PD-ABX-365

Annual Report

September 1, 1997 to September 30, 1998

Cooperative Agreement
No. 388-A-00-96-90024-00

Rural Service Delivery Partnership

Pathfinder International
BRAC
Bangladesh Center for Communication Program

November 1998

A

TABLE OF CONTENT

		PAGE
I.	EXECUTIVE SUMMARY	01
II.	BACKGROUND OF RSDP AND ITS UTILIZATION OF SERVICE DELIVERY POINTS	05
III.	PERFORMANCE ANALYSIS ON NIPHP INDICATORS	07
IV.	PROGRESS OF THE IR ACTIONS	13
V.	ADMINISTRATIVE ACTIONS	15
VI.	ISSUES NEED TO BE RESOLVED	18
VII.	COLLABORATION WITH GOB	19
VIII.	CUSTOMER FEEDBACK	22
IX.	LIST OF MANUALS, REPORTS AND PROTOCOLS	24
X.	STAFF TRAINING	25
XI.	LESSONS LEARNED IN IMPLEMENTING THE WORKPLAN	26
XII.	DESCRIPTION OF THE SPECIAL INITIATIVES	28
XIII.	SUCCESS STORIES	31
XIV.	BCC ACTIVITIES	33
XV.	PIPE LINE ANALYSIS	35

Attachments

A. A map showing the location of RSDP
B. Explanation of RSDP Indicators
C. RSDP Monthly Performance Report of September 1998
D. List of the Task Forces
E. Detail progress towards each of the major actions
F. GOB Circulars related with RSDP
G. A list of IEC materials distributed in RSDP thanas

I. EXECUTIVE SUMMARY

This annual report on the activities and accomplishments of the Rural Service Delivery Partnership (RSDP), supported by the Cooperative Agreement No. 388-A-00-96-90024-00 with USAID/Dhaka, covers the period from September 1997 to September 1998. The activities, accomplishments and trends in progress, reported here, relate to RSDP's contribution to the achievement of the strategic objectives of the National Integrated Population and Health Program (NIPHP). This reporting period refers to the first year of the seven-year long NIPHP activities.

Dr. M. Alauddin and his colleagues of the RSDP take the opportunity to express their sincere appreciation to USAID/Dhaka for financial commitment and generous support to carry out this important work in Bangladesh.

During this beginning year, RSDP's focus was on setting up a strong foundation of a new program with a goal of a major shift from offering only FP-MCH services to a more comprehensive reproductive and child health services commonly known as Essential Services Package (ESP), and from delivering services at home to provision of services from static service delivery points. Under this new shift, families shall receive services from tiered service delivery points – clinics, satellite clinics and depots.

During the first year of the Cooperative Agreement, the RSDP had accomplished and achieved its goals almost entirely, and, in some areas even achieved beyond the workplan. Highlights of achievements during the reporting year include the following:

Through a rigorous process, RSDP selected 20 NGOs for funding to implement RSDP in 171 thanas. The RSDP's highest priority was given to thanas of low performing Sylhet and Chittagong Divisions. The thanas were selected based on the performance indicators of family planning, maternal and child health.

Pathfinder signed 17 sub-grants with NGOs and sub-contracts with BRAC and BCCP. BRAC signed two sub-grants with NGO on behalf of RSDP. The NGO leaders and managers were oriented on RSDP vision. They were prepared to take the challenge of implementing the transition from home to static, from narrow FP-MCH services to a comprehensive ESP, from focusing only eligible couples to families including males, adolescents and children.

To set a stage for transition without disruption in service delivery, RSDP assisted NGOs, as rapidly as possible, in setting up their infrastructures – 171 thana offices, 159 static clinics, 4,550 satellite clinic spots and 9,348 depots. RSDP recruited 2,116 staff for four different tiers – at NGO coordinating offices and at thana, union and village levels. RSDP provided ESP services through its 159 static clinics, 4,550 monthly satellite clinics, and 9,348 depot-holders. As per goal, almost half of satellite clinics have been merged with EPI centers.

RSDP developed several management and administrative manuals and guidelines to facilitate NGOs in managing implementation of RSDP programs.

In order for technical assistance (TA) to be readily available at the field for the NGOs, RSDP set up five TA Units, initially with two staff. The RSDP TA Units' capability was upgraded with technical skills of physicians. Another IEC staff will be added to complete the field TA requirements for the NGOs.

The RSDP rapidly progressed to acquire infrastructural, staff capability and quality standards to deliver ESP. As planned, 159 clinics are functional – 121 of them received approval from DG/FP, 20 received recommendation from DTC while the rest 18 are in process of receiving DTC recommendation.

RSDP oriented 20 NGO Project Managers, 20 NGO Accounts staff, and 171 Thana Managers on RSDP program and financial management. Forty physicians, 345 FWVs and 419 Community Mobilizers were also trained. Of the 9,348 depot-holders recruited, about 40 percent completed their training, another 30 percent are being trained, and the training of the rest will be completed by March 1999. Besides, RSDP in collaboration with Carolina Consulting Corporation completed team training of 64 GOB-NGO staff for 16 thanas. Successful working partnerships with government in these 16 as well as in other RSDP thanas has bee established.

The RSDP NGOs cover 1.49 million families in 171 thanas. These families have 9.40 million people of all ages and sexes, 1.87 million ELCOs, 1.2 million under-five children and 0.25 million under-one children. There were 0.28 million pregnancies in the year.

Over the last 13 months, a total of 2.2 million customers had contacted RSDP service delivery points. On an average, 181,200 customers contacted RSDP service delivery points per month. Of the services offered, 58 percent relate to family planning, 25 percent relate to child health, 11 percent relate to maternal health, 6 percent relate to general health and one percent services relate to RTIs/ STDs.

Utilization of ESP services offered from different RSDP service delivery points was impressive. In total, the RSDP served 1.87 million ElCOs – close to its objective of serving 2.2 million couples. As of September 1998, a total of 235,755 customers received family planning supplies and services directly from RSDP service delivery points. During the first six months, RSDP distributed an average of 66,859 cycles of pills per month, during the last six months the average pill distribution almost doubled, to 142,604 cycles per month. Condom distribution increased three times from 64,614 pieces to 213,125 pieces per month. Injectables use increased more than double from 7,829 doses to 16,309 doses. IUD acceptance increased nearly two and half times from 636 to 1540.

In addition to direct services, RSDP referred 36,496 clients for injectables, 3,832 for IUDs, 835 for norplants and 2, 557 for sterilizations to the nearest government or NGO facilities.

RSDP clinics provided services to 15, 888 customers in the areas of counseling and treatment of contraceptive side effects. Of the customers who received services for side effects, 58 percent were pill users, 35 percent injectable users and the remaining 7 percent were IUD users.

It is estimated that there were 283,789 pregnancies in the RSDP areas. Of them, 24 percent came to RSDP service points for Ist ANC visit, 15 percent for 2nd visit and 3 percent came for 3rd ANC visit. After delivery, 15,084 mothers made PNC visits. RSDP also provided TT2+ to 83,731 pregnant women meaning that 30 percent of the pregnant women completed immunization by the RSDP initiatives.

Of the 253,719 children under one year of age in the RSDP NGO areas, 68,792 children received BCG, 38,332 received DPT-1, 41,764 received DPT-2, and 75,927 received DPT-3. RSDP provided 61,380 children with measles vaccination. Also, 57,793 children under one received 1st dose, 51,701 received 2nd dose and 47,247 received 3rd dose of Vitamin-A.

Of the 1.2 million children less than 5 years of age in the RSDP areas, 85,029 received ORS for diarrhea, 5,654 received treatment for dysentery, 3,599 received treatment for ARI and additional 17,781 children received treatment for common cold.

RSDP clinics provided STD/RTI services to 13,758 customers - 12,015 females and 1,743 males.

RSDP continued to focus on newlywed couples as a special group in the new service delivery design. RSDP NGOs organized 2,318 orientation meetings where 8,977 congratulatory letters, signed by the honorable Minister, Ministry of Health and Family Welfare, were distributed to the newlyweds. RSDP supported BRAC to run 175 "Kishore-Kishory" schools. Through these schools, a total 5,250 adolescents were exposed to FLE program. In the newlywed orientation meetings, adolescent boys and girls also attended.

RSDP produced and distributed initial IEC materials towards community mobilization activities. Towards long-term, RSDP initiated BCC strategy development through BCCP.

With regard to sustainability goals, the NGOs recovered and shared 5.6 percent of their operating cost. At least 135 thanas have introduced revolving funds out of revenues generated in the last FPHSP program.

Beyond the workplan, RSDP responded to critical needs and opportunities of the program. RSDP conducted a rapid survey to assess the changes of the continuation pattern and of supply sources of pills and condoms with the introduction of the new delivery system of serving from static delivery points by replacing domicilary system. Based on the findings, a plan for selective visitation is underway. RSDP worked with RPM/MSH on Rational Drug Use (RDU) including staff training. A situation analysis was done on NGO Drug Revolving Fund activities. RSDP supported the GOB on health policy development and a study tour of GOB officials to Turkey in collaboration with the World Bank.

RSDP played a key role, along with QIP, in developing RTI/STD and Maternal Health Service Delivery Standard and Technical Guidelines, Standard Treatment Guidelines, Rational Drug Use Curricula and in conducting both RDU and RDF training. RSDP worked with ORP in developing MIS and in identifying OR topics. RSDP also collaborated with NIPHP Partners for cross over activities.

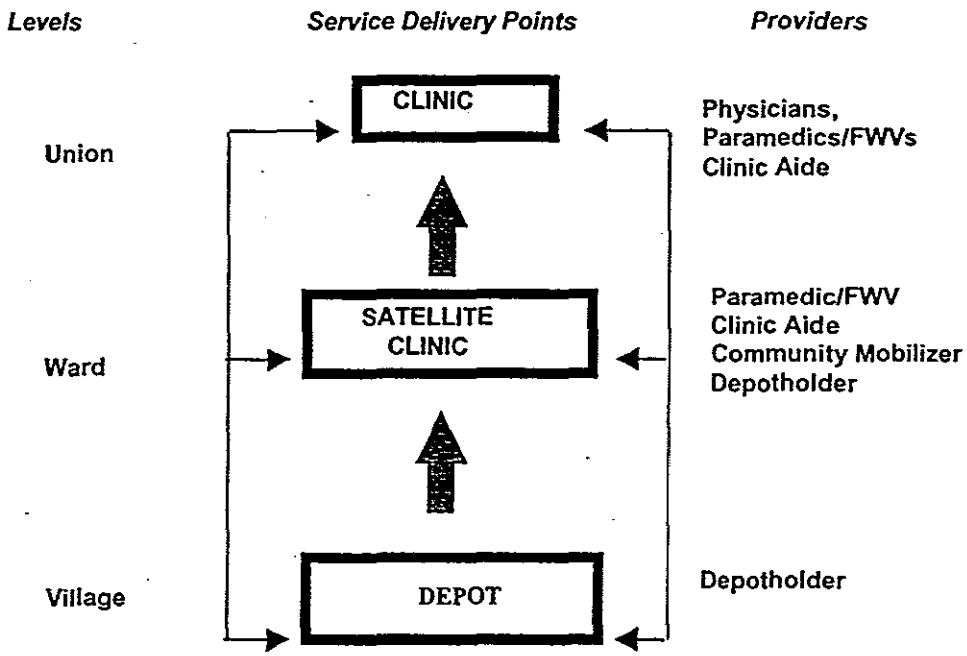
The RSDP's ability to respond quickly and effectively was most apparent during the recent flooding in Bangladesh. The RSDP NGOs deployed emergency medical teams, distributed oral rehydration salts (ORS) and medicines, and organized mobile satellite clinics on boats to assist in the transfer of seriously ill patients to nearby hospitals. NGOs also worked with local GOB medical teams and contributed drugs and food supplies to residents affected by the floods. To address post-flood health care needs during FY99, RSDP plans to launch special "catch-up" campaigns for children and pregnant women who have missed immunization shots.

The new RSDP service delivery design has been found be working well. RSDP is happy to see the encouraging response from the community in seeking services from different service delivery points. There is an evidence of increasing customer flow in all of the three types of service delivery points. Customer flow will further improve as community mobilization work progressively intensifies and correspondingly ESP is fully in place.

II. BACKGROUND OF RSDP AND ITS UTILIZATION OF SERVICE DELIVERY POINTS

The 20 RSDP NGOs[1] serve parts of 171 (out of 409) rural thanas. Seven of these 20 NGOs collaborate with other 15 NGOs at grass root level. In terms of family planning, maternal and child health indicators, 96 thanas are low performing, 73 are high performing and the remaining two are STD/RTI high risk thanas. A map showing the location of RSDP Thanas is attached in Appendix A. In accordance with the workplan, the NGO clinics were setup and made functional in phases. The RSDP NGOs deliver services through a three-tier structure. The bottom tier provider is the Depot-holder, the second is Satellite Clinic and third is Static Clinic as shown in **Figure 1**.

Figure 1: RSDP Service Delivery Structure



Static Clinics: RSDP completed set-up of all of its planned 159 static clinics. GOB policy requires District Technical Committee approval for offering clinical services. DG/FP has given approval for 120 out of 159 static clinics; of the remaining 39, 11 clinics have received DTC recommendation while another 28 is in process of getting DTC recommendation. Client flow in the static clinics is increasing. During September 1997 – March 1998, static clinics served in total 59,338 customers which has increased to 180,862 customers in April-September, 1998 period - a three time increase over six months.

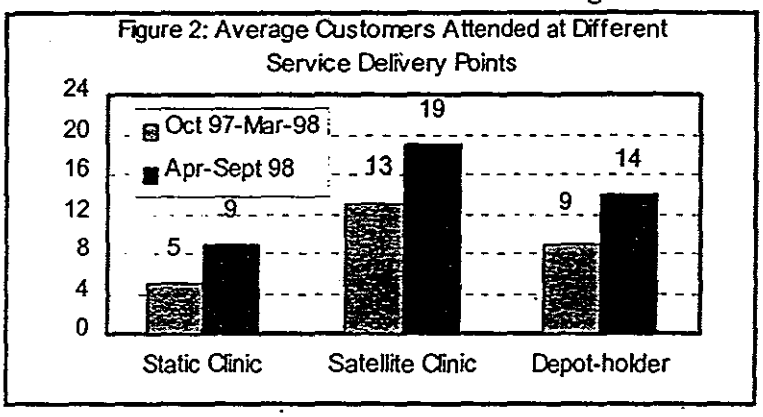
RSDP static clinics are not equipped to offer services on sterilization and contraceptive related major complications and EOC. RSDP NGOs refer such cases to the nearly Thana Health Complexes and Maternal and Child Health centers.

[1] *Out of 20 NGOs, one was defunded in September 1998.*

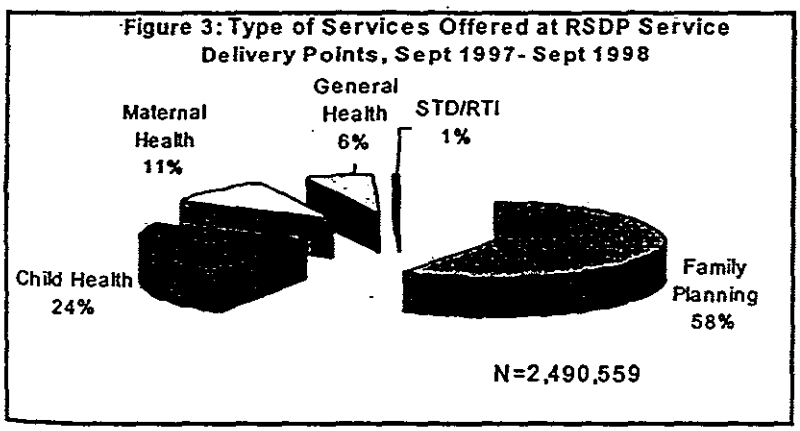
Satellite Clinics: To ensure ESP at the community level, RSDP planned to organize 5,000 satellite clinics per month. As of September 1998, it organized 4,550 satellite clinics, reaching 91 percent of the objective. This performance is much higher than monthly average of 288 satellite clinics during the last six months of USAID supported FPHSP program in 1996. During September 1997 – March 1998, satellite clinics served 261,664 customers that increased to 553,501 customers in April-September, 1998 period – two times increase over the first six months.

Depot-holders: RSDP recruited 9,348 depot-holders out of planned 10,600 depot-holders. During September 1997 – March 1998, depot-holders served in total of 296,582 customers which increased to 820,830 customers during April-September, 1998. This reflects nearly 3 times (2.76 times) higher coverage of customers over the first six months.

It has been observed that as community mobilization activities intensified, the client flows in the satellite as well as static clinics increased. **Figure 2** shows that average client flow in the three types of service delivery points increased over the performance of the last Semi-annual period. On an average, static clinic served 5 customers per day in the first six months, which increased to 9 customers per clinic in the last six months. Similarly, average attendance per satellite clinic increased from 13 to 19 customers while average monthly customer contact per depot-holder increased from 9 to 14. It is expected that, with the completion of depot-holders' training and introduction of depot-holders' honoraria of Tk 200 per month, their performance will further improve.



During the year, a total number of services offered were 2,490,559 from static clinics, satellite clinics and depot-holders. As **Figure 3** shows, 58 percent services offered relate to family planning, 25 percent relate to child health, 11 percent relate to maternal health, 6 percent relate to general health and one percent of services offered relate to STD/RTI.



As per RSDP strategy, wherever feasible, the NGOs will merge satellite clinics with EPI centers so that more components of ESP can be offered from the same service delivery point. During the year, RSDP was successful in merging 2,231 of 4,550 satellite clinics (about 50 percent) with EPI centers.

III. PERFORMANCE ANALYSIS ON NIPHP INDICATORS

RSDP outputs measured by major NIPHP indicators are very encouraging. For almost all indicators, RSDP achieved its goals set for the first project year. **Table 1** shows different NIPHP indicators -- baseline and objectives of the future years. Expected status for the next year and the seventh year of the program is also included in the table. Explanation on each of the indicators of the table is attached in Appendix B and the Monthly Performance Report for the Month of September 1998 is attached in Appendix C.

Table 1: NIPHP Indicators: Baseline, objectives and achievements

SL	Indicator	Baseline[2] (Jul-Dec 96)	Objective[3] (Sept97-Sept98)	Achievement Sep97-Sept98[4]	Objective for the Next Year (Oct98-Sep99)	Expected Status (2004)[5]
1	**Eligible couples in the direct service delivery areas**	884,352	2,200,000	1,873,923	2,200,000	2,500,000
2	**Contraceptive distribution**					
	Pills per month	150,744	139,316	142,604	289,547	384,533
	Condoms per month	334,181	156,852	226,111	247,500	495,000
	Injectables per month	9,213	1,3857	16,309	32,081	38,249
	IUDs per year	1,114	1,854	2,176	5,651	8,044
	Tubectomies per year[6]			42	50	75
	Vasectomies per year			5	10	15
3	**FP users referred[7]**					
	Monthly inject. referred	7,522		6,653	2,919	2,057
	Yearly IUD referred	3,218		3,832	2,439	1,355
	Yearly ster. Referred	1,416		2,557	2,276	3,958
4	**Side effects management (annual)**					
	Pills	960		9,211	12,110	15,765
	Injectables	2,359		5,532	7,446	8,797
	IUDs	604		1,145	1,061	1,622
5	**Child imunization (annual)**					
	Measles dose (under-one)	12,292	86,537	61,380	74,623	203,518
	DPT1 dose[8]			38,332	80,593	213,693
	DPT2 dose			41,764	77,608	173,126
	DPT3 dose		96,804	75,927	76,116	196,734
	BCG dose		129,072	68,740	87,920	220,477

[2] *Baseline refers to an average performance of July-December 1996 of Pathfinder supported CBD program.*
[3] *There were no specific objectives for 1998 against the indicators in gray cells.*
[4] *All the indicators are cumulative annual performance except for pills, condoms and injectables. Pill, condom and injectable performance is average monthly distribution of April-September, 1998. However, in all the three cases, performance of September 1998 was much higher than monthly average. In September 1998, RSDP distributed 157,628 cycles of pills, 251,402 pieces condoms and 18,378 doses of injectables.*
[5] *EICO coverage objective for 2004 has been changed from 3.7m to 2.5m per discussion with USAID*
[6] *Only on RSDP supported clinic (Sreemangal) perform VSC*
[7] *As per RSDP-MIS, referrals refer to outside of RSDP service points.*
[8] *Information on DPT1, DPT2 and TT1 was obtained beginning August 98 with RSDP introduction of new MIS*

SL	Indicator	Baseline[2] (Jul-Dec 96)	Objective[3] (Sept97-Sept98)	Achievement Sep97-Sept98[4]	Objective for the Next Year (Oct98-Sep99)	Expected Status (2004)[5]
6	**Vitamin A distributed among 1-4 years children (during semi-annual campaign)**			47,247	338,291	640,704
7	**CDD (annual)**					
	Under-5 children treated for diarrhea in plan A (no dehydration)	4,845	22,955	49,273	38,369	58,134
	Under-5 children treated for diarrhea in plan B (some dehydration)			35,756	26,663	40,398
8	**Under-5 children treated for ARI/Pneumonia (annual)**		3,012	3,599	7,281	19,253
9	**Pregnant women received ANC visits (annual)**					
	ANC1	14,587	14,947	67,228	100,161	265,578
	ANC2		11,324	42,316	84,469	227,638
10	**Pregnant women received TT (annual)**					
	TT1			30,012	83,467	227,638
	TT2+	11,324		83,731	100,161	246,608
11	**PNC Services (annual)**					
	PNC1	4,251		15,084	20,797	62,390
	PNC2+			8,940	10,398	31,195
12	**STD/RTI cases treated (annual)**					
	Females:					
	Vaginities syndrome	749		6,729	11,364	22,729
	Other syndromes			5,286	9,039	18,078
	Males:					
	Urethral Discharge			1,298	2,001	4,002
	Genital Ulcer			445	511	1,021
13	**NGOs cost recovery**					
	NGO program cost during this period ($)	2,744,060		3,421,628	5,781,142	4,370,340
	Service charge and profit from Revolving fund ($)	81,789		89,655	157,152	472,333
	Community contribution ($)	626		103,540	187,813	289,762
	Total program revenue during this period ($)	82,415	167,000	193,196	344,965	762,095
	Percent	3.0%	3.4%	5.6%	6%[9]	17.4%
14	**Satellite clinics organized per month**	288	5,000	4,550	7,356	11,349

[9] *This estimate is on the higher side, during post-flood period at a minimum of first 6 months of FY99 program revenues cannot be expected.*

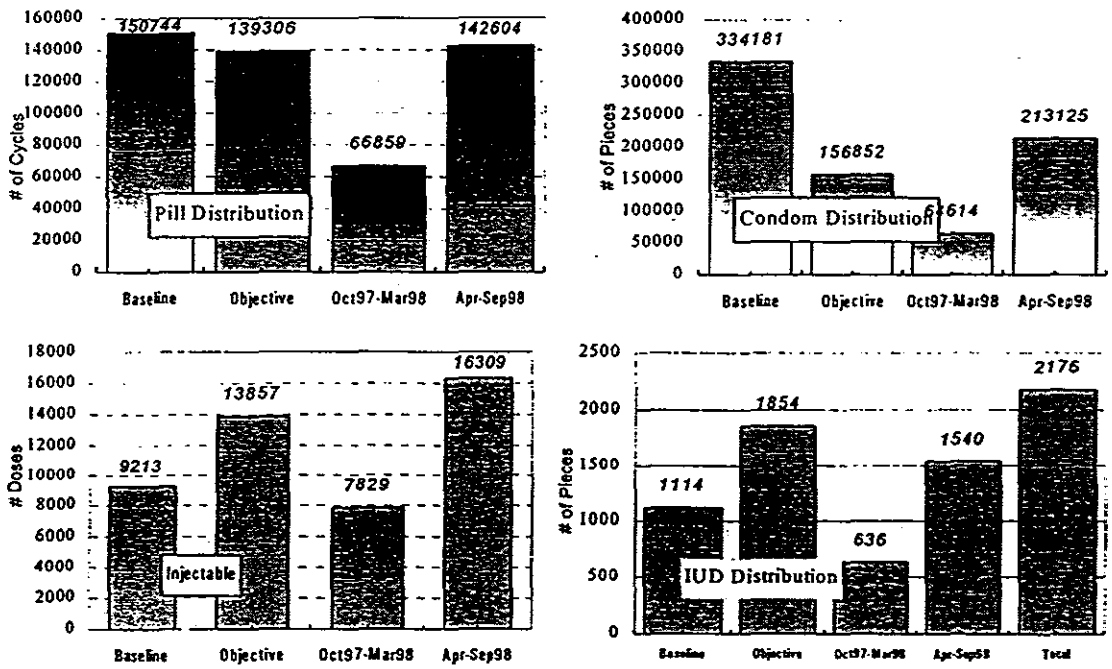
i. ELCOs Covered and Customers Contacted

As of September 1998, RSDP covered 1.87 million ELCOs, which is 85 percent of the objective of 2.2 million ELCOs.[10] In this reporting period, 2,174,406 customers were contacted -- 11 percent through static clinic, 38 percent through satellite clinics and remaining 51 percent were through depot-holders. Of the total customers contacted, 17 percent were males and 83 percent were females.

ii. Family Planning

Distribution of contraceptives from different service delivery points were on the increasing trend during this period. **Figure 4** shows pill, condom, injectables and IUD distribution trends in RSDP. In the first six months, RSDP, on average, distributed 66,859 cycles of pills per month, which almost doubled to 142,604 cycles during the last six months. Condom distribution increased three times from 64,614 pieces to 213,125 pieces. Injectables use increased more than two times from 7,829 doses to 16,309 doses and IUD acceptance increased nearly two and half times from 636 to 1540.

Figure 4: Contraceptive Distributed by RSDP as Against Baseline and Objective for 1998



As of September 1998, a total of 235,755 customers received family planning supplies and services from RSDP service delivery points; 25 percent of the customers were clinical method users and the remaining 75 percent, were non-clinical method users.

[10] *RSDP has planned to cover 2.2 million ELCOs at the end of the second year. The additional coverage will be made through expanding additional areas in the existing thanas and fully functioning 5 BRAC Thanas where service delivery will start next year.*

In addition to direct services, RSDP referred in total 36,496 clients for injectables, 3,832 for IUDs, 835 for norplants and 2,557 for sterilizations, to the nearest government or NGO facilities.

RSDP clinics provided services to 15,888 clients for the management of contraceptive side effects. Of the customers who received services for side effects, 58 percent were for pill use, 35 percent for injectables use and the remaining 7 percent were for IUD use.

iii. Pregnancy Care

There were an estimated number of 283,789 pregnancies in the RSDP areas.[11] About one-fourth of them (24 percent) came to RSDP service points for Ist ANC visit, 15 percent came for 2nd ANC visit and 3 percent came for 3rd ANC visit. After delivery, 15,084 mothers came for PNC visit. RSDP also provided TT2+ to 83,731 pregnant women, which means that 30 percent of the pregnant women completed immunization by the RSDP initiatives. TT immunization performance was accomplished by RSDP NGO static and satellite clinics organized by either RSDP service providers alone or combined with GOB staff.

iv. Child Health Services

There were an estimated number of 253,719 children under one year in the NGO areas.[12] Of them, 68,792 children received BCG, 38,332 received DPT-1, 41,764 received DPT-2, and 75,927 received DPT-3. The numbers of DPT1 and DPT2 shots might have been under reported here because of the use of an inadequate reporting form developed at the initial phase of the program. Also, 61,380 children received measles vaccinations from RSDP. Moreover, 57,793 children received 1st dose, 51,701 received 2nd and 47,247 received 3rd dose of Vitamin-A.

RSDP areas had an estimated number of 1,212,211 children less than 5 years of age.[13] Of them, 85,029 received ORS for diarrhea. Of the children who obtained ORS, 49,273 had diarrhea without dehydration and the rest 35,756 children had diarrhea with at least some dehydration. Also, 5,654 children under 5 received treatment for dysentery. Among the children under five, 3,599 received treatment for ARI (pneumonia) and additional children 17,781 for common cold.

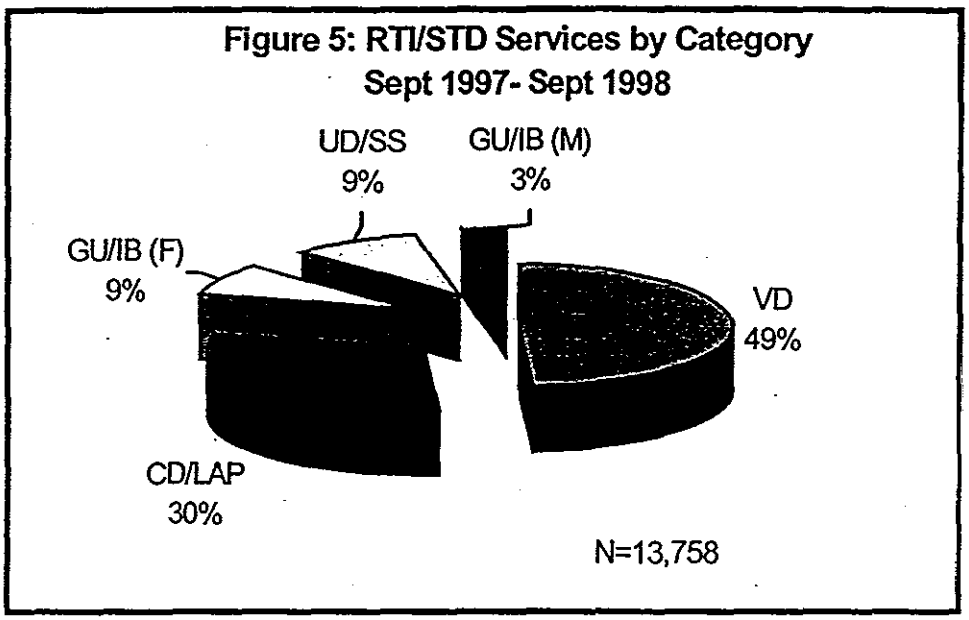
v. Reproductive Health

RSDP offers STD/RTI services through its static and satellite clinics. RSDP treated 13,758 customers for STD/RTI -- 12,015 were females and 1,743 were males. **Figure 5** shows the proportion of STD/RTI cases treated by type of complains. Of the 12,015 female customers with STD/RTI, 6,729 had vaginal discharge (VD), 4,107 had either cervical discharge (CD) or

---

[11] *Number of pregnancy cases estimated from number of live births in the rural area which is 30.2 per 1000 population.(DHS 96-97).*
[12] *DHS, 1993-94 estimate as 2.7 percent of the total population is children <1 year.*
[13] *DHS, 1993-94 estimates as 12.9 percent of the total population is children <5 year*

lower abdominal pain (LAP) and the rest 1,179 were with genital ulcer (GU) or inguinal bubo (IB). Of the 1,743 male customers, 1,298 were with either urethral discharge or scrotal swelling and the rest 445 were with genital ulcer or inguinal bubo.



vi. Services to the Newlyweds

RSDP continued to give emphasis on the need for services to the newlywed couples in the new service delivery design. RSDP NGOs organized orientation meetings for the newlyweds to educate them about their opportunities and needs for utilizing appropriate reproductive services. During the year, 2,318 orientation meetings were organized where 26,278 participants attended. In those meetings, 8,977 congratulatory letters, signed by the honorable Minister, Ministry of Health and Family Welfare, were distributed to the newlyweds. In these meetings, adolescent boys and girls also attended.

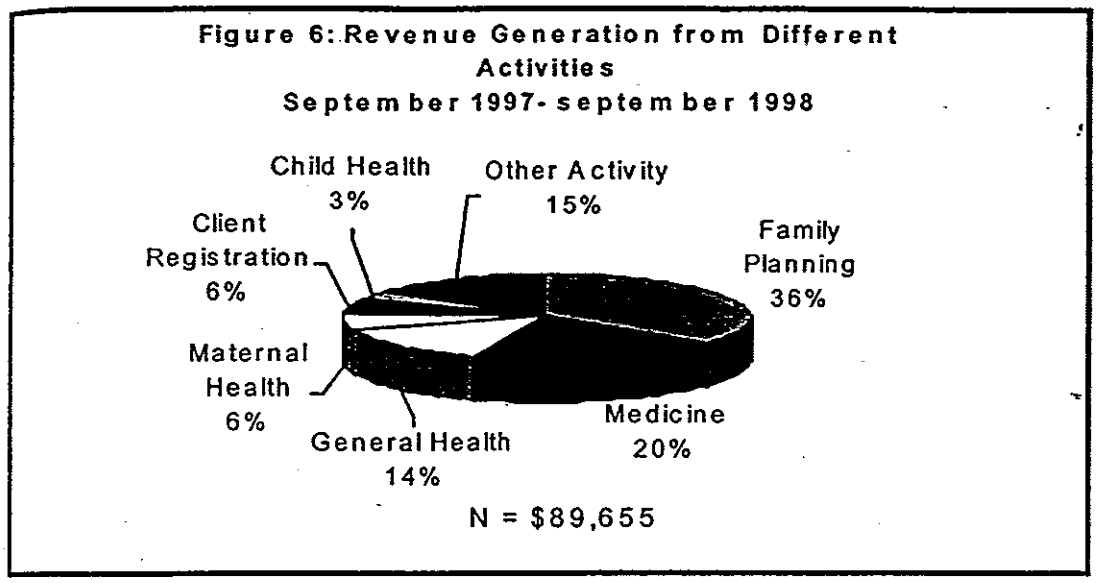
vii. Services to the Adolescents

RSDP initiated special activities for the adolescent groups. RSDP supported BRAC to run 175 "Kishore-Kishory" school. Family life education (FLE) to the participating adolescents are imparted through these schools. In total 5,250 adolescents– 70 percent of them were females and the remaining 30 percent were males, went through FLE program.

viii. Revenue Generation

RSDP NGOs initiated various kinds of cost recovery activities ranging from introduction of service charges for contraceptive supply and services, to setting up of revolving funds. During the year, RSDP NGOs recovered 5.6 percent of their operational cost. They generated US$ 193,196 as program revenue, of which US $89,655 were generated through service charges and profits from the revolving fund. An amount of US $103,540 were shared as community

contribution. **Figure 6** shows proportion of money earned from different type of revenues. As the figure shows, more than one third revenue came from family planning activities that



Included service charges from contraceptives and profit from selling SMC contraceptives. About one fifth of revenues was earned by selling medicine. Six percent money was earned each from client registration and maternal health services, 3 percent from child health services and another 15 percent from other activities including selling of ESP Bangla calendars.

