

2021

ANNUAL REPORT

AN UPDATED INFORMATION OF PROGRAM IMPLEMENTATION



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VISION

Equality of Women in a Just Civil Society

MISSION

To empower the marginalized women and communities by improving quality of lives through available reproductive and primary health services as well as other basic social services that enable women to exercise their reproductive health and rights in the families and communities. It's interventions aim to achieve large-scale positive changes through an inclusive gender approach, community participation with institutional and sustainable technique.

VALUES

◆◆ **Integrity:**

We are a responsible and accountable organization, committed to the highest standards of services.

◆◆ **Inclusivity:**

We work collaboratively throughout the organization, govt. and with our partners.

◆◆ **Effectiveness:**

We ensure the highest level of utilization of time, labor and resources.



It is a great honor to write this message on the Executive Committee's behalf and indeed, to publish this annual report for the period of January to December 2021. This report summarizes the activities of the BWHC carried out during the mentioned period.

The year 2021 was a very remarkable year for BWHC. Firstly: the global pandemic COVID – 19 still existed and as of the other countries of the world, Bangladesh also passed a large amount of time under 'Lockdown' which hampered the normal lives of the mass people; Secondly: as a health-based organization, we were able to keep continue our services for the beneficiaries; BWCH never 'shut-down' it's operations i.e. providing SRHR services during this pandemic situation.; Thirdly: the Development Partners & donor communities kept trust on BWHC's vision & mission and BWHC was able to establish few new partnerships with a few development partners; Fourthly: under a joint venture, BWHC was able to restart the HIV prevention activities in the brothels in three districts; Last but not the least, BWHC took initiatives to stand beside the most marginalized community i.e. the Tea Garden Workers and older population through providing 'Food supports & COVID – 19 Kits' in it's working areas.

I must acknowledge the role and contribution of the stakeholders from a different level, in particular, the community people and the development partners & donor communities. I am thankful to all the members of the general body and staff for carrying out their responsibilities even during this COVID – 19 Pandemic to bring dynamism to the organization and fulfill the community requirement. I would like to express my gratitude to all of its development partners and the government of Bangladesh involved in the results highlighted within the reports.

I wish every success of BWHC in the coming years!

Dhaka
March 2022

Nasimun Ara Huq
Chairperson

EXECUTIVE DIRECTOR'S STATEMENT



I have the honor in writing this note for Annual Report 2021 of BWHC. This year, the BWHC is celebrating its 41 year's birth anniversaries. During this long-years journey in the area of development field particularly, in the health sector, it has already garnered countrywide recognition – both from the beneficiary and development partner's side as well. Still we feel that as a 'Change Agent', we have a long way to go. I believe that it is the time to learn from the past and resume our journey with a renewed spirit.

Scaling up the health program around the country through especially, the 'Reproductive & Sexual Health Program (RHSP)', the 'Enhancing the access to quality abortion for tea workers, ethnic minority and hard-to-reach population of North-eastern Region (Sylhet division) of Bangladesh', the 'STI and HIV Prevention Service Package for the Brothel Based Sex Workers and their Client Service Package-1 (SP – 1)', the 'Inclusion and Supporting Older Persons in Fighting Covid-19' the 'Medical and Socio-educational Caravans – case of the Coronavirus' and the 'Distribution of Personal Protective Equipment (PPE) among Health Workers to Prevent COVID – 19 in Bangladesh' remained a particular highlight of our operations in 2021. Its approaches contributed to improve the health condition of poor and marginalized people particularly, women, adolescents and children and to decrease maternal/infant's mortality and malnutrition and also to fight against GBV and COVID – 19 as well. We served thousands of mothers and children, women and adolescents and older persons and their families to recover and restore in their unwavering lives which directly created positive impact for accomplishing the SDGs.

Embodied with a vision: Equality of Women in a Just Civil Society, we implemented several programs and projects all over the country particularly, in Dhaka, Narayangonj, Narsingdi, Tangail, Sylhet, Narail, Gaibandha, Sunamgonj, Moulvibazar, Hobigonj Jamalpur, Khulna districts and surrounded rural areas in 2021 to address the issues of Reproductive and Sexual Health Service, ANC, PNC, Immunization, Primary Health Care, Quality MR, PAC Care, VCT and STI/RTI, Family Planning Services and Community Based Prevention and Health Care Promotion for positive changes to health seeking behavior, engaging youths for prevention of GBV. The BWHC worked with families, communities and governments to create an enabling environment that supported and promoted the rights of adolescents to act on and advocate for their SRHR issues.

Addressing its core principle, BWHC was dedicated for protecting and promoting health rights of the poor/ marginalized women through empowerment and mobilizing communities to raise their voice in making the service providers aware and accountable.

