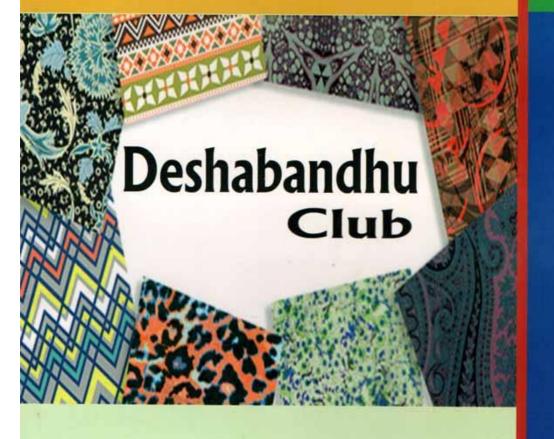
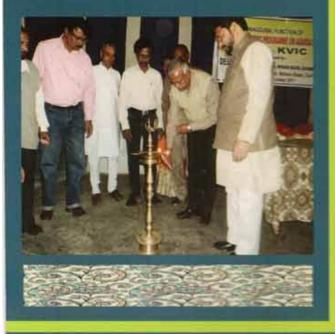
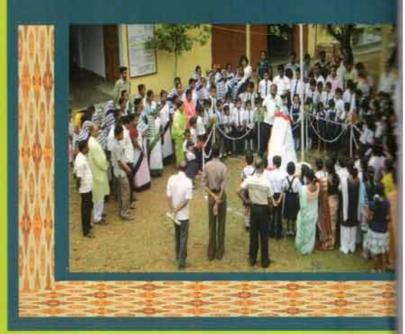


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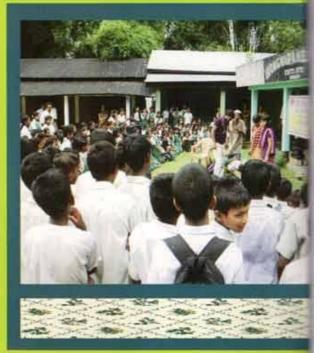


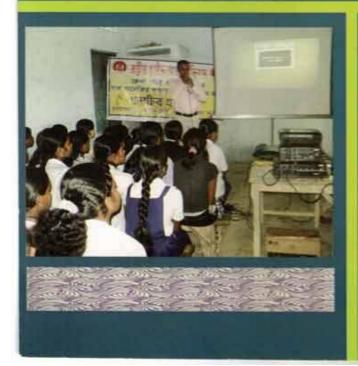
An Organization working With People for Sustainable **Develop**ment













### ANNUAL REPORT

2011-2012

#### DESHABANDHU CLUB

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Registered Under Societies Regn Act XXI of 1860, Regn.No.193 of 1977-78 FCRA Registration No. 020720016 dtd 19.03.1996 Registered Under Section 12 (AA) & Section 80 (G) of Income tax Act 1995

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#### Community care centre (Anubhuti)

Sibbari Road, Tarapur, Silchar Telefax-03842-268795, 9435522614

#### **Extension office**

Ramnagar-Banglaghat Near Kalyani Hospital, Silchar-26 Cachar, Assam Tel- 03842-268895

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# ABOUT DESHABANDHU CLUB

#### FROM THE PRESIDENT' DESK

The organization started its' journey as Balak Samiti in 1966 at Behara Bazar, a small village on the foothill of picturesque Barail. Sports loving members turned to philanthropist after witnessing devastating flood in neighboring villages of Behara. They joined in relief & rescue operation & since then the Balak Samiti turned to a voluntary organization & in later course of time renamed as Deshabandhu Club. The organization received active support & participation of different stakeholders, funding agencies of national & international fame including common people in it's journey & acknowledge it with sincere gratitude. Presently different programmes are being run by organization in the area of education, health, sanitation, disability, entrepreneurship & livelihood etc.

A Care, support & treatment facility for HIV/AIDS at Tarapur, Silchar will complete its 4 years of journey in July,2012 .The Community Care centre (CCC) is bringing some hope in the lives of people living with HIV/AIDS. Community Based Rehabilitation (CBR) Forum, Bangalore has also extended their support for the rehabilitation of the disabled and the organization has been implementing this program in four villages of Kalain Development Block. The undersigned would like to convey sincere thanks to the donor agencies for their generous help in many ways. Without their help, it would have been very difficult to carry out the mission in a planned manner. Hope in days to come also these agencies will continue to support this organization in realizing its much-cherished dreams of improving the social life of the target group. The undersigned also would like to enjoy the opportunity of requesting all stakeholders to identify our mistakes, if anything is noticed by them and to suggest what measures need to be taken to make the program implementation more result oriented. I assure that all these suggestions will be considered while designing any plan of action in future so that program become more focused and it fits with the needs and aspirations of the people.

Dr. Sanjib Sikidar President

#### **DESHABANDHU CLUB**

A North East Based NGO started its 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 Socio-economic problems of the have not with special emphasis on minority, Women, Child & other vulnerable section of the society. Presently the NGO has been working in the five district of Assam viz, Cachar, Karimganj, Hailakandi, N.. Hills & Karbi Anglong.

#### **OUR VISION**

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

#### MISSION STATEMENT

"Deshabandhu Club exists to bring the socio-economic development of the citizen particularly to women & Children of Assam by 2020 A.D. would like to provide cost effective, Sustainable people's friendly health, education, economic empowerment & rural entrepreneurship service through people's participation."

## ACTIVITY

### 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. "Education for all" is still a challenge in the developing countries & India itself has nearly 35% illiterate population as per 2001 Census. The Govt. of India had taken up several programmes like adult education, Non Formal Education & Presently national flagship Programme namely; Sarva Siksha Abhiyan (SSA) is being implemented. Not only SSA, Schemes like Mid Day programme has been taken up with an aim to uphold their nutritional status and to bring them to the

ambit of school. All out, efforts have been made to minimize the school dropout through mid day meal scheme. Efforts have also been initiated to improve the school infrastructure & to appoint additional teachers on contract basis to improve the overall education environment of the school in general and to maintain the teacher student ratio in particular. To these, the effective community achieve all participation is the key, which has the ability to make the difference. There are many non-governmental organizations, which have been working for the cause of education in many inaccessible and in remote areas. After the initial program implementation of non-formal education, identifying the hard to reach children under SSA, the organization started a formal school namely "DESHABANDHU VIDYANIKETAN" in 1994 to give low cost, value based, quality education to the rural children of Behara and its adjoining areas. Since 1994, the school has been crossing milestones one after another and now the school has become a renowned educational institution in Behara area.