IV. PROGRESS OF THE IR ACTION

In the first year of RSDP, NGOs completed their setups and started service deliveries in their respective allocated thanas. The priority activities included selection of appropriate places for static clinics, recruitment of staff and depot-holders, selection of satellite clinic spots, orientation of service providers, and GOB allocation of areas. Also, DTC approval, and contraceptive and logistic supply, merging satellite clinic with EPI centers, making the service delivery points functional with trained service providers, having standard equipment and appropriate IEC materials, making depot-holders functional providing basic training and introducing incentive package for them and introducing MIS based on NIPHP indicators, and others.

Progress towards each major action in the approved workplan has been quite significant. RSDP deferred some activities for the next annual workplan considering that those activities will be more useful after the completion of the first year of the program implementation. The deferred activities included orientation of the NGO Managers on Cost Analysis Tools developed by RTI, USA, conduction of rapid assessment of the implementation status of pricing for services and dissemination of the rapid presentation. Detail progress towards each of the major actions in the approved workplan for RSDP is listed in Appendix E. **Figure 7** shows a summary of the progress of the achievements against each of the sub results under five intermediate results.

RSDP in implementing the workplan to achieve Intermediate Results had worked very closely with other NIPHP partners. RSDP had made significant input in different Taskforces for developing Manuals and Standards and Guidelines on ESP for the NGOs. A list of the Taskforces having RSDP membership is attached in Appendix D.

RSDP has been working with ORP, ICDDR,B in conducting the following Operations Research/ Documentation activities in order to use their findings for the programmatic improvement:

- Operationalizing A Cost-effective Tiered System for the Delivery of the Essential Services Package (ESP) by NGOs.
- Meeting of the Health Needs of Adolescents
- Strategies to Improve the Prevention and Management of RTI and STDs in Bangladesh
- Modified Strategies for Ensuring Referral and Linkage for Essential Obstetric Care (EOC)
- Strategies for Improving the Quality and Performance of Clinical Contraceptive services
- Documentation on the implementation of Thana Setup Plan for effective delivery of ESP
- Cost Recovery for ESP Delivery Through Systematic Pricing and Revenue Management in the RSDP NIPHP Sites

The RSDP staff were heavily involved, more than RSDP anticipated, in defining its scope of research with ORP.

Figure 7: Progress of the IR Action

NIPHP Strategic Objective
Fertility Reduced & Family Health Improved

IR 1: Use of high impact family health services in target population increased	IR 2: Capabilities of individuals, families and communities to protect and provide for their own health improved	IR 3: Quality of information, services and products improved, and customer satisfaction improved	IR 4: Local service delivery organizations strengthened and support systems for high impact family health services improved	IR 5: Sustainability of Family Health Services and Support System Improved
•171 thanas selected and allocated •20 NGOs selected (including BRAC) and awarded RSDP grants for allocated thanas •159 clinics set up for providing MCH and FP services from ESP •Four central level and 5 regional level orientation were held for the NGO Managers •419 Community Mobilizers were oriented on ESP •390 Community Mobilizer given TOT for DH's training •136 clinics received DTC approvals and 23 clinics are in the process of DTC approval •FLE continuing in 175 BRAC schools in RSDP supported Thanas •Cover 1.49m families and 1.87m ELCOs	•National IEC strategy development in process •National media study completed •IEC materials in different media produced and distributed •40,051 community meetings held and 604,454 attended •9099 NWC congratulatory letters distributed •50,000 ESP Bangla calendars developed and distributed •Sabuj Shathi II in progress	•214 FWVs/Paramedics received CMT training •591 FWVs/Paramedics recruited to provide FP and other ESP services •133 FWVs/ paramedics completed CSI training and received CSI medicine packets •COPE conducted in 12 NGOs and QA in 22 thanas •Initial discussion on a formal customer appraisal completed •Maternal Health Manual developed and finalized	•20 NGO leaders and NGO managers trained on strategic planning •RSDP MIS developed and implemented in 171 thanas •PMs and OAs of 20 NGOs oriented on RSDP required financial system •SMC products distributed in 131 thanas •DH's sustainability plan development in progress •All NGOs received strategic planning training •16 Thana teams trained on IMP •Supported MOHFW for six workshops to receive feedback on the Draft Health Policy	•171 thanas introduced pricing for services •2,174,406 (cumm) contacts made from service points (DHs, SC, Static Clinic) •DH training to contribute to community mobilization started in July 1998 •20 NGOs collecting and distributing SMC supplies for 131 Thanas •20 NGOs established RDF with NGO contribution in 135 thanas •BCCP sustainability plan completed •16 BRAC Health Centers established, staffed with physicians, FWVs and lab technicians •Recovered 5.6 percent of the NGO program operation costs

V. ADMINISTRATIVE ACTIONS

A. Training Outside Bangladesh

In the first year, 9 RSDP staff received training on four critical areas of program including project management, MIS, IEC and RDU. The details on their training programs are given in **Table 2.** Three staff from Pathfinder, three from BRAC and two from BCCP were trained. One Pathfinder staff is on a long-term MPH program to be completed in July 1999. The subjects of training were rational drug use, management of health program, planning and managing information system, advancement in family health and social communication and project development.

Table 2: RSDP staff who received international/regional training, September 1997 to September 1998

Name/Position	Type of Training
Dr. Ferdousi Begum, Technical Officer (FP/RH) from Pathfinder	Two weeks training on Promoting Rational Drug Use; training offered by INDUR, Katmandu, Nepal, in March 1998
Mr. Saiful Islam, Deputy Director (RSDP), from Pathfinder	Eight weeks training in Managing Health Programs in Developing Countries; Harvard School of Public Health, Boston, USA, June-July, 1998
Mr. Toslim Uddin Khan, Technical Officer (MIS) from Pathfinder	Three weeks training on Planning and Managing Information Systems and Communications; offered by MSH, Boston, USA, July 1998
Mr. Nazrul Islam, Field Unit Coordinator from Pathfinder	Enrolled in the Executive MPH Program of UNC, commencing from August 1998
Dr. Arkanul Islam, Zonal Medical Officer of BRAC	Two weeks training on Promoting Rational Drug Use, training offered by INDUR, Katmandu, Nepal, March 1998
Dr. Md. Iftekhar, Zonal Medical Officer of BRAC	Two weeks training on Promoting Rational Drug Use, training offered by INDUR in March 1998 at Katmandu, Nepal
Ms. Shakila Banu, Technical Officer (MIS) from BRAC	Three weeks training on Planning and Managing Information Systems and Communications; offered by MSH, Boston, USA, July 1998
Mr. Mohammad Shajahan, Director of BCCP	To participate in the Regional Project Development Workshop and follow on meetings in Bangkok, Thailand; four days in September 1998 (50% cost from RSDP)
Ms. Yasmin Khan, Material Development Specialist, from BCCP	Four weeks Advances in Family Health and Social Communication Workshop, offered by JHU/CCP, Baltimore, USA (50% cost from RSDP).

RSDP supported a team of five MOHFW officials for a one-week study tour to Turkey as a part of World Bank team in July 1998. The purpose of the trip was to have an overview and better understanding of Health Sector Reform of Turkey, especially focusing on hospital autonomy, capitation fees at primary health care service delivery level, cost recovery, health insurance and identification of the lessons that Bangladesh program can learn from Turkey. The team comprised with the following participants:

Mr. Md. Mahfuzus Subhan, Additional Secretary, MOHFW,
Dr. A.S.M. Mashiur Rahman, Director (Planning), Directorate of Health Services
Dr. Jahir Uddin Ahmed, Director (MCH), Directorate of Family Planning.
Dr. Enamul Karim, Task manager, Project Planning Cell, MOHFW
Mr. Md. Afzal Hossain, Deputy Secretary and P.S. to the Minister, MOHFW

B. International travel

Table 3: Travel by International Consultant

Person/Designation	SOW and Duration
Ms. Eve Epstine, Consultant	To conduct a management review of the NIPHP rural service delivery component, including performance to date, program implementation issues, program design, and preparation of recommendations to facilitate development of the next annual workplan; two weeks in May 1998.
Ms. Sandy Wilcox, Consultant	To develop and strengthen strategic planning and sustainability planning skills of local implementing partners in Bangladesh; two weeks in June 1998.

Table 4: Travel by BCCP Related International Staff/Consultants

Person/Designation	SOW and Duration
Dr. Lawrence Kincaid, Associate Director for Research of CCP-JHU	To provide TA to BCCP on IEC study and participated in Jiggasha dissemination seminar; two weeks trip in October 1997, in Dhaka
Dr. Phyllis Tilson Piotrow, Director of CCP-JHU	To chair the BCCP board meeting, and to guide parameters for strategic planning for BCCP's sustainability; one week in November 1997, in Dhaka
Mr. Paul Bankerd, Associate Director for Finance and Administration of CCP-JHU	To attend BCCP board meeting and to fine tune BCCP's financial and management system for reporting on new projects; one week in November 1997
Ms. Joan Yonkler of Prospect and Associates (subcontractor of JHU)	To assist BCCP drafting NIPHP IRC strategy; two weeks in February 1998, in Dhaka
Ms. Cathryn S. Wilcox, Program Officer of CCP-JHU	To help BCCP as co-trainer for the Advances in Family Health and Social Communication Workshop in Comilla; three weeks in February 1998 in Dhaka and Comilla
Mr. Edson Whitney, of JHU	Trip to Baltimore, to close-out JHU/CCP activities and budget, discuss transition issues and plans/budget for JHU TA to BCCP for 1998-1999, and attend meetings in Baltimore office. Five weeks in July-August 1998.
Ms. Esta De Fossard, JHU Consultant	To plan the design document workshop for the proposed TV drama serial "Sabuj Shathi-II", conduct the workshop, meet production agencies to discuss the discuss the workshop results and meet with the writer/director of the drama to brief him the workshop findings and the story line.
Mr. Robert Karam, Consultant	To assist BCCP in designing sustainability plan; two weeks in March 1998 in Dhaka.
Mr. Robert Karam, Consultant	To assist BCCP in designing sustainability plan; two weeks in May 1998 in Dhaka
Mr. Robert Karam, Consultant	Meet with BCCP strategic planning committee, meet with USAID. Also meet with senior management of BCCP to discuss possible changes in organizational structure; in June 1998 in Dhaka

Table 5: Travel by PF International Staff/Consultant

Person/Designation	SOW and Duration
Mr. John Talbot, Director of Information Systems of Pathfinder International	To assist RSDP partners upgrade and develop information system., one week in February 1998 in Dhaka.
Mr Richard Gottesman, Application Developer of Pathfinder International	To assist RSDP partners upgrade and develop information system; one week in February 1998 in Dhaka.
Dr. M. Alauddin, Chief of Party (RSDP) and Country Representative of Pathfinder	To finalize Pathfinder/ Bangladesh Personal Policies Manual and the OIN budget for FY99; two weeks in April 1998 in Boston, USA.
Ms. Ritu Shroff, Program Officer (ANE) of Pathfinder	To assist with the management review of the NIPHP rural service delivery component, including performance to date, program implementation issues, program design, and preparing recommendations to facilitate development of the next annual workplan; two weeks in May 1998.

Person/Designation	SOW and Duration
Ms. Suzanne Olds, Regional Vice President of Pathfinder	Routine monitoring; two weeks in March 1998.
Ms. Suzanne Olds, Regional Vice President of Pathfinder	Routine monitoring; two weeks in May 1998.
Mr. Joe Zani, Controller of Accounting	To discuss with USAID on financial reporting aspects, and orient Pathfinder/Dhaka F&A staff; One week of May 1998
Mr Joe Roberto, Field Office Accountant	To orient Pathfinder/Dhaka accounts staff on new computerized accounting systems; One week of May 1998
Ms. Diane Carazas, Director Program Operations of Pathfinder HQ	To assist RSDP in doing the Annual Workplan, and identifying and defining TA needs for RSDP for FY99; one week in September 1998.

C. Procurement

Table 6: Information on Procurement

Restricted goods/equipment of $5,000 and useful life of more than one year.	Unit	Total Cost
Motorbike/BRAC	4	$7,532
Motorbike/NGOs	18	$33,894
Allowable goods/equipment above $5000	**Unit**	**Total Cost**
Multimedia video projector for Pathfinder	1	$7,785
Photocopy machines for Pathfinder	1	$5,957
Allowable goods/equipment less than $5000	**Unit**	**Total Cost**
Computers with Accessories for Pathfinder/Dhaka	11	$17,764
UPS 2200 VA (for Pathfinder/Dhaka)	1	$1,330
UPS 600 VA for PF (5 for TA-Units, 9 for Dhaka)	14	$3,962
Overhead projector with screen, PF supported TA-Units	5	$4,014
Loud speaker system for Pathfinder supported TA-Units	5	$7,075
Computers, printer and UPS for NGOs	12	$24,179
Scanner for Pathfinder	1	$1,149
Laser printers for Pathfinder	3	$1,576
Fax machine for Pathfinder	1	$457
Computer/BRAC	2	$2,654
Laptop computer for BCCP (100%)	1	$3,320 (100%)
PABX and intercom system set for BCCP (50%)	1	$825 (50%)
Fax machine for BCCP (50%)	1	$266 (50%)

D. Local Subcontracts/Consultants:

- Rapid Assessment of Impact of Service Delivery Change from Home to Clinic on Family Planning Use. Assessment conducted on behalf of Pathfinder International by ACPR in April 1998. Approved cost was $8,178

- Baseline Survey of RSDP NGOs by ACPR on behalf of Pathfinder began from October 1998. Approved cost is $131,600

- Local consultant, Mr. Sakhwat Hossain; providing technical assistance to BCCP on training and curriculum development; 50% cost from RSDP.

VI. ISSUES NEED TO BE RESOLVED

A. Issues within the RSDP Partnership

RSDP formulated partnership uniting the talents and strengths of three agencies. Pathfinder and BCCP entered into this kind of partnership for the first time. BRAC has the experience of working as a partner in a Democracy project funded by USAID.

Administratively Pathfinder is the prime and accountable to USAID for committed results and resources provided in this cooperative agreement. Within this parameter, Pathfinder, BRAC and BCCP are committed to translating the partnership spirit into action. This spirit carries down through the relationship between RSDP and its implementing NGOs, and between the NGOs and government at local levels.

Partnering is a complex and new mode of work, and requires accommodation and adjustment within the framework of our respective organizational policies and values. Partnering issues has been the major topic of discussion in the RSDP management committee. Through the services of consultants and Headquarters' assistance, RSDP is addressing the needs for engaging in a structured team building exercise involving three operating units and the field TA units, revising position descriptions and instituting more objective personnel performance appraisal systems.

B. Issues within the NIPHP Partnership

As a part of collaborative efforts, NIPHP partners developed the standard manuals and guidelines, which are mostly in generic form and not RSDP specific. Sometimes there is a lack of understanding of the difference between UFHP and RSDP priorities, strategies and service delivery system. RSDP staff needed a substantial level of efforts in refining and modifying them to make the initiative adaptable for RSDP. This process - from sitting taskforce for developing generic one to making the document adaptable for RSDP – makes RSDP staff tied with enormous desk and coordination work. The implication is that RSDP staff had to sacrifice many field trips to monitor the program activities at field level, which is the core work of RSDP.

C. Issues with GOB

DG/FP gave approval for 120 out of 159 static clinics; of the remaining 39, 11 clinics received DTC recommendations while another 28 is still in process of getting DTC recommendation. While the NGO Affiliation Committee is efficient, the process itself is lengthy and time consuming. The thirty-nine thanas, because of lack of DG/FP approval, are not receiving clinical contraceptive supplies from local FP offices, even though they were advised to provide clinical supplies while the clinic approval is in process. The non-availability of supply of clinical contraceptives in nearly one-fourth of the thanas, where performance of RSDP has affected the overall performance of RSDP and thereby of the national program.

VII. COLLABORATION WITH GOB

A. NIPHP Launching Support from GOB

In order to successfully launch NIPHP, four orientation meetings were organized for divisional and district level officers of Health and Family Planning Directorates to disseminate its objectives and strategies. The orientation meetings were held in Dhaka, Khulna, Bogra and Comilla. RSDP organized two orientations -- one for Dhaka and another for Rajshahi division. The objectives of the orientation were to explain to the divisional and district level health and family planning officials on NIPHP's linkage with the national HPSS and strategy to involve NGOs to implement the program. The orientation meetings were attended by Divisional Directors of Health and Family Planning, Civil Surgeons, Deputy Directors of Family Planning, Assistant Directors (Clinical Contraceptives), Senior Health Education Officers of City Corporation, Medical officers of Municipalities and NGO Managers of all the district in each division.

The Secretary, Ministry of Health and Family Welfare himself, along with high officials of the Ministry and the Directorates of Health and Family Planning attended the first meeting in Dhaka and sent messages for other Divisional level meetings. High level officials of the Ministry and the Directorates of Health and Family Planning attended all other meetings and endorsed NIPHP program for implementation. They requested divisional, district, and thana officials to extend their fullest possible cooperation to NIPHP.

B. Policy Circular from GOB

RSDP received excellent support from the Government in the process of implementation of the program. Director General, Directorate of Family Planning, issued a circular on October 9, 1997 introducing RSDP to the government officials of the relevant districts and thanas and asked them to provide all necessary cooperation including logistic supports. Director General, Directorate of Health Services issued a circular on December 8, 1997 directing concerned officials to cooperate with NGOs for the implementation of NIPHP. Director, Planning, Directorate of Family Planning issued a circular on December 18, 1998 to supply contraceptive and clinical equipment to the NGO clinics while they are in process of getting DG/FP approval.

The MOHFW issued a letter on April 16, 1998 regarding the use of reporting systems. The letter recognized the NGO efforts in the development of new MIS reporting tools for NIPHP and asked the THFPO and TFPO to receive reports from the NGOs in the MIS Form-3 until the new format is finalized. All the relevant circulars are attached in Appendix F.

These communications from the policy level helped to explain the new service delivery strategies and to receive the government assistance in terms of contraceptive supplies and area allocation/service delivery spots for the establishment of static and satellite clinics.

C. Merging Satellite Clinic with EPI Centers

RSDP supported NGOs are making efforts to merge satellite clinics with EPI centers in coordination with government EPI Thana staff. Of the total 4,550 NGO satellite clinics held in September 1998, 2,229 have been merged with EPI centers – almost half of the satellite clinics now offer expanded package of ESP. We look forward to such merger more in the future.

D. Training of Thana GOB Officials for Improving ESP Management and Performance

RSDP, in collaboration with Carolina Consulting Corporation, organized a 12-week long training course on Improving Management and Performance of Delivering ESP at the thana level for thana level GOB and NGO officials. A four-member team comprising of Thana Health and Family Planning Officers (THFPO), Thana Family Planning Officer (TFPO), Medical Officer (MCH-FP) and NGO Managers of 16 thanas received a 12-week training in two batches. The first batch training course was held during January 11- March 30, 1998, and, second batch, during April 19 - June 30, 1998. A total of 48 GOB and 16 NGO Officers have successfully graduated.

E. Thana Level Action Plan

During their training, the participants of the training program on "Improving Management and Performance of Delivering ESP at Thana Level" developed joint Action Plan to offer ESP in their respective thanas. Just after the training, the participants started to implement the Action Plan. The first batch began implementation in May, 1998 and the second batch in July, 1998. An Advisory Committee, co-chaired by Director (Administration), Directorate of Health Services and Director (Administration), Directorate of Family Planning, was formed. The other members of the Committee are Director (MCH), Director (Planning), Director (CMIS) of Directorate of Family Planning, Assistant Chief (Planning Cell) MOHFW, and representatives of USAID, ICDDR,B and AVSC. Pathfinder International is the member-secretary of this Advisory Committee. The Advisory Committee meets once in two month to review the implementation status of the Action Plan. Pathfinder International compiles the findings from the monthly reports received from the thanas and presents them in the Advisory Committee. The members of the committee review the problems identified and suggest solutions.

E. Support to Receive Feedback on the Draft National Health Policy

Pathfinder supported the Working Group for developing National Health Policy to organize six divisional level workshops in order to receive feedback on the key issues of the draft policy from different stakeholder groups of the society. A total of 240 participants representing various segments of the society including Parliamentarians, Health and Family Planning Officials, Teachers, Eligible Couples, and Rickshaw Pullers attended the workshops.

G. BCC Strategy Workshop

In view of the program need for developing an effective health and family planning IEC/BCC strategy for the Ministry of Health and Family Welfare, a two-day workshop was held on "Integrated Health and Family Planning IEC/BCC Strategy". About 90 participants from GOB, NGO, private sectors and donor agencies attended the workshop. There was a consensus in the workshop about the elements of the proposed IEC/BCC strategy based on which further step will be taken.

H. Support to Newlywed Couples Program

The GOB chairs the Working Group on Underserved Population; Pathfinder is the Member Secretary. The MOHFW, through the initiative of the Working Group provided Congratulatory Letters signed by the Honorable Minister, Ministry of Health and Family Welfare to the NGOs for distribution to the newlywed couples.

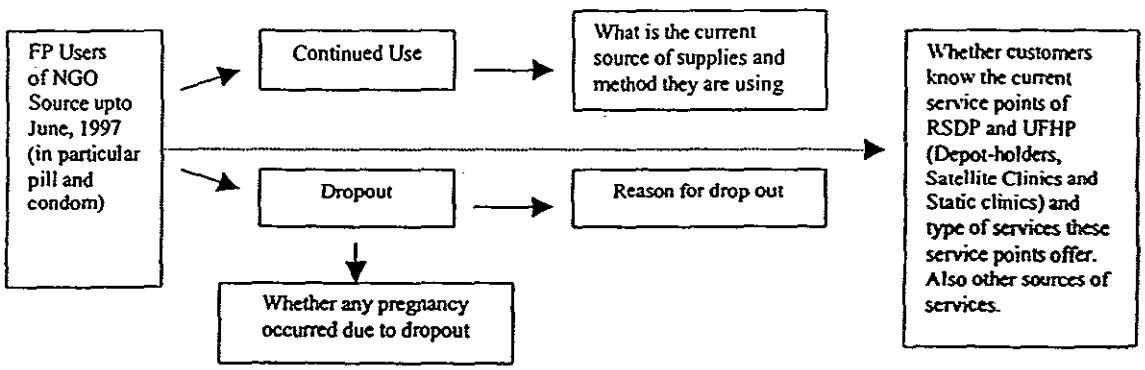
VIII. CUSTOMER FEEDBACK

In order to keep RSDP well focused on customers' needs, a number of initiatives have been undertaken since the inception of the program. A small-scale rapid assessment study was conducted to see the impact of withdrawal of doorstep service delivery on the contraceptive use in four RSDP NGO areas. Based on the rapid assessment study findings, a selective visitation plan is being planned. A baseline survey was designed to collect information on customer on ESP use and their knowledge on services available with the RSDP depot-holders, community mobilizers, and in static and satellite clinics. RSDP staff interview customers during their regular monitoring visits to get their feedback and to understand their perspectives about the program and also some informal exit interviews/checklists are administered by the RSDP TA units. RSDP is working with QIP to design a customer appraisal guideline and put it formally into the system.

A. Impact of withdrawal of doorstep service delivery

In NIPHP, the service delivery strategy of RSDP significantly changed from home to fixed service points. Since there is no provision of household-level supply, a serious concern was raised whether pill/condom users, who were previously reached by the fieldworkers, are currently using pill/condoms or other methods at all. To address the issue RSDP designed a rapid survey in its selected four rural areas. ACPR conducted the study both in urban and rural areas with technical assistance from RSDP and USAID. RSDP managed both urban and rural survey. The following conceptual framework (Figure 8) explains the study design.

Figure 8: Conceptual Framework of the study to see the impact on contraceptive use after withdrawal of doorstep family planning services



The following are the major findings from the customers:

- About 74 percent of the pill users who relied on NGO fieldworkers for supplies in July 1997, were using a method of contraception in May 1998. For condom users, almost 79 percent were using a family planning method after about 11 months.
- Among those who discontinued using pills or condoms, 29.7 percent desired to have another child, and 41.2 percent discontinued due to side effect/health reasons. Only 12 percent mentioned that they discontinued using pills/condoms due to supply related problems.

- About 14 percent of the pill and condom users who continued to use these two methods, complained that they face problems in getting supplies. The most common message was: *It is not always possible to leave the house and go out to get contraceptives; obtaining supplies involve transportation cost.*
- Among the current users of pills 45 percent were using depot-holders as a supply source and 36 percent used pharmacy/shops to get their family planning methods. But for current condom users, the situation was reverse, 45 percent used pharmacies/shops and 40 percent used depot-holders.
- Almost 73% of the pill and condom users of July 1997 knew about depot-holders, about 63% knew about RSDP NGO satellite clinics, and only one third of the respondents knew of RSDP NGO static clinic.
- Although the knowledge of availability of certain services was reasonably high, but very few were aware that family planning, child health and antenatal care services are all available at the same place. Only 27% of the respondents who knew of satellite clinics and 10% of those who knew about static clinics were aware that clinics offered one stop shopping for these three services.

B. RSDP Baseline Survey

RSDP baseline survey is in progress to determine the baseline coverage rate of various components of ESP, e.g., EPI, Vitamin A, TT, ANC, ARI, CDD, contraceptive use including method mix, socio-economic profile of both users and non-users of ESP, different sources of ESP, and knowledge of RSDP service sources and providers, especially RSDP static and satellite clinic locations, Community Mobilizers and Depotholders. Associates for Community and Population Research (ACPR) is conducting the survey. Preliminary results of the study will be available by May 1999.

C. Feedback through Regular Monitoring Visits

The following is our preliminary understanding on customer feedback we received from field trip reports:

- Customers are satisfied with getting Essential Service Package (ESP) for their families at satellite clinics, that are near to their residence. Satisfaction is much higher for the spots where satellite clinics and EPI centers have already been merged to offer integrated services.

- Along with FWV/Paramedic's services in some sites, the customers are getting necessary medicine with reasonable price. They are willing to pay reasonable price for medicine because they need not go to pharmacy for essential medicine spending additional money for transportation.

- Shortage of injectable causing dissatisfaction among the customers. They come to satellite clinics on the due date of injectables shots and become disappointed to hear from the service providers that they need to use another method until injectables supply is available.

LIST OF MANUALS, REPORTS, PROTOCOLS DEVELOPED AS A PART OF RSDP TA

In order to implement the program efficiently, RSDP program staff developed the following guidelines/ tools/manuals as a part of its technical assistance to the NGOs:

Guidelines for RSDP TA Units to help TA unit staff to carry on their day to day activities and to assist them guiding the NGOs to implement their program activities.
Financial and Administrative Manual for RSDP Supported NGOs to assist the NGOs to provide day to day guidance in implementing program and its overall management.
NGO Office and Clinic Set up Guidelines to design clinic infrastructure and functional procedures.
Thana Level Progress Tracking Tool to monitor the progress of each of the thanas in the areas of infrastructure set-up, approval process, logistic supply situations, and performance reporting system.
Guidelines for the Performance Display Board to ensure that each thana office has uniform and critical information in the display board.
NGO and Thana Goal-Setting Tool to help NGOs to decentralize their goals to local level.
Guidelines on IEC Materials to help NGOs to ensure effective use of IEC materials.
Quarterly and Monthly Fund Use Reports to monitor subgrantee's fund use status against the budget and disbursed fund.
Manuals on RSDP MIS for NGO staff as ready reference on how to use different record keeping and reporting formats of RSDP MIS.
Revolving Drug Fund (RDF) Guidelines with monitoring, training and planning modules to orient the RSDP Thana Managers for effective implementation of RDF.

List of Papers

M. Alauddin, "NGO Partnership in NIPHP in Bangladesh". Paper presented and distributed at the ICPD + 5 Roundtable on Partnership with the Civil Society to Implement the Program of Action, *International Conference on Population on Development*, Hotel Sheraton, Dhaka, Bangladesh, July 27-30, 1998. Published in Prajanma in September 1998.
M. Alauddin, "Role of NGOs and Private Sector in Balanced Quality Service Delivery Package". A theme paper presented at the Seminar on *Upscaling Reproductive Health Intervention: Enhancing the Role of the Civil Society,* June 29-July 2 1998, ICOMP, Kualalampur, Malaysia.

Contributed to the Development of Manuals and Guidelines and Training Curriculum for ESP

- Technical Standard and Service Delivery Protocol for management of RTI/STD
- Technical Standard and Service Delivery Protocol for maternal health care
- Technical Standard and Service Delivery Protocol for managing child health related illness
- Standard Treatment Guidelines
- Revolving Drug Fund (RDF) Guidelines with monitoring, training and planning modules
- Other reproductive training curriculum
- Manual containing list of equipment for providing technical assistance

X. STAFF TRAINING

RSDP program staff completed training needs assessment for the NGO staff. Based on the assessment, a training plan was developed. The following training activities were accomplished:

- RSDP senior management staff met twice with the NGO leaders and Managers to orient them on RSDP strategy before starting implementation of the program.
- RSDP organized six two-day regional orientations for the NGO staff during June-July, 1998. Nineteen NGO Managers, 30 Monitoring Officers and 168 Thana Mangers attended the orientations.
- 214 paramedics received two-week training on "Family Planning Clinical Services" from AITAM.
- RSDP arranged training for the Community Mobilizer through PSTC. Three day long orientation for a total of 419 Community Mobilizers was organized during April-July, 1998.
- Provided TOT to the 390 Community Mobilizers who are in turn providing training to the depot-holders. Training program for the depot-holders is going on and it will be completed by May 1999.
- F&A and program staff organized a two-day Financial Management Orientation for the project Accountants and Managers in March 1998 at BARD, Comilla.
- RSDP medical staff organized one-day orientation for the NGO Medical Officers on clinic set-ups.
- Three orientation programs were organized for the Project Managers during December 1997, March 1998 and June 1998 to update them about RSDP strategies.
- Thana Managers have received orientation on RSDP service delivery strategy.

Table 7 shows summary accomplishments of RSDP staff training conducted either by Training Institutions or in house.

Table 7: Summary Training Accomplishments

Type of Staff	Training/Orientation Course Title	# staff Trained	Training Institution
FWV/Paramedics	Child survival Training	133	Radda Barnen, ICDDR,B, DCH, BRAC, GK
FWV/Paramedics	Family Planning Clinical Services Training	214	AITEM
Community Mobilizers	Community Mobilizers' Roles and Responsibilities Orientation	419	PSTC
Community Mobilizers	TOT on DH training	390	RSDP
Project Manager	Orientation for the Project Manager on RSDP	54	RSDP
NGO Accounts Staff	Financial Management Orientation	19	RSDP

XI. LESSONS LEARNED IN IMPLEMENTING THE WORKPLAN

- **Effective GOB-NGO collaboration at local level is essential and critical for the effective implementation of the program.** Critical events for collaboration include area assignment, extending cooperation to the NGOs in implementing new service delivery design, DTC recommendation for static clinics, merging satellite clinics with EPI centers, ensuring regular supplies of contraceptives and EPI logistics. Despite all criteria are met and all conditions are fulfilled, for some thanas, it is taking long time to get DTC recommendation. A number of thanas could not merge satellite clinics with EPI centers yet. Although, there is no shortage of injectables supplies at the national level, at least 28 thanas did not receive adequate supplies of injectables following DG/FP approval or DTC recommendation.

- **At the beginning phase of the program, a considerable time is essential to complete infrastructure set-ups and initial activities in order to start service delivery.** At the first year of RSDP, there was an assumption that the RSDP thanas would be able to offer services immediately following the program launching. In particular, there will be either no interruption or very limited interruption of services in the thanas where FPHSP operated. However, it was found that regardless of their earlier existence of FPHSP, RSDP thanas needed a couple of months to make themselves ready to offer services with the new service delivery system. The major activities in the initial stage included selection of appropriate places for static clinics, recruitment staff and depot-holders, selection satellite clinic spots, orientation of service providers, allocation of areas by GOB to RSDP, confirmation of DTC approval, and contraceptive supplies.

- **At the beginning phase, RSDP found that onsite technical assistance is an effective approach for improving NGO efficiency.** RSDP technical officers, on an average, made four visits to each thana during the year and provided hands-on-technical assistance and guidance to implement the program. These trips largely helped the NGOs to complete their clinic set ups, obtaining area allocation from local GOB officials, identifying satellite clinic spots, selecting depot-holders, developing program objectives. Also the trip helped decentralize activities and objectives at the satellite clinic level and analyze project performance. This intensive technical assistance was possible due to the newly established five RSDP regional TA units. Based on the positive experience, in addition to two general professional staff, RSDP also added one Quality Assurance Technical Officer in each TA unit to enhance quality assurance in the programs.

- **Annual Workplan was not well synchronized.** The first year workplan was not well synchronized between partners with regard to timeframe and understanding of the proposed activities. It was observed that partners spent the first six months of the first year to build a common understanding of the activities and achievements. This resulted collaborative work piled up with a consequence of enormous work load for the second six month of the program implementation

- **A common understanding about the priority agenda of the partners is very critical for smooth and timely implementation of the workplan.** A large number of activities in the workplan are collaborative efforts and mostly depends on the initiative of the other partners. The partners did not have the common understanding about the priority agenda, which resulted in delayed implemention. For example, finalization of training curriculum and preparatory work of training institutions for training NIPHP service providers took more than the scheduled time frame. This has been the major delaying factor for not having completed the required training for the service providers in time. .

- **Time allocation was not adequate.** Time required for across partners and within partners could not be well anticipated and was not adequately budgeted. Much of the time allocated for field monitoring had to be diverted to desk-bound collaborative work in working groups or task forces.

- **The Progress Tracking Tool was useful to provide feedback to managers in setting up their programs fully functional.** The indicators of the tool were mostly related to infrastructure-building, in the first six months. It was realized during the process of progress tracking, that progress tracking is a dynamic phenomenon. Progress/ performance tracking indicators should be replaced by new ones based on emerging issues and related and resulting actions/activities. The managers should understand the dynamic nature of the progress tracking of their programs and should identify new issues, problem areas and their solutions.

XII. DESCRIPTION OF SPECIAL INITIATIVES

A. Thana Level Progress Tracking Tool

During the beginning stage of the program, RSDP developed a "Thana Level Progress Tracking Tool" to monitor the progress of each Thana. The tool contained 20 indicators of infrastructure set ups, approval process, logistic supply situations, and performance reporting systems. RSDP Technical Officers and NGO Managers used this tool while they visited the thanas. They reviewed the progress on each of the 20 indicators to provide feedback to Thana Managers and updated the tool as and when necessary. The tool was found very useful for the TA unit staff and NGO Managers to identify TA needs in rapid implementation of activities that lead to efficient and effective service delivery.

B. Decentralization of RSDP Objectives Setting Initiatives

In March 1998, RSDP organized an orientation meeting and assisted the NGOs in setting their goals based on different ESP indicators. DHS (1996-97) estimates were used to determine objectives on the ESP indicators. This process was undertaken to decentralize RSDP goal setting initiatives by thana and NGOs. Each thana determined their own objectives and started to track their performance against their objectives on a monthly basis. This exercise contributed to increasing their program performances and achieving overall RSDP goals as well.

