition (targeting mother and child), hygiene, disease (preventable), disability, and rights (particularly of persons with disability)
- c) Popularizing model water-sanitation setups towards better homestead hygiene amongst the target households

- d) Involving school going children and teachers from selected local schools in campaigns for rickets prevention and improved nutrition (how and what better nutrition prevents rickets and many other health hazards) through increased exchange of knowledge and information through print and audio-video IEC materials at schools
- e) Maintaining a data collection and analysis system for monitoring the growth and shifts of the project outputs around livelihood indicators in short-intervals

Lesson Learnt:

Total 400 women will be directly benefited from the project; they will be considered the primary stakeholder in this project. Additionally students and teachers of the selected schools will also be brought under direct advocacy campaigns. However, for impact-assessment, other SHABGE partners in separate locations will be monitored for comparing respective groups' livelihood status.

Selected households from the SHABGE project will be targeted under this trial project. Most of them comprise the group of low-benefiting households (who don't have hygienic home and home-yards, and who have low homestead land for gardening or low income potentials) and particularly having member/s affected with rickets.

Primary stakeholders will be shared with the project findings on a regular basis. Project learning will be documented and presented for review six-monthly to CARE and further evaluation after the project ends.

However, CARE's partners will be briefed about the project outcomes-successes, failures, and subsequent strategies and trends quarterly as per current SHABGE coordination-plans.

Local government officials and other major stakeholders in the locality, particularly the teachers' of the targeted schools, will additionally be shared with the learning.

SARPV has community level programmes (e.g. organizing persons with disability for raising their voices) targeting the persons with disability at Cox's Bazaar areas for twelve years. SARPV has been working on rickets prevention in Cox's Bazaar since 1992. SARPV is the current SHABGE partner with Care-Bangladesh in Chakaria Upazilla.

SARPV has close working relationship with the identified families affected with rickets and families with disable members who are interested to experiment agriculture based solutions that they can handle to fight rickets epidemic. A database of affected families and at-risk population has also been maintained and they are regularly monitored. Moreover, SARPV has been working with different other stakeholders who can contribute to this project of agriculture, livelihood and rickets.

The proposed activity will build our staff more experienced to carry on the household-centred rickets prevention campaigns particularly involving agricultural technologies through other SHABGE partners.

400 households will be developed who will cut down their health costs through maintaining homestead gardening and hygiene, better water-sanitation arrangement, balanced nutrition meals (including high Calcium vegetable) from homestead horticultural produces.

Spontaneous popular actions by larger communities, who will work as the spokespersons in rickets prevention campaigns, for better living standard and rickets 3. Prevention in six villages (three unions) will be prompted.

Basic understanding on rickets prevention (how to diagnose rickets, what to do and what not to do, when and where to go) is developed amongst larger communities in three unions.