#### **DESHABANDHU VIDYANIKETAN**

The School, which started its journey only with 8 students in 1994, has now enrolment of 247 students at present. In the final High School Leaving Certificate examination of 2012, 100% students could successfully clear the examination with 6 children got 2<sup>nd</sup> division, 3 children in 3rd division. The management is trying very hard so that result can be further improved

#### **HEALTH**

Health is a core element for development of any country. It contributes to the material, intellectual & spiritual progress of a World nation. Health Organization views that mere physical wellbeing or absence of any disease does not mean health of an individual rather Health means complete wellbeing of body & mind. In India the "Health for All" - the Alma Ata declaration is still a far dream. Poverty, illiteracy & various other socioeconomic & cultural factors are posing challenges to make health for all a reality. Indian women & Children are especially vulnerable to poor health & insufficient nutrition. In India women. dies of childbirth and pregnancy related complication is very serious and 47% of children cannot see their

1 st birthday. As the organization has mandate of working in health sector, especially for the mother and children so, it started functioning in the area of community health through participatory approaches in the year 1992 in few selected gaon panchayats under Kalian Development Block of Cachar district. The initial aim of the organization was to assess the health needs of the community and to understand their health seeking practices. Field based survey was carried out to assess the gravity of the situation and the findings alarming, which showed high maternal and infant mortality and high prevalence of vaccine preventable diseases. The birth rate was found very high with poor immunization coverage. To give little relief to the

people, the organization started "Deshabandhu Family Welfare Hospital" with an aim to provide basic diagnostic & counseling service to the women. Now, the hospital extends health care services to the women, children, old age people & mentally ill patients. The hospital provides free medicine to needy patients. Dr. Sanjib Sikidar has been rendering his voluntary service to the patients since inception. He also does free check up of patients at Deshabandhu extension centre, located at Tarapur, Silchar Sunday. on Tuesday and Wednesday. Beside this, Deshabandhu Club has been playing an active role since 1995 in (pulse polio immunization) programme.

#### HIV/AIDS PROGRAMME

HIV/AIDS has been emerging as an international burden. The goal 6 (six) 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 greater HIV prevention efforts are needed to slow down 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 prevention efforts to reduce the HIV/AIDS burden. According to the World Bank's report, by 2020 India

will have to spend 7% of its health budget on AIDS if the rising tide of the AIDS epidemic in New Delhi, Mumbai, the north and the north east is not stopped. It is clear that HIV and AIDS will have a devastating effect on the lives of millions of Indians in near future. It is essential that effective action is taken to minimize this impact. Combating the virus is not easy for the country, which has several socio-cultural & economic factors as challenges. The trend of HIV have been found high in vulnerable population as commercial sex worker (CSW), IDUs, MSM, truckers & migrant workers. Presently the country is having burden of 2.3 million HIV positive populations. In a country like India mere 0.1% 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 (TI)

The Targeted intervention project aims to interrupt HIV transmission among highly vulnerable population namely commercial sex worker, injecting drug users, men having sex with men, truckers & migrant workers. The project aims to interrupt the rapid growth of STI & HIV infection among the high risk population through

appropriate right based approach in enabling environment. The objective is creation of awareness among community on issues of STI/HIV/AIDS, promoting safer sexual practice expansion of acquaintance competencies & practical proficiencies about safer ser practices, minimizing STI cases among the HRGs through syndromic case management,

mobilizing target group by empowering them and making strong community response group. The organization has been implementing TI programme in Cachar district since 2007 with the financial support of Assam State AIDS Control Society. In 2007, the target group was truckers. Around 840 numbers of truck drivers, 130 numbers of commercial sex workers & 265 numbers 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 main target group. 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 being continued with Target to cover 1000 population female condom is an recent inclusion in TI Project activity. The female condom scale up project is being run under technical assistance of HLFPPT. Presently the project is operational in selected 17districts in 9 states of India including Cachar district in Assam. The vision is in touching lives with quality care, compassion & effective services & mission is to offer innovative & affordable health solutions globally that empower communities in meeting their health challenges & vulnerabilities.

#### A Report of Targeted Intervention activity is given below:

Activity	April	May	June	July	Aug	Sept	Oct	Nov	D		De 15	
New HRGs	00	00	00	00				1	Dec	Jan	Feb	March
		00	00	00	00	00	00	00	00	00	00	00
New registration	00	00	00	00	00	00	00	00	0	00	00	00
Regular contact	735	741	751	759	783	762	724	680	742	744	757	771
STI symptomatic	05	11	10	06	14	6	3	5	6	15	22	21
STI presumptive	19	20	26	37	24	21	9	23	11	18	9	14
RMC	106	99	89	102	132	88	102	144		E11 W	(F) per	Johns In
CTC referral	74	35	60	173	80	Chanes	A STATE OF	144	168	173	160	8/6 h
CTC actual	72		200	- 2010000	TAI	52	30	125	50	118	87	85
isit	12	26	56	165	77	41	18	87	41	110	64	85
lo of Hotspot neeting	13	13	13	13	12	13	13	13	13	12	12	13
lo of DIC neeting	1	1	1	1	1	1	1	1	1	1	1	1
o of persons nder ART	8	9	11	12	13	15	15	15	15	17	17	18

#### COMMUNITY CARE CENTRE (CCC)

The HIV positive people finally found a new hope of life in the Ante 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 enhances the quality of his life. Adherence & drug tolerance are the two crucial things to be monitored in a patient, who takes this 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 ART patients, monitoring for adherence to drugs & tolerance is crucial that requires counseling & support. CCC is a new development under NACP phase III and it mainly gives emphasis to monitor patients. newly action on ART and 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 and support team and a holistic effort of care, support & treatment are the important aspects of CCC. The organization with the financial support of Assam State AIDS Control Society started CCC in the name of Anubhuti in August 2008 at Sibbari Road, Silchar in the district of Cachar, CCC is also identified as a DoTS centre by District TB cell, Cachar to provide DoTs to TB patients. A national level evaluation had been conducted in Feb 2011. Catholic Bishops Conference of India (sub sub recipient of GFATM) will take over CCC from April; 2012. The report of the functioning of CCC is given below:

#### STATUS REPORT (April 2011-March 2012)

Total enrolled (New registration)	212				
No of out-patients attended (old & New)	586				
No of in-patients admitted (Old & New)	565				
Events conducted at CCC	Candle light Memorial Day				
1 <sup>st</sup> Dec'2011	Observance of World AIDS day				
PLHIVs referred for vocation & received placement	5 HIV positive women				
Total out referrals	266				
Total outreach	234				
Family counseling	380 families of PLHIVS counseled				

Deshabandhu Club

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#### CANDLE LIGHT MEMORIAL DAY OBSERVED AT CCC

On May 15th, 2011 the 28th International AIDS Candlelight Memorial Day, one of the world's largest grassroots movements against HIV and AIDS, spreading hope, developing leaders, and uniting communities was also observed at Anubhuti , a Care support & treatment centre for the people living with HIV/AIDS. 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 formed 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.

#### PPTCT PROGRAMME:

The Prevention of Parent to Child Transmission of HIV/AIDS (PPTCT) programme was started in the country in the year 2002, Currently, there are more than 4000 Integrated Counselling and Testing Centres (ICTCs) in the country, most of these in government hospitals, which offer PPTCT services to pregnant women. Of these ICTCs, 502 are located in Obstetrics and Gynaecology Departments and in Maternity Homes where the client load is predominantly comprised of pregnant women. It was estimated by The Joint Technical Mission on PPTCT (2006) that out of 27 million annual pregnancies in India, 189,000 occur in HIV positive pregnant women. In the absence of any intervention, an estimated cohort of 56,700 infected babies will be born annually. The PPTCT programme aims to prevent the prenatal transmission of HIV from an HIV infected pregnant mother to her newborn baby. The programme entails counselling and testing of pregnant women in the ICTCs. Pregnant women who are found to be HIV positive are given a single dose of Nevirapine at the time of labour; their newborn babies also get a single dose of Nevirapine immediately after birth so as to prevent transmission of HIV from mother to child.

The PPTCT services cover about 10 per cent pregnancies in the country. In the year 2006, 2.1 million pregnant women accessed this service. Of these, more than 16,500 pregnant

women were HIV positive. In order to provide universal access to these services further scale up is planned up to the level of Community Health Centre and the Primary Health Centre, as well as private sector by forging public-private partnerships. To enhance care & support of HIV positive pregnant IL& FS PPTCT programmer was started in 2011 in 3 districts of Assam i.e, Cachar, Karimganj & Kamrup. Our agency has been a partner of IL& FS & implementing the programme in Cachar & Karimganj districts respectively. The ORWs intervention is to motivate women in ANC period to have voluntary HIV testing & if found positive then ORW will guide the women from the birth planning till outcome of pregnancy as well as to guide her in accessing treatment for herself, her yet to be born child & live child till 18 months. In due course of time ORWs will arrange support group meetings for betterment of positive women & refer her for different needs for her survival. The target group comprises positive pregnant women & child.

Name of hospitals	Name of district	performance (District wise)
Silchar medical college & hospital	Cachar	11pregnat & 5babie covered
Sibsundari Narisikshashram	hadden fill the man to	The Republican
Kalian FRU		A STATE OF THE STA
Civil Hospital, Karimganj	Karimganj	5pregnant &3 babie
Makunda Missionary Hospital		covered

#### REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME (RNTCP)

Tuberculosis is one of the major global killer diseases. India itself has 1.4 million TB cases as on 2006 and around 3.2 lac people died of TB in the year 2005. In every minute, the virus kills 1 person & infects 2. No state of our country 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 the doorstep of people and even DOTS provider are also provided, who are paid Rs. 250/- per case of DOTS course completion. 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 expertise of Deshabandhu Club in implementing health programs successfully was considered by the Assam TB Control Society & thus this organization has been selected as Nodal NGO for making intervention in the five districts of Assam namely Cachar, Karimganj, Hailakandi, N.C Hills & Karbi Anglong. The main objective of the programme is to create awareness on TB so that more number of people visit health facilities and take treatment for

TB. Presently, the organization is implementing the program in four districts. This organization with the support of state TB cell has done various programmes in districts, which were facilitated by the communication facilitators. A glimpse of the report is given below:

Name of activity/programme	District	Total Nos
Awareness generation programme	Karimganj	22
Awareness generation programme	Hailakandi	18
Awareness generation programme	Cachar	22

#### SPECIAL SCHOOL FOR MENTALLY CHALLENGED CHILDREN

Disability or in other words challenged (either physically or mentally) is an emerging problem. The international community has moral commitment to uphold the status of disabled person. Understanding vulnerability of the disabled in the society & to ameliorate the status of disabled, 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 has been tirelessly working to bring some hope in the lives of the children with special abilities who are yet to find a suitable social atmosphere for feeling at par 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 has completed seven years of service. As the awareness level is increasing and there is dearth of special schools in Barak Valley, the Centre 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 palasy and autistic children have been proved 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. Presently, the main focus of the Centre is school readiness programme for the children in the age group of 3 to 6 years. Through this programme, the 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 recent past. Apart

from that, the other focus of the centre is imparting vocational training to the grown up mentally retarded boys and girls. This also helps them in getting into some income generation activities. Deshabandhu Club also plays an important role in deciding legal guardianship for the mentally retarded children as the organization is a Permanent Member of the Local Level Committee in Cachar, Karimganj and N.C.Hills 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, Govt. of India, New Delhi. 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. 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 of the organization. The total strength of the Day Care Centre for the session 2011-2012 was 34

#### COMMUNITY BASED REHABILITATION (CBR) PROGRAMME

Disability "summarizes a great number of different functional limitations occurring in any population in any country of the world. People may be disabled by physical, intellectual or sensory impairment, medical conditions or mental illness. Such impairments, conditions or illnesses may be permanent or transitory in nature. Persons with disabilities are entitled to exercise their civil, political, social, economic and cultural rights on an equal basis with others". The UN estimates that there are 500 million persons with disabilities in the world today. This number is increasing every year due to factors such as war and destruction, unhealthy living conditions, or the absence of knowledge about disability, its causes, prevention and treatment The majority of persons with disabilities live in less developed countries where people lack access to essential services such as health care. Moreover, there exists a clear relationship between poverty and disability. The risk of impairment is greater for a family that lives in poverty, while and at the same time, a disabled family member places higher demands on the family's resources. Deshabandhu Club, a pioneer organization working for the rights of differently able person with support & patronize of NIMHANS, National trust since long back & in April, 2011 the organization got opportunity to work under aegis of CBR Forum, Bangalore sa proactive and promotional agency in Community Based Rehabilitation of Persons with Disabilities in India .CBR programme is being implemented in four Gaon Panchayat areas under Kalian block namely Kurkuri, Burunga, Sewti & Gorervitor. The programme aims at

rehabilitation of people living with disability by mainstreaming those person in a society where they can live with full dignity. The six thematic area of work are staffing & management, needs assessment, health, education, livelihood & advocacy. The staffs after training at SANCHAR, Kolkata traced 281 persons living with disability in the age group pf 0-60+ population. An overview of the programme is below:

Activity	performance
Total person with disability identified	281
Village level reflection workshop	15
No of PWD/ families with BPL card	92
Disability certificate	49
Id cards	6
Wheel chairs	3
Tri cycles	2
Low vision aids	2
Hearing aids	2
Calipers/crutches and the amount of the control of	1 005
Home based interventions	40
ADL support	17
Referral for health services	12
Referral for corrective surgery	1
PWDs supported for vocational training	4
Open employment/govt/private/public sector	50700
Self employment	3
IAY	12
NREGS	27
Scholarship	5
Workshop for private/govt authorities	1
Meeting with PRI regarding issue of disability	4
Awareness with PWDs, parents & community regarding various govt schemes & programme	THE YES STREET
Training/workshop for teachers & educational authorities	1
CWD/Primary school	28
CWD secondary level	8
Dra cabaal	12
Total no CWDs identified	70

#### FILM SCREENING & STREET PLAY:

To enable the people to behave in a manner conducive to himself/herself or community is a tough task. In healthcare mere existence of facility & care providers can not make health accessible to everyone. There are lots of barriers exist among us that can be overruled by the pattern of behavior we adopt & practice in life like sanitation, hygiene, prevention from mosquito breeding, hand washing, avoiding tobacco etc. Short films & Street plays are important mass medium to reach large audience. NRHM, Cachar under BCC activity assigned the organization to CONDUCT Street play & Film screening in Cachar. Street play & film screening was conducted under eight block PHCs of cachar. Audiences were made aware on malaria, anemia, hand washing, anti tobacco etc. The scholars of ME & High schools were target audience. A report on the activity is under mentioned:

Total street play	Total film screening	Name of Block PHCs covered
200	240	Bikrampur,Borkhola,Udharband,
	E STOPPING THE SECOND	jalapur,Dholai,Sonai,harinagar,
	rans nout webs	lakhipur

#### ECONOMIC DEVELOPMENT PROGRAMME

Total 42% of Indian population is living below poverty line as per World Bank report. The economic growth in India is varying from state to state. In 2008-2009 the Per Capita Income in India was Rs. 37,490. 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 meltdown why India is poor? India with promising Economy has potential to be an economic superpower in the days to come still the irony is India has 42% of population without food, health & shelter. The reasons are perhaps overpopulation, corruption, indiscipline. The Govt. has been trying to improve the situations by adopting pro poor measures. The Govt. is keen to make entrepreneurs by providing technical & financial input to the educated unemployed youths. This organization has taken up various activities towards economic self-reliance of people. A report on the activities conducted by the organization is mentioned below:

#### ENTREPRENEURSHIP AWARENESS AND DEVELOPMENT

Deshabandhu Club is pioneer in organizing Entrepreneurship Development Programme in Barak Valley region of Assam aiming to boost self employment through establishing own enterprises. This initiative was first started in the year 1996 in collaboratio with EDII and with financial support of NABARD, SIDBI, KVIC & Ministry of Food Processing Industries In this year also Deshabandhu Club under the support of KVIC conducted a Peripatetic Training programme under which 5 nos. of Entrepreneurship Awareness Programme (EAP); 5 nos. of Entrepreneurship Development Programme (EDP) and 1 number of Skill Development Programme (SDP). Under the programme awareness programmes were conducted at different locations of Cachar district where more than 550 youths have attended. Among the persons attended, 20-25 youths have been selected for 2 weeks duration EDP and among them all total 20 youths have been given SDP. Besides, 5 numbers of District level awareness programme was conducted on PMEGP (Prime Minister Employment Generation Programme) in the 5 places in districts of Cachar to make the educated youths aware of the PMEGP scheme. Resource persons from Industries and Banks were also attended those programmes to make the programmes more worthy.

#### SKILL DEVELOPMENT TRAINING

With the financial support of KVIC this organization has conducted Skill Development Training on Agarbati making under Implementation of the promotional activities under Polymer and Chemical Based Industry. All total 50 youths of Kalain & Barkhola Development Block areas were given skill training on Agarbati Trade. Shri Sarifuz Zaman Laskar, Hon'ble Member of KVIC (NEZ) and Shri P.C.Das, Director, KVIC, Guwahati were remain present at the inaugural function of the training programme.

### SKILL DEVELOPMENT TRAINING PROGRAMME ON WATER HYACYINTH BASED CRAFT:

Skill Development programme on Water Hyacinth based craft was conducted by this organization in seven locations of Hailakandi, Cachar & Karimganj districts respectively. The programmes were jointly initiated by Ministry of DONER & North Eastern Development Finance Corporation Ltd. (NEDFI). As concept is this craft is very much new this area awareness programmes were conducted in each locations prior to conducting Skill training where concept, scope and limitations were explained among the villagers and from the awareness interested artisans were selected for the trainings. Total 183 trainees were trained during the programme. A report about the Skill Development Training Programmes are given below:

SI	Venue	Total no of trainees	M	F	DURATION
1	Behara Bazar	30	5	25	1/9/11 to 10/9/11
2	Tarapur sibbari road	25		25	14/9/11 to 24/9/11
3	Niz Katigorah	30	4	26	15/12/11 to 25/12/11
4	Hailakandi	25	2	23	17/12/11 to 26/12/11
5	Kalian	26	1	25	26/12/11 to 4/1/12
6	Badarpur Rly colony	24	-	24	29/12/11 to 7/1/12
7	Kurkuri	23	2	21	6/1/11 to 15/1/12

#### SYSTEM OF RICE INTENSIFICATION (SRI)

SRI is a sustainable system of agriculture. Deshabandhu Club under sponsorship of Sir Dorabji Tata Trust (SDTT) & Rastriaya Gramin Vikash Nidhi, Guwahati providing technical as well as other supports to the farmers of Cachar, Karimganj and Hailakandi Districts of Assam. The main purpose is to make people aware on the SRI system of cultivation so that the farmers can use their land not for today but for coming generation. SRI is natural farming, which increases productivity without having any adverse affect on the land. For this year

Deshabandhu Club has engaged two master trainers each in these distrits, who have been providing technical support to the farmers. Besides, some inputs are also provided to them like weeder & marker as induction of technologies at the field as well as improved seeds and bio fertilizer so that the farmers are well acquainted with the inputs. The farmers are being benefited by adopting SRI method in the field of agriculture and most of the cases productivity of those lands has increased significantly

#### COMMON FACILITY CENTRE (CFC) FOR ARTISANS:

Assam is rich in handicrafts but the traditional artisans are skipping their indigenous profession as they are finding it difficult to maintain their livelihood with this profession. In the changing environment their expertise are not at par with the demands of the buyers in the national as well as global market. To revive the indigenous handicraft and to create more employment opportunities, 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 started at Deshabandhu Club for proving necessary supports to the group of artisans. The artisans are updated with latest knowledge on design & skills necessary for them to compete with the national & international market. The artisans are trained to be active entrepreneurs. All total 20 people were trained under Technology based Entrepreneurship Development Programme on Jute diversified product at City Office, Silchar.

#### MAHILA MANDAL PROGRAMME:

Deshabandhu club has been running 2centres at Gorervitor & Naraincherra in Kalain Block under mahila mandal programme.

#### SOCIAL COUNSELING ADVOCACY:

Legal Aid Cell is one of the important wings of Deshabandhu Club. It was started in 2004 with an aim to generate legal literacy & to extend legal assistance to people. As per directives of the Honorable Supreme Court of India & under permission of District Session Judge, Cachar the cell was started to address issues like domestic violence against women & child. The cell looks after mantai disputes, cases on violence against women. It is good to share that most of the disputes have been settled down at the legal aid cell & unsettled disputes are referred to the court. Total 19 cases were filed under legal aid cell. During April 2011 - March 2012. A report of the legalaid cell is as follows

Total cases	
Total no of case got settled	15
Total no under Judiciary	10
Total no of case under trial	2
Total no of case unresolved	periodo no Tariff 1 mos

#### **CULTURE:**

Culture is the heart of a healthy nation. India is unique because of its cultural diversity. India's uniqueness lies in the spirit of unity in the land of cultural diversity. North East India is rich in cultural heritage. Various ethnic groups are found in the northeastern states with diverse cultural identity. Around 15 tribal communities stay in this part of the country. In present day, 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. 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 find out local talents in the age group of 7-11 years, 12-17 years, above 18 years age group. The cultural mission with the support of Sarba Siksha Abhiyan Mission conducted street drama at in salchapra & Katigorah block of Cachar district. The organization also runs a music school at Behara Bazar namely Deshabandhu Sangeet Vidyalaya since 1989. Here is report on the performances of the students school:

Total candidate appeared	Total candidate passed		
71	46		

#### **SPORTS**

Sports always remained a very important activity of organization. Deshabandhu Club originally started functioning as "BALAK SAMITY" in 1966 with main purpose of popularizing game of football and doing some social activities. The small club has multi-folded its activities in Barak Valley but the organizers are still well connected with Sports. The Sports events are held quite regularly here.

#### ANTI SUPERSTITION INITIATIVE

The human civilization has crossed 20 centuries. We have come across different stages of civilization. The scientific development has changed our life style 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 but also it is seen in practice among educated people. 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 had 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.

#### **CONSERVATION OF WILDLIFE**

The organization has been constantly working for conservation of rare animal species. The members of the organization are striving hard to make people aware on the conservation of flora & fauna by expressing their significance on environment. The animal lovers of the NGO had saved different rare species snakes like King Cobra & deer from being cruelly killed by people. A King cobra was rescued by members of Deshabandhu Club from human habitation of Behara village. "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" — said a member of the organization. According to local Khasi peoples, the tail of King Cobra has medicinal value.

#### **CHILDLINE SERVICES**

CHILDLINE 1098 is a 24X7 toll free emergency service for children in need of care and protection. Any child/concerned adult on behalf of the child can dial 1098 to avail of emergency assistance. The CHILDLINE service can be understood at three levels – 1098 service, CHILDLINE at the city level and CHILDLINE India Foundation (CIF) at the national level. The CHILDLINE service, 1098, connects callers to one of CHILDLINE's collaborative agencies. When a child or adult calls in, a CHILDLINE team member goes out to the child or alerts a support agency in the vicinity of the child in distress. After the emergency needs of the child have been addressed, CHILDLINE explores options with the child to study, learn a trade, go back home etc. Based on the decision of the child, CHILDLINE links the child to an appropriate organization in the city. Deshabandhu Club has selected by Childline India Foundation (CIF) as Collaborative organization to carry out the services for the needy children. Recruitment of required staffs has completed. 1098 Land line connectivity from BSNL has also already installed. The services will also be started within a short period of time and waiting for getting training to the newly selected staffs.

## FINANCE

Deshabandhu Club

Annual Report-2011-12

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Email:rkpaca@hotmail.com

#### AUDITORS REPORT

We have audited the enclosed Balance Sheet as on 31st March, 2012, Income and Expenditure Account and Receipts and Payments Account for the year ended on 31st March, 2012 of DESHABANDHU CLUB, Bihara Bazar, Cachar, which are in agreement with the Books of Accounts. These financial statements are the responsibility of the management. Our responsibility is to express an opinion on these financial statements based on an audit.

We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purpose of the Audit. In our opinion proper Books of Accounts have been kept by the organization so far as it appears from our examination of the said Books and the said Accounts have been drawn up in accordance therewith.

In our opinion and to the best of information and according to explanations given to us, the said accounts give a true and fair view.

- In the case of Balance Sheet, of the state of affairs of the above named organization as at 31st March, 2012.
- if) In the case of the Income and Expenditure Account, of the excess of expenditure over income of the above named organization for the year ended on 31st March, 2012.
- iii) In the case of Receipts and Payments Account, of the total transactions taking place in connection with the above named organization for the year ended 31st March, 2012.

Dated at Silchar the 31st of August' 2012

SI CHES

FOR R K P ASSOCIATES CHARTERED ACCOUNTANTS

(CA. RAVI RR. PATWA) PARTNER MRN. 056409 FRN. 322473E

BRANCHES IN Guwahati • Kolkata • Indore

LIABILITIES SCH	AMOUNT	ASSETS ASSETS	SCH	AMOUNT
FUND ACCOUNT 'I'	6,202,358.61	FIXED ASSETS	·2·	4,328,898.00
LOAN FROM Rastriya Mohila Kosh Project	716.000.00	INVESTMENTS		91
CURRENT LIABILITIES & PROVISIONS	- mirita	Bank Fixed Deposits	'3'	137,000.00
Corrent Liabilities Thrift Money From SHG's Staff Insurance Claim payable EPF Contrubution from CBR Project payable	185,400.00 14,177.00 24,912.00	& ADVANCES Loans & Advances Receivable with 97 SHG's		792,397.00
Provisions EPF		Current Assets Grant - in - Aid Receivable Refundable Assistance	'4'	1,359,689.00
Employees Contribution Employees Contribution	10,779.00 9,504.00	A.Y. 2012-13		7,870.00
		Cash at Bank Cheque in Hand	.2.	377,751.99 155,000.00
	7,163,130.61	Cash in Hand	.2	4,424.62 7,163,130.61

IN TERMS OF OUR REPORT ON EVEN DATE

FOR R K P ASSOCIATES CHARTERED ACCOUNTANTS

CHARTERED A

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

Dated at Silchar the 31" of August' 2012



INCOME & EXPENDITURE ACCOUNT FOR THE YEAR ENDED ON 31ST MARCH,2012

EXPENDITURE		SCH	AMOUNT	P	NCOME		SCH	AMOUNT
To Expenditure incurred for		230	E-50 255	F	ly Grant - in - Aid			
various Programmes		'6'	6,920,589.00		y Glant - III - Ald		4	5,034,832.00
* General Stuff Salary					Membership Subscription	s		2,050,00
October State Salary			113,400.00	6				2,050.00
* Telephone Charges			" Lange In	1	Donations		'8'	332,500.00
, empriorie Gelatges			47,517.00					
* Electricity Charges					Toos Charges Receipts			
Districting Configura			42,967.00		from Various Program	nmes	.9.	1,219,644.00
* Audit Fees			32,539.00		Fees Received from Desha			
22 5			3-15-15-100			Niketan		
<ul> <li>Amount Expended For R Mahilis Kosh (RMK) Pro</li> </ul>	astiriya				Tution Fees	314,760.00		
Interest on Loan	80,556,00				Admission Fees	121,500.00		436,260.00
Loan Overdue	141.00				7			100000000000000000000000000000000000000
Staff Salary	68,000.00				Amount Received from SH	Gs under		
Office Expenses	1,270.00		149,967.00		Rastiriya Mahila Kosh (RN Service Charges	(K) Project		122 000 00
* Staff Insurance					Contraction and a			123,990.00
			17,850,00	-	Land Rent			360,000.00
* Water Charges			560,00	**	House Rent			
Back Mr.					Houge Ren			228,500.00
* Bank Charges		7	2.379.00	*	Amount Received from T11	Project		
* Office Expenses			2 000 00		Electricity Charges	18,000.00		
			2,000.00		Telephone Charges	12,000.00		30,000.00
* Expenses Incurred for Des					Bank Interest			TOTAL COLUMN
Staff Salary Vidys	Niketan						.10.	32,494.00
Examination Exp.	408,000.00			#	VHSC Expense Refunded			38,600.00
Printing & Stationery	8,000.00		426,000.00		e 20			30,000,00
The second second			420,000.00		Excess of Expenditure over	Income		438,752.11
EPF Contribution ( Emplo	yer)		32,337.00					
Depreciation		101						
		.5.	489,517.11					
			8,277,622.11					8,277,622.11
		1000					-	The state of the s