141,236 women, children and adolescents received services on sexual and reproductive health (SRHR) where 5,234 pregnant women and lactating mothers received ANC and PNC in 2021. 2,453 accessed the safe MR/M and post services and 11,933 children were covered under immunization programs and 42,284 received others services from BWHC centers. A number of 83,347 counselling sessions were conducted and among them 944 were referred to other health centers for better management. 665,992 several family planning methods were provided among the clients. A number of 37,886 joined several BCC sessions on SRHR, safe motherhood, consequences of early/child marriage, MHM and other related sexual and reproductive health rights issues.

BWHC, this year, already focused on marginalized groups particularly, the women & children, young women & adolescents of Tea garden, ethnic minorities and hard-to-reach population and will address new challenges for Bangladesh in the coming days especially, on SRHR issue. With an appropriate approach to work collaboratively with other stakeholders to address the issue, BWHC hopes that 2022 will mark another milestone of its innovations dedicated to a comprehensive and enabling environment for promoting the SRHR services and rights of the adolescents and the youths on SRHR issues.

Dhaka
March 2022


Sharif Mostafa Helal
Executive Director



AAS: Ashar Alo Society	MAB: Mukto Akash Bangladesh
ADAB: Association for Development Agencies in Bangladesh	MDG: Millennium Development Goal
AGM: Annual General Meeting	MHMP: Menstrual Hygiene Management Platform
AIDS: acquired immune deficiency syndrome	MMCH: Mymensingh Medical College Hospital
ANC: Anti-natal Care	MR: Menstrual Regulation
ARC-B: Ageing Resource Centre -Bangladesh	MRM: Menstrual Regulations with Medicine
AVAS: Association of Voluntary Actions for Society	MSB: Marie Stopes Bangladesh
BBF: Bangladesh Breast Feeding Foundation	NEARS: Networking for Ensuring Adolescents Rights & Services
BCC: Behavior Change Communication	NGCAF: National Girl Child Advocacy Forum
BCCM: Bangladesh Country Coordinating Mechanism	PAC: Post Abortion Care
BLAST: Bangladesh Legal Aid and Services Trust	PHM: People's Health Movement
BMCH: Barisal Medical College Hospital	PLA: Participatory Learning and Action
BNSK: Bangladeshi Nari Sangbadik Kendra	PNC: Post-natal Care
BNWLA: Bangladesh National Women Lawyer's Association.	PRA: Participatory Rural Appraisal
BWHC: Bangladesh Women's Health Coalition	RMCH: Rajsahi Medical College Hospital
CABA: Children Affected By HIV/AIDS	RMCH: Rangpur Medical College Hospital
CBCPC: Community Based Child Protection Committee	RMG: Ready Made Garments
CFA: Community Fistula Advocate	RPDO: Rural Poor Development Organization
ChSW: Children of Sex Worker	RSHP: Reproductive & Sexual Health Program
CM: Change Maker	RTI: Reproductive Tract Infection
CMCH: Chittagong Medical College Hospital	SANOB: STI/AIDS Network of Bangladesh Shangehati Forum for Sex Worker's Human Rights
CPIMS: Child Protection Information Management System	SHOKHI: (in Bangla: Shastho, Odhikar O Narir Ischapuron; in English: Women's Health Rights and Choices)
CUP: Coalition for the urban poor	SJA: Sylhet Jubo Academy
DMCH: Dhaka Medical College Hospital	SMCH: Sylhet Medical College Hospital
DNS: Durjoy Nari Sangha	SRH: Sexual and Reproductive Health
DP: Development Partners	SRHR: Sexual and Reproductive Health Rights
DWAN Forum: Disadvantaged Adolescents Working NGOs	STI: Sexual Transmitted Infection
EC: Executive Committee	TBA: Traditional Birth Attendant
FP: Family Planning	TVET: Technical and Vocational Education Training
FRE-B: Forum for the Rights of the Elderly, Bangladesh	UNFPA: United Nations Population Fund
FSW: Female Sex Workers	VCT: Voluntary Counselling and Testing
GB: General Body	VHSS: Voluntary Health Services Society
HASAB: HIV/AIDS & STD Alliance of Bangladesh	WC: We Can (Amrai Pari)
HIV: Human Immunodeficiency Virus	WHO: World Health Organization
KMCH: Khulna Medical College Hospital	WRA, B: White Ribbon Alliance, Bangladesh
	WPA: World Patient Alliance

**INTRODUCTION OF BWHC:
READERS NEED TO KNOW**

BWHC (established in 1980), is the first organization in the country to start working for establishing Sexual and Reproductive Health Rights (SRHR) for the deprived and underprivileged women and adolescents. It is –

- ◆ a non-government, not for profit voluntary organization;
- ◆ registered with the Directorate of Social Welfare in 1982 and with NGO Affairs Bureau in 1991;
- ◆ affiliated with Directorate of Population Control & Family Planning in 1981;

BWHC evolves under the leadership of eminent development worker and renowned women rights activist Ms. Sandra M. Kabir in April 1980. The birth of BWHC was interesting and historical: in 1978, the US government declared to withdraw financial supports from those organizations who conducted Menstrual Regulation (MR) as part of it's the program. Realizing the impact of this decision and the horrible situation of thousands of poor & underprivileged women of Bangladesh, the BWHC was established for and ensuring their sexual and reproductive health rights particularly, providing initially, ONLY the MR services to women both in urban and rural areas. By 1986, due to increased demand from the communities, other SRH services were made available in it's centers. BWHC has been working for the improvement and uphold the standard of livelihoods of poor, socially disadvantaged, underprivileged, and marginalized women, children and adolescents through health-oriented development interventions, with a prime focus on reproductive health services by undertaking various programs and projects particularly, health service focused projects around the country. It is committed to bringing positive changes in the quality of women's lives by making available reproductive and primary health services as well as other basic social services that enable women to exercise their reproductive and human rights.

