



# Annual Report 2021-22

deshabandhu club

# Core Values of Deshabandhu Club

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## Respect

Believing in and appreciating the dignity and potential of all human beings.

## Integrity

Maintaining social, ethical and organisational norms and adhering to the code of conduct.

## Commitment

Fulfilling organisational goals with full commitment towards our duties and responsibilities.

## Excellence

Setting high performance standards and being accountable for and responsible towards our works.

# **Annual Report**

**2021-2022**

**DESHABANDHU CLUB**

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# Message from the President

**Dear friends, Dear followers, Dear patrons!**

We present to you the integrated annual report, for the year 2021-22. The annual report is a report for the year where a brief idea about the program which have been accomplished and it is 55<sup>th</sup> annual report after the formation of organization Fifty three years, mammoth journey, the organization is completed. I am a part and parcel and confer immense gratification to work with the common people comprising multifarious activities and it's a huge experience by imparting knowledge from the community. In the way of journey; we meet various types of people, intellectuals, Bureaucrats, Activists, Community leaders and community people which have been enriched our journey.

It is extremely important to us to realise projects in harmony with the customs, religion and ideas of the local population, we prefer sustainability. Although this fashionable term has already been embraced by many, and for a thousand times, few people are conscious of how sustainability describes a concrete principle. Sustainable development is, however, only possible when system impose pro- people policies but we have to involve work closely together and have the same goal in mind.

In order to be able to meet the basic needs of the local population, the following questions arise: How can we solve water problems during times of floods? How can farmers be aided to multiply their crop yields? Therefore, we can motivate the local population to actively participate in the design of our projects specially DRR program and to create a future that can make everyone happy in the long term.

Provide us a huge spirits to carry out the organizational activities the organization recall themselves in this stage. The organization has been keeping its tempo 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 State and North – East levels

# About Deshabandhu Club

**Deshabandhu club** set up in 1966 is a premier organization in South Assam. It is a proactive organization that works towards participatory a transparent and accountable governance The core mandate of Deshabandhu Club is to strengthen the capacity of marginalized people aware on issues concerning their need. The principal Task of the organization is project implementation, workshops and seminars in social issues and research works.

**Since the inception**, in the course of implementation of different projects, the organization has been acquired an enormous understanding about communities in general. Deshabandhu Club was 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.

**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.

**The organization** associated with Assam Rural Infrastructure and Agricultural Services Project (ARIASP) of Assam as a partner NGO 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 for three districts of Barak Valley.

**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 in two districts of **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 major public** health problem especially in Barak valley and majority of the disabled resides in rural areas where accessibility, availability and 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.

## **Basic information**

### **Vision**

**To create a society where every citizen avails basic needs and services so as to have a life**

### **Mission Statement**

**Deshabandhu club exists to bring the socio economic development of the citizens particularly to women & children of Assam and would like to provide cost effective, sustainable, peoples' friendly health, education, economic empowerment and rural**

### **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.**

### **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.**

# Aims and Objectives

1. To promote the cause of national integration and communal harmony in a best possible means.
2. To develop scientific temperament among the rural people through seminar, symposium, discussion, folk entertainment and audio visual aid.
3. To make the people aware about population explosion and encourage them to accept small family norms.
4. To provide basic medical relief to families particularly old women and children residing in the remote & inaccessible areas.
5. To help the relevant Governments & Non-Governments agencies in the implementation of various socio-economic and refundable assistance at the grassroot level.
6. To help & rehabilitate all types of disable persons.
7. To create health awareness among the rural people for preventive measures.
8. To uplift the socio economic status of rural masses, the organization may
9. provide training self from any outside agency as per objectives of the
10. Program of that agency and the organization.
11. To be conscious to the rural people on small savings.
12. To promote sports & culture in the rural areas.



## 1. Samarth (Respite Care)

**Samarth Centre has been set up for providing respite and residential care of the specified categories of Persons with Disability (PwD).**



**The objective of Samarth scheme is to provide respite home for orphans or abandoned PwDs, families in crisis and also for Persons with Disabilities (PwD) from BPL & LIG families including destitute with at least one of the four disabilities covered under the National Trust Act. It also aims at creating opportunities for family members to get respite time in order to fulfill other responsibilities.**

## Facilities are available In Samarth Center



### I. Group Home

Group home facility for all age groups is available including provision of basic medical care from professional doctors.

Capacity of a Samarth Centre is 30 including non LIG and non BPL PwDs.

