PROGRESS REPORT ON

HEALTH AND SANITATION PROJECT (HSP)

(Period: April'94 - June'95)

(A view of Dulhazra Gram Kendra)

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CONTENTS

ABBREVIATIONS

CBO	=	Community Based Organization
CC	=	Country Coordinator
DRPC	=	Deputy Regional Project Coordinator
EDM	=	Enfants du Monde
EPI	=	Expanded Program on Immunization
FP	=	Family Planning
GD	=	Gram Darbar
GK	=	Gram Kendra
GT	=	Gram Tahbil
GOB	=	Government of Bangladesh
HSP	=	Health and Sanitation Project
IEC	=	Information, Education and Communication
KO	=	Gram Kormee
MCH	=	Mother and Child Health
NGO	=	Non-government Organization
PC	=	Project Coordinator
PRA	=	Participatory Rural Appraisal
RFCWP	=	Rural Family and Child Welfare Project
SDC	=	Swiss Development Cooperation
SES	=	Socio-economic Scheme
TV	=	Television
UNICEF	=	United Nations International Children's Emergency Fund
VBI	=	Village Based Institution
VCP	=	Video Cassette Player
VO	=	Village Organizer

HEALTH AND SANITATION PROJECT (HSP)

01. INTRODUCTION:

The Health and Sanitation Project (HSP) of EDM is a follow-up program to a relief and rehabilitation effort for Cyclone'91 victims of Chakaria thana under Cox's Bazar District. It is a 3-year project from July'94 to June'97 with an additional preparation period of 3 months from April'94 to June'94.

The relief and rehabilitation program of 1991 involved the following components in three different steps :

- Food, medicine and tarpaulins - April'91 to the end of May'91.
- Clearing of 1,091 polluted drinking water ponds with water pumps and chemicals - June'91 to September'91.
- Construction of 5,042 houses - August'91 to July'93.

The Health and Sanitation Project (HSP) is a mixture of development and rehabilitation efforts, mainly due to the following reasons :

- At a request of the Government of Bangladesh, all housing rehabilitation efforts should be made with an attached latrine to each house. Unfortunately, this could not be done at the time of constructing houses at Chakaria considering the immediate need for shelter and the availability of funds.

- More than two years have passed since the Cyclone hit the coastal areas and life is gradually returning back to normal which allows to approach the housing beneficiary families with certain lasting self-development aspects.

- The housing rehabilitation efforts have been made in very far scattered areas which would not be beneficial to a concentrated development project, unless planned on a large scale, over many years to come.

Considering the above mentioned three main aspects, the Health and Sanitation Project (HSP) has been restricted to the following components, with the definite expectation to yield certain community initiated self development aspects, after EDM withdraws its efforts from Chakaria :

i. Awareness creation in daily health and hygiene aspects and the need for proper sanitation.
ii. Latrine construction project for housing beneficiaries.
iii. Child and mother immunization program (EPI).
iv. Promotion of tree plantation (Social forestry).
v. Preparation of information, education and communication materials, through IEC system.

The aspect of pure drinking water has not been overlooked. Experience has shown that it is very difficult to avail drinking water in most of the project areas due to the high saline content in the ground water. During the Cyclone rehabilitation period, most of the attempts to pump drinking water from the ground have failed. Therefore, HSP will emphasize on decontamination of pond water which is a common source of drinking water within the area, through awareness creation about the value of drinking water.

02. AIMS AND OBJECTIVES OF THE PROJECT:

i. To minimize child mortality by creating a more hygienic environment through the construction of hygienic latrines and by establishing its proper use.

ii. To demonstrate the benefits of immunization to the community through preventive care by immunizing all children and mothers of housing/latrine beneficiary families.

iii. To contribute towards the much needed reforestation within the project area by planting as many trees as possible through beneficiary families for a better environment.

iv. To create a lasting impact of the project by developing simple information/education materials on health, hygiene and environmental aspects which will stimulate the community for better communication amongst themselves.

v. To promote local employment by creating small business such as latrine construction workshops, nurseries etc. with relevant extension workers (business promoters) through Village Organizer's after the withdrawal of EDM.

03. PROJECT AREA:

The 8 unions in Chakaria thana which mainly benefited from the EDM-housing Rehabilitation Project have been considered as HSP project area. The entire project area is divided into 4 units, to be taken care of by 4 different VOs (Village Organizers), under the supervision of one Project Coordinator who maintains an office at Chakaria thana level. The units are : (i) Mognama (ii) Charandwip (iii) Badarkhali (iv) Dulhazara.