With a vision to Equality of Women in a Just Civil Society, the BWHC empowers the marginalized women particularly, the young women and young people, it operates SRHR programs, gender sensitivity, women rights, against

social stigmas, etc. BWHC firmly believes that the quality of women's lives is enhanced by emphasizing an inclusive gender approach, community participation, and working in integration and collaboration with government and other relevant organizations. BWHC evolved with a commitment to contribute to Women's health and have a solid track record of implementing health programs in Bangladesh.

To achieve those goals and targets, the BWHC has congregated and developed extensive expertise and experiences in the area of mother and child health care particularly, maternal, neonatal, child health, and nutrition programs through the community-based implementation process. It is specialized in health service delivery and developed its model of service delivery, which is followed by different national and local health-based organizations. Based on more than three decades of experiences in this sector, the BWHC has effectively, established a 'Community-based Treatment & Referral Model' for particularly, treatment of Sexual and Reproductive Health Service, ANC, PNC, Immunization, Primary Health Care, Quality MR, PAC, VCT, and STI/RTI, Family Planning Methods and Community Based Prevention and Health Care Promotion for positive changes to health-seeking behavior through Participatory Learning and Action (PLA) and Participatory Rural Appraisal (PRA). Apart from this, the BWHC has below expertise and specialization related to the health sector:

- ◆ Development and implementation of integrated SRH&R Programs;
- ◆ Implementation of Community Development program through awareness-raising and BCC;
- ◆ Implementation of multi sectored HIV/AIDS program;
- ◆ Community mobilization and BCC for young people and socially excluded population;
- ◆ Conducting surveys and operational research.

Currently, BWHC operates it's programs and implements several projects in roughly half of the country and has 18 (eighteen) static Health Centers and 60 satellite clinics covering Dhaka, Chittagong, Sylhet, Khulna, and Rajsahi divisions.

REPRODUCTIVE AND SEXUAL HEALTH PROGRAM

REPRODUCTIVE & SEXUAL HEALTH PROGRAM (RSHP)

Women particularly, adolescents around the world face tremendous challenges in meeting their sexual and reproductive health (SRH) needs. Inadequate access to health information and services, as well as inequitable gender norms, contribute to a lack of awareness about puberty, sexuality, and basic human rights that can have serious implications on their health and welfare throughout the rest of their lives. These underlying factors lead to high rates of early pregnancy, sexually transmitted infections (STIs), sexual violence, and early and forced marriage globally.

Women and girls face many barriers to sexual health and reproductive rights : discrimination, stigma, restrictive behaviors, and entrenched traditional practices. Progress remains slow despite the evidence that these rights can have a transformative effect, not only on individual women, but on families, communities, and national economies.

In the Bangladesh context, the girls and boys are not in a position to exercise their sexual and reproductive health rights openly. They lack reliable and timely information and life skills. This does not only cause considerable stress and avoidable violence and health risks but also is the major cause for the high maternal mortality rates. Girls are married and have children at a too early age and do not practice effective

contraception methods due to both lacks of information and unavailability of methods. Their parents and teachers are silent and act more on taboos than on the need to protect their children's health. These taboos are fed by customary traditions and far-reaching gender discrimination.

BWHC believes that a woman must have the ability to control her own body and access the health services she needs – regardless of her sexuality, where she lives, her income level, or her ethnicity – is a fundamental right (which is also acknowledged in the constitution of the People's Republic of Bangladesh). When a young woman knows her sexual and reproductive health rights and can decide for herself when to have sex or to become a mother, and when she is safe from sexual violence – then she is empowered to fully realize her other rights: she can complete her education, get a job, and so on. And we need more girls and young women to be able to realize their full potential.

The BWHC is working toward these goals through initiatives like implementing the Reproductive & Sexual Health Program (RSHP) - a program that aims to empower young people, men, and women to realize their sexual and reproductive health and rights. The RSHP is addressing the causes of unsafe abortion, including decriminalization of abortion and supporting women's rights to safe abortion, as well as supporting the sexual rights of young people including comprehensive sexuality education, among other key issues.

1 Within the framework WHO definition of health as a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity, reproductive health, or sexual health/hygiene, addresses the reproductive processes, functions and system at all stages of life. Reproductive health, therefore, implies that people are able to have a responsible, satisfying and safer sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so.