IN TERMS OF OUR REPORT ON EVEN DATE

FOR R K P ASSOCIATES CHARTERED ACCOUNTANTS

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

Dated at Silchur the 31st of August' 2012



DECEMPTS AND PAYMENTS ACCOUNT FOR THE YEAR ENDED ON 31ST MARCH' 2012

REC	CEIPTS		SCH	AMOUNT	PAY	MENTS	SCH	AMOUNT
To	Opening Balances				By	Expenditure incurred for,	Avai	1.0000000000
	Cash in Hand	4,575.62				Various Programmes	.6.	6,920,589.00
	Cash at Bank	124,484.99		129,060.61	1			77.07.000
					*	General Staff Salary		113,400.00
-	Grants - in - Aid received		'4'	4,976,492.00				1
					*	Telephone Charges		47,517.00
	Membership Subscription			2,050.00				0.000000
						Electricity Charges		42,967.00
-	Donation	-	.8.	332,500.00				
						Audit Fees		32,539.00
*	Fees/ Charges/ Receipts fr	om						
	Various Programmes		.9.	1,219,644.00		Expenditure Incurred for Deshab	andhu	
						Vidy	Niketan	
	Fixed Deposit Matured		-	395,000.00		Staff Salary	408,000.00	
	THE REPORT OF THE PARTY OF THE					Examinitation Exp.	10,000,00	
*	Fees recived from Deshab	andhu Vidva N	Viketan			Printing & Stationery Exp.	8,000.00	426,000.00
	Tution Fees	314,760.00						
34	Admition Fees	121,500.00		436,260.00	) "	Amount Expended For Rashtriya		
	34					Mahila Kosh (RMK) Proje	l2	
	Amount Received from S	HG's Under				Loan Refunded	376,000.00	
	Rashtriya Mahila Kosh (R					Interest on Loan	80,556.00	
	Service Charges	123,990.00				Loan Overdue	141.00	
	Loan Recoverd	395,089.00		519,079.00	)	Staff Salary	68,000.00	
			WAY.			Office expences	1,270.00	525,967.00
	Land Rent			360,000.00	)			
	Talliu scom					Staff Insurance		17,850.0
	House Rent			228,500.00	0			100
	Nouse 1411				*	Fixed Assets Purchased	'2	44,300.0
. 16	Amount Received from T	I Project						
	Electricity Charge	18,000.00				Water Charges		560.0
	Telephone Charge	12,000.00		30,000.00	0	CONTRACTOR OF THE PARTY OF THE		
	retepriorite Crimigo	111,000.00	*	1 1 2 2 3 3 3		Refund of Thrift Money to SHO	s	5,600.0
	Staff Insurance Claim Re	basisan		14,177.00				
	Start insurance Citum Re	CEITCU				TDS deduction from		
	Bank Farrage		10	32,494.0	0	Dist Level Training of PE	3,550.00	
- 5	Bank Interest		10	32,474,0	70	PPTCT Project	4,320.00	7,870.0
	ene ()	ad Com Profe		28,512.0	0	Trial rispect		1 0000
-	EPF Contribution Receiv	ed from Staff		20,312.0				
	Balance c/d			8,703,768.6	1	Balance c/d		8,185,159.0



RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR ENDED ON 31ST MAR

RECEIPTS	SCH	AMOUNT	PAYMENTS		SCH	AMOUNT
Balance b/d	KIM P	8,703,768.61	Balance b/d	Larger Sett 1	TOIL	8,185,159.00
* EPF Contribution Received from			* EPF Paid			
CBR Project		24,912.00	Employers Contribution Employee Contribution	21,558.00 19,008.00		40,566.00
* VHSC Expenses Refunded		38,600.00		17,000.00		40,200.00
			" Bank Charges		.7.	2,379.00
			Office Expenses			2,000.00
			" Closing Balances			
The state of the s			Cash in Hand	4,424.62	'5'	
			Cheque in Hand	155,000.00		
	-		Cash at Bank	377,751.99	'5'	537,176.61
	TO PA	8,767,280.61				8,767,280.61

IN TERMS OF OUR REPORT ON EVEN DATE

FOR R K P ASSOCIATES CHARTERED ACCOUNTANTS

> (CA. RAVIER PATWA) PARTNER MRN. 056409 FRN. 322473E

Dated at Silchar the 31" of August' 2012



#### NOTES ON ACCOUNTS

 The financial statements are prepared on historical cost basis and conform to the statutory provisions, prevailing practices and Accounting Standards. However, except Grant - in - Aid and depreciation, all expenditures and incomes are accounted for on Cash basis.

#### 2) Fixed Assets:

- i) All Fixed Assets are stated at cost less depreciation.
- ii) Capital work-in-progress are stated at cost, incurred relating to Assets-in-progress.
- Depreciation on Fixed Assets are provided for on Written Down Value method at the rates prescribed under the Income Tax Rule, 1961. No Depreciation has been provided on land.
- 4) Interest on Investment is accounted for on Cash basis.
- Loan overdue of ₹ 141/- under Rastriya Mohila Kosh represents charges deducted by the concerned bank at the time of repayment of Loan to Rastriya Mohila Kosh A/c.
- 6) Employer's contribution to EPF includes administrative charges and other charges.
  - 7) VHSC Expense Refunded represent VHSC Training expenses of the previous year 2010-11 which was not expended during that year has been taken as income of this year.
  - 8) The club has made own contribution in the below mentioned projects during this year:-

SL No	Name of Project/Programme	Amount Contributed
1.	Community Care Center	2,84,900.00
2.	Mohila Mandal Programme	16,834.00
3.	Aspiration Day Care Center	83,723.00
4.	Community Based Rehabilitation (FCRA)	86,683.04
5.	Training Programme on Water Hyacinth Craft	1,691.00
6.	NRHM Streetplay & Flim Screening	2,455.00



## GOVERNANCE

#### LEGAL STATUS

Registered under SR Act XXI of 1860; Foreign contribution regulation Act, 1976 PWD Act 1995; SECTION 12 (A) & 80 (G) of IT Act. 1961.

#### **DECISION MAKERS**

The Executive body, elected by the general body annually is responsible for all sorts of organization planning, execution, assessment, monitoring of all programme & activities.

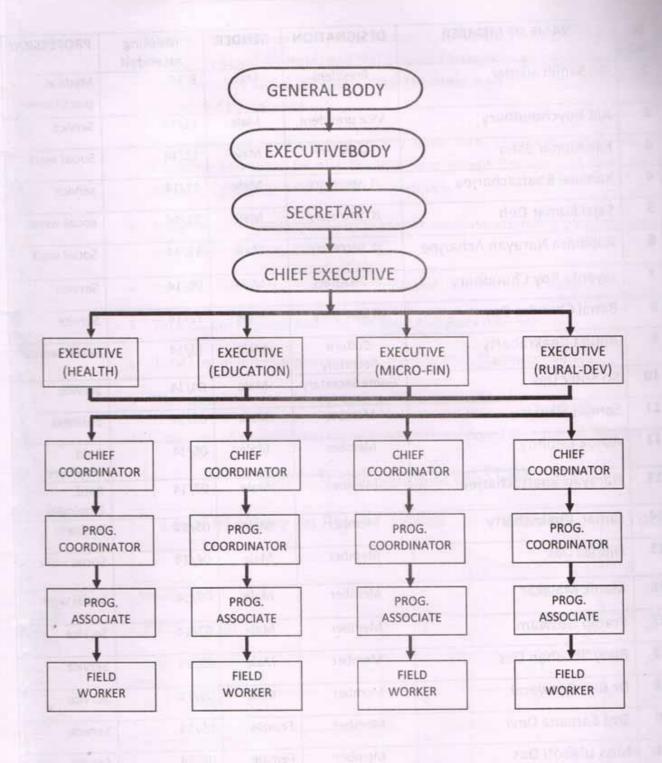
#### HUMAN RESOURCES .

A group of youth from diverse background with expertise & commitment are working consistently towards attainment of organization goal.

#### LEGAL COMPLIANCE

- The Alliance followed a rigorous audit process. The statutory auditor withat fixed remuneration was appointed in the Annual General Body Meeting. Auditor's reports and financial statements are shared at length in the Annual General Meeting.
- Credibility Alliance complies with statutory requirements of Income tax
   Act, 1961 and Joreign Contribution Regulation Act, 1976.

#### ORGANOGRAM OF DESHABANDHU CLUB



#### LIST OF EXECUTIVE BODY

SL. NO		DESIGNATION	GENDER	Meeting attended	PROFESSION
1,	Dr. Sanjib Sikidar	President	Male	8/14	Medical
2	Ajit Roychoudhury	Vice president	Male	11/14	practitioner
3	Kali Kumar Saha			11/14	Service
100		Secretary	Male	12/14	Social work
4	Kanailal Bhattacharjee	Jt .secretary	Male	11/14	service
5	Sajal Kumar Deb	Jt. Secretary	Male	11/14	social work
6	Rabindra Narayan Acharjee	Jt. secretary	Male	11/14	Social work
7	Jayanta Roy Choudhury	Jt Secretary	Male	09/14	Service
8	Bimal Chandra Dey	Jt Secretary	Male	12/14	Service
9	Abhijit Chakrabarty	Culture Secretary	Male	13/14	Social service
10	Sri Subir Das	Game Secretary	Male	04/14	Service
11	Sambit Sikidar	Member	Male	09/14	Business
12	Ashok DebRoy	Member	Male	05/14	Retd
13	Narayan Bhattacharjee	Member	Male	07/14	Retd.
14	samar Chakrabarty	Member	Male	05/14	Employee Business
15	Nibhas Das	Member	Male	06/14	Social work
16	Manik Malakar	Member	Male	09/14	Social work
17	Pradip Goswami	Member	Male	03/14	F 2 7 2 2 2 2 2 1
18		77.3 SOEAP (200.44)			Service
	Bijoy Bhushan Das	Member	Male	08/14	Service
9	Dr.Bijit Goswami	Member	Male	09/14	Service
0	Smt Kamana Devi	Member	Female	05/14	Service
1	Miss Lilaboti Das	Member	Female	08/14	Service

#### **Transparency Disclosures**

- Among the abovementioned EB members, Dr Sanjib Sikidar & Shri Sambit Sikidar are related by blood (brother) and Shri Rabindra Narayan Acharjee & Smt Kamana Devi are also related by blood (brother-sister). The other members are neither related by blood nor related by marriage.
- No remuneration, sitting fees or any other form of compensation was paid to any Executive Members for the financial year except Secretary, 2 Joint Secretaries Rs. 19500/-, 18600/- and Rs. 12000/- respectively.
- Travel reimbursement made to Executive members attending Committee meetings and other office meeting: Nil
- Remuneration of the three highest paid staff members Rs. 15000/-
- Total cost of national travel by the Executive Body members: Nil
- Total cost of international travel by the Executive Members: Nil
- · Remuneration of the lowest paid staff member is Rs. 1500/-
- Total cost of international travel by all staff and board members during the year: Nil

#### Salary Distribution as on 31.03.2012

Level of salary (in Rs)	Men	Women	Total
Up to 2000/-		18	18
2001/- to 3000	8	17	25
3001 – 4000	9	11	20
4001 – 7000	9	7	16
More than 7000	6	1	7
Total	32	54	86

### LIST OF OUR PARTNERS

.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
5	Assam State AIDS Control society
6	Assam State Social welfare Board
7	National Rural Health Mission, Assam
8	Rasthriya Mahila Kosh
9	SSA, Assam
10	UNICEF
11	CBCI 4
12	NABARD
13	IL&FS
14	Centre for Microfinance & Livelihood, Guwahati
15	NEDFI
16	The National Trust
18	Deptt of social welfare, 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
29	Nehru Yuva Kendra Sangathan
30	Assam Gramin Vikash Bank
31	Community Based Rehabilitation Forum, Bangalore





hichen Itza

wall of China



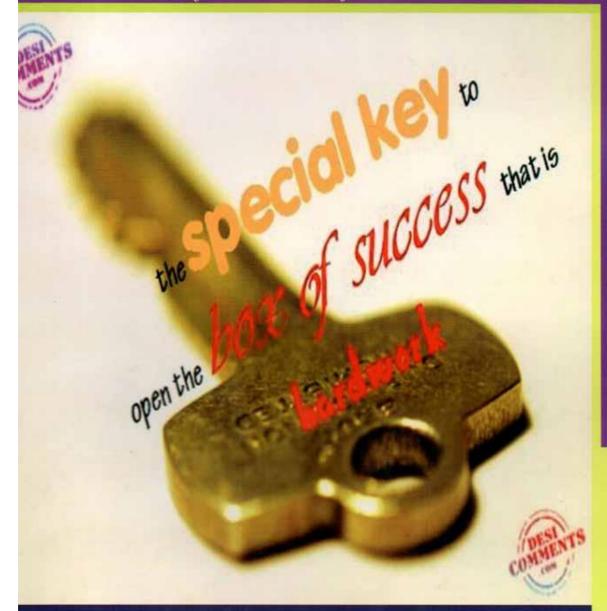
Taj mahal



Colosseum



Christ the Redeemer





Machu picchu



Petra Jordan



Every situation has three dimensions; may views, your views and the truth. success goes with the one who follow the third dimension....

INVIEW DY Said Kunar Deb & Swarup Saha
Edited By Said Kunar Deb & Swarup Compiled by: Mousumi Roy &

Printed By: Usha Quality Printing, Silchar-2