04. RELIEF CULTURE:

Chakaria thana is well exposed to outsiders because of its vulnerability to disaster as it falls in the heart of cyclonic and tidal prone zone. In general, the population does not believe in development efforts, rather they are extremely relief oriented (relief culture). The relief

oriented attitude accelerated to a high degree after the Cyclone of 1991 due to abandon NGO interventions with relief assistance beyond expectation. Thus, they are reluctant to talk about their own development as well as build their own financial institutions. Majority of the population do not care about planned family, they are not even aware about general health hazards. Under these circumstances, massive reformation and reorganization are being required in order to create a health development environment and to bring socio-economic development efforts close to them in a self-managed style. All these efforts require a hard push of development intervention and long term planning. Though our short span of project tenure may not be sufficient to create a sustainable contribution, nevertheless, it is an attempt to make a hard push and is worth trying.

05. SOCIO-ECONOMIC SURVEY:

A socio-economic survey, particularly family based data on the client groups in the project villages was essentially a pre-requisition for the smooth function of HSP. Accordingly, socio-economic survey was done in the project area, the principle objective of which was to collect base-line information, in order to identify the priority client groups for inclusion into the HSP components. This base-line information will also serve as basis for comparing and analyzing the impact of the program on the socio-economic condition of HSP focus groups. The survey also depicted general socio-economic conditions and family infrastructure of the people of Chakaria thana in particular.

06. RECRUITMENT AND TRAINING OF FIELD INVESTIGATORS:

Advertisement was published in the national dailies seeking applications (preferably post-graduates in social science) for the post of Field Investigators. The applications were scrutinized and investigators were selected through written and viva test. They were put to 2/5 days training on the whole survey method. In case of HSP, we did not follow the general practice in order to carry out the socio-economic survey. We engaged local youths (HSC standard), especially eight women and three men (out of 18 women and 3 men). Each one had to go for a seven-day (03-09 July'94) intensive training about the data collection process both practical and theoretical, which was conducted at Chakaria HSP office under the direct supervision of the PC-HSP and PC-Saturia, in consultation with the DRPC.

The main objectives behind recruiting local investigators were to find out prospective VOs who might be willing to accept such a challenging job in future as well as to involve local youths to know their own problems and identify priorities of development interventions needed. On the other hand, they had better chance to get more related data as they knew the local dialects and could communicate with their local people better than the outsiders.

07. DURATION OF DATA COLLECTION:

Though we planned that the data collection would take 40 days from July 10, 1994, due to some practical constraints (such as heavy rainfall, communication problems, dropout of two investigators in the middle of survey), we could not complete it on time. It took about 60 days in order to collect data of 7,832 families with the help of nine investigators. Nevertheless, during data collection, the PC-HSP was fully involved in supervising the investigators and he cross-checked the data at client level time to time in order to ensure accurate and reliable data.

08. DATA COLLECTION AND PRESENTATION:

Standard schedule was administered to collect data from the heads of each family in four units of Chakaria thana (consisting of 60 villages). The technique was a face to face interview with the family head of each house (Bari) on census basis. Besides the collected data, each family was categorized into the economic grouping on the basis of the following criteria.

Group-A : Poorest of the poor families having an average annual per capita income upto Tk.2,330.

Group-B : Families having an average annual per capita income of Tk.2,331 to Tk.3,400.

Group-C : Families having an average annual per capita income above Tk.3,400.

It is to be noted that Tk.3,400 is the poverty line, which means "A" and "B" groups constitute the below poverty line families and only "C" group constitutes above the poverty line families. So "A" and "B" are our prime target groups in general.

The full data processing could not be done due to high cost and time factor. So, it was decided that EDM's Computer Section would process the entire data, only then it could be presented in a tabular form.

However, in order to do the final compilation of the data, stopgap measures were taken i.e. two copies of survey were made for each family. The original one remained with EDM-Dhaka and the duplicate one was sent to the Unit level, so that it did not hamper the project implementation to a great extent.

09. **UNIT-WISE CATEGORY OF THE SURVEYED FAMILIES ARE SHOWN BELOW:**

TABLE # 1

Name of Unit	Total Family Surveyed	Economic Group			
		A	B	(A+B)	C
Mognama	2,008	1,214	433	1,647	361
Charandwip	1,850	1,343	348	1,691	159
Badarkhali	2,121	1,191	482	1,673	448
Dulhazara	1,853	1,344	350	1,694	159
TOTAL :	7,832	5,092	1,613	6,705	1,127

6,705 are the prime focus group of HSP.

10. **RECRUITMENT OF VILLAGE ORGANIZER (VO) TRAINING AND PLACEMENT:**

Among the investigators, 7 women VOs were primarily selected and they were given a 6-day orientation training (October 1-6, 1994) on HSP implementation procedure and their specific role at the field level. All the 7 VOs were placed at 4 unit levels and finally, 6 were to be selected at the end of December'94. However, by the beginning of December'94 one VO of Mognama unit decided to discontinue her work. Among the rest 6 VOs, 4 have been given the responsibility for 4 units, 2 others are working as VO in charge (2 units for each), one for Mognama and Badarkhali and the other for Charandwip and Dulhazara.

