

ANNUAL REPORT 2009-2010



Deshabandhu Club

DESHABANDHU CLUB : A North East based Ngo started it's journey in 1966. Previously it was known as Balak Samiti, From the humble beginning as a football Club, subsequently the wings of its activities were spread as the NGO started working towards emancipation of the Social- economics problems of the have not with special emphasis of minority, Women, Child & other vulnerable section of the society. Presently the Ngo have been working in the five district of Assam viz, Cachar, Karimganj, Hailakandi, N.C.Hills & Karbi Anglong

LEGAL STATUS : Registered under SR Act XXI of 1860, Foreign Contribution regulation Act, 1976, PWD Act 1995, SECTION 12 (A) & 80 (G) of TI Act. 1961.

DECISION MAKERS : The Executive body, elected by the general body annually is responsible for all sort of organization planning, execution, assessment, monitoring of all programmes & activities.

DEVELOPMENT : OUR PERCEPTION : We define "Development" as a process of movement from dehumanized state of existence characterized by poverty, deprivation and exploitation to a human state of being, where all live with self- respect, dignity and pride. We believe in the concept of "working with the people instead of working for the people".

OUR 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.

OUR MISSION : "Deshabandhu Club exists to bring the Socio-economic development of the citizens particularly to women & children of Assam by 2020 A.D. would like to provide cost effective, sustainable people's friendly health, education, economic empowerment and rural entrepreneurship services through people's participation"

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2009-2010

DESHABANDHU CLUB

BEHARA BAZAR, CACHAR, ASSAM

91-3841-259503

email:deshabandhuclub@rediffmail.com

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

OUR BRANCH OFFICES

<p><u>City office</u></p> <p>Sibbari Rd,shahid bazaar Tarapur , Silchar,cachar,assam</p>	<p><u>Extension office</u></p> <p>Ramnagar-Banglaghat Near Kalyani Hospital,Silchar-26 Cachar,Assam</p>
<p><u>Community care centre (Anubhuti)</u></p> <p>Sibbari Road,Tarapur,silchar Telefax-03842-268795, 9435522614</p>	<p><u>Deshabandhu Club Common Facility Centre</u></p> <p>Behara Bazar, Cachar Assam ISO 9001:2000 & ISO 14001:2004 Certified Certification No. IND96644/A & IND96644/B</p>

LIST OF EXECUTIVE BODY

SL NO	NAME OF MEMBER	DESIGNATION	PROFESSION
1.	Dr. Sanjib Sikidar	President	Medical practitioner
2.	Ajit Roychoudhury	Vice president	Service
3.	Kali Kumar Saha	Secretary	Social worker
4.	Kanailal Bhattacharjee	Jt. secretary	service
5.	Sajal Kumar Deb	Jt. Secretary	social worker
6.	Rabindra Narayan Acharjee	Jt. secretary	Social worker
7.	Jayanta Roy Choudhury	Jt Secretary	Service
8.	Bimal Chandra Dey	Jt Secretary	Service
9.	Narayan Bhattacharjee	Cultural secretary	Retd.Employee
10.	Sri Subir Das	Game secretary	Service
11.	Sambit Sikidar	Member	Business
12.	Ashok DebRoy	Member	Retd employee
13.	Abhijit Chakrabarty	Member	Social service
14.	samar Chakrabarty	Member	Business
15.	Nibhas Das	Member	Social worker
16.	Manik Malakar	Member	Service
17.	Pradip Goswami	Member	Service
18.	Bijoy Bhushan Das	Member	Service
20.	Dr. Bijit Goswami	Member	Service
21.	Miss Lilaboti Das	Member	Social worker

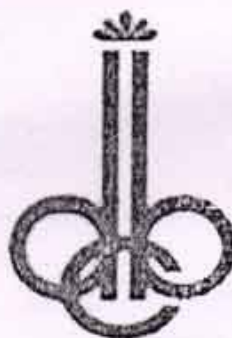
OUR PARTNERS

S.L.No	Name of agency
1	Ministry of Health & family Welfare, GOI
2	D.C(Handicrafts),Ministry of Textiles, GOI
3	Deptt. of Health Services, Govt of Assam
4	PHED, Govt of Assam
5	Assam State AIDS control society
6	Assam State Social welfare Board
7	National Rural Health Mission
8	Rasthriya Mahila Kosh
9	Central Social welfare Board
10	UNICEF
11	Indo Global Social Service Society
12	NABARD
13	CAPART
14	SIDBI
15	NEDFI
16	National Trust
17	Action AID India
18	Deptt of social welfare, GOA
19	Deptt of Agriculture, GOA
20	Deptt of Fishery, GOA
21	Deptt of A.H & vety, GOA
22	Deptt of Dairy development, GOA
23	Rasthriya Gramin Vikash Nidhi
24	Khadi & Village Industries Commission
25	Entrepreneuership Development institute of India, Ahmedabad
26	District Legal AID Cell, Cachar
27	National centre For Advocacy studies, Pune
28	ARIAS Society, Assam, Guwahati
29	Nehru Yuva Kendra Sangathan
30	Assam Gramin Vikash Bank

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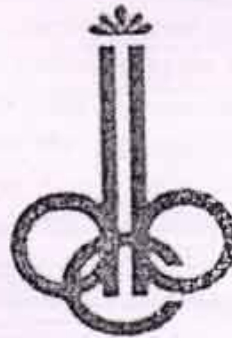
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FROM PRESIDENT' DESK

Deshabandhu Club has completed another year of its journey. We started as Balak Samiti in 1966 at Behara Bazar, Cachar. During the years we have expanded our wings throughout Barak valley by involving in diversified areas of socioeconomic activity. In 2009 the organization completed MNGO RCH II project funded by NRHM, Assam under Ministry of Health & family Welfare, GOI. The organization got approval to continue Targeted Intervention Programme up to 2012 in the vulnerable Cachar District to make intervention for halting the HIV/AIDS pandemic. As part of our commitment to improve the socio economic condition of poor & marginalized section of the society Deshabandhu Micro Finance Institution started formation of Joint Liability Group in Cachar district of Assam to give micro credit to the beneficiaries on flexible procedure under condition of certain simple rules & regulations which has helped good number of families so far. The other measures aimed at creating opportunities for economic self reliance are on going under donor support from leading financial agencies of GOI & Govt of Assam. Rural Industries Service Centre was made at Behara under KVIC financial assistance for creating employment avenues to trained people specially women. A Care, support & treatment facility for HIV/AIDS has been running for 2 years at Tarapur, Silchar bringing some hope in the lives of people living with a life threatening Virus .To keep in pace with the expectation of millennium development goal the organization has been ardently working for economic security, maternal & child health, HIV AIDS & tuberculosis, gender rights etc. A centre for children born with disability is operational since 2003 for mainstreaming the children born with special ability in the society by establishing their human right. The task was never easy, during the initial years the organization has to go through several ups & downs in terms of financial reasons but gradually leading national & international funding agencies have come forward & we are getting technical as well as financial support from them to sustain our effort. The Organization receives immense cooperation from all section of people in the society & the acceptance as well as participation of people that make our work easier. I hereby like to give by heartiest gratitude to the other NGOs of Barak Valley who remain connected with us in terms of activity or other support to the Organizations initiatives as well as Ministries, donor agencies & every one who came forward to support the cause of organization in carrying out development activities throughout this part of Assam & I feel still miles to go.....

