

ANNUAL REPORT 2020-21

Social Assistance and Rehabilitation for the Physically Vulnerable

DEDICATION

To

the people

who have dedicated their

hearts and mind,

words and voice,

thoughts and actions,

above all,

their invaluable lives

to establish

rights of the marginalized people

across the globe

at all times.



Social Assistance and Rehabilitation for the Physically Vulnerable

Contents

| 01 Fore | word 37 | Inclusive Education | | | |
|------------------|----------------------------------------------------------------------|---------------------------------------------------------------------|--|--|--|
| 02 Abbi | reviations and Acronyms | Prodipaloy Mainstreaming Disability | | | |
| 03 Orga | anizational Info | Climate Change | | | |
| Prog | ghts Advocacy & Networking | 42 SSHC 43 Emergency Relief Activities | | | |
| 10 12 He | PHRPBD-DI ealth & Nutrition | Renewable Energy | | | |
| 13 | | Improved Cook Stoves (ICS) | | | |
| 16 | | Solar IrrigationMore Light for Rohingyas | | | |
| 20 | | Training and Skill Development STC Chakaria, Cox's Bazar | | | |
| 28 | | 55 STC Kapasia, Gazipur | | | |
| 32 33 Mi | Rotary-SARPV Health & Hygiene Projections Finance & Small Enterprise | 56 STC Maheshkhali, Cox's Bazar 57 STC Ukhiya, Cox's Bazar | | | |
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Foreword

This year marks the successful completion of 32 years of the glorious journey of SARPV since its inception in 1989. SARPV has been working relentlessly with its mission to ensure the socio-economic upliftment of the marginalized, underprivileged and disaster-affected people including people with disabilities (PwD) as well. Also, there has been a special focus to save, through early intervention, people from conditions which might turn into disability.

Marginalized people face problems, because of negative public perception about them. It is time to change this social stereotyping of marginalized people including persons with disability, which calls for concerted efforts by the people from all walks of life.

Although we are still battling with the effects and impacts of the COVID-19 pandemic, we do believe we will be able to achieve our target as we are clear about what we want to achieve. SARPV has always been with the target groups and the community it serves. When I reflect on the past year, I feel inspired by the resilience, innovation and passion of each one of our esteemed colleagues at all levels. Together, we persevered to make a difference in the lives of the people we care about so deeply.

During this Pandemic we have lost one of our colleagues who dedicated his life for the people through his work at SARPV. SARPV was his first organization and from this organization he said goodbye to the world forever. Our prayers are for the salvation of his departed soul. We try our best to stand by all our ground staff at this challenging time.

SARPV works for a just society to ensure racial, environmental, gender, economic and social justice. Its perspectives, experience and expertise act to identify problems and ensure sustainable, community-owned and community-led solutions. SARPV is proud to have remained deeply connected with people and organizations at the national, regional and international levels and to have scaled up its projects with their active support and co-operation. Together we can aspire and strive in the years ahead with shared positive values such as freedom, equality, dignity and justice.

We are proud to share the splendid accomplishments SARPV has had to its credit so far through this report. Like the previous years, in line with SARPV's commitment to maintaining operational transparency, the 2020-21 annual report sheds light on the major events, activities and achievements of SARPV this year, related to Mainstreaming Disability, Humanitarian Assistance, Alleviating Malnutrition, Protecting people from Climate Change and Disasters, Renewable Energy support and Empowering people through Inclusive Micro-finance facilities.

Our hope is SARPV will be stronger and will cross all the hardship towards attaining an inclusive society in future where there will be no discrimination and all will enjoy the equal rights and opportunity with dignity. We will continue to adapt and find creative ways to connect like never before.

We would like to take the opportunity to express and extend heartfelt thanks and gratitude to all our stakeholders - donors, colleagues, government and non-government bodies, local representatives, other communities and the mass media for their hearty and professional assistance that enabled us to serve our target groups, the vulnerable and underprivileged groups of the society, especially the children, pregnant women, lactating mothers and of course the persons with disability; to reach where we are today.

Finally, I would like to extend my thanks and gratitude to our revered Advisers, Executive Committee, Management Team and all my colleagues at all levels for their commitment and incessant supports.

I look forward to the year ahead with supports from all concerned as we carry on with the good work of SARPV.

MD. SHAHIDUL HAQUE Chief Executive, SARPV

77

Accessibility
Education
Empowerment
Equity
Inclusion
Participation



Abbreviations and Acronyms

| AEM | Les Amis des Enfants du Monde | MRA | Micro Credit Regulatory Authority |
|-------|--------------------------------------------|--------|------------------------------------------|
| AMD | Aide Medicale et Developpement, France | MUAC | Mid-Upper Arm Circumference |
| BBS | Bangladesh Bureau of Statistics | NGO | Non-Government Organization |
| BCC | Behavioral Change Communication | NGOAB | NGO Affairs Bureau |
| BSF | Blanket Supplementary Food Support | OTP | Outpatient Therapetic Point |
| CANSA | Climate Action Network South Asia | PwD | People with Disability |
| CBR | Community Based Rehabilitation | PHRPBD | Promotion of Human Rights of Person with |
| CDC | Chakaria Disability Center | | Disabilities in Bangladesh |
| CDP | Cooperative of Disabled People | PKSF | Palli Karma Sahayak Foundation |
| CEDAW | Convention for Elimination and | PLW | Pregnant and Lactating Women |
| | Discrimination against Women | RIG | Rickets Interest Group |
| CMAMI | Community Management of At-Risk Mothers | SAM | Severe Acute Malnutrition |
| | and Infants | SARPV | Social Assistance and Rehabilitation for |
| CRG | Convergence Rickets Group | | the Physically Vulnerable |
| CwD | Children with Disability | SDG | Sustainable Development Goal |
| DFID | Department for International Development | SHS | Solar Home System |
| DPO | Disabled People's Organization | SIP | Solar Irrigation Pump |
| DSS | Directorate of Social Services | SwD | Students with Disability |
| ECCD | Early Childhood Care and Development | TSFP | Targeted Supplementary Food Support |
| FGD | Focus Group Discussion | U5 | Under five |
| GACC | Global Alliance for Clean Cookstoves | UNCRPE | OUnited Nations Convention on the |
| GMP | Growth Monitoring Program | | Rights of Persons with Disabilities |
| HH | Households | UNHCR | United Nations High Commissioner for |
| IGA | Income Generating Activity | | Refugees |
| ICS | Improved Cook Stove | UNICEF | United Nations Children's Fund |
| IDCOL | Infrastructure Development Company Limited | UNO | Upazila Nirbahi Officer |
| IYCF | Infant and Young Child Feeding | U5 | Under five |
| KDM | Kinesitherapeutes de Monde | VAW | Violence Against Women |
| MAM | Moderate Acute Malnutrition | VGD | Vulnerable Group Development |
| MDG | Millennium Development Goal | VGF | Vulnerable Group Feeding |
| MFI | Micro Finance Institution | WFP | World Food Programme |
| MJF | Manusher Jonno Foundation | WHO | World Health Organization |
| MLM | Mother Lead MUAC | WO | Women's Organization |



Brief History

Social Assistance and Rehabilitation for the Physically Vulnerable (SARPV) is devoted to work for the most underprivileged and marginalized vulnerable groups of the society for their socioeconomic development to transform them as productive human resource with a dignified life. People with Disability are the prime focus of this organization. Along with the disability it is also working on various sensitive and significant issues like poverty eradication, inclusive education, health & nutrition, human rights, humanitarian support, climate change and skill development for integrating the vulnerable groups to the mainstream of society, who are leading life with a great deal of uncertainty.

Md. Shahidul Haque, a person with physical disability along with his friends Mr. Jamal Abu Naser (Deceased), Mr. Minhaj Uddin, Mr. Abdur Rahman Shah and Ms. S.M. Ruquiya (Deceased) founded SARPV after the catastrophic tornado at Saturia (one of the sub-districts of Manikganj district near Dhaka) and registered as a voluntary social welfare organization in 1989. It is the pioneering organization in Bangladesh that has identified the correlation between disaster and disability and executed disability sensitized emergency response and relief operations.

After the catastrophic tropical cyclone in the southeastern region of Bangladesh, particularly Cox's Bazar, in 1991, SARPV initiated its community level work there. It started the first ever relief and rehabilitation operation that was focused on prevention of disability caused by physical injury and mental trauma.

SARPV was the first organization in Bangladesh that has identified the prevalence of Rickets in Bangladesh in the mid 90s.

In 2015, SARPV expanded its operations for socioeconomic development of all the vulnerable groups regardless of PwD only. To serve this purpose, SARPV emphasizes on the technical skill development that will generate employment (formal or informal) for them. SARPV believes that economic empowerment can lead towards a dignified life, thus works to integrate the vulnerable groups with the society and increase employment opportunities for them.

SARPV works with Government agencies, UN agencies, international/foreign organizations, INGOs and NGOs runing operations in Bangladesh alongwith some private entities.



Vision

To envision a barrier free society to enhance sustainable socioeconomic empowerment of the vulnerable groups.



Mission

To develop an environment for the vulnerable groups to transform them to efficient and effective human resources through capacity development and to ensure responsive service provider to the people.



Core Values Humanity, Impartiality, Neutrality, Transparency, Accountability, Equity, Independence, Quality of Service, Mutual trust and Respect regardless of disability, gender, race, religion, age etc.



Organizational Info
The spirit of service with a heart for humanity

1989 Est.

Cyclone Response Rescue for PwD



1989: Established by Md. Shahidul Haque, a person with physical disability, and his friends Mr. Jamal Abu Naser, Mr. Md. Minhai Uddin, Mr. Abdur Rahman Shah and Ms. S.M. Ruquiya for the People with Disability.

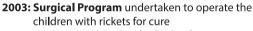
1991: Implemented first ever disability-sensitized Emergency Response in Cox's Bazar, Bangladesh, after one of the deadliest tropical cyclones.

> **Identification of Rickets** in Bangladesh.

1993: Community-based Rehabilitation 1995-97: Conducted National Rapid **Assesment of Rickets** 1996: Psycho-physical Rehabilitation for PwD

1997: Formed Rickets Consortium Chakaria, Cox's Bazar.





2004: Implemented Seeing in the Dark project in Bangladesh

2005: Established Assistive Device Center 2006: Incorporated Microfinance Program 2008: Conducted National Rickets Survey

1999: Established Prodipaloy, an integrated school for Students with and without disability





2012-15: Responded to Flashflood in Southeastern region

2013: Started work on Renewable Energy

2017: Humanitarian Response for Rohingya Population



Principles

- Every beneficiary or family must ensure easily accessible sanitary latrine use safe water in all household activities and be neat and clean in all aspects including adequate lights and air in the house.
- There must be a hole or ditch near to the household area for garbage and household waste management through composting to ensure clean and fresh environment.
- Every beneficiary family must sow and grow fruit timber and herbal medicinal plants including Guava Papaya Banana Neem etc.
- Every beneficiary household must ensure poultry and livestock rearing.
- Every beneficiary family or household must send their children to school and ensure accessibility and in all aspects of the affairs.