### II. Vocational Activities –

Age specific vocational activities are available in the center. Pre-vocational activities and assistance for training or schooling is also available in the Centre and it is applicable on case to case basis.

### III. Assessment and Evaluation –

Children assess and evaluate by Special Educator in the related field on a regular basis to understand their individual needs and also to monitor the progress of the PwD. The Samarth center maintains a record in the growth

and development charts of the PwD on a regular basis.

## Local level Committee for Legal Guardianship

The organization is the registered organization under national trust and member of the LLC, Cachar and Hailakanadi.

Effective coordination already made with district administration and total five legal guardianship certificates handed over to the PwDs parents.

**Supplementary activity** - Games, music, dance, drama, art-craft etc. are the supplementary program training is given as per their skills and ability.







2. CHILDLINE 1098 is a phone number that spells hope for millions of children across India. It is a 24-hour a day, 365 days a year,

Free, emergency phone service for children in need of aid and assistance. We not only respond to the emergency needs of children but also link them to relevant services for their long-term care and rehabilitation.

*CHILDLINE India Foundation (CIF) is the nodal agency of the Union Ministry of Women and Child Development for setting up, managing and monitoring the CHILDLINE 1098 service all over the country. CIF is the sole agency/body responsible for establishing the CHILDLINE service across the country, monitoring of service delivery and finance, training, research and documentation, creating awareness, advocacy as well as resource generation for the service.*





The organization has been executing **CHILDLINE (1098)** service as a partner organization of Child line foundation since May, 2012 in Silchar and since April and 2018 in Hailakandhi

## Services

1. **Call 1098** – Any child or a concerned adult can dial the CHILDLINE 1098 helpline, which operates night and day.

2. **Connected to CHILDLINE center** – The call is received by the CHILDLINE center where details about the situation are taken from the caller and CHILDLINE units are mobilised if necessary.

3. **Rescue in 60 minutes** – Once CHILDLINE has enough details about child or children in distress, the CHILDLINE team rushes to help the child.



Child marriage intervention



4. **Intervention** – Once CHILDLINE intervenes help the child, it works with multiple stakeholders such as police authorities, child protection boards, social workers and counselors. Children’s consent and participation is an important component of this process from response to intervention.



**Advocacy meeting with the community to reduce the child marriages’**



**5. Rehabilitation and Follow Up** – After the interventions, to ensure the child’s continued safety, CHILDLINE proceeds to find long-term rehabilitation for the child. For this, the CHILDLINE team does constant follow ups with the child – meeting the family or the visiting the shelter if a child has been assigned to stay in one. .

**Call statistics in the following format for the month of April'2021 to March'2022**

**Table -1**

**1st April'2021 to 31st March'2022 , Cachar**

Details of Cases Intervention								
Covid-19	Shelter	Medical	Lost & Found	Registration of entitlements	Referred by another CHILDLINE	Emotional Support & Guidance	Other Intervention	Total
212	23	4	30	3	8	3	71	354

**Table-2**

**Details of Cases Intervention**

Child Marriage	Child Labour	Abuses	Trafficking	Restoration	Beggary	Total
34	21	15	2	3	6	81



Table -3

**Details of Cases Intervention in Hailakandi**

<b>Child Marriage</b>	<b>Child Labour</b>	<b>Abuses</b>	<b>Covid-19</b>	<b>Trafficking</b>	<b>Restoration</b>	<b>Registration of entitlements</b>	<b>Other Intervention</b>	<b>Total</b>
<b>122</b>	34	14	57	21	3	3	40	294