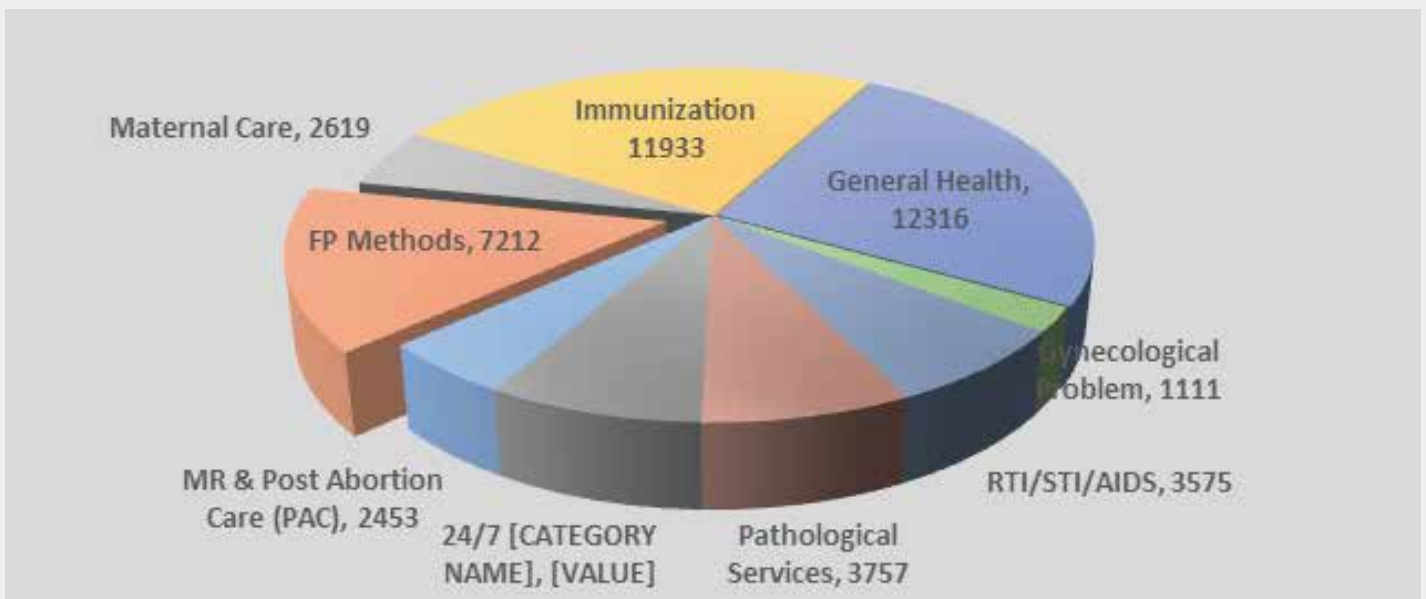
2 The WHO defines reproductive rights as follows: Reproductive rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. They also include the right of all to make decisions concerning reproduction free of discrimination, coercion and violence.

Working areas :

- ◆ **Dhaka Division:**
Dhaka, Tangail, Narayanganj, Narshingdi, Jamalpur
- ◆ **Khulna Division:**
Khulna, Narail, Meherpur
- ◆ **Rajshahi Division:**
Gaibandha
- ◆ **Sylhet Division:**
Sylhet, Sunamgonj, Moulvibazar, Hobigonj
- ◆ **Chittagong Division:**
Chittagong

141,236 women, children and adolescents received services on sexual and reproductive health where 2,619 pregnant women and lactating mothers received ANC and PNC in 2021. 2,453 accessed the safe MR and Post Abortion Care (PAC) services and 11,933 children were covered under immunization programs and 17,655 received counseling and others services from BWHC centers. 990 were referred to other health centers for better management. A number of 665,992 FP method were distributed among 7,212 several clients. The number of 24/7 Hotlines calls increased significantly

during 2021 and 3,870 number of Hotline Calls were received during this reporting periods. BWHC also treated the General Health Complications of the clients and a number of 12,316 clients received LCC and a limited facility of Pathological Services are available in BWHC centers and 3,757 required the minimum pathological supports. A number of 37,986 women and adolescents joined several BCC sessions on SRHR, STI/RTI/AIDS, safe motherhood, MHM and other related sexual and reproductive health rights issues.



**SAFE ABORTION ACTION FUNDS PROJECT
FOR SYLHET DIVISION**



SAFE ABORTION PROJECT FOCUSED TO SYLHET DIVISION (SAAF PROJECT)

Objective/s:

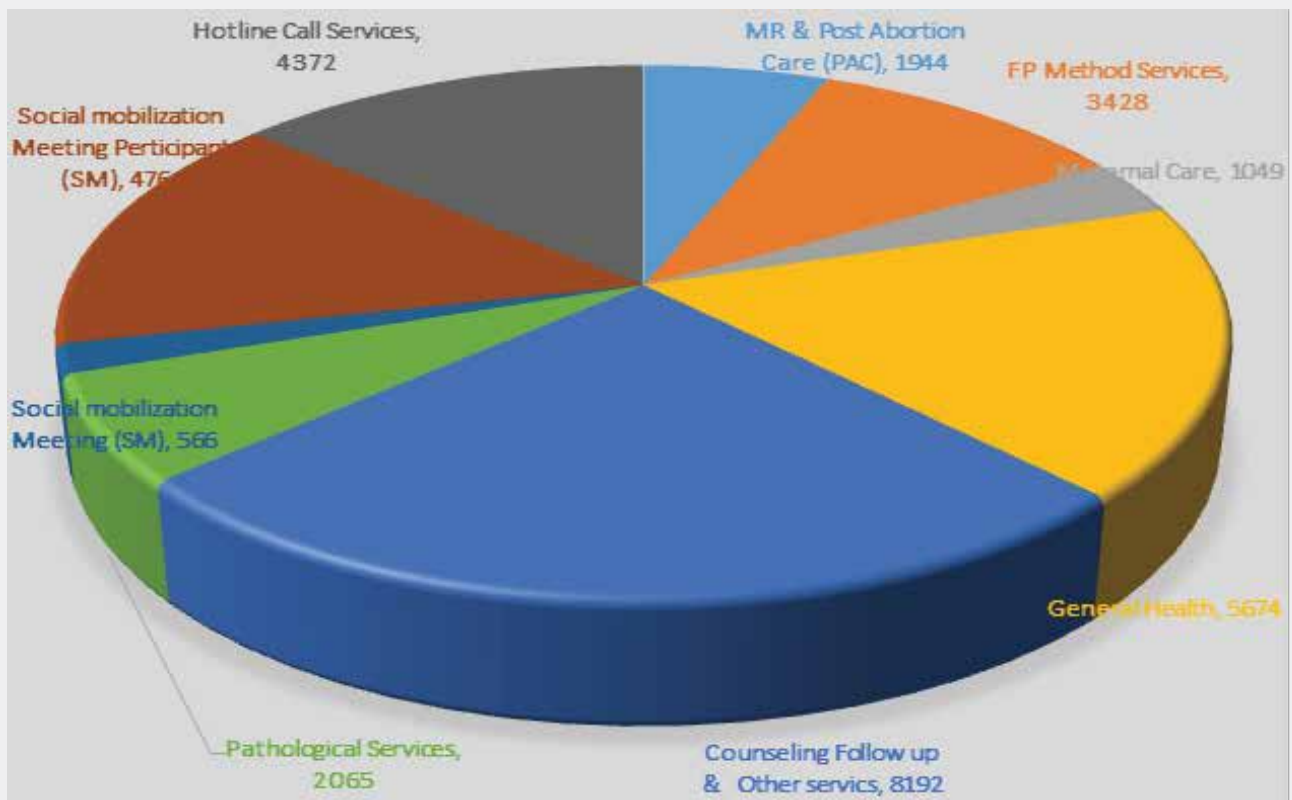
To ensure the access to quality, safe and comprehensive abortion care and other sexual and reproductive health services for the adolescents, young mothers and women & children of north-eastern part of Bangladesh giving special focus on tea garden workers, ethnic minority and hard-to-reach population of haor areas all of whom are mostly excluded from the mainstream health services.

During the reporting periods i.e. in 2021, even in the COVID - 19, a number of 52,157 women, adolescents and young mothers received services under this project particularly, 05 centers in Sylhet division. During this period, a number of 1,944 of women and young mothers accessed MR & Post Abortion Care (PAC) services from these centers and 1,049 pregnant women and lactating mothers received ANC and PNC services, a number of 5,674 clients came with General Health complications. Importantly, BWHC received huge calls through it's 24/7 Hotline services and a number of 3,382 were received ONLY from these 05 center's working areas. A number of 2,065 mini Pathological

Project location/s:

- Sylhet district: Sadar and Zokigonj upazilla for plain-land population and ethnic minority accordingly;
- Moulovibazar district: Kamalgonj upazilla is selected for tea garden workers and ethnic minority population;
- Sunamgonj district: Schatok upazilla is selected to cover haor area (hard-to-reach) population;
- Hobigonj district: Chunarughat upazilla is included for three ethnic groups and tea garden workers community.

Services were provided to the clients where 3,428 clients accepted several family planning methods and 20,672 FP method were distributed among them. Due to the COVID - 19, BCC sessions in schools were affected BUT a number of 566 Courtyard Meeting and School Sessions were conducted where 4,761 participants joined the BCC sessions. In addition to the above, Counseling sessions, follow up & Other services included 8,192 number of clients where a number of 990 clients were referred to government and other health centers for better management.



Apart from the regular project activities, numbers of humanitarian activities e.g. food supports and COVID-19 emergency support along with blankets for the cold wave were performed in these areas particularly, for the tea gardens workers and ethnic minority communities.