Dr. Sanjib Sikidar

President

AIMS & OBJECTIVES

- 1) Promotion of national & communal harmony amongst citizens
- 2) Eradication of illiteracy through formal & non formal way of imparting education in the backward areas with special emphasis on education
- 3) To provide basic medical service to the aged people, women & children in general and with special emphasis on reproductive health of women
- 4) To aware people about population explosion and the life killing diseases and to encourage them to adopt small family norms & means to take preventive measures respectively
- 5) to organize training programme for the educated unemployed rural youths & women aiming to create employment opportunities to keep them away from distress
- 6) To aware rural people about importance of small savings & for that promotion of Self Help Groups aiming economic upliftment of the rural masses.
- 7) To create awareness about increasing environmental hazard caused by deforestation and to encourage for environment protection & afforestation to make the environment pollution free
- 8) To help rural people by providing technical help, making facilities for developing their handicraft potentialities & thus to encourage the traditional skills
- 9) To promote rural sports & culture of the region
- 10) To help & rehabilitate mentally disabled and physically handicapped persons and to work for elimination of child labour.
- 11) To develop scientific temperament among the rural people by organizing seminar, symposium, discussion, folk entertainment with audio visual aids
- 12) To help the Govt & other Non Government Agencies in the implementation of various socio economic programmes at the grass root level.
- 13) Deshabandhu Club will function as Non Profit making organization and if surplus generated from any source then it will be utilized for meeting the objectives of the organization and shall not be distributed among the members.

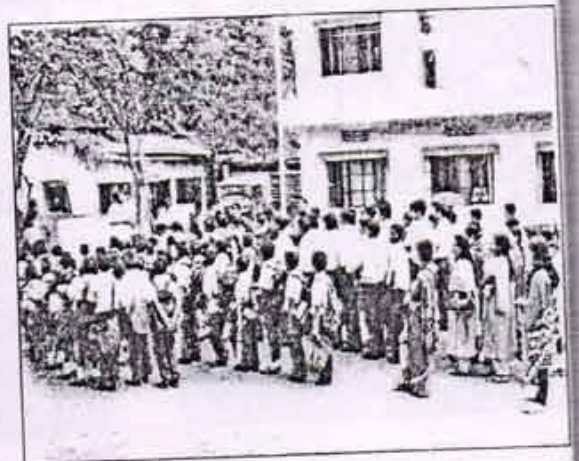
EDUCATION

Education in the largest sense is act or experience that has a formative effect on the mind, character & functional ability of an individual. True education not only shapes the life of an individual rather it influences society at large. Education for all is yet a challenge in the developing countries & India itself has nearly 35% illiterate population as per 2001 Census report. The Govt of India had taken up several programmes like adult education, Non Formal Education & Presently Flagship programme Sarva Siksha Aviyan has been going on. Schemes like Mid Day Meal

programme has been taken up with an aim to bring more children to the school & uphold their nutritional status. The very motive of Mid Day Meal scheme is to minimize school dropouts. Infrastructure Development & additional teachers on contract has been appointed to balance student: teacher ratio under Sarva Siksha Aviyan. The Effort of the Govt can be successful if community participation is more & more & implementation will make the difference with united effort. Several NGOs are taking care of the grave problem of illiteracy in India at each level. As we are all concerned that the picture of Rural Literacy rate is very dismal in India due to various Socio-economic factors. The NGO started a formal School in the year 1994 to maximize enrollment in the education & providing quality education to children

DESHABANDHU VIDYANIKETAN

The School was started in 1994 with 8 students. Presently the enrollment is total 202 Octogenerian educationist of the area is teachers & 1 teachers & 1 helper are working. In the year 2010 all passed out of total 11 appeared in the H.S.L.C Exam. The pass rate was 100%. Total 3 passed with 2nd Division & remaining 8 with 3rd Division.



HEALTH

Health is a core indicator for development in a country. It contributes to the material, intellectual & spiritual progress of a nation. World Health Organization views that mere physical wellbeing does not mean health of an individual rather Health means a complete wellbeing of body & mind. India like many other developing countries is far way to enable health for all. Poverty, illiteracy & various other socio-economic & cultural factors are posing challenges to make health for all a reality. Indian women & Children are especially vulnerable to poor health & nutrition. In India women dies of child birth or related complication &Of children can't see their 1st birthday. The organization started functioning in the area of community health in the year 1992 in few selected Gaon Panchayats under kalian development block of Cachar district to assess people's knowledge of health through statistical figures. The baseline survey in those areas brought findings like poor maternal mortality rate, infant mortality rate,

crude birth rate & poor immunization coverage. The organization started Deshabandhu family welfare hospital with an aim to provide diagnostic & counseling service to the women. the hospital provide health care service to women, children, old age people & also mentally ill patients. The hospital provides free medicine to patients in few cases. Dr. Sanjib Sikidar, President of the organization has been rendering service voluntarily to the patients since the inception of the health care facility. Beside that Deshabandhu Club has been playing a key role in PPI (pulse polio immunization programme) since 1995 and also working for the cause of fighting blindness along with District blindness control Society, Cachar; Lions Club, Silchar & Silchar medical College & Hospital. A picture of health activities carried out during the 2009-2010 is mentioned below.



REPRODUCTIVE & CHILD HEALTH PROGRAMME

In a country of teeming billions development always remain a challenge. The burning challenge of population in the country stopped India to be an economic superpower. The Govt of India's effort in checking population are seen in various programmes taken out by the Govt through programmes like family planning, child survival & safe motherhood, Universal immunization programme but nothing could be done as per with expectation.

The burgeoning problem of population in the developing countries of the world always remained a matter of serious concern throughout the globe. The world leaders held a summit in 1994 at Cairo to start a comprehensive programme called Reproductive & child health which underlies that 'People have the ability to reduce & regulate their fertility. Women should be able to go through pregnancy & child birth safely, the outcome of pregnancy is successful in terms of maternal & infant survival & wellbeing & couples are able to have sexual relation free of

fear of pregnancy & contacting diseases with a view to enhance the quality of reproductive life of the population & helping the country to achieve population stabilization. It is a target free bottom up approach. The programme aims at providing a client need based, client centered, demand driven & high quality integrated RCH service.

The Reproductive and Child Health Programme was launched in October 1997 incorporating new approach to population and development issues. The programme integrated and strengthened the services/interventions under the Child Survival and Safe Motherhood Programme and Family Planning Services and added to the basket of services, new areas on Reproductive Tract/Sexually Transmitted infections (RTI/STI). The RCH Programme is the umbrella programme of the department within whose framework and approaches all the services being



provided/arranged by Department of Family Welfare are to be planned, and delivered

Understanding the importance of NGO involvement the Ministry of Health & Family Welfare, GOI selected reputed NGOs to work as MNGO to implement RCH programme. The MNGOs did the capacity building of Field NGOs & was assigned responsibility to success the programme. Deshabandhu Club was assigned MNGO status to implement RCH II project in the four districts of Assam namely Cachar, Karimganj & Hailakandi districts. The MNGO successfully completed the programme in 2003.

The RCH phase II started on the basis of lessons learnt from RCH I while forming a part of the Tenth plan. The main objectives of RCH-II are:

- The immediate objective, as envisioned in the NPP 2000, is to address unmet needs of

contraception, health care infrastructure (especially in the EAG states) Health personnel and provide integrated service delivery for basic reproductive and child health care.

- The medium term objective, as outlined in the NPP 2000, is to bring the total fertility rate to the replacement level by 2010 through coordinated implementation of inter sectoral linkages.

In 2005 the Govt of India launched a flagship programme called National Rural health Mission aiming to enable the rural population to access quality health care and the mega programmes like RCH II came under NRHM

NRHM stressed on community mobilization & Community ownership to make the mega programme a grand success & intersect oral convergence was also given a priority to helping India keeping at pace with the expectation set in the millennium development goals. Deshabandhu Club was again selected as MNGO to work in the two districts of Barak valley namely Cachar & Hailakandi in the year 2006. The MNGO selected 3 FNGOs in each district to implement the programme. The GOI & NGO coordination was highly expected in the RCH II programme. MNGO completed the project in the year 2009. Here are the findings of the End Line survey of RCH II programme of the areas of RCH intervention:

MNGO PERFORMANCE IN THE DISTRICT AT THE END OF RCH II PROGRAMME(Cachar)

In the light of the objectives set by MNGO given herein the findings of End Line survey:

- **Objective-1**(Increasing the rate of children(0-1)year receiving complete immunization from 38.23% to 50% by project ending) & End Line survey showing the rate is 76.74%

- **Objective 2**(Increasing Complete ANC coverage from **2.10% to 40%** by the end of project)& End Line survey showing the rate is **68.33%**
- **Objective 3** (Increasing institutional delivery from **8.44% to 25%** by the end of project whereas End Line survey showing the rate is **44.67%**
- **Objective 4**(Increasing the deliveries by SBA from **9.74% to 20%**) as per End Line survey the rate is **46.75%**
- **Objective 5**(Increasing the percentage of couples using modern FP methods from **26.68% to 35%** by the end of the project)and End Line survey showing the rate is **97.85%**
- **Objective 6**(Reducing unmet need for spacing from baseline **9.79% to 7%** by the end of project) whereas End Line status is **6.41%**
- **Objective 7**(Reducing unmet need for limiting from baseline **24.85% to 21%** by the end of project)and the End Line survey showing it is **22.87%**

MNGO PERFORMANCE IN THE DISTRICT AT THE END OF RCH II

PROGRAMME(Hailakandi)

In the light of the objectives set by MNGO given herein the findings of End Line survey:

- **Objective-1**(Increasing the rate of children(0-1)year receiving complete immunization from **00% to 40%** by project ending) & End Line survey showing the rate is **94.44%**
- **Objective 2**(Increasing Complete ANC coverage from **9.09% to 40%** by the end of project)& End Line survey showing the rate is **59.34%**
- **Objective 3**:(Increasing institutional delivery from **8.33% to 25%** by the end of project)whereas End Line survey showing the rate is **17.48%**

- Objective 4 (Increasing the deliveries by SBA from 14.10% to 25%) as per End survey the rate is 25.87%
- Objective 5 (Increasing the percentage of couples using modern FP methods 26.68% to 35% by the end of the project)and End Line survey showing the rate is 8
- Objective 6 (Reducing unmet need for spacing from baseline 9.51% to 8% by th of project) whereas End Line status is 7.4 8%
- Objective 7 (Reducing unmet need for limiting from baseline 25.29% to 23% by th of project)and the End Line survey showing it is 17.91%

HIV/AIDS PROGRAMME

HIV/AIDS has been emerging as an international burden .The goal 6 of the millennium development goal is to combat HIV/AIDS, malaria & other diseases. The first HIV positive case was detected in 1981 among homosexual in America. Around 40.3 million people globally are victims of the dreaded HIV virus (UN Report). The new UN report also indicates, however, that overall trends in HIV transmission are still increasing, and that far greater HIV prevention efforts are needed to slow the epidemic. Currently, India spends about 5% of its health budget on HIV and AIDS. However, the World Bank has warned that

India will have to boost up prevention efforts to avoid spending more of its health budget in future. According to the World Bank's report, by India will have to spend 7% of its health budget on AIDS if the rising tide of the AIDS epidemic in Delhi, Mumbai, the north and the north east stopped.

It is clear that HIV and AIDS will have a devastating effect on the lives of millions of Indians for many years to come. It is essential that effective action is taken to minimize this impact.

Combating the virus is not easy for the country as it has several socio, cultural & economic challenges. The trend of HIV have been found in vulnerable population as commercial sex workers, IDUs, MSM, truckers & migrant workers. Presently, the country is having

numbers of 2.3 million HIV positive individuals. In a country like India where a 1% increase of HIV positive means the spread of disease over half a million. UN estimate reveals that the virus is spreading among

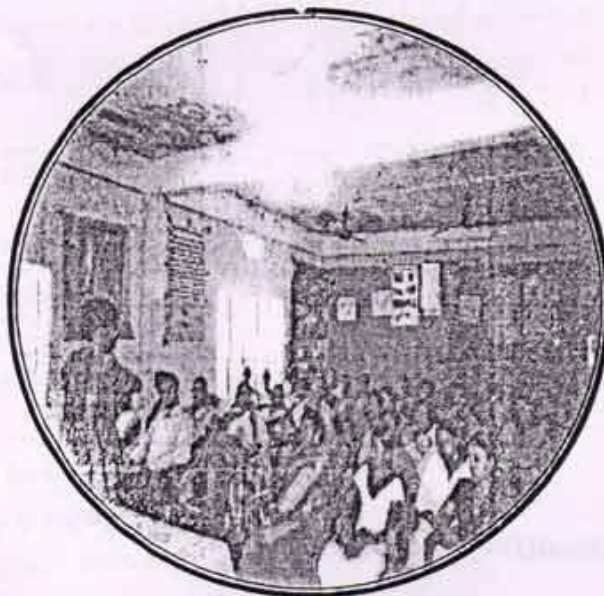
sex workers. HIV sentinel surveillance 2007 states that there is rising trend in North East. National AIDS Control Organization, the apex body working for the cause of HIV AIDS has been funding CST & intervention programmes to NGOs in India to reduce spread of new infections.

TARGETED INTERVENTION PROGRAMME

The Targeted intervention project aims to interrupt HIV transmission among highly vulnerable population namely commercial sex worker, injection drug users, and men having sex with men, truckers & migrant workers. Saturation of all high risk groups & development of 50% TI into CBO is targeted under NACP phase III.

The organization has been implementing TI programme in Cachar district since 2007 under funding support of the Assam State

AIDS Control society. In 2007 the core group was truckers. Around 840 Nos were counseled, 130 Nos commercial sex workers & 265nos of people in rural & slum areas were counseled, 10 Nos of awareness programme were organized in various pockets of the district. In 2008 Female sex workers were the core groups in the year 2008. Preventing general population from the infection by generating awareness among FSWs & other secondary stakeholders is the aim of TI. The TI programme for FSW is under continuation.



A REPORT OF TI ACTIVITY IS GIVEN IN THE FOLLOWING TABLE:

TI Activity	MONTHWISE PERFORMANCE										
	May, 09	June, 09	July, 09	Aug, 09	Sept, 09	Oct, 09	Nov, 09	Dec 09	Jan 10	Feb, 10	March, 10
<i>New community Member</i>	118	79	51	57	47	20	29	19	24	32	17
<i>New registration</i>	118	79	51	57	47	20	29	19	24	32	17
<i>Regular contact</i>	296	383	366	431	479	497	447	520	502	461	542
<i>STI treatment(syndromic management)</i>	100	100	100	100	103	103	86	101	105	88	115
<i>ICTC referrals</i>	40	41	45	52	42	42	55	52	54	2	62
<i>ICTC actual visit</i>	28	30	30	29	32	25	32	32	34	34	57
<i>Condom distribution</i>	10,000	13400	22550	40500	52500	75000	100000	254000	224000	122000	325000
<i>No of hot spot meeting</i>	10	10	10	10	15	12	11	10	10	10	10
<i>Drop in centre meeting</i>	1	1	1	1	1	1	1	1	1	1	1
<i>Advocacy & network meeting</i>	0	0	0	4	2	13	10	5	7	3	6
<i>Community events</i>	0	0	0	0	01*		0	0	0	0	01*
<i>No of SHG group</i>	5	5	5	5	5	6	6	6	6	7	7
<i>No of Health camps</i>	0	0	2	1	1	1	1	1	0	0	0

(Community events 1*-Blood Donation Campaign-1st Oct, 2009, 1**-World Health Day)

CARE, SUPPORT & TREATMENT (COMMUNITY CARE CENTRE)

The HIV positive people finally found a new hope of life in the Anti retroviral drugs. The drug has the capacity to fight with the life threatening virus & slow down the progression of viral load in the body of a HIV positive person. Now with ART a person having the virus can live his life better as it will enhance the quality of his life. Adherence & drug tolerance are the two crucial things to be monitored in a patient having the medicine. CD4 test on timely basis is also very significant to assess the viral load in a patient & his or her assessment for ART. To enable better adherence rate in the On ART patients monitoring for adherence to drugs & tolerance is crucial that requires counseling & support. CCC is a new development under NACP phase III main emphasis is to monitor

patient newly on ART & providing counseling on adherence, treatment, positive prevention & identifying support mechanism for the person living with HIV/AIDS. Routine monitoring of CD4 in patients is also crucial specially Pre ART patients to assess his/her necessity to have ART. Preventing new infections is also another important objective of CCC. Advocacy against stigma & discrimination, bringing positive people under care & support team & a holistic effort of care, support & treatment are the important aspects of CCC. The organization under the funding support of Assam State AIDS Control society started CCC in the name of Anubhuti in July, 2008 at Sibbari Road, Silchar in the district of Cachar. CCC is also assigned a DoTS centre by District TB cell, Cachar to provide DoTs to patients of adjoining area. Here is a report of the functioning of CCC as given below:

STATUS REPORT (April 2009-March 2010)

Total enrolled(New registration)	81
No of out patients(Repeat visit)	251
No of In patients(repeat admissions)	229
No of PLHAs with Tuberculosis completed DOTs	11
No of referrals made by CCC to other Centres	37
No of positive pregnant enrolled	2
No of positive pregnant delivered child at institution	2(at Silchar Medical college Hospital escorted by CCC)
No of home visits conducted	37

CANDLE LIGHT MEMORIAL DAY OBSERVED AT ANUBHUTI

On May 16th, 2010 Anubhuti observed candle light memorial day at CCC premises. The international AIDS Candlelight Memorial, a program of the Global Health Council, is one of the oldest and largest grassroots mobilization campaigns for HIV/AIDS awareness in the world. Candlelight Memorial takes place every third Sunday in May and is led by a coalition of some 1,200 community organizations in 115 countries hosting local memorials that honor the lost and raise social consciousness about the disease. The Candlelight is also much more than just a memorial it provides opportunities for leadership development, policy advocacy, partnerships, and improvement of community mobilization skills. The Candlelight continues to serve as an important intervention for global solidarity, breaking down barriers, and giving hope to new generation.

Saluting the people fighting & living with the virus & those who lost in AIDs was the theme of the candle light day. The patients, management, ART Centre officials & staffs together make a human chain & lighted candle. The Vice President in his address stressed upon more involvement of NGOs in the movement to fight out AIDS & save future generation. Dr. Joydip Roy SMO, ART Centre, Silchar Medical College stressed on prevention against the disease & discussed how a HIV positive can live better with Antiretroviral drugs. He stressed upon mass awareness to sensitize youngsters to be free of the Virus. An interactive session was also took place at the Centre.



ART has done wonder for me I am better now (A Positive Experience)

X understands he has to live with HIV with life long ART but he can't think of missing a single dose. He believes the medicine is crucial for his life with HIV. A man in late 30s. He came to Anubhuti with his young

positive wife & a minor girl child. The dreaded virus made him sick for several months. The day he first attended CCC he was a person worried, confused & frustrated. The disease & poverty caused the person to have

Severe mood disorder. He used to be very abusive with the family. As part of curative measure he was referred to psychiatry & gradually he recovered. Another health problem Tuberculosis affected him. He used to get frequent vomiting but he continued with the DOTs & overcame the disease. He is taking life long ARV drugs regularly. He is

now a calm, caring & responsible person very nicely managing his life from the earning of his occupation as mason. He is a very supportive peer educator who often counsels the patients newly on ARV drugs by referring himself as example whenever he visits care centre & help to boost up inner energy among other PLHAs.

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME

Tuberculosis is one of the major global killer diseases. India itself has 1.4 million TB cases as on 2006 around 3.2 lakh population died of TB in the year 2005. In every minute the virus kills 1 person & infects 2. No state is free of TB. TB spreads through sneezing & coughing. The Govt of India now providing DOTs for the treatment of TB free of cost at their doorstep. Generation of mass awareness & community mobilization is necessary in prevention & treatment of TB. The Govt of India has introduced Revised National Tuberculosis Control Programme to fight out TB.

The organizations role in addressing health issues at the grass root level for longer been considered by the Assam TB Control society & the later selected the organization as Nodal NGO for making intervention in the five districts of Assam namely Cachar, Karimganj, Hailakandi, N.C Hill, & Karbi Anglong. The main objective of the programme was to create awareness on TB & also facilitating in minimizing TB mortality rate. Presently the programme is operational in four districts. The dep't of TB in all the districts have done various programme & the communication facilitators have facilitated the programmes. A glimpse of the report is given below:

<i>Name of activity/programme</i>	<i>District</i>	<i>Total nos</i>
Awareness generation programme	Karimganj	24
Awareness generation programme	Hailakandi	6
Awareness generation programme	Cachar	13
Awareness meeting with NGO, Mahila Samiti & tribal group (Pilot Project)	Cachar	1
Community awareness meeting(Hard to reach area)Pilot project	Cachar	1

SPECIAL SCHOOL FOR MENTALLY CHALLENGED CHILDRENS

Disability is an emerging problem. The international community has moral commitment to uphold the status of disabled person. Understanding the vulnerability of the disables in the society & to ameliorate the status of disables. The organization started a day care centre in 2003 with 17 students. The Chief Coordinator of the centre along with a team of dedicated volunteers tirelessly working to bring some hope in the lives of the children with special abilities who are yet to find

a suitable societal atmosphere for feeling as per with other people with functional abilities. The children are trained on social skills so that they can live life with minimum dependency. The Day Care Centre for the mentally retarded children, namely, Disha has completed seven years of service to the mentally retarded children.

Deshabandhu Club

As the awareness level is increasing and there is dearth of special schools in Barak Valley, Disha is receiving immense responses from the masses and the parents of the mentally challenged people in Barak Valley. Its specialized services meant



for the mentally retarded, cerebral palsy and autistic children have been proved to be beneficial for the improvement of the living conditions of these children and their families over the last few years. Deshabandhu Club has been running the rehabilitation programme for the mentally retarded children in partnership with

the Disha Parents Association. The members of the Association are actively involved in the decision making and planning of the Day Care Centre activities. The main focus of Disha presently is school readiness programme for

the children in the age group of 3 to 6 years. Through this programme the little mild and moderate mentally retarded children are trained for formal school or special school as per their capabilities. The organization has been successful in

Mainstreaming a few children in the formal schools in the past years. Apart from that the other focus of the centre is to impart vocational training to the grown up mentally retarded boys and girls. This also helps in developing income generation activities for those boys and girls. Deshabandhu Club also

play an important role in deciding legal guardianship for the mentally retarded children, the organization is a permanent member of the Local Level Committee in Cachar, Karimganj and Dibrugarh districts. This empowers the organization to decide on the legal issues of the mentally retarded persons in those districts at par with the Deputy Commissioner.

These Local Level Committees are constituted by the National Trust, Ministry of Social Justice and Empowerment. The Day Care Centre provides daily living skill training to the mentally retarded children along with some functional academics so that they can become independent in their lives. Regular counseling to the parents

and family members is also provided in the Centre. Monthly parents meeting are a part of whole Day Care Centre activity in the organization.

The total strength of the Day Care Centre for the session 2010-2011 is 33. Among them 21 are mentally retarded, 6 are autistic, 3 are cerebral palsy and 3 are multiple disabled.

VILLAGE HEALTH & SANITATION COMMITTEE TRAINING

National Rural Health Mission launched in 2005 with an aim to make remarkable change in the area of rural health. It is a flagship programme of the Govt of India. NRHM stressed on community mobilization & community ownership to make the mega programme a grand success. The approach is bottom up. The mission attempts to involve grass root people who will be the change agents in their own locality. To sensitize people on health related issues Village Health & Nutrition Day has to be observed at each village once a month. A grass root level Village Health & Sanitation Committee has been made to look after health related activity in the village by empowering local self government as the sarpanch is the

Chairman of the said committee & ASHA (Accredited Social health Activist) is the convey nor. The Committee is composed of

local people. To empower the VHSCs, National Rural Health Mission doing capacity

building of the committee by imparting



knowledge through training of the members to make the committee aware on the NRHM, maternal & child health issue & sanitation so,

that the members by understanding their roles & responsibilities can play active role in the health mission to make it pro people programme in reality. The NGOs are assigned responsibility to impart training to the VHSCs. Deshabandhu Club the oldest MNGO of

Assam has been selected to implement VHSC trg in Cachar & Hailakandi Districts of Assam by NRHM, Assam. The programme was started in March, 2010. A report of the activity is given below:

District	Total target	Training completed	No of Chairman trained	No of members trained	No of ASHA trained	No of AWW trained
Hailakandi	672	190	169	1710	190	117
Cachar	1430	153	141	1509	153	117

ECONOMIC DEVELOPMENT PROGRAMME

Total 42% of Indian population lives below poverty line as per World bank report. The economic growths in India are varying state to state. The economist view that economic liberalization taken by the states uphold the growth rate. In 2008-2009 the Per Capita Income in India was Rs, 37490. Few poor states like Jharkhand are on the frontline due to the policies adopted by the state.

Now the question comes when Indian economy was not shaken

with the global economic melt down why India is poor? India is a promising Economy with potential to be an economic superpower in the days to come still India having 42% of population without food, health & shelter. The reasons are overpopulation, corruption, indiscipline. The Govt has been trying to improve the situations by adopting pro poor measures. The Govt of India making various income generation programmes to eradicate poverty. The Govt is keen to make entrepreneurs by providing

technical & financial input to the educated unemployed youths at own level or through NGOs. The organization understanding the plight of educate

unemployed youths has been taking up various activities towards economic self reliance of people. A

report on the activities conducted by the organization is mentioned below.

KVIC PROGRAMME

Deshabandhu Club under support of KVIC conducted 10nos District level awareness programme on PMEGP (Prime Minister Employment Generation Programme) at different location of Barak valley in collaboration with KVIC sub office, Silchar. The details of the programme are mentioned below:

Sl no	Venue of Awareness programme	Date	Duration
1	Barjatrapur, cachar	11-2-2010	1day
2	Dudpur, Hailakandi	15-2-2010	1day
3	Algapur, hailakandi	16-2-2010	1day
4	Gumra, Cachar	5-3-2010	1day
5	Fakira bazaar, Karimganj	10-3-2010	1day
6	Arunachal, Cachar	11-3-2010	1day
7	Jaraitola, Cachar	13-3-2010	1day
8	Motinagar, Cachar	18-3-2010	1day
9	Bhanga, Cachar	20-3-2010	1day
10	Derby, Cachar	23-3-2010	1day

The basic objective of the programme was encouraging unemployed youth for self employment through establishment of micro enterprises in rural as well as urban areas.

NEDFI INFORMATION CENTRE

Deshabandhu Club is accredited regional NEDFI information centre. It provides information on self employment opportunities & facilitates the unemployed to start self employment ventures to cope up with burning problem of unemployment. A report of 2009-10 is given below:

No of persons visited the NEDFI centre	154
No of persons made telephonic contact	185

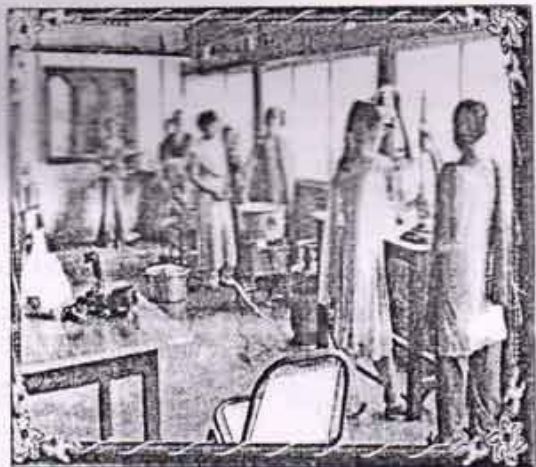
MICRO FINANCE

Microfinance is the provision of financial service to low income people, including consumers and the self-employed, who traditionally lack access to banking and related services. It provides high quality financial service in terms of credit, savings, and insurance & fund transfers. The proponent of the concept believes that it will relieve the poverty from the society. The organization as part of poverty alleviation measure started JLG group formation in Cachar district of Assam. Deshabandhu Micro finance Institution has made 175 JLGs (Joint liability group) in the District of Cachar in the year 2009-10. A group-based credit approach is applied which utilizes the pressure within the group to ensure the borrowers follow through and use caution in conducting their financial affairs with strict discipline, ensuring repayment eventually and allowing the borrowers to develop good credit standing. JLG is a five member group with special emphasis on women. Total 170 women JLGs & 5 male group JLGs are made by the organization. The JLG recovery was 100% up to 31st march, 2010 with an outstanding of Rs 25,18,625. The staffs of the Micro finance institution attended 7days capacity Building Training at IIRM, Guwahati & 3days training at NEDFI for getting technical knowledge in handling Micro Finance Operation.

RURAL INDUSTRIES SERVICE CENTRE:-Deshabandhu Club has established a Rural

industries service centre at Behara bazaar on food processing under financial support of KVIC.

The potential entrepreneurs from existing SHGs with special relaxation for SC, ST, physically handicapped & minority. The service centre has a newly constructed building with work shed & electricity connection. The centre has purified water connection for food processing. It was started on 30th may, 2009. 30 numbers of budding entrepreneurs were trained by master trainers on food processing. Presently some of the trainees are employed in the centre. The RISC unit is producing items like Squash, fruit jam, sauce & other food products depending upon the seasonal fruits & vegetables.



COMMON FACILITY CENTRE FOR ARTISANS:-Assam is rich in handicrafts but

the traditional artisans are skipping their indigenous profession due to survival. In the changing time their expertise are not as per with the demands of the buyers in the national as well as global market. To revive the indigenous handicraft the Govt of India has established CFCs with

an aim to bring them back to their profession by providing knowledge on latest innovation, skill, design development & product diversification. A CFC has been existing at Deshabandhu Club for providing necessary input to the artisans. Technical support being provided by trainers from across the country. The artisans are updated with latest knowledge on design & skills necessary for them to compete & survive in the national & international market. The artisans are trained to be active entrepreneurs. 10nos of trainees in the year 2009 had received vocational training on Jute product under Chief Minister's Assam Vikash Yojana & 18nos of participants are trained on tailoring & 2nos on Agarbati manufacturing. The CFC Deshabandhu Club participated in Buyer seller meet SPRING-2010 from 20th-23rd February, 2010 at India Expo Centre & Mart at Greater NOIDA, UP under sponsorship of NEDFI.

SANITATION

Sanitation is one of the basic determinants of quality of life. In 1925, Mahatma Gandhi remarked that "Sanitation is more important than political independence." Poor sanitation takes away many lives by making people victim of various preventable & communicable diseases. It is also significant from the societal point of view. Open defecation by people not only creates lots of health problems in a country it is also a shameful act in a civilized society. The organization did lot of awareness generation on growing sanitation habit among people. Village level motivators were identified. Sanitary mart was

established in the premises of the organization with financial & technical inputs from the deptt of PHE. Low cost hygienic latrine items like squatting plate, Joint pan trap, pit cover, pan tap etc are made & sold at the sanitary mart. Deshabandhu Club conducted mason training from 10-7-2009 to 18-7-2009 at 894 Kalibari L.P School in Kalain Block under Total sanitation Campaign. The training was provide to total 25 masons to train them on building Toilets under School sanitation Block with technical support from Deptt of PHE.A HHL(Household Latrine) & one Latrine was constructed by the trained mason at 894 Kalibari L.P. School.

SOCIAL COUNSELING ADVOCAY:--Legal aid cell is one of the important wings of Deshabandhu Club. It was started in 2004 with an aim to generate legal literacy & legal assistance to people. As per directives of the honourable Supreme Court of India & under permission of District Session Judge, Cachar the cell was started to address issues like domestic violence against women & child. The cell looks after marital disputes, cases on violence against women & child. It is good to note that most of the disputes been settled down at the legal aid

All matrimonial disputes are referred to the court. Total 18 cases were filed under legal aid cell during April 2009-march 2010. A report of the legal aid cell is mentioned below.

No of marital dispute case filed	15
Total no of settled marital dispute case	7
Total no of unsettled marital dispute cases	3
Total no of mutual divorce cases	5
Total no of family dispute cases filed	2
Total no of family dispute case resolved	2
Total no of land dispute cases filled	1
Total no of land dispute cases unresolved & under Judiciary	1

GRAMIN VIKAS ANDOLAN

Water is prime necessity for survival. Only 1% of freshwater is available to meet the human need. As per United nation report fresh water will be one of greatest challenge by 2025. The availability of the fresh water spoilt due to lack of conservation by us. People's knowledge on water conservation & management is very poor. To meet future need of freshwater everyone should know how to do conserve water resource & make sustainable use of it. It is estimated that 70% of rural population are unaware about the said facts. Understanding NGOs role in community development the Govt of India incorporating the responsibility on NGOs to educate people on basic issues essential for survival. CAPART, a leading agency of the Govt of India under ministry of rural development supported Deshabandhu Club to launch a scheme called Gramin Bikash andolon at karbi Anglong district in 2007 with a view to create public awareness on water conservation & management, safe sanitation & sustainable utilization of water resources. Nodal NGO, Deshabandhu Club selected one field NGO, RADS (Rural area development society), Hamren from Chingthong block of Karbi Anglong

district for effective implementation of the programme. CAPART selected the NGO with direct guidance from Nodal NGO basically to build/generate mass movement on water conservation, rain water harvesting, proper utilization of ground water, hygiene & planned consumption of fresh water. various activities like training, workshop, exhibitions, campaigns, audio visual show, folk dance, songs, drama, dissemination of modern & traditional techniques of conservation was done to create mass awareness. The programme was concluded in 2009.

CULTURE:

Culture is the heart of a nation. India is unique because of its cultural diversity. The spirit of unity in the land of cultural diversity is called India. North east India is rich in cultural heritage. Various ethnic groups are found in the north eastern states with diverse cultural identity. Around 15 tribal communities stay in this part of the country. In present day world we need to give right platform to our original talents so that through these artists we can preserve our rich cultural heritage & make it global by capturing international audience. Art always brings out original human being. The perfection comes out through proper nurturing of budding talents. Ancient philosopher Plato said music should be included in the curriculum along with gymnastics. Due to the aesthetic value music is always cherished. Culture is the right medium to reach every one. It speaks about social issues well.

Deshabandhu Club has cultural troop namely Deshabandhu cultural mission. The aim of the mission is to spread message on development & different societal issues to the masses. It also observes major cultural events like Yuva Divas, international literacy day, World environment day, Rabindra jayanti, Nazrul Jayanti etc. A music competition was held to enhance



local talents in the age group of 7-11years, 12-17years, above 18years age group sponsored by Deshabandhu club. The cultural mission along with Sarba Siksha Aviyon Mission conducted street drama at 20 locations in 4 blocks of Cachar district. The organization also runs a music school at Behara Bazar namely Deshabandhu Sangeet Vidyalaya since 1989. Here is report on the performance of the students of the school:

Total candidates appeared	Name of exam	1 st div	2 nd div	3 rd div	Total pass
20	Prathama	3	14	3	20
16	Madhyama	4	11		15
16	Visarad I				16
14	Visarad II		9		9

SPORTS

Sports always remained very important activity of organization. Deshabandhu Club was previously a Sports Club started by few sports loving youths of the locality. The small club has diversified its wing through out the Barak valley but the organizers are still connected with Sports wholeheartedly. The youths become spirited if involved in sports as it is a youthful activity & their spirit brings them together to stand up for the cause of society. The Sports events are quite regular here.

During the year 2009, Deshabandhu Club organized a Cricket Tournament at Behara bazaar. Total 14 teams participated in the tournament & the host organization bagged winners prize. The Deshabandhu Club team won runners prize in another Cricket tournament in 2009 at I. M. Jyaran Basti.



ANTI SUPERSTITION INITIATIVE

The human civilization has crossed 20 centuries. We have come across different stages of civilization from age to present day human being through evolution. The scientific development has changed our life in different ways but Superstition is still embedded in human psyche. People have faith on black magic, evil spirit, and the wonder effect of magical water in getting relief from debt, life threatening diseases or other human crisis. The superstition is found not only



among illiterate masses it is also in practice among educated people. Many a time people spend their earning after the Godmans but didn't get any fruitful development to happen in their lives. The religious fanatics, illiterate people are prime victims who instead of getting any help double their miseries by being extremely superstitious. It has been found that the superstition affects socio economic condition of the society to great extent. No part of our country is free from Superstition. Understanding it's consequences on ignorant, poverty ridden people the organization taken initiative to make people free from the false belief which has no justified grounds. The sensitization is done through Street play, exhibition, drama etc throughout Barak valley. The people of adjoining area are now sensitized As they are following scientific ideas & Facts & the God men are gradually loosing their influence among the common people.

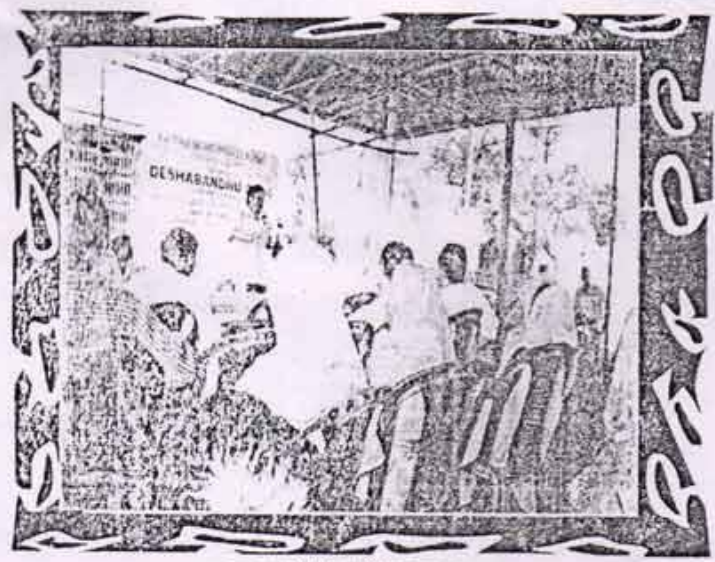
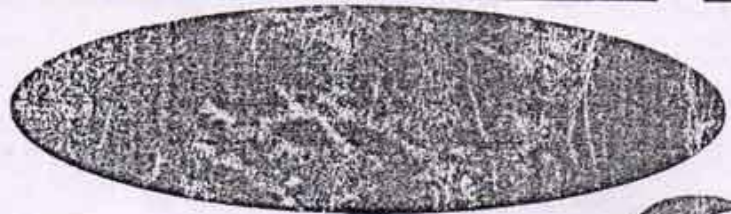
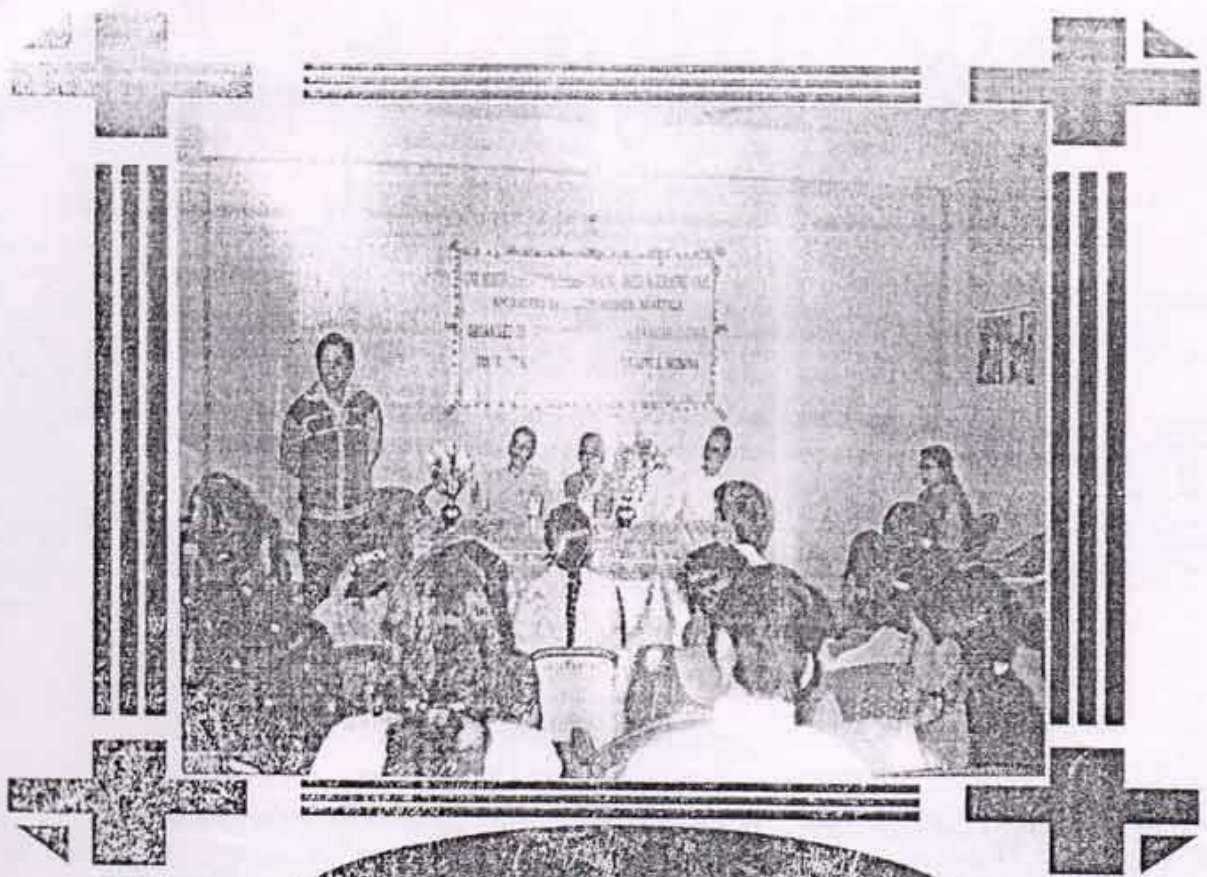
TRG/WORKSHOP/SEMINARS CONDUCTED BY THE ORGANIZATION

A one month certificate course on Geriatric care sponsored by National Institute of social defense, GOI, New Delhi & Abhoy mission, Tripura, Nodal Agency of National Trust was conducted by the Deshabandhu Club from 18th Jan-17th Feb. 2010. Total 27 participants attended the training. The programme was inaugurated by Dr. Kumar Kant Das veteran surgeon of national & international repute & Director of Sundari Mohan Seva Bhawan, Ramnagar, Silchar. He was the Chief guest by inaugural programme & Dr. Chinmo Choudhury, ex-Director, Cachar Cancer Hospital, Silchar was the chief guest of the valedictor. The training was conducted with an aim to train people on Geriatric care. Grey population is up coming in numbers in India. The future old age populations are about to have crisis related to old age health problem, shelter, isolation & various other socioeconomic & health related crisis in the days to come. Keeping into account the necessity of future requirement of trained people on Geriatric care the training was conducted by the organization. The various aspects of Geriatric care including health, socio psychological issues; geriatric nursing etc was covered in the training.

CONSERVATION OF WILDLIFE

The organization has been constantly working for conservation of rare animal species. The team always making people aware on the conservation of flora & fauna by expressing their significance on environment. The animal lovers of the NGO saved different rare species snakes like King Cobra & deer from being cruelly killed by the people. A King cobra was rescued by members of Desobandhu club members from human habitation of Binara village located at the fringe of BWS (photographic evidence). We saw a skin of the species from Maruacherra village which was reported to be killed by villagers in the year 2005 from adjoining Pan Jhum field when it attacked their hunter dog during day time. According to local khasi peoples the tail of King Cobra has medicinal use. (Source: Diversity and Distribution of Herpetofauna and Evaluation of their Conservation Status in Barail Hill Range (Including Barail Wildlife Sanctuary), Assam, Northeast India. -Final Report-February 2008 Abhijit Das Division of Herpetology, Aaranyak, 50 Samanway Paths, Survey, Beltola, Guwahati-781028 Assam India)







*" Maturity is not when we start
speaking big things, but actually
it is when we start understanding
small things..... "*



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