

SURAJE



AT &P.O: KARGHAR

Dístt.: ROHTAS,BIHAR

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Highlights of Programs

A. Child Rights, Child Care and Protection:

- 1. **Child Care and Protection**: Being an active and pioneer member of Bihar Forum for CRECHE and Child Care Services we act regularly and use to rise the voice of Care and Protection at any Platform. If we are at any place there will be the voice of awareness generation, sensitization and JJ Act.
- 2. **Child Rights**: Our Strategy is to input issues of Child Rights in our any Program to make our concept "Child Centered development" be fruitful. So, this way, we do Advocacy at Local level PRIs, Administrations Educational and Health Institutions.
- 3. **Work Oriented Education to Rural Girls**: Facing the Challenge of Universalization and equalization with quality this is our first activity. Since inception of the organization it is running continuously. We say with proud that no Private schooling can challenge Public sector schooling and there is no Private schooling whom can be named as the best in the country. It needs to introduce Technical education . With our this concept we run this school for Girls as a movement
 - i. **Secondary School Education:** This year we admitted students only in 9th Class and run 9th and 10th Class. Along with new admissions and total 264 girls were educated this year. No of Students Registered for secondary school examination 104 and appeared in Secondary School Examination .No of Students passed in Bihar Secondary School Examination -44.



Annual Function. 2016

- ii. **Vocational Training:** We imparted skill development training in following skills
 - a. Computer software.
 - b. Accountancy.
 - c. Applique Craft.
 - d. Bio cultivation.

B. General Health and Infectious Diseases:

1. Targeted Intervention Program:

Project Goal: Prevention and Control of HIV New infection among female sex workers .

Project Area: Rohtas and Aurangabad Districts

Area of active Intervention:

Under Rohtas District: Chenari, Shiosagar, Sasaram, Denair, Dinara, Bikramganj, Sanjhauli, Karghar, Karakat, and Nasariganj Blocks of Rohtas District

Under Aurangabad District: Aurangabad Town and Barun Block of Aurangabad district

Objectives:

- ❖ Increasing Awareness of STI/HIV/AIDS among Sex workers
- ❖ Promoting Safe Sex behavior practices among FSWs as well as their clients
- ❖ Reduction in STI/HIV/AIDS infections among FSWs
- * Enabling Environment

Details of Area Profile:

S. N.	Particulars	Area 1	Area 2	Area 3	Area 4	Remarks
1	No. of Hot spot	07	07	06	05	
2	No. of HRGs	312	312	314	256	
3	Typology	FSW	FSW	FSW	FSW	
4	No. of PE	05	05	05	05	
5	No. of condom outlets	03	04	04	06	
6	No. of sec. Stakeholders	07	09	05	08	
7	No. of ICTC	01	0	1	1	
8	No. of PP/NGO clinic	N/A	N/A	N/A	N/A	
9	No. of ART	0	0	0	0	

Activities:

Activities Under Behavior Change Communication	April-June, 15	July - Sept., 15	Oct-Dec., 15	JanMarch,16
No. of registered HRG	1235	1252	1256	1262
No of New Registrations	0	17	04	06
No drop out(commultative)	68	68	68	68
No. of Active HRG	1167	1184	1188	1194
Average no. of HRG covered ie Average One time contact	1016	1074	1188	1142
Average Regular Contact	1000	1047	1095	1130
No. of Hot spot meeting (HSM)	71	72	71	74
Attendance on HSM	1462	1365	1484	1496
DIC Attendance	1186	1063	946	1026
No whose Counseling made	1326	1042	908	1193
General and Administrative	:			
Weekly Staff Meetings	12	12	12	13
Monthly Staff Meetings	03	03	03	03
No Of meetings attended by PM	03	03	03	03
No of Meetings attended by PD	03	03	02	03