Developemnt Partners

Action contre la Faim (ACF)

Aide Medicale et Developpement (AMD), France

Blue Ridge Mountains Rotary Club, USA

Centre for Disability in Development (CDD)

Concern Worldwide

Electriciens Sans Frontieres

Infrastructure Development Company Limited (IDCOL)

Kinesitherapeutes de Monde (KDM), France

Les Amis des Enfants du Monde (AEM), France

Palli Karma-Sahayak Foundation (PKSF)

Rotary Club of Cox's Bazar Shaikat

Rotary Club of Dhaka Mavericks

SOLiNFO

UNHCR

UNICEF

World Food Programme (WFP)

Registration

- 1. Directorate of Social Services: Registration No.: Dha-02330, Reg. Date: 23/10/1989
- 2. NGO Affairs Bureau:Registration No.: 409, Reg. Date:-15/11/1990 *Renewed on 06/09/2015
- 3. Micro Credit Regulatory Authority (MRA): Registration No.: 00952-00132-00542; Reg. Date:01 March, 2011

Banking Partners

Bank Asia

BRAC Bank

Dutch Bangla Bank Limited

Jamuna Bank Limited

Mutual Trust Bank (MTB)

NCC Bank

Pubali Bank

Southeast Bank

Union Bank

Networks

Campaign for Popular Education (CAMPE)

Climate Action Network South Asia (CANSA)

Credit Development Forum (CDF)

Federation of NGOs in Bangladesh (FNB)

Food Security Cluster

National Forum of Organizations Working with the Disabled (NFOWD)

Rickets Interest Group (RIG)

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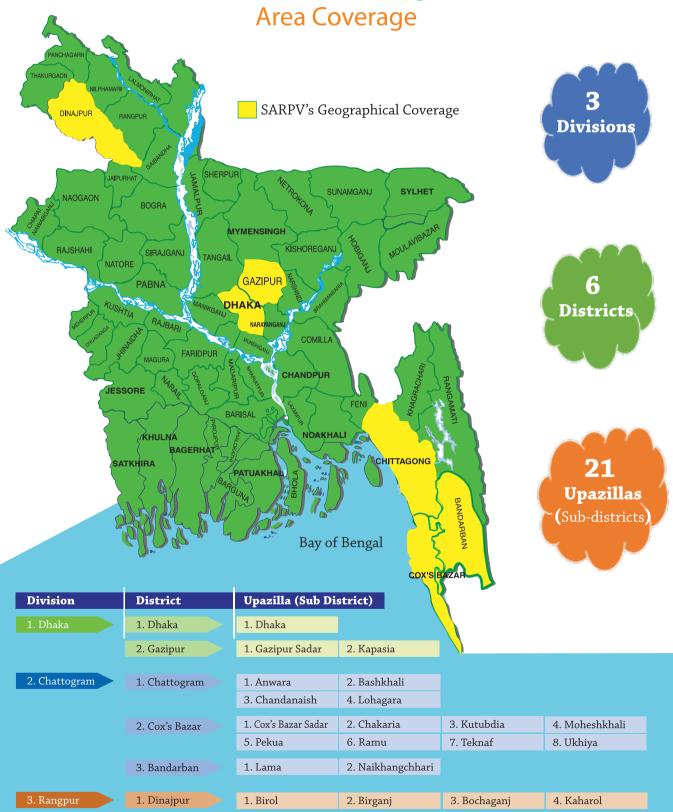














Advisory Committee



Julian Francis UK



Mahmudul Hasan Bangladesh



Dr. Cravier Thierry France



David Curtis UK

Executive Committee



Hasnain Sabih Nayak Dr. Sanchoy Kumar Chanda Md. Shahidul Haque President



Vice President



General Secretary



Mushfiqur Rahman Finance Secretary



Jolly Kowser Executive Member



Syed Baharul Hassan Sabuj **Executive Member**



Shamima Akter **Executive Member**



Organizational Info Programs & Projects of SARPV at a Glance

| ÇI | Program | Project | Donor | Duration | Location | Beneficiary# |
|-----|-------------------|--------------------------------|-----------------|-------------------|----------------------|--------------|
| SI. | Program Rights | Project Promotion of Human | CDD | Duration 2012- | CHK | 117 |
| - | Advocacy & | Rights of Person with | CDD | Cont | CHK | 117 |
| | Networking | Disabilities (PHRPBD) | | Cont | | |
| 2 | Networking | Prevention of Rickets in Cox's | AMD-KDM | 2008- | Chattagram and Cay's | 10 200 |
| _ | | | AIVID-KDIVI | | Chattogram and Cox's | 10,399 |
| | | Bazar | 0 () | Contd | Bazar District | F24 |
| | | Assistive Device Unit | Own fund and | 2008- | Chattogram and Cox's | 531 |
| | | | AMD | Contd | Bazar District | |
| | | Improving Maternal and Child | WFP-ACF | 2014- | MHK, PEK | 3,473 |
| | | Nutrition (IMCN) & | | Contd | | |
| | | Community Based | | | | |
| | | Management of Acute | | | | |
| | | Malnutrition (CMAM) | | | | |
| | | Integrated Nutrition | WFP-UNHCR | 2020- | Camp 4 | 13,778 |
| | | Intervention (INI) to address | | Contd | | |
| | | under nutrition among | | | | |
| | | vulnerable populations in | | | | |
| | | Rohingya makeshift camp | | | | |
| | | Integrated Malnutrition | WFP-UNICEF | 2020- | Camp 5 | 67,309 |
| | Health & | Treatment and Prevention | | Contd | Camp 6 | |
| | Nutrition | Program | | | Camp 8W | |
| | | | | | Camp 10 | |
| | | Delivering Health, Nutrition | Concern- | 2020- | Haldiapalong and | 21,001 |
| | | and Livelihood, and | worldwide | 2023 | Ratnapalong of | |
| | | Protection services for | | | Ukhiya and Camps | |
| | | Rohingya Refugees and | | | with Nutrition | |
| | | vulnerable host communities | | | Centers of SARPV & | |
| | | in Cox's Bazar, Bangladesh 22 | | | CWW | |
| | | | Blue Ridge | 2019- | UKH | 156 |
| | | | Mountains | 2021 | | |
| | | | Rotary Club, | | | |
| | | Rotary-SARPV Health & | USA | | | |
| | | Hygiene Project | Rotary Club of | | | |
| | | | Cox's Bazar | | | |
| | | | Shaikat, | | | |
| | | | Bangladesh | | | |
| 3 | Micro Fir | nance & Small Enterprise | Own fund and | 2006 | Chattogram and Cox's | 10,858 |
| | | Development | PKSF | 1000 | Bazar District | |
| 4 | | Inclusive School for Disabled | AEM | 1999- | CHK | Last year it |
| | Inclusive | and non-disabled Children- | | Contd | | remained |
| | Education | Prodipaloy | | | | closed for |
| - | | B.d Lu - tura - un lu - Dia | - l- :1:4 (144 | l | 5 | lockdown |
| 5 | | Mainstreaming Dis | | | | 22.000 |
| 6 | CII. | Special Support for Host | WFP | May- | CHK & PEK | 22,000 |
| | Climate | community (SSHC) during | | July | | |
| | Change, | Covid-19 | | 2020 | 2 2011 | 40.5 |
| | Disaster and | Emergency Relief Activities | Concern- | March | Camp 8W | 13,000 |
| | Disability | for vulnerable FDMN Camp | worldwide | 2021 | | |
| | Management | as Fire Victims | | | | |
| | / Emergency | Distribution of essential | Rotary club of | March- | Camp 8W | 6,700 |
| | Management | Items to the Fire Affected | Dhaka | April | | |
| | | Families in Rohingya Camps | Mavericks | 2021 | | |
| | | Improved Cook Stoves (ICS) | IDCOL | 2013- | CHK, CXB, PEK, RAM, | 72,500 |
| | | | | Cont | MHK, GZP, BAS | |
| 7 | | Biogas and Bio Fertilizer | IDCOL | 2015- | Chattogram and Cox's | 400 |
| | Renewable | | | Cont | Bazar District | |
| | Energy | Solar Irrigation | IDCOL | 2017- | BGNJ, KHL, BRL | 1,320 |
| | | | | Contd | | |
| | | More Light for Rohingyas and | Electriciens | Sept- | Moheshkhali, Cox's | 880 |
| | | Host Community in Cox's | sans frontieres | Nov | Bazar Sadar & Camp | |
| | | Bazar Bangladesh | | 2020 | 5,6, 8W, 8W 10, 4 | |
| 8 | | Training and skill Deve | | | | |

Dhaka Division: GZP: Gazipur

Chattogram Division: BAS: Banshkhali, CHAND: Chandanaish, CHK: Chakaria, CXB: Cox's Bazar, MHK: Maheshkhali

PEK: Pekua, RAM: Ramu, UKH: Ukhiya

Rangpur Division: BGNJ: Bochagonj, KHL: Kaharol, BRL: Birol



Rights Advocacy & Networking

According to WHO, there are more than 1000 million people with disability globally, that is about 15% of the world's population or one in seven people. Of this number, between 110 million and 190 million adults experience significant difficulties in functioning. It is estimated that some 93 million children – or one in 20 of those under 15 years of age – live with a moderate or severe disability. The number of people who experience disability will continue to increase as populations age, with the global increase in chronic health conditions.

SARPV has been working for PwDs since 1989. Its prime mandate is to ensure PwD's basic human rights through all its interventions. Combining the national and international guiding instruments this program has exclusively been designed to make PwDs aware on human rights, to conduct advocacy with different stakeholders and to establish network among primary and secondary stakeholders for creating a common platform for PwDs along with other marginalized groups.

Through this program SARPV usually conducts the following types of advocacy:

- Community advocacy
- Indigeneous group advocacy
- Individual advocacy
- Self-advocacy

For conducting Legal advocacy and Systemic advocacy SARPV has resource limitation. To overcome the situation SARPV working simultaneously to develop its own capacity and to generate resources.

Project under this Program

1. Promotion of Human Rights of Person with Disabilities through Disability Inclusion (PHRPBD-DI)



Geographical Coverage

Cox's Bazar and Dhaka districts

Program Objectives

- To promote the rights and dignity of poor, excluded and marginalized communities
- To strengthen the networks with different stakeholders and authorities.
- To raise mass awareness to reduce the violence against Women and Children

Target Groups

- People with Disability
- Hardcore/Ultra Poor
- Elderly People
- Dependent/Destitute Family/ Women/Widow/Children
- Vulnerable Group
- Marginalized Groups

Contribution to SDG







Promotion of Human Rights of Person with Disabilities in Bangladesh through Disability Inclusion (PHRPBD-DI)

Goal

To sensitize people, policy makers and civil society organizations in Bangladesh to the potential, leadership qualities and rights of persons with disabilities in order to improve inclusion, equity and access in society.

Objective

Improving the quality of life of people with disabilities through effective use of local resources where the inclusion of all will be ensured

Project Area

Chakaria Pouroshova and Boroitoli Union of Chakaria Upazilla

Beneficiary Coverage

117 PwDs

PwDs are receiving food support from Local Administration, facilitated by SARPV

Activities & Achievements

- 40 people were oriented on Child Safeguarding, Violence against women and getting legal services.
- 1 field camp was organized for mentally unwell person
- Organized 3 orientation for community clinics for disability inclusive service.
- 15 people with mental unwellness got medicine support
- Including PwD in Different Programs of Other NGOs
- Assisted 20 PwD to get Disability Allowance
- Assisted 1 students with disability (SwD) to avail Govt. Scholarship for SwD.
- 140 People got message on Covid-19
- 45 people were engaged to social SafetyNet program of Govt.

Challenges

- Inaccessible infrastructures.
- Social taboo and superstitious practices put obstacle in every step at field level
- Due to COVID-19, 2020-21 was a difficult year for all

Lessons Learned

- Proper education can reduce the Social taboo and superstitious practices.
- Primary service providers (Govt) can resolve any complex issue more effectively than others.



Orientation meeting on VAW, child safeguarding and getting legal support

Promotion of Human Rights of Person with Disabilities in Bangladesh through Disability Inclusion (PHRPBD-DI)

Project 1.1

The spirit to go beyond: Rozina



Rozina Akter is a woman with disability, 23 years old, who lives in Kaharia Ghona (Ward No. 5) of Chakaria Upazila. Her father is Md. Manik, a farmer and her mother is Khaleda Begum (deceased). Rozina has a brother and four sisters. Depending on their father as the only earning member of the family, her family faced extreme financial crisis. Because of polio she became a victim of physical disability. She completed her primary education at SARPV's 'Prodipalay School'. After that she passed class eight from Chakaria High School.

At the initial stage Rozina was depressed due to her disability. She had no hope and ambition. In 2010 she got to know about SARPV and their activities on disability. Getting involved with SARPV she got training on tailoring and became aware of the rights of person with disability (PwD) from SARPV. In 2020 she got 6 month training from BRAC and got one sewing machine and one wheelchair with the help of SARPV. At the time of last Eid ul Azha Rozina made many clothing items to sell in her neighborhood, which she sold and made profit.

In addition, Rozina along with her other neighbors, keeps 50 taka each as savings per month in VSL program of SARPV and their current savings amount is 50,000/=. Now they have a plan to buy more Cloths from Chattogram and to expand their business.



Health & Nutrition

Geographical Coverage

Chatoogram and Cox's Bazar districts

Program Objectives

- To reduce substantially the number of deaths and illnesses.
- To provide health & nutritional services to the rural area.
- To prevent disability (especially childhood disability).

Target Groups

- Children with Clubfoot
- Children with Cerebral Palsy
- Pregnant & Lactating Mother
- Children under 5 years

Contribution to SDG



Projects under this Program

1. Prevention of Rickets in Cox's Bazar

2. Assistive Device Unit

3. Improving Maternal and Child Nutrition (IMCN) through Community-based Management of Acute Malnutrition (CMAM)

4. Integrated Nutrition Intervention (INI) to address under nutrition among vulnerable populations in Rohingya makeshift camp

5. Integrated Malnutrition Treatment and Prevention Program

6. Delivering Health, Nutrition and Livelihood, and Protection services for Rohingya Refugees and vulnerable host communities in Cox's Bazar, Bangladesh

> 7. Rotary-SARPV Health & Hygiene Project







Prevention of Rickets in Cox's Bazar

Goal

To Prevent disability due to rickets with especial focus on childhood disability prevention.

Objectives

- To ensure early identification of Rickets and provide required service according to need.
- To advise on nutritional support.
- To ensure surgery.

Target Groups

- Cerebral Palsy Clubfoot Rickets
- Children with other types of disabilities

Beneficiary Coverage

10,399 CwD (4,578 Girls and 5,821 Boys)

Project Area

- Chakaria Cox's Bazar Sadar Moheshkhali Pekua
- Ramu Ukhia Anwara Bashkhali Lohagara

Major Activities

- Medication Physiotherapy Surgery
- Meeting with Local Government
- School Visit and raising awareness on disability
- Identifying childhood disability and providing necessary guidance to prevent disability (without medicine)

Funding Agency

AMD-KDM

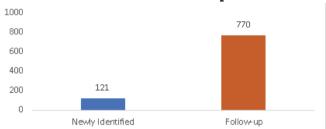
Achievements

Cerebral Palsy identified and followed up in 2020-21



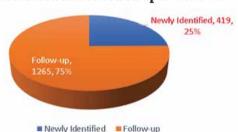
In 2020-21 total CP patients treated: 2391. Among them 568 (Boy: 336, Girl: 232) children were newly identified and 1823 (Boy: 1137, Girl:686) follow-up patients.

Clubfoot identified and followed up in 2020-21



891 clubfoot (Boy: 544, Girl: 347) children were treated last year among them 121 (B: 79, G: 42) were new rest all wer follow-up patients.

Rickets identified and followed up in 2020-21

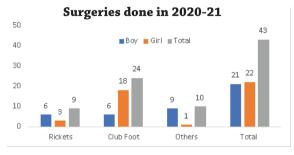


Total treated: 1684 (Boy: 1046, Girl: 638) Rickets patients. Out of 1684, 419 (B:253, G:166) were newly identified and 1265 (B:793, G:472) were follow up patients.

Children with other disabilities treated in 2020-21



In 2020-21 Total 5,433 children with disability got treatment service among them 2,364 were new (B: 1,367, G:997) & 3,069 (B:1,391, G:1,678) were follow-up patients.



In 2020-21 43 surgery were accomplished. 9 for Rickets, 24 for Clubfoot and 10 for other type of disabilities.



Assistive Device Unit

Goal

To enable people with disability to lead a normal or better life as much as possible by providing/supporting with assistive devices.

Objectives

- To assess the potentials and requirements of the people in need.
- To develop/customize the device
- To run trials to have expected performance of the device
- To follow-up with the customers/beneficiaries to match the changing needs.

Beneficiary Coverage

Total 531 assistive devices were delivered/distributed among PwDs.

Area Coverage

Chattogram division and adjoining divisions/districts as it is the first and only of its kind in the whole southeast region of the country.

Devices developed and produced

- Binders
- Clubfoot brace
- Crutches
- Prosthetics
- Seats
- Shoes
- Tricycles
- Walkers
- Walking frames
- Walking stick
- Wheelchairs etc











Project 2.2

Assistive Device Unit

Back to an active normal life: Jahangir

Jahangir Alom, a young boy of 19 years from Malumghat under Chakaria upazilla, was a Madrasa student. On 5 February 2019, a car hit him from behind while he was going back home from Madrasa. Initially he was taken to Malumghat Memorial Christian Hospital. But, considering his physical condition they referred him to Chittagong Medical College Hospital where he had amputation through an operation.

After even 2 years of his operation he was still using the crutches. When he came to SARPV office and requested for help, after screening him it was identified that he needed a Trans Femoral Prosthesis. If he got this device, he could walk without support of crutches and he could do many things on his own and earn his living. With supports from SARPV, Jahangir now drives a battery-run auto rikshaw for his livelihood.









Improving Maternal and Child Nutrition (IMCN) through Community-based Management of **Acute Malnutrition (CMAM)**

Goal

To break the intergenerational cycle of malnutrition using a combination of preventive and curative approaches which include the detection and treatment of under nutrition of pregnant & lactating women and moderately malnourished children aged of 6-59 months of 19 Unions (Including pouroshova) of Moheshkhali Upazila and Pekua upazila under Cox's Bazar district

Objective

• To reduce mortality and morbidity among boys and girls under 5 years old and PLW among Host community population in cox's Bazar

Funding Agency

- ACF

Target Groups

- 6-59 Month Children (MAM & SAM)
- Pregnant and Lactating Women
- Partially all types of caregivers & adolescents

Beneficiary Coverage

 Total SAM Admission: 187 Total MAM Admission: 2,053 • Total PLW Admission: 1.233



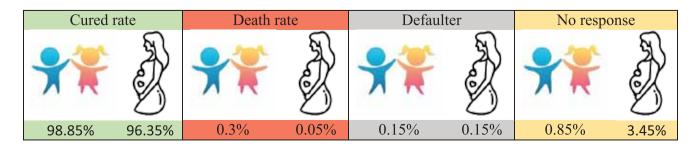
Project Area

Moheskhali and Pekua Upazilla of Cox's Bazar district

Achievements

Proportion of target group accessing SAM and MAM services: TSFP 67% & OTP 58% according to last SQUEAC/coverage Survey (2019).

Percentage of children and PLW treated and their status



Improving Maternal and Child Nutrition (IMCN) through Community-based Management of Acute Malnutrition (CMAM)

Project 2.3



| were Scr | were Screened |
|----------|-------------------------------------------------------------|
| 5196 | Growth Monitoring Program were accomploshed |
| 580 | Model Mother received Key Massage on IYCF |
| 32738 | Mother received massage on Nutrition, Hygiene & MIYCF |
| 32 | Union Parishad meeting were conducted |
| 2 | Training (3 days) on CMAM and IYCF & GMP were conducter for |
| 5 | Nutrition day observation: 5 |
| 12 | Community clinic were Renovated |

Challenges

Due to COVID-19 Situation, challenges faced were:

- Meeting screening targets
- Reaching Hard-to-reach areas and Screening
- Conducting BCC, Courtyard & school awareness sessions.
- Distribution of nonfood items due to late supply



Learnings

- Model Mothers can be helpful in referring beneficiaries and following them up.
- Regular refresher's training increased staff capacity running field level activity.
- Screening at EPI centers increased relationship with Govt. Staff and larger extent of community can be covered.
- Regular quarterly stakeholder meeting helps to continue the program smoothly.
- Donors' visits and their feedbacks contributed to smooth running of the program.
- Proper planning and target setting for all staff and volunteers at the beginning of the year help a lot in achieving targets.
- Utilization of online platform can be very effective in emergency.



Improving Maternal and Child Nutrition (IMCN) through Community-based Management of Acute Malnutrition (CMAM)



UFPO Tapas Dutta visiting CNW & CNV Basic training on CMAM, IYCF & GMP at SARPV Moheshkhali Office on 13 October 2020.



UFPO Tapas Dutta & WFP PA Rasel visiting Matarbari FWC on 13 January 2021.