**Some activities accomplished during this tenure –**

- a) Created awareness on Covid Protocol & also distributed Mask and Chocolate to the Children in Braja Kishore Duwarbond High School along with distributed Mask and Chocolate to the Children in Bagbahar Tea Garden
- b) Tied up Childline Se Dosti Week band to all the District Administration and Done Postering campaign from Tarapur to Katigorah town through Car.
- c) Done awareness prog on Child Marriage Collaboration with District Child protection Unit in Shaadin Bazar L.P School. Done awareness programme on Child Marriage collaboration with DSW at different Block
- d) Done awareness Programme along with Art competition and mask distribution in Rajbihari L.P School
- e) Done awareness programme in Kachudarram Police station with police Personnel, Aganwadi, & Asha workers on Child Marriage.
- f) School Management Committee meeting attended by the CHILDLINE staff at Chatla near Dorgakuna.
- g) 2Nos of training given on CHILDLINE,1098 to the Student of Dr. Shyama Prasad Mukherjee College of Education
- h) Done Postering Campaign through car along with mike from Tarapur Shibbari to Kachudarram Bazar.
- i) Distributed ration to the inmates in Nivedita Nari Sangsthan Shelter home
- j) Nodal Coordinator given training to the CHILDLINE Staff of Silchar and Hailakandi on CHILD Marriage.
- k) Done Postering campaign through Car along with Mike from Tarapur to Joypur Police Station.
- l) Done Art Competition in Rabindra Kola Shetra and also distributed Mask & Food packets to the Children.
- m) On 28/12/21 attended one day district level workshop on joint action plan on " prevention of drugs and substance abuse among children and illicit trafficking" is being organized by ASCPCR in collaboration with district administration Cachar
- n) Awareness Program on CHILDLINE 1098 & Child Rights. On 14/03/2022 An awareness Program at 1051 No. Masimpur L.P School. On 15/03/2022 awareness program at Banglaghat Rampur M.E. School. On 22/03/2022 Awareness program at Loharbond G.P. On 23/03/2022 Awareness Program at Sri Durga M.E. School. On 24/03/2022 Awareness program at Lala Basti 25 No. AWC & Sarbadai Lala L.P School. On 25/03/2022 awareness program at Bagbahar G.P, Bagbahar Joynitai M.E.School Awareness programme at 741 No. east naya goan L.P School
- o) On 31st March 2022, Nivedita Nari Sangstha & CHILDLINE Silchar organized an awareness program on Legal Adoption and Child Rights Protection at Sonar Multi-Purpose Hall, Sonai Market. The program was conducted with the collaboration of Block Development Officer of Sonai



### 3. Prevention of new STI & HIV infection among “FSW, MSM&IDUs



The target intervention (TI) project is based on “Prevention of new STI & HIV infection among “FSW & MSM” of district Cachar and Karimgnj District of Assam

The project is funded by Assam State Aids Control Society, Guwahati, Assam & Nation Aids Control Organization (NACO).

#### Objectives

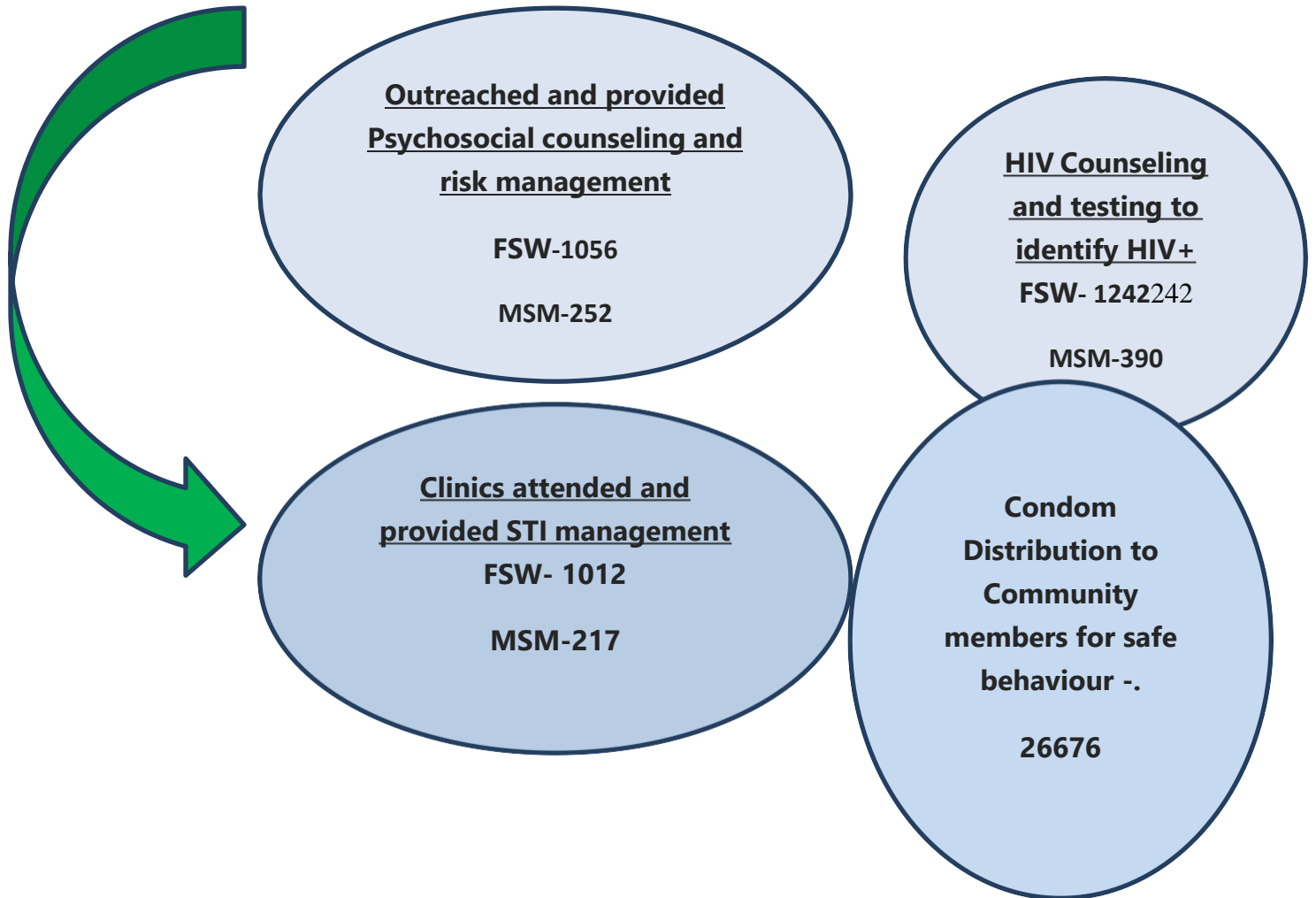
- To sustain and proper **use of condoms**, to mobilize the community for development community participation.
- To reduce the **vulnerability of STI/STD** among high risk group of population and to create an **enabling environment** to mitigate the impact of HIV/AIDS on FSWs , MSMs& IDUs.