Referral & Linkages Centers

S.N.	Name of the service center	Contact person	Type of service	Remarks
1.	ICTC,Sasaram,Bikramgaj Aurangabad	Dr.Dharmdeo singh,Mrs Nutan Kumari and Rakesh Kr. Rai	HIV and VDRL Test	
2.	DMC Sasaram, Bikramganj & Aurangabad	Munna Kumar,Chaman Verma and Mukesh Kr.	TB Test	
3.	Gov.STD Clinic Sasaram and Aurangabad	Rajendra Prasad singh and Santosh Kr. singh	STI Treatment	
4.	ART Centre A.N.M Med.Collage Gaya	Mrs. Sushma Kumary		
5.	Gov. Hospital Sasaram &Aurangabad	OPD	General Treatment	
6.				
7				
8				

STI Management

Sl No	Activities	Ist Quarter	2 nd Qrt	3 rd Qrt	4 th Qrt
1.	Total Clinical Visit	1164	1035	966	1087
2.	Presumptive treatment	29	0	13	10
3.	% of Achievement	99.74	87.41	81.31	91.03
4.	STI Identified and treated	10	12	14	26
5.	STI Follow Up	10	12	13	18
6.	Cured Cases	10	12	13	18
7.	RMC	1125	1023	935	1051
8.	VDRL Testing	441	368	446	326
9.	VDRL Positive	2	0	2	0
10.	Follow up	2	0	2	0

HIV Testing Data

Sl No	Indicators	April'15 - Sept'15	Oct'15 to March'16	Remarks
1.	Total Active HRG	1184	1194	
2.	Total Referrals	1113	1414	
3.	Total Testing	435	1033	
4.	% of achievement	36.73	86.51	
5.	Detected HIV +ve	0	02	
6.	ART Linkages up to Last Yr	6	06	
7.	ART Linkages current Yr	0	01	
8.	Total ART Linkages	06	07	
9.	No of HRG on ART	01	01	

CONDOM PROMOTION:

	Sl No	Indicators	April-June	July-Sept	Oct-Dec	Jan-March	Remarks
Ī	1.	DGM	71	72	71	74	
Ī	2.	No of HRG Reported Condom	1000	1047	1095	1130	
		Demand Meetings					
	3.	Condom Demand	61080	56460	59370	60750	
	4.	Free Condom Distribution	48862	31128	19500	35155	
	5.	Social Marketing	8600	4900	5900	4600	

Enabling Environment:

S	l No	Activities	April-June	July-Sept	Oct-Dec	Jan-March	Remarks
1		AADHAR	-	-	-	-	
		Registration					
2		Applications under	0	0	0	01	
		Parivarish Scheme					

Others:

Sl No	Indicators	April-June	July-Sept	Oct-Dec	Jan-March	Remarks
1.	Advocacy	3	3	2	3	
	Activities					
2.	Crisis identified	3	2	3	2	
	and Managed		_			
3.						

Events:

Sl No	Name of the Events	Date	Place	Participations		Remarks
1.	Wall writing and	30.11.15	Bikramganj Dhangain	Type	No	
			<i>3. 3. 3.</i>	Mid Media	On 22 Spots	
2.	Video Show	30.11.15	Dhangain	BCC	115	
3.	Health Camp	01.12.15	Vishrampur	Camp	39	
4.	Rally	01.12.15	Sasaram	Rally		

2. **AXSHYA**: The meaning of AXSHYA is without 'KSHAY'. KSHAY is a Hindi word which is called Tuberculosis(T.B.) in English. General People do not know KSHAY, but they know TB.T.B has become a popular name. It looks very terrible in the mind of Civil society. Our goal is to nullify its terror and increase awareness to control its spread. So, our goal is to cut down the chain of transmission of infection through supportive action along with RNTCP.

Our strategy is to aware community, sensitize Social Influencers ,Media and Governance system along with service providers by Regular meetings,Advocacy,Trainings and Workshops,Regular identification and referrals of suspected patients to DMC,Provide information on symptoms and diagnosis, help in counseling of TB Patients and retrieval,Help in Sputum Collection and Transportation and to support TB Patients in social acceptance and reducing stigma.