With the financial support from HelpAge Korea, BWHC distributed foods and Coronavirus protection kits to 110 families with older workers of 02 (two) tea gardens at Parqul Tea Garden, Hobigonj and Meringa Tea Garden, Moulvibazar.



SCHOOL SESSION on SRHR, MHM, early marriage, cleanliness and safe abortion etc.

WORLD MENSTRUAL HYGIENE DAY 2021
(held on 28 May 2021)



**INTERNATIONAL
SAFE ABORTION DAY 2021**
(held on 28 Sept. 2021)

**SENSITIZATION
MEETING**

(with Traditional Birth Attendants, Community Health Volunteers and Midwives)



**TRAINING ON 'HOW
TO STERILIZE
EQUIPMENT BY
AUTOCLAVE'**

**STI AND HIV PREVENTION SERVICE PACKAGE
FOR THE BROTHEL-BASED SEX WORKERS
AND THEIR CLIENT SERVICE PACKAGE-01**



STI AND HIV PREVENTION SERVICE PACKAGE FOR THE BROTHEL BASED SEX WORKERS AND THEIR CLIENT SERVICE PACKAGE-1 (SP – 01)

Under a Joint Venture of PIACT Bangladesh, Nari Maitree and BWHC came into contractual agreement with ASP in June 2020 for implementing the project at 10 brothels across the country. Among the 10 brothels, BWHC implements the SP – 01 project in 03 (three) brothels namely, Kandapara of Tangail, Banishanta of Mongla, Khulna and brothel of Jamalpur sadar. This project is funded by the AIDS/STD Programme (ASP) of the Ministry of Health and Family Welfare.

Goal:

To prevent HIV and STIs among brothel-based sex workers in Bangladesh.

Objectives:

- To provide knowledge on HIV, STI prevention and negotiation skills for using condom;
- To motivate and convince the sex workers and their clients for STI diagnosis and taking treatment including general health;

- To establish linkage for availing others government health services; and
- To have HIV testing and Counseling and appropriate referral for the PLHIV.

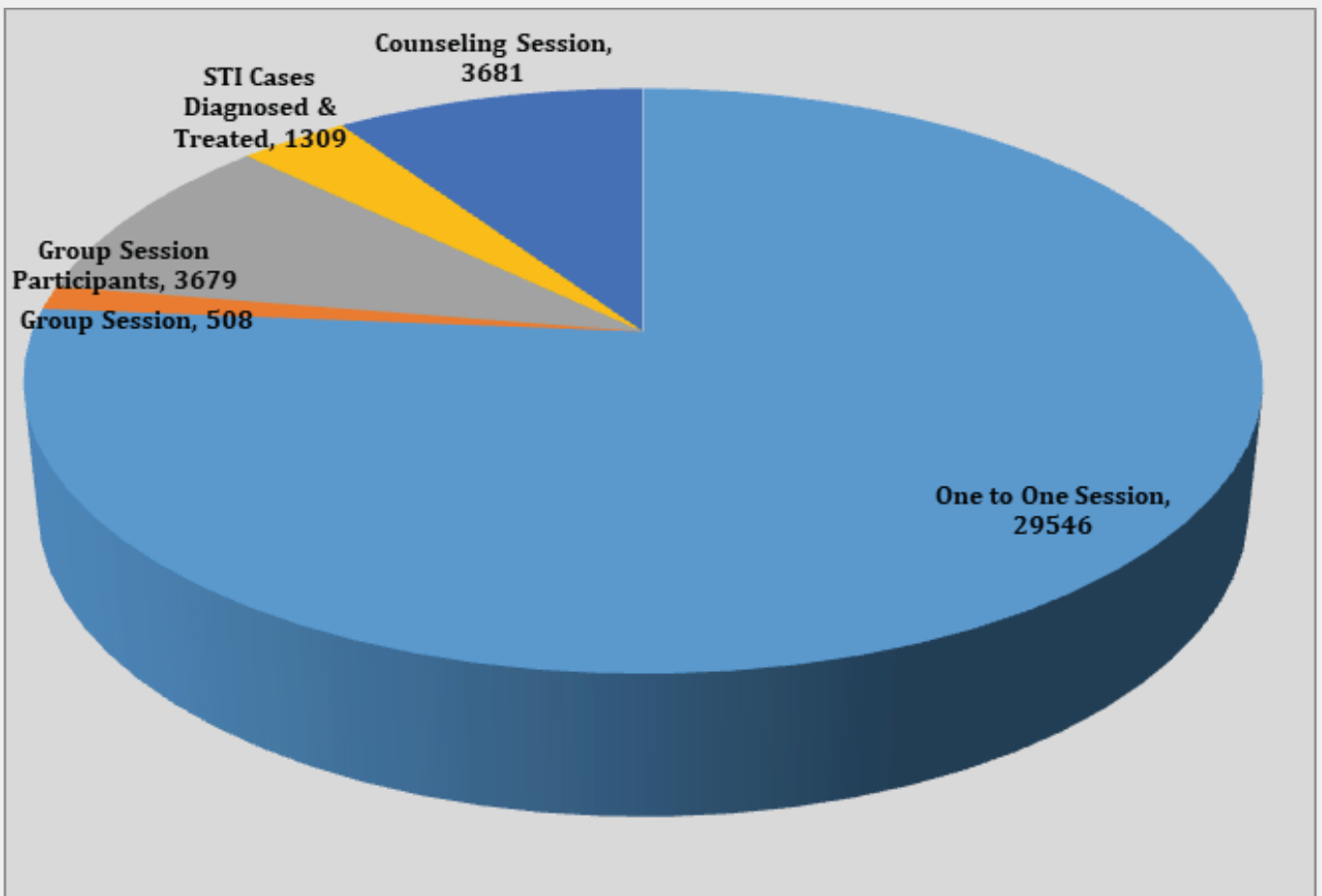
Major activities:

- Forming DIC Advisory Committee to create enabling environment of DICs;
- Mapping and developing Mother List of FSWs by establishing Drop-In-Centers (DICs) in each brothel;
- Providing STI treatment through diagnosis and counseling following the National STI Management Guidelines.
- Rising awareness on HIV and STI through distributing IEC materials and conducting BCC sessions;
- Mainstreaming health services in government hospitals and referral with other organizations;

- Demonstrating and distributing of condoms among the sex-workers for prevention of HIV/AIDS;
- Reducing Gender Based Violence (GBV) through networking with self-help groups;

During the reporting period, the mother list of BWHC's selected 03 brothels has been completed and the FSWs are 821 sex-workers who received 664,570 SRHR services including contraceptives i.e. condom, STI/RTI,

counselling etc. Peer Educators who are from the same community i.e. brothels organized and conducted 29,546 one-to-one session with sex-workers where 508 group sessions were conducted. The group sessions reached 3,679 participants in 2021. During the period, number of 626,355 condoms were distributed among the 821-mother listed FSWs. During this reporting period, number of 3,681 counseling sessions were conducted where number of 1,309 STI cases were diagnosed and treated among the 1309 FSWs.



EMERGENCY RESPONSE

I. INCLUSION OF OLDER PERSON

II. COLD-WAVE PROJECT

III. 'MEDICAL AND SOCIO-EDUCATIONAL CARAVANS – CASE OF THE CORONAVIRUS'

IV. DISTRIBUTION OF PERSONAL PROTECTIVE EQUIPMENT (PPE) AMONG HEALTH WORKERS TO PREVENT COVID – 19 IN BANGLADESH'



EMERGENCY RESPONSE

BWHC always stands beside the marginalized, underprivileged and isolated population during any national crisis and both natural or man-made disasters e.g. fire incident, flood, cyclone, cold-wave and even recent global pandemic COVID – 19. During this

under BWHC Hobigonj and Mtringa Tea Garden, Moulvibazar under BWHC Moulvibazar center respectively.

Minimum one person has to be more than 60 years of old in the family; there shall be other criteria as well e.g.



reporting period i.e. in 2021, BWHC implemented such few activities for the aforesaid communities:

i. With the financial support from HelpAge Korea, BWHC distributed foods and Coronavirus protection kits to 260 families with older workers of 02 (two) tea gardens under the project named “Inclusion and Supporting Older Persons in Fighting Covid-19” on 26 May and 27 May 2021 at Parqul Tea Garden, Hobigonj



socio-economic condition- poor & underprivileged, persons with disability, persons from the minority community and persons from schedule cast (lowest grade population of the society).

In addition to that, BWHC also supported with ‘Food Package’ and COVID – 19 Protection Kits to the older persons of Gaibandha and Narail districts.



ii. Apart from the BWHC supported a number of 450 older persons by providing 'Blankets' among the tea garden workers of Moulvibazar, Hobigonj, and ethnic minority population of Gaibandha districts. The selection procedure of beneficiaries mentioned above were stickily followed and with the help from the local self-govt. and local administration, the BWHC staff members of the said areas selected the most appropriate beneficiaries.

iii. To address the prevention of spreading out the global pandemic Coronavirus and to address the health risks due to COVID - 19, BWHC received Hygiene and Medical Kits under the program 'Medical and Socio-educational Caravans - case of the Coronavirus' funded by Al Waleed Philanthropist Foundation, managed by Bangladesh National Commission of UNESCO (BNCU), distributed by The Islamic World Educational, Scientific and Cultural Organization (ICESCO), Honorable Minister, Ministry of Education &





Chairman of BNCU Dr. Dipu Moni, M.P. joined the event virtually as Chief Guest where the honorable Secretary, Ministry of Education & Secretary-General of BNCU Mr. Md. Mahub Hossain Chaired the occasion. BWHC Executive Director Mr. Sharif Mostafa Helal received the kits including bleaching powder, floor cleaner, hand sanitizer, hand wash, disposable surgical masks for BWHC, and these kits were distributed among the health centers and it's beneficiaries of BWHC around the country.

health facilities. The support contributed to enhance the safety of the health workers; reduce the infection of coronavirus among the health workers and patients, which ultimately enhance motivation and efficiency of health services to address the pandemic.

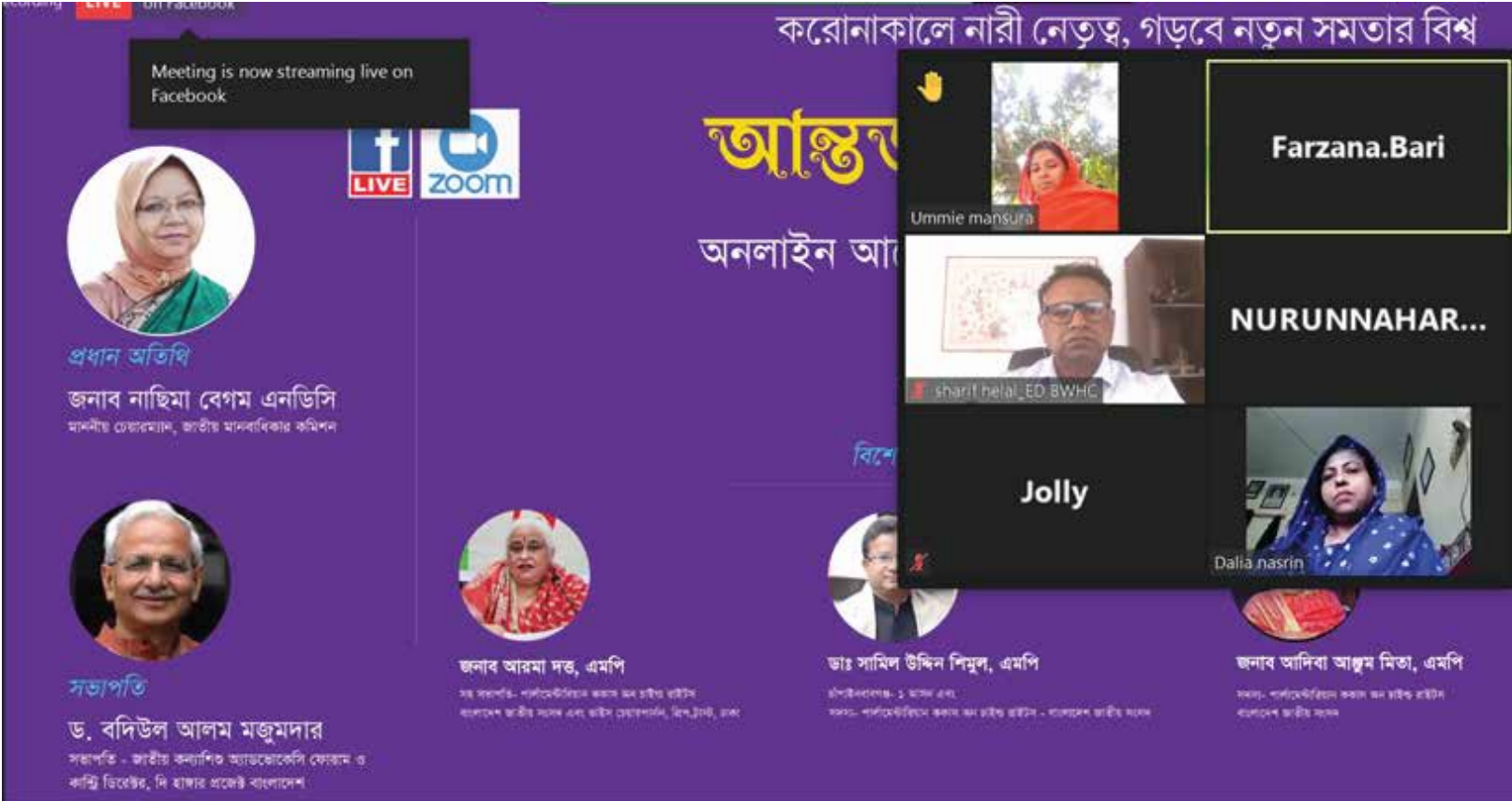
The provided equipment helped to be protected from COVID-19 pandemic situation of the people who mostly marginalized, selected for the distribution of the equipment, and along with the beneficiaries, the older aged population of the selected areas. Healthcare service providers are also being benefited as receiving the protective equipment and this way we can be able to continue our services in our working areas.



iv. With the support from americares, Bangladesh under it's 'Distribution of Personal Protective Equipment (PPE) among Health Workers to Prevent COVID - 19 in Bangladesh' BWHC distributed huge amount of PPE among it's health service providers and the beneficiaries as well. The purpose of this support is to address the devastating situation of COVID - 19, to support to the health workers with PPE working for both COVID - 19 and Non-COVID public and private



AWARENESS AND EDUCATION PROGRAMS



AWARