

Annual Report

Financial Year

20
16-17



Deshabandhu Club

an organization working with people for sustainable development

ACTIVITY





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ANNUAL REPORT

2016-2017



DESHABANDHU CLUB

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Registered under Societies Regn Act XXI of 1860, Regn. No 193 of 1977-78

FCRA Registration No.020720016 dtd 19.03.1996

Registered under Section 12(AA) & Section 80(G) of Income tax Act 1995

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About Deshabandhu Club

Deshabandhu club from the inception has established itself as an organization committed towards welfare and empowerment of marginalised section of the society. The organization has worked with multiple stakeholders: governmental bodies, media, private sector, international and national NGOs and multilateral organizations to create a platform and an understanding towards this marginalized and voiceless section of the society.

Deshabandhu Club has been working with the people for more than 51 years in multifarious program to minimize the poverty and social justice through well-planned and comprehensive program in health, education, livelihoods and disaster preparedness.

As a Mother NGO (MNGO), comprising eighteen numbers of FNGOs, the organization has implemented Reproductive & Child Health (RCH) program in selected four districts of Assam and a remarkable effort has been done by the organization in this field.

Considering the gravity and intensity of the problem, the organization has come forward to promote SHG by the women community. The National Bank for Agriculture and Rural Development (NABARD) was satisfied with the performances of the organization for promoting SHGs and recognized the success of organization by awarding the best NGO AWARD in Assam for two successive years for the year 2000-01 & 2001-02.

Assam Rural Infrastructure and Agricultural Services Project (ARIASP) of Assam is the Society to manage, coordinate, implement World Bank aided projects and any other externally funded projects as authorized by the State Government, and to monitor the implementation performance of the line departments of the projects. ARIASP is a path finder and innovator in the areas of targeting the intended beneficiaries, employment generation, reaching out to the vulnerable groups and this organization was Nodal NGO for three districts of Barak Valley. In the Capacity of Nodal NGO, Deshabandhu Club looked after the work of irrigation, veterinary and fishery projects.

State Agriculture Department entrusted to this organization with the responsibility of implementing three watershed projects for rain fed areas in Cachar District, considering the potentiality of the organization

In the field of HIV/AIDS, Deshabandhu Club is a pioneer organization in the state of Assam and has been executing two different programs in Barak valley namely Targeted intervention project on female sex workers & MSM and CSC. CSC is a special intervention for people living with HIV/AIDS, has been run by the organization since 2008. Taken as a whole, the organization has formulated as vast expertise which may help to the community particularly.

In order to care, rescue and protect children who are vulnerable and seeking support for that the organization already has taken care of through Child line 1098 and right now remarkable upshots have been done through the Child Line.

"Women empowerment" It implies a better quality of material life through sustainable livelihoods owned and managed by women. It means reducing their financial dependence on their male counterparts by making them a significant part of the human resource. Considering this concept the organization has been executing livelihood projects with the aegis of USHA international in the North east region.

Disability is an important public health problem especially in Barak valley and majority of the disabled resides in rural areas where accessibility, availability, and utilization of rehabilitation services and its cost-effectiveness are the major issues. The health care system and service deliveries need to be strengthened and considering this circumstance the organization intervene in the field of disability and at the moment running two types of program one is IBR (special school in the name of Disha for mentally challenged children) which was started in 2003 and other is CBR which was initiated in 2008 with the support of CBR Forum.



President's Desk



Dr. Sanjib Sikidar
President,
Deshabandhu Club

The organization is now 51 years old, it gives immense pleasure to work with the common people comprising multifarious activities and it's a huge experience by imparting knowledge from the community.

We are pleased to highlight the annual activities which have been carried out for the year 2016-17; in this report we have tried to capture some foremost activities and its impact. We are thankful to our funders, partners and volunteers for their generous support and guidance for forwarding our mission.

As it is known to all that the organization has been keeping its rhythm by working in both urban and rural locations on health, sanitation, poverty alleviation, Child rights, women empowerment, HIV related issues and Disability issues etc with the aegis of national & international NGOs and Government institutions and maintaining the elasticity to work at District and State levels.

A handwritten signature in black ink, appearing to read 'Sikidar'.

Dr. Sanjib Sikidar

Basic information

Legal Status

Registered under Society registration Act XXI of 1860, foreign contribution regulation act, 1976, PWD Act 1995, section 12(A) & 80(G) of IT Act, 1961 and National Trust Act.

Vision

To create a society where every citizen avails basic needs and services so as to have a life with self respect, dignity and pride.

Mission

Deshabandhu club exists to bring the socio economic development of the citizens particularly to women & children of Assam by 2030 A.D. would like to provide cost effective, sustainable, peoples' friendly health, education, economic empowerment and rural entrepreneurship through peoples participation.

Decision Makers

The Executive committee, elected by the general body biennially is responsible for all sorts of planning, execution, assessment, monitoring of all program & activities.



Aims and Objectives

- To promote the cause of national integration and communal harmony in a best possible means.
- To eradicate illiteracy by voluntary efforts and to help in the spread of education both formal & non formal in the rural & backward areas with special emphasis on female & child education.
- To conduct training program for the rural youths for self employment.
- To develop scientific temperament among the rural people through seminar, symposium, discussion, folk entertainment and audio visual aid.
- To create awareness on environment pollution and encourage the people for a forestation.
- To promote sports & culture.
- To make the people aware about population explosion and encourage them to accept small family norms.
- To provide basic medical relief to families particularly old women and children residing in the remote & inaccessible areas.
- To help the relevant Governments & Non-Governments agencies in the implementation of various socio-economic and refundable assistance at the grass root level.
- To help & rehabilitate all types of disable persons.
- To create health awareness among the rural people for preventive measures on various incurable diseases.
- To uplift the socio economic status of rural masses, the organization may borrow or raise loan from any outside agency as per objectives of the program of that agency and the organization.
- To aware the rural people about small savings.
- It will function as non-profitable organization .If some profit is raised from any source it will be utilized in furtherance of the objects of the organization & shall not be distributed amongst the member.



Activities at a glance...

HEALTH SERVICES IS THE PRIMARY AND CORE COMPONENT OF THE ORGANIZATION

❖ Major health interventions of the organization :

1. Free Health check up ..

Free Health Check up : Right to health care means that hospitals, clinics, medicines, and doctors' services must be accessible, available, acceptable, and of good quality for everyone, on an equitable basis, where and when needed.

Right to health means that everyone has the right to the highest attainable standard of physical and mental health, which includes access to all medical services, sanitation, adequate food, decent housing, healthy working conditions, and a clean environment. Everyone has the right to the health care they need, and to living conditions that enable us to be healthy, such as adequate food, housing, and a healthy environment.

Health care must be provided as a public good for all, financed publicly and equitably. Access to health care must be universal, guaranteed for all on an equitable basis. Health care must be affordable and comprehensive for everyone, and physically accessible where and when needed.

Conceptualizing the need of people the organization was started free health check up camps in three places and a remarkable size of the people have been avail this services. Free health check up programs are available in Head Quarter in Behara, Disha in Srikona and City office, Tarapur . In Disha, which is especially for mentally challenged persons and in Head Quarter & City office, all types of check up are available but emphasizing on children, women and old people's health. To execute the total program the organization has been mobilized resources likely a good doctor's team and procuring medicine..

2. Targeted Intervention Project on Female Sex Workers And MSM

The organization has been executing Targeted Intervention project for Female Sex Worker (FSW) and Men Having Sex with Men (MSM) to prevent HIV transmission with support to Assam State AIDS control Society since 2008 and it is conspicuously, the organization is turned a resource agency right moment .

Objective of the project is to sustain and proper use of condoms, to mobilize the community for development community participation, to reduce the vulnerability of STI/STD among high risk group of population and to create an enabling environment to mitigate the impact of HIV/AIDS on FSW & MSM.

As per the guidelines of NACO and ASACS, project is being implemented with a clear laid down strategies i.e. (a) Outreach Communication (b) Health Services (c) Condom Promotion (d) Care and support to PLHIV and (e) Enabling Environment. TI program has been implementing with core Group i.e. FSW (800 no's) and MSM (120 no's).

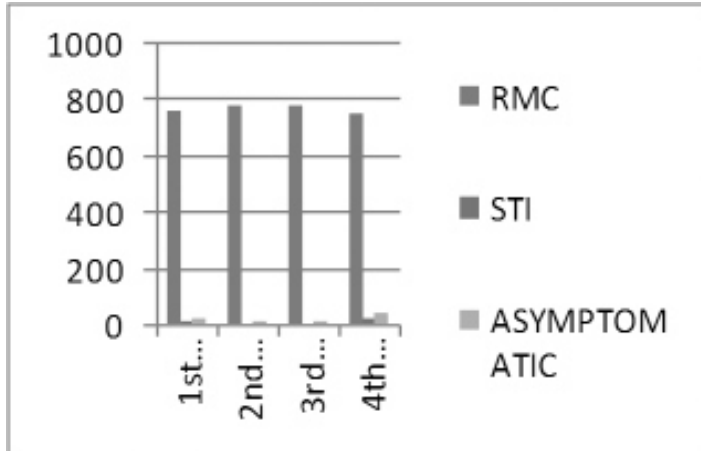
Program conducted as per proposed indicators for this tenure.

Outreach Communication - Among the 845 no's of active HRG 798 no's of FSWs are contacted once and 781 no's are in regular contact through the outreach activity i.e. up to 94% during



this financial year which is a good indicator.

Health Services - (STI, PT and RMC) - Against the 800 no's of HRGs total RMC attendance is 3041 no's i.e. 95% have attended in the static clinic including PPP model clinic in the hot spot during the 1st quarter followed by 760 no's (95%), in second quarter 781 no's (97%), in 3rd quarter 779 no's (97%) and lastly 751 no's RMC attendance of 93 % during the last quarter of the session. STI cases found is the whole year is 27 no's which is a low evidencing use adherence to condom use.



And new HRGs registered is 81 no's (Asymptomatic cases) and Presumptive Treatment (PT) has been provided to all the new registered HRGs. One positive is found during the whole years and they also linked with the ART. The 1050 no of HRGs tested for HIV and 1679 no of HRGs was referred for ICTC testing from April 2016 to March 2017.

Condom Promotion- During the session overall Condom distribution is 113690 pieces i.e. 37 % is distributed to the HRG's distribution was low due to stock was low.

Enabling Environment- During the whole year 22 no's of Advocacy was conducted with different stakeholders to address the stigma and discrimination. During the first quarter advocacy was done with Superintendent & ICTC counselor of SMDCH, RLA chief madam, Sanjibani 104 Health Service, ward commissioner of Ward no. 3, 8. In the second quarter advocacy is done with the Deputy Commissioner of Cachar district, Joint Director of Health Services, ICTC Counselor and Lab Technician SMDCH, Manager of Sanjibani 104, Local Leader, RLA madam, Coordinator of CSC. In the third quarter meet with the Tea Garden Manager of Kalaincherra, Brothel RLA madam, Ward Commissioner of ward no. 5. In the fourth quarter meet with supply gate, Hotel owner and in charge of women cell of Sadar Thana and Pan shop owner of the Debdoot.

Challenged Faced :

1. As the Street Based, home based HRGs are mobile in nature and hard to reach so regular contact is not upto the 100%.
2. Due to shortage of stock condom distribution is upto the demand which is a negative indicator of program delivery and RPR KIT also.
3. As the ICTC Kit was unavailable for several months in the SMDCH, it hinders the overall achievement of ICTC testing of HRGs.
4. In the part of Brothel Intervention, TI team has faced several problems as there was some external problems in the brothel.
5. As due to stigma and discrimination from the society some of the PLHIVs do not want to reveal there identity so it create a problem from PLHIV from ART linkage.
6. As there is no supply of STI Kit 1 from the SACS but the NGO has manged from their own fund and KIT 1 has been provided to total 65 no's of HRGs i.e. 53 no's to FSW & 12 No's to MSM.



Achievements of the program :

1. Applied outreach tools to reach the target group, increased active involvement of FSW-CBO for mobilization of community.
2. Distributed 113690 pieces of free condoms to the HRGs.
3. 1 (FSW) PLHIV detected during this year were link to ART& also is link with VIHAAN care and support centre for further assistance.
4. 1679 cases were referred for HIV testing and out of which 1050 no's of HRGs are tested.
5. Conducted 72 No's of Focus Group Discussion and sensitize people about the various welfare schemes and also about the HIV/AIDS.
6. Conducted 22No's of Advocacy meetings with the primary and secondary stakeholders focusing on reducing the stigma and discrimination for the smooth service delivery to the HRGs.
7. Conducted 4 no. of health camp in collaboration with Sanjibani 104 Health Services in the hard to reach area.

Future Intervention:

- ◆ To conduct more Health Camp in the hard to reach areas so that HRGs could avail the facilities of the project.
- ◆ Main focus will be given on the sustainable livelihood promotion of the HRGs focusing on the skill development of the HRGs.
- ◆ There is need of advocacy with the administration and hot spot wise stakeholder meeting so that people would come forward for service uptake.
- ◆ Networking with the social welfare offices for linking the HRGs.



Photo-1

Sustainability of Project:

1. Community working group will be re-establishing for the revival of the development of the project.
2. The Project is a learner site as the other personals from other organizations have come for learning about the project.
3. As the project team is involve in identifying new hotspot for identifying new HRGs so that TI team could avail the project services to uncovered population.

3. Care and Support Centers (CSC) for people living with HIV/AIDS:

The overall goal of Care, Support and Treatment (CST) component under NACP IV is to provide universal access to comprehensive, equitable, stigma-free, quality care, support and treatment



services to all PLHIV using an integrated approach.

Based on the recommendation and priorities of NACP IV working group on care and support, the strategy of implementation of the care and support is being completely revamped to ensure cost effectiveness and sustainability. All care and support component of NACP III CCC, DIC & DLNs are brought under one roof to provide community based care and support services.

Under NACP IV, Care & Support Centers (CSCs) are established and linked to ART centers with the goal to improve the quality & survival of life of PLHIV. The CSCs serve as a comprehensive unit for treatment support for retention, adherence, positive living, psychosocial support, referral, linkages to need-based services, and providing an enabling environment for PLHIV. This will be part of the national response to meet the needs of PLHIV, especially those from the high risk groups, and women and children infected and affected by HIV. CSCs are run by civil society partners including District Level Networks (DLN) and non-government organizations (NGOs).

Broadly, the following services are being provided by care and support Centers:

Counseling Services:

counseling support is provided on a wide-range of issues (psycho-social support, disclosure of HIV status, treatment education and adherence, positive living and positive prevention, nutrition, sexual and reproductive health issues such as family planning and pregnancy, discordant couples, home based care) through one-to-one counseling or couple/family counseling. Children and adolescents living with HIV are also be provided counseling services on HIV status disclosure, ART adherence, personal hygiene, eating healthy and hygienic food, coping with emotions etc. Counseling services are available at the CSC through trained counselors and messages are reinforced in the field through outreach workers and peer counselors

Outreach services: These services include follow up of PLHIV for treatment adherence, repeat CD4 testing; tracking Lost to follow-up (LFU) & MIS cases, and motivating family members for HIV testing; reinforcing counseling messages; and providing/facilitating home-based care

Referrals and linkages:

Another important service provided by the CSC is the establishment of linkages and provision of referrals to various service providers in the area for addressing medical and non-medical needs. The PLHIVs are also supported to access and avail social entitlements and social welfare schemes.

Advocacy and communication:

The team of CSC has conducted advocacy in different level to create an enabling environment and access to services without stigma and discrimination, CSC has provided their supports to the PLHIV through advocacy at local, state and national levels. A



discrimination response team is set up at the CSC level to respond to incidents of denial of services reported in the area due to discrimination. Quarterly advocacy meetings with various stakeholders and media advocacy events have been done to influence policy.

Support group meetings: Support group formation is aimed at providing a platform for PLHIV to share their concerns and learn from each other. Regular support group meetings are organized and information on various themes are provided to build skills of PLHIV to lead quality life

Overall achievements:

- ❖ Advocacy meeting with National Insurance Company Ltd, Silchar, for the linkage of RSBY Scheme of PLHIV belonging to BLP families.
- ❖ Advocacy meeting with the NYK about the different vocational training on youth leadership & community development, skill up gradation training programme with the MTS worker of NYK.
- ❖ Advocacy meeting with AHANA to support positive pregnant women for the various social welfare / social support schemes & also to link all positive pregnant women with CSC.
- ❖ 719 Nos. of PLHIV are linked with Various Social Protection Schemes (AAY & NFSA)
- ❖ Two of the CSC positive clients got married with the help of CSC staffs for a better life ahead.
- ❖ 330 Nos. of LFU PLHIV are brought back to Treatment at ART Centre.
- ❖ 10 Nos. of PLHIV successfully avail the PAN Card
- ❖ 7 Nos. of Discrimination cases are successfully resolved by DRT.

Activities are attained during this tenure

Indicators	Target	Achievement
No of PLHIV registered in ARTC & on ART are registered in the CSC	1573	992
No of PLHIV in pre ART phase who get registered at the CSC	307	608
No of registered PLHIV receiving at least one counseling session	1600	1320
No of PLHIV whose at least one family member or sexual partner referred for HIV testing & received test result	99	63
No of PLHIV registered in the CSC linked to Govt Social Welfare schemes	1600	719
PLHIV lost to follow up (LFU) brought back to treatment	1267	330
No of Advocacy meeting	18	17
Support Group Meeting	48	43
Total no of already registered PLHIV contacted through outreach	1600	1321
Total no of supervisory visit undertaken by Project Coordinator	77	77
Total no of supervisory visit undertaken by Project Director	61	61



WOMEN AND CHILD WELFARE

Anganwadi Training Centre :

Anganwadi Training Centre is a project under the Social welfare Board of Assam. The organization has been implementing this at Head Quarter. The trainers of AWTC impart training to Anganwadi workers & helpers so that they can be well equipped with knowledge & information to perform their role & responsibilities effectively in the community.

The workers & helpers from Barak valley are trained at the centre from time to time. The AWTC conducts different type of trainings i.e., Job Training, Orientation & Refresher Training as per training guideline of Government.

Objectives of the Training are as follows:

- ❖ To train and orient the AWWs to the various component of the scheme of the ICDS.
- ❖ To enable them understands their roles and responsibilities as well as those of other functionaries of the scheme.
- ❖ To develop them in appropriate skill necessary for pre-school activities, public relation, scheme implementation and general administration.

Goal of the Program

To make good health of women, children and other people of the society and to make the children free from the malnutrition, and to provide the children (3-5 years 11 months) non formal pre-school education to prepare them for the formal education which they will get from the age of 6 years by imparting training to the Anganwadi Workers and Anganwadi Helpers in AWTC.

Training Programs are conducted during this tenure...

Sl. No.	Name of the District	Name of the training	No. of training	No. of participants
1	Cachar, Karimganj & Hilakandi	Job Training	04	127
2	Cachar Karimganj & Hilakandi	Refreshing Training	09	327
3	Cachar, Karimganj & Hilakandi	Orientation Training	03	121

CHILDLINE Service :

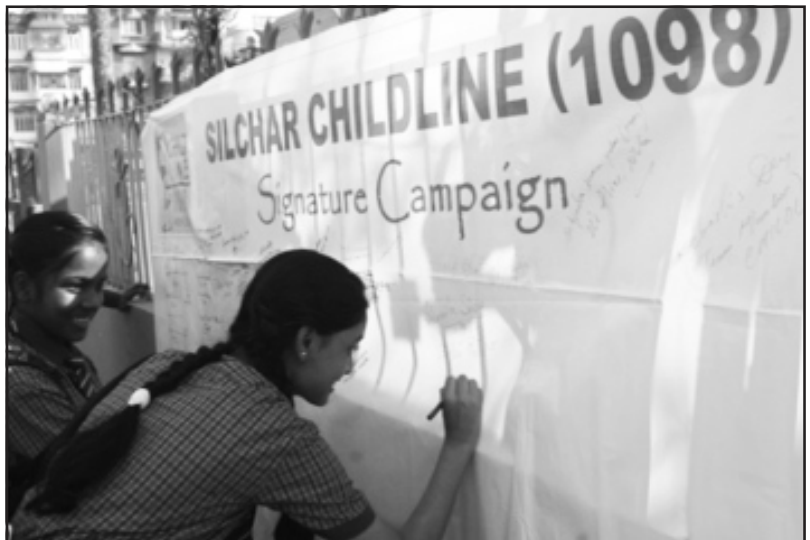
CHILDLINE was founded by Ms. Jeroo Billimoria, who was then a professor at the Tata Institute of Social Science (TISS), Mumbai. Initiated in June 1996 as an experimental project of the department of Family and Child Welfare of TISS, CHILDLINE has come a long way today, to becoming a nationwide emergency helpline for children in distress.



The organization has been executing CHILDLINE (1098) service as a partner organization of Child line foundation since May, 2012. CHILDLINE is 24 hour free emergency phone outreach service for Children (0-18) in need of care and protection. CHILDLINE is a project sponsored by the Ministry for Women & Child Development, Government of India. The operation areas of the Child line activities are throughout Barak valley.

Goal of the Child line :

- ❑ To establish one common brand for CHILDLINE, making it the most recognized reference point in the field of Child Rights.
- ❑ To set up systems and processes for existing CHILDLINE city and district teams to: enhance service excellence
- ❑ Move from being activity-oriented to goal-oriented
- ❑ To launch the CHILDLINE service to the most under-represented and under-reached geographical and thematic child rights areas
- ❑ To make National Initiative for Child Protection (NICP) the most comprehensive initiative in the country for mainstreaming child protection.
- ❑ To optimize new technologies for up scaling CHILDLINE, reducing the cost per call and making operational systems more professional
- ❑ CHILDLINE has organized awareness programs in block level, GP level and school



through leaflet distribution in the remote areas of the three districts of Barak Valley.

- ❑ Open House Programs are held and the issues raised by the children are Education related, Drinking Water Problem, school maintenance problem, Electricity problem, Medical Related Issues, Child labour, Outreach, Open house and Awareness, done on different blocks area CHILDLINE has adopted an innovative approach for spreading awareness by printing CHILDLINE



logo and message in the electricity and telephone bill and CHILDLINE logo and message stamp made by the District Administration on the request of CHILDLINE.

Following these core interventions are attained during this year ...

Types of Intervention	No.
Child Labour	33
Missing	8
Child Sexual Abuse	10
Medical Help	06
Child Help & Sponsorship	20
Shelter	17
Restoration	17
Referral from Other CHILDLINE	05
Unclassified Case	25
Lost & found	00
Emotional Support	07
TOTAL	148

Disability

DISHA (A Special school for mentally challenged children)

Children in the age group of 7-18 are admitted in the school, and are divided according to their need, ability, mental age and functional level. Considering the child as the center, Disha gives importance to individual and overall development of the mentally challenged

Physical Development: In this area fine motor and gross motor skills, mobility and coordination skills are developed. Yoga,



Physical Exercise, Drill, group game is imparted to students. They also indulge in gymnasium activities on a regular basis. The sports and gym equipment is at the disposal of the students for use.

Activities of daily living : We provide skill training in different activities like brushing, dressing, grooming and cleanliness, eating, drinking, etc. Communication and Language Development: One of the unifying features of our life is the ability to communicate with the people around us. The



children with special needs present varying degrees of deficits in communications. It is necessary to provide help to those children with learning disability to communicate well. In this area we provide training in speech therapy, receptive and expressive language and vocabulary development.

Cognitive Development: This is a very important area in development. In this area functional Academics (Reading-Writing-Arithmetic), Time, Money transactions, Measurement is taught. The students are also given exposure to computer basics.

Social and Emotional Development : Appropriate social behavior is necessary for every individual to be an acceptable member of the society. At Disha we strive to attain this level of good behavior from our student. Intensive training is given to cultivate appropriate social behavior. Problem solving, modifying behaviour with sensitivity and encouragement plays a key role in their emotional development and it is adapted in disha.

Domestic and prevocational Training : Our aim is to integrate the Mentally challenged as useful members of the family and into our society. Skills such as wiping, cleaning, washing ironing; cooking, gardening etc. are taught. We have a well - equipped kitchen to teach cooking and household activities. We also expose them to pre-vocational skills and work-routine like cutting pasting painting etc., which will be useful for their future vocational education.

Leisure time and recreational activities: Extracurricular activity is a part of our curriculum. Activities like games, music, dance, drama, art-craft etc. training is given as per their skills and ability. Every students Birthday is celebrated in the school and staff and students together celebrate festivals like Ganesh, Diwali, Christmas, Holi etc. This personal experience acts as a stimulation in the child's learning process..

The student strength has gone up to 50 till April 2016. Generally, four types of children are admitted in this centre .These are Mental Retardation, Cerebral Palsy, Autism & Multiple Disability.

2. Community Based Rehabilitation (CBR)

Community Based Rehabilitation (CBR) for Persons with Disability:

The organization has been executing CBR program since 2011 with the aegis of CBR forum in the course of following objectives and principles.

The main objectives of community-based rehabilitation:

- Ensure possibility the work of disabilities persons and enhance their mental and physical abilities and reach to usual services and equal opportunities and Contribute positively to the development of their communities
- Enabled communities to promote the rights of disabilities persons and protect it by changing the communities themselves to remove barriers and obstacles that disrupt participation

The principles of community-based rehabilitation: (C.B.R)

- The rehabilitation is right for disabled people and that comes to response to their needs and based on social justice, dignity and equality of opportunity and equality of rights and duties
- Strengthening (or) reinforcement and enabled special-needs persons, their families, and their organizations an essential basis for the integration of these people and their Participation them in their communities.



- On one side, the community orientations and situations, and on the other hand Strengthening, enabling and activating the resources and the experiences of the local societies it is the fundamental guarantee for the Community participation in planning implementation and follow-up (the local community plan for disability)
- Freeing and providing and simplify the transfer of knowledge and experience are the basic necessities to use the available potential and Based on what exists.
- The integration and comprehensiveness work to ensure the success of rehabilitation in the frame of overall development.
- Community-based rehabilitation is based mainly on the rehabilitation of society to accommodate.



Training is going for CBR's implementation..

Sl. No.	Type of Disability	0 - 5		6 - 14		15 - 18		19 - 59		60 +		Total		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	
1.	Blindness	2	0	3	0	2	0	4	2	0	2	11	4	15
2.	Low vision	0	0	3	0	7	1	13	2	0	0	23	3	26
3.	Leprosy cured	0	0	0	0	0	0	1	0	0	0	1	0	01
4.	Hearing impairment	2	0	4	2	1	4	22	29	2	0	31	35	66
5.	Locomotors disability	0	1	10	2	6	1	68	50	5	1	89	55	144
6.	Mental illness	0	0	0	0	0	0	27	24	1	0	28	24	52



Sl. No.	Type of Disability	0 - 5		6 - 14		15 - 18		19 - 59		60 +		Total		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	
7.	Mental retardation	2	0	5	6	3	2	16	16	0	0	26	24	50
8.	Autism	0	0	0	0	0	0	0	0	0	0	0	0	00
9.	Cerebral Palsy	3	2	6	6	3	2	4	3	0	0	16	13	29
10.	Multiple Disabilities	0	0	2	3	0	0	3	1	0	0	5	4	09
11.	Others	0	0	0	0	0	0	0	0	0	0	0	0	00
Total:		9	3	33	19	22	10	158	127	8	3	230	162	392

Activity undertaken Sector wise in this tenure ... 1. Health

INDICATORS	OUTCOME INDICATORS
1.1. Encourage families PWDs and Community members to Participate in (health awareness, prevention activities services and schemes	1.1. 43% (145/331) of PWDs and parents of CWDs have participated in health program for prevention and promotion of health services including early identification, intervention .
1.2. Facilitate PWDs to access disability certificate	1.2. 47% (54/70) of PWDs CWDs have received disability certificate during this period
1.3. Facilitate CWDs/adults to obtain aids and appliances	1.3. 76% (26/34) PWDs/CWDs have received aids and appliances
1.4. Training for mothers group for rehabilitation of severe and multiple CWDs	1.4. 100% (4/4) of mother group have trained on rehabilitation for severe and multiple CWDs
1.5 Persons with Mental illness to access medical treatment	1.5.100% (3/3) of PwMI have been continuing medication and shown some improvement in their health condition

2. Education

INDICATORS	OUTCOME INDICATORS
2.1 .Encourage parents to enroll CWDs into Anganwadi centre and School	2.1. 64% (9/14) of Children and adults have enrolled in Schools/College
2.2. Motivate all stake holders (SSA/school teachers/ PRI/Community /DPO leaders/ parents in supporting the special needs of CWDs	2.2. 64% (11/17) of CWDs have received appropriate support on education



<p>2.3. Organize training for school teachers on effective teaching methods and rights of CWDs with the help of SSA Resource teachers</p> <p>2.4. Promotion and strengthening of Children's Clubs</p> <p>2.5 .Facilitate CWDs to access resources allocated by local authority,NGOs and Govt. departments</p>	<p>2.3. 81% (22/27) of primary school teachers have understand the following needs at school level for special needs CWDs: # Used Appropriate teaching learning materials (TLM) #Created barrier Free environment at school level # Have Ramp/ accessible water/ toilets # Encouraged CWDs to participate sports and game</p> <p>2.4. 88% (7/8) of Children Clubs have Conductive environment for CWDs inclusion in the school.</p> <p>2.5. 81% (9/11) of CWDs have received educational benefit like scholarship and special assistance of school going CWDs.</p>
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3. Livelihood

INDICATORS	OUTCOME INDICATORS
<p>3.1. Orientation in DPO members/PWDs on various livelihood opportunities</p> <p>3.2. Facilitate eligible PWDs to access vocational skills through Govt. and other training institutions</p> <p>3.3. Assist PWDs to access social security schemes</p> <p>3.4. Livelihood support fund (LSF) to active VDPOs for IGA</p> <p>3.5. Facilitate VDPO to link with SGSY/ NRLM to avail schemes /loan</p>	<p>3.1. 42% (83/200) of PWDs have got information on potential livelihood opportunity like # 22 PWDs on handicraft #15 nos. poultry farming #19 nos. Fish farming #14 PWDs Piggery & petty shop #8 PWDs Dairy # 5 Goat rearing</p> <p>3.2. 52% (15/29) of PWDs have utilized opportunity through vocational skill from local artisan</p> <p>3.3. 86% (19/22) PWDs have received social security schemes</p> <p>3.4. 1 DPO group has received livelihood support fund to start IGAs on Poultry fishery, goat rearing and petty shop</p> <p>3.5. 14% (03/22) DPO groups have linked to NRLM and received fund for livelihood activity</p>

4. Social Sector

INDICATORS	OUTCOME INDICATORS
<p>4.1.Motivate the family and community members to encourage PWDs/CWDs to participate in family life</p> <p>4.2.Encourage and motivate PWDs who want to get married and have family</p>	<p>4.1. 69%(31/45) of parents of CWDs/ PWDs have included in social and religious life</p> <p>4.2. 86%(6/07) of PWDs have married</p>



5. Empowerment Sector

INDICATORS	OUTCOME INDICATORS
5.1. Formation and capacity building of VDPOs in 4 new panchayet	5.1. 6 VDPO has been formed in new area
5.2. Facilitate inclusion of maximum number of PWDs in existing VDPOs in 27 villages	5.2. 72% (39/54) of PWDs/ Parents of CWDs have joined in VDPO groups
5.3. Quarterly meeting of BDPO group and Follow up visit to block and Govt. department by BDPO leaders	5.3. BDPO members visited Block and district offices and submitted memorandum towards the issues of PWDs and pursue the same
5.4. Observation of International day on persons with disabilities at Block level	5.4. 75% (150/200) VDPO members have observed international day for PWDs at Block level

SUCCESS STORIES :

Title: "Self employment is best employment" ---- Says Ms. Dilwara

BACKGROUND - Ms. Dilwara is a locomotor disabled woman age about 26 years, residing at village Kurkuri part-III under Kurkuri G.P. of Cachar district of Assam. She has passed HS examination in 2002. Her father is a small farmer. She is unable to hard work due to her disability. She applied for the post of Angandwadi wortker but she did not get this job. She was depended on her family. She was thinking to engage in self employment for survive her life

Intervention: CBR worker met with Dilwara Begom and discussed regarding engage income generating activity. She came to know about the CBR activity, then after she joined DPO group as a new member of Asha Deep DPO and started saving in monthly basis. With the help of CBR activity she received disability certificate from Silchar Medical College. With the help of after Few days, CBR worker has linked with Usha Siali School, Kalain. Accordingly, she learnt tailoring training from Usha Silai unit. After completion of tailoring training she brought a tailoring machine with her own fund and set up tailoring shop at Kalain Bazar.



In July 2016 she has taken loan an amount of Rs. 3000/- from "Ashadeep DPO to expand her business. She is recovering loan to the group. Now she has applied to United Bank of India Kalain branch for further loan under Mudra Yojana Scheme

Changes happened - Now, Ms. Dilwara is earning a small amount of money from her business and recovering his loan amount to the group without any difficulty. Now, she is filling self esteem. The



community people are giving value and respect. Her confident level grown up and her activity encouraged to other PWDs

Livelihood Project for Women

Livelihood program, which empowers women particularly to strengthen their pivotal in the family. It helps to enhance the self-esteem and takes part in the decision making process "USHA SILAI SCHOOL" is an initiative of Deshabandhu Club for boosting up income general activities and strengthens the rural economy through exploring capacities of the women. With the aegis of Usha International, the organization starts the project in 2014 and Initially, the organization gives importance in Barak Valley and starts a numbers of training schools on tailoring and it expands later in other areas of north east like Manipur, Tripura, Mizoram . At present, In Barak Valley there are 40Nos of School & 40 no's in others states of North east.

Goal of the program : To empower the rural women to established their Social skill & Economic status.

The Objective of the program : To mobilize the village women and girl come to the Silai School for learning and to establish the village location/area with the help of Silai school program.

Activities attains so far in this year

INDICATORS	OUTCOMES
Ensure the proper maintenance of USHA Silai Schools	<ul style="list-style-type: none"> There are 40 nos school in Barak valley, 60 nos in Tripura, 50 nos Manipur & 10nos Mizoram. Almost all USHA Silai schools are proper maintaining by Teachers. There are 120 no's satellite schools has been establish 87 no's in Tripura, 60 no's in Manipur and 15 no's in Mizoram. Numbers of Learner in Barak valley -720, Tripura -550, Manipur -410, Mizoram -12

Details status of the Schools so far :

1.	Cachar	20	590
2.	Karimganj	10	370
3.	Hailakandi	10	280
4.	Tripura	60	1350
5.	Mizoram	10	250
6.	Manipur	50	1080



Over all achievement in this year

- The entire Silai School of Barak Valley is running successfully and teachers are getting more income.
- All the Silai School is walking smoothly but main thing is that so many rural Girl/women can empower themselves & establishing their social & Economic Status.
- Organized Photo Shoot & Video Program in Mizoram & Manipur State, and it was published in Air Channel & in Famous News Paper.
- Some grant Success story of Manipur & Mizoram Silai School Teachers has exposed in You-tube & other media.
- One PLHIV referred by the CSC Deshabandhu Club has been successfully trained and provided One sewing machine.

Challenged faced :

- Due to Communication Problem sometime Silai School Teachers haven't got proper guidance regarding Silai.
- Due to tea garden area/remote area, in some places teachers are not getting proper stitching work or Learner/student.



Step taken to address the problems :

1. Under Shifting Process, USHA Silai School Project has employed new teachers in the non performing Silai School in Barak Valley & other State to Continuing the Silai School smoothly.
2. Recently USHA has organized Master Training Program in Guwahati & Mizoram, for doing many kind of problem solve regarding Stitching of Silai School.
3. Conducted village level month meeting to update the women regarding innovative idea of Silai School.



SOCIAL COUNSELING & ADVOCACY

Legal AID Cell is one of the important wings of Deshabandhu Club. It was started in 2004 to generate legal literacy & to extend legal assistance to people. As per directives of Honorable Supreme court of India & under permission of District session Judge, Cachar the cell was started to address issues like Domestic violence against women & child. It also looks after marital disputes, child labor, cases on violence against women. It is good to share that in the financial year 2016-17 most of the disputes have been settled down at the legal aid cell & unsettled disputes are referred to the court.