Community Meeting Details

Sl.No		No.of Community meeting organized	Participants			Identified suspected patients	
	Month/Qtr.		Male	Female	Total		
1	April 15-june 15	08	60	112	172	27	
2	July 15-Sept.15	08	36	129	165	35	
3	Oct.15-Dec.15	03	17	45	62	15	
4	Jan.16-Mar.16	-	-	-	-	-	

Output from the Community Meetings

- Community aware about Tuberculosis
- Community knowledge on TB (diagnosis and treatment services) increased
- TB symptomatic identified linked with TB services
- Identified Axshya Mitra to link the TB symptomatic identified post-activity to TB services and also to act as patient friendly DOT provider
- Increased social support for TB patients (social welfare, treatment adherence etc.)
- TB prevention and care agenda discussed in Village Health Plans

Details of Affected Population (KAP) covered under community meetings

Sl no	KAP	
1	Slum	
2	SC	4265
3	Tribal (ST)	-
4	Prisons	-
5	Un-organized Labour (UL)	963
6	PLHIV	5
7	Contacts of TB patients	7
8	Occupational Lung Disease (OLD)	5
9	Hard to reach (HtR)	

Output from the activity of IORA

Sl .No.	Month/Qtr	No. of village	No. of HH	No. of suspected patients identified	No. of suspected patients Referred	No. of suspected patients Tested	(+)ve	Treatment
1	April 15- june15	3	750	29	25	3	1	1
2	July 15-Sept.15	3	750	40	32	2		
3	Oct.15-Dec.15	1	250	09	07	-		
4	Jan.16-Mar.16	-	25					

Details Outcomes of SC & T

Sl .No.	Month /Qtr	No. of Sputum Collected	No. of Sputum Transported	No. of Sputum Tested	Results		Treatment
		Conecieu			Negative	Possitive	
1	April 15-june 15	33	33	33	29	4	4
2	July 15-Sept.15	22	22	22	20	2	2
3	Oct.15-Dec.15	2	2	2	2	-	-
4	Jan.16-Mar.16						-

- C. Women's Empowerment: With the view of empowering women by participation in governance system, increasing their approach towards development system, providing broader platform to arise voice against their exploitation and abuse and active participation in financial inclusion it was started. Now it has become self relied and SURAJE is regular touch of the federation and supporting by Technical Support, guiding the right way of action, training, Workshop, Seminar, Advocacy etc. World Women's Day Celebration was organized by SURAJE.
- D. **Promoting Voluntarism**: Our concept is very clear to make easy and effective efforts for upliftment of the society needs to awake and strengthening Voluntary Action. It needs self activeness of the civil society for its development prosperity and peace. A coordination with Volunteers and different stakeholders ,service providers and Governance system only can establish a society of our vision. With this concept we promoted Village Service Volunteers –A team for voluntary actions. We are trying for its more spread and strength.
- E. **Micro Insurance:** This Program was started under Micro Finance activity and covers poor and marginalized family with the support of Life Insurance Corporation of India. We generate awareness among the people who are away from Insurance Program. 102 new marginalized and poor people were included in this activity this year . Year by Year the No is increasing and handling is voluntary.

Looking Ahead:

Organization still aspires to optimize its services and intellectual support to beneficiaries more vigorously. By the way, **SURAJE** dreams to maximize benefits of its stakeholders by resorting to following aspects:

- Academic residential accommodation for poor/destitute / Orphaned and needy Children
- Awareness generation on HIV/AIDS, STD & T.B and general Health and Hygiene .
- Promotion of Environment Protection & Eco-restoration.
- Development of Contacts both supporters and donors.
- Promotion of livelihood-centered natural resource management.
- Promotion of Volunteers and Cadres at grass roots level.
- Agro promotion with emphasis on organic farming focusing on youth farmers both at rural as well as urban base.

Fundings:

- 1. Ministry of Textiles GOI
- 2. Bihar State AIDS Control Society
- 3. Deptt. of Education ,Govt of Bihar
- 4. MAMATA Health Institute for Mother and Child(Global Fund)

Auditor:

D.Jha & Associates,

Kankarbag Colony Mor, Above Bombay Dyeing ,Patna

Publications:

- 1. The 'GRAMYA'
- 2. The 'KISALAY'