11. **FORMATION OF GROUPS:**

The working group approach evolved from the idea to develop a self-monitored and self-managed program by the clients (focus group), the formation of such working groups will help develop fellow funding, group bondage, group interaction, mutual understanding and smooth relationship amongst them. As a part of these exercises, VOs are actively engaged in formation of groups with individual family heads of homogeneous feeling.

Considering the total number of families surveyed, decision was taken to form 30 groups in each unit, each group consisting of around 50 members (one member from each family). To become a group member one has to pay Tk.30 as membership fee. In this way, so far 83 groups have been formed with a total coverage of 1,468 families out of 6,705 (A+B) families. And Tk.44,040 has been raised from membership fees during the period (please see table #2).

12. GROUP SAVINGS:

In order to create group's own capital, the group members of the respective groups have already saved an amount of Tk.72,120 within this short period of time (please see table #2). Each family has the provision of saving Tk.10 per month. The groups nominate their Group Leader and Deputy Group Leader through democratic process for an initial period of 2 years. The Group Leaders are the custodian of the group's money. During the reporting period, 56 group accounts have been established.

Each beneficiary will have his/her own passbook, which have already been supplied from HSP but the individual member has to pay an amount of Tk.10 per passbook which has been introduced to create fund for the village based organization (VBI). In case of loss, they are to pay a fine of Tk.10 in addition. This easy system has been introduced with a view to give them an idea that nothing is free. Therefore, it is expected that they will take care of the book and the general health messages regarding immunization and pure drinking water printed in the passbook will be well read too (a sample copy of the passbook has been annexed at the end of this report). A total of 1,468 passbooks have already been handed over to the respective families.

13. ACHIEVEMENTS OF HSP AT A GLANCE:

TABLE #2

Name of Unit	Gr. Formed	Fam. Covered	Membership fees collected	Savings Amount	Latrine Contribution	Contribution for Sapling	Other Contributions	Total
Mognama	11	149	4,470	6,570	-	-	-	11,040
Charandwip	12	167	5,010	9,750	250	-	-	15,010
Badarkhali	30	500	15,000	20,780	6,720	-	300	42,800
Dulhazara	30	652	19,560	35,020	16,725	12,240	-	83,545
TOTAL :	83	1,468	44,040	72,120	23,695	12,240	300	152,395

14. PROJECT COMPONENTS:

a. Awareness Creation:

Awareness creation is one of the leading components of HSP. The component's main objectives are to promote general health awareness, disseminate health information at the grass-root level through our different communication channels e.g. TV, VCP, IEC materials, passbooks, posters, etc.

The VOs organize regular meetings with the groups on common topics of health, hygiene and other self-awareness aspects, such as the benefits of a simple but hygienic latrine, decontamination of drinking water, consumption of vegetables and fruits, preventive care through immunization and the utilization of birth control method including the benefits of planting fruits and timber trees.

In order to involve the people and the Government health machineries as well as other NGOs/CBOs to this program, the local village representatives are invited in any formal/informal gathering in order to take services from all expertise. Henceforth, the philosophy of working together with other NGOs/CBOs is incorporated in the HSP. Meanwhile, organizations like ICDDR,B, BRAC, Safe project of CARE-Bangladesh etc. agreed to extend cooperation in awareness building training.

By this time, the VOs organized awareness building training for 200 mothers of beneficiary families. They were divided into 10 batches, 20 mothers in each batch. The training was on MCH, FP and Sanitation. The training was imparted during this reporting period as well.

b. Latrine Construction:

EDM-HSP has the intention to manufacture 6,000 EDM-type latrines and distribute those to the beneficiaries within the 3 years project phase.

The EDM-type latrine has been designed and developed by Mr. Peter Amacher, Country Coordinator, EDM-Bangladesh. These latrines provide all basic expectations and services in terms of hygiene, practicality, durability and environment. It comprises of one cement ring and slab, a wooden cover and a simple super-structure.

The main reasons, for proposing this EDM-type latrine as an alternative solution, to the commonly known water sealed UNICEF type latrine are as follows:

i. Scarce water resource in the project area.

ii. Average lack of proper maintenance of UNICEF type latrines, in term of appropriate flushing.

iii. Appropriately improved technology considering past experience in other EDM project areas with water sealed latrines.

iv. The main components of the EDM-type latrine can be easily re-erected at a fresh spot within the home-stead due to the fact that 50% of the ring is above the original ground, including the slab.

However, at Dulhazara unit, latrine construction has started from April'95 and 210 latrines have been sold among the beneficiaries @Tk.150 each. In total, 600 latrines have been manufactured and 300 latrines have been distributed till 30th June'95.

c. Immunization Program:

As a preventive care against 6 diseases, HSP has planned to immunize as many children and mothers as possible among the beneficiary families within the project period, in collaboration with the Thana Health Complex authorities. This will help reduce the expensive health hazards or even untimely death in many families. It will also have an impact on mental peace and security of the involved families with the direct benefit of saving valuable money for medicine and time.

Chakaria Thana Health has 24 approved EPI spots (Primary Schools, Community Properties, Office of the Union Chairman etc.) in each union, where Health Assistants go to immunize children once in every month. Our Gram Kormee helps organize the people to go to the centers and get their children immunized. In this way, so far 850 children have been immunized during the reporting period under the supervision of our Gram Kormees. EPI cards have also been introduced in order to maintain the record.

d. Tree Plantation:

Some parts of our project areas have been deforested during the British rule to turn those land into agriculture land, on which selected families have been re-settled. Over the years, very few timber or fruit trees have been replanted which caused sufferings to the settlers for generations. Through an intensive tree plantation program and awareness creation in terms of immediate benefit from fruits, house protection against high winds, long term investment for valuable timber, badly needed fuel for cooking etc., it is hoped that better environment than the prevailing one will be created in some of the areas. As such, nurseries will be created in different areas, under the supervision of the respective VOs whose duty will be to see that each of the beneficiary family plant as many trees as possible within their homestead.

During the initial stage, the saplings will be supplied at a 50% subsidized rate to the beneficiaries and the money will be plunged into the Gram Tahbil (GT). As such, an order has been placed to Gonoshasthya Kendra for supplying 5,000 coconut saplings. The total cost for the saplings will stand at Tk.85,000. However, each sapling will be sold at Tk.10, in order to generate GT fund and about Tk.50,000 will be re-collected against sale of the saplings. By this reporting period, 1,000 saplings have already been sold to the beneficiary families of Dulhazara unit.

e. Information, Education and Communication (IEC):

EDM has already developed some IEC materials on Health Education and Community Awareness, which now are being tested at field level. By October'95 final printing of IEC materials will be made after being reviewed and approved by the Country Coordinator.

In future, EDM will also develop some practical IEC materials and video films which will be circulated within the entire project area, in order to stimulate and involve the communities to a self-development process. By this time, some IEC messages on health aspects have been printed on the passbook to circulate the health messages to the beneficiaries. The beneficiaries will keep the passbook with them and will be well acquainted with the necessary messages.

Till now, 4 TVs and VCPs have been procured for the Gram Kendra, which will be used as media of IEC for the beneficiaries.

15. FORMATION OF VILLAGE BASED INSTITUTIONS (VBIs):

In order to make the HSP units self-managed and sustainable after the withdrawal of EDM, strategies have been undertaken to build-up each HSP unit as a Village Based Institution (VBI). The institutions will be registered as local NGOs with the Social Welfare Department of GOB. This decision was taken on December, 1994.

The English names of VBIs were replaced by suitable Bengali names which would be more comprehendable to the village people.

The following names have been selected for HSP units:

i. The VO will be addressed as Gram Kormee (KO).

ii. The Village Based Institution will be addressed as Gram Darbar (GD).

iii. The Village Fund will be called Gram Tahbil (GT) and

iv. The Community Centre will be addressed as Gram Kendra (GK).

Henceforth, the new names have been incorporated into HSP and accordingly the VBI concept is being popularized and introduced in the project areas.

a. Gram Darbar at Dulhazara:

To build-up Gram Darbar, we started with Dulhazara unit because the progress at Dulhazara was satisfactory compared to the other units. Dulhazara unit was renamed as Gram Darbar, Dulhazara. An 11-membered Executive Body was formed

to run the Gram Darbar. The Executive Body, purchased a piece of land of 10 decimal area paying Tk.15,000 to establish the Gram Kendra. The land was raised with earth filling to make it usable and 3 EDM-type houses were erected on the land which were fenced with bamboo mats and were furnished properly. Gram Kendra is the centre of all development activities of Gram Darbar. The Executive Body sits in regular meetings once a month. All activities of Gram Darbar are being done by them, EDM personnel work here as facilitators only.

Latrine construction has already started at Gram Kendra, Dulhazara. The work has been given to a member (treasurer) of Gram Darbar with a view to develop local entrepreneurship.

So far, 300 latrines have been sold to the members of Gram Darbar, Dulhazara. The money collected against the sale of latrines have been deposited to Gram Tahbil to raise the village fund.

1,000 coconut saplings have been distributed among the Gram Darbar families at a rate of Tk.10 each i.e. 50% subsidized rate and the money raised has been deposited in the Gram Tahbil. The Gram Darbar is in full operation at Dulhazara.

b. Gram Darbar at Badarkhali:

The progress of Gram Darbar at Badarkhali is more or less satisfactory. 500 beneficiaries have already registered their names in HSP groups i.e. as the members of the Gram Darbar, Badarkhali. Here, already 30 groups have been formed.

With the group leaders of the groups an 11-membered Executive Body has been formed at Badarkhali with the Gram Kormee as the Secretary of the Body.

An area of 10 decimal has been procured to establish the Gram Kendra with an amount of Tk.12,000 excluding registration charges. The amount was paid from the membership fees collected from the beneficiaries. This Gram Kendra land is situated at Azam Nagar around which most of the beneficiaries live.

The earth filling work, erection of houses and procurement of furniture will be done very soon. The construction of latrines at Badarkhali has also started. Communication problem is very acute at Badarkhali during rainy season due to which work has been delayed considerably.

Plans have been made to establish two other GKs at the points where people are enthusiastic towards Gram Darbars, one centre is near Dulhazara and the other at Nutan Bazar of Badarkhali. Mognama may not be considered for establishing a Gram Kendra at present because progress here is not yet satisfactory.

16. MONITORING AND SUPERVISION:

The project is directly monitored and supervised from EDM-Dhaka, by the Deputy Regional Program Coordinator (DRPC), under the direct supervisor of the Country Coordinator. In this regard, DRPC regularly briefs the Country Coordinator about the progress and regress of HSP. DRPC also has to make frequent visits to the project areas in order to see the on going progress and to help the concerned workers to over-come major problems.

The Project Coordinator, who maintains an office at thana level, is responsible for the day to day implementation of the project, including supervision and training of Gram Kormees, liaison with other NGOs and GOB organizations etc. The Project Coordinator has weekly contact over telephone with the DRPC regarding the on going activities of HSP in order to strengthen the project.

In order to give the project an organized shape, a monthly meeting is conducted at Dhaka level headed by the Country Coordinator. In the meeting, problems are discussed and probable solutions are given by the Country Coordinator to the DRPC and PC-HSP as well as directives are issued by the Country Coordinator.

17. IMPLEMENTATION CONSTRAINTS FACED:

We could not proceed as per plan and as such achievements were not that much satisfactory. The major constrains faced during project implementation are as follows:

a. Socio-economic Survey:

The socio-economic survey was supposed to be completed within the preparatory phase (April'94 to June'94) but it started in July'94 and was completed in September'94 i.e. we were 3 months late to start the project implementation.

b. Latrine Construction:

For latrine construction, suitable entrepreneurs were not available from among the local people. Besides, due to the high cost of latrine materials and labour scarcity, no one showed much interest to take the job with the rates offered. EDM-type latrine is quite new to the beneficiaries. It at all, they are acquainted with water-sealed latrines combined with 3/4 rings, in order to motivate prospective users, we had to demonstrate the advantages of an EDM-type latrine, at the Gram Kendra. People are gradually becoming aware of the advantages of such a latrine and demand increasing for it. During this self-motivation process, more time than expected was lost.

Due to the late start of latrine construction, we are far behind our target of 1,500 latrine constructions during the period.

c. Less Progress at Mognama and Charandwip:

Charandwip unit consist of Charandwip and parts of other unions which are situated at distant places, among those are Baroitali, Harbang, Barbokia, Fashiakhali, B. M. Char Chiringa etc. For a Gram Kormee to cover the places is too time consuming and is also financially expensive. Besides, Charandwip remains under water during rainy season and becomes isolated from other areas. Many land-owners of Charandwip do not live there, they live in the neighboring villages and the people living at Charandwip are not permanent residents and thus do not have any permanent shelter there.

At Mognama, intervention of many NGOs with credit programs made people hanker after loans. Most of the people became member of more than one NGO and took loan from one NGO to repay others. As such our group formation work is rather slow at Mognama.

d. Dis-satisfaction Among the Gram Kormees (KOs):

The KOs expressed their dis-satisfaction due to high work load as well as high cost involvement even within the village area. They opined that they get less salary in comparison to the salary of other NGOs at the same level. As a result 2 KOs have left their job during this period.

e. Client Level:

Most of the EDM-housing beneficiaries are reluctant to cooperate and express unwillingness to join our groups, specially those who have sold their original houses (70% cases) but the non-housing beneficiaries are showing interest to join the groups. Persons who are joining the groups demand immediate credit fund other-wise, threaten to join other NGOs.

f. Natural Hostility:

Chakaria is a cyclone prone zone. During rainy season there is heavy rain fall almost every day through out the whole thana area. Cyclone hit the area twice during the reporting period. All these natural calamities hampered work progress for a period of 4 months.

g. Change of Strategy:

Initially the project was a mixture of development and rehabilitation efforts and when it was diverted into VBI, we had to organize lots of meetings with the village people. There are members of different opinions in the Executive Body and a lot of time had to be spent to bring them to consensus/ into the same track.

h. Group Formation:

Several NGOs have been working at Chakaria since 1991, they have already formed groups and started credit programs. People get relief materials, latrines, tube-wells etc. free of cost from those NGOs.

It is a tough job to motivate people in such a situation. So, it took much time to mobilize the people for becoming HSP group members.

i. Community Centre (Gram Kendra):

It is difficult to accumulate sufficient money for procuring land for Gram Kendra under the prevailing financial situation i.e. purchase of land from the membership fees of the beneficiaries. It would take a lot of time to establish Gram Kendra in such a way and without Gram Kendra, other HSP components can not be implemented properly.

j. Lack of Congenial Atmosphere:

People of Chakaria are very much conservative and it is an area of fundamentalists. Their anti-NGO sentiment (besides receiving free gifts) also hampers proper implementation of the project. Some silly examples can be cited:

i. Mollahs and Moulavies (religious leaders) do not like the NGO activities. They think that NGOs' activities are anti-Islamic. As a result, NGOs have little or no cooperation from them. Madrasha students often try to harass the NGO people. Some schools of specific NGOs have also been put on fire.

ii. Initially in some of the Madrashas (religious schools), teachers have been advising the children to break the bud of young plants provided by NGOs, which acts would benefit them in heaven. This kind of activities have now been stopped by the GOB authorities.

iii. Fundamentalists do not like to see women at work outside their home, so our female workers face problem where such fundamentalists are in majority.

k. Political Unrest:

Hartals for days together, transport strikes, road blockage etc. are quite a normal phenomenon in Chakaria thana for which the normal work of the project is hampered to a great extent.

18. ACCOUNTS AND FINANCE:

The books of accounts of the project have been maintained on a cash basis. For recording the day-to-day transaction, a computerized accounting system has been developed with the

help of EDM Computer Section. Monthly vouchers which are received from the Chakaria office are recorded and consolidated at the EDM Regional Office in Dhaka on a monthly basis. A separate Cash and Bank Book is also maintained at the Chakaria project office. The consolidated statement of receipts and payments is shown in annex-1 of the report.

19. FUTURE PLAN OF ACTION (JULY'95 - DECEMBER'95):

In spite of all the obstacles and handicaps, we have a plan

to complete the following activities within the coming six months:

i. Production and distribution of 1,500 latrines.

ii. Establishment of remaining 2 Gram Kendras.

iii. Complete IEC materials as planned.

iv. Arrange for immunization of 1,000 children.

v. Establish a tree nursery in Gram Kendra-Dulhazara.

vi. Complete awareness creation training for 500 mothers on MCH, FP etc.

vii. Continue liaison with the GOs and NGOs.

20. CONCLUSION:

More than 20 NGOs are working at Chakaria thana area in the field of different credit programs with less intervention in the Health and Sanitation Sector. These NGos have been working here since 1991. EDM's intervention to the area was not so welcomed by those NGOs at the initial stage. However, the continued contact through liaison with other NGOs and GOB made by the coordinator-HSP has considerably improved the original situation.

Although the progress is a bit slow compared to the target, if sufficient time is allowed, qualitative improvement and progress can be achieved in future. We are hopeful to build sustainable VBI in Chakaria thana which would set an example in the concept of VBI formation.

EDM - HSP

ANNEXURE-1

RECEIPTS AND PAYMENTS STATEMENT

For the Period from JULY 01, 1994 to JUNE 30, 1995

DESCRIPTION			AMOUNT IN TAKA	AMOUNT IN TAKA
RECEIPTS :				
Received from Geneva :				
SFR 35,000 (US$25,754.23 @ Tk.40.103) on 12.07.94			1,032,821.89	
SFR 50,000 (US$37,257.82 @ Tk.40.103) on 10.12.94			1,494,150.36	2,526,972.25
Received from REHAB		NOTE-1		858,550.90
Total fund received during the period				**3,385,523.15**
PAYMENTS :				
Expenses from Dhaka Office :				
Project startup expenses		NOTE-2		69,318.00
Monitoring,supervision				240,000.00
IEC Activities :	Pass books,leaflets,posters		47,699.00	
	TV,VCP,Batteries		62,880.00	110,579.00
Purchase of Motor Cycle		NOTE-3	65,100.00	
Furnitures & fixtures			36,320.00	
Office equipments			8,500.00	109,920.00
Travelling expenses				51,269.00
Accommodation, fooding etc.				7,399.00
Per-diem				50,710.00
Printing & stationeries				1,550.00
Postage, telephone etc.				250.00
Bank charges				3,473.23
Miscellaneous				4,670.00
		SUBTOTAL - A		**649,138.23**
Expenses from Chakoria Office :				
Socio economic survey				57,461.50
Community Centres:	Construction, erection		156,657.00	
	Furniture		13,850.00	
	Tubewel		2,650.00	
	Others		3,780.00	176,937.00
Latrine construction:	Materials (slabs,rings etc.)		79,440.00	
	Superstructures(bamboo mat,roofing etc)		63,375.00	142,815.00
Tree plantation scheme				75,000.00
Salary & allowances				228,736.00
Transport, fuel etc.				7,025.00
Travelling & conveyances				7,614.00
Per-diem of Chakaria staffs				17,000.00
VOs/Staff training				37,951.00
Printing & stationeries				6,409.00
Postage, telephone etc.				6,149.00
Water, gas, electricities				3,208.20
Office rent				36,400.00
Office utilities				4,928.00
Maintenance & repairs				1,400.00
Bank charges				1,649.00
Miscellaneous				10,243.50
		SUBTOTAL - B		**820,926.20**
Total payments during the period (A+B)				**1,470,064.43**
FUND BALANCE (as on 30.06.95)				**1,915,458.72**

(cont'd .....)

DESCRIPTION	AMOUNT IN TAKA	AMOUNT IN TAKA
FUND BALANCE REPRESENTED BY (As on 30.06.95) :		
Fund at Dhaka Office :		
Cash in hand	44,198.00	
Cash at ANZ Grindlays Bank, Dhanmondi Branch, Dhaka, (Convertible Current Account # 1033203352003)	1,116,712.65	
Cash at Sonali Bank, Lalmatia Branch, Dhaka, (Current A/C # H-640/9)	80,373.80	1,241,284.45
Fund at Chakoria Office :		
Cash in hand	23,011.80	
Cash at Sonali Bank, Chakoria Branch, Cox's Bazar (Current A/C # 998)	651,162.47	674,174.27
		1,915,458.72

NOTE-1 :

Composition of REHAB Fund :

i) Amount received from REHAB-I (Fixed Deposit A/C) :		
Fixed deposit balance as December 31, 1993	311,838.17	
Add: Interest received afterwards	3,467.00	315,305.17
ii) Amount received from REHAB-II Account :		
Leftover Rohinga Relief Fund	721.10	
Savings on 2 Handicrafts Houses	3,002.00	
Savings of BDRCS Houses	22,519.00	26,242.10
iii) Amount received from REHAB-III Housing Project :		
Leftover balance of Chakaria Housing (1,000 houses)		247,413.36
Total amount as shown on September 30, 1994		588,960.63
iv) ***ADDITION DURING THE PERIOD :***		
Received during the period after closing all the REHAB-II Accounts (after deducting bank/closing charges) as follows :-		
End of June 94 balance	123,498.92	
Left-over balance of "Housing Evaluation & Audit" of the Shelter for Shelterless Housing Project	104,210.35	
Left-over balance from the EDM/SDR Flood Shelter project as maintained in the REHAB II account	42,960.00	
Less : Bank charges	(1,079.00)	
		269,590.27
Total amount as shown in the statement		858,550.90

NOTE-2 :

All the expenses from April to June 30, 1994 (i.e. initial project expenses), except capital items and office rent, have been booked under project start-up expenses.

NOTE-3 :

2 (two) 50 cc motor cycles have been purchased during the period after transferring the 100 cc motor cycle (previously purchased) to RFCWP.

Hand Washing - a behavioural change through hygienic practice (An instance of EDM-type latrine) beneficiaries

Gram Darbar Members planting tree at Dulhazari GK premises

(A view of Latrine Workshop at Gram Kendra)

অভ্যাস করুন
সুস্থ থাকুন

পরিষ্কার পরিচ্ছন্নতা ঈমানের অঙ্গ

- বাড়ী ঘর পরিষ্কার পরিচ্ছন্ন রাখুন।
- স্বাস্থ্যসম্মত পায়খানা ব্যবহার করুন।
- ৫টি জটিল রোগ প্রতিরোধ কল্পে শিশুদের টীকা দিন।
- পুষ্টি ও বাড়তি আয়ের জন্য শাকসব্জির বাগান করুন।
- আপনার বর্তমান আয় থেকেই ভবিষ্যতের জন্য নিয়মিত কিছু কিছু সঞ্চয় করুন।
- পরিবার পরিকল্পনা করুন, ২ সন্তানের পরিবার গড়ুন।

HSP - A Project of
«enfants du monde» «বিশ্বের শিশু»
House 12, Road 15 (New), Dhanmondi R/A, Dhaka-1209
GPO Box 986, Tel : 814392, 814394

পাস বই
PASS BOOK

নং / No. 9848 . . . . প্রদানের তারিখ / Date of issue. . . . . .

(উপকৃতদের অংশগ্রহণ / Beneficiary Participation)
(সঞ্চয়, ঋণ ও পরিশোধ / Savings, Loan & Repayment)

হেলথ এন্ড সেনিটেশন প্রজেক্ট। এইচ, এস, পি।
Health & Sanitation Project (HSP)

ই. ডি, এম - চকরিয়া, কক্সবাজার
EDM - Chakaria, Cox's Bazar

সদস্য/সদস্যার নাম / Name : . . . . . .