C. Thana Specific Program Performance Analysis

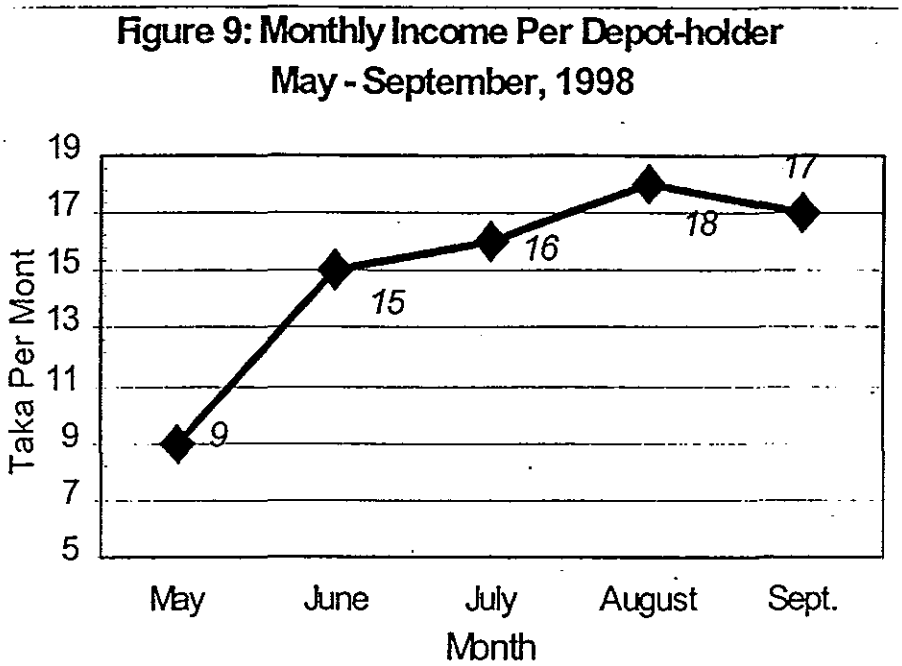
For each thana, RSDP conducted an analysis by comparing performance with program objectives on a number of critical indicators such as ELCO coverage, daily customer contact at static clinic, average customer contact at satellite clinic, and monthly customer contact by depot-holders. Achievements on pill, condom, injectable and IUD distributions were also analyzed. RSDP Technical Officers met with NGO leaders, NGO Managers, and Thana Managers of each NGO to share findings of the performance analysis. Following the dissemination of the findings, the NGO representatives reviewed their current status and made plan of action for program improvement. The NGOs were advised to do the similar analysis by themselves on by-monthly basis and to share the findings in Thana Managers' meetings.

D. Bottom Up Approach for Setting Goals and Objectives

RSDP provided orientation to the NGOs to set objectives for each Satellite and Static Clinic for the critical ESP indicators. This effort helped NGOs in two ways. First, they could specify the number of ELCOs/families in the catchment areas of each satellite clinic. Second, they could know what should be the desired performance of a particular satellite clinic to improve overall thana performance. It may be mentioned here that the renewal of the NGO proposals for the next year was based on this bottom-up objective setting process.

E. Effort to Make the Depot-holder Functional

RSDP is providing special attention to make the depot-holders fully functional at the community level. The TOT for the Community Mobilizers was completed to train depot-holders. As of September 1998, 9,348 depot-holders were recruited, about 40 percent of them are in place after completion of their training, another 30 percent are being trained, and the training of the rest will be complete in next six months. It is expected that fully functional depot-holders at the community will have enormous impact on the program performance.



Meanwhile, RSDP introduced incentive package for the depot-holders. In addition to Taka 200 per month as honoraria, they also receive fifty percent of the revenue they generate by distributing GOB supplied pill and condoms and fifty percent of the profit from selling SMC contraceptives and ORS. Preliminary findings of the sharing of the service charge is encouraging. As **Figure 9** shows, when we started this initiative in May 1998 the NGO Depot-holder earned an average Taka 9 as their share which increased to Taka 15 in June, 1998. This earning further increased to Taka 18 in August 1998. The depot-holders could have earned more money during August-September, 1998 if a large number of them were not involved in training. Moreover, most of the thanas were affected by severe flood. During FY 1999, RSDP will focus on enabling depotholders to become "fully functional" and will intensify community mobilization efforts to encourage greater use of essential services package (ESP).

F. Post Flood Activities

Out of 171 RSDP NGO thanas, 134 have been severely affected by flood during July-September, 1998. The RSDP's ability to respond quickly and effectively was most apparent during this recent flood in Bangladesh.

The RSDP NGOs formed emergency medical teams, distributed oral rehydration salts (ORS) and medicines, water purification tablets, fitkiri. Mobile satellite clinics were organized on boats to provide ESP services. Also, RSDP assisted in transferring of seriously ill patients to nearby hospitals.

RSDP NGOs worked with local GOB medical teams and distributed medicine and food stuff to flood affected residents. NGO Community Mobilizers also helped Government Flood Surveillance Team to assess the severity of the flood. In some cases, NGOs shared the responsibilities with local GOB staff in cleaning tube wells.

Meanwhile, post-flood renovations of the flood-effected static clinics have been completed. RSDP in collaboration with USAID, procured medicines, on emergency basis, to ensure post-flood health and medicine supplies among the population in badly affected RSDP thanas. Also, IEC materials were developed for the flood-affected areas on how post flood consequences can be addressed. RSDP planned to launch special "catch-up" campaigns for children and pregnant women who have missed immunization shots.

XIII. SUCCESS STORIES

A. Effective Service Delivery Design

The new RSDP service delivery design has been found be working well. RSDP started to offer services through three service delivery points – 159 static clinic, 4,550 satellite clinics and over 9,348 Depot-holders. Out of 159 clinics, 120 clinics have already received approval from DG/FP, 50 percent satellite clinics are marged with EPI centers and 50 percent of the recruited depot-holders received basic training. RSDP is happy to see the encouraging response from the community in procuring services from these service delivery points. There is an evidence of increasing customer flow in all of the three types of service delivery points. RSDP hopes that the situation will further improve as community mobilization work further intensifies and Depot-holders' basic training is completed in the next semi-annual period in March 1998.

B. Revolving Drug Fund (RDF) and Rational Drug Use (RDU)

It is encouraging that NGOs introduced revolving funds in 135 Thanas using their money they had generated in the last FPHSP program. Through RDF, they are selling medicine and SMC contraceptives and ORS. RSDP has been working, since June 1998, to make the existing RDF system more efficient across the NGOs. RSDP reviewed and modified RDF Manual according to the program needs and provided orientation to the Technical Officers and NGO Managers on revised RDF manual. RSDP staff are currently working to finalize medicine procurement policy, RDF forms and formats and Monitoring, Training and Planning (MTP). As soon as the above materials are finalized, a thana-level orientation will be held on RDF system.

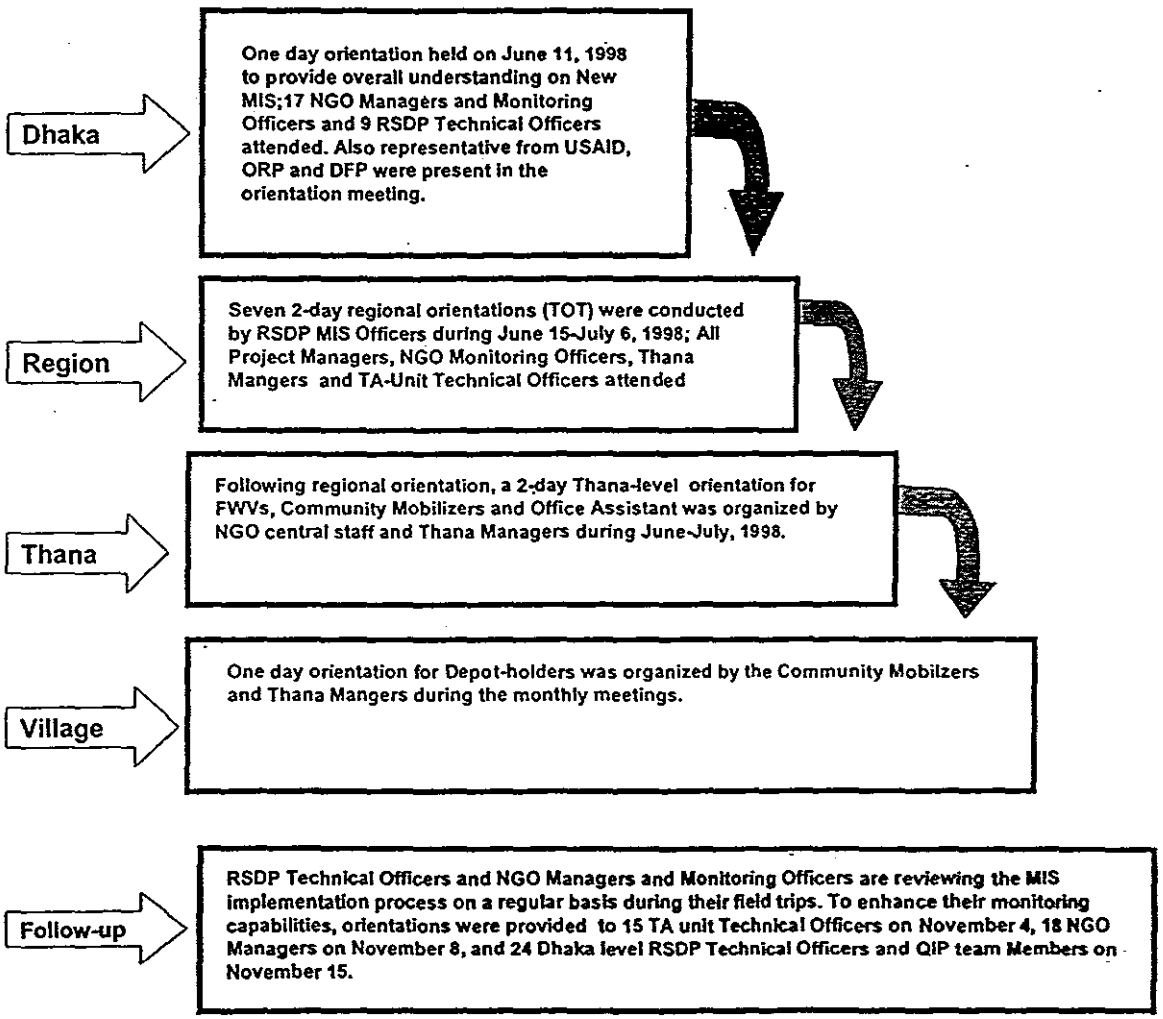
To better utilize the medicine and to ensure quality services, RSDP, in collaboration with QIP, developed Standard Treatment Guidelines (STG) on ESP components. A pocket book, job aid and labeling materials on rational drug use were developed based on STG. A three-day TOT was provided to the 4 RSDP technical officers (QA), 18 NGO medical officers and 6 selected Paramedics (for the NGOs which do not have Medical Officers) so that they can orient other clinical staff accordingly. Also, basic concept of RDU has been incorporated in the Other Reproduction Health Training curriculum.

C. Implementation of NIPHP MIS and its Utilization

RSDP designed, developed and implemented Management Information System (MIS) for the new service delivery system. RSDP worked with the Directorate of Family Planning, UFHP and ICDDR,B to develop this new MIS. RSDP organized a cascade training program to implement the MIS in 171 thanas. A TOT was provided to the NGO Managers and Thana Managers who in turn provided training to their own Thana staff. The new MIS was effective from August 1998. Thana staff found the new MIS very familiar since most of the indicators and process were introduced in the interim MIS that RSDP introduced one year ahead, in September 1997. RSDP interim MIS was mostly adopted by the new NIPHP MIS. **Figure 10** shows the MIS role out and its implementation process.

In the NIPHP-MIS, the NGO Thana Offices generate monthly performance reports that are sent to the NGO central office within a week in the following month. The NGO central offices compile monthly reports by thana and send them to RSDP by the 15th of each month. RSDP central MIS keeps track of the progress of 171 Thanas on a monthly basis.

Figure 10. MIS Role Out Process and Its Implementation



RSDP uses MIS data extensively for program improvement purposes. It is used to review the performance at the different levels of RSDP, from depots upward to RSDP central level. RSDP reviews the monthly performance report to analyze the overall progress of the RSDP indicators as well as progress of the individual Thana and provide feedback to the NGO and TA Unit. The NGO and TA Unit also review the thana-level performance and provide feedback to the Thana while Thana Mangers review the individual static clinics, satellite clinics, and Depot-holder's performance and provide feedback to their staff on a regular basis. NGOs also analyze their statuses comparing achievements against the set objectives on a monthly basis.

XIV. BCC ACTIVITIES CONDUCTED BY RSDP

A. BCC for RSDP

The Bangladesh Center for Communication Programs (BCCP), being a RSDP partner, is principally responsible for contributing to the goals, objectives and strategies related to information, education, and communication. BCCP will conceptualize, develop, pre-test and produce a variety of IEC materials in all media to address the national as well as local needs.

Research teams from BCCP visited the rural NGOs at the initial stage to conduct an IEC needs assessment. BCCP was able to draw upon the findings of this needs assessment to develop the Essential Services Package support materials for the rural partners and their customers. Besides collecting information on IEC needs, a half-day workshop with the NGOs was conducted to orient the NGOs on the basic concept of IEC and development of IEC materials.

A number of IEC materials were produced during the first year to promote the Essential Service Package. Besides producing the new IEC materials, existing IEC materials were collected from different organisations. IEC materials were distributed to the service providers and to the communities.

Prototype signboard, prototype tin sign, prototype announcement flyer on the eve of NID, satellite clinic banner, leaflets on ESP and service delivery spots, wall calendar and loose leaf flip chart were some of the IEC materials that were produced and distributed to promote NGO clinics. The IEC materials produced for the promotion of the RSDP service providers include: communication guidelines to enhance the communication skills of the Community Mobilizers; a folder for the Community Mobilizers; quality poster and desk top materials for the FWVs to remind the service providers about their role; and an extracted page of Newsletter Sangjog for the Depot Holders. One generic TV and one Radio spots were produced to promote RSDP at the mass communication level.

B. BCC for National Program

During this period, BCCP conducted IEC studies to collect information that would help to develop messages for NIPHP customers and service providers. The studies primarily focussed on collecting information on the knowledge and attitudes of the customers. This information will be useful to conceptualise, develop, pre-test and produce appropriate IEC materials as well as to carry out other IEC activities.

BCCP held one workshop "Advances in Family Health and Social Communication" and one Messages Development workshop. The workshops' highly participatory approaches were designed to help develop the skill of the participants to follow a systematic communication approach to design IEC activities/programs.

Two 2-day workshops to discuss the sustainability of Jiggasha were held. The objectives of these workshops were to gather and share ideas and experiences with regard to implementing and sustaining Jiggasha. One dissemination seminar "lessons learned from Jiggasha" was also held

during this year. The purpose was to present the findings of the three evaluative studies on the Jiggasha approach.

BCCP also provided technical assistance to the development of the National Integrated Health and Family Planning BCC Strategy Development Committee. BCCP worked in close collaboration with the government to assist in the development of the HIV/AIDS BCC strategy. BCCP is also a member of the National AIDS Advisory Committee, UNAIDS Technical Working Group and HIV/AIDS Network. A list of IEC materials sent to the NGOs from RSDP is attached in Appendix G.

XV. PIPELINE ANALYSIS AGAINST BUDGET LINE ITEMS

The following pipeline analysis is based on the Quarterly Summary of Disbursement Report of RSDP for the period of July-September 1998:

ORGANIZATION:	PATHFINDER INTERNATIONAL
AGREEMENT NO:	388-A-00-96-90024-02
COMPLETION DATE:	30-Jun-02
TOTAL ESTIMATED FUNDS:	$35,430,176
OBLIGATED TO DATE:	$11,879,857
FUNDING SOURCE:	USAID/BANGLADESH
STATEMENT DATE:	20-Oct-98
STATEMENT NO:	8
EXPENSE PERIOD:	July through September, 1998

Table 8: SUMMARY OF DISBURSEMENTS

	OBLIGATED AMOUNT	PREVIOUS PERIODS	JULY ACTUAL	AUGUST ACTUAL	SEPTEMBER ACTUAL	TOTAL COSTS	BALANCE
SALARIES	1,324,350	300,222	5,030	24,517	43,573	373,342	951,008
BENEFITS	371,307	120,787	1,494	8,521	7,378	138,180	233,127
TRAVEL COSTS	517,371	106,880	7,410	990	8,717	123,997	393,374
EQUIPMENT AND SUPPLIES	184,800	79,283	0	874	5,185	85,342	99,458
OTHER DIRECT COSTS	1,627,497	582,620	17,146	32,912	35,719	668,397	959,100
SUBCONTRACTS COSTS							
BRAC	2,321,529	1,281,761	(120,454)	0	120,454	1,281,761	1,039,768
BCCP	575,509	384,645	(133,499)	0	133,499	384,645	190,864
JHU/PCS	235,842	8,162	0	104,890	5,979	119,031	116,811
SUBGRANT ADVANCES - NGO	1,678,703	2,025,956	0	(131)	221,851	2,247,676	(568,973)
SUBTOTAL OF DIRECT COSTS:	8,836,908	4,890,316	(222,874)	172,573	582,355	5,422,370	3,414,538
INDIRECT COSTS	3,042,949	438,502	5,852	30,616	99,331	574,301	2,468,648
TOTAL COSTS:	11,879,857	5,328,818	(217,022)	203,189	681,686	5,996,671	5,883,186

Reconciliation to SF269:

Balance of obligated funds per above	5,883,186
Less: Subgrants payable (unliquidated obligations)	1,089,254
Other accrued expenses (unliquidated obligations)	1,042,266
Unliquidated balance of obligated funds per SF269	3,751,666

Summary of disbursement: Total obligated amount for RSDP was $11.87m, of which $5.99m is already spent. There is unliquidated obligations amounting to $1.09m in the form of subgrants, and $1.04m in the form of other accrued expenses. Unliquidated balance of the obligated funds now stands to $3.75m.

Subgrants and subcontract expenditure: During the first year, RSDP obligated Tk 142m to NGO subgrants and Tk 125m to the partners (BRAC and BCCP). Approximately 82 percent of the NGO subgrants amount (Tk 116m) were spent by the NGOs, while 68 percent of the subcontracts (BRAC and BCCP) amount (Tk 86m) were spent. Four major reasons for under-spending by the NGOs are:

low level of expenditure at the initial period of the program,

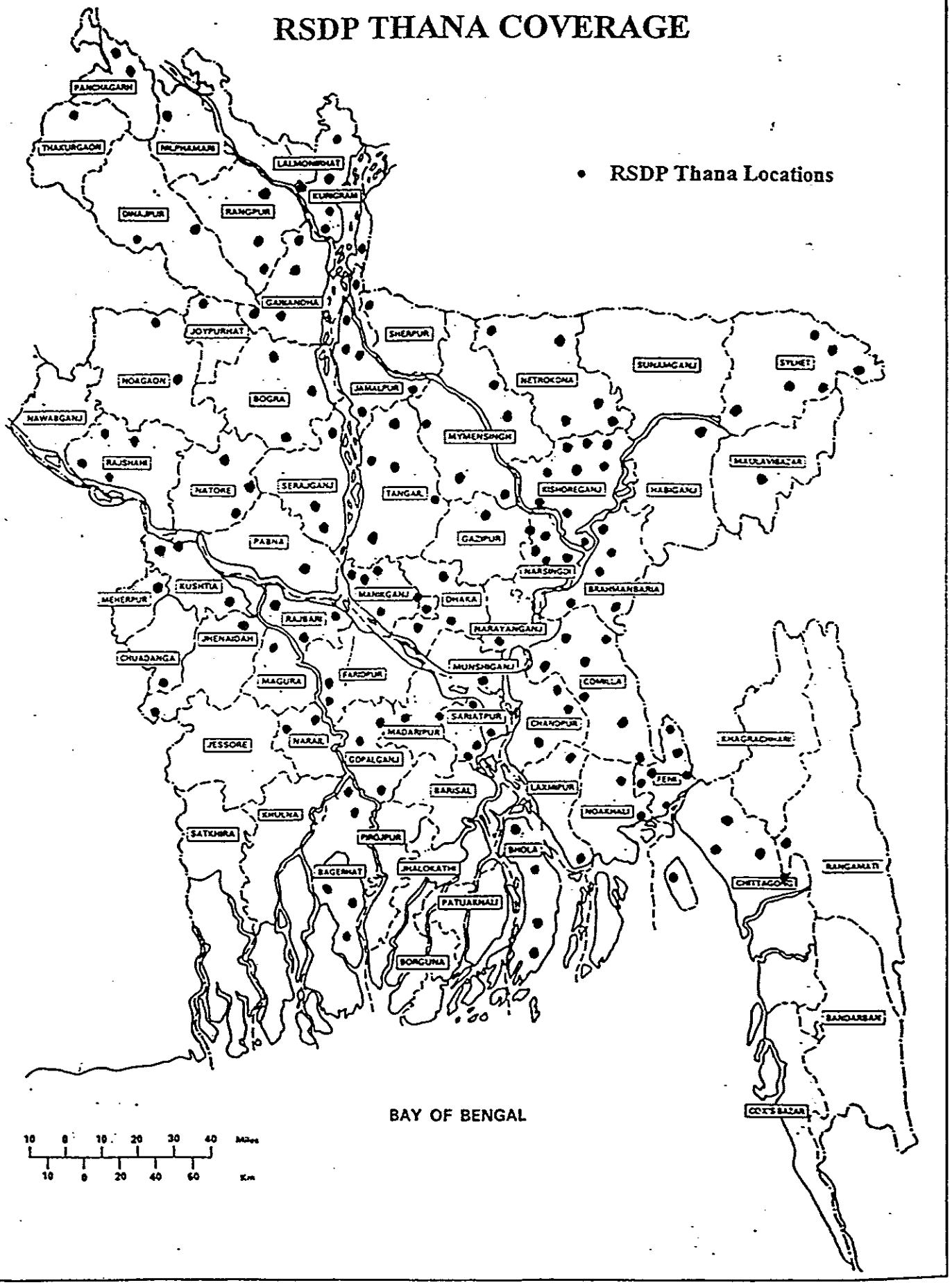
- late start of some of the planned staff training,

- non-procurement of motorbikes and other equipments, and
- management problem in BBCFWA and the resulted low expenditure.

NGOs which will have more that Tk one million unspent are BBCFWA (Tk 5.3m estimate), JTS (Tk 3.7), SUS (Tk 3.2m), PSF (Tk 2.3m), MMKS (Tk 2.2m), DCPUK (Tk 1.8m), and VPKA (Tk 1.3m). Atleast three NGOs are likely to overspend because of their too tight budget; these are PJS, PSKS and CRC. RSDP will plan to spend the unspent Tk 26m for the NGO program in the coming year.

Out of Tk 96.2m budget, BRAC spent Tk 71m (74%), while out of Tk 29m BCCP budget they spent Tk 14.5m (50%). BRAC spending was low on NGO sub-grants (Tk 11.6m), field implementation (Tk 9.9m) and equipment/vehicles (Tk 1.6m). BCCP's major under-spending was in the area of IEC support (Tk 10m), and training (Tk 2.9m). In total, BRAC and BCCP could not spent about Tk 39.6m, which they will plan and use in the coming year.

RSDP THANA COVERAGE



Appendix-B

Explanation of the RSDP Indicators

- **Eligible Couples:** In FY98, RSDP served 1.87 million ELCOs, in FY 99 RSDP plans to reach RSDP goal of 2.2 million ELCOs.

- **Contraceptive Distribution:** "Baseline" for pills, condoms, and injectables are the respective average of the distribution of pills, condoms and injectables for the last 6 months of 1996 under FPHSP. Baseline for IUDs is the total performance of IUDs in the year 1996. The present status is defined as the average monthly distribution of pills, condoms, and injectables for the months of April-September 1998; for IUD it is the cumulative performance during September 1997 to September 1998.

- **Family Planning Users Referral:** "Baseline" for injectables referral is estimated as average for the last 6 months of 1996 under FPHSP Baselines for IUDs and sterilizations referral are estimated as total referrals for these two methods for the year 1996. Similarly the injectables referral figure in the "present status" column represents average referrals of injectables for the months of April-September 1998 while that of IUDs and sterilizations are the cumulative performance during September 1997 to September 1998.

- **Yearly Side Effect Management:** "Baseline" is the total side effects managed for the year 1996 under FPHSP while present status is the cumulative of side effects managed during September 1997 to September 1998.

- **Child Immunization:** There are two segments: one is "self" and another is "combined". Self include the annual child immunization performance of static and satellite clinics where services are provided by RSDP NGO staff. While combined include the performances of static and satellite clinics organized by RSDP NGO staff while EPI and TT services are provided by GOB HAs.

- **Vitamin A Dose Distribution Among Children 1-5 Years During Semi-annual Campaign:** Annual vitamin-A dose distribution is calculated as the number of children between 1-4 years receive Vitamin A capsules during Semi-annual campaign.

- **CDD:** There are two indicators for CDD. One is calculated as number of children with diarrhea but with no dehydration receiving ORS from service providers. Another indicator is calculated as number of children with diarrhea with at least some dehydration receiving ORS from service providers. RSDP NGOs do not have the provision of treating diarrhea with severe dehydration.

- **ARI:** The number of children who receive services during a year for ARI with Pneumonia.

- ANC: This indicator is the number of pregnant women who received services, at a minimum, Ist time and 2nd time ANC by RSDP service providers.

- **Pregnant Women Received TT:** There are two segments: one is "self" and another is "combined". Under "self" included is the annual performance of TT at static and satellite clinic where services are provided by RSDP NGO staff. Under "combined" is under included are the performances of static and satellite clinics organized by RSDP NGO staff while TT services are provided by GOB HAs.

- **PNC:** This is the number of mothers who received services from RSDP service providers within 42 days of their deliveries.

- **STD/RTI Cases Treated:** the number of customers served by RSDP service providers for STDs/RTIs. MIS can report this number categorized by syndrome and gender.

- **NGO Cost Recovery:** The numerator includes all funds collected through sales of supplies and registration fees. In addition, estimated rent of static clinics which are owned by the NGOs and estimated amount of rent of community provided space for holding satellite are included in the program generated revenues. For calculation of the total NGO operating costs (the denominator), one-time acquisition costs for capital equipment is not included. Capital Equipment is defined as having an acquisition cost of $ 500 and a useful life of more than two years.

Rural Service Delivery Partnership

NGO Performance Report

September 1998

Appendix C

Sl No.	Thana	NGO	TA-Visit	A. Child Health Services: Childhood Illness <5 yrs: Diarrhoea: No Dehydration	Diarrhoea: At Least some Dehydration	Dysentery	ARI: Common cold (No pneumonia)	ARI: Pneumonia	B. Reproductive Health Services: Pregnancy Care: ANC-1	ANC-2	ANC-3+	Referral	PNC: Tet	Revisit
1	Bagmara	JTS	Nil	35	0	0	0	0	29	10	7	0	2	0
2	Godagari	JTS	Nil	48	0	5	6	0	40	8	0	0	9	0
3	Gurudashpur	JTS	Nil	10	10	15	4	3	66	22	9	0	4	0
4	Lohagara	JTS	Far	0	41	18	0	0	24	7	2	0	14	0
5	Mohongonj	JTS	Dha	31	0	0	0	0	31	18	2	0	0	4
6	Moheshpur	JTS	Far	0	0	0	3	0	25	3	0	0	0	0
7	Poba	JTS	Nil	11	2	2	45	0	30	6	0	0	1	0
8	Singair	JTS	Dha	110	0	1	1	7	4	1	0	19	0	0
9	Singra	JTS	Nil	21	4	0	10	0	26	13	7	44	14	6
10	Sreepur	JTS	Dha	0	0	1	5	1	59	17	2	0	0	0
11	Alpara	JTS	Dha	50	0	7	27	0	23	12	10	1	0	0
12	Kamalkandi	JTS	Dha	172	40	5	39	9	7	4	1	0	24	0
13	Khalajuri	JTS	Dha	17	1	11	2	5	3	1	1	0	3	0
14	Purbadhala	JTS	Dha	48	1	6	3	4	20	14	0	2	3	0
15	Gouripur	JTS	Dha	64	5	1	3	25	34	10	3	0	4	0
16	Harirampur	JTS	Dha	5	0	0	0	0	1	0	0	0	0	0
17	Shibalaya	JTS	Dha	30	12	5	112	24	51	7	0	0	17	0
18	Mohanpur	JTS	Nil	0	4	0	6	1	33	15	3	0	0	0
19	Baralgram	JTS	Nil	5	71	0	15	2	40	14	0	1	0	0
20	Jibannagar	JTS	Far	11	1	0	2	1	85	9	2	0	7	0
21	Bagarpara	JTS	Far	226	249	6	2	1	15	12	7	0	1	0
22	Allodaga	BAMANEH	Far	341	83	3	5	1	8	5	3	21	2	0
23	Chandia	BAMANEH	Hab	85	18	0	0	0	20	10	2	0	2	0
24	Gobtali	BAMANEH	Nil	481	61	0	1	0	16	5	0	1	0	0
25	Gobar	BAMANEH	Dha	38	37	0	2	3	28	17	5	3	9	4
26	Karaigonj	BAMANEH	Dha	126	66	1	0	0	7	1	0	0	0	0
27	Nowabgonj	BAMANEH	Dha	63	48	2	10	3	17	4	5	1	0	0
28	Boalmari	BAMANEH	Far	77	510	0	3	0	10	11	0	0	1	0
29	Shibgonj	BAMANEH	Nil	202	7	0	3	0	10	1	0	0	0	0
30	Sonatola	BAMANEH	Nil	141	1	0	2	1	33	8	3	5	0	0
31	Srimongal	SUOPPS	Hab	5	0	2	5	1	41	43	3	1	6	2
32	Zakigonj	SHIMANTIK	Hab	44	66	2	72	4	84	30	2	0	14	14
33	Balagonj	SHIMANTIK	Hab	106	13	0	36	99	29	15	0	0	5	0
34	Golapgonj	SHIMANTIK	Hab	43	65	0	34	0	50	21	0	0	34	0
35	Jaintapur	SHIMANTIK	Hab	39	14	7	32	15	36	15	4	0	33	0
36	Beanibazar	SHIMANTIK	Hab	4	26	17	30	3	40	19	2	0	1	1
37	Kanaighat	SHIMANTIK	Hab	12	0	0	0	2	12	8	5	0	6	3
38	Sarail	JUSSS	Hab	2	4	5	4	0	35	11	8	0	10	5
39	Kasbanagar	JUSSS	Hab	0	3	0	0	0	37	2	0	0	6	0
40	Moraigonj	CRC	Far	71	4	41	54	1	18	3	0	0	0	0
41	Bhaisakhola	CRC	Far	33	0	18	7	9	16	4	0	37	0	0
42	Chhatmari	CRC	Far	8	3	3	24	4	31	3	1	0	6	0

40

BEST AVAILABLE COPY

Sl No.	Thana	NGO	TA:Unit	A. Child Health Services					B. Reproductive Health Services					
				Childhood Illness <5 yrs					Pregnancy Care				PNC	
				Diarrhoea			ARI							
				No Dehydration	At Least some Dehydration	Dysentery	Common cold (No pneumonia)	Pneumonia	ANC-1	ANC-2	ANC-3 +	Referral	1st	Revisit
43	Dwatapur	PSKS	Far	42	118	10	22	0	74	76	30	48	9	0
44	Bhorsmara	PSKS	Far	16	43	0	1	0	49	46	5	0	1	0
45	Gongni	PSKS	Far	584	1	0	1	6	34	72	26	0	10	3
46	Kumarkhali	PJS	Far	35	7	37	52	1	72	23	21	0	20	0
47	Tongipara	SGUS	Far	47	0	0	0	0	0	0	0	0	0	0
48	Kachioni	SGUS	Far	31	0	1	3	2	2	0	0	0	0	0
49	Mahmudpur	SGUS	Far	100	26	0	30	10	14	9	0	0	6	3
50	Rajbar	MMkS	Far	12	1	1	3	0	4	0	0	0	0	1
51	Shibchar	MMkS	Far	13	0	19	9	9	2	0	2	0	2	0
52	Bhadarganj	MMkS	Far	386	11	9	4	2	4	2	3	0	0	0
53	Zanjira	MMkS	Far	445	76	31	14	0	24	23	7	0	14	4
54	Goalkhali	MMkS	Far	0	80	0	35	0	61	17	0	0	0	0
55	Damudya	MMkS	Far	194	112	36	69	12	22	3	4	0	1	0
56	Sitakandi	SUS	Feni	39	13	7	21	8	42	37	8	0	4	0
57	Rangunia	SUS	Feni	0	0	0	0	0	4	0	0	0	0	0
58	Fatikchari	SUS	Feni	0	26	1	1	9	20	21	4	0	0	0
59	Raozan	SUS	Feni	32	4	0	4	0	17	27	1	1	2	0
60	Sandwip	SUS	Feni	9	17	2	40	7	28	5	0	0	0	0
61	Mithapukur	PSF	Nil	22	21	34	2	0	40	44	0	0	16	2
62	Kaliganj	PSF	Nil	0	493	6	1	0	19	5	0	0	4	0
63	Sujanagar	PSF	Nil	12	0	14	37	0	23	9	3	1	0	0
64	Baliaba	PSF	Hab	10	0	8	16	1	23	31	1	0	0	0
65	Manohardi	PSF	Hab	1	0	0	0	0	83	20	4	12	0	0
66	Raipura	PSF	Hab	0	0	0	0	0	9	7	0	0	0	0
67	Lashkajang	PSF	Dha	72	0	92	0	0	18	10	0	0	0	0
68	Sreenagar	PSF	Dha	0	0	3	7	0	27	3	0	0	2	0
69	Pirganj	PSF	Nil	9	74	0	0	0	16	0	0	0	0	0
70	Pirgacha	PSF	Nil	40	1	0	1	0	22	15	3	0	4	0
71	Pachbibi	PSF	Nil	13	0	4	10	0	34	21	9	0	13	0
72	Birol	PSF	Nil	6	0	4	9	3	28	2	0	0	4	0
73	Badalgachi	PSF	Nil	46	41	0	0	1	22	11	1	0	6	2
74	Dhamoirhat	PSF	Nil	0	2	0	0	0	29	0	0	0	0	0
75	Ulipara	PSF	Nil	120	18	0	2	0	19	0	0	0	0	0
76	Shahajadpur	PSF	Nil	8	0	1	2	1	17	5	1	1	3	1
77	Sreepur	PSF	Far	36	0	0	3	5	52	14	0	0	3	0
78	Bhaluka	RFWP	Dha											
79	Burikhong	RFWP	Hab											
80	Nangalkot	RFWP	Hab											
81	Kasba	RFWP	Hab											
82	Mahinagar	RFWP	Hab											

BEST AVAILABLE COPY

Sl No.	Thana	NGO	TA-Unit	A. Child Health Services					B. Reproductive Health Services					
				Childhood Illness <5 yrs					Pregnancy Care				PNC	
				Diarrhoea			ARI							
				No Dehydration	At Least some Dehydration	Dysentery	Common cold (No pneumonia)	Pneumonia	ANC-1	ANC-2	ANC-3+	Referral	1st	Revisit
83	Sarsa	RFWP	Hab											
84	Dasthsadi	RFWP	Hab											
85	Moradnagar	RFWP	Hab											
86	Lohsum	RFWP	Hab											
87	Sonargaon	RFWP	Hab											
88	Mahinagaha	RFWP	Dha											
89	Nagarpur	RFWP	Dha											
90	Sonali	RFWP	Dha											
91	Bahlipur	RFWP	Dha											
92	Daldour	RFWP	Dha											
93	Feni	Swanirvar	Feni	231	145	29	40	12	58	1	0	28	8	0
94	Dagonbhuyan	Swanirvar	Feni	117	73	41	68	23	23	13	1	23	0	0
95	Parshuram	Swanirvar	Feni	53	32	27	75	15	4	1	0	15	1	0
96	Chagalnaya	Swanirvar	Feni	95	119	34	76	25	43	16	4	10	5	0
97	Sonagazi	Swanirvar	Feni	223	22	2	3	3	35	7	3	0	1	0
98	Kalaroshar	Swanirvar	Dha	198	10	3	11	3	50	24	1	0	0	0
99	Kaliadi	Swanirvar	Dha	111	113	3	11	0	15	5	1	21	0	0
100	Kalihati	Swanirvar	Dha	99	20	6	5	1	35	30	2	0	3	0
101	Ghatail	Swanirvar	Dha	58	3	21	23	9	38	12	7	0	1	0
102	Gholar	Swanirvar	Dha	62	10	1	7	0	5	2	0	0	0	0
103	Savar	Swanirvar	Dha	32	10	13	38	4	27	5	2	0	2	0
104	Jamalganj	Swanirvar	Dha	229	0	4	7	0	1	2	0	0	0	0
105	[illegible]	Swanirvar	Dha	190	7	1	4	1	26	0	0	0	1	0
106	Tarail	Swanirvar	Dha	131	12	15	24	19	19	5	1	2	7	0
107	Itna	Swanirvar	Dha	35	51	38	35	30	21	0	3	0	5	1
108	Bhairab	Swanirvar	Dha	14	13	5	2	9	36	25	5	0	3	0
109	Hossainpur	Swanirvar	Dha	17	21	1	15	5	16	2	0	5	1	0
110	Kaliganj	Swanirvar	Dha	257	143	17	88	17	6	1	0	32	0	0
111	Pakundia	Swanirvar	Dha	21	67	13	11	4	4	2	2	7	2	4
112	Gouripur	Swanirvar	Far	10	4	4	43	2	37	11	2	20	1	0
113	Lalmohan	Swanirvar	Far	41	65	4	22	1	10	1	2	0	0	0
114	Monpura	Swanirvar	Far	108	9	10	33	0	10	2	0	5	2	0
115	Tazumuddin	Swanirvar	Far	41	46	7	10	8	17	4	0	2	2	1
116	Madhupur	Swanirvar	Dha	150	23	5	36	8	33	5	0	0	2	0
117	Gopalpur	Swanirvar	Dha	37	6	10	13	4	14	4	7	1	14	0
118	Bhuapur	Swanirvar	Dha	4	1	1	6	1	11	8	1	0	5	0
119	Bakshiganj	Swanirvar	Dha	5	84	0	5	15	27	13	1	0	0	0
120	Dewanganj	Swanirvar	Dha	14	3	2	10	9	2	0	0	0	0	0
121	Islampur	Swanirvar	Dha	91	5	0	0	6	2	2	1	0	0	0
122	Melandah	Swanirvar	Dha	75	22	5	0	8	9	1	0	0	0	0
123	Ahmed	Swanirvar	Nil	8	34	6	2	8	16	10	1	0	1	0
124	Dobiganj	Swanirvar	Nil	2	1	2	9	2	41	4	1	1	14	0
125	Panchbibi	Swanirvar	Nil	79	18	9	10	8	95	0	0	0	0	0

BEST AVAILABLE COPY

42.

Sl No.	Thana	NGO	TA-Unit	A. Child Health Services: Childhood Illness < 5 yrs — Diarrhoea: No Dehydration	Diarrhoea: At Least some Dehydration	Dysentery	ARI: Common cold (No pneumonia)	ARI: Pneumonia	B. Reproductive Health Services — Pregnancy Care: ANC-1	ANC-2	ANC-3 +	Referral	PNC: 1st	Revisit
126	Ramgarh	SOPIRET	Feni	71	31	15	49	6	53	28	11	0	11	2
127	Ramganj	SOPIRET	Feni	44	11	9	7	0	8	3	0	0	0	0
128	Fariganj	SOPIRET	Feni	48	4	7	58	11	34	10	2	0	14	1
129	Kachua	SOPIRET	Feni	42	26	0	2	5	12	1	0	0	2	0
130	Hajiganj	SOPIRET	Feni	40	16	4	2	0	1	0	0	0	0	0
131	Rajarhat	DCPUK	Nil	92	54	1	13	13	15	12	2	0	4	4
132	Bhurungamari	DCPUK	Nil	218	83	15	6	8	15	17	2	12	4	1
133	Raumari	DCPUK	Nil	136	13	35	76	14	25	7	6	0	1	0
134	Char Rajibpur	DCPUK	Nil	52	510	7	0	0	6	4	3	0	0	0
135	Sonbog	BANDHAN	Feni	104	2	0	0	0	12	0	0	0	2	0
136	Companiganj	BANDHAN	Feni	7	0	0	7	0	7	0	1	1	0	0
137	Balikandi	VPKA	Far	153	0	5	22	1	35	13	14	0	2	0
138	Pangsha	VPKA	Far	6	627	4	12	5	110	15	2	0	0	0
139	Goalandaghat	VPKA	Far	153	76	6	37	0	29	8	4	0	10	11
140	Sundarganj	GKSS	Nil	722	73	7	2	0	45	8	0	0	7	0
141	Sadullahpur	GKSS	Nil	15	124	0	0	0	65	14	5	0	2	0
142	Gobindaganj	GKSS	Nil	68	40	17	15	22	21	23	308	0	21	2
143	Tetulkori	GKSS	Nil	101	46	6	8	9	9	7	7	0	1	0
144	Azmiriganj	BRAC	Hab	66	36	0	0	0	48	34	53	22	7	7
145	Baniachong	BRAC	Hab	25	648	0	0	0	98	72	131	54	22	27
146	Chunarughat	BRAC	Hab	80	481	2	2	3	227	97	50	630	31	15
147	Lakhai	BRAC	Hab	72	146	0	0	0	68	50	78	22	25	8
148	Nabiganj	BRAC	Hab	28	12	6	0	0	131	80	70	50	31	45
149	Madhabpur	BRAC	Hab	0	0	0	0	0	1	1	7	0	1	0
150	Bahubal	BRAC	Hab	26	11	17	0	0	57	2	0	0	1	0
151	Habiganj	BRAC	Hab	184	76	22	7	17	137	68	61	92	48	20
152	Sarailakha	BRAC	Hab	0	16	0	0	0	31	41	38	15	24	31
153	Kumalganj	BRAC	Hab	136	91	69	0	0	49	35	41	51	32	16
154	Rajnagar	BRAC	Hab	190	140	46	0	0	100	85	77	266	19	9
155	Kulaura	BRAC	Hab	9	12	0	0	1	292	155	155	103	67	95
156	Moulvibazar	BRAC	Hab	26	13	0	0	0	46	58	37	12	8	22
157	Chatak	BRAC	Hab	54	2	2	0	0	0	0	0	82	0	0
158	Dharmapasha	BRAC	Hab	0	0	0	0	0	0	0	0	221	0	0
159	Downbazar	BRAC	Hab	0	7	0	0	0	0	0	0	418	0	0
160	Tahirpur	BRAC	Hab	40	81	169	0	0	0	0	0	30	0	0
161	Jhinaigati	BRAC	Dha	361	242	402	204	16	131	116	208	223	32	64
162	Nakhalpari	BRAC	Dha	247	78	22	9	30	93	112	117	438	35	21
163	Sreebardi	BRAC	Dha	248	255	133	244	19	85	89	80	266	18	29
164	Nakhla	BRAC	Dha	497	341	227	458	67	53	69	167	249	22	8
165	Sherpur	BRAC	Dha	774	532	479	426	12	307	147	295	389	55	77
166	Jaldhaka	BRAC	Nil	23	0	0	0	0	165	247	347	1	104	65
167	Domar	BRAC	Nil	55	116	13	0	3	170	196	119	2	78	14
168	Saidpur	BRAC	Nil	39	53	25	0	0	90	136	231	15	78	92
169	Dimla	BRAC	Nil	247	234	138	26	16	138	165	153	3	75	48
170	Kishoreganj	BRAC	Nil	271	214	95	2	5	230	261	257	30	74	61
171	Nilphamari	BRAC	Nil	66	39	28	41	35	239	348	317	8	108	95
	Sreemongal	BRAC	Hab	0	93	0	0	0	157	72	117	35	21	14
			Total	13834	9637	2927	3520	859	6673	4111	3858	4119	1544	975

BEST AVAILABLE COPY

43

Sl No.	Thana	NGO	TA-Unit	Customers receiving FP Services						II. Reproductive Health Services (Continued)															
						Injectable Applied		IUD					Referred for Abortion				Side-effect Managed			STD/RTI Cases				
																				Female			Male	
				Pill	Condom	2m	3m	Insert	Remove	Nor.	Vas	Tub	Inj	IUD	Nor.	Ste.	Pill	Inj	IUD	VD	CD/LAP	GI/IB	UD/SS	GU/B
1	Bagmara	JTS	Nil	976	180	0	192	0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0
2	Dadagari	JTS	Nil	651	492	0	139	0	0	0	0	0	0	0	0	0	0	0	0	6	0	0	0	0
3	Gurudashpur	JTS	Nil	596	84	0	109	2	2	0	0	0	0	0	0	4	24	30	1	31	28	6	0	0
4	Lohagara	JTS	Far	913	236	0	212	0	0	0	0	0	0	0	0	0	0	0	2	5	35	0	0	0
5	Mohanganj	JTS	Dha	218	79	0	57	0	2	0	0	0	0	0	0	1	0	0	0	3	4	0	0	0
6	Moheshpur	JTS	Far	336	37	0	180	1	0	0	0	0	0	0	0	0	0	2	0	1	4	0	0	0
7	Pabna	JTS	Nil	236	27	0	99	2	0	0	0	0	0	1	2	4	0	0	0	23	0	0	0	0
8	Singair	JTS	Dha	173	0	0	99	0	1	0	0	0	83	0	0	0	0	0	1	9	0	0	0	0
9	Sirajganj	JTS	Nil	1025	130	0	553	9	0	0	0	0	0	0	0	8	5	4	0	15	30	4	0	0
10	Sreepur	JTS	Dha	639	78	0	15	0	2	0	0	0	0	0	0	0	0	0	0	2	1	0	0	0
11	Atpara	JTS	Dha	585	120	0	36	1	0	0	0	0	0	0	0	0	0	0	0	21	1	0	0	0
12	Kotalipara	JTS	Dha	328	140	0	117	1	0	0	0	0	0	0	0	0	0	1	0	0	13	0	0	0
13	Khalajuri	JTS	Dha	74	36	0	29	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0
14	Purbadhala	JTS	Dha	665	108	0	92	1	0	0	0	0	0	0	0	0	0	0	0	4	11	0	0	0
15	Gazipur	JTS	Dha	534	112	0	97	4	0	0	0	0	0	0	0	1	1	1	2	32	1	18	1	0
16	Narayanpur	JTS	Dha	84	57	0	34	1	0	0	0	0	0	0	0	0	0	3	0	3	4	0	0	0
17	Dhibalaya	JTS	Dha	431	336	0	10	2	5	0	0	0	3	0	4	4	1	0	5	30	14	14	10	11
18	Mohanpur	JTS	Nil	327	45	0	205	0	1	0	0	0	0	0	0	1	0	0	0	2	1	0	0	0
19	Baraigram	JTS	Nil	741	99	0	221	2	0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0
20	Jibanagar	JTS	Far	815	59	0	219	0	0	0	0	0	0	4	0	0	4	0	0	0	7	0	1	0
21	Bagerpara	JTS	Far	494	317	0	196	6	12	0	0	0	0	0	0	0	0	4	0	11	3	0	0	0
22	Alfadanga	BAMANEH	Far	329	491	0	36	0	1	0	0	0	21	0	0	0	65	27	1	0	0	0	0	0
23	Chandina	BAMANEH	Hab	755	389	0	233	10	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	Gobindi	BAMANEH	Nil	1567	313	0	810	3	1	0	0	0	327	5	0	0	3	33	4	0	0	0	0	0
25	Dohar	BAMANEH	Dha	326	123	0	0	0	0	0	0	0	51	2	0	0	1	0	0	2	1	0	7	0
26	Karanjoni	BAMANEH	Dha	508	199	0	0	0	0	0	0	0	21	0	0	0	0	0	0	0	0	0	0	0
27	Nawabganj	BAMANEH	Dha	460	84	0	0	0	0	0	0	0	14	0	0	0	1	0	0	1	0	0	0	0
28	Baulmari	BAMANEH	Far	586	42	0	103	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29	Shibganj	BAMANEH	Nil	1900	138	0	112	0	1	0	0	0	0	0	0	0	0	0	1	0	3	0	0	0
30	Sonatola	BAMANEH	Nil	952	146	0	168	3	5	0	0	0	0	0	0	0	0	0	0	0	6	0	0	0
31	Srimongal	SUOPPS	Hab	255	20	0	95	1	0	0	0	0	0	0	0	0	1	7	1	10	0	0	0	0
32	Kulaura	SHIMANTIK	Hab	493	162	0	19	0	0	0	0	0	0	0	0	0	0	0	0	29	13	11	2	0
33	Balaganj	SHIMANTIK	Hab	154	65	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0	0	10	0
34	Golapganj	SHIMANTIK	Hab	373	120	0	39	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Jaintapur	SHIMANTIK	Hab	392	40	0	18	0	0	0	0	0	0	0	0	0	0	0	0	24	9	1	17	3
36	Bianibazar	SHIMANTIK	Hab	438	162	0	33	0	0	0	0	0	0	0	0	0	0	0	0	11	0	0	2	0
37	Kanaighat	SHIMANTIK	Hab	145	94	0	33	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0	0	0
38	Barail	JUBSS	Hab	131	61	0	83	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Nasirnagar	JUBSS	Hab	117	41	0	39	0	0	0	0	0	0	0	0	0	1	4	0	0	0	0	0	0
40	Morelganj	CRC	Far	384	65	0	54	1	4	0	0	0	0	0	0	0	0	0	0	65	4	0	0	0
41	Bhandaria	CRC	Far	321	98	0	145	14	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42	Chitalmari	CRC	Far	38	8	0	50	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	1	0

BEST AVAILABLE COPY

44

Sl No.	Thana	NGO	TA-Unit	Customers receiving FP Services									Referred for Method				Side-effect Managed			STD/RTI Cases				
						Injectable Applied		IUD												Female			Male	
				Pill	Condom	2m	3m	Insert	Remove	Nor.	Vas	Tub	Inj	IUD	Nor.	Ste.	Pill	Inj	IUD	VD	CD/LAP	GU/IB	UD/SS	GU/IB
43	Daulatpur	PSKS	Far	166	275	0	304	0	0	0	0	0	34	0	0	0	10	5	0	0	0	0	0	0
44	Bhersamara	PSKS	Far	491	222	0	105	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45	Gangni	PSKS	Far	560	333	0	592	2	0	0	0	0	0	0	3	0	1	1	0	2	1	0	0	0
46	Kumarkhali	PJS	Far	471	168	0	132	3	0	0	0	0	0	0	0	0	4	7	0	34	30	0	0	0
47	Tungipara	SGUS	Far	139	58	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
48	Kashiani	SGUS	Far	533	275	0	70	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
49	Muksudpur	SGUS	Far	956	175	0	104	9	0	0	0	0	0	0	0	0	0	0	0	18	0	0	10	0
50	Rajbari	MMkS	Far	133	55	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Shibchar	MMkS	Far	257	105	0	107	1	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0
52	Bhedarganj	MMkS	Far	440	162	0	14	0	0	0	0	0	0	0	0	0	4	1	0	0	0	0	1	0
53	Zanjira	MMkS	Far	252	111	0	43	0	0	0	0	0	0	0	0	0	0	0	0	1	7	2	0	0
54	Gosairhat	MMkS	Far	107	64	0	7	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	5	0
55	Damudya	MMkS	Far	658	189	0	35	0	0	0	0	0	0	0	0	0	5	8	0	5	0	10	10	10
56	Shakundi	SUS	Feni	462	89	0	168	7	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
57	Rangunia	SUS	Feni	91	21	0	95	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
58	Fatikchari	SUS	Feni	859	106	0	246	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
59	Raozan	SUS	Feni	814	412	0	125	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0
60	Sandwip	SUS	Feni	494	219	0	70	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0
61	Mithapukur	PSF	Nil	909	145	0	328	3	2	0	0	0	0	0	0	0	4	6	2	3	2	0	0	0
62	Kaliganj	PSF	Nil	950	206	0	258	2	0	0	0	0	0	0	0	0	4	1	0	0	0	0	0	0
63	Sujanagar	PSF	Nil	609	65	0	152	0	0	0	0	0	0	1	1	0	0	1	1	11	1	0	0	0
64	Bahubal	PSF	Hab	377	34	0	110	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
65	Madhabdi	PSF	Hab	380	47	0	103	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
66	Lakhai	PSF	Hab	229	211	0	272	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0
67	Lakhajang	PSF	Dha	371	35	0	14	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
68	Sreenagar	PSF	Dha	290	75	0	38	0	0	0	0	0	0	0	0	0	0	0	0	5	0	0	0	0
69	Pirganj	PSF	Nil	752	110	0	370	3	8	0	0	0	14	0	0	17	0	4	0	0	0	0	0	0
70	Pirgacha	PSF	Nil	248	106	0	200	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
71	Parbatipur	PSF	Nil	520	98	0	153	4	3	0	0	0	0	0	0	0	13	11	2	6	4	0	0	0
72	Ekol	PSF	Nil	629	39	0	101	1	0	0	0	0	0	0	0	1	3	1	2	7	7	0	0	0
73	Badalgachi	PSF	Nil	783	87	0	546	0	0	0	0	0	0	0	0	1	1	1	0	0	0	0	0	1
74	Dhamoirhat	PSF	Nil	514	69	0	19	0	0	0	0	0	2	1	0	6	0	0	0	0	0	0	0	0
75	Ullapara	PSF	Nil	543	166	0	232	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
76	Shahjadpur	PSF	Nil	187	29	0	428	1	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0
77	Sirajganj	PSF	Far	512	62	0	85	1	1	0	0	0	0	0	0	3	0	0	0	0	1	0	0	0
78	Bhaluka	RFWP	Dha																					
79	Durlabhganj	RFWP	Hab																					
80	Mangalkot	RFWP	Hab																					
81	Kasba	RFWP	Hab																					
82	Habiganj	RFWP	Hab																					
83	Barura	RFWP	Hab																					
84	Bandhanti	RFWP	Hab																					

BEST AVAILABLE COPY

45

Sl No.	Thana	NGO	TA-Unit	B. Reproductive Health Services (Continued)																					
				Customers receiving FP Services									Referral for Method				Side-effect Managed			STD/RTI Cases				
						Injectable Applied		IUD												Female			Male	
				Pill	Condom	2m	3m	Insert	Remove	Nor.	Vas	Tub	Inj	IUD	Nor.	Ste.	Pill	Inj	IUD	VD	CD/LAP	GU/IB	UD/SS	GU/IB
85	Morudonger	RFWP	Hab																					
86	Lakum	RFWP	Hab																					
87	Sooorgaon	RFWP	Hab																					
88	Mohtapacha	RFWP	Dha																					
89	Nagarpur	RFWP	Dha																					
90	Basail	RFWP	Dha																					
91	Sabhipur	RFWP	Dha																					
92	Goldaur	RFWP	Dha																					
93	Feni	Swanirvar	Feni	603	125	0	159	1	1	0	0	0	32	0	2	3	60	77	7	43	20	3	0	0
94	Dagonbhuyan	Swanirvar	Feni	791	236	0	145	3	2	0	0	0	0	0	0	2	35	25	0	8	0	0	0	0
95	Parshuram	Swanirvar	Feni	419	74	0	53	1	0	0	0	0	33	0	1	3	8	26	9	0	0	0	0	0
96	Chagalnaya	Swanirvar	Feni	679	133	0	41	1	2	0	0	0	0	0	0	0	21	24	3	11	9	3	2	0
97	Sonagazi	Swanirvar	Feni	264	163	24	135	1	1	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0
98	Kalkanhar	Swanirvar	Dha	487	249	0	128	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0
99	Kathal	Swanirvar	Dha	422	153	0	296	0	0	0	0	0	26	8	0	0	3	0	1	0	0	0	0	0
100	Kalkhari	Swanirvar	Dha	1278	498	0	179	3	2	0	0	0	0	0	0	0	1	3	0	3	3	0	0	0
101	Ghatak	Swanirvar	Dha	1110	575	0	180	0	1	0	0	0	65	0	0	0	1	0	1	21	13	3	0	0
102	Gholar	Swanirvar	Dha	111	18	0	39	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
103	Sover	Swanirvar	Dha	348	82	0	8	0	0	0	0	0	47	0	0	0	1	0	0	18	0	0	0	3
104	Anotogram	Swanirvar	Dha	236	101	0	16	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0
105	Mitil	Swanirvar	Dha	230	82	0	60	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
106	Tarail	Swanirvar	Dha	231	60	0	19	0	0	0	0	0	1	0	0	0	0	0	1	0	4	0	0	0
107	Ilan	Swanirvar	Dha	292	153	0	0	0	0	0	0	0	0	0	0	0	14	0	0	6	0	0	0	0
108	Bhakrab	Swanirvar	Dha	133	29	0	89	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
109	Hossainpur	Swanirvar	Dha	419	97	0	0	0	0	0	0	0	178	0	1	0	18	9	2	0	2	2	0	1
110	Karimganj	Swanirvar	Dha	613	277	0	151	3	0	0	0	0	7	1	0	0	33	14	2	1	0	0	0	0
111	Pabandia	Swanirvar	Dha	305	112	0	0	0	0	0	0	0	37	0	0	0	2	1	0	0	1	0	0	0
112	Daulatkhan	Swanirvar	Far	364	17	0	302	6	1	0	0	0	0	0	0	0	0	0	0	4	0	1	0	0
113	Lalmohan	Swanirvar	Far	913	410	0	303	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
114	Monpura	Swanirvar	Far	139	99	0	124	3	0	0	0	0	15	0	0	0	1	3	4	0	0	0	0	0
115	Tazumuddin	Swanirvar	Far	318	117	0	202	3	1	0	0	0	0	0	0	0	7	8	1	0	0	0	0	0
116	Medhapur	Swanirvar	Dha	1072	184	0	98	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
117	Gopalpur	Swanirvar	Dha	923	163	0	0	0	0	0	0	0	312	0	0	0	15	10	0	34	26	4	5	3
118	Bhaspur	Swanirvar	Dha	66	180	0	8	0	0	0	0	0	0	0	0	0	0	0	0	7	2	0	1	0
119	Bahadurganj	Swanirvar	Dha	841	104	0	332	3	0	0	0	0	0	0	0	0	0	4	1	0	0	0	0	0
120	Dumnagaon	Swanirvar	Dha	620	199	0	493	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
121	Jahanpur	Swanirvar	Dha	566	423	0	53	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0
122	Mahadeb	Swanirvar	Dha	1073	252	0	305	1	0	0	0	0	0	0	0	0	5	0	1	5	0	0	0	0
123	Atwari	Swanirvar	Nil	708	117	0	35	5	0	0	0	0	13	7	0	0	0	0	1	0	0	0	0	0
124	Gobindganj	Swanirvar	Nil	853	60	0	162	0	0	0	0	0	0	0	0	0	4	5	0	0	0	0	0	0
125	Panchhari	Swanirvar	Nil	1670	143	0	310	0	0	0	0	0	0	0	0	7	39	37	0	0	0	0	0	0
126	Ramgati	SOPIREY	Feni	1813	139	0	243	1	0	0	0	0	0	0	0	0	0	0	0	25	0	0	2	0

46

BEST AVAILABLE COPY

No.	Thana	NGO	TA-Unit	Customers receiving FP Services									B. Reproductive Health Services (Continued)											
						Injectable Applied		IUD					Referred for Method				Side-effect Managed			STD/RTI Cases				
																				Female			Male	
				Pill	Condom	2m	3m	Insert	Remove	Ner.	Vas	Tub	Inj	IUD	Ner.	Ste.	Pill	Inj	IUD	VD	CD/LAP	GU/IB	UD/SS	GU/I
7	Rangpur	SOPIRET	Feni	642	50	0	38	1	0	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0
8	Faridgonj	SOPIRET	Feni	1336	79	0	211	14	1	0	0	0	0	0	1	0	6	15	1	31	0	0	0	0
9	Kachua	SOPIRET	Feni	698	54	0	45	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	Hajiganj	SOPIRET	Feni	4	0	0	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1	Rajarhat	DCPUK	Nil	1401	125	0	274	9	0	0	0	0	0	0	0	1	0	6	1	19	9	2	1	0
2	Bhuvanganari	DCPUK	Nil	1581	174	0	202	5	0	0	0	0	0	0	0	0	2	12	0	33	22	10	3	2
3	Roomari	DCPUK	Nil	654	198	0	350	12	0	0	0	0	0	0	0	4	10	16	0	15	14	33	17	7
4	Char Rajibpur	DCPUK	Nil	1894	90	0	203	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	Sonbog	BANDHAN	Feni	302	203	0	63	0	0	0	0	0	0	0	2	0	0	0	3	2	0	0	0	0
6	Companiganj	BANDHAN	Feni	285	82	0	203	0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0
7	Bathondi	VPKA	Far	515	154	1	92	1	0	0	0	0	0	0	2	0	0	0	0	45	0	0	1	0
8	Pangsha	VPKA	Far	600	253	0	165	3	0	0	0	0	0	0	0	0	0	0	0	0	51	4	1	1
9	Goalandaghat	VPKA	Far	258	85	0	37	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	2	0
0	Bandarganj	GKSS	Nil	991	156	0	209	7	0	0	0	0	0	0	0	0	12	8	0	11	4	0	0	0
1	Sadullahpur	GKSS	Nil	1010	288	0	213	8	7	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0
2	Gobindaganj	GKSS	Nil	1055	181	0	136	1	1	0	0	0	0	0	0	0	41	10	1	22	9	0	2	0
3	Fulchari	GKSS	Nil	760	81	0	155	2	0	0	0	0	1	1	0	2	2	11	0	10	7	0	0	0
4	Azmiriganj	BRAC	Hab	829	56	0	0	0	0	0	0	0	8	9	0	0	18	12	0	0	0	0	0	0
5	Baniachang	BRAC	Hab	2527	184	0	11	0	0	0	0	0	35	7	0	2	1	1	0	0	0	0	0	0
6	Chunarughat	BRAC	Hab	3530	51	0	32	0	0	0	0	0	237	24	0	8	76	34	14	0	0	0	0	0
7	Lakhai	BRAC	Hab	1723	45	0	0	0	0	0	0	0	0	0	0	0	27	14	0	0	0	0	0	0
8	Habiganj	BRAC	Hab	1344	28	0	3	0	0	0	0	0	34	5	0	2	2	2	1	0	0	0	0	0
9	Madhabpur	BRAC	Hab	15	15	0	4	0	0	0	0	0	12	4	0	0	0	0	0	0	0	0	0	0
0	Sahabal	BRAC	Hab	82	13	0	0	0	0	0	0	0	30	7	0	1	17	11	8	0	0	0	0	0
1	Nabiganj	BRAC	Hab	3313	86	0	57	0	0	0	0	0	128	1	0	3	42	17	1	0	23	0	0	0
2	Baralekha	BRAC	Hab	346	72	0	24	1	0	0	0	0	14	1	2	11	4	2	0	0	0	0	0	0
3	Kamalganj	BRAC	Hab	2127	53	0	40	0	0	0	0	0	216	60	18	6	260	32	12	0	0	0	0	0
4	Rajnagar	BRAC	Hab	2394	155	0	21	0	0	0	0	0	481	36	37	16	20	22	6	0	0	0	0	0
5	Kulaura	BRAC	Hab	1205	33	0	57	1	0	0	0	0	130	21	0	15	34	6	0	0	0	0	0	0
6	Moulvibazar	BRAC	Hab	591	26	0	10	0	0	0	0	0	20	9	0	3	2	9	10	0	0	0	0	0
7	Chatak	BRAC	Hab	25	7	0	0	0	0	0	0	0	7	0	0	0	4	3	0	0	0	0	0	0
8	Dharmapasha	BRAC	Hab	345	12	0	0	0	0	0	0	0	77	5	0	1	0	0	0	0	0	0	0	0
9	Dowrabazar	BRAC	Hab	201	3	0	0	0	0	0	0	0	88	10	0	1	12	8	1	0	0	0	0	0
0	Tahirpur	BRAC	Hab	90	6	0	0	0	0	0	0	0	25	5	0	0	0	0	0	0	0	0	0	0
1	Jhinaigati	BRAC	Dha	1030	151	0	11	0	0	0	0	0	103	45	0	1	11	0	0	18	5	0	4	2
2	Nalitabari	BRAC	Dha	2653	117	0	0	0	0	0	0	0	196	22	0	2	13	10	4	0	0	0	0	0
3	Sreebardi	BRAC	Dha	3958	253	0	23	0	0	0	0	0	803	31	0	9	6	4	0	0	0	0	0	0
4	Nakhla	BRAC	Dha	1203	536	0	22	0	0	0	0	0	346	68	16	0	24	15	13	0	0	0	1	0
5	Sherpur	BRAC	Dha	5885	385	0	31	0	0	0	0	0	881	43	5	8	81	63	14	0	0	0	0	0
6	Jaldhaka	BRAC	Nil	4821	973	0	0	0	0	0	0	0	381	23	0	0	14	7	3	0	0	0	0	0
7	Dumar	BRAC	Nil	2435	246	0	72	0	0	0	0	0	258	34	0	76	54	16	4	0	0	0	0	0
168	Saidpur	BRAC	Nil	1409	72	0	0	0	0	0	0	0	67	7	0	0	1	1	2	0	0	0	0	0
169	Dimla	BRAC	Nil	4651	191	0	0	0	0	0	0	0	128	6	0	14	12	8	3	0	0	0	0	0
170	Kishoreganj	BRAC	Nil	6203	176	0	0	0	0	0	0	0	330	5	61	49	57	15	0	0	0	0	0	0
171	Nilphamari	BRAC	Nil	5754	145	0	40	0	0	0	0	0	227	3	69	10	143	41	3	0	0	0	0	0
	Sreemangal	BRAC	Hab	3035	40	0	39	0	0	0	0	0	45	23	0	25	23	5	2	0	0	0	0	0
				[illegible]	134561	11206	15	19353	261	76	0	0	0	6651	549	235	339	1445	875	169	861	474	132	128	44

BEST AVAILABLE COPY

Sl	Thana	NGO	TA-Unit	C. Women and Children Immunization TT Doses Pregnancy Status																			
				Pregnant										Non-Pregnant									
				1st		2nd		3rd		4th		5th		1st		2nd		3rd		4th		5th	
				Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined
1	Bagmara	JTS	Nil	0	4	0	1	0	0	0	0	0	1	0	3	0	1	0	0	0	2	0	3
2	Godagari	JTS	Nil	0	40	0	28	0	10	0	0	0	0	0	30	0	20	0	0	0	0	0	0
3	Gurudashpur	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	Lohagara	JTS	Far	0	24	0	19	0	5	0	0	0	0	0	19	0	10	0	2	0	0	0	0
5	Mohonganj	JTS	Dha	0	32	0	23	0	22	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Moheshpur	JTS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	Poba	JTS	Nil	0	16	0	21	0	9	0	0	0	0	0	17	0	23	0	7	0	0	0	0
8	Singair	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Singra	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	Sreepur	JTS	Dha	0	28	0	35	0	19	0	1	0	0	0	16	0	13	0	6	0	7	0	3
11	Atpara	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12	Kamalganj	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	Khaliajuri	JTS	Dha	0	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Purbadhala	JTS	Dha	0	2	0	2	0	3	0	2	0	0	0	0	0	0	0	0	0	0	0	0
15	Gauripur	JTS	Dha	17	13	11	7	13	11	4	5	5	6	4	3	2	3	1	0	0	0	0	0
16	Netrakonpur	JTS	Dha	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Shibalaya	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	0
18	Mohanpur	JTS	Nil	0	27	0	18	0	6	0	0	0	0	0	3	0	7	0	0	0	0	0	0
19	Baraigram	JTS	Nil	0	19	0	27	0	22	0	1	0	2	0	17	0	13	0	0	0	0	0	0
20	Jibonnagar	JTS	Far	0	3	0	14	0	8	0	0	0	0	0	16	0	18	0	2	0	0	0	0
21	Bagerpara	JTS	Far	0	5	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Alfadanga	BAMANEH	Far	7	0	5	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	Chandina	BAMANEH	Hab	9	13	8	10	0	13	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	Gabtoli	BAMANEH	Nil	0	49	0	42	0	13	0	0	0	0	0	13	0	8	0	5	0	0	0	0
25	Dohar	BAMANEH	Dha	0	2	0	19	0	1	0	0	0	0	0	3	0	0	0	0	0	0	0	0
26	Keraniganj	BAMANEH	Dha	0	6	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
27	Nawabganj	BAMANEH	Dha	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Bankmari	BAMANEH	Far	10	0	10	0	6	0	7	0	2	0	8	0	7	0	10	0	6	0	7	0
29	Shibganj	BAMANEH	Nil	0	19	0	19	0	6	0	0	0	0	0	8	0	4	0	0	0	0	0	0
30	Sonatola	BAMANEH	Nil	0	24	0	26	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	Srimangal	SUOPPS	Hab	8	27	11	32	0	20	0	3	0	7	0	12	0	8	0	0	0	0	0	0
32	Zakiganj	SHIMANTIK	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33	Golapganj	SHIMANTIK	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
34	Golapganj	SHIMANTIK	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Jalalpur	SHIMANTIK	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
36	Beanibazar	SHIMANTIK	Hab	7	0	7	0	1	0	0	0	0	0	24	0	7	0	0	0	0	0	0	0
37	Kanaighat	SHIMANTIK	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
38	Sarail	JUSSS	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Nasirnagar	JUSSS	Hab	0	4	0	3	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40	Meerzaganj	CRC	Far	9	0	8	0	0	0	0	0	0	0	52	0	45	0	0	0	0	0	0	0
41	Bhaboanipur	CRC	Far	0	7	0	7	0	3	0	0	0	0	0	1	0	1	0	0	0	1	0	0
42	Chitalmari	CRC	Far	0	4	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3

BEST AVAILABLE COPY

58

C. Women and Children Immunization
TT Doses
Pregnancy Status

Sl	Thana	NGO	TA-Unit	Pregnant 1st Self	Pregnant 1st Combined	Pregnant 2nd Self	Pregnant 2nd Combined	Pregnant 3rd Self	Pregnant 3rd Combined	Pregnant 4th Self	Pregnant 4th Combined	Pregnant 5th Self	Pregnant 5th Combined	Non-Pregnant 1st Self	Non-Pregnant 1st Combined	Non-Pregnant 2nd Self	Non-Pregnant 2nd Combined	Non-Pregnant 3rd Self	Non-Pregnant 3rd Combined	Non-Pregnant 4th Self	Non-Pregnant 4th Combined	Non-Pregnant 5th Self	Non-Pregnant 5th Combined
43	Daulatpur	PSKS	Far	18	0	28	0	0	0	0	0	0	0	16	0	4	0	0	0	0	0	0	0
44	Bheramara	PSKS	Far	12	26	2	5	0	8	0	0	0	0	0	0	2	0	0	0	0	0	0	0
45	Gangni	PSKS	Far	0	17	0	13	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
46	Kumarkhali	PJS	Far	0	44	0	56	0	21	0	16	0	0	0	14	0	24	0	0	0	0	0	0
47	Tongipara	SGUS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
48	Kushtia	SGUS	Far	0	5	0	4	0	0	0	0	0	0	0	10	0	8	0	7	0	6	0	7
49	Mahmudpur	SGUS	Far	0	9	0	5	0	0	0	0	0	0	0	3	0	2	0	0	0	0	0	0
50	Rajbari	MMkS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Shibchar	MMkS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
52	Bhedarganj	MMkS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
53	Zanjira	MMkS	Far	7	0	5	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0
54	Goalchat	MMkS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Damudya	MMkS	Far	0	31	0	22	0	19	0	15	0	1	0	30	0	22	0	17	0	20	0	13
56	Sitakundi	SUS	Feni	0	13	0	22	0	6	0	0	0	0	0	10	0	3	0	3	0	3	0	4
57	Rangunia	SUS	Feni	0	8	0	9	0	1	0	0	0	0	0	4	0	0	0	0	0	0	0	0
58	Fatikchari	SUS	Feni	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
59	Rawzan	SUS	Feni	11	0	6	0	0	0	0	0	0	0	23	0	7	0	0	0	0	0	0	0
60	Sandwip	SUS	Feni	18	0	8	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0
61	Mithapukur	PSF	Nil	12	20	16	30	4	11	0	4	0	3	1	3	2	1	0	0	0	0	0	0
62	Kazipara	PSF	Nil	10	6	6	17	3	5	4	0	1	0	1	0	0	0	0	0	0	0	0	0
63	Sujanagar	PSF	Nil	0	0	5	0	4	0	2	0	0	0	0	15	0	16	0	0	0	0	0	0
64	Belaba	PSF	Hab	0	13	0	9	0	9	0	1	0	9	0	0	0	0	0	0	0	0	0	0
65	Manohardi	PSF	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
66	Raipura	PSF	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
67	Louhajang	PSF	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
68	Sreenagar	PSF	Dha	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
69	Pirganj	PSF	Nil	0	10	0	5	0	0	0	0	0	0	0	10	0	0	0	0	0	0	0	0
70	Pirgacha	PSF	Nil	0	15	0	21	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
71	Parbatipur	PSF	Nil	5	18	6	11	0	17	2	0	0	0	3	11	1	1	0	0	0	0	0	0
72	Birol	PSF	Nil	0	7	0	17	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0
73	Badalgachi	PSF	Nil	0	0	0	12	0	7	0	10	0	1	0	4	0	0	0	0	0	0	0	0
74	Dhamurhat	PSF	Nil	0	10	0	9	0	9	0	3	0	5	0	4	0	4	0	8	0	4	0	14
75	Ullapara	PSF	Nil	0	2	0	2	0	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0
76	Shahajadpur	PSF	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
77	Sreepur	PSF	Far	0	5	0	3	0	3	0	4	0	0	0	0	0	0	0	0	0	0	0	0
78	Bhaluka	RFWP	Dha																				
79	Burichang	RFWP	Hab																				
80	Nangalkot	RFWP	Hab																				
81	Kasba	RFWP	Hab																				
82	Nabinagar	RFWP	Hab																				
83	Barura	RFWP	Hab																				
84	Daudkandi	RFWP	Hab																				

49

Sl	Thana	NGO	TA-Unit	C. Women and Children Immunization																			
				TT Doses																			
				Pregnancy Status																			
				Pregnant										Non-Pregnant									
				1st		2nd		3rd		4th		5th		1st		2nd		3rd		4th		5th	
				Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined
85	Murodnagar	RFWP	Hab																				
86	Laksam	RFWP	Hab																				
87	Sonargaon	RFWP	Hab																				
88	Muktagacha	RFWP	Dha																				
89	Nagarpur	RFWP	Dha																				
90	Basail	RFWP	Dha																				
91	Sahbipur	RFWP	Dha																				
92	Daldour	RFWP	Dha																				
93	Feni	Swanirvar	Feni	23	0	15	0	0	0	0	0	0	0	7	0	4	0	0	0	0	0	0	0
94	Dagonbhuyan	Swanirvar	Feni	0	1	0	0	0	5	0	1	0	0	0	0	0	0	0	0	0	0	0	0
95	Parshuram	Swanirvar	Feni	0	4	0	3	0	2	0	1	0	0	0	4	0	3	0	1	0	0	0	0
96	Chagalnaya	Swanirvar	Feni	0	14	0	10	0	11	0	4	0	2	0	0	0	0	0	0	0	0	0	0
97	Sonagazi	Swanirvar	Feni	0	1	0	1	0	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
98	Kutbrehor	Swanirvar	Dha	0	15	0	13	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0
99	Kadadi	Swanirvar	Dha	0	5	0	10	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0
100	Kalihati	Swanirvar	Dha	0	13	0	21	0	0	0	0	0	0	0	12	0	9	0	1	0	0	0	1
101	Ghatail	Swanirvar	Dha	0	5	0	5	0	4	0	3	0	2	0	2	0	2	0	5	0	3	0	2
102	Gholar	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
103	Savar	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
104	Austagram	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
105	Nikli	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
106	Tarail	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
107	Itna	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
108	Bhairab	Swanirvar	Dha	5	0	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
109	Hossainpur	Swanirvar	Dha	0	1	0	4	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
110	Karimganj	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
111	Pakundia	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
112	Daulatkhan	Swanirvar	Far	0	1	0	3	0	8	0	2	0	1	0	1	0	0	0	0	0	0	0	0
113	Lalmohan	Swanirvar	Far	0	9	0	4	0	10	0	1	0	2	0	0	0	0	0	0	0	0	0	0
114	Monpura	Swanirvar	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
115	Tazumuddin	Swanirvar	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
116	Madhupur	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
117	Gopalpur	Swanirvar	Dha	0	24	0	9	0	9	0	1	0	0	0	0	0	0	0	0	0	0	0	0
118	Bhuapur	Swanirvar	Dha	0	25	0	10	0	0	0	0	0	0	0	4	0	0	0	0	0	0	0	0
119	Bakshiganj	Swanirvar	Dha	19	0	8	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
120	Dewanganj	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
121	Islampur	Swanirvar	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
122	Melandah	Swanirvar	Dha	0	4	0	0	0	3	0	0	0	0	0	3	0	0	0	0	0	0	0	0
123	Atwari	Swanirvar	Nil	0	3	0	3	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
124	Dobiganj	Swanirvar	Nil	0	7	0	9	0	11	0	11	0	8	0	0	0	0	0	0	0	0	0	0
125	Panchbibi	Swanirvar	Nil	0	57	0	43	0	15	0	0	0	0	0	12	0	4	0	4	0	0	0	0
126	Ramganj	SOPIRET	Feni	13	0	20	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

BEST AVAILABLE COPY

C. Women and Children Immunization
TT Doses
Pregnancy Status

Sl	Thana	NGO	TA-Unit	Pregnant 1st Self	Pregnant 1st Combined	Pregnant 2nd Self	Pregnant 2nd Combined	Pregnant 3rd Self	Pregnant 3rd Combined	Pregnant 4th Self	Pregnant 4th Combined	Pregnant 5th Self	Pregnant 5th Combined	Non-Pregnant 1st Self	Non-Pregnant 1st Combined	Non-Pregnant 2nd Self	Non-Pregnant 2nd Combined	Non-Pregnant 3rd Self	Non-Pregnant 3rd Combined	Non-Pregnant 4th Self	Non-Pregnant 4th Combined	Non-Pregnant 5th Self	Non-Pregnant 5th Combined
127	Ramganj	SOPIRET	Feni	0	16	0	16	0	4	0	2	0	0	0	5	0	2	0	0	0	0	0	0
128	Faridganj	SOPIRET	Feni	0	7	0	11	0	6	0	2	0	3	0	0	0	0	0	0	0	0	0	0
129	Keshua	SOPIRET	Feni	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
130	Haziganj	SOPIRET	Feni	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
131	Rajarhat	DCPUK	Nil	0	53	0	58	0	46	0	1	0	0	0	9	0	14	0	2	0	0	0	0
132	Bhorungamari	DCPUK	Nil	0	10	0	23	0	1	0	0	0	0	0	2	0	5	0	0	0	0	0	0
133	Roumari	DCPUK	Nil	6	0	5	0	0	0	0	0	0	0	15	0	13	0	1	0	0	0	0	0
134	Char Rajibpur	DCPUK	Nil	0	16	0	17	0	13	0	2	0	0	0	4	0	5	0	1	0	0	0	0
135	Sonbag	BANDHAN	Feni	0	20	0	6	0	7	0	4	0	3	0	0	0	0	0	0	0	0	0	0
136	Companiganj	BANDHAN	Feni	27	0	21	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
137	Balikandi	VPKA	Far	0	27	0	44	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0
138	Pangsha	VPKA	Far	0	16	0	8	0	2	0	0	0	0	0	30	0	10	0	0	0	0	0	0
139	Goalandaghat	VPKA	Far	0	9	0	14	0	0	0	0	0	0	0	2	0	9	0	9	0	0	0	0
140	Sundarganj	GKSS	Nil	0	29	0	44	0	27	0	34	0	9	0	24	0	25	0	28	0	14	0	0
141	Sadullahpur	GKSS	Nil	0	21	0	14	0	11	0	1	0	0	0	28	0	0	0	6	0	0	0	0
142	Gobindaganj	GKSS	Nil	0	8	0	16	0	4	0	0	0	0	0	2	0	3	0	4	0	4	0	0
143	Fulchari	GKSS	Nil	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
144	Azmiriganj	BRAC	Hab	0	141	0	149	0	128	0	44	0	27	0	25	0	21	0	0	0	0	0	0
145	Baniachang	BRAC	Hab	6	551	2	393	8	345	0	133	1	44	0	2	0	0	0	0	0	0	0	0
146	Chunarughat	BRAC	Hab	1	332	2	332	1	346	1	209	0	112	0	93	0	81	0	0	0	0	0	0
147	Lakhai	BRAC	Hab	0	343	0	231	0	214	0	109	0	39	0	5	0	8	0	0	0	0	0	0
148	Nabiganj	BRAC	Hab	0	634	0	613	0	0	0	24	0	146	0	0	0	0	0	0	0	0	0	0
149	Madhabpur	BRAC	Hab	0	458	0	460	0	253	0	119	0	40	0	63	0	76	0	0	0	0	0	0
150	Bahubal	BRAC	Hab	0	251	0	231	0	191	0	125	0	54	0	6	0	5	0	0	0	0	0	0
151	Habiganj	BRAC	Hab	13	393	12	373	12	369	4	112	1	43	1	38	0	12	0	0	0	0	0	0
152	Baralekha	BRAC	Hab	0	198	0	278	0	357	0	73	0	17	0	35	0	27	0	0	0	0	0	0
153	Kamalganj	BRAC	Hab	0	405	0	365	0	199	0	85	0	16	0	0	0	0	0	0	0	0	0	0
154	Rajnagar	BRAC	Hab	0	397	0	394	0	166	0	52	0	4	0	226	0	140	0	0	0	0	0	0
155	Kulaura	BRAC	Hab	0	560	0	483	0	374	0	105	0	18	0	0	0	0	0	0	0	0	0	0
156	Moulvibazar	BRAC	Hab	0	32	0	43	0	15	0	8	0	2	0	0	0	0	0	0	0	0	0	0
157	Chatak	BRAC	Hab	0	826	0	686	0	372	0	79	0	27	0	14	0	14	0	0	0	0	0	0
158	Dharmapasha	BRAC	Hab	0	344	0	341	0	515	0	216	0	62	0	0	0	0	0	0	0	0	0	0
159	Dowrabazar	BRAC	Hab	0	52	0	61	0	35	0	31	0	14	0	0	0	0	0	0	0	0	0	0
160	Tahirpur	BRAC	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
161	Jhenigati	BRAC	Dha	0	247	0	288	0	213	0	68	0	14	0	68	0	53	0	0	0	0	0	0
162	Nalitabari	BRAC	Dha	0	934	0	696	0	445	0	143	0	62	0	230	0	253	0	0	0	0	0	0
163	Sreebardi	BRAC	Dha	0	250	0	233	0	180	0	18	0	2	0	151	0	53	0	0	0	0	0	0
164	Nakhla	BRAC	Dha	0	372	0	312	0	228	0	69	0	43	0	0	0	0	0	0	0	0	0	0
165	Sherpur	BRAC	Dha	0	196	0	148	0	173	0	84	0	26	0	41	0	108	0	39	0	24	0	0
166	Jaldhaka	BRAC	Nil	0	277	0	181	0	276	0	139	0	44	0	160	0	72	0	0	0	0	0	0
167	Demar	BRAC	Nil	0	707	0	326	0	375	0	77	0	11	0	0	0	0	0	0	0	0	0	0
168	Saidpur	BRAC	Nil	0	196	0	148	0	173	0	84	0	26	0	41	0	108	0	39	0	24	0	0
169	Dinla	BRAC	Nil	0	296	0	280	0	294	0	94	0	18	0	27	0	13	0	0	0	0	0	0
170	Kishoreganj	BRAC	Nil	0	72	0	66	0	47	0	26	0	18	0	14	0	3	0	4	0	1	0	7
171	Nilphamari	BRAC	Nil	0	605	0	581	0	733	0	277	0	65	0	358	0	266	0	0	0	0	0	0
	Sreemangal	BRAC	Hab	0	296	0	314	0	302	0	219	0	126	0	136	0	152	0	0	0	0	0	0
			Total	1[illegible]	11428	234	10052	55	7842	24	2968	13	1193	158	2160	94	1770	12	200	6	113	7	57

51

BEST AVAILABLE COPY

C. Women & Children Immunization (Cont.)

Age of Children

Thana	NGO	TA-Unit	0-11 Months BCG Self	0-11 Months BCG Combined	DPT/Polio 1 Self	DPT/Polio 1 Combined	DPT/Polio 2 Self	DPT/Polio 2 Combined	DPT/Polio 3 Self	DPT/Polio 3 Combined	Polio-4 Self	Polio-4 Combined	Measles Self	Measles Combined	Vita-A 1 Self	Vita-A 1 Combined	Vita-A 2 Self	Vita-A 2 Combined	Vita-A 3 Self	Vita-A 3 Combined
Bagmara	JTS	Nil	0	4	0	3	0	2	0	5	0	6	0	6	0	6	0	0	0	22
Godagari	JTS	Nil	0	45	0	45	0	40	0	42	0	45	0	20	0	45	0	42	0	20
Gurudashpur	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lohagara	JTS	Far	0	0	0	13	0	9	0	0	0	0	0	0	0	0	0	0	0	0
Mohonganj	JTS	Dha	0	20	0	20	0	18	0	11	0	49	0	19	0	0	0	0	0	0
Moheshpur	JTS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Poba	JTS	Nil	0	18	0	32	0	29	0	34	0	0	0	12	0	21	0	0	0	17
Singair	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Singra	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sreepur	JTS	Dha	0	43	0	36	0	29	0	36	0	25	0	39	0	0	0	0	0	0
Atpara	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Kamalkanda	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Khalajuri	JTS	Dha	0	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Purbadhala	JTS	Dha	0	4	0	4	0	5	0	2	0	0	0	4	0	0	0	0	0	0
Gauripur	JTS	Dha	12	16	11	16	23	11	12	8	7	12	7	12	11	0	12	0	7	0
Harirampur	JTS	Dha	0	2	0	0	0	2	0	0	0	0	0	2	0	0	0	0	0	0
Shibalaya	JTS	Dha	0	3	0	4	0	2	0	3	0	0	0	0	0	0	0	1	0	0
Mohanpur	JTS	Nil	0	23	0	23	0	30	0	28	0	94	0	43	0	23	0	30	0	28
Baraigram	JTS	Nil	0	31	0	31	0	31	0	28	0	13	0	26	0	75	0	0	0	0
Jibannagar	JTS	Far	0	28	0	7	0	23	0	18	0	2	0	26	0	0	0	0	0	0
Bagarpara	JTS	Far	0	8	0	1	0	12	0	8	0	6	0	10	0	0	0	0	0	0
Alfadanga	BAMANE	Far	4	0	6	0	14	0	4	0	10	0	9	0	4	0	0	0	8	0
Chandina	BAMANE	Hab	2	10	3	6	2	7	1	5	0	6	1	6	3	6	2	7	1	5
Gabtoli	BAMANE	Nil	0	102	0	76	0	66	0	71	0	53	0	53	0	0	0	0	0	0
Dohar	BAMANE	Dha	0	5	0	3	0	10	0	1	0	1	0	21	0	0	0	0	0	0
Kawaiganj	BAMANE	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nawabganj	BAMANE	Dha	0	1	0	0	0	0	0	1	0	1	0	1	0	0	0	0	0	0
Boalmari	BAMANE	Far	20	0	20	0	14	0	24	0	18	0	18	0	20	0	14	0	24	0
Shibganj	BAMANE	Nil	0	31	0	24	0	20	0	11	0	22	0	40	0	5	0	8	0	4
Sonatola	BAMANE	Nil	0	17	0	17	0	18	0	13	0	15	0	20	0	23	0	10	0	15
Srimangal	SUOPPS	Hab	10	48	9	46	7	54	3	67	9	41	9	41	10	46	3	58	9	41
Zakiganj	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Golaganj	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gopalganj	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Jaintapur	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Osmanbazar	SHIMAN	Hab	34	0	34	0	31	0	22	0	48	0	12	0	22	0	24	0	11	0
Kanaighat	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sarail	JUSSS	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nasirnagar	JUSSS	Hab	0	6	0	6	0	7	0	6	0	1	0	1	0	1	0	2	0	2
Monoharganj	CRC	Far	13	0	13	0	12	0	14	0	1	0	6	0	0	0	0	0	0	0
Sharankhola	CRC	Far	0	6	0	6	0	10	0	13	0	0	0	17	0	0	0	0	0	0
Chitalmari	CRC	Far	0	5	0	5	0	4	0	7	0	0	0	7	0	0	0	0	0	0

Thana	NGO	TA-Unit	12+ Months BCG Self	12+ Months BCG Combined	DPT/Polio 1 Self	DPT/Polio 1 Combined	DPT/Polio 2 Self	DPT/Polio 2 Combined	DPT/Polio 3 Self	DPT/Polio 3 Combined	Polio-4 Self	Polio-4 Combined	Measles Self	Measles Combined	Vita-A Self	Vita-A Combined
Bagmara	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Godagari	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gurudashpur	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lohagara	JTS	Far	0	0	0	17	0	8	0	0	0	0	0	0	0	0
Mohonganj	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Moheshpur	JTS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Poba	JTS	Nil	0	0	0	0	0	0	0	0	0	7	0	0	0	13
Singair	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Singra	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	42	0
Sreepur	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Atpara	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Kamalkanda	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Khalajuri	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Purbadhala	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gauripur	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Harirampur	JTS	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Shibalaya	JTS	Dha	0	0	0	0	0	8	0	3	0	12	0	12	0	0
Mohanpur	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Baraigram	JTS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Jibannagar	JTS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bagarpara	JTS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Alfadanga	BAMANE	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chandina	BAMANE	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gabtoli	BAMANE	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dohar	BAMANE	Dha	0	4	0	2	0	3	0	0	0	0	0	4	0	6
Kawaiganj	BAMANE	Dha	0	0	0	3	0	0	0	1	0	0	0	1	0	0
Nawabganj	BAMANE	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Boalmari	BAMANE	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Shibganj	BAMANE	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sonatola	BAMANE	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Srimangal	SUOPPS	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Zakiganj	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Golaganj	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gopalganj	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Jaintapur	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Osmanbazar	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Kanaighat	SHIMAN	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sarail	JUSSS	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nasirnagar	JUSSS	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Monoharganj	CRC	Far	0	0	7	0	7	0	0	0	1	0	2	0	5	0
Sharankhola	CRC	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chitalmari	CRC	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0

52

BEST AVAILABLE COPY

C. Women & Children Immunization (Cont.)

Age of Children

Sl	Thana	NGO	TA-Unit	0-11 Months BCG Self	0-11 Months BCG Combined	0-11 Months DPT/Polio 1 Self	0-11 Months DPT/Polio 1 Combined	0-11 Months DPT/Polio 2 Self	0-11 Months DPT/Polio 2 Combined	0-11 Months DPT/Polio 3 Self	0-11 Months DPT/Polio 3 Combined	0-11 Months Polio-4 Self	0-11 Months Polio-4 Combined	0-11 Months Measles Self	0-11 Months Measles Combined	0-11 Months Vita-A 1 Self	0-11 Months Vita-A 1 Combined	0-11 Months Vita-A 2 Self	0-11 Months Vita-A 2 Combined	0-11 Months Vita-A 3 Self	0-11 Months Vita-A 3 Combined	12+ Months BCG Self	12+ Months BCG Combined	12+ Months DPT/Polio 1 Self	12+ Months DPT/Polio 1 Combined	12+ Months DPT/Polio 2 Self	12+ Months DPT/Polio 2 Combined	12+ Months DPT/Polio 3 Self	12+ Months DPT/Polio 3 Combined	12+ Months Polio-4 Self	12+ Months Polio-4 Combined	12+ Months Measles Self	12+ Months Measles Combined	12+ Months Vita-A Self	12+ Months Vita-A Combined
43	Daulatpur	PSKS	Far	6	0	6	0	6	0	7	0	2	0	3	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
44	Bharamara	PSKS	Far	8	7	8	7	4	9	5	9	14	36	10	26	8	7	5	3	10	16	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45	Gangni	PSKS	Far	0	8	0	11	0	12	0	10	0	24	0	14	0	2	0	2	0	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0
46	Kumarkhali	PJS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	44	0	21	0	33	0	39	0	0	0	42	0	0
47	Tongipara	SGUS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
48	Kashiani	SGUS	Far	0	20	0	18	0	17	0	16	0	20	0	10	0	15	0	14	0	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
49	Muksedpur	SGUS	Far	0	58	0	20	0	21	0	20	0	62	0	69	0	28	0	30	0	27	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Rajbar	MMkS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Shibchar	MMkS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
52	Bhedarganj	MMkS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
53	Zanjira	MMkS	Far	5	0	6	0	4	0	4	0	0	0	0	1	2	0	3	0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
54	Gosairhat	MMkS	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Damudya	MMkS	Far	0	36	0	31	0	24	0	21	0	26	0	31	0	28	0	13	0	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56	Sitakundi	SUS	Feni	0	15	0	27	0	9	0	9	0	22	0	18	0	2	0	0	0	15	0	7	0	14	0	6	0	10	0	0	0	7	0	0
57	Rangunia	SUS	Feni	0	20	0	17	0	19	0	17	0	0	0	23	0	8	0	0	0	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
58	Fatikchari	SUS	Feni	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
59	Rawzan	SUS	Feni	3	0	1	0	0	0	4	0	2	0	2	0	1	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
60	Sandwip	SUS	Feni	10	0	0	0	0	0	0	0	0	0	2	0	14	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
61	Mithepukur	PSF	Nil	16	33	14	41	10	24	2	33	2	18	2	24	6	50	3	65	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
62	Kazipara	PSF	Nil	16	16	13	9	0	2	3	3	5	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
63	Sujanagar	PSF	Nil	6	6	7	8	8	7	6	4	0	7	0	8	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
64	Bafabo	PSF	Hab	0	7	0	18	0	9	0	9	0	8	0	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
65	Monohardi	PSF	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
66	Raipura	PSF	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
67	Louhajang	PSF	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
68	Sreenagar	PSF	Dha	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
69	Pirganj	PSF	Nil	0	5	0	10	0	10	0	3	0	19	0	0	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0
70	Pirgacha	PSF	Nil	0	30	0	12	0	5	0	6	0	0	0	20	0	12	0	5	0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0
71	Parbatipur	PSF	Nil	2	20	2	25	1	19	1	14	0	0	0	16	0	2	24	1	18	1	16	16	0	0	0	0	0	0	0	0	0	0	0	0
72	Birol	PSF	Nil	0	10	0	7	0	9	0	7	0	8	0	8	0	7	2	9	0	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0
73	Badalgachi	PSF	Nil	0	1	0	1	0	0	0	2	0	0	0	1	0	2	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
74	Dhamuirhat	PSF	Nil	0	13	0	7	0	2	0	12	0	1	0	4	0	5	0	0	0	7	0	0	0	3	0	3	0	2	0	0	0	1	0	1
75	Ullapara	PSF	Nil	9	8	5	6	0	2	0	3	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
76	Shahjadpur	PSF	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
77	Sreepur	PSF	Far	4	8	17	14	14	4	17	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
78	Bhaluka	RFWP	Dha																																
79	Burichang	RFWP	Hab																																
80	Nangalkot	RFWP	Hab																																
81	Kasba	RFWP	Hab																																
82	Nabinagar	RFWP	Hab																																
83	Barura	RFWP	Hab																																
84	Daudkandi	RFWP	Hab																																

BEST AVAILABLE COPY

C. Women & Children Immunization (Cont.)

Age of Children

				0-11 Months																		12+ Months													
				BCG		DPT/Polio						Polio-4		Measles		Vita-A						BCG		DPT/Polio						Polio-4		Measles		Vita-A	
						1		2		3						1		2		3				1		2		3							
31	Thana	NGO	TA-Unit	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined	Self	Combined
85	Muradnagar	RFWP	Hab																																
86	Laksam	RFWP	Hab																																
87	Sonargaon	RFWP	Hab																																
88	Muktagacha	RFWP	Dha																																
89	Nagarpur	RFWP	Dha																																
90	Basail	RFWP	Dha																																
91	Sakhipur	RFWP	Dha																																
92	Daldur	RFWP	Dha																																
93	Feni	Swanirva	Feni	22	0	16	0	16	0	17	0	28	0	11	0	23	0	16	0	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
94	Dagonbhuyan	Swanirva	Feni	0	43	0	34	0	17	0	29	0	4	0	28	0	8	0	9	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0
95	Parshuram	Swanirva	Feni	0	4	0	4	0	5	0	8	0	0	0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
96	Chagolnaya	Swanirva	Feni	0	42	0	29	0	32	0	31	0	4	0	40	0	16	0	5	0	23	0	0	0	0	0	0	0	0	0	0	0	0	0	0
97	Sonagazi	Swanirva	Feni	0	4	0	4	0	8	0	6	0	5	0	5	0	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
98	Kulliarchar	Swanirva	Dha	0	8	0	7	0	9	0	10	0	0	0	13	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
99	Katiadi	Swanirva	Dha	0	19	0	12	0	13	0	23	0	16	0	20	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0
100	Kalihati	Swanirva	Dha	0	3	0	3	0	0	0	0	0	23	0	13	0	0	0	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
101	Ghatail	Swanirva	Dha	0	0	0	3	0	3	0	4	0	4	0	2	0	3	0	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
102	Gholar	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
103	Savar	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
104	Austagram	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
105	Kisli	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
106	Tarail	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
107	Itna	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
108	Bhairab	Swanirva	Dha	7	0	7	0	6	0	8	0	3	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
109	Hossainpur	Swanirva	Dha	0	3	0	3	0	3	0	7	0	32	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
110	Karimganj	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
111	Pakunda	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
112	Daulatkhan	Swanirva	Far	0	17	0	18	0	11	0	17	0	10	0	15	0	18	0	1	0	7	0	0	0	17	0	1	0	9	0	22	0	3	0	27
113	Lalmohan	Swanirva	Far	0	25	0	25	0	25	0	19	0	13	0	16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
114	Monpura	Swanirva	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
115	Tazumuddin	Swanirva	Far	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
116	Madhupur	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
117	Gopalpur	Swanirva	Dha	0	31	0	32	0	26	0	13	0	12	0	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	11	0	10	0	10
118	Bhuapur	Swanirva	Dha	0	16	0	85	0	34	0	36	0	95	0	141	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
119	Bakshiganj	Swanirva	Dha	7	0	5	0	2	0	3	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
120	Dewanganj	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
121	Islampur	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
122	Mohandah	Swanirva	Dha	0	0	0	0	0	0	0	0	0	0	0	8	0	0	0	0	0	0	0	4	0	4	0	0	0	0	0	0	0	0	0	0
123	Atwari	Swanirva	Nil	0	4	0	4	0	3	0	0	0	4	0	4	0	4	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0
124	Debiganj	Swanirva	Nil	0	39	0	36	0	30	0	30	0	27	0	28	0	15	0	7	0	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0
125	Panchbibi	Swanirva	Nil	0	64	0	69	0	42	0	40	0	107	0	4	0	69	0	12	0	10	0	4	0	6	0	4	0	0	0	0	0	11	0	0
126	Romgati	SOPIRE	Feni	17	0	17	0	44	0	11	0	17	0	2	0	17	0	0	0	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

34

BEST AVAILABLE COPY

C. Women & Children Immunization (Con.)

Age of Children

SI	Thana	NGO	TA-Unit	0-11 Months BCG Self	0-11 Months BCG Combined	0-11 Months DPT/Polio 1 Self	0-11 Months DPT/Polio 1 Combined	0-11 Months DPT/Polio 2 Self	0-11 Months DPT/Polio 2 Combined	0-11 Months DPT/Polio 3 Self	0-11 Months DPT/Polio 3 Combined	0-11 Months Polio-4 Self	0-11 Months Polio-4 Combined	0-11 Months Measles Self	0-11 Months Measles Combined	0-11 Months Vita-A 1 Self	0-11 Months Vita-A 1 Combined	0-11 Months Vita-A 2 Self	0-11 Months Vita-A 2 Combined	0-11 Months Vita-A 3 Self	0-11 Months Vita-A 3 Combined	12+ Months BCG Self	12+ Months BCG Combined	12+ Months DPT/Polio 1 Self	12+ Months DPT/Polio 1 Combined	12+ Months DPT/Polio 2 Self	12+ Months DPT/Polio 2 Combined	12+ Months DPT/Polio 3 Self	12+ Months DPT/Polio 3 Combined	12+ Months Polio-4 Self	12+ Months Polio-4 Combined	12+ Months Measles Self	12+ Months Measles Combined	12+ Months Vita-A Self	12+ Months Vita-A Combined
127	Ramganj	SOPIRE	Feni	0	13	0	13	0	13	0	10	0	0	0	18	0	0	0	0	0	0	0	2	0	4	0	5	0	6	0	0	0	6	0	0
128	Faridganj	SOPIRE	Feni	0	10	0	9	0	17	0	15	0	14	0	15	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
129	Kachua	SOPIRE	Feni	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
130	Hazigonj	SOPIRE	Feni	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
131	Rajarhat	DCPUK	Nil	0	62	0	55	0	67	0	64	0	89	0	77	0	79	0	35	0	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0
132	Bhurungamari	DCPUK	Nil	0	66	0	64	0	71	0	86	0	43	0	61	0	63	0	85	0	63	0	0	0	0	0	0	0	0	0	0	0	0	0	0
133	Roumari	DCPUK	Nil	3	0	4	0	0	0	0	0	4	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
134	Char Rajibpur	DCPUK	Nil	0	30	0	26	0	23	0	24	0	12	0	11	0	7	0	9	0	6	0	3	0	5	0	0	0	0	0	0	0	0	0	0
135	Senbag	BANDHA	Feni	0	24	0	24	0	16	0	17	0	21	0	21	0	7	0	2	0	5	0	0	0	0	0	0	0	0	0	1	0	1	0	1
136	Companiganj	BANDHA	Feni	53	0	53	0	90	0	51	0	31	0	31	0	51	0	0	0	47	0	8	0	8	0	11	0	15	0	9	0	9	0	32	0
137	Balikandi	VPKA	Far	0	42	0	43	0	50	0	0	39	0	0	29	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
138	Pangsha	VPKA	Far	0	2	0	2	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
139	Goalandaghat	VPKA	Far	0	5	0	6	0	9	0	10	0	0	0	13	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	9	0	4	0	0
140	Sundarganj	GKSS	Nil	0	148	0	0	0	47	0	129	0	0	0	152	0	0	0	0	0	0	0	193	0	68	0	42	0	95	0	0	0	112	0	0
141	Sadullahpur	GKSS	Nil	0	29	0	26	0	20	0	16	0	4	0	32	0	17	0	0	0	19	0	0	0	0	0	0	0	0	0	0	0	0	0	0
142	Gobindaganj	GKSS	Nil	0	11	0	12	0	2	0	3	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
143	Fulcheri	GKSS	Nil	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
144	Azmiriganj	BRAC	Hab	0	172	0	163	0	174	0	174	0	212	0	212	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
145	Baniachang	BRAC	Hab	6	581	4	577	0	591	2	555	2	495	2	495	4	577	0	555	4	495	0	0	0	0	0	0	0	0	0	0	0	0	0	0
146	Chunarughat	BRAC	Hab	0	580	0	584	0	689	0	779	0	707	0	707	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
147	Lakhai	BRAC	Hab	0	307	0	369	0	256	0	272	0	315	0	315	0	82	0	98	0	60	0	0	0	0	0	0	0	0	0	0	0	0	0	0
148	Nabiganj	BRAC	Hab	0	813	0	813	0	853	0	854	0	739	0	739	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
149	Madhabpur	BRAC	Hab	0	383	0	378	0	432	0	506	0	427	0	427	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
150	Bahubal	BRAC	Hab	0	273	0	303	0	363	0	401	0	346	0	346	0	284	0	365	0	291	0	0	0	0	0	0	0	0	0	0	0	0	0	0
151	Habiganj	BRAC	Hab	8	489	7	490	12	607	10	662	5	601	5	601	7	237	10	338	5	204	0	0	0	0	0	0	0	0	0	0	0	0	0	0
152	Baroleikha	BRAC	Hab	0	581	0	585	0	669	0	629	0	544	0	572	0	588	0	632	0	506	0	0	0	0	0	0	0	0	0	0	0	0	0	0
153	Kamalganj	BRAC	Hab	0	468	0	450	0	439	0	440	0	610	0	612	0	450	0	440	0	612	0	0	0	0	0	0	0	0	0	0	0	0	0	0
154	Rajnagar	BRAC	Hab	0	463	0	473	0	522	0	515	0	410	0	478	0	471	0	500	0	437	0	0	0	0	0	0	0	0	0	0	0	0	0	0
155	Kulaura	BRAC	Hab	0	861	0	861	0	1036	0	981	0	850	0	850	0	861	0	981	0	850	0	0	0	0	0	0	0	0	0	0	0	0	0	0
156	Moulvibazar	BRAC	Hab	0	38	0	38	0	42	0	46	0	54	0	54	0	38	0	46	0	54	0	0	0	0	0	0	0	0	0	0	0	0	0	0
157	Chatak	BRAC	Hab	0	992	0	992	0	1019	0	909	0	862	0	862	0	992	0	909	0	862	0	0	0	0	0	0	0	0	0	0	0	0	0	0
158	Dharmapasha	BRAC	Hab	0	421	0	410	0	578	0	740	0	925	0	925	0	416	0	578	0	740	0	0	0	0	0	0	0	0	0	0	0	0	0	0
159	Bawrebazar	BRAC	Hab	0	87	0	85	0	68	0	61	0	72	0	72	0	87	0	68	0	72	0	0	0	0	0	0	0	0	0	0	0	0	0	0
160	Tahirpur	BRAC	Hab	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
161	Jhinaigati	BRAC	Dha	0	29	0	345	0	344	0	389	0	312	0	312	0	345	0	389	0	312	0	0	0	0	0	0	0	0	0	0	0	0	0	0
162	Nalitabari	BRAC	Dha	0	748	0	748	0	784	0	811	0	713	0	713	0	1056	0	697	0	1448	0	0	0	0	0	0	0	0	0	0	0	0	0	0
163	Sreebardi	BRAC	Dha	0	313	0	299	0	351	0	341	0	366	0	366	0	299	0	351	0	341	0	0	0	0	0	0	0	0	0	0	0	0	0	0
164	Nakhla	BRAC	Dha	0	375	0	539	0	518	0	500	0	450	0	450	0	539	0	518	0	500	0	0	0	0	0	0	0	0	0	0	0	0	0	0
165	Shapur	BRAC	Dha	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
166	Jaldhaka	BRAC	Nil	0	361	0	343	0	480	0	455	0	416	0	416	0	343	0	480	0	455	0	0	0	0	0	0	0	0	0	0	0	0	0	0
167	Domar	BRAC	Nil	0	530	0	546	0	551	0	584	0	564	0	564	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
168	Saidpur	BRAC	Nil	0	312	0	294	0	306	0	339	0	395	0	395	0	294	0	339	0	395	0	0	0	0	0	0	0	0	0	0	0	0	0	0
169	Dimla	BRAC	Nil	0	459	0	452	0	449	0	435	0	507	0	507	0	452	0	0	0	435	0	0	0	0	0	0	0	0	0	0	0	0	0	0
170	Kishoreganj	BRAC	Nil	0	103	0	90	0	96	0	95	0	155	0	111	0	44	0	41	0	45	0	0	0	0	0	0	0	0	0	0	0	0	0	0
171	Nilphamari	BRAC	Nil	0	1073	0	1073	0	1279	0	1160	0	1159	0	1159	0	1073	0	0	0	1160	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Sreemongal	BRAC	Hab	0	581	0	562	0	697	0	817	0	707	0	707	0	562	0	0	0	817	0	0	0	0	0	0	0	0	0	0	0	0	0	0
			Total	303	14239	288	14223	320	15433	231	15728	248	15101	137	15464	204	10828	118	8832	179	11567	31	281	15	164	11	113	16	165	11	62	14	213	75	58

55

				D. General Health Services		E. Disease Surveillance		F. Number of Family Planning Commodities Distributed								G. Number/ Participants of BCC Meeting Held								
				General Illness		Reported New Cases		Pill					Condom			Male		HIV/AIDS		Newlywed			Others	
								SMC			GOB	Other	SMC	GOB	Other	# of meeting	Participants	# of meeting	Participants	# of meeting	Participants	# of Certi. Dist.	# of meeting	Participants
N	Thana	NGO	TA-Unit	Female	Male	AFP	NNT	Nor.	Fami.	Other														
1	Bagmara	JTS	Nil	180	10	0	0	0	0	0	1956	0	0	2800	0	0	0	0	0	0	0	0	0	0
2	Godagari	JTS	Nil	33	37	0	0	0	12	0	1911	0	148	5078	0	2	92	0	0	2	135	110	2	86
3	Gurudeshpur	JTS	Nil	221	38	0	0	0	0	0	2020	268	0	1008	0	0	0	0	0	5	100	100	8	261
4	Lohagara	JTS	Far	370	346	0	0	0	0	0	1506	0	0	3288	0	2	37	2	48	2	42	42	4	85
5	Mohonganj	JTS	Dha	123	36	0	0	0	0	0	295	0	0	960	0	3	51	0	0	2	11	11	7	110
6	Moheshpur	JTS	Far	39	5	0	0	0	6	0	0	666	0	0	444	0	0	0	0	1	10	10	4	75
7	Poba	JTS	Nil	478	30	0	0	0	29	0	0	423	0	0	448	0	0	0	0	0	0	0	1	55
8	Singair	JTS	Dha	64	19	0	0	1	17	0	231	0	0	160	0	0	0	0	0	0	0	0	0	0
9	Shiga	JTS	Nil	150	87	0	0	33	187	0	407	447	0	1560	0	0	0	3	42	2	48	21	2	32
10	Sreepur	JTS	Dha	124	17	0	0	0	0	0	1388	0	0	884	0	2	90	0	0	0	0	0	2	30
11	Atgara	JTS	Dha	147	85	0	0	0	0	0	594	0	0	1440	0	5	90	0	0	5	160	160	8	100
12	Kanaikanda	JTS	Dha	233	103	0	0	0	6	0	984	0	0	1680	0	3	35	0	0	0	0	0	3	44
13	Khalajuri	JTS	Dha	61	42	0	0	0	0	0	222	0	0	432	0	1	10	0	0	1	52	34	4	38
14	Purbadhala	JTS	Dha	82	55	0	0	4	42	0	640	0	0	0	1296	5	104	3	69	0	0	0	8	158
15	Gaurpur	JTS	Dha	423	29	0	0	3	56	6	5	550	0	0	1350	0	0	1	25	1	11	11	1	20
16	Harirampur	JTS	Dha	278	155	0	0	0	0	0	258	0	0	684	0	4	48	0	0	2	30	15	9	59
17	Shibalaya	JTS	Dha	267	181	0	0	0	0	0	831	0	0	2640	0	1	12	2	25	2	18	14	3	40
18	Mahanpur	JTS	Nil	163	21	0	0	0	0	0	369	0	0	644	0	0	0	0	0	0	0	0	1	18
19	Sonatola	JTS	Nil	688	49	0	0	0	11	0	1427	0	0	1626	0	1	44	2	116	0	0	0	2	94
20	Jibannagar	JTS	Far	221	103	0	0	0	79	0	768	0	0	432	0	1	12	1	14	2	28	28	2	37
21	Bagatipara	JTS	Far	136	22	0	0	9	19	0	1097	0	0	2998	0	3	31	0	0	0	0	0	6	108
22	Alfadanga	BAMANEH	Far	130	82	0	0	0	126	0	204	0	560	4172	0	0	0	4	53	1	12	5	6	91
23	Chandina	BAMANEH	Hab	159	46	0	0	0	22	0	755	0	0	3792	0	0	0	0	0	0	0	0	0	0
24	Gabura	BAMANEH	Nil	221	86	0	0	0	215	0	1803	0	400	2196	0	3	35	3	34	0	0	0	18	185
25	Dahar	BAMANEH	Dha	35	38	0	0	0	61	0	205	0	0	123	0	2	33	0	0	0	0	0	3	36
26	Karaiganj	BAMANEH	Dha	9	11	0	0	0	11	0	520	0	102	1200	0	2	22	0	0	0	0	0	3	42
27	Nowabganj	BAMANEH	Dha	79	49	0	0	0	81	0	539	0	32	488	0	0	0	2	52	0	0	0	0	0
28	Boalmari	BAMANEH	Far	33	13	0	0	19	323	0	238	0	48	344	0	2	30	2	40	1	10	4	1	15
29	Shibganj	BAMANEH	Nil	25	18	0	0	0	66	0	1668	0	29	1014	0	2	30	0	0	0	0	0	2	25
30	Sonatola	BAMANEH	Nil	313	238	0	0	0	195	0	1150	0	6	2478	0	3	36	1	17	2	11	11	6	87
31	Srimangal	SUOPPS	Hab	260	40	0	0	3	7	0	272	0	0	360	0	8	66	23	155	0	0	0	6	83
32	Zakiganj	SHIMANTIK	Hab	188	82	0	0	0	0	0	626	0	0	2040	0	5	42	0	0	0	0	0	8	96
33	Balaganj	SHIMANTIK	Hab	58	14	0	0	0	0	0	164	0	0	780	0	25	300	0	0	20	110	0	0	0
34	Golaganj	SHIMANTIK	Hab	194	89	0	0	0	0	0	385	0	0	1740	0	5	85	0	0	3	30	0	8	101
35	Jaintapur	SHIMANTIK	Hab	26	19	0	0	0	0	0	252	0	0	600	0	6	65	0	0	3	32	10	7	43
36	Baanibaar	SHIMANTIK	Hab	136	66	0	0	0	2	0	436	0	0	1944	0	11	108	0	0	4	35	0	10	113
37	Kasalghat	SHIMANTIK	Hab	371	97	0	0	0	0	0	143	0	0	1128	0	0	0	0	0	0	0	0	0	0
38	Biral	JUSSB	Hab	135	68	0	0	0	1	0	143	0	0	744	0	0	0	0	0	0	0	0	0	0
39	Nasirnagar	JUSSB	Hab	50	26	0	0	0	1	0	184	0	0	528	0	2	25	0	0	0	0	0	1	20
40	Manikganj	CRC	Far	446	145	0	0	29	86	0	280	0	0	970	0	6	54	2	25	2	8	0	6	63
41	Sharashala	CRC	Far	207	89	0	0	9	7	0	364	0	66	1430	0	3	30	6	189	0	0	0	6	45
42	Chitalmari	CRC	Far	114	29	0	0	2	2	0	110	0	0	48	0	3	40	1	12	0	0	0	4	54

56

				D. General Health Services		E. Disease Surveillance		F. Number of Family Planning Commodities Distributed									G. Number/ Participants of BCC Meeting Held								
				General Illness		Reported New Cases		Pill					Condom				Male		HIV/AIDS		Newlywed			Others	
								SMC			GOB	Other	SMC	GOB	Other		# of meeting	Participants	# of meeting	Participants	# of meeting	Participants	# of Certif. Dist.	# of meeting	Participants
IN	Thana	NGO	TA-Unit	Female	Male	AFP	NNT	Nor.	Famil.	Other															
43	Daulatpur	PSKS	Far	291	131	0	0	0	0	0	166	0	0	3276	0		0	0	0	0	0	0	0	0	0
44	Bhaomara	PSKS	Far	325	78	0	0	0	9	0	483	0	0	2676	0		4	56	4	75	1	13	3	2	29
45	Gangni	PSKS	Far	139	75	0	0	41	78	0	441	0	268	3192	0		0	0	0	0	0	0	0	0	0
46	Kumarkhali	PJS	Far	112	32	0	0	0	40	0	1413	0	48	3024	0		1	11	0	0	1	13	0	0	0
47	Tangipara	SGUS	Far	49	20	0	0	0	3	0	316	0	4	732	0		0	0	0	0	0	0	0	9	134
48	Kashiani	SGUS	Far	124	81	0	0	0	3	0	530	0	8	3276	0		4	28	0	0	0	0	0	12	107
49	Muksedpur	SGUS	Far	197	98	0	0	0	4	0	952	0	0	2100	0		4	62	4	50	0	0	0	9	105
50	Rajbar	MMkS	Far	187	132	0	0	0	7	2	330	0	0	49	0		0	0	0	0	0	0	0	2	30
51	Shibchar	MMkS	Far	274	211	0	0	17	18	2	259	0	5	1248	0		2	22	0	0	1	5	0	3	37
52	Bhedarganj	MMkS	Far	195	133	0	0	4	2	0	1070	0	48	1780	0		3	62	1	23	3	66	38	6	92
53	Zanjira	MMkS	Far	277	248	0	0	2	2	0	648	0	10	1368	0		2	25	3	36	2	15	0	1	7
54	Gosairhat	MMkS	Far	207	181	0	0	5	2	0	189	0	0	188	0		1	6	4	28	1	8	0	4	44
55	Damudya	MMkS	Far	247	174	0	0	5	4	0	1252	0	0	2268	0		2	23	3	36	3	41	19	3	33
56	Sitalandi	SUS	Feni	202	40	0	0	0	6	0	538	0	13	74	0		0	0	1	30	0	0	0	0	0
57	Rangunia	SUS	Feni	49	18	0	0	0	1	0	90	0	0	252	0		0	0	0	0	0	0	0	0	0
58	Fatikchari	SUS	Feni	204	94	0	0	0	25	0	0	0	0	0	0		1	21	0	0	0	0	0	1	77
59	Raozan	SUS	Feni	17	19	0	0	0	25	0	789	0	0	3858	0		2	28	0	0	3	33	0	3	40
60	Sandwip	SUS	Feni	646	103	0	0	0	0	0	494	0	0	1428	0		1	20	1	18	0	0	0	1	58
61	Mithapukur	PSF	Nil	191	45	0	0	28	199	0	1189	0	0	1559	0		0	0	3	38	2	13	3	4	42
62	Kaliganj	PSF	Nil	304	134	0	0	1	11	0	1283	0	36	2353	0		0	0	2	32	0	0	0	19	268
63	Sujanagar	PSF	Nil	253	26	0	0	0	0	0	718	0	0	586	0		0	0	10	179	6	52	37	1	25
64	Bofabo	PSF	Hab	153	63	0	0	0	0	0	508	0	0	408	0		1	36	1	15	3	62	0	10	316
65	Manohardi	PSF	Hab	109	36	0	0	9	108	0	468	0	0	890	0		0	0	0	0	1	6	6	21	473
66	Raipura	PSF	Hab	104	66	0	0	11	7	0	215	0	0	2564	0		5	90	0	0	2	18	0	3	42
67	Louhajang	PSF	Dha	315	246	0	0	1	0	0	371	0	0	414	0		0	0	0	0	0	0	0	0	0
68	Sreenagar	PSF	Dha	321	139	0	0	3	8	5	555	0	8	1000	0		3	23	3	23	0	0	0	3	62
69	Pirganj	PSF	Nil	26	24	0	0	0	2	0	1264	0	0	2038	0		9	138	0	0	1	7	7	3	67
70	Pirgacha	PSF	Nil	42	32	0	0	0	0	0	346	96	948	1080	0		4	40	4	28	4	40	0	0	0
71	Parbatipur	PSF	Nil	351	92	0	0	5	8	0	1100	0	0	800	0		0	0	0	0	3	54	36	10	227
72	Birol	PSF	Nil	160	37	0	0	0	0	0	765	0	0	168	0		8	95	2	24	3	20	10	0	0
73	Badalgachi	PSF	Nil	99	178	0	0	0	0	0	2253	0	0	0	1030		2	12	0	0	13	124	62	0	0
74	Dhamoirhat	PSF	Nil	293	166	0	0	0	19	0	1023	0	0	3120	0		3	30	0	0	2	7	7	6	87
75	Ullapara	PSF	Nil	79	76	0	0	13	18	0	862	0	4	1932	0		1	21	0	0	4	33	0	5	100
76	Shahzadpur	PSF	Nil	51	12	0	0	4	4	9	313	0	0	540	0		6	69	10	179	6	52	0	10	140
77	Sreepur	PSF	Far	75	52	0	0	0	73	0	868	0	2	906	0		3	29	3	44	3	16	4	4	46
78	Bhaluka	RFWP	Dha																						
79	Burichang	RFWP	Hab																						
80	Hangalhat	RFWP	Hab																						
81	Kasba	RFWP	Hab																						
82	Nabinagar	RFWP	Hab																						
83	Sarura	RFWP	Hab																						
84	Daudkandi	RFWP	Hab																						

57

			D. General Health Services		E. Disease Surveillance		F. Number of Family Planning Commodities Distributed								G. Number/ Participants of BCC Meeting Held								
			General Illness		Reported New Cases		Pill					Condom			Male		HIV/AIDS		Newlywed			Others	
							SMC			GOB	Other	SMC	GOB	Other	# of meeting	Participants	# of meeting	Participants	# of meeting	Participants	# of Certh. Dist.	# of meeting	Participants
Thana	NGO	TA-Unit	Female	Male	AFP	NNT	Nor.	Fami.	Other														
Muradnagar	RFWP	Hab																					
Lakson	RFWP	Hab																					
Sonargaon	RFWP	Hab																					
Muktagacha	RFWP	Dha																					
Nagarpur	RFWP	Dha																					
Bonal	RFWP	Dha																					
Sakhipur	RFWP	Dha																					
Daldur	RFWP	Dha																					
Feni	Swanirvar	Feni	749	148	1	0	8	23	5	603	4	0	2200	0	2	28	0	0	0	0	0	4	50
Daganbhuyan	Swanirvar	Feni	416	157	0	0	14	59	0	701	17	0	2296	0	4	44	3	69	0	0	0	4	49
Parshuram	Swanirvar	Feni	178	134	0	0	49	54	0	321	5	24	656	0	2	31	2	23	1	32	12	1	14
Chagalnaya	Swanirvar	Feni	321	101	0	0	13	27	0	631	8	0	1664	0	2	29	3	49	1	8	8	6	62
Sonagazi	Swanirvar	Feni	419	161	0	0	18	37	0	173	39	0	1952	0	1	18	3	44	0	0	0	8	158
Fulgazi	Swanirvar	Dha	408	126	0	0	30	57	19	377	4	0	2988	0	1	20	0	0	0	0	0	15	279
Kotwali	Swanirvar	Dha	382	245	0	0	16	62	0	345	0	0	1836	0	3	34	0	0	0	0	0	5	80
Kalabagan	Swanirvar	Dha	713	343	0	0	86	363	0	780	50	28	5892	0	0	0	0	0	0	0	0	3	53
Ghatail	Swanirvar	Dha	933	495	1	13	59	47	50	866	59	69	6418	0	4	32	0	0	0	0	0	4	63
Dhalai	Swanirvar	Dha	515	193	0	0	7	56	0	42	6	0	336	0	0	0	0	0	0	0	0	0	0
Savar	Swanirvar	Dha	221	65	0	0	13	11	0	296	28	4	918	0	0	0	0	0	0	0	0	0	0
Austagram	Swanirvar	Dha	102	85	0	0	9	8	0	227	0	116	1051	0	0	0	0	0	0	0	0	0	0
Nilkhi	Swanirvar	Dha	164	140	0	0	0	2	0	224	4	0	984	0	0	0	0	0	0	0	0	0	0
Tarail	Swanirvar	Dha	358	243	0	0	0	2	0	276	0	0	644	0	3	44	2	31	0	0	0	2	31
Ima	Swanirvar	Dha	232	199	0	0	0	14	6	272	0	0	1538	0	4	137	0	0	1	7	4	1	15
Bhairab	Swanirvar	Dha	80	18	0	0	1	0	0	292	0	0	384	0	0	0	0	0	0	0	0	3	51
Hemnagar	Swanirvar	Dha	596	326	0	0	1	0	0	418	0	0	1164	0	3	35	0	0	0	0	0	6	169
Kishoreganj	Swanirvar	Dha	329	222	0	0	22	127	27	444	7	12	2710	0	0	0	0	0	0	0	0	3	79
Pakundia	Swanirvar	Dha	162	98	0	0	4	6	0	305	0	0	1344	0	2	33	0	0	0	0	0	2	30
Daulatkhan	Swanirvar	Far	270	65	0	0	13	105	0	250	5	16	0	168	0	0	0	0	0	0	0	0	0
Lalmohan	Swanirvar	Far	225	68	0	0	51	141	0	721	0	0	4480	0	2	77	0	0	1	90	15	2	32
Manpura	Swanirvar	Far	353	148	0	0	0	0	0	139	0	0	790	0	0	0	0	0	0	0	0	0	0
Tazumuddin	Swanirvar	Far	176	86	0	0	23	118	0	177	0	4	707	0	2	32	1	17	0	0	0	9	391
Madhupur	Swanirvar	Dha	1092	619	0	0	166	93	0	795	22	172	1300	0	4	31	1	10	1	10	10	4	43
Gopalpur	Swanirvar	Dha	473	120	0	0	4	8	0	911	0	0	1944	0	0	0	0	0	0	0	0	0	0
Bhuapur	Swanirvar	Dha	355	198	1	5	6	0	0	52	8	8	1386	0	4	47	1	18	0	0	0	2	22
Bakshiganj	Swanirvar	Dha	261	64	0	0	43	137	0	638	23	4	1240	0	0	0	0	0	0	0	0	0	0
Dewanganj	Swanirvar	Dha	54	60	0	0	9	74	16	533	96	0	2384	0	3	24	1	30	0	0	0	3	67
Islampur	Swanirvar	Dha	231	141	0	0	7	90	0	461	8	0	6070	0	0	0	0	0	0	0	0	2	52
Jamalpur	Swanirvar	Dha	375	191	0	0	21	164	6	860	4	0	2926	0	3	31	0	0	1	10	10	1	8
Mirpur	Swanirvar	Nil	155	78	0	0	31	0	0	606	12	0	744	0	3	55	3	67	1	28	6	13	330
Sherpur	Swanirvar	Nil	405	128	0	0	15	113	0	760	0	0	792	0	4	70	1	22	1	12	0	5	100
Trishal	Swanirvar	Nil	173	86	0	0	83	456	0	1114	17	0	1084	0	0	0	0	0	0	0	0	3	55
Jangalia	SOHIRET	Feni	342	136	0	0	24	38	18	1189	0	0	696	0	6	93	4	46	2	17	10	19	315

58

				D. General Health Services		E. Disease Surveillance		F. Number of Family Planning Commodities Distributed								G. Number/ Participants of BCC Meeting Held								
				General Illness		Reported New Cases		Pill					Condom			Male		HIV/AIDS		Newlywed			Others	
								SMC			GOB	Other	SMC	GOB	Other	# of meeting	Participants	# of meeting	Participants	# of meeting	Participants	# of Certif. Dist.	# of meeting	Participants
SN	Thana	NGO	TA-Unit	Female	Male	AFP	NNT	Nor.	Femi.	Other														
127	Rangoj	SOPIRET	Feni	76	33	0	0	0	0	0	961	0	0	600	0	6	74	1	14	1	14	10	3	41
128	Faridganj	SOPIRET	Feni	272	54	0	0	5	0	0	1525	12	8	1260	0	3	35	0	0	3	56	23	8	117
129	Kachua	SOPIRET	Feni	136	20	0	0	0	0	0	798	0	0	648	0	2	32	0	0	0	0	0	0	0
130	Hajiganj	SOPIRET	Feni	33	29	0	0	0	0	0	10	0	0	0	0	2	34	0	0	0	0	0	0	0
131	Rajarhat	DCPUK	Nil	382	303	0	0	30	118	0	1255	0	16	1380	0	2	33	0	0	0	0	0	0	0
132	Bhurungamari	DCPUK	Nil	397	250	0	0	20	54	0	1515	0	0	2124	0	0	0	0	0	0	0	0	1	16
133	Rumari	DCPUK	Nil	783	382	0	0	3	2	0	1947	0	0	2376	0	0	0	0	0	1	15	0	1	15
134	Char Rajibpur	DCPUK	Nil	82	64	0	0	0	21	0	1828	0	5	1068	0	1	22	0	0	1	19	0	1	22
135	Sarbag	BANDHAN	Feni	540	213	0	0	9	13	0	491	0	10	3372	0	4	36	2	12	2	2	2	4	28
136	Companiganj	BANDHAN	Feni	297	104	0	0	0	7	0	526	0	0	1896	0	5	77	2	32	0	0	0	1	18
137	Belkuchi	VPKA	Far	439	78	0	0	39	131	18	412	0	32	122	0	4	64	2	36	3	26	21	0	0
138	Pangsha	VPKA	Far	545	165	0	0	21	162	10	298	0	95	1534	0	0	0	0	0	3	56	40	1	20
139	Godandighat	VPKA	Far	449	271	0	0	24	47	48	163	0	64	750	0	1	18	3	43	0	0	0	0	0
140	Sundarganj	GKSS	Nil	59	32	0	0	26	70	3	991	0	7	1872	3	0	0	0	0	0	0	0	0	0
141	Sadullahpur	GKSS	Nil	167	130	0	0	13	15	0	982	0	0	3443	0	0	0	0	0	1	10	0	1	18
142	Gobindaganj	GKSS	Nil	78	102	0	0	8	125	0	922	0	0	179	0	1	12	0	0	0	0	0	0	0
143	Fulchari	GKSS	Nil	188	159	0	0	5	14	1	883	0	28	792	0	3	40	0	0	0	0	0	3	82
144	Azmiriganj	BRAC	Hab	0	0	0	0	25	97	0	707	0	0	672	0	8	87	0	0	0	0	0	24	275
145	Baniachong	BRAC	Hab	88	45	0	0	98	404	0	2025	0	8	2208	0	15	178	0	0	1	68	0	64	1573
146	Chunarughat	BRAC	Hab	159	111	0	0	113	483	0	2934	0	0	444	0	21	280	0	0	1	20	10	117	2093
147	Lakhai	BRAC	Hab	29	23	0	0	8	104	0	1611	0	0	585	0	8	84	0	0	0	0	0	23	222
148	Nabiganj	BRAC	Hab	18	9	0	0	4	80	0	1260	0	0	336	0	12	123	0	0	0	0	0	32	420
149	Madhabpur	BRAC	Hab	15	12	0	0	0	0	0	15	0	300	0	0	0	0	0	0	0	0	0	20	242
150	Bahubal	BRAC	Hab	21	19	0	0	0	0	0	82	0	0	156	0	0	0	0	0	0	0	0	41	268
151	Nabiganj	BRAC	Hab	501	324	0	0	40	250	0	3023	0	0	1032	0	4	51	0	0	0	0	0	27	465
152	Bardakha	BRAC	Hab	20	23	0	0	0	90	0	256	0	204	660	0	6	118	0	0	0	0	0	16	388
153	Ajmiriganj	BRAC	Hab	135	116	0	0	30	197	0	1900	0	12	624	0	20	235	0	0	17	92	0	65	677
154	Rajnagar	BRAC	Hab	21	10	0	0	17	78	0	2300	0	72	1800	0	16	295	0	0	2	21	0	107	2000
155	Kulaura	BRAC	Hab	114	67	0	0	70	330	0	805	0	269	127	0	34	503	0	0	1	8	0	57	1235
156	Moulvibazar	BRAC	Hab	16	21	0	0	51	145	0	395	0	156	156	0	6	89	0	0	1	22	0	23	351
157	Chatak	BRAC	Hab	70	88	0	0	0	25	0	0	0	0	84	0	2	28	9	105	0	0	0	13	194
158	Dharmapasha	BRAC	Hab	0	0	0	0	0	0	0	345	0	0	264	0	24	345	0	0	5	52	0	35	472
159	Derrabazar	BRAC	Hab	11	8	0	0	0	0	0	201	0	0	36	0	17	207	0	0	1	34	0	52	745
160	Tahirpur	BRAC	Hab	79	94	0	0	0	0	0	90	0	0	72	0	21	251	0	0	3	77	0	23	301
161	Jhinaigati	BRAC	Dha	554	421	0	0	5	118	0	807	0	0	1814	0	19	324	1	12	5	61	0	117	1134
162	Nalitabari	BRAC	Dha	235	283	0	0	92	357	0	2204	0	0	1404	0	23	337	0	0	10	126	0	133	2253
163	Sreebardi	BRAC	Dha	368	252	0	0	11	338	0	3609	0	0	3036	0	16	252	0	0	1	12	0	68	1339
164	Nakhla	BRAC	Dha	1081	825	0	0	22	263	0	918	0	0	6432	0	21	295	0	0	9	129	0	118	2639
165	Sherpur	BRAC	Dha	439	407	0	0	0	447	0	5440	0	0	4020	0	30	362	0	0	5	44	0	116	2552
166	Jamalpur	BRAC	Nil	89	64	0	0	8	421	0	4392	0	0	11676	0	23	333	0	0	0	0	0	94	1617
167	Dewanganj	BRAC	Nil	150	102	0	0	12	274	0	2149	0	115	1820	0	22	327	2	35	2	21	0	128	1968
168	Saidpur	BRAC	Nil	17	18	0	0	6	154	0	1249	0	63	796	0	14	231	0	0	6	38	0	35	666
169	Dewan	BRAC	Nil	3	7	0	0	9	445	0	4197	0	120	2172	0	19	289	0	0	2	12	0	54	1089
170	Kishoreganj	BRAC	Nil	90	41	0	0	35	507	0	5661	0	72	2040	0	31	456	0	0	3	36	0	89	1566
171	Nilphamari	BRAC	Nil	136	65	0	0	79	821	0	4854	0	360	1380	0	60	973	0	0	9	50	0	202	4191
	Sreemangal	BRAC	Hab	17	6	0	0	73	474	0	2488	0	159	321	0	17	203	0	0	0	0	0	35	487
			Total	35999	17485	1	18	2123	12507	251	139960	2787	5413	241250	4739	793	11311	168	2487	240	2908	999	2406	42135

59

BEST AVAILABLE COPY

BEST AVAILABLE COPY

Sl	Thana	NGO	TA-Unit	II. Service Delivery Areas, Points and Providers						I. Total number of Customer Contracted by Service Delivery Sites															
										Children <5								>= 5 Children and Adults							
										Male				Female				Male				Female			
				Estimated ELCOs Covered by RSDP	# Static Clinic in Place	# Satellite Clinic Organized	# Depoholder in Place	# of FWV/ Paramedic in Place	# of comm. Mobilizer in Place	Clinic	SC	DH	Total	Clinic	SC	DH	Total	Clinic	SC	DH	Total	Clinic	SC	DH	Total
1	Bagmara	JTS	NII	11000	1	9	38	2	2	0	1	23	24	0	1	12	13	6	8	171	185	298	330	775	1403
2	Godagari	JTS	NII	14040	1	16	29	2	2	0	2	20	22	0	37	15	52	24	19	474	517	57	145	666	868
3	Gurudashpur	JTS	NII	10315	1	10	30	2	2	13	10	0	23	13	6	0	19	22	26	73	121	180	378	578	1136
4	Lohagara	JTS	Far	10071	1	16	28	2	2	36	40	0	76	42	25	0	67	149	121	179	449	381	500	677	1558
5	Mohonganj	JTS	Dha	6400	1	32	20	3	3	3	3	4	10	4	4	13	21	11	25	63	99	205	113	173	491
6	Moheshpur	JTS	Far	12294	1	17	33	2	2	3	1	0	4	1	1	0	2	6	2	34	42	84	244	260	588
7	Poba	JTS	NII	9048	1	16	20	2	2	9	65	23	97	2	36	24	62	26	25	119	170	365	522	373	1260
8	Singair	JTS	Dha	10565	1	8	31	2	2	2	13	26	41	2	14	80	96	8	29	3	40	102	298	253	653
9	Singra	JTS	NII	10793	1	16	30	2	2	16	12	0	28	6	13	0	19	53	187	62	302	110	647	1073	1830
10	Sreepur	JTS	Dha	15059	1	12	40	2	2	0	1	0	1	4	3	0	7	13	2	48	63	116	182	594	892
11	Atpara	JTS	Dha	6733	1	19	19	3	3	14	29	0	43	14	33	0	47	71	66	68	205	136	285	418	839
12	Kamalkonda	JTS	Dha	12616	1	19	30	3	3	33	10	109	152	38	11	72	121	54	88	125	267	213	252	247	712
13	Khalia(ur)	JTS	Dha	3202	1	16	14	2	2	10	10	0	20	19	6	0	25	35	29	8	72	60	102	20	182
14	Purbadhala	JTS	Dha	10264	1	23	30	3	3	3	10	38	51	10	7	29	46	36	55	60	151	242	346	307	895
15	Gauripur	JTS	Dha	10802	1	16	30	2	2	48	40	8	96	47	53	6	106	32	19	91	142	275	560	406	1241
16	Harirampur	JTS	Dha	7002	1	10	16	2	2	5	17	0	22	4	14	0	18	32	111	17	160	102	238	88	428
17	Shibalaya	JTS	Dha	6411	1	24	24	3	3	17	102	0	119	14	110	0	124	79	163	230	472	187	431	224	842
18	Mohanpur	JTS	NII	4093	1	16	17	2	2	12	5	0	17	2	9	0	11	19	5	32	56	125	365	254	744
19	Baraigram	JTS	NII	12136	1	14	31	2	2	4	21	25	50	1	10	32	43	24	69	85	178	407	638	646	1691
20	Jibannagar	JTS	Far	12665	1	16	17	2	2	8	67	0	75	7	63	0	70	43	50	34	127	129	654	636	1419
21	Bagatpara	JTS	Far	8739	1	16	23	2	2	15	9	230	254	9	28	197	234	13	49	317	379	181	451	494	1126
22	Alfadanga	BAMANEH	Far	6031	1	20	30	3	3	7	39	127	173	9	36	117	162	3	132	490	625	46	246	447	739
23	Chandina	BAMANEH	Hab	12681	1	28	32	3	3	20	38	0	58	15	51	0	66	26	33	261	320	200	504	557	1261
24	Gabtoli	BAMANEH	NII	13368	1	30	30	3	3	23	166	230	419	28	302	215	545	20	45	262	327	394	1028	1774	3196
25	Dehar	BAMANEH	Dha	7800	1	12	32	3	2	33	45	58	136	24	40	50	114	66	71	6	143	186	243	101	530
26	Karanjani	BAMANEH	Dha	15135	1	14	32	3	3	30	21	58	109	22	55	16	93	10	40	163	213	133	108	297	538
27	Nowabganj	BAMANEH	Dha	8370	1	8	30	3	3	11	17	38	66	16	3	58	77	11	8	124	143	96	134	300	530
28	Boalmari	BAMANEH	Far	8100	1	42	30	3	3	27	54	110	191	26	90	92	208	30	65	70	165	144	488	468	1100
29	Shibganj	BAMANEH	NII	23661	1	37	30	3	3	19	16	31	66	11	17	23	51	29	23	136	188	306	684	1201	2191
30	Sonatola	BAMANEH	NII	9000	1	24	30	3	3	7	21	54	82	5	12	53	70	46	29	265	340	115	343	1010	1468
31	Srimangal	SUOPPS	Hab	9991	1	24	48	3	3	9	13	0	22	12	13	0	25	7	5	17	29	141	236	227	604
32	Zakiganj	SHIMANTIK	Hab	7340	1	33	46	3	4	22	71	13	106	19	55	10	84	69	89	88	246	178	450	259	887
33	Balaganj	SHIMANTIK	Hab	10050	1	33	40	4	5	19	75	5	99	36	106	12	154	35	110	12	157	51	125	22	198
34	Golapganj	SHIMANTIK	Hab	7200	1	28	64	3	4	7	53	22	82	3	29	28	60	21	81	117	219	91	385	247	723
35	Jaintapur	SHIMANTIK	Hab	6800	1	18	48	2	3	2	44	0	46	7	34	0	41	14	45	0	59	41	334	83	458
36	Beanibazar	SHIMANTIK	Hab	6800	1	30	42	3	3	3	91	0	94	3	82	0	85	15	68	116	199	66	386	299	751
37	Kanaighat	SHIMANTIK	Hab	6500	1	28	24	3	4	2	22	0	24	5	28	0	33	2	70	55	127	10	450	48	508
38	Sarail	JUSSS	Hab	10403	1	23	67	3	4	7	19	0	26	2	15	0	17	8	42	0	50	83	326	88	497
39	Nasirnagar	JUSSS	Hab	9823	1	16	63	2	4	8	2	0	10	3	0	0	3	17	12	26	55	53	125	72	250
40	Moradganj	CRC	Far	11983	1	25	48	4	4	47	67	9	123	45	52	13	110	69	65	62	196	236	510	216	962
41	Sharankhola	CRC	Far	7100	1	18	20	2	2	10	27	25	52	9	22	41	72	26	26	78	130	137	368	278	783
42	Chitalmari	CRC	Far	8288	1	30	28	3	3	9	15	0	24	6	14	0	20	7	20	0	27	62	182	0	244
43	Daulatpur	PSKS	Far	16130	1	36	40	3	2	17	29	67	113	20	26	66	112	32	18	134	184	269	656	359	1284
44	Bhoramara	PSKS	Far	11729	1	34	40	3	2	19	28	0	47	29	22	0	51	38	46	168	252	222	526	384	1132
45	Gangni	PSKS	Far	14551	1	38	36	3	2	28	66	136	230	10	98	271	379	60	7	47	114	354	725	660	1739
	Kumarkhali	PJS	Far	12120	1	32	32	3	3	32	63	0	95	27	86	0	113	22	70	0	92	86	102	0	188
47	Tangipara	SGUS	Far	6392	1	32	32	3	3	3	0	26	29	7	0	23	23	7	0	14	21	50	0	194	244
48	Keshiani	SGUS	Far	13075	1	48	48	4	4	3	26	0	29	3	11	0	14	14	70	106	190	15	247	602	864
49	Mukundpur	SGUS	Far	15050	1	40	48	4	4	17	177	0	194	26	283	0	309	46	100	119	265	122	440	791	1353
50	Rajiar	MMKS	Far	10380	1	6	36	3	3	1	2	23	26	2	2	8	12	59	19	60	138	80	61	216	347
51	Shibchar	MMKS	Far	11450	1	36	36	3	3	28	12	0	37	21	20	0	41	91	117	0	208	169	455	124	728

				II. Service Delivery Areas, Points and Providers						I. Total number of Customer Contracted by Service Delivery Sites															
										Children <5								>= 5 Children and Adults							
										Male				Female				Male				Female			
Sl	Thana	NGO	TA-Unit	Estimated ELCOs Covered by RSDP	# Static Clinic in Place	# Satellite Clinic Organized	# Depoholder in Place	# of FWV/ Paramedic in Place	# of comm. Mobilizer in Place	Clinic	SC	DH	Total	Clinic	SC	DH	Total	Clinic	SC	DH	Total	Clinic	SC	DH	Total
52	Bhedarganj	MMkS	Far	10261	1	28	36	3	3	35	100	86	221	35	79	135	249	56	128	84	268	111	265	258	634
53	Zanjira	MMkS	Far	10750	1	21	36	3	3	31	59	157	247	10	42	145	197	25	112	268	405	78	357	312	747
54	Goalirhat	MMkS	Far	9940	1	36	36	3	3	76	117	36	229	165	201	25	391	65	66	0	131	40	33	0	73
55	Damudya	MMkS	Far	9821	1	36	36	3	3	29	126	94	249	20	98	68	186	52	191	123	366	180	472	342	994
56	Sitakundi	SUS	Feni	10890	1	42	40	3	3	28	68	5	101	36	109	8	153	34	25	0	59	151	626	283	1060
57	Rangunia	SUS	Feni	12700	1	22	40	2	3	3	60	0	63	1	63	0	64	5	16	0	21	47	221	0	268
58	Fatikchari	SUS	Feni	12120	1	36	40	3	3	15	35	0	50	13	35	0	48	21	51	0	72	316	776	337	1429
59	Rawzan	SUS	Feni	13295	1	32	40	3	3	21	25	0	46	16	8	0	24	6	1	0	7	334	778	352	1464
60	Sandwip	SUS	Feni	14198	1	39	40	3	3	21	68	0	89	54	438	0	492	6	86	65	157	49	697	115	861
61	Mithapukur	PSF	Nil	11197	1	20	40	2	2	24	87	83	194	23	7	37	67	5	3	68	76	177	418	617	1212
62	Kazipara	PSF	Nil	11142	1	36	35	3	3	21	25	145	191	24	28	195	247	14	33	86	133	141	868	552	1561
63	Sujanagar	PSF	Nil	10642	1	28	30	3	3	36	76	7	119	38	96	4	138	12	27	13	52	219	468	461	1148
64	Belabo	PSF	Hab	7750	1	20	22	2	2	31	11	0	42	42	2	13	57	39	16	25	80	65	461	309	835
65	Monohardi	PSF	Hab	9832	1	17	23	2	2	1	2	24	27	1	0	35	36	5	3	53	61	42	213	228	483
66	Raipura	PSF	Hab	15131	1	35	45	3	3	2	1	28	31	3	6	28	37	2	1	139	142	65	284	218	567
67	Louhajang	PSF	Dha	6111	1	0	15	2	2	156	0	0	156	146	0	0	146	183	0	30	213	304	0	178	482
68	Sreenagar	PSF	Dha	9269	1	0	20	1	2	55	0	0	55	19	0	0	19	90	0	36	126	269	0	300	569
69	Pirganj	PSF	Nil	13955	1	36	30	3	3	3	28	17	48	3	19	117	139	10	28	43	81	21	634	681	1336
70	Pirgacha	PSF	Nil	9480	1	19	26	2	2	3	5	16	24	3	12	68	83	29	39	70	138	97	288	154	539
71	Parbatipur	PSF	Nil	9037	1	17	26	2	2	16	29	0.	45	18	40	0	58	25	66	23	114	216	352	176	744
72	Birol	PSF	Nil	7285	1	20	25	2	2	18	15	0	33	15	25	0	40	15	22	15	52	58	249	250	557
73	Badalgachi	PSF	Nil	16080	1	33	40	3	3	5	33	1	39	3	16	16	35	18	59	75	152	114	525	471	1110
74	Dhamuirhat	PSF	Nil	6342	1	18	25	2	2	2	5	0	7	1	8	0	9	42	58	15	115	30	213	199	442
75	Ullapara	PSF	Nil	7493	1	17	26	2	2	5	4	82	91	3	2	77	82	28	30	190	248	62	264	538	864
76	Shahajadpur	PSF	Nil	6967	1	20	25	2	2	4	7	0	11	4	1	0	5	9	1	13	23	106	385	104	595
77	Sreepur	PSF	Far	7513	1	31	28	2	2	1	16	8	25	2	13	8	23	3	4	52	59	63	461	309	833
78	Shaluka	RFWP	Dha																						
79	Burichang	RFWP	Hab																						
80	Nangalkot	RFWP	Hab																						
81	Kasba	RFWP	Hab																						
82	Nabinagar	RFWP	Hab																						
83	Barura	RFWP	Hab																						
84	Daudkandi	RFWP	Hab																						
85	Muradnagar	RFWP	Hab																						
86	Laksam	RFWP	Hab																						
87	Sonargaon	RFWP	Hab																						
88	Muktagacha	RFWP	Dha																						
89	Nagarpur	RFWP	Dha																						
90	Basail	RFWP	Dha																						
91	Sakhipur	RFWP	Dha																						
92	Delduar	RFWP	Dha																						
93	Feni	Swanirvar	Feni	10768	1	33	30	3	3	74	120	129	323	55	114	172	341	39	129	119	287	328	899	430	1657
94	Dagonbhuyan	Swanirvar	Feni	12405	1	32	32	3	3	32	26	111	169	29	40	104	173	41	88	190	319	254	586	546	1386
95	Parshuram	Swanirvar	Feni	6554	1	27	22	3	3	10	4	89	103	7	6	87	100	47	25	74	146	136	200	404	740
96	Chagolnaya	Swanirvar	Feni	10113	1	32	32	3	3	35	125	33	193	82	126	22	230	47	67	78	192	230	433	453	1116
97	Sonagazi	Swanirvar	Feni	8000	1	23	32	3	3	39	38	20	97	46	54	25	125	112	93	90	295	312	361	125	798
98	Kutiarchar	Swanirvar	Dha	8521	1	32	30	3	3	24	18	102	144	14	26	72	112	18	35	300	353	115	471	491	1077
99	Kutiadi	Swanirvar	Dha	14164	1	35	32	3	3	29	33	93	155	22	28	110	160	58	66	213	337	143	502	419	1064
100	Kalihati	Swanirvar	Dha	34222	1	56	54	5	5	20	36	39	95	19	37	38	94	81	181	498	760	290	868	984	2142
101	Ghatail	Swanirvar	Dha	27350	1	60	48	5	5	18	83	29	130	16	51	51	118	91	249	603	943	213	1040	949	2202
102	Ghatail	Swanirvar	Dha	6400	1	26	30	3	3	4	25	39	68	4	24	58	86	11	135	46	192	34	433	145	612

61

Sl	Thana	NGO	TA-Unit	II. Service Delivery Areas, Points and Providers						I. Total number of Customer Contracted by Service Delivery Sites															
										Children <5								>= 5 Children and Adults							
										Male				Female				Male				Female			
				Estimated ELCOs Covered by RSDP	# Static Clinic in Place	# Satellite Clinic Organized	# Depoholder in Place	# of FWV/ Paramedic in Place	# of comm. Mobilizer in Place	Clinic	SC	DH	Total	Clinic	SC	DH	Total	Clinic	SC	DH	Total	Clinic	SC	DH	Total
103	Savar	Swanirvar	Dha	8172	1	27	26	3	3	24	12	0	36	30	25	0	55	38	21	68	127	163	227	301	691
104	Austagram	Swanirvar	Dha	7573	1	9	29	3	3	9	8	111	128	4	11	105	120	47	21	95	163	69	89	171	329
105	Nikli	Swanirvar	Dha	4994	1	18	23	3	3	10	23	63	96	5	12	85	102	37	51	48	136	43	208	201	452
106	Tarail	Swanirvar	Dha	4184	1	32	23	3	3	18	55	36	109	15	56	39	110	48	137	78	263	119	323	148	590
107	Ino	Swanirvar	Dha	5395	1	15	32	3	3	38	124	20	182	48	76	13	137	38	103	26	167	49	117	221	387
108	Bhairab	Swanirvar	Dha	7568	1	22	30	3	3	7	14	0	21	2	17	0	19	0	24	19	43	89	203	93	385
109	Hossainpur	Swanirvar	Dha	9122	1	27	30	3	3	21	18	83	122	28	19	99	146	53	120	155	328	156	498	387	1041
110	Karimganj	Swanirvar	Dha	8942	1	30	30	3	3	14	15	181	210	10	13	231	254	45	45	340	430	168	440	723	1331
111	Pakundia	Swanirvar	Dha	4188	1	24	32	3	3	10	25	37	72	4	19	21	44	33	46	108	187	45	152	321	518
112	Daulatkhan	Swanirvar	Far	8252	1	31	23	3	3	15	6	12	33	15	5	24	44	19	7	36	62	157	603	274	1034
113	Lalmohan	Swanirvar	Far	14448	1	28	32	3	3	35	22	22	79	33	29	27	89	31	28	279	338	304	390	767	1461
114	Monpura	Swanirvar	Far	3471	1	32	32	3	3	16	21	40	77	9	17	63	89	35	57	104	196	105	306	207	618
115	Tazumuddin	Swanirvar	Far	4573	1	22	22	3	3	17	36	26	79	8	18	33	59	20	26	147	193	122	283	282	687
116	Madhupur	Swanirvar	Dha	12561	1	30	32	3	3	12	22	81	115	10	30	91	131	63	183	425	671	189	751	1148	2088
117	Goplapur	Swanirvar	Dha	15363	1	44	44	4	4	32	60	0	92	27	74	0	101	85	103	28	216	337	431	653	1421
118	Bhuapur	Swanirvar	Dha	7176	1	22	32	3	3	11	11	3	25	19	8	3	30	46	78	79	203	116	128	69	313
119	Bokshiganj	Swanirvar	Dha	11155	1	30	30	3	3	21	19	23	63	28	23	36	87	21	17	111	149	191	541	709	1441
120	Dewanganj	Swanirvar	Dha	9778	1	22	32	3	3	3	3	6	12	6	6	13	25	33	16	193	242	73	493	502	1068
121	Islampur	Swanirvar	Dha	13995	1	8	30	3	3	2	1	34	37	3	6	48	57	74	38	354	466	137	117	505	759
122	Melandah	Swanirvar	Dha	11878	1	27	30	3	3	1	2	48	51	2	1	44	47	36	28	279	343	285	537	863	1685
123	Atwari	Swanirvar	Nil	6562	1	23	30	3	3	10	5	15	30	5	6	22	33	46	29	112	187	67	143	692	902
124	Debiganj	Swanirvar	Nil	10078	1	32	30	3	3	4	31	0	35	2	15	0	17	23	58	45	126	122	568	599	1289
125	Panchbibi	Swanirvar	Nil	9700	1	36	36	3	3	5	21	30	56	3	10	31	44	18	57	140	215	120	603	1447	2170
126	Rangoti	SOPIRET	Feni	9182	1	28	33	3	3	56	84	0	140	27	68	0	95	45	124	108	277	207	821	1553	2581
127	Ramganj	SOPIRET	Feni	9061	1	21	32	3	3	1	38	0	39	1	35	0	36	1	30	3	34	36	96	686	818
128	Faridganj	SOPIRET	Feni	9046	1	33	34	3	3	21	23	0	44	40	54	0	94	31	22	0	53	238	527	1254	2019
129	Kachua	SOPIRET	Feni	8734	1	15	32	3	3	4	32	0	36	2	34	0	36	15	5	0	20	228	77	648	953
130	Hajiganj	SOPIRET	Feni	9035	1	7	32	3	3	1	34	0	35	0	2	0	2	7	24	0	31	17	29	0	46
131	Rajnhat	DCPUK	Nil	4992	1	26	48	3	3	7	287	68	362	10	308	74	392	57	111	636	804	146	879	928	1953
132	Bhurungamari	DCPUK	Nil	8042	1	30	48	3	3	11	328	65	404	14	474	38	526	61	241	207	509	102	691	1449	2242
133	Roumari	DCPUK	Nil	9118	1	22	48	3	3	71	52	0	123	76	112	0	188	251	155	186	592	544	770	643	1957
134	Char Rajibpur	DCPUK	Nil	4933	1	20	48	3	3	38	106	190	334	33	70	154	267	50	26	118	194	99	360	1840	2299
135	Sonbag	BANDHAN	Feni	10123	1	19	46	3	4	41	54	112	207	38	66	68	172	52	28	140	220	213	208	545	966
136	Companiganj	BANDHAN	Feni	9042	1	25	48	3	4	14	156	0	170	20	138	0	158	24	60	0	84	112	446	344	902
137	Balikandi	VPKA	Far	12103	1	27	42	3	3	8	60	50	118	6	56	55	117	32	47	79	158	234	716	532	1482
138	Pangsha	VPKA	Far	14712	1	40	40	3	3	15	59	185	259	15	55	368	438	46	119	163	328	217	938	389	1544
139	Goalandaghat	VPKA	Far	8562	1	24	24	3	3	92	46	32	170	71	79	21	171	154	70	87	311	380	332	173	885
140	Sundarganj	GKSS	Nil	1458	1	32	40	3	3	11	25	309	345	57	108	291	456	60	131	207	398	135	263	756	1154
141	Sadullahpur	GKSS	Nil	1614	1	37	40	3	3	2	0	66	68	1	0	70	71	88	99	213	400	181	385	945	1511
142	Gobindaganj	GKSS	Nil	1634	1	37	38	3	3	10	59	18	87	14	76	26	116	24	137	122	283	50	599	798	1447
143	Fulchari	GKSS	Nil	1047	1	22	31	3	3	21	22	58	101	14	21	37	72	106	27	103	236	153	291	724	1168
144	Azmiriganj	BRAC	Hab	4829	0	28	77	6	7	0	0	46	46	0	0	46	46	0	0	56	56	0	151	896	1047
145	Baniachong	BRAC	Hab	18398	1	49	228	17	6	7	0	282	289	6	0	391	397	38	0	184	222	82	372	2577	3031
146	Chunarughat	BRAC	Hab	20595	1	43	260	9	4	12	39	227	278	8	31	253	292	57	45	56	158	165	320	4527	5012
147	Lakhai	BRAC	Hab	6640	0	26	63	6	3	0	0	131	131	0	0	97	97	0	0	68	68	0	230	1815	2045
148	Nabiganj	BRAC	Hab	13337	0	56	155	8	3	0	0	19	19	0	0	26	26	0	0	37	37	0	375	1439	1814
149	Madhabpur	BRAC	Hab	1165	0	6	30	3	7	1	0	0	1	0	0	0	0	11	0	15	26	15	18	27	60
150	Bahubal	BRAC	Hab	1650	0	7	20	1	4	7	0	17	19	0	0	27	27	5	0	27	32	5	61	170	236
151	Hobiganj	BRAC	Hab	21419	2	42	179	11	6	40	45	70	155	33	41	77	151	73	55	282	410	351	465	3620	4436
152	Baralekha	BRAC	Hab	7584	0	40	31	4	6	0	3	8	11	0	3	8	11	9	19	67	95	9	201	301	511
153	Kamalganj	BRAC	Hab	8770	0	30	139	10	4	0	0	130	130	0	0	166	166	9	0	169	178	20	249	2886	3155

62

Sl	Thana	NGO	TA-Unit	II. Service Delivery Areas, Points and Providers						I. Total number of Customer Contracted by Service Delivery Sites															
										Children <5								>= 5 Children and Adults							
										Male				Female				Male				Female			
				Estimated ELCOs Covered by RSDP	# Static Clinic in Place	# Satellite Clinic Organized	# Depoholder in Place	# of FWV/ Paramedic in Place	# of comm. Mobilizer in Place	Clinic	SC	DH	Total	Clinic	SC	DH	Total	Clinic	SC	DH	Total	Clinic	SC	DH	Total
154	Rajnagar	BRAC	Hab	6817	0	31	184	9	5	1	0	208	209	1	0	168	169	9	0	155	164	20	328	3243	3591
155	Kulaura	BRAC	Hab	20816	1	61	280	10	29	18	0	10	28	19	0	11	30	49	0	33	82	95	822	1511	2428
156	Moulvibazar	BRAC	Hab	5367	0	31	47	7	3	3	6	14	23	2	5	14	21	14	5	25	44	8	237	594	839
157	Chatak	BRAC	Hab	0	0	0	25	1	17	0	0	58	58	0	0	99	99	0	0	36	36	0	0	144	144
158	Dharmapasha	BRAC	Hab	0	0	0	209	1	14	0	0	0	0	0	0	0	0	0	0	22	22	0	0	649	649
159	Dewrabazar	BRAC	Hab	0	0	0	165	8	3	0	0	4	4	0	0	3	3	0	0	11	11	0	0	750	750
160	Tahirpur	BRAC	Hab	0	0	0	141	1	10	0	0	91	91	0	0	100	100	0	0	100	100	0	0	229	229
161	Jhinaigati	BRAC	Dha	18232	1	56	200	8	6	23	17	512	552	16	30	541	587	73	0	499	572	158	580	1781	2519
162	Nalitabari	BRAC	Dha	20841	1	76	260	9	8	19	0	159	178	10	0	190	200	59	0	302	361	78	383	3287	3748
163	Sreeburdi	BRAC	Dha	19303	0	66	264	9	6	0	9	393	402	0	10	447	457	0	0	502	502	0	331	5407	5738
164	Nakhla	BRAC	Dha	19500	1	71	207	9	6	13	9	751	773	9	13	708	730	59	0	1203	1262	93	323	2545	2961
165	Sherpur	BRAC	Dha	30915	1	86	403	12	10	9	0	983	992	5	0	1071	1076	42	0	750	792	82	980	7260	8322
166	Jaldhaka	BRAC	Nil	29700	1	92	290	11	9	4	0	10	14	5	0	13	18	60	0	973	1033	84	759	5219	6062
167	Domar	BRAC	Nil	23288	1	74	141	9	8	19	4	69	92	17	6	65	88	63	4	457	524	124	640	2613	3377
168	Saidpur	BRAC	Nil	11628	0	40	108	6	4	0	0	60	60	0	0	57	57	0	0	90	90	0	457	1430	1887
169	Dimla	BRAC	Nil	23110	0	72	219	10	7	0	35	282	317	0	36	308	344	0	14	64	78	0	632	4895	5527
170	Kishoreganj	BRAC	Nil	31300	1	84	295	12	8	16	0	310	326	8	0	270	278	35	0	197	232	97	901	6648	7646
171	Nilphamari	BRAC	Nil	39233	1	117	258	15	9	13	74	38	125	5	51	28	84	52	13	170	235	131	939	5772	6842
	Sreemangal	BRAC	Hab	10000	0	44	200	10	4	2	20	24	46	1	18	31	50	4	2	38	44	16	504	3074	3594
		Total	Total	1673821	141	4550	9348	591	578	2608	5577	9939	18119	2587	6438	10737	19762	5714	7714	21215	34643	21652	62466	133975	218093

63

Appendix - D

RSDP Representative in different Task Forces and Working Groups

Name of the task Force	NIPHP	RSDP Representatives	
		Key persons	Supports Persons
1. FP, RTI/STD and HIV/AIDS task Force	QIP	Dr. Ferdousi Begum	
2. HIV/AIDS Working Group			Dr. Ferdousi Begum
3. Child Health Task Force		Dr. Raisul	
4. Child Health Working Group		Dr. Raisul	
5. Maternal Health Task Force		Dr. Razina Razzak	Dr. Ferdousi Begum
6. Other Reproductive Health Training working group		Dr. Razina Razzak	Dr. Ferdousi Begum
7. RDU working Group		Dr. Ferdousi Begum	RDU/RDF technical person
8. Counseling Training Working Group		Mr. Shafiqure Rahman	
9. Training Management group		Dr. Ferdousi Begum	
1. RDF Management group	UFHP	Dr. Shabnam Shahnaz	Dr. Ferdousi Begum
2. RDF Working group		Dr. Salauddin	
3. Common IEC Working group		Dr. Ferdousi	
1. Documentation of Thana Action Plan Implementation Process	ORP	Mahbab Aminur Rahman	
2. Operationalizing a cost-effective tiered system for delivering the essential services package by NGOs		Mahbab Aminur Rahman	
3. Strategies for improving the quality and performance of clinical contraceptive services		Dr. Ferdousi Begum	Mahbab Aminur Rahman
4. Strategies to improve prevention and management of RTIs and STDs in Bangladesh		Dr. Ferdousi Begum	Mahbab Aminur Rahman
5. Modified strategy for ensuring referral and linkage for Essential Obstetric Care (EOC)	ORP	Dr. Ferdousi Begum	Mahbab Aminur Rahman
1. MIS Task Force	MIS	Mr. Toslim Uddin Khan	
1. Logistics Training LMIS LMIS	FPLM		
1. Post flood EPI	BASICS	Dr. Munir and Dr Raisul	
2. Routine EPI			
1. Critical Undeserved Working Group	GOB	Mr. Mansur Ahmed	
2. NGO Affiliation and Clinic Approval		Mr. Mansur Ahmed	
3. Improvement of performance Management (Thana Team Training)		Mr. Mansur Ahmed	
1. NGO Portfolio	SMC		

PROGRESS OF THE IR ACTION

Progress towards each of the major actions in the approved workplan for RSDP is listed in the following Table.

SL No.	Action Plan and tasks	Key collaborators	Progress upto September 1998
IR#1: Use of high impact family health services in target population increased.			
SR 1.1 In approximately 258 low, marginal and high performing thanas high priority services from ESP offered innovatively, cost effectively and according to national standards			
1.	Allocation of targeted thanas to selected NGOs	GOB and USAID	• 171 Thanas selected and allocated • 20 NGOs selected (including BRAC) and awarded RSDP grant for allocated Thanas
2.	Contribute to the development of needs assessment tool for NGO service provision (personnel, facilities, supplies & commodities, equipment)	ORP	• Needs assessment tools developed in collaboration with ORP
3.	Pretesting of the Needs Assessment tool	ORP	A baseline survey has been designed to determine (i) coverage rate of various component of ESP, e.g., EPI, Vitamin A, TT, ANC, ARI, CDD, CPR, method mix, (ii) socio-economic profile of both users and non-users of ESP, (iii) different sources of ESP, and (iv) knowledge of RSDP services sources and providers, especially RSDP static and satellite clinic locations, Community Mobilizers and Depotholders. Data collection of first phase began in November 16, 1998 and will continue about four months. Results will be available in mid April 99. ACPR is conducting the survey.
4.	Phased conduction of Needs Assessment of NGOs and Situation Analysis in RSDP thanas	ORP	• Situation Analysis is done by NGOs and RSDP for setting up static clinics • A rapid survey was conducted to see the impact of the changed service delivery design on pill and condom users
5.	Contribute to and collaborate in the design of cost effective service interventions	ORP	• RSDP is working closely with ORP in the OR for cost effective service interventions.
6.	Identify the customers in the targeted thanas for high priority EPS services based on the needs assessment		• Baseline survey is being designed for identifying customer need.
7.	Introduce ESP services in phases according to the findings of the needs assessment in the targeted thanas		• ESP services is being introduced in phases in the targeted thanas as per plan
8.	Contribute to the development of standards and guidelines on ESP services	QIP	• Contributed to the ESP manual on service levels and list of equipment, supplies and lab tests required for delivery of ESP • RSDP has contributed to the development of RTI/STD service manual, maternal health manual and child health manual
9.	Orient NGO managers and service Providers on standards and guidelines of the ESP services to be provided in the NGO areas		• Two Dhaka level and five regional level orientation were held for the NGO Managers • Five workshops to be held by March 1999 for non-medical Supervisors in RSDP system; initial Discussion held and concept paper developed.
SR 1.2 ESP services progressively integrated at different levels of service delivery in NGO areas including RSDP Depot-holders, Satellite clinics and Clinics.			
10.	Contribute to the design of integrated ESP for depot-holders, satellite clinics, clinics and health centers in NGO and BRAC areas	QIP, ORP	• Contributed to design and development of the training program for the service providers.
11.	Introduce integrated ESP for RSDP depot-holders in NGO and BRAC areas		• RSDP has arranged TOT for Community Mobilizer to conduct DH's training through them • The DH's training program started from July 1998.

Sl. No.	Action Plan and tasks	Key collaborators	Progress upto September 1998
			• CMs orientation curriculum finalized
12.	Introduce integrated ESP for satellite clinics, clinics and health centers in NGO and BRAC areas		• 159 clinics are functional and providing MCH and FP services from ESP; • 120 clinics have DG/FP approval, 16 clinics received DTC recommendation and the rest 23 clinics are in process of getting DTC recommendation
13.	Develop guidelines for training needs assessment of managers and service providers; and conduct training needs assessment in the NGOs		• RSDP developed database for the training needs of the NGO staff
14.	Conduct training needs assessment in the NGOs		• RSDP completed training need assessment for non-medical supervisors through PRIME.
15.	Contribute to development of training curricula	QIP	• RSDP Technical Officers worked with QIP for developing and finalizing CMT, CSI and ORH training curriculum.
16.	Development of comprehensive training plan for managers and service providers		• Master training plan drafted and will be finalized after confirmed dates from training institutions
17.	Complete basic training of the managers and services providers		• Basic Training for the Managers is in planning process
SR1.3 In targeted thanas, appropriate ESP services for critical undeserved population (newlyweds, low parity women, males, pregnant women and adolescents) provided			
18.	Introduce special services as per family health requirements of the critical undeserved population	ORP	• Working with ORP in the design of concept papers on adolescents and males; service delivery interventions will be replicated based on study findings
19.	Support FLE program for adolescents by BRAC in BRAC implementation areas		• FLE continuing in 175 BRAC schools in RSDP supported Thanas
IR2: Capabilities of individuals, families and communities to protect and provide for their own health improved			
SR 2.1 National IEC strategy for ESP, revised, operationalized and evaluated			
1.	Contribution to the modification of National IEC Strategy for ESP.	GOB	• National Strategy developed, National BCC strategy shared, Critical review of the strategy conducted. Strategy endorsed by the government
2.	Develop, pretest, produce, monitor and evaluate messages/ materials for customers and service providers.	GOB	• National IEC survey completed and dissemination workshop held • Technical Assistance to existing Jiggasha thanas provided
3.	Institutionalize state-of-the-art communication techniques through workshops.		• One Advances in Family Health and Social Communication workshop held for GOB and NGO program persons (Senior to mid-level decision makers, planners and program managers). One Message Development workshop held for GOB & NGO program personnel (Senior to mid-level decision makers, planners and program managers)
SR 2.2 Contribute to national HIV/AIDS IEC strategy/ program			
4.	Collaborate and coordinate with GOB in development of HIV/AIDS IEC Strategy.	GOB	• Contributed to GOB/NGOs in the development of national HIV/AIDS IEC/BCC strategy • BCCP made a member of the national HIV/AIDS IEC team
SR 2.3 IEC program of NGOs strengthened and expanded			
5.	Design and develop IEC Programs to encourage Rural Customers to Seek and Utilize Quality ESP Services.	QIP	• RSDP Leaflets, satellite clinic banner, clinic signboard, radio and TV spots developed • 50,000 ESP calendars produced and distributed
6.	Design and develop IEC program for critically undeserved rural population		• IEC materials for undeserved group in process of development • Elements of Jiggasha adapted for DH training curriculum
7.	Conduct training/orientation for NGO service providers and managers on interpersonal and group communication, Counseling and IEC interventions.		• 20 NGOs visited fotr need assessmnet • Technical Assistance to NGOs to conduct community level IEC activities provided.

Sl. No.	Action Plan and tasks	Key collaborators	Progress upto September 1998
			• Technical assistance provided to NGOs to observe specific National/International Days.
IR # 3: Quality of information, services and products improved, and customer satisfaction improved			
SR 3.1 Contraceptive method mix improved in targeted thanas to greater use of clinical methods (IUD, Injectables, NORPLANT and sterilization).			
1.	Collaborate and contribute to the OR on clinical contraceptives	ORP, QIP	• RSDP working with ORP in designing and implementing the OR on clinical contraceptives
2.	Contribute to the design plan for service delivery and IEC for increasing the acceptance of clinical methods based on the OR findings	QIP, ORP	• RSDP had arranged a meeting with FPCSP, UHFS, QIP and BCCP on IEC needs for clinical contraceptives; a follow-up committee was formed with Dr. Jafar, Director, Clinical Contraception Project in the chair.
3.	Assist NGOs to recruit skilled staff capable of providing clinical methods		• 591 FWVs and paramedics have been recruited by the NGOs
4.	Arrange special Training for clinical service providers in NGO and BRAC areas		• 214 FWVs received CMT
5.	Equip and ensure clinical supplies in the NGO clinics and BRAC health centers		• 159 clinics are set-up with the standard equipment and clinical supplies
SR 3.2 ESP quality assurance system installed and quality assured at RSDP- NGO supported service delivery points (SDPs) in targeted thanas			
6.	Contribute to the review and analysis of the existing QA systems for applicability to the new ESP service delivery models	QIP	• QA checklist developed and pretested in RSDP thana • Quality assessment started in RSDP NGO clinics from May 1998 • QA have been completed in 22 Thanas.
7.	Contribute to the development of a QA system suitable for the RSDP service providers SDPs	QIP	• Listing of NGOs and thanas for COPE completed. COPE was conducted in 12 NGOs
8.	Contribute to the development of a manual on quality improvement and monitoring for RSDP sites/services providers		• Initial discussion with QIP has already been started in September 1998.
9.	Develop a manual on ANC, TT, Safe delivery and PNC	QIP	• Maternal Health Manual completed and handed over to QIP
10.	Develop a manual on common illnesses and drug formulate	QIP	• RSDP collaborated with QIP to the production of a standard treatment guideline
11.	Provide manuals, equipment and clinical supplies according to standards and guidelines to NGOs and BRAC		• 159 static clinic functional with standard equipment and supplies
12.	Assist NGOs and BRAC to recruit required number of skilled service providers and train if necessary		• Out of total 591 paramedics, 214 attended CMT.
SR 3.3 In targeted Thanas customer satisfaction with ESP services at RSDP-supported NGOs increased			
1.	Collaborate and contribute to the design for customer appraisal guidelines	QIP, ORP	• Initial discussion started in September 1998 for the development of a formal customer apprisal system; RSDP program officers & NGOs conducting the appraisals on an informal basis
IR#4: Local service delivery organizations strengthened and support systems for high impact family health services improved			
SR 4.1 Program and organizational management capacity (of 20 NGOs) to design, implement, manage and evaluate high priority services of the ESP according to standards strengthened and improved			
1.	Conduct strategic planning workshops for NGOs to develop strategic plans		• Strategic planning workshop was held in BARD, Comilla in June 1998 which was attended by NGO leaders and Managers.
2.	Review/approve NGO annual workplans, targets and objectives		• Annual targets and objectives of all NGOs according to allocated thanas completed
3.	Review organizational structure for staff development opportunities		• The workload of the NGO staff reviewed during their renewal process and their staffing pattern modified accordingly.
4.	Develop Job description and personnel policies for NGOs		• Roles and responsibilities of the NGO staff has been redefined.

SL No.	Action Plan and tasks	Key collaborators	Progress upto September 1998
5.	Support staff development initiatives		• The NGO staff are receiving various training to enhance their knowledge and skills.
6.	Contribute to the design of MIS for ESP	ORP	• RSDP along with UFHP and ICDDR,B led to the development of MIS for NIPHP.
7.	Pretest of the newly developed MIS	ORP	• MIS was pilot tested in RSDP thana Feni and Sherpur for its finalization
8.	Introduce MIS for monitoring and evaluating integrated ESP delivery		• RSDP MIS has been introduced in June 1998
9.	Orient NGO and BRAC managers and providers on integrated MIS		• All NGO and Thana mangers received two-day regional orientation on new MIS who in turn provided orientation to their respective service providers.
10.	Support training of NGO and BRAC management in forecasting need for ESP supplies and commodities	FPLM	• The logistic survey was conducted by RSDP in July 1998 to assess training needs.
11.	Strengthen logistic record keeping and reporting system	FPLM	• RSDP has already conducted preliminary discussion with FPLM.
12.	Contribute to the establishment of a logistic surveillance system for ESP commodities utilization	FPLM	• FPLM visited some RSDP Thanas to review their ESP commodities and supply situation.
13.	Assess NGO performance in low performing thanas every 2 years in the first 4 years to determine whether to provide future funding		• Assessment plan will be outlined in the next workplan
14.	Provide technical assistance to the NGOs to develop indicators to assess the performance of Community Mobilizers		• Initial discussion has been made to develop indicators to assess performance of the RSDP-NGO service providers.
SR 4.2 Financial management capacity of 20 NGOs to implement, manage and sustain high priority services of the ESP according to standards strengthened and improved			
1.	Train Orient NGO financial personnel and managers on RSDP standard accounting and auditing practices and systems		• Project Managers and accountants/office assistant of the RSDP supported NGO project oriented in March 1998 on the RSDP standard accounting and auditing practices.
2.	Improve financial reporting and cost/budget analysis of NGOs		• The NGOs are preparing Grantee Financial Report on quarterly basis. • Revenue Generation Reporting System has been introduced in January 1998.
3.	Introduce management of clinic cost, including developing cost based plans		• Activities will be started in the next Annual Workplan
4.	Orientation for NGO and BRAC manager Cost Analysis Tools developed by RTI,USA		• Activities will be started in the next Annual Workplan
5.	Arrange community meetings for community leaders, women groups, religious leaders to promote and generate support for ESP		• A total of 17,839 community level meetings held with different segments of the community for the promotion of ESP
6.	Facilitate local community-level NGO planning and implementation of project activities		• The activities is going on
7.	Collaborate and contribute to the development of Community Participation rapid presentation by RTI		• RSDP collaborated with RTI in the development of the presentation
8.	Dissemination of the rapid presentation development of Community participation		• The activity is yet to start
SR 4.3 Private Sector provider and service utilization increased			
1.	Identify private sector service provision in targeted thanas.	ORP	• SMC products being distributed in 131 thanas
2.	Orient depot holders and clinical service providers, managers on SMC products		• DHs are being oriented about the SMC product during their ongoing basic training
3.	Establish a system for procurement and distribution of SMC products between NGOs and SMC		• The system is partially in place; the NGOs are collecting supplies of SMC products at the local level
IR4.5: In targeted thanas, GOB, NGO, and private sector coordination of ESP and supporting systems (including referral system instituted			

Sl. No.	Action Plan and tasks	Key collaborators	Progress upto September 1998
1.	Review the status of existing joint planning activities	ORP	• RSDP collaborating with ORP in the OR on local level planning, coordination and referral system
2.	Obtain TA for developing sustainability plan for the NGOs		• ORP is working on it. They will conduct an in-depth assessment of Depothoder
3.	Develop scope of work for sustainability plan TA for the exiting members of sustainability Teams		• Initial discussion is being made: activities will be started in the next annual workplan
1.	Develop sustainability and phaseout plans for the NGOs in high performing thanas.		• Performance review of the low and high performing thanas is in process
2.	Assessment of depotholders income earning status in order to sustain their interest to play their volunteer role		• Initial assessment completed. Strategic plan for DH in process.
3.	Review approve and implement phaseout plans for NGOs and BRAC in 73 high performing thanas		• Phaseout plan will be developed based on the findings of the performance review of the high and low performing thanas
4.	Strengthened revenue diversification efforts by NGOs in high performing thanas.		• The issue is being discussed in the orientation meeting of the NGO leaders and managers.
IR: 5 Sustainability of Family Health Services and Support System Improved			
SR 5.1 Utilization of productsplies increased			
1.	Assess customer's knowledge and utilization pattern about static SDPs	ORP	• The baseline survey will provide an estimate picture about the current utilization pattern of RSDP static and satellite clinics. Data collection of first phase began in November 16. 1998 and will continue about four months. Results will be available in mid April 99.
2.	Develop guideline for setting up SDPs in appropriate locations		• Guide line for clinic set-up has already been developed and disseminated
3.	Develop and implement phase out plans from doorstep to static SDPs by NGOs	ORP	• The program has focused to SDPs from the beginning stage.
4.	Design network for sustenance of clients to static SDPs		• Community mobilization effects have been strengthen focusing static SDPs.
5.	Develop plan to introduce static SDPs and available products and services by utilizing Depoholders		• Plan will be developed after completing on going training program of the DHs.
6.	Orient depoholders on marketing starategies and use of IEC materials for promotion of statics SDPs		• DHs training curriculum finalized. Adaptable elements from Jiggasha model is being incorporated
7.	Orient local leaders/organized bodies regarding availability of services of static SDPs		• 40,051 community meeting were held and 604,454 community people attended in these meeting.
SR 5.2 Utilization of private sector (commercial) services and supplies increased			
8.	Contribute to the development of a distribution channel with a SMC to supply SMC product at all tiers of SDPs at thana level and depotholders	SMC	• The system is in place partially; the NGOs are collecting supplies of SMC product at the local level
9.	Contribute to the assessment of customer's knowledge and use of SMC products	SMC	• A survey was conducted by FPLM on the distribution of SMC products
10.	Develop and implement plan on informing customers on use of SMC products		• Initial discussion with SMC on the design of RSDP NGOs collaboration with SMC completed
SR 5.3 NGO total operating costs contained			
11.	Develop cost control mechanism to rationalize NGO activities		• Quarterly and monthly fund utilization tracking system developed
12.	Organize orientation with selected NGO and BRAC Manager to increase sensitization to issues relating to costs, understanding program costs etc.		• Some discussion has already made in the NGO Managers orientation meeting
SR 5.4 NIPHP products and services priced in accordance with target population's ability and willingness to pay			

Sl. No.	Action Plan and tasks	Key collaborators	Progress upto September 1998
13.	Collaborate in a rural study on the willingness and ability to pay for various ESP mixes and household expenditure pattern on health and FP in rural Bangladesh	ORP	• To initiate these studies, RSDP is now conducting a situation analysis on the RSDP contraceptive pricing structure at static clinic, satellite clinic and Depot-holder level.
14.	Based on the rural studies contribute to the development of a 'safety net' for those who are unable to pay (market segmentation to protect low income client and attract and broad range of income group)	ORP	
15.	Contribute to the development of cost based affordable pricing plans for ESPs	ORP	
16.	Conduct rapid assessment of the implementation status of pricing for services		• To be undertaken in the next annual workplan
SR 5.5 NGO revenues increased in accordance with target population's ability and willingness to pay			
17.	Review the existing income generation activities and project the revenues		• The activities have been accomplished during the project renewal process
18.	Develop utilization plan and management of locally generated funds from sales of ESP		• To be undertaken in the next annual workplan
19.	Contribute to the development of a standardized revolving fund system for RSDP	RPM	• RSDP an active member of the RDF Management group • BRAC case study on RDF completed by MSH • Conducted surveys in 5 RSDP NGOs on RDF • RDF in place by 18 NGOs with NGO's own funds.
20.	Develop standards and manual on revolving fund system		• Drug list for the RDF drafted and finalized by RSDP • RSDP contributed to the development of MTP guidelines • RSDP specific RDF guideline developed
21.	Develop training curriculum and implement training on revolving funds		• Orientation on NGO managers on RDF has been completed
22.	Establish revolving funds in NGOs and BRAC areas		• The NGOs have established RDF with their own funds.
SR 5.6 : Institutional capability of BCCP strengthened			
1.	Strategic plan for BCCP's Sustainability developed		• Consultancy for BCCP sustainability plan is in progress
2.	Steps initiated for fine tuning BCCP's financial and management systems		• Yet to be done
5.7: Strengthen BRAC's technical capacity and introduce RSDP financial management system			
3.	Audited and certified overhead determined for BRAC		• Yet to be done
4.	BRAC service providers trained on clinical contraceptives in place in 16 clinics		• 16 BRAC health center established, staffed with physicians, FWVs & lab technicians
SR 5.8 Policy, advocacy, program development and management capability for family health services at national and thana level strengthened			
5.	Contribute to and collaborate in the launching of NIPHP /RSDP at the national and below levels	GOB	• 4 NIPHP dissemination workshop arranged and completed
6.	Contribute to the national steering committee and its working groups	GOB	• Member Secretary of the critical undeserved Working Group • Distributed 25,000 NWC certificates to NGOs
7.	Activities local FP-MCH Committees and initiate joint action plan at thana and union		• Joint action planning process already started in 16 Thanas.
8.	Arrange and coordinate training program for enhancing technical and management skills of thana level program managers/ technical service providers		• 16 Thanas level managers have already received management training. • ORP will document the implementation of the action planning process in 6 Thanas
9.	Support training of thana level NGO/GOB staff on performance improvement	GOB	• RSDP arranged and coordinated training program for enhancing technical and management skills of Thana level program managers/ technical service providers for 64 GOB and NGO participants form 16 thanas

Appendix - F

গনপ্রজাতন্ত্রী বাংলাদেশ সরকার
পরিবার পরিকল্পনা অধিদপ্তর
আজিমপুর, ঢাকা।

স্মারক নং :পপঅ/পরি/৫২২/এনজিও-২৫/৯৭/৫৬২ তারিখ : ৯-১০-৯৭

অফিস আদেশ

বিষয় : National Integrated Population and Health Program (NIPHP) এর আওতায় বেসরকারী সংস্থা সমূহের মধ্যে এলাকা বন্টন ও থানা পরিবার পরিকল্পনা গুদাম থেকে জন্মনিরোধক ও এম.এস.আর দ্রব্যাদি সরবরাহ প্রসঙ্গে।

মার্কিন যুক্তরাষ্ট্রের সঙ্গে বাংলাদেশ সরকারের ৭ (সাত) বছর মেয়াদী সম্পাদিত দ্বি-পাক্ষিক চুক্তি অনুসারে NIPHP এর আওতায় বেসরকারী সংস্থা সমূহকে থানা পরিবার পরিকল্পনা ষ্টোর থেকে জন্মনিরোধক ও এম.এস.আর দ্রব্যাদি সরবরাহের সিদ্ধান্ত গৃহীত হয়েছে। NIPHP এর আওতাভূক্ত বেসরকারী সংস্থার তালিকা এতদসংগে সংযুক্ত করা হল।

অতএব, NIPHP এর আওতায় যে সকল বেসরকারী সংস্থা পূর্ব্ব থেকে পরিবার পরিকল্পনা অধিদপ্তরের সাথে অধিভূক্ত এবং তাদের জন্য এলাকা নির্ধারিত রয়েছে সে সকল সংস্থাকে এতদসঙ্গে সংযুক্ত নীতিমালা অনুযায়ী জন্মনিরোধক ও এম.এস.আর দ্রব্যাদি সরবরাহ দেয়ার জন্য নির্দেশ প্রদান করা হল। সংযুক্ত তালিকায় উল্লেখিত যে সকল বেসরকারী সংস্থার অধিভূক্তি নাই তাদেরকে আগামী তিন মাসের মধ্যে সরকারী বিধি মোতাবেক অধিভূক্ত হতে হবে। তবে এই অর্ন্তবর্তীকালীন সময়ের জন্য তাদেরকে এর সঙ্গে সংযুক্ত নীতিমালা অনুযায়ী জন্মনিরোধক দ্রব্যাদি ও এম.এস.আর সরবরাহ দেয়ার নির্দেশ প্রদান করা হল। নতুন ক্লিনিক স্থাপনের ক্ষেত্রে সরকারের প্রচলিত বিধি মোতাবেক ক্লিনিক এর অনুমোদন নিতে হবে।

NIPHP ভুক্ত বেসরকারী সংস্থা সমূহের মধ্যে এলাকা বন্টন/সমন্বয় পূর্ব্বক আগামী দুই মাসের মধ্যে অত্র অধিদপ্তরকে অবহিত করার জন্য বলা হল।

সংযুক্তি : বর্ণনা মোতাবেক।

০৯/১০/৯৭
(মোঃ সিরাজুল ইসলাম)
মহাপরিচালক

স্মারক নং :পপঅ/পরি/৫২২/এনজিও-২৫/৯৭/৫৬২/১(১০৮২) তারিখ : ৯-১০-৯৭

অবগতি ও প্রয়োজনীয় ব্যবস্থা গ্রহনের জন্য অনুলিপি প্রেরিত হল।

১। পরিচালক (সকল), ... অত্র অধিদপ্তর।

২। বিভাগীয় পরিচালক, ... বিভাগ।

৩। অতিরিক্ত পরিচালক, কেন্দ্রীয় পণ্যাগার, মহাখালী, ঢাকা।

71

গণপ্রজাতন্ত্রী বাংলাদেশ সরকার
স্বাস্থ্য অধিদপ্তর
মহাখালী,ঢাকা - ১২১২

স্মারক নং স্বাঃ অধি / প্রা:স্বা:প:/ ইউ এস এইড /৯৭/ ২২০৩১ তারিখঃ- 2/12/

প্রতি,

ডাঃ মোঃ আলাউদ্দীন
কান্ট্রি রিপ্রেজেনটেটিভ
পাথফাইন্ডার ইন্টারন্যাশনাল
বাড়ী নং-১৫
রোড নং-১৩/এ
ধানমন্ডি, ঢাকা।

15 DEC 1

বিষয় : National Integrated Population and Health Program (NIPHP) এর আওতায় বেসরকারী সংস্থাসমূহকে তাঁদের কার্যক্রম বাস্তবায়নে সহযোগিতা প্রদান প্রসঙ্গে।

ইতোপূর্বে মন্ত্রণালয়ে অনুষ্ঠিত সভায় জানান হয়েছিল যে স্বাস্থ্য বিভাগের কাছে ও আর এস ব্যতীত অন্য কোন উপকরনই বছর ব্যাপী যথেষ্ট পরিমানে মজুদ থাকে না, তবে ভাইটামিন 'এ' এর পর্যাপ্ততা দু একটি ব্যতিক্রম ব্যতীত মোটামুটি নিশ্চিত করা হয়। ই পি আই টিকার অপ্রতুলতার ঘটনা ও মাঝে মাঝে দাতা সংস্থার আংশীক অর্থায়নে বিলম্বের কারনে ঘটে থাকে। তবুও ভাইটামিন 'এ' ও টিকা সরবরাহ করার নিশ্চয়তা মোটামুটি দেয়া যেতে পারে। অন্যান্য উপকরণ স্বাস্থ্য বিভাগেই অপ্রতুল তবে ম্যালেরিয়া, কালাজ্বর, নিমোনিয়া, যক্ষ্মা ও কুষ্ঠ রোগের ঔষধ হয়তো প্রকল্প কর্তৃপক্ষের মাধ্যমে দেয়া সম্ভব হবে (যক্ষ্মা ও কুষ্ঠ রোগের ঔষধ কেবল তখনই দেয়া যাবে যখন DOTS পদ্ধতি নিশ্চিত করা যাবে)। এসব ক্ষেত্রে স্বাস্থ্য অধিদপ্তরের নীতিসমূহ সংশ্লিষ্ট পত্রে বিবৃত হল। একমত হলে সে অনুযায়ী স্বাস্থ্য অধিদপ্তর প্রয়োজনীয় ব্যবস্থা গ্রহণ করবে।

(অধ্যাপক এ কে এম নূরুল আনোয়ার)
মহাপরিচালক

স্মারক নং স্বাঃ অধি / প্রা:স্বা:প:/ইউ এস এইড /৯৭/ তারিখঃ-

অনুলিপি - সদয় অবগতি ও প্রয়োজনীয় ব্যবস্থা গ্রহনের জন্য প্রেরীত হল :

১. সচিব, স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়, (দৃঃ আঃ যুগ্ম সচিব, হাসপাতাল ও জনস্বাস্থ্য)।

(ডাঃ এ, এম, জাকির হোসেন)
পরিচালক (প্রাঃ স্বাঃ পঃ ও রোগ নিয়ন্ত্রন)
স্বাস্থ্য অধিদপ্তর, মহাখালী, ঢাকা

গ্রামীন পর্যায়ে স্বাস্থ্য সেবা সংশ্লিষ্ট বেসরকারী প্রতিষ্ঠানকে সহায়তা প্রদানের জন্য স্বাস্থ্য অধিদপ্তরস্থ নীতিমালা

১. যে সব ক্ষেত্রে সহযোগীতা দেয়া হবে যেমন ও আর এস, ভাইটামিন-এ, অন্যান্য ঔষধ প্রশিক্ষন, আই ই সি প্রব্যাপি সে সব ক্ষেত্রে অধিদপ্তরের সংশ্লিষ্ট দপ্তরের যথেষ্ট দক্ষতা ও সামর্থ থাকতে হবে;

২. যে সব উপকরণ বেসরকারী প্রতিষ্ঠানকে দেয়া হবে সংশ্লিষ্ট স্বাস্থ্য বিভাগীয় দপ্তরে সে সব উপকরণের মান ও পরিমান সারা বছর সন্তোষজনক পর্যায়ে থাকতে হবে;

৩. প্রদত্ত উপকরণ থানা স্বাস্থ্য কমপ্লেক্স এর মাধ্যমে বিতরন করতে হবে;

৪. থানা স্বাস্থ্য কমপ্লেক্স এর প্রধান কর্মকর্তা বা তাঁর কোন প্রতিনিধি প্রদত্ত উপকরণের সর্বোত্তম ও যথাযথ ব্যবহার নিশ্চিত করবেন এবং সে লক্ষ্যে উপকরনের ব্যবহারের পর্যানুসরন করবেন ;

৫. সহায়তা গ্রহনকারী সংস্থা সহায়তা প্রদানকারী সরকারী সংস্থার কাছে স্থানীয়ভাবে মাসিক ভিত্তিতে সহায়তাপ্রাপ্ত বিষয়ে প্রতিবেদন প্রদান করবেন;

৬. ক) ভাইটামিন 'এ' র ক্ষেত্রে দ্বৈততা পরিহারের লক্ষ্যে মাঠ পর্যায়ে শুধু স্বাস্থ্য/পরিবার পরিকল্পনা বিভাগীয় কর্মীগনই তা বিতরন করবেন। খ) বেসরকারী সংস্থার কর্মীগন ক্ষেত্র বিশেষে অধিদপ্তরের পূর্বানুমতি গ্রহন করে শুধু দুগ্ধদানকারী মা'দের (হোম ভিজিটের মাধ্যমে বা স্থায়ী প্রতিষ্ঠানে) বা রাতকানা রোগীদের (স্থায়ী প্রতিষ্ঠানে) ক্ষেত্রে ব্যবহার করবেন;

৭. ও আর এস এর ক্ষেত্রে ও শুধু স্থায়ী প্রতিষ্ঠানে বিতরনের জন্য বেসরকারী সংস্থাকে ও আর এস দেয়া যেতে পারে। অথবা শুধু শহর এলাকায় হোম ভিজিটকালে ও আর এস বিতরনের লক্ষ্যে বেসরকারী প্রতিষ্ঠানকে ও আর এস দেয়া যেতে পারে;

৮. ই পি আই এর টিকা বেসরকারী প্রতিষ্ঠানের কাছে হস্তান্তর করা যাবে না। তবে স্বাস্থ্য /পরিবার পরিকল্পনা কর্মীগন (প্রশিক্ষিত হলে) বেসরকারী প্রতিষ্ঠানে গিয়ে টিকা প্রদান করবেন;

৯. অন্যান্য ঔষধ যেমন, ম্যালেরিয়া, যক্ষা, কুষ্ঠ, নিমোনিয়া ইত্যাদি রোগের ঔষধ শুধু ঐ সমস্ত ক্ষেত্রে বেসরকারী প্রতিষ্ঠানকে দেয়া যাবে যেখানে এ সমস্ত রোগের চিহ্নিত করণ করার ও প্রয়োগের সঠিক সুযোগ ও সামর্থ্য বেসরকারী প্রতিষ্ঠানের রয়েছে।

১০. প্রদত্ত ঔষধ বেসরকারী প্রতিষ্ঠান স্বাস্থ্য অধিদপ্তরের পূর্বানুমতি ছাড়া বিক্রয় করবে না।

১১. সেবা কার্যে যাতে দ্বৈততা না হয় সে জন্য স্থানীয় বিভাগীয় কর্তৃপক্ষের সংগে আলোচনার ভিত্তিতে বেসরকারী প্রতিষ্ঠানের ও বিভাগীয় কর্মীদের মধ্যে দায়িত্ব বন্টন করতে হবে;

১২. যে বেসরকারী প্রতিষ্ঠানকে সহায়তা প্রদান করা হবে সেটির কমপক্ষে ৩ বছর সংশ্লিষ্ট ক্ষেত্রে সেবামূলক কাজের অভিজ্ঞতা ও যোগ্যতা থাকতে হবে ও সন্তোষজনক (সেবা গ্রহীতার সংখ্যার আলোকে) সেবা প্রদানের ইতিহাস থাকতে হবে। অন্যথায় স্বাস্থ্য অধিদপ্তরের সংশ্লিষ্ট শাখা থেকে অনুমোদন নিতে হবে।

গণপ্রজাতন্ত্রী বাংলাদেশ সরকার

পরিবার পরিকল্পনা অধিদপ্তর

আজিমপুর, ঢাকা

স্মারক নং- পপ/পরি/৫২২/এসজিও-২৫/৯৭/৮৭০ তারিখ ঃ ০৪/০৯/১৪০৪ / ১৮/১২/১৯৯৭

অফিস আদেশ

গত ১৫ই ডিসেম্বর, ১৯৯৭ তারিখে অত্র অধিদপ্তরের মহাপরিচালক মহোদয়ের সঙ্গে USAID, Rural Service Delivery Partnership (RSDP) and Urban Family Health Partnership (UFHP) এর প্রতিনিধিবৃন্দের এক আলোচনা সভা অনুষ্ঠিত হয়। উক্ত সভায় RSDP এবং UFHP এর আওতায় NGOদের ক্লিনিক অনুমোদন এবং ক্লিনিক্যাল সার্ভিসের জন্য প্রয়োজনীয় সামগ্রী সরবরাহ সংক্রান্ত সমস্যা সম্পর্কে আলোচনা হয়।

সমস্যা বিশ্লেষণের পর সিদ্ধান্ত গৃহীত হয় যে NGOদের কাছ থেকে ক্লিনিক অনুমোদনের দরখাস্ত পাওয়ার পর District Technical Committee যতশীঘ্র সম্ভব ক্লিনিক পরিদর্শণ করে সুপারিশের প্রক্রিয়া সম্পন্ন করবেন। District Technical Committee এর সুপারিশের ভিত্তিতে থানা পরিবার পরিকল্পনা কর্মকর্তা অর্ন্তবর্তীকালীন তিন মাস সময়ের জন্য থানা ষ্টোর থেকে সংশ্লিষ্ট NGOকে Contraceptive and Clinical উপকরণ সরবরাহের ব্যবস্থা নিবেন। একই সঙ্গে সংশ্লিষ্ট NGOর Clinic অনুমোদন সংক্রান্ত প্রয়োজনীয় কাগজপত্র অত্র অধিদপ্তরে প্রেরণ করবেন। অধিদপ্তর তিনমাসের মধ্যেই Clinic-এর অনুমোদন প্রক্রিয়া সম্পন্ন করবে।

এ সিদ্ধান্ত অবিলম্বে কার্যকর করার জন্য সংশ্লিষ্ট সকলকে অনুরোধ করা হলো।

মহাপরিচালকের আদেশক্রমে

(ডাঃ এ এস এম কামাল)

পরিচালক (পরিকল্পনা)

স্মারক নং- পপ/পরি/৫২২/এসজিও-২৫/৯৭/৮৭১/২(১৪৫) তারিখ ঃ ০৪/০৯/১৪০৪ / ১৮/১২/১৯৯৭

অবগতি ও প্রয়োজনীয় ব্যবস্থা গ্রহণের জন্য অনুলিপি প্রেরিত হল ।

১। পরিচালক (সকল), ... অত্র অধিদপ্তর

২। বিভাগীয় পরিচালক, ... বিভাগ

৩। অতিরিক্ত পরিচালক, কেন্দ্রীয় গুদামাগার, মহাখালী, ঢাকা

৪। সিভিল সার্জন, ...

৫। উপ-পরিচালক, পরিবার পরিকল্পনা, ... (সকল)

৬। প্রকল্প পরিচালক, (পরিবার পরিকল্পনা), ক্লিনিক্যাল সার্ভিস প্রকল্প

৭। সহকারী পরিচালক (সিসি), জেলা পরিবার পরিকল্পনা কার্যালয়, ... (সকল)

৮। আঞ্চলিক সরবরাহ কর্মকর্তা, ...

৯। থানা পরিবার পরিকল্পনা কর্মকর্তা, থানা ....., জেলা .....

১০। মেডিক্যাল অফিসার (এম সিএইচ-এফপি), থানা পরিবার পরিকল্পনা কার্যালয়, থানা,.....,
জেলা .....

১১। জনাব বেলায়েত হোসেন, ইউ এস এ আই ডি, বারিধারা, ঢাকা

১২। ডঃ মোহাম্মদ আলাউদ্দিন, দেশীয় প্রতিনিধি, পাথফাইন্ডার ইন্টারন্যাশনাল,
বাড়ী ১৫, সড়ক ১৩/এ, ধানমন্ডি, ঢাকা

১৩। জনাব পিটার কনেল, ইউ এফ এইচ পি, লেভেল ২, 'প্রগ্রেজ টাওয়ার', রোড ২৩, গুলশান, ঢাকা

১৪। বেসরকারী সংস্থা, ...

(ডাঃ এ এস এম কামাল)
পরিচালক (পরিকল্পনা)

স্মারক নং- পপ/পরি/৫২২/এসজিও-২৫/৯৭/৬৭১/১ (১১৫৬)/2 তারিখ : ০৪/০৯/১৪০৪ / ১৮/১২/১৯৯৭

সদয় অবগতির জন্য অনুলিপি প্রেরিত হল ।

১। সচিব মহোদয়ের একান্ত সচিব, স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়, ঢাকা

২। মহাপরিচালক মহোদয়ের ব্যক্তিগত সহকারী, অত্র অধিদপ্তর

(ডাঃ এ এস এম কামাল)
পরিচালক (পরিকল্পনা)

Gov./DG-FP
12-13

গণপ্রজাতন্ত্রী বাংলাদেশ সরকার
স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়
বাংলাদেশ সচিবালয়, ঢাকা

স্মারক নং- স্বঃপঃকঃমঃ/পক/পরি/সপ্র-৩/৯/৯৭/৮৪ তারিখঃ ১৬/৪/৯৮

পরিপত্র

বিষয়ঃ জাতীয় সমন্বিত জনসংখ্যা ও স্বাস্থ্য কর্মসূচীর (NIPHP) আওতাধীন অসরকারী প্রতিষ্ঠান (NGO) সমূহের কর্মকান্ডের মাসিক অগ্রগতির প্রতিবেদন প্রসঙ্গে।

অত্র মন্ত্রণালয়ের স্মারক নং স্বাঃপঃকঃমঃ/এসি-৩/০৯/৩১০/ তারিখ ৩০/১২/৯৭ ইং মোতাবেক জাতীয় সমন্বিত জনসংখ্যা ও স্বাস্থ্য কর্মসূচীর (NIPHP) কর্মকাণ্ডের অগ্রগতির প্রতিবেদন পদ্ধতি পর্যালোচনা করার জন্য স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয় একটি কমিটি গঠন করেছে। উক্ত কমিটির সুপারিশের আলোকে স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয় এই মর্মে সিদ্ধান্ত গ্রহন করেছে যেঃ

১. জাতীয় সমন্বিত জনসংখ্যা ও স্বাস্থ্য কর্মসূচীর (NIPHP) আওতাধীন অসরকারী প্রতিষ্ঠান সমূহের জন্য তথ্য সংরক্ষণ ও মাসিক অগ্রগতির প্রতিবেদন ব্যবস্থার পরীক্ষামূলক বাস্তবায়ন (Field-test) সবেমাত্র সমাপ্ত হয়েছে। এই পরীক্ষামূলক বাস্তবায়ন কর্মসূচীর ফলাফল উপরোক্ত কমিটির নিকট বিবেচনার জন্য পেশ করা হবে। এই পরীক্ষামূলক বাস্তবায়ন কর্মসূচীর অভিজ্ঞতার আলোকে অসরকারী প্রতিষ্ঠান সমূহের মাসিক অগ্রগতির প্রতিবেদন সম্পর্কে চূড়ান্ত সিদ্ধান্ত গ্রহন করা হবে।

২. অসরকারী প্রতিষ্ঠানসমূহের মাসিক অগ্রগতির প্রতিবেদন সংক্রান্ত চূড়ান্ত সিদ্ধান্ত সরকার কর্তৃক গৃহীত না হওয়া পর্যন্ত জাতীয় সমন্বিত জনসংখ্যা ও স্বাস্থ্য কর্মসূচীর (NIPHP) আওতাধীন সকল অসরকারী প্রতিষ্ঠানসমূহকে মাসিক অগ্রগতির প্রতিবেদন বিদ্যমান নথিসমূহ হতে সংকলন করে পরিবার পরিকল্পনা অধিদপ্তর কর্তৃক প্রণীত এম আই এস ফরম-৩ (MIS Form -3) এর মাধ্যমে পেশ করতে হবে।

৩. এ সকল প্রতিষ্ঠানকে মাসিক অগ্রগতির প্রতিবেদন (এম আই এস ফরম-৩) সংশ্লিষ্ট থানা স্বাস্থ্য ও পরিবার পরিকল্পনা কর্মকর্তা (TH&FPO) এবং থানা পরিবার পরিকল্পনা কর্মকর্তা (TFPO) উভয়ের কার্যালয়ে প্রেরণ করতে হবে।

১৬/৪/৯৮
(মো: আবদুল্লাহ্)
সহকারী প্রধান
স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়

Appendix - G

List of IEC materials those have been sent to the NGOs from RSDP till to date

Sl No.	*Materials*	*Use locations*	*Nos./no. of copies sent*	*Remarks*
1.	Clinic Sign Board	Outside the static clinic building	_	Sent prototype
2.	Tin Sign (publicizing the service prices)	Outside and inside the static clinic building	_	Sent prototype
3.	Satellite Clinic Banner	In the satellite clinic sessions	342	Supplied from RSDP in the printed form. One for each satellite clinic team
4.	Leaflets promoting NGO clinics	In the community	5,000 per thana	Supplied from RSDP in the printed form.
5.	Bangla calendar	In the community	54,500 pcs. (dis. list attached	Distributed and sold through the DHs at Tk. 10/- per calendar
6.	A flyer for announcement through miking on the eve of NID	In the community	_	Sent prototype
7.	Green Umbrella Tin sign	Static clinic building	99	RSDP supplied at the TA Units with an estimation of one GU logo for each of the static clinics that did not receive yet.
8.	Green Umbrella poster	Public places	5,005	Supplied from RSDP in printed form
9.	Green Umbrella sticker	Service centers	5,005	Supplied from RSDP in printed form
10.	Communication Guideline for the CMs	Community Mobilizers	610	Supplied from RSDP for use of the CM in printed form
11.	Folder containing role and responsibilities of the Depot Holder	Community Mobilizers	610	Supplied from RSDP for use of the CM in printed form
12.	Poster on Quality	One for FWVs room and other for customers' waiting room	362	Supplied from the RSDP in printed form
13.	Desk Top Materials	One at static clinic and other for satellite clinic teams	545	Supplied from RSDP in printed form
14.	Loose Leaf Flip Chart	One at static clinic and other for satellite clinic teams	545	Supplied from RSDP in printed form
15.	Extracted page of Sangjog	Community Mobilizer and Depot Holder	10700	Supplied from RSDP in printed form
16.	TV and Radio spots	Rural community	-	Broadcast through BTV and Bangladesh Betar

It may be mentioned here that an extra copy for NGO office use was also sent for all the printed materials as mentioned above.

Besides the materials as mentioned above other ESP related IEC materials developed by other organizations were sent to the RSDP supported NGOs per the decision of RSDP. The materials are mentioned below:

Materials	Quty. sent to the NGOs
Poster on untimely death of Mother and Children	200
Flip Chart on Health Education	200
Poster on TT for 15-49 age of women	200
Poster on 'Build A Polio Free Bangladesh'	200
Poster on EPI	200
Poster on administering five doses	200
Pamphlet on antenatal advice	400
Sticker on Moni logo, Polio, TT and Meseales.	200

The aforementioned materials were sent from Pathfider International at the initial stage to the RSDP thanas per need basis of the respective NGOs.

IEC materials were also sent in observation of some special days like World Health Day and World Population Day. These include posters, pamphlets, sticker, leaflets, badge etc., which were developed by the Directorate of Health Services and Directorate of Family Planning. Message/topic of the IEC materials are:

Material	Occasion	Message
Poster	World Health Day	Pregnancy is special, let us keep it safe
Pamphlet	Same as above	Same as above (with the theme of safe motherhood)
Sticker	Same as above	Same as above
Poster	World Pop. Day	!987-1999, the world population will become 600 billion within merely 12 years time. Come forward to prevent population boom
Badge	Same as above	Same as above