 ${\it WFPO Tapas Dutta \& WFP PA Rasel visiting Matarbari FWC on 13 January 2021.}$

Improving Maternal and Child Nutrition (IMCN) through Community-based Management of Acute Malnutrition (CMAM)

Project 2.3

Towards becoming a healthy child: Habiba







Umme Habiba during last screening, about two months after the first one

Umme Habiba (BNF Registration No: SPJGCL0681695), daughter of Khalil Ullah and Rokhsana, lives in JM Ghat Purbo Para (21.675992N:91.952058E) of Shaplapur union of Moheshkhali upazilla of Cox's Bazar District. Khalil Ullah is a farmer and Rokhsana is a housewife. They lived under the poverty line that resulted in malnourished growth of Umme Habiba. She was born on 01/09/2019 and identified as a malnourished child by SARPV Volunteer on 09/02/2021, as her first MUAC measurement was 117 mm. After getting nutritional support from this program her MUAC improved to 126 mm within 56 days. Observing her growth, she was discharged on 25/05/2021. Now she is more nourished and her family has come to know the nutritional issues that will help her in future.



Integrated Nutrition Intervention (INI) to address under nutrition among vulnerable populations in Rohingya makeshift camp

Goal

To reduce the prevalence of under nutrition among children aged 6-59 months and among pregnant and lactating women (PLW) to break intergenerational cycle of malnutrition through combination of preventive and curative approach.

Objectives

- Increase program coverage.
- Find children with SAM.
- Find children with MAM.
- Find acutely malnourished PLW.
- Follow up children who have may be absent or defaulted and continuous screening.
- Understand reasons for absence and default so that they can be addressed.
- Promote strong links between prevention and treatment so that the underlying causes can also be addressed.
- Reduce SAM & MAM cases.

Funding Agency

UNHCR

Target Groups

- Under 5 Children
- Pregnant and Lactating Women
- Adolescent Girls

Beneficiary Coverage

- Total Children Screened: 58,373 (average 5,307)
- PLW Screening: 14,598 (average 1,327)
- Total 6-59 months children got service from our site: 10,500
- Total Pregnant and Lactating Women: 3,927
- Total Above 5 years: 38
- Total CMAMI new: 222
- Total CMAMI Screened: 1,738
- Total IYCF counselling: 3,308
- Total IYCF group session participant: 5376
- IFA Distribution (newly admitted and receiving): 3,880



Mother-led MUAC training (MLM Training) to one of the mothers



Project Area

Camp 4 in Ukhiya upazila, Raja Palong union. GPS Coordinates:

Site 1: 21.213310; 92.143900 Site 2: 21.204182; 92.143526

Services Provided

• Under 5 OTP children: 206

Under 5 TSFP children: 1,602

• Under 5 BSFP children: 1,935

• TSFP Pregnant and Lactating Women: 94

• BSFP Pregnant and Lactating Women: 2,087

• Above 5 SAM beneficiaries: 38

• CMAMI: 222

• IYCF 1v1 Counselling: 1,627

• IFA PLW (newly admitted and receiving): 950

IFA Adolescent (newly admitted and receiving): 2,930





Edema Measurement of a child beneficiary

Integrated Nutrition Intervention (INI) to address under nutrition among vulnerable populations in Rohingya makeshift camp

Project 2.4

Achievements



*

TSFP Child



TSFP PLW

Cured rate: 96.1% Cured rate: 91.6%

Cured rate: 84.7%

Death rate: 0%

Death rate: 0%

Death rate: 0.0%

Defaulter rate:

Defaulter rate: 0.0%

No response: 3.9%

No response:

Non-responder rate: 15.3%

8.4%

- Average monthly child Screening: 5,307
- Average monthly PLW Screening: 1,327
- OTP Child Cured: 343
- TSFP Child Cured: 2,523
- TSFP PLW Cured: 111
- CMAMI (Community Management of At-Risk Mothers and Infants) Discharge as Cured: 77.0%
- MLM Trained: 5,971
- MLM Re-trained: 3,339
- IFA PLW (newly admitted and receiving): 950
- IFA Adolescent (newly admitted and receiving): 2,930



Deworming Campaign



Vitamin A Campaign

We also completed Vitamin A Campaign (VAS), MASS Screening, Beneficiary database in electronic format, and Deworming Campaign at our sites.

Challenges

- Volunteer drop out due to lower wage than other sector.
- To restrict the spread of Covid-19 we couldn't run our integrated program fully and had to continue the sites with minimum staff.
- In the rainy season some of the sites became inaccessible.
- Tight schedule of some of the projects/activities e.g. mass screening.
- Due to double ration, it was hard to bring the IYCF and CMAMI beneficiaries for follow-up visit.
- Sensitization of the key member of the family was tough as community dialogue sessions were not allowed.
- Many mothers memorize what nurse counselled and recite when they come for follow-up visit. Thus it was difficult to understand if the messages were duly internalized.
- Maintaining social distance.
- Relocation of beneficiaries.
- Maintaining thus ensuring hygiene at the households of the beneficiaries.
- Communicating with the child beneficiary for the measurement was hard due to language difference.
- Due to lockdown, completion of VAS was very difficult.
- Managing non-breastfed children as it was very difficult to manage and sensitize the wet nurse.



Integrated Nutrition Intervention (INI) to address under nutrition among vulnerable populations in Rohingya makeshift camp

Learnings

- Tracking all the beneficiaries by household from the beginning can help remove fake admission.
- Special follow-up helps track the mothers, who memorize and recite but do not practice what have been counselled.
- Rostering schedule help work with minimum staff.



Disinfecting the site



Chief Executive visiting the site



CMAM & PSEA Training group

Integrated Nutrition Intervention (INI) to address under nutrition among vulnerable populations in Rohingya makeshift camp Project 2.4

Towards becoming a healthy child: Md Yusuf



Yusuf before having program support

Yusuf after having program support

Md. Yusuf was born in Rohingya Refugee Camp 4 (Sub Block: C-25, FCN Number: 195654) on 02/07/2019. His Mother's name is Sanjida and Father's name is Nurul Amin. When Sanjida was pregnant, she was admitted at SARPV Site-1 INI facility of Camp 4. When her child's age was over 6 months then her child Yusuf was admitted at the OTP section as his MUAC was found to be 11.5 cm. There were no complications found in his body. During admission he was very thin. No edema was found in his body. With the program support his MUAC became 12.8 cm without any complications.



Integrated Malnutrition Treatment and Prevention Program

Goal

To provide nutritional support to the children aged under 5 years, pregnant & lactating women and adolescent girls

Objectives

- To reduce excess mortality and morbidity among boys and girls under 5 years of age, PLW and other vulnerable groups through provision of life-saving interventions to treat Severe and Moderate Acute Malnutrition.
- To reduce the burden of malnutrition among boys, girls, PLWs and other vulnerable groups through the strengthening and scale up of malnutrition prevention interventions.



- UNICEF
- WFP

Target Groups

- 0-59 months child
- Adolescent girls
- Pregnant Women and Lactating Mothers

Beneficiary Coverage

OTP beneficiaries: 2,013

TSFP (child) beneficiaries: 7,636BSFP (child) beneficiaries: 28,025

• TSFP (PLW) beneficiaries: 601

BSFP (PLW) beneficiaries: 7,675

• Adolescent girls: 21,359

Project Area

| Camp | Site | Latitude | Longitude | | |
|------------|------------|----------|-----------|--|--|
| Camp 5 | Camp 5 INF | 21.20361 | 92.14888 | | |
| Camp 6 | Camp 6 INF | 21.20592 | 92.15771 | | |
| Camp 8W | Site 1 | 21.19583 | 92.14916 | | |
| Carrip 8vv | Site 2 | 21.19694 | 92.15305 | | |
| Camp 10 | Site1 | 21.18776 | 92.15256 | | |
| Camp 10 | Site 2 | 21.19138 | 92.15194 | | |



Oedema Measurement at the center



 $MUAC\ Measurement\ at\ the\ center$



Vitamin A Supplementation and register update

Project 2.5

Integrated Malnutrition Treatment and Prevention Program

Achievements

- 1,580 child cured from SAM in OTP (90.3%)
- 5,499 children cured from MAM in TSFP (91.3%)
- 355 PLW cured from MAM in TSFP (94.7%)

Challenges

- Fire incident at Camp 8W, which hampered the community activities
- Crowd controlling during and after the fire incident due to lack of awareness among the community people.
- Because of COVID-19, some activities such as GMP activities, community sessions etc. could not be started.

Learnings

- Community level work can still be done despite the pandemic situation in, in limited scale though.
- Maintaining social distancing is a key concern while carrying out any social interaction.
- Providing immediate response after the fire incident in camp 8W is very importaing for treatment and saving lives.



Part of the Camp 8W immediately after the Fire Incident



Counselling Session at the Camp



Integrated Malnutrition Treatment and Prevention Program



Staff Orientation



Part of the Camp 8W immediately after the Fire Incident



CIC visit to one of the INF facilities during VAS-round 1



Cooking Demonstration at the center



Vitamin A Supplementation

Project 2.5

Integrated Malnutrition Treatment and Prevention Program

Towards becoming a healthy child: Ajida

On 23 June 2020, OTP received a SAM child without medical complication from GMP component of Refugee Camp-8W. Her name was Ajida, Age-21 months, daughter of Mr. Rafik and Mst Sufiya. They were unregistered refugee from Block-I-15 (Camp-8w), Mazhi Name: Anamullah and have been living with the cooperation and supports from UNHCR. Rafik was a seasonal day labourer and Sufiya was a housewife, who were always busy to receive aid from different organizations at camp level. Ajida is the youngest of three daughters. They lived in a small room which was very congested and unhygienic according to Refugee camp context, due to which Ajida became sick and was brought to Integrated Nutrition center of Camp-8w Site-2.





Ajida before treatment

Ajida after treatment

After taking history from the caregiver and assessing physical condition, it was observed that Ajida was very weak and malnourished. Her MUAC was very low. Due to this COVID 19 pandemic, eight and weight of the children could not be measured and recorded. However, based on MUAC Ajida was admitted at the OTP program. After different physical examinations, she was given medicines and therapeutic food (RUTF) during admission under a systematic treatment protocol. OTP Nurse prepared the syrup-Amoxicillin and ensured the first dose of syrup as well as other drugs at the OTP. The nurse also showed the caregiver as to how Ajida should be given the medicines and food at home. She closely monitored Ajida's condition for the first week of treatment and kept Ajida under regular follow-up during her visits. At the time of admission her MUAC was 118 mm with no Oedema. During every visit the caregiver received Health & Education counselling about personal hygiene and how to feed RUTF, take care of her child and continue breastfeeding during treatment. Feedback was also taken. Ajida's Nutritional status improved gradually with the treatment and supports from OTP center. Ajida was discharged on 10 September 2020 after successful completion of her treatment. During discharge, her MUAC was 129 mm, with no Oedema or medical complication and good appetite test. The total length of stay was 80 days.

The caregiver and mother Sufiya was very happy during discharge. She thanked the Nurse and all Staff of SARPV for their great support towards taking care of her child. Now she feels happy to share her happiness with other members of the Refugee community.



Delivering Health, Nutrition and Livelihood, and Protection services for Rohingya Refugees and vulnerable host communities in Cox's Bazar, Bangladesh

Goal

To improve health, safety, and well-being of women, men, boys, and girls in camps and surrounding host communities.

Objectives

- To improve health and nutrition practices for pregnant and lactating women (PLW) and children under 2 years and increase detection and rehabilitation of children affected by malnutrition related skeletal disorders.
- To improve access to nutritious food for households with children under 5, older persons, and PLW, through home gardens, participatory cooking sessions and livelihoods interventions.



Concern worldwide

Target Groups

- Pregnant and lactating women (Women who have conceived and/or has a child less than 2 years of age)
- Husbands of pregnant and lactating women
- Mother-in-law of pregnant and lactating women
- Elderly people and their helpers: Elderly people aged more than 60 years are included in this group of beneficiaries.

Beneficiary Coverage

21,001

Project Area

Haldiapalong and Ratnapalong of Ukhiya and 4,5,6,8W,10 (Camps with Nutrition Centers of SARPV) 13,14,15 (Camps with Nutrition Centers of Concern Worldwide, physiotherapists of SARPV provide service to the persons with disabilities in these camps, SARPV enumerator team will also conduct rickets survey in these camps)



Homestead garden of a beneficiary

Achievements

- Formation of Mother Care Group (MCG), Household Care Group (HHCG), Husband's group, Mother-in-law group and elderly group in all camps and unions of the project area.
- Conduction of four MCG monthly sessions on topics of group session facilitation technique, home garden, care before, during and after pregnancy and complementary feeding
- Conduction of one session of quarterly sessions of Husbands, mother-in-law and elderly on the topic of home gardening.
- Establishment of 19836 home garden
- Establishment of 150 model gardens in total
- Training of 150 beneficiaries of host community on poultry rearing, small business and food processing (50 beneficiaries for each trade)
- Identification and management of 63 Rickets patients through providing calcium tablets in camps and host community.
- Enlistment of 54 persons with disabilities for providing assistive devices to them.

Delivering Health, Nutrition and Livelihood, and Protection services for Rohingya Refugees and vulnerable host communities in Cox's Bazar, Bangladesh Project 2.6

Persons identified with disability in different camps

| Diagnosis | Camp- | Total |
|----------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| | 10-1 | 10-2 | 8w-1 | 8w-2 | 6 | 5 | 4-1 | 4-2 | |
| Cerebral Palsy | 10 | 2 | 14 | 1 | 6 | 5 | 2 | 2 | 42 |
| Rickets | 1 | 0 | 4 | 1 | 6 | 0 | 12 | 0 | 24 |
| Polio | 3 | 1 | 0 | 0 | 1 | 0 | 5 | 0 | 10 |
| Clubfoot | 0 | 0 | 1 | 2 | 0 | 2 | 0 | 0 | 5 |
| Other | 20 | 1 | 10 | 4 | 5 | 1 | 0 | 0 | 41 |
| Total | 34 | 4 | 29 | 8 | 18 | 8 | 19 | 2 | 122 |

Challenges

- Accomplishing a huge volume of tasks within a short time due to delayed start of project activities.
- Maintaining time and quaility in serving snacks and lunch to the huge number of session participants as the vendors had failed to meet the expected standard of food and timely delivery.
- Distribution of seeds and fertilizers were conducted separately and therefore the same beneficiary had to come twice for collecting the inputs. It was troublesome for the team as well.
- Group sessions had to be conducted in smaller groups than usual due to lockdown.
- Increased rate of patients identified with COVID-19 in both camps and host community. Despite maintaining all safety precautions, concerned SARPV team members remain vulnerable to being infected with COVID-19

Learnings

- It will be better if the package of inputs for gardening (seeds and fertilizers for home gardening and seeds, fertilizers and other inputs for model gardening) is given to beneficiaries at one time.
- As safety precautions, group sessions are conducted in small groups of 4/5 members. Yet the need of disseminating crucial nutrition related messages cannot be overlooked.
- Regular and frequent follow up of beneficiaries resulted in a good rapport of SARPV team with them. It also helped identify their needs and providing them necessary support.
- If donors share the monthly activity plan beforehand, it is easier to plan and implement.

Project 2.6

Delivering Health, Nutrition and Livelihood, and Protection services for Rohingya Refugees and vulnerable host communities in Cox's Bazar, Bangladesh



MCG Session going on in host community





Physiotherapists demonstrating at Rohingya Camp

Delivering Health, Nutrition and Livelihood, and Protection services for Rohingya Refugees and vulnerable host communities in Cox's Bazar, Bangladesh Project 2.6

The spirit to go beyond: Setara Begum



Setara Begum Receiving Fertilizers and her garden



Partial viw of Setara Begum's garden

Setara Begum (Bnf ID, 174003; MOHA ID: 17720171111095937) one of the Rohingya migrants who lives in Sub-Block-G-52 of Block B at Camp 5. She was selected to make a Model Garden around her homestead. She received inputs from SARPV and benefitted from it.

Setara and her husband Md. Kashim have a little child under 2 years old. They had cultivable land but they did not know the right process of cultivation. Their child is suffering from severe acute malnutrition and now getting treatment from integrated nutrition facility of SARPV. The mother had lactational problem related to proper attachment and positioning and claimed that the baby couldn't get enough milk.

With the daily follow up visit by SARPV team member, it was noticed that they also have issues with hygiene. And they even don't know about proper menu planning as they have no idea what to eat and which food will provide them balanced nutrition to make them and their child fit in the long run. As they have financial crisis, they couldn't afford variety of foods including animal protein.

After providing 9 types of seeds and 5kg fertilizer, alongwith regular household visits and suggestions on how to prepare the soil for cultivation and the appropriate ways of cultivation. SARPV team members also facilitated sessions on home gardening and its nutritional advantage. Also shared with them were various tactical knowledge about how they can attain financial stability by selling the extra products after meeting their family need and buying other foods to get a balanced nutrition in their regular meal plan.

Setara Begum said, "I am very happy to see the garden. I am more confident than before and now we are trying to sell the surplus vegetables and earn money." She has become self-reliant like other women in the camp by getting this session from us and is able to support her family as well.

Through this BPRM project, a marked change in their behavior is expereinced. They have become believers in their own development. It is hoped that in near future they will become socially and economically self-dependent and get rid of the perpetual undernutrition, and will have a healthy and meaningful life.



Rotary-SARPV Health & Hygiene Project

Background

Toilets, and the access to toilets and established sanitation standards, are actually a very, very important issue in much of the developing world. The World Health Organization (WHO) estimated in 2010 that 2.5 billion people worldwide didn't have access to a toilet. The lack of toilets can lead to many serious sanitation problems; exposed fecal matter can lead to any number of a long list of diseases and can cause infection, lead to dysentery, and provided a breeding ground for many parasites.

More than reducing levels of infection and disease, however, the sanitary importance of toilets offers an increased sense of dignity.

Objectives

- To construct 3 units of Toilets.
- To do repair/maintenance work 1 unit of Toilet.

Target Groups

- Families in the Rohingya Camps and Host Community
- Families having people with disabilities

Funding & Collaborating Agency

- Blue Ridge Mountains Rotary Club,
 Rotary International District 7610, Virginia, USA
- Rotary Club of Cox's Bazar Shaikat,
 Rotary International District 3282, Bangladesh

Project Area

• Rohingya Camps and Host Community in Ukhiya









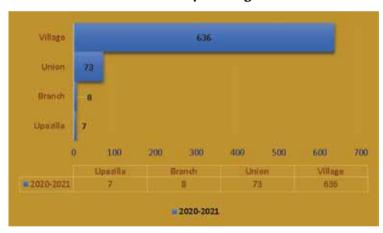
Micro Finance & Small Enterprise Development



SARPV believes that every single person regardless sex, ethnicity, disability is potential resources for development. Contextualizing the economic condition and availability of resources specially for PwDs, this organization started this program in 2006 as a component of community-based rehabilitation for PwDs. Though the financial capacity indicates the social wellbeing for the vulnerable groups, SARPV continued this program since then. SARPV obtained the legal permission from Microcredit Regulatory Authority in 2011 and became the 275th partner organization of Palli Karma Sahayak Foundation (PKSF) in 2017.

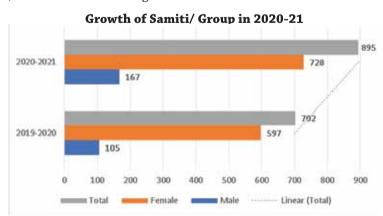
The year 2020-21 was very challenging to operate this program because of COVID-19 pandemic. All the program staffs and its beneficiaries had to confront life threat throughout the year and had to survive during this adverse situation.

Beneficiary Coverage



Number of Beneficiaries: 10,858 (Female: 10,402, Male: 456)

In 2020- 2021 SARPV opened a new branch and expanded its working area by 1 upazilla, 12 unions and 208 villages.



Due to lockdown, it was very difficult to operate the program. Yet SARPV's Staff gave their best for the organization and number of Samiti by 193 in the last fiscal year.

Geographical Coverage

Division: Chattogram

Districts: Chattogram, Cox's Bazar

and Bandarban

Upazila: Chakaria, Pekua, Lama, Lohagora, Satkania and

Chandanaish Villages: 636

Program Objectives

- To reduce poverty.
- To enhance the capacities of people in the area of money management
- To elevate socioeconomic condition of vulnerable groups especially women and PwDs.
- To develop entrepreneurship at community level.

Target Groups

- People with Disability
- Marginalized Men & Women
- Covid-19 affected entrepreneur
- Entrepreneurs of natural disaster-prone/climatic vulnerable areas
- Ethnic groups.

Contribution to SDG

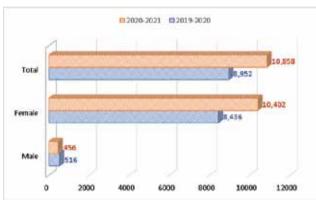






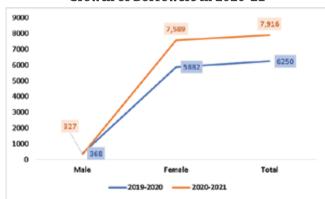
Micro Finance & Small Enterprise Development

Growth of Number of Members in 2020-21



Number of Members increased by 1,906 in 2020-21. 1,966 female members were added and 60 male members were excluded. Current Total Number of Members are 10,858 (Female: 10,402, Male: 456)

Growth of Borrowers in 2020-21

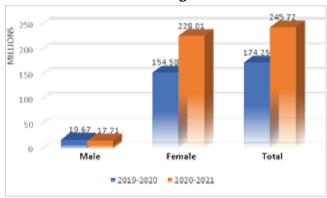


1,666 Borrowers increased (1,707 female added, 41 male cancelled. Current total Borrowers: 7,916 (M: 327, F: 7589)



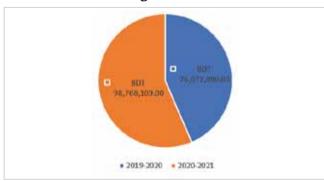
A borrower collecting her loan amount from the accountant at Chakaria

Loan Outstanding in 2020-21



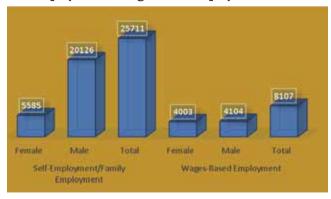
Increase over previous year was BDT 71.47 Million and total outstanding is BDT 24,57,22,511

Savings in 2020-21



With BDT 22,697,019.00 increase over the previous year, Total Savings in 2020-21 was BDT 98,768,109.00

Self Employment & Wage-based Employment in 2020-21

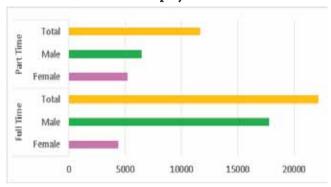


Total 25,711 people were self-employed or family-employed and 8,107 were involved in wage-based employment.

Micro Finance & Small Enterprise Development

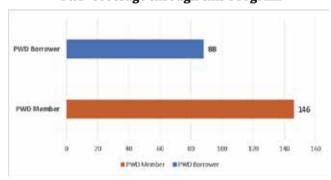


Full/Part Time Employment in 2020-21



Total 22,148 were involved in full time employment and 6,455 were involved in part time involvement.

PwD Coverage through this Program



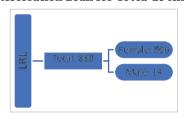
Total 146 PwD are getting financial service from SARPV as members. Out of them, 88 are direct borrowers. The most important thing is, compared with others, the PwD have turned out to be more trustworthy and responsible.

Progoti Loan for PwDs



Total 23 PwD Borrowers took loan from SARPV. The Outstanding amount is BDT 331,129.00 that is BDT 108,726 more than last year.

Livelihood Restoration Loan for Covid-19 Affected People



Total 880 person (Male: 14, Female 866) got Livelihood Restoration Loan (LRL) support from Bangladesh Government and PKSF through SARPV.

Scholarship from PKSF

14 Students got BDT 12,000 each as scholarship from PKSF



Students are receiving the Scholarship Cheque from the Mayor of Chakaria Municipality



Scholarship Recipients

Challenges

Due to lockdown, SARPV was affected thrice in last fiscal year: July-August 2020, March-May 2021 and lastly June 2021; could not operate properly and failed to achieve some targets. This resulted in BDT 4,931,237 less earning than expected.

Learnings

- Small businesses having loan during scarcity can avoid loss.
- Some people misleading commoners about Govt instructions made field tasks difficult to perform as per Govt instruction.



Micro Finance & Small Enterprise Development

The spirit to go beyond: Monwara and Harun



Monwara Begum and her husband Md. Harunur Rashid



Monwara and Harun with their cattle



Monwara and Harun with their cattle

Monwara Begum's family got affected due to Covid-19 and she needed some money for agricultural purpose. SARPV provided her the money under Livelihood Restoration Loan (LRL) from Bangladesh Government and PKSF. With this loan, Monwara and her husband Md. Harunur Rashid were able to start and run turkey and cattle rearing, thus earn their living to support their family of 5 members. They are very much thankful to SARPV for this subsidized loan of government that was disbursed through PKSF for the COVID-19 affected people.

Program 4

Inclusive Education

Project under this Program

1. Inclusive School for children with/without disabilities -Prodipaloy

Geographical Coverage

Chakaria Upazila of Cox's Bazar district

Program Objectives

- To ensure Inclusive Primary Education
- To ensure education for the school dropout children of the society
- To create interest among the children so that they come to school
- To ensure fear free environment for the pre schooling.

Contribution to SDG





Students of Prodipaloy taking oath



Inclusive School for Children with and without Disabilities - Prodipaloy

Goal

Quality Primary Education for all

Funding Agency

AEM-France

Project Area

Chakaria Upazila of Cox's Bazar District

Objectives

- To ensure inclusive Primary Education
- To ensure education for the school dropout children of the society
- To make all the schools accessible for the children with disabilities
- To ensure quality basic Education and ECCD

Target Groups

Children with and without Disability

Current Status

Total Students: 155 SwD: 12 (8% of Total)

Boys : Girls = 80 : 75 = 48.4% : 51.6% SwD Boys : SwD Girls = 8 : 4 = 67% : 33%

Major Activities

- Day observation
- Home visit
- Emergency Relief Distribution

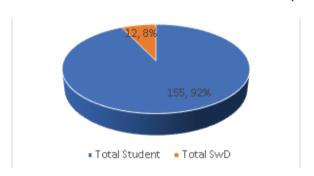
Challenges

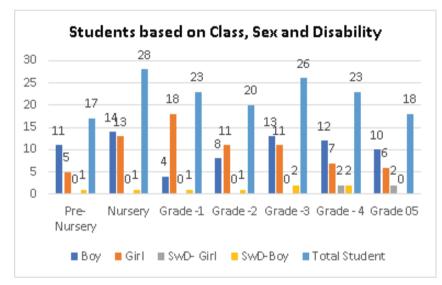
Covid-19 Situation

Learning

Due to staying out of school and other external activities children are experiencing mental disturbances.

Number of Total Students vs Student with Disabilities (SwDs)





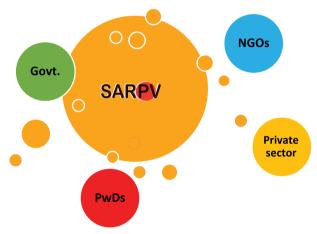


UNO of Chakaria distributing Relief items among the families Prodipaloy students



Mainstreaming Disability

This program aim to influence policies and practices affecting PwDs, by developing more inclusive communication and promoting rights-based approaches that take into account the needs and opinions of PwDs at the grassroots level. PwDs also have a right to information about services and policies that affect them. This can only be achieved through the development of an enabling environment: through the development of democratic, representative disability movements in developing countries, through advocacy which upholds human rights and through pluralistic media which portrays accurately grassroots perspectives on PwDs and effective questioning of government policies.



SARPV plans, designs and implements all its interventions ensuring the disability inclusion and facilitating the PwDs to exercise their rights in raising their own problems to the respective service providers.

Very recently SARPV has raised the issue of allocating pension by the government for the persons with severe disability who are not capable to work and for the senior citizens outside the service cadres who contributed to building this nation, so that they are not dependent on anyone else or the family.

Geographical Coverage

Dhaka and Cox's Bazar Districts

Target Groups

People with Disability

Program Objectives

- To minimize the attitudinal Gap of the society in relation to person with disability
- To maximize the empowerment of people with disabilities
- To promote the accessibility of people with disabilities into the services
- To sensitize the duty bearers of Govt. Local govt. and non govt. service providers

Contribution to SDG



Activities & Achievements





Mainstreaming Disability





Room for giving health services to the PwDs



Mayor of Chakaria Municipality hands over a cheque for Medical Assistance to PwDs



Mental Health Camp



Challenges

- Discontinuation of mainstreaming process after accomplishing any project/program.
- Unintentional ignorance.
- Committed and dedicated groups are rare. Voices are raised only when donors' supports are there.

Learnings

- Self-help groups should be developed.
- Rights of the excluded/vulnerable should be included in the manifesto of political parties so that in absence of the foreign/donor support, the parties can raise voice for the people, excluded from the mainstream of the community.

Climate Change, Disaster and Disability Management / Emergency Management

Project under this Program

1. Special Support for Host community (SSHC) during Covid-19

2. Emergency Relief Activities for Vulnerable FDMN Camp as Fire Victims.

3. Distribution of essential Items to the Fire Affected Families in Rohingya Camps.



Camp 8W after Fire hazard

Geographical Coverage

Chakaria upazila of Cox's Bazar District.

Program Objectives

- Mainstreaming Inclusive DRR at community level.
- Enhancing adaptation and mitigation skill.
- Promoting proactive disaster management approach
- Assessing and identifying disaster risk.
- Strengthening and sensitizing local elected body by in including them on various disasters related intervention.
- Empowering at risk community.

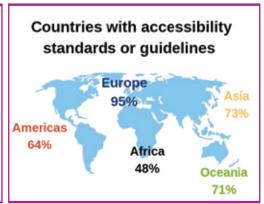
Contribution to SDG





79% face difficulties or cannot evacuate during a disaster

Accessibility saves lives





Persons with Disabilities

Article 9
requires States to ensure
equal access to facilities
and services

Source: Department of Economic and Social Affairs, United Nations



Special Support for Host community (SSHC) during Covid-19

Goal

Minimize the adverse impact of Covid-19 on the low-income households at Cox's Bazar under the direction of the Honorable Prime Minister Sheikh Hasina to development partners to support the local people. Considering the situation WFP initiated SSHC project that has been implemented by SARPV.

Purpose

 Provide food and cash support to meet immediate food crisis triggered by Covid-19

Geographical Coverage

Chakaria & Pekua Upazilla under Cox's Bazar District

Target Groups

Low-income families

Beneficiary Coverage

22,000 low-income families:

- 16,500 HH at Chakaria
- 5,500 HH at Pekua

Activities

Distribute Commodities: 60 kg good quality rice, 5 kg of high energy biscuits (in Chakaria only) and 4500 Taka to each family

Funding Agency

WFP

Challenges

- Ensuring appropriate safety for Covid-19 during project implementation.
- Managing vehicles for food transport on time during lock down.
- Carrying large amount of money from bank to distribution points.
- Nepotism during beneficiary selection by the political leaders.
- Hazardous weather during distribution.

Lessons Learned

- Beneficiary list that has been prepared by local political person, must have to revalidate before finalizing.
- Involvement of local influential person along with local administration ensures the social security.



Beneficiaries queue to receive SSHC assistance



Cash Disbursement point

Project 6.2

Emergency Relief Activities for Vulnerable FDMN Camp as Fire Victims



Fire affected Rohingya Camp 8W

A massive fire broke out over several Rohingya camps located in Ukhiya on 22 March 2021. More than 10,000 shelters were gutted in camp 8W, 8E, 9, and 10. According to humanitarian agencies and local authorities, 11 people died, more than 500 people were injured, roughly 400 are still missing and more than 55,000 displaced empty-handed. Locals, various security agency personnel, and fire-fighters together brought the flames under control at around 9:40 pm, 7 hours after the fire had started. In the fire people have lost every little thing they had. Still there is no clue how the fire broke out in the camp.

In Camp 8W and Camp 10, SARPV has 4 integrated nutrition facilities which were not affected by fire incident but thousands of shelters turned into ashes in the catchment area of SARPV.

Goal

To provide Immediate relief to the fire-affected forcedly displaced Myanmar Nationals at Rohingya Camps.

Funding Agency

Concern Worldwide & WFP for Hot Meal

Target Groups

Fire-affected FDMN

Beneficiary Coverage

13,358 Dry food packages and 40,260 Hot Meals were distributed among them.

Project Area

Camp 8w

Activities & Achievements

SARPV staff gave their bests to successfully distribute packages of dry foods from nutrition facility and hot meal from WFP outlet and managed to achieve the target within shortest period of time.



Emergency Relief Activities for Vulnerable FDMN Camp as Fire Victims



Volunteers are seen removing the debris



Volunteers are preparing Hot Meal for fire affected population

Challenges

- Working Areas turned to be too hazardous to move properly.
- Supply of food, water, sanitation and shelter was low compared to demand.
- Transporting food from market to distribution point was very difficult.

Lessons Learned

- All the agencies should have preparedness for this type of accidents in future and donors should allocate a contingency fund every year for this type of emergencies.
- Risk Reduction Activities need to be performed periodically.
- Contextualization is very important before any kind of emergency response.

Project 6.3

Distribution of Essential Items to the Fire Affected Families in Rohingya Camps



NFI Distribution at Rohingya Camp

<u>Goal</u>

To provide essential NFI to the fire-affected families in Rohingya Camps

Funding Agency

Rotary Club of Dhaka Mavericks, Concern Worldwide (CWW) and Norwegian Refugee Council (NRC)

Target Groups

Families, especially the affected women

Beneficiary Coverage

6,700 HH

Project Area

Fire-affected Rohingya Camps

Activities & Achievements

Distributed essential NFIs (Maxi, Thami & Borkha) within the shortest period of time.

Challenges

Procuring all the items within short time period, thus subsequently meeting the needs/demands of the fire-affected people.

Learnings

Contextualization of Rohingya tradition is necessary before distributing any clothing items, especially for Rohingya women.



Renewable Energy

Geographical Coverage

Rangpur and Chattogram Division.

Program Objectives

- Promotion of renewable energy
- Affordable energy for all
- Improved Public Health and Environmental quality

Contribution to SDG





Rohingya girl at home with Solar Light

Projects under this Program

1. Improved Cook Stoves (ICS)

2. Biogas and Bio Fertilizer

3. Solar Irrigation

4. More Light for Rohingyas and Host Community in Cox's Bazar Bangladesh



Single Mouth ICS at HH level



Solar Panel for Irrigation at Bochaganj of Dinajpur



Improved Cook Stoves (ICS)

The traditional cooking practice in Bangladesh uses a "three-stone" cooking stove. Only 5%-10% of the households in Bangladesh use fossil fuels such as kerosene or • To save traditional fuels by popularization of improved liquated petroleum gas for cooking. The majority uses a mix of agricultural residues, twigs, leaves, cow dung and firewood. The combustion of some of this biomass in the traditional cooking stoves generates a variety of gases including carbon dioxide (CO2), carbon monoxide and other particulate matters. The replacement of traditional stoves by improved cooking stoves (ICS) improves heat transfer, which reduces the total amount of fuel required for cooking and the amount of emissions. Altogether, the • improved cook stoves have the following benefits-

- Yearly reduction of Carbon Di-oxide emission is 2.145 ton per ICS
- Yearly savings of fuel wood 1.277 ton per stove
- Fuel and time consumption of ICS is 50% less than those of traditional stove.
- Saves money
- Almost smoke free environment that ensure healthy life, Training on benefits ICS. specially of mother and children.

Goal

Energy Efficiency

Geographical Coverage

Chakaria, Moheshkhali, Pekua, Ramu, Cox's Bazar Sadar & Ukhiya upazilas of Cox's Bazar District; Banshkhali & Lohagora upazilas of Chottogram district; Lama upazila of Bandarban District and Kapasia Upazila of Gazipur District.

Objectives

- stove and keep pollution free environment in rural areas
- To reduce indoor air pollution (IAP) in the kitchen.
- To develop skill manpower through training course of improved stoves to the unemployed men and women of the country
- To create awareness about the effectiveness and usefulness of improved stoves by massive advertisements through various media.
- To reduces deforestation and maintain ecological balance of the country by massive used of improved
- To involve different Government, Semi-Government and Non-Government Organizations in dissemination program of improved stoves.
- To improve the hygienic condition of the kitchen

Major Activities

- Courtyard meeting on climate change and impact of deforestation
- Session on Health hazards due to indoor smoke.
- Awareness rising session on air pollution.

Achievements

Total 72,500 ICS were installed in last year among which 43,500 were Portable, 16,000 Single Burner and 13,000 Double Burner. Districtwise and Upazilawise achievements are stated below:

| District | Upazila | Portable | Single mouth | Double Mouth | Total |
|-------------|-------------------|----------|-----------------|-----------------|--------|
| | | (Nos.) | (Nos.) | (Nos.) | (Nos.) |
| Bandarban | Lama | 3000 | 2500 | 0 | 5500 |
| Chattogram | Banshkhali | 4500 | 1500 | | 6000 |
| | Lohagora | 1000 | 1500 | | 2500 |
| Cox's Bazar | Chakaria | 18000 | 7000 | 2000 | 27000 |
| | Moheshkhali | 4000 | 500 | 1000 | 5500 |
| | Pekua | 5000 | 1000 | 6000 | 12000 |
| | Ramu | 4000 | 1000 | 2000 | 7000 |
| | Cox's Bazar Sadar | 3000 | 1000 | 2000 | 6000 |
| | Ukhiya | 1000 | | | 1000 |
| Total | | 43500 | 16000 | 13000 | 72500 |



Improved Cook Stoves (ICS)

Challenges

- Covid-19 was the greatest challenge last year.
- Lack of adequate financial support to execute the activities at field level.
- Scarcity of raw material for ICS production.
- IInterruption in supply because of inadequate transportation facilities due to Covid-19 and bad road condition due to heavy rainfall
- Lack of awareness on the health hazard results from smoke and the benefits of using ICS.
- Financial incapability of the prospective beneficiaries to buy ICS.



▲ ICS user at home

Lessons Learned

- Involvement of community leaders gives easy access to any community.
- To proliferate the use of ICS, widespread promotion is needed across the country.
- Staff capacity needs to be developed by training.
- Involvement of community leaders, Local government and general physicians can improve the users' awareness.
- Local or women entrepreneurship may be developed for reaching out to the beneficiaries in every village for providing ICS in every village to reach the beneficiary easily.
 - Yearly reduction of Carbon di oxide emission:

2.145 ton per ICS

Yearly savings of fuel wood:

1.277 ton per stove

Fuel and time consumption of ICS:

50% less than traditional stove

 Almost smoke free environment that ensures healthy life, specially of mother and children.



ICS at Production Centre



Biogas and Bio Fertilizer

In order to prevent further environmental and agricultural deterioration, it is imperative to promote biogas as a sustainable and clean source of energy in Bangladesh. Biogas needs only cattle dung/ poultry droppings and water, which is commonly available in the rural households of Bangladesh. Most of the appliances and materials (bricks, sands, aggregates, cement and pipes) used for the construction of biogas plant are locally available or can be locally produced in Bangladesh. Any local literate person with some training can easily construct a biogas plant.

SARPV has been implementing biogas program in Cox's Bazar, Bangladesh since 2016 as a partner of Infrastructure Development Company Limited (IDCOL) with support from the World Bank, KFW Development Bank and SNV Netherlands Development Organization. Biogas plants not only provide gas for cooking purpose but also produce organic fertilizer for the crops and fish pond. The program saves tons of firewood ever year worth a lot and also reduces the use of chemical fertilizer. The program also helps reduce carbon-di-oxide (CO2) consumption per annum.

Goal

To promote renewable energy

Objectives

- To save the environment, especially from soil and water pollution and to fight deforestation
- To utilize low-cost technology to encourage a circular economy
- To reduce dependency on fossil fuel, firewood and electricity

Project Area

Chattogram and Cox's Bazar Districts

Target Groups

People who are using fossil fuel, firewood, electricity for cooking and other low productive activity.

Beneficiary Coverage

As much as possible to cover, not fixed

Major Activities

- Awareness raising session on Biogas and Bio-fertilizer.
- Training on Biogas and Bio fertilizer plant.
- Courtyard meeting on environmental pollution.

Achievement

106 Biogas plants were installed in Chattogram and Cox's Bazar districts.

Challenges

- Covid-19 was the greatest challenge last year.
- Biogas plant runs by Cow dung (Minimum 4 Cows) or Poultry litter (Minimum 500 Birds). It's a big challenge to make available minimum numbers of Cows and Birds all the time. Cow dung-based biogas plant turns inactive if the owner sells cow.
- Because of geographical location Biogas plants get flooded during Flash flood
- Lack of adequate financial support to execute the activities at field level.
- Lack of awareness.
- Collecting installment amount from beneficiary of Loan based Biogas plant.
- Most of the time, Beneficiary can't afford the construction expense.

Lessons Learned

- Awareness of the beneficiaries on proper cow rearing is needed.
- Subsidy should be provided to encourage the poor biogas users.



Mixing Device of Biogas plant



Solar Irrigation

SARPV started Solar Irrigation at the end of 2017 initially in Dinajpur District as an Implementing partner of IDCOL. Till now SARPV has already constructed 6 pumps in Dinajpur district and 27 pumps are under construction. These pumps are environment-friendly which reduce the consumption of fossil fuel and electricity. Using these pumps SARPV along with IDCOL is contributing to reduction of emission of Carbon dioxide, thus protecting the environment.

Goal

Ensure uninterrupted irrigation and Reduce consumption of fossil fuel.

Target Groups

Agro-based population of rural off-grid areas.

Project Area

Bochagonj, Birganj, Kaharol and Birol Upazillas of Dinajpur district.

Achievement

So far, 240 acres of agricultural land have been covered (each pump covers 40 acres of land) with uninterrupted irrigation water. More 880 acres of agricultural land will be covered in the upcoming Boro season with 22 new pumps.

Challenges

- Lack of awareness about this new technology at the farmers level is one of the prime challenges.
- Excessive fog In January interrupts the solar panel to generate power from sunlight.
- Heavy rainfall reduces the demand for irrigation water, thus the revenue collection.
- Sometimes seasonal storm destroys solar panels. Replacing solar panel is very expensive.
- Price of irrigation water from solar pumps is higher than that from diesel driven shallow pump.
- Revenue collection from farmer level is the big challenge. Farmers become unwilling to pay the bill after harvesting.

Lessons Learned

- To avoid the impact of fog, irrigation water should be managed by alternative power.
- Increase of grant amount from IDCOL can reduce the water price.
- Raising awareness among and providing training to the farmers can ensure the revenue collection.



Solar Irrigation Pump

More Light for Rohingyas and Host Community in Cox's Bazar Bangladesh

Project 7.4

Goal

To provide vulnerable Rohingya refugee households and host communities (with a focus on people with disabilities, pregnant and lactating women and young girls) with high quality and easily repairable solar lamps and Solar Home Systems to help out with their security conditions at night and also to create an enabling environment of work in the society and community after sunset.

Project Area

Maheshkhali, Cox's Bazar Sadar and Camps 5,6, 8W, 8W 10,4

Target Groups

ohingya refugee households and host communities (with a focus on people with disabilities, pregnant and lactating women and young girls)

Beneficiary Coverage

880 HH

Funding Agency

Electriciens sans frontieres

Achievement

640 vulnerable Households of Rohingya Nationals and 240 vulnerable Households from Host community received solar powered lights.

| Camp | CMAMI | Person with PwD | Widow | Total |
|-------|-------|-----------------|-------|-------|
| 5 | 42 | 17 | 0 | 59 |
| 6 | 72 | 29 | 0 | 101 |
| 8w-1 | 61 | 19 | 21 | 101 |
| 8w-2 | 46 | 13 | 0 | 59 |
| 10-1 | 25 | 32 | 0 | 57 |
| 10-2 | 8 | 6 | 0 | 14 |
| 4-1 | 129 | 0 | 0 | 129 |
| 4-2 | 120 | 0 | 0 | 120 |
| Total | 503 | 116 | 21 | 640 |

| Area | Widow, ultra-poor other vulnerable groups | Person with Disability (PwD) | Total |
|-------------------|-------------------------------------------------|---------------------------------|-------|
| Maheskhali | 189 | 11 | 200 |
| Cox's Bazar Sadar | 40 | 0 | 40 |
| Total | 229 | 11 | 240 |

Challenges

- Starting activities in the Camp was a challenge because all on a sudden there were some unruly activities, for which all new work was stopped for a particular period. Thus the work got delayed by almost a month.
- No work by any NGO, except Govt agencies, was allowed for the Ukhiya host community. As per the permission and instruction given by the district administration of Cox's Bazar, the distribution was done in Cox's Bazar Sadar and Maheshkhali Upazila, rather than Ukhiya.
- Project areas being highly populous and needy communities, managing large number of beneficiaries with limited resources is quite difficult.
- Getting permission from different levels of government office was very much time consuming and challenging.

Lessons Learned

• In the SARPV working FDMN camps and host community, there are approximately 80,000 (Eighty Thousand) households. Most of them are in need of solar systems to light their houses and enlighten their lives. Currently very few Households are getting the support. A comprehensive plan should be made to provide necessary support to all needy households to make them smile.



Solar light at Rohingya Camp



SHS handed to a Person with Disabilities

Project 7.4

More Light for Rohingyas and Host Community in Cox's Bazar Bangladesh

The spirit to go beyond: Umme Kulsum

Umme Kulsum is another victim of Rohingya Crisis and had to flee for her life from Myanmar with her family. Now She stays at Camp 8W. Her family consists of 6 members including her 3 daughters and 1 son. She used to feel insecure about her daughter at night. As they had to use common washroom at the camps and long way from her shelter, she always discouraged her daughters to go out from their shelter at night. Most of the time kerosene lamp blown out by the wind and in the dark they feet afraid. After the sunset her family had to limit their household works. They were always afraid of using kerosene lamp as their shelter is made with bamboo fence and dry leaves. Just a bit of carelessness can lead to big danger.



After getting the solar light they feel confident to move out at night without fear of lights going out by the wind. With the help of the light now they can do their household works even if it gets dark after the sunset.

Program 8

Training and Skill Development

Capacity and skill development is the most important factor to achieve higher and better performance. Training is a strong tool for skill, capacity and professional development of human resources. Considering the fact, SARPV has formulated a capacity and skill development component with all its development interventions. To conduct training programs/sessions for skill, capacity and professional development, SARPV has come up with four SARPV Training Centers (STCs) in Cox's Bazar and Gazipur, which are also made available on rent to other organizations.

Major Activities

| Training in 2020-21 | | | | |
|---------------------------------|-----------------|--------------------|--------------------------|--|
| Name of Program | No. of Training | No. of Beneficiary | PWD among Beneficiary | |
| Health and Nutrition | 74 | 7700 | 4 | |
| Rights, Advocacy and Networking | 11 | 250 | 250 | |
| Total | 85 | 7950 | 254 | |

SARPV Training Centers (STC)

STC Chakaria, Cox's Bazar

STC Kapasia, Gazipur

STC Moheshkhali, Cox's Bazar

STC Ukhiya, Cox's Bazar



STC Chakaria, Cox's Bazar

STC Chakaria provides training and residential facilities for development practitioners and visitors. It has a conference hall for 40 participants; AC and non-AC guest rooms with 40 bed coverage for dormitory support; along with dining and refreshment serving facilities. STC Chakaria is the only disability inclusive training venue for in Chakaria. Located at the central point of Chakaria Pourasava, the venue is safe and secure with cool and tranquil environment. We are committed to delivering quality services by maintaining high standards in order to earn our guest's satisfaction.













Program 8: Training & Skill Development

Project 8.2

STC Kapasia, Gazipur

STC Kapasia stands on the Kapasia–Kaligonj road, at Tilsunia village under Chandpur Union of Kapasia Upazilla under Gazipur district. It is a non-residential training center, which can cater to 30 to 35 participants with food and snacks support. There is a standard guest room with two single beds for course facilitators with attached bathroom.





STC Maheshkhali, Cox's Bazar

STC Maheshkhali was inaugurated in 2020. This venue has capacity to accommodate 25-35 participants and has the other required facilities for training/workshop/seminars.





Project 8.4

STC Ukhiya, Cox's Bazar

STC Ukhiya was inaugurated in 2021. This venue has a capacity to accommodate 50 participants and has other required facilities for training/workshop/seminars, along with guestroom for visitors.







Balance Sheet



SOCIAL ASSISTANCE & REHABILITATION FOR THE PHYSICALLY VULNERABLE (SARPV)

CONSOLIDATED STATEMENT OF FINANCIAL POSITION (BALANCE SHEET) AS AT 30 JUNE 2021

| Particulars | Notes | 30-06-2021 | 30-06-2020 |
|-----------------------------------|-------|-------------|-------------|
| ASSETS: | | | |
| Non-Current Asset: | | | |
| Property, Plant & Equipment | 4.00 | 66,756,894 | 64,145,197 |
| | | 66,756,894 | 64,145,197 |
| Current Asset: | | | |
| Loan Outstanding | 5.00 | 245,388,395 | 173,963,279 |
| FDR & Security Deposit | 6.00 | 27,889,590 | 14,953,615 |
| Advance | 7.00 | 30,327,930 | 2,257,933 |
| Saving Account | 8.00 | 11,948 | 11,948 |
| Account Receivable | 9.00 | 253,161 | 1,617,458 |
| Stock & Store | 10.00 | 48,482 | 64,932 |
| Cash & Cash Equivalent | 11.00 | 56,607,717 | 25,749,643 |
| Accrual Account | 20.00 | | |
| Bank Guarantee (Margin) | | 2,938,961 | |
| | | 363,466,184 | 218,618,808 |
| Total Assets: | | 430,223,077 | 282,764,005 |
| FUND & LIABILITIES: | | | |
| Fund Account | 12.00 | 95,464,921 | 65,266,126 |
| Current Liabilities: | | | |
| Member Savings | 13.00 | 100,610,496 | 78,258,427 |
| Payable & Other Liabilities | 14.00 | 13,236,613 | 15,090,499 |
| Insurance Fund | 15.00 | 5,873,075 | 5,873,075 |
| Revaluation Reserve | 16.00 | 49,909,412 | 49,909,412 |
| Loan Loss Reserve | 17.00 | 7,973,169 | 5,219,823 |
| Loan Account | 18.00 | 135,025,015 | 47,891,069 |
| Head/Field Office Current Account | 19.00 | 5,337,480 | 5,337,480 |
| Accrual Account | 20.00 | 1,288,423 | |
| Member Welfare Fund | 21.00 | 9,523,708 | 6,297,134 |
| Security Money | 22.00 | 80,000 | 80,000 |
| Staff Security Fund | 23.00 | 1,188,881 | 989,334 |
| Contingency Fund | 24.00 | 387,482 | 147,881 |
| Donation -Conditional | 25.00 | 445,000 | 275,000 |
| Interest Provision on SPS | 26.00 | 2,906,270 | 2,128,745 |
| Provision for Expenses | 27.00 | 549,883 | |
| Miscellaneous Receivable | | 10,757 | |
| Miscellaneous Payable | | 412,492 | |
| . Total Current Liabilities: | | 334,758,156 | 217,497,879 |
| Total FUND & LIABILITIES: | | 430,223,077 | 282,764,005 |

1.00 Figures have been rounded off to the nearest taka. 2.00 Annexed notes form part of the financial statements.

3.00 Previous year's figure has been rearranged for comparison.

Md. Musfiqur Rahman Finance Secretary

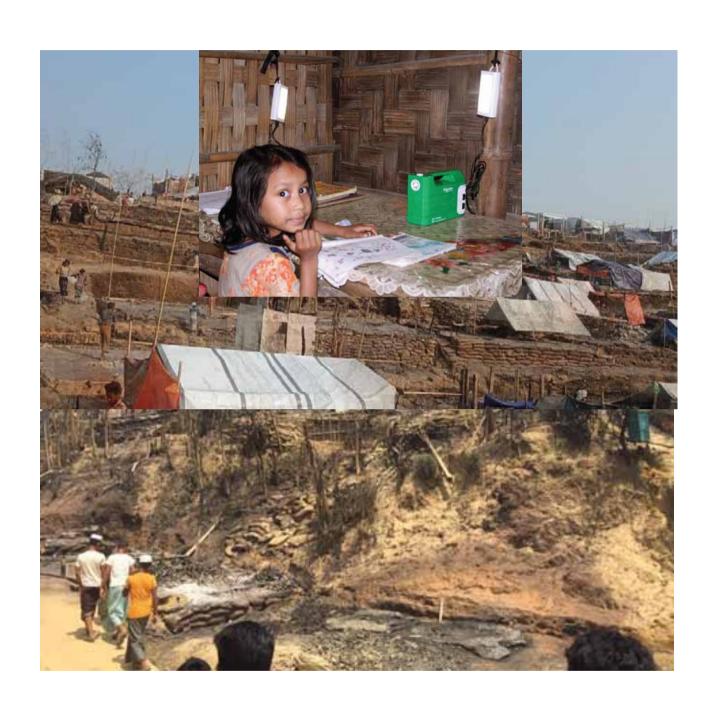
Signed in terms of our separate report of even date annexed.

30. September 2021

(Toha Khan Zaman & Co.) Chartered Accountants

(DVC: 2110230264AS654101)







Social Assistance and Rehabilitation for the Physically Vulnerable

