



Annual Report  
2020-21  
Deshabandhu Club  
Behara Bazar , Cachar





# Annual Report

## 2020-2021



# DESHABANDHU CLUB

BEHARA BAZAR, CACHAR, ASSAM

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

Registration No.020720016 dtd 19.03.1996

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

## BRANCH OFFICES

### CITY OFFICE

Shibbari Road, Tarapur, Silchar,  
Dist. Cachar (Assam) Phone: (+91) 3842 -269024

### CSC VIHAAN

Deshabandhu Club  
Sanjeebalaya Building, Ground Floor-3  
N. S. Avenue, Silchar-5, Ph.: 03842- 222791

### DESHABANDHU CLUB 1098 CHILDLINE SERVICE

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-268710, 268720  
BSNL Toll Free Number: 1098

### EXTENSION OFFICE

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# Message From The President



*Dr Sanjib Sikidar , MBBS , President*

## **Dear friends, Dear followers ...**

We bring annual report every year which includes performance report and financial report for current year. This annual report is the 54th after the formation of organization in Bihar on August 15, 1966.

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

Provide us a huge spirits to carry out the organizational activities the organization recall themselves in this stage.

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 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 Barak valley .

**“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 lifewith self respect, dignity and pride.

### **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 entrepreneurship through people’s 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.

### **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

- To promote the cause of national integration and communal harmony in a best possible means.
- To develop scientific temperament among the rural people through seminar, symposium, discussion, folk entertainment and audio visual aid.
- 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 provide training self from any outside agency as per objectives of the program of that agency and the organization.
- To conscious to the rural people on small savings.
  
- To promote sports & culture in the rural areas.



## Programs:

### DISHA (A Special school for mentally challenged children)



**DISHA**, a special school for mentally challenged children, gives overall development of the 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.

#### **Activities of DISHA:**

DISHA provides skill training in different activities like brushing, dressing, grooming and cleanliness, eating, drinking, etc.

**DISHA** strives to attain this level of good behavior from our student. Intensive training is given to cultivate appropriate social behavior Problem solving, modifying behavior with sensitivity and encouragement plays a key role in their emotional development and in order to cognitive development

**DISHA** emphasizes in functional Academics like Reading –Writing – Arithmetic, Time, Money transactions, Measurement etc .



**DISHA integrates** 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.

**DISHA** has 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

**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 Diwali, Christmas, etc.



## A few activities of the organization

**Local level Committee for Legal Guardianship** – The organization is the registered organization under national trust and member of the LLC at present one legal guardianship is under process. Niramaya Health insurance Scheme under NT. 31 nos. Of PWDSs beneficiary has been enrolled with this scheme for affordable health insurance to Under NT. Now RO is started renewal and new beneficiary Enrollment process is going on.

## Child Line (1098)

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

**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, GOI.

### Goal:

- *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.*





**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.



**Childline Silchar have intervened 367 cases from the Month of April, 2020 to March, 2021.**

Intervention	2020-21
Child Labour	10
Child Marriage	33
Physical Abuse/ Sexual Abuse	18
Medical Help	04

Child Help & Sponsorship	02
Shelter	10
Restoration	05
Referral from Other CHILDLINE	05
Lost & found	10
Other Intervention	12
Other Intervention ( Covid-19)	258
TOTAL	367

## Targeted Intervention Project

It is estimated that more than 90% of HIV transmission in India is related to unprotected sexual intercourse sharing of injecting equipment between an infected and an uninfected individual. Not everyone in the population has the same risk of acquiring or transmitting HIV. Much of the HIV transmission in India occurs within groups or networks of individuals who have higher levels of risk due to a higher number of sexual partners or the sharing of injection drug equipment



The prevention of new infections

in high risk groups is a major thrust in National AIDS Control organization .The most effective means of controlling the spread of HIV in India is through the implementation of Targeted Interventions (TIs) amongst persons most vulnerable to HIV/AIDS, such as female sex workers (FSWs), men who have sex with men (MSM) and transgender (TGs) and injecting drug users(IDU). In addition, the bridge populations of truckers and migrants also require focused interventions. Both NACO and the States place a high priority upon full coverage of the States' FSWs, MSMs/TGs, IDUs and migrants/truckers with TIs.



*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)*



Project conducted as per proposed indicators:

YEAR 2020-2021

Indicators	FSW	MSM
New Registration	209	25
Active population	854	243
HRG diagnosed for STI treatment	48	4
No of HRGs completed STI treatment	38	2
Condom Demand	342918	85970
Condom Distribution	209710	41698
CBHS CAMPS	76	21
CBHS CAMPS PARTICIPANTS	876	199

Meetings	Total	Participants
Demand generation	45	459
DIC level meeting	11	239
Review meeting	22	106
Advocacy meeting	9	91

## Care and Support Centers (CSC) for People living with HIV/AIDS:

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 costeffectiveness 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.



The organization has been running CSC since 2013 and continuing and it is a holistic project by which provides hand to hand support to the PLHIVs by improving the survival & quality of life of PLHIV, registered in ART centre. The functions of CSCs comprehended with maximum number of PLHIVs linked to social welfare schemes, track back Lost to Follow-up patients, encourage spouse testing for HIV and community level TB *Vihaan*, meaning “dawn’s first light” in Sanskrit, is a national initiative establishing and managing 300 Care & Support Centers (CSCs) across India. The program is designed as the care & support component of the country’s HIV response under National AIDS Control Program IV (NACP IV) is working in collaboration with the Department of AIDS Control and with support from the Global Fund, implemented by India HIV/AIDS Alliance





**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 theCSC 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.

**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

**Challenges:**

We are facing some challenges in the following area and we trying to overcome them by effort of our working strategy. The Indian HIV program has evolved, expanded and implemented various new initiatives over the years.



The national HIV programme has, so far, been a success story, however, challenges and gaps remain, including stigma and discrimination and access to testing services for people from certain sections of society. The other major challenge that the programme faces is funding. With declining funding from external donors, access to the domestic budget has progressively increased but has been slow. As a result, newer policies and strategies such as 'test and treat' might be difficult to implement. As India has a large number of PLHIVs, any change in policy has major financial implications.

There are some difficulties to achieve for our new enrolment because the other Service Delivery like ART centre, ICTC enroll all the three district clients of Barak Valley & some other adjoining areas. Whereas CSC Cachar, currently looks after only two districts of Barak Valley.



## **Performances from April 2020- March 2021**

Sl.No	Indicators	Achievement
1	No of Clients registered at CSC.	2556
2	No of clients currently active in the CSC.	2322
3	No of PLHIV in Active Care in ARTC-SMCH	2403
4	No of registered PLHIV receiving Peer counselling session on thematic areas in CSC	1481
5	PLHIV Lost to Follow Up & MIS Brought back to treatment	1369
6	Home delivered ART medicine to PLHIV clients during Covid-19 Pandemic by CSC	98

### **Status of PLHIV**

Districts	Male	Female	Male Child	Female Child
Cachar	1033	682	64	55
Hailakandi	89	58	7	7
Others(Karimganj,DimaHasao,Chirang, etc)	305	218	26	15

### **CHALLENGES FACED AND WAY OF OVERCOME:**

The organization is facing some challenges in the following area and we trying to overcome them by effort of our working strategy.

- The Indian HIV program has evolved, expanded and implemented various new initiatives over the years. The national HIV programme has, so far, been a success story, however, challenges and gaps remain, including stigma and discrimination and access to testing services for people from certain sections of society. The other major challenge that the programme faces is funding. With declining funding from external donors, access to the domestic budget has progressively increased but has been slow. As a result, newer policies and strategies such as 'test and treat' might be



difficult to implement. As India has a large number of PLHIVs, any change in policy has major financial implications.

- Identification the new PLHIVs and follow up the defaulter when the client's address is incomplete, incorrect or they are in some interior areas.
- There are some difficulties to achieve for our new enrolment because the other Service Delivery like ART centre, ICTC enroll all the three district clients of Barak Valley & some other adjoining areas. Whereas CSC

Cachar, currently looks after only two districts of Barak Valley. So there are some gaps between CSC enrollment and ART center enrollment –As we are classify the district wise PLHIVs from ARTC and enroll our target district clients only.

### **Outcome of the programme:**

- Increasing numbers of people who dropped out of treatment have been brought back, and treatment adherence has increased.
- The spectrum of advocacy under Vihaan has increased beyond treatment as other issues like nutrition and psychosocial support are being addressed. Clients those are having eligibility are being linked to the social welfare scheme like Ayushman Bharat & "Atal Amrit Abhiyan, wherein there is treatment coverage for the expenses like medicine, consultations, food, diagnostics and hospital up to Rs. 2 Lakh. Apart from these, the scheme also aids six common and expensive diseases like kidney diseases, cancer, neurological conditions, Burns, Neo-natal diseases and cardiovascular diseases. The patient in need to medical treatment can be admitted in the hospital without any payment.
- Widow Pension scheme implemented under Govt of Assam with the help of CSC for getting the monetary benefit for the affected widow.
- 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.
- Events such as World AIDS Day have been organized to increase awareness, fight prejudice and improve education towards AIDS.
- HIV/AIDS Awareness programme.



## **Livelihood Project for Women:**

**Livelihood program 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 generating 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 & 170 no's in others states of North east.

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

### **Objective of the Program:**

*To mobilize the village women and girl cometo the Silai School For learning And establish The village location/area with the help of Silai school program*



## Outcomes of the programs

- The organization has been launched, 10 nos in Tripura, 10 nos Manipur. Rest of USHA Silai schools is closed due to COVID.
- Satellite schools have been initiated in Barak valley 200 numbers, in Tripura 267 numbers, Manipur 270 numbers and Mizoram 55 numbers.
- Learner in Barak valley -1060, Tripura -1250, Manipur -1470 and Mizoram -350.

**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.**



## Major Day Celebration in the year

### Child Labour Day on 12<sup>th</sup> 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.

Every year the Child line observes Stop Child Labour Day on 12<sup>th</sup> June in association with District Administration. 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.

### 14<sup>th</sup> 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 .Other organizations like Lions Club, Rotary Club, Sanghamitra Club are as a associate organization participate in the same.

## World AIDS Day on 1st Dec



World AIDS Day is held on 1 December in every 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 prospect 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 colorful cultural program in Disha rehabilitation centre. Parents of mentally challenged children, representative of social welfare department and are participated in the program



## 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 length ion the Annual General Meeting.

Deshabandhu Club complies with statutory requirements of Income tax Act, 961 and Foreign Contribution and regulation Act, 1976.

### LIST OF EXECUTIVE BODY

Sl. No.	NAME OF THE MEMBER	DESIGNATION	GENDER	PROFESSION
1	Dr. Sanjib Sikidar	President	Male	Medical Practitioner
2	Ajit Roy Choudhury	Secretary	Male	Ex-serviceman
3	Kanailal Bhattacharjee	Organizing Secretary	Male	Service
4	Rabindra Narayan Acharjee	Jt. Secretary	Male	Social Work
5	Jayanta Roy Choudhury	Jt. Secretary	Male	Ex-serviceman
6	Bimal Chandra Dey	Jt. Secretary	Male	Ex-serviceman
7	Abhijit Chakaraborty	Jt. Secretary	Male	Social Service
8	Smt. Kamana Devi	Jt. Secretary	Female	Ex-serviceman
9	Sri Subir Das	Member	Male	Service
10	Nibhas Das	Member	Male	Social Work
11	Manik Malakar	Member	Male	Social Work
12	Pradip Goswami	Member	Male	Service
13	Bijoy Bhusan Das	Member	Male	Service
14	Miss Lilaboti Das	Member	Female	Service
15	Biplab kar Choudhury	Member	Male	Social worker
16	Utpal Kanti Nath	Member	Male	Businessman
17	Saidur Rahman Barbhuiya	Member	Male	Ex-serviceman