INDICATORS	PERFORMANCES
Total cases file	7
Total cases resolved	3
Cases under trial	2
Total case unresolved referred to Judiciary	2
Total case Withdrawn	0

CULTURE

Deshabandhu Club is situated in the foothill of Barail range at Bihara Bazar. Many religious & ethnic group lives in the adjoining areas .Every group has unique culture. The organization is keen on upholding the culture through talent promotion.

Deshabandhu Club has cultural troupe namely Deshabandhu Cultural Mission. The aim of the mission is to spread message on different social issues to the masses. It also observes major cultural events like Yuva divas, International literacy day, World Environment Day, Najrul Jayanti,Rabindra Jayanti etc.

The organization also runs a music school named Deshabandhu Sangit Vidyalaya at Behara Bazar. In every year the students are performed good in their activities...

The performance of Deshabandhu Sangit Vidyalaya is mentioned below....

		Division	App	Passed	Division	App	Passed
Total Candidate appeared	59	Prathama	21	18	Visharad Part -I	16	10
Total Passed	40	Madhyama	13	6	Visharad Part -II	10	6



Education

DESHABANDHU VIDYANIKETAN

In view of the Right to education for all, Deshabandhu Club has been running a school with the target of educating the rural children of Bihar and its adjacent areas

The student enrollment at school is gradually increasing because teachers are mainly focusing on quality education and the parents are highly satisfied with the school



administration. The present students strength is 365 and teaching and non-teaching staff is 18 no's .Deshabandhu Vidyaniketan is coming with soaring ensign in board examination every year. The result of 2017 board examination is given below-

Year	Total Appeared	1st Division	2nd Division	3rd Division	Unsuccessful
2016	13	01	08	00	04

IMPORTANT EVENTS IN THIS YEAR

"Supporting the future" - International AIDS Candlelight Memorial - 22 May 2016

The organization celebrates the 32nd International AIDS Candlelight Memorial with full of admiration. The theme of this day is "Supporting the future". On Sunday 22nd May 2016, the organization commemorates International AIDS Candlelight Memorial. Communities raise awareness around HIV, stand together with people living with HIV and remember the loved ones lost to HIV and AIDS.

The theme of "Supporting the future" emphasizes on PLHIV communities around the Barak Valley to unite and demand a sustainable AIDS response. Currently, we are not meeting the needs of people living with HIV, with many facing lack of access to treatment, care and support. Many are also facing discrimination and criminalization. The Staff of TI and CSC project along with community member jointly celebrate the same in city office. A number of PLHIVs are participated in this memorial.



World Day against Child Labour - 12 June...

In order to provide need, care & support and protection, the organization has been implementing Child Line project 1098 since 2012. From 2012 onwards, the organization has been celebrating this day to advocate stake holders for eliminating child labour from the society. Social protection is both a human right and makes sound economic and social sense. Social protection enables access to education, health care and nutrition and plays a critical role in the fight against child labour.

This year, World Day Against Child Labour draws attention to the role of social protection in keeping children out of child labour and removing them from it. The organization conducted a seminar on Child labour issues in Mahakuma Parisad hall on this day .The District administration, Social welfare department, DCPO,CWC,JJB and NGOs has participated in the program

..14th Nov -Children's Day -- a day dedicated to children

Children's Day coincides with the birthday of Pandit Jawaharlal Nehru (November 14, 1889) first Prime Minister of India after Independence, and so is observed in a grand way. This celebration commemorates Jawaharlal Nehru for his affection towards children and faith that education of children could propel the country's progress. In every year, the organization celebrates children day in Disha Centre (a disability initiative of the organization) with pleasure temperament .Lions Club of Silchar, as a associate organization participate the same in every year.

..World AIDS Day on 1st Dec

World AIDS Day is held on 1 December each year and is an opportunity for people worldwide to unite in the fight against HIV, show their support for people living with HIV and to commemorate people who have died.

World AIDS Day is an opportunity for you to learn the facts about HIV and put your knowledge into action. Conceptualization this perception, the organization observe day in every year. Under the leadership of TI and CSC staffs, the organization organizes rally and seminar in organization premises.

3rd Dec International Day of Persons with Disabilities,

Around the world, persons with disabilities face physical, social, economic and attitudinal barriers that exclude them from participating fully and effectively as equal members of society. They are disproportionately represented among the world's poorest, and lack equal access to basic resources, such as education, employment, healthcare and social and legal support systems, as well as have a higher rate of mortality. In spite of this situation, disability has remained largely invisible in the mainstream development agenda and its processes. The organization observes this day with a colourful cultural program in Disha rehabilitation centre. Parents of mentally challenged children, representative of social welfare department and are participated in the program .Theme of the program is "Break Barriers, Open Doors: for an inclusive society and development for all"



INDEPENDENT AUDITOR'S REPORT

To,
Deshabandhu Club
Behara Bazar
Cachar
Assam

We have audited the accompanying financial statements of **DESHABANDHU CLUB**, Behara Bazar, Cachar, Assam which comprise the Balance Sheet as at 31st March, 2017 and the Income & Expenditure Account and Receipt & Payment Account for the year then ended, and a summary of significant accounting policies.

1. Managements Responsibility for the Financial Statements:

Management is responsible for the preparation of these financial statements in accordance with Accounting Principles generally accepted in India. This responsibility includes the design, implementation and maintenance of internal control relevant to the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

2. Auditor's Responsibility:

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with the Standards on Auditing issued by the Institute of Chartered Accountants of India. Those Standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant for preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control.



Cont'd...

An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of the accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

3. Opinion:


In our opinion and to the best of our information and according to the explanations given to us, the financial statements of **DESHABANDHU CLUB**, Behara Bazar, Cachar, Assam for the year ended 31st March, 2017 give a true and fair view in conformity with the Accounting Principles generally accepted in India.

- i) In the case of the Balance Sheet, of the state of the affairs of Deshabandhu Club as at 31st March, 2017.
- ii) In case of Income & Expenditure Account, the total Excess of Income over Expenditure of Deshabandhu Club for period ended on 31st March, 2017.
- iii) In the case of the Receipt & Payment Account, the total transaction taking place in Deshabandhu Club for the period ended on 31st March, 2017.

Dated at Silchar
the 25th of September'2017



FOR RKP ASSOCIATES
CHARTERED ACCOUNTANTS


(CA. RAVIKR. PATWA)
PARTNER
MRN. 056409
FRN. 322473E

**DESHABANDHU CLUB
BEHARA BAZAR, CACHAR (ASSAM)**

BALANCE SHEET AS AT 31ST MARCH, 2017

LIABILITIES	SCH	AMOUNT	ASSETS	SCH	AMOUNT
<u>FUND ACCOUNT</u>	‘1’	9,962,496.76	<u>FIXED ASSETS</u>	‘2’	3,401,850.00
<u>Provisions</u>			<u>INVESTMENTS</u>		
<u>EPF</u>			Bank Fixed Deposits	‘3’	1,025,000.00
Employers Contribution		8,570.00			
Employees Contribution		7,524.00			
<u>SUSPENSE ACCOUNT</u>		2,649.00	<u>CURRENT ASSETS, LOANS & ADVANCES</u>		
			<u>Receivable</u>		
			Grant - in - Aid Receivable	‘4’	4,970,649.00
			<u>Security Deposit</u>		
			F.Y. 2014-15		10,000.00
			F.Y. 2015-16		10,000.00
			<u>Income Tax Suspenses</u>		
			A.Y. 2017-18		50,118.00
			Cash at Bank	‘5’	311,456.02
			Cash in Hand	‘5’	202,166.74
		9,981,239.76			9,981,239.76

IN TERMS OF OUR REPORT ON EVEN DATE

FOR RKP ASSOCIATES
CHARTERED ACCOUNTANTS

Dated at Silchar
the 25th of September’ 2017



(CA. RAVIKR. PATWA)
PARTNER
MRN. 056409
FRN. 322473E



**DESHABANDHU CLUB
BEHARA BAZAR, CACHAR (ASSAM)**

INCOME & EXPENDITURE ACCOUNT FOR THE YEAR ENDED ON 31ST MARCH, 2017

EXPENDITURE	SCH	AMOUNT	INCOME	SCH	AMOUNT
To Expenditure incurred for various Programmes	‘6’	8,627,719.50	By Grant - in - Aid	‘4’	9,520,100.50
▪ <u>Salary</u>			▪ Membership Subscriptions		5,625.00
Executive Members	48,000.00		▪ Donations	‘8’	404,934.00
General Staff	<u>181,200.00</u>	229,200.00	▪ Fees/ Charges/ Receipts from Various Programmes	‘9’	5,200.00
▪ Telephone Charges		15,637.00	▪ Fees Received from Deshabandu		
▪ Electricity Charges		25,467.00	<u>Vidya Niketan</u>		
▪ Audit Fees		51,400.00	Tution Fees	733,800.00	
▪ Professional Fees		5,176.00	Admission Fees	<u>220,800.00</u>	954,600.00
▪ Grant in aid less received		59,819.00	▪ House Rent		297,100.00
▪ Expenses Incurred for Deshabandu			▪ Recovery of Electricity Charges		39,000.00
<u>Vidya Niketan</u>			▪ Bank Interest	‘10’	51,344.00
Staff Salary	607,200.00		▪ Interest On I.T. Refund		29,754.00
Other Expenses	<u>299,730.00</u>	906,930.00	▪ Industrial Survey		18,600.00
▪ Printing & stationary		20,000.00	▪ Voter Awareness Prog.		10,000.00
▪ Staff Insurance		9,315.00			
▪ EPF Contribution (Employer)		102,240.00			
▪ Bank Charges	‘7’	2,849.87			
▪ Web Expenses		18,800.00			
▪ Disability Identification Camp		15,000.00			
▪ <u>Membership Fees</u>					
National Trust					
Membership Fees	2,000.00				
Credibility Allance					
Membership Fees	<u>1,000.00</u>	3,000.00			
▪ Indian Management Highway Comp.		1,025.00			
▪ 80G Renewal Fees		27,600.00			
▪ 80G Renewal Expenses		9,365.00			
▪ Depreciation	‘2’	293,956.00			
▪ Excess of Income over Expenditure		911,758.13			
		<u>11,336,257.50</u>			<u>11,336,257.50</u>

IN TERMS OF OUR REPORT ON EVEN DATE

FOR RKP ASSOCIATES
CHARTERED ACCOUNTANTS

Dated at Silchar
the 25th of September’2017



(CA. RAVIKR. PATWA)
PARTNER
MRN. 056409
FRN. 322473E



DESHABANDHU CLUB
BEHARA BAZAR, CACHAR (ASSAM)

RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR ENDED ON 31ST MARCH' 2017

RECEIPTS	SCH	AMOUNT	PAYMENTS	SCH	AMOUNT
<u>To Opening Balances</u>			By Expenditure incurred for		
Cash in Hand		6,250.74	Various Programmes	'6'	8,627,719.50
Cash at Bank		<u>45,227.89</u>			
		51,478.63	▪ Salary		
▪ Grants - in - Aid received	'4'	9,415,822.50	Executive Members	48,000.00	
▪ Membership Subscription		5,625.00	General Staff	<u>181,200.00</u>	229,200.00
▪ Donation	'8'	404,934.00	▪ Telephone Charges		15,637.00
▪ Fees/ Charges/ Receipts from Various Programmes	'9'	5,200.00	▪ Electricity Charges		25,467.00
▪ House Rent		297,100.00	▪ Audit Fees		51,400.00
▪ Fees received from Deshabandhu			▪ Professional Fees		5,176.00
<u>Vidya Niketan</u>			▪ Expenditure Incurred for Deshabandhu		
Tution Fees		733,800.00	<u>Vidva Niketan</u>		
Admition Fees		<u>220,800.00</u>	Staff Salary	607,200.00	
		954,600.00	Other Expenses	<u>299,730.00</u>	906,930.00
▪ Recovery of Electricity & Water Charges		39,000.00	▪ Web Expenses		18,800.00
▪ Bank Interest	'10'	51,344.00	▪ Printing & Stationary		20,000.00
▪ IT Refund (A.Y. 2015-16)		68,501.00	▪ Staff Insurance		9,315.00
▪ IT Refund (A.Y. 2016-17)		47,225.00	▪ Fixed Assets Purchased	'2'	263,120.00
▪ Interest on IT Refund		29,754.00	▪ 80G Renewal Fees		27,600.00
▪ Fixed Deposit Matured		100,000.00	▪ 80G Renewal Expenses		9,365.00
▪ Voter Awarness Prog.		10,000.00	▪ Death Claim from LIC		34,013.00
▪ Death Claim from LIC		34,013.00	▪ Indian Management Highway Comp.		1,025.00
▪ Industrial Survey		18,600.00	▪ Disability Indentification Camp		15,000.00
Balance c/d		<u><u>11,533,197.13</u></u>	Balance c/d		<u><u>10,259,767.50</u></u>



DESHABANDHU CLUB
BEHARA BAZAR, CACHAR (ASSAM)

RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR ENDED ON 31ST MARCH' 2017

RECEIPTS	SCH	AMOUNT	PAYMENTS	SCH	AMOUNT
Balance b/d		11,533,197.13	Balance b/d		10,259,767.50
▪ <u>EPF Contribution Received from Staff</u>			▪ <u>EPF Paid</u>		
General	73,076.00		Employers Contribution		102,991.00
CBR Project	18,060.00	91,136.00	Employee Contribution		<u>91,984.00</u> 194,975.00
			▪ Bank Charges		‘7’ 2,849.87
			▪ Fixed Deposit Purchase		600,000.00
			▪ <u>Membership Fees</u>		
			National Trust Membership		
			Fees		2,000.00
			Credibility Alliance		
			Membership Fees		<u>1,000.00</u> 3,000.00
			▪ TDS deducted		50,118.00
			▪ <u>Closing Balances</u>		
			Cash & Cheque in Hand		202,166.74 ‘5’
			Cash at Bank		<u>311,456.02</u> ‘5’ 513,622.76
		<u>11,624,333.13</u>			<u>11,624,333.13</u>

IN TERMS OF OUR REPORT ON EVEN DATE

FOR RKP ASSOCIATES
CHARTERED ACCOUNTANTS

Dated at Silchar
the 25th of September'2017



(CA. RAVIKR. PATWA)
PARTNER
MRN. 056409
FRN. 322473E



Governance

LEGAL COMPLIANCE

The Deshabandhu club followed a rigorous audit process. The statutory auditor with a fixed remuneration was appointed at the Annual General body meeting. The Auditor's reports and financial statements are shared at lengthion the Annual General Meeting. Deshabandhu Club complies with statutory requirements of Income tax Act, 1961 and Foreign Contribution and regulation Act, 1976.

TRANSPARENCY DISCLOSURES

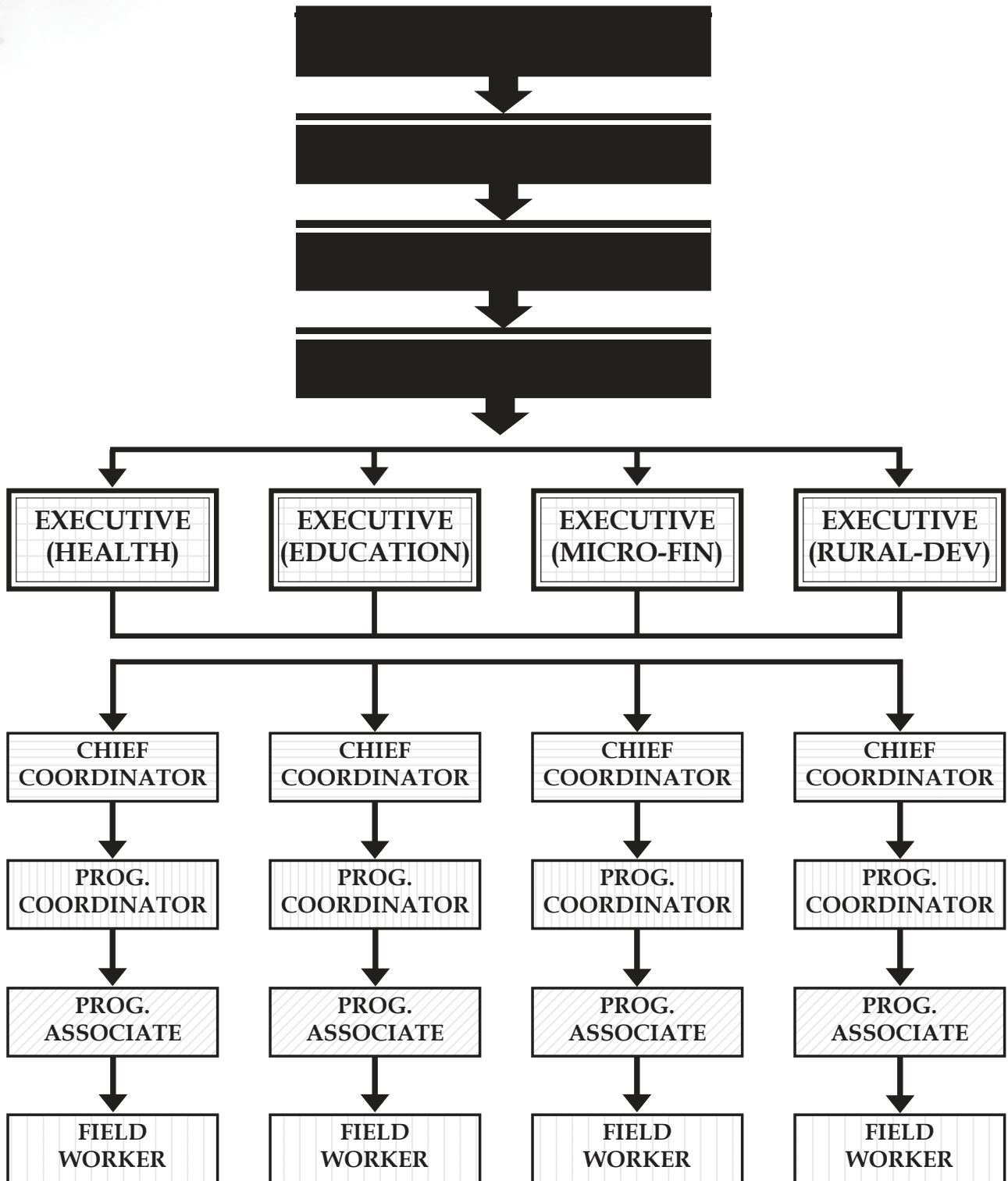
- ✍ Among the above mentioned executive members, Dr. Sanjib Sikidar and Sri Jahar Sikidar are related by blood (Brother) and Sri Rabindra Narayan Acharjee & Smt. Kamana Devi are also related by blood (Brother Sister) the other members are neither related by blood nor related by marriage.
- ✍ No remuneration, sitting fees or any other form of compensation and was paid to any Executive Members for the financial year except financial year except Secretary, 2 Joint Secretaries & 1 Executive Members Rs 39000/-, 49600/- and Rs 48000/- respectively.
- ✍ Travel reimbursement made to Executive Members attending committee meetings and other office meeting : Nil
- ✍ Remuneration of the three highest paid staff members Rs. 15000/-.
- ✍ Total cost of national travel by the Executive body members: 25,837/-.
- ✍ Total cost of international travel by the Executive Members: Nill
- ✍ Remuneration of the lowest paid staff members is Rs. 1500/-.

SALARY DISTRIBUTION AS ON 31.03.2017

Up to 2000/-	1	26	27
2001/- to 3000/-	11	8	19
3001/- to 4000/-	10	4	14
4001/- to 7000/-	14	16	30
7000/- to 9000/-	4	6	10
More than 9000/-	1	5	6
Total	41	65	106



Organogram of Deshabandhu Club



List of Executive Body

1	Dr. Sanjib Sikidar	President	Male	Medical practitioner
2	Ajit Roy Choudhury	Vice president	Male	Ex-Serviceman
3	Kali Kumar Saha	Secretary	Male	Social work
4	Kanailal Bhattacharjee	Jt. Secretary	Male	Service
5	Rabindra Narayan Acharjee	Jt. Secretary	Male	Social work
6	Jayanta Roy Choudhury	Jt. Secretary	Male	Service
7	Bimal Chandra Dey	Jt. Secretary	Male	Service
8	Smt. Kamana Devi	Jt. Secretary	Female	Retd.
9	Abhijit Chakrabarty	Member	Male	Social service
10	Sri Subir Das	Member	Male	Service
11	Sambit Sikidar	Member	Male	Business
12	Ashok DebRoy	Member	Male	Retd. Employee
13	Nibhas Das	Member	Male	Social work
14	Manik Malakar	Member	Male	Social work
15	Pradip Goswami	Member	Male	Service
16	Bijoy Bhushan Das	Member	Male	Service
17	Dr. Bijit Goswami	Member	Male	Service
18	Miss Lilaboti Das	Member	Female	Service
19	Biplab Kar Choudhury	Member	Male	Service
20	Utpal Kanti Nath	Member	Male	Businessman



List of Our Partners

- 1 Ministry of Health & family Welfare
- 2 Assam State AIDS Control Society
- 3 Assam State Social welfare Board
- 4 UNICEF
- 5 National Bank for Agriculture & Rural Development (NABARD)
- 6 IL & FS
- 7 Deptt of social welfare
- 8 National Rural Health Mission
- 9 The National Trust
- 10 Khadi & Village Industries Commission
- 11 District Legal cell, Cachar
- 12 Nehru Yuva Kendra Sangstha, Cachar
- 13 Assam Gramin Vikash Bank
- 14 Usha International Limited, Delhi
- 15 Sishu Sarati, Guwahati
- 16 FXB India Suraksha, Positive Alliances, Delhi
- 17 Childline India Foundation, Mumbai
- 18 Voluntary Health Association of Assam
- 19 Community Based Rehabilitation forum, Bangalore
- 20 National Centre for Advocacy Studies, Pune