সূচক নং / Index No. . . . . .

পিতা/স্বামীর নাম / Father's / Husband's Name : . . . . . .

. . . . . .

সদস্য নং / Membership No. . . . . দলের নং / Group No. . . . . .

দলের সঞ্চয়ী হিসাব নং / Group Savings A/C No. . . . . .

. . . . . ব্যাংক / Bank . . . . . শাখা / Branch

Annexure-3

যে রোগগুলি আপনার আদরের মনিকে ছিনিয়ে নিতে পারে সেগুলি হলো ঃ

- ধনুষ্টংকার
- ডিপথেরিয়া
- হাম
- যক্ষ্মা
- হুপিং কাশি
- পোলিও

সময়মতো টিকা দিয়ে এসব রোগ থেকে শিশুদের বাঁচানো যায়।

মনে রাখবেন

আপনার শিশুকে ৬টি রোগের আক্রমন থেকে রক্ষা করতে হলে ১ বছর বয়সে পৌঁছবার আগেই তাকে মোট ৮ ডোজ টিকা দিতে হবে। এর জন্য আপনাকে কমপক্ষে ৩ বার শিশুকে টিকাদান কেন্দ্রে নিয়ে আসতে হবে।

একটি ডোজ কম নেয়া হলে আপনার শিশু কিন্তু বিপদমুক্ত হবেনা।

- পাস বই সযত্নে রাখুন।
- পাস বই হারিয়ে গেলে অথবা জমার গরমিল হলে সঙ্গে সঙ্গে দলনেতাকে/গ্রাম সংগঠককে জানাবেন।
- প্রতিটি পাস বইয়ের মূল্য ১০/- (দশ টাকা) মাত্র।

শিশুর জন্মের প্রথম দিন থেকে দুই বছর বয়স পর্যন্ত অবশ্যই শিশুকে বুকের দুধ খাওয়াবেন।

জানি তাই করি

- মায়ের দুধের খরচ নেই।
- মিশ্রিত খাদ্যই উত্তম খাদ্য।
- শিশুরা মুরগীর ছানার মত সবসময়ই কিছু না কিছু খেতে চায়।
- শিশুদের খাওয়াতে ভুল করবেন না, ঘুমিয়ে থাকলে ডেকে উঠান।
- শিশুদের ভিটামিন 'এ' খুবই দরকারী, তাই তাদেরকে হলুদ ফল খেতে দিন।

পাস বই
PASS BOOK

নং / No. . . . . প্রদানের তারিখ / Date of issue. . . . . .

(উপকৃতদের অংশগ্রহণ / Beneficiary Participation)
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. . . . . .ব্যাংকে / Bank . . . . . শাখা / Branch

গ্রাম/Village . . . . . এইচ, এস, পি ইউনিট নং/HSP Unit No. . . . . .

ইউনিয়ন/ Union . . . . . .

থানা /Thana, চকরিয়া / Chokoria, জেলা - কক্সবাজার / Dist - Cox's Bazar

গ্রাম সংগঠক/দলনেতার স্বাক্ষর / Signature of Gr. Leader / Vo. . . . . .

দায়িত্বপ্রাপ্ত গ্রাম সংগঠকের স্বাক্ষর / Signature of Vo. Incharge . . . . . .

হেলথ এন্ড সেনিটেশন প্রজেক্ট (এইচ, এস, পি), চকরিয়া, কক্সবাজার

HEALTH AND SANITATION PROJECT (H.S.P.), Chakaria, Cox's Bazar

নাম / Name : ... ...

সূচক নং / Index No. : ... ... পাস বই নং/Pass Book No. : ... ...

তারিখ ১৯৯ Date 199			জমা/প্রাপ্তি Deposit/Receipt						প্রদান/উত্তোলন Payments/Withdrawal					
দিন Day	মাস Mon.	বছর Year	সদস্যপদের ফিস Member-ship Fee	স্বাস্থ্যসম্মত পায়খানার কিস্তি Contribution for Latrine	চারাগাছ ক্রয়ের কিস্তি Contribution for Sapling	মাসিক সঞ্চয় Monthly Savings	অন্যান্য দেয় অনুদান Other Contribution	মোট TOTAL	সঞ্চয় থেকে ঋণ Loan from Savings	পরিশোধ Repayment	ঘূর্ণায়মান তহবিল থেকে ঋণ Loan from revolving fund	পরিশোধ Repayment	দলনেতা/গ্রাম সংগঠকের স্বাক্ষর Signature of VO/Gr. leader	দায়িত্বপ্রাপ্ত গ্রাম সংগঠকের স্বাক্ষর Signature of Vo. Incharge
মোট / Total														