The organization is working with near 780 communities from FSW & MSM in Cachar District & 420 communities from FSW & IDUs in Karimganj District.

<b>Services provide to the community</b>	Provide BCC services among FSW's , MSM's and IDU's or safer sexual practice
	Provide quality STI treatment & counseling services to target group
	Provide condoms among FSW's , MSM's & IDU's & lubes for specially MSM and Needles Syringes for IDU's
	Create enabling environment for all stakeholders of TI project
	Develop capacity of peer educator & core group communities to address the risk behavior
	Establish linkages with care & support services for PLHA & TI core group
	Mobilize core group community for ownership development

## Indicator wise Out Come





Health Camp thrice in a week at DIC, the team usually go to brothel area for treatment to the brothel based sex workers

### **HIV Detected during this tenure for FSW's**

Particulars	In No's
Cumulative HIV+ detected since inception	42
Cumulative HIV+(Alive)	18
Cumulative HIV+(Dead including unknown)	24
Cumulative HIV+ linked to ART(Alive)	18
Cumulative HIV+ Not linked to ART(Alive)	1
Cumulative HIV+ On ART(Alive)	11
Cumulative HIV+ Linked to ART But Not On ART(Alive)	6



## HIV Detected during this tenure for MSM's

Particulars	Nos
Cumulative HIV+ detected since inception	14
Cumulative HIV+(Alive)	12
Cumulative HIV+(Dead)	02
Cumulative HIV+ linked to ART(Alive)	06
Cumulative HIV+ Not linked to ART(Alive)	06
Cumulative HIV+ On ART(Alive)	06
Cumulative HIV+ Linked to ART But Not On-ART(Alive)	0

The community people are busy in day time so that Field visits done by project team to night



# Enhancing Hope of life's

## Vihaan Project



**Vihaan” – CSC project supported by Alliance India HIV/AIDS for scaling up care , Support & Treatment services for People Living With HIV/AIDS.**

**Care and Support Centre (CSC) is a national initiative to provide holistic care and support services for PLHIV. CSC expands access to essential services, support treatment, reduces stigma and discrimination and improves the quality of life of PLHIVs**



## Goal of the Project – To improve the survival and quality of life of people living with HIV/AIDS



ART medicine dispensing

Objectives	• Early linkages of PLHIV to Care , Support and Treatment Services
	• Improve Treatment Adherence and Education for PLHIVS
	• Expanded Positive Prevention Activities
	• Improved Social protection and Wellbeing of PLHIVs
	• Strengthened Community System and Reduced stigma and Discrimination

Operation area of the program - South Assam ( Cachar , Hailakandi & Karimganj District )  
.and Dima Haso District

Convergence meeting is going to accomplish the program



Indicators of the program  
In current year



Active PHLIV in the CSC- 2457

PLHIV in Active Care in ARTC-SMCH-2514

PLHIV receiving Peer counselling session on thematic areas in CSC-1481

PLHIV Lost to Follow Up & MIS with definite outcomes -1144



**Support Group Meetings (SGM) are organized to provide support mechanisms for the clients. These meetings provide the members to strengthen their knowledge on HIV-related issues and share their problems and learn how to cope.**

# EMPATHY, EMPOWERMENT, INCLUSION & SUSTAINABILITY FOR RURAL & MARGINALIZED WOMEN:

## “USHA Salai Schools” Switching a Sustainable Future .....

USHA Salai Schools “- means a School for teaching girls and women in the village to sew and these schools are operating and maintained by women entrepreneur by using USHA sewing Machine.

**The primary objective of the Silai School program is to create a livelihood option through sewing and stitching and thereby financially empower a poor woman in a village. The second objective is to revive sewing and stitching as a hobby.**



In a Silai School the learners are taught stitching, embroidery and servicing of sewing machines. The course covers basic women garments (like blouse, suits, petticoat and a local ethnic garment), men garments (pant, shirt) and children garments (bibs, frock, jump suits). On the completion of the course, the learners are awarded with certificates from USHAInternationals.

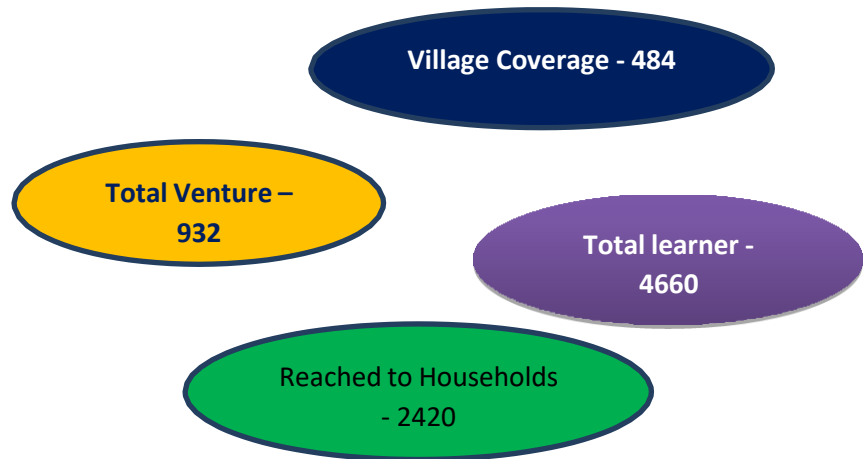




In the 2014, the organization has been started this program in collaboration with USHA International. The status is as follows

Geographical area -

- Barak Valley
- Manipur
- Mizoram
- Tripura



Currently, Silai Schools Running in different location

Place	Type	
	Classical	Satellite
Barak Valley	40	200
Manipur	100	210
Tripura	70	177
Mizoram	30	55
<b>Total</b>	<b>240</b>	<b>640</b>



## DISASTER RISK REDUCTION Program

### Child-Centered flood response and preparedness

#### Activities

Establishment of IAG Coordination Hub for Barak Valley

Coordination orientation meeting cum training at District level

Mobilization and training of volunteers at Revenue Circle level on providing child centric services during humanitarian situations.

Coordination and development of Block and district level recovery plans.

Block level training on Social Sector Recovery for PRIs and Frontline workers

- The organization has been effectively coordinated, mobilized and brought together Civil Society Organizations in all three districts of Barak Valley. District Inter Agency Groups have been formed in all three districts and IAG Coordination Charter has been developed for Cachar..





Total eight IAG meeting cum orientation trainings have been conducted in three Districts. Out of eight IAG meetings, there were two informal, one virtual and five were formal meeting conducted as on date with 168 participants. IAG Charter has been prepared .

## **GO- NGO Coordination meeting cum workshop -**

**A GO- NGO coordination meeting cum workshop was organised jointly by DDMA - Cachar & IAG - Cachar on 19<sup>th</sup> October at Bosco- Tech Institute, Ramnagar, and Silchar.**

The participants were from Academician, Government, NGOs/CSOs, Corporate and total 75 participants were participated in the workshop.

**Agenda of the workshop was Sustainable Recovery & Development through Convergent Action.**

The workshop was inaugurated by **Jubraj Bartakur, ADC Cum CEO, DDMA, and Cachar .**

Welcome address was given by Mr Samim Ahmed, DPO, DDMA, Cachar and special address was given by Dr Sanjib Sikidar, President Deshabandhu Club Cum Chairman, IAG Cachar.

**The keynote address was given by Mukand Upadhay, State. Consultant, DRR&CC, UNICEF- Assam.**

A total 7 government departments have given **PPT presentations on Convergence Planning with Governmental Led Sectorial Interventions.** The departments are Health, Education, Social welfare, Department of Agriculture, ASLRM, and DCPU, PHED and a healthy interaction between GO- NGO was taken place.

In the workshop, Ms Jakulin Lipi Saikia, TC, DRR, ASDMA has given PPT on an overview of Inter - Agency group and a PPT presentation on the subject of GO- NGO coordination including state perspective was given by Mukund Upadhay State Consultant DRR&CC, UNICEF.





Mr Joseph Sahyam , Addln Emergency officer , CASA, Chennai , Tamilnadu has given a ppt on sharing experience of IAG Tamilnadu and Mr Debajit Gupta , Coordinator , IAG- Cachar has given an introduction of IAG Cachar and its functioning .

In academican part, Professor Dr AL.Ghose, Professor, Dr S.B. Dutta, and Professor, Dr. Parthankor Choudhury, all are hails from Assam University, participated in panel discussion, which has given extraordinary significance to the workshop and it was the first time such a talk has been taken place where different level of stakeholders participated for making resilient Cachar



After a day-long discussion, the workshop agreed upon the importance of CFRC for resilient Cachar.It was effective workshop and planned to construct a setting system to install the CFRCs in



**GPs of the District and it was plotted for setting up an advisory committee for establishing coordination among GO – NGO for smooth operational of IAG – Cachar ..**



As on date, 300 community volunteers including Apada Mitra, Pratirodhi Bandhu, NYKS and other local volunteers have been trained. It is important that the willingness and availability of these volunteers is collected and a consolidated database in excel is shared with DDMA for future use.







## Volunteers training on disaster preparedness

- Deshabandhu Club has been effectively coordinating and supporting social sector recovery work in Cachar and the block coordinators have been able to coordinate, follow up, verify data related to losses and impacts collected by the departments.



Meeting with community people, PRI and SHGs for recovery planning



Sectorial meeting with community members

101 Frontline workers have also been trained on the tools and process of social sector recovery

### **Building disaster resilience through enhancing equitable access to information through community-centric Resource:**

During preparing recovery planning, it has been observed that learnt that there is a require to provide assistance to the community for letting to know and accessing information and how to communication that can help them recover at a more accelerated and pace and in a sustainable manner.

There is also the need to help the community recover in a way that enhances their coping mechanisms and builds their resilience to future disasters. Information will play a key role in helping the communities build back their lives in a more resilient manner.

### **Coordination Meeting on CFRC with different stakeholders on CFRC at DC office**

An effective coordination meeting with the entire line department was held on 9th September at DC conference Hall. Ms Annie George, TC - UNICEF Assam has given PPT presentation on CFRC and its justification for disaster preparedness for next wave. Deputy Commissioner was presided over the meeting. ADC Cum CEO, DDMA, Cachar , Mr Samim Ahmed DPO, DDMA and Debajit Gupta , Coordinator , IAG took part in the discussion . After threadbare discussion, DC- Cachar has been approved the concept note and asked the entire concerned officer for cooperation.



### **Coordination meeting with Circle Officers and BDOs for executing the CFRC:**

Circle Officers of two Revenue Circle and BDOs were not influenced about CFRC even they were saw disinterestedness on CFRC and being a overlapping as well as overloaded. They were hesitated to execute in their block and circle. But the project team frequently visited and advocated to the concerned officers with facts and figure and at last , they agreed that they have no sufficient data and which have been faced in last disaster .They have no idea about how many boats are their revenue villages / GPs . Data collection tools have been shared to the COs and BDOs. BDOs have confessed that they have no actual information about the village and it is verified that due to lack of information the victims have been deprived from social entitlement schemes as well as other benefits. Finally it was decided, three CFRC will open in three in three worst affected GPs of three developmental blocks. After concrete discussion, Bihara GP in Kalain Dev. Harinagar GP in Katigorah and Borkhola GP in Borkhola were identified with prior consultation with BDOs of respective area.

### **Capacity building cum Coordination meeting with PRIs, Local CBOs and VLCDMC of Bihara , Harinagar and Borkhola GP.**

Finally, it was intended a pilot study and initially CFRC will open at Bihara , Harinagar and Borkhola GP of three Dev Block and it was taken decision on prior consultation with DDMA. According prepared planning was done. As per planning, one day orientation cum coordination was conducted with PRIs members, Local CBOs and VLCDMC in respective GPs. Agenda was short idea about CFRC and how setting up CFRC in the GPs . On 20<sup>th</sup> September, 21<sup>st</sup> September and 23<sup>rd</sup> September capacity building cum meeting was conducted at Borkhola , Harinagar and Bihara and total 47 people were participated and identified one revenue village in each GPs for data collection and PRA . Moreover, three local CBOs also participated in the meeting to accomplish the data collection and PRA.

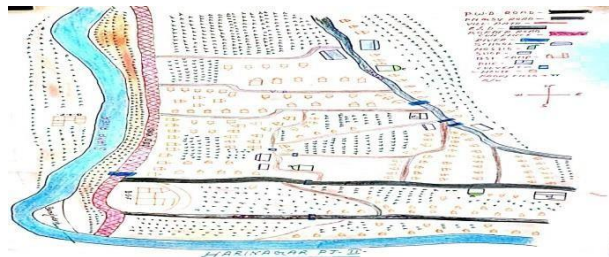
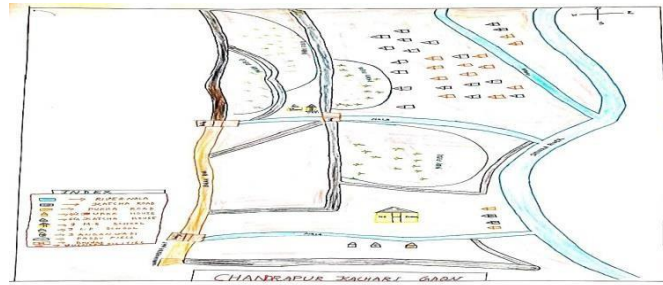
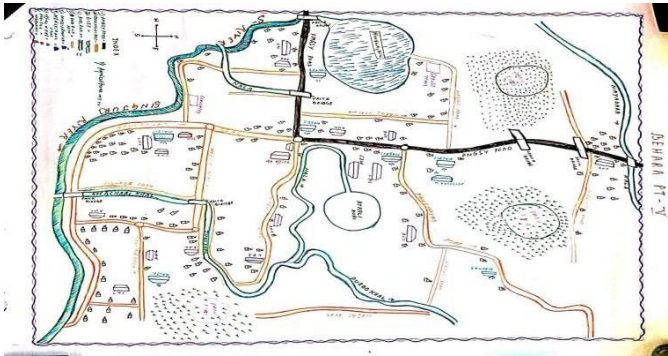
### **Process for Setting up CFRC in Harinagar, Bihara , Rajatilla GP and Borkhola GPs**

Information collection is the primary objective of the CFRC therefore data collection is necessary for concrete information and it was prepared a data tools **in Google form** so that volunteer can easily collect the data from the revenue villages. Resource mapping was also done, which is the important tool of PRA exercise.

**Data Collection** – It was decided to open CFRC in three GPs of three Dev. blocks and it was also decided first all need to collect from one revenue village from one GP so that CFRC can open in the month of October and process went on accordingly, Kacharigoan and Chandra Nathpur revenue village from Borkhola GP, Bihara Part-V from Bihara GP and Harinagar Part-2 from Harinagar GP were identified and data was collected by the volunteers from NGOs. It was the great involvement of NGO volunteer to accomplish the efforts.



**Resource vulnerability Mapping** – Resource mapping was conducted in three revenue villages of three GPs and it is effective participation of the community members



**Inauguration program of CFRC** - On 18<sup>th</sup> October / 22, it was impressive involvement of the community and effective coordination with the Government agencies and NGOs. Four CFRC was inaugurated in four different area of the District Harinagar , Borkhola , Rajatilla and Bihara which was historic day .

In presence of, ADC Cum CEE , DDMA , Technical consultants, ASDMA , Circle Officer ( Silchar Sadar ) , BDO Borkhola , Mukund Upadhyay ,State Consultant , DRR & CC, UNICEF DPO, DDMA and Dr Sanjib Sikdar ,President Deshabandhu Club , ZPM , South Borkhola , PRI Members , local CBOs and community people , **the CFRC was inaugurated by Hon'ble Deputy Commissioner Rohon Kr Jha.**

Other three CFRC was inaugurated by Circle Officer, Katigorah and BDO, Kalaine , the involvement of PRI and community member were was remarkable , the PRI involvement in the whole process was magnificent . The



spaces were provided for CFRCs by Panchayets except Harinagar GP, till now; no office set up is available in Harinagar GP. A CBO was provided a room for CFRC at Harinagar GP.

**Key observations** – As , it was pointed , due to lack of information , the community people has been difficulties in disaster , due to absence proper data the people have been deprived from government assistance therefore proper information is required into the government level also moreover ,Community based disaster management plans is not available and the VLCDMC is not functional .

CFRC can play vital role and activation of VLDMCs are needed. Involvements of VLCDMC are required into the CFRC. CFRC can play central system of disaster preparedness and will involve the development of awareness among the population on the general aspects of disaster and on how to behave in the face of a future disaster. All the information related to disaster need to available into the CFRC. It is seen that due to lack of information, the flood victim people did not get compensation for his cattle death. Preparedness phase also deals with the preparations which are needed on individual, community, authoritative level when a



disaster occurrence cannot be avoided and a disaster is sure to happen. Community based disaster management plans must be formed with the help of /PRIs/KRPs/local NGOs and it can be done through CFRC.

**Concerns** - Data analysis is needed to gain clear picture of the area / GP / Village. Understanding the current data comparing to past data that the gap will be identified and gain up to date picture which will be helped in planning process and minimize the stress among the communities. As mentioned by the BDO of Katigorah Dev. Block that accurate damage data is not available in the office and it is quite similar in other Dev Block. Data Collection is the primary work for the CFRC.

A data collection tool has been formulated through Google form initially; voluntarily data has been collected by the volunteers that are not adequate. In absence of data, Formation of CFRC in entire three blocks is quite impossible in stipulated time period. Data collection is going on in four GPs where CFRC has been formulated. Capacity building to the Frontline workers and PRI members are needed for data collection and a concrete planning need to formulate from DDMA.



### **Discussion with UNICEF –India high-level delegation on CFRC , Recovery Planning ,**

#### **Follow up actions –**

Man power is needed to formulate the CFRC in entire District. Involvement of the ASRLM is most useful for the data collection. As per report given by Jeevika Sakhi they collected data through SHGs and quite comparable to CFRC.

## Deshabandhu Vidyaniketan

**keeping** the students' rush in mind , and to impart education for , the school by giving nomenclature **Deshabandhu Vidyaniketan** was started by the organization in 1994 and it is running successfully with offering up to class X . The result of the school is quite satisfactory . The parents and localities surrounded by the school are always keen interested to send their child into the school . Every year , two children from BPL category and one differently Abled gets admission free in the School .



**Other than , in house class , other co-curriculum activities are introducing into school , Rabindra Jayanti , Nazrul Jayanti , Debate Competition are conducted in every year .**

## Legal Aid Cell ( a free legal services on domestic violence )

This wing , mainly work to reduce the domestic violence in Bihara Bazar and adjacent area . Violence against women a major social problem . It is universal , occurring in all cultures . It refers to violent acts that are primarily committed against women , affecting them physically , psychologically sexually and economically .

Such violence includes physical psychological and sexual attacks and threat of such acts are meant to exercise control over the victim.

The Legal Aid Cell was started in 1994 at organization's head office premises and total 200 cases are disposed in till date .

A number of Advocacy and sensitizations have been done on DV cases by the cell and a few impact is seen in the community level

### LIST OF EXECUTIVE BODY

Sl. No.	NAME OF THE MEMBER	DESIGNATION	GENDER	PROFESSION
1	Dr. Sanjib Sikidar	President	Male	Medical Practitioner
2	Ashok Deb Roy	Vice- President	Male	Retd. Employee
3	Ajit Roy Choudhury	Secretary	Male	Ex-serviceman
4	Kanailal Bhattacharjee	Organizing 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	Abhijit Chakaraborty	Jt. Secretary	Male	Social Service
9	Sri Subir Das	Member	Male	Service
10	Sambit Sikidar	Member	Male	Business
12	Nibhas Das	Member	Male	Social Work
13	Manik Malakar	Member	Male	Social Work
14	Pradip Goswami	Member	Male	Service
15	Bijoy Bhusan Das	Member	Male	Service
16	Dr. Bijit Goswami	Member	Male	Service
17	Smt. Kamana Devi	Member	Male	Service
18	Miss Lilaboti Das	Member	Male	Service
19	Biplab kar Choudhury	Member	Male	Service
20	Utpal Kanti Nath	Member	Male	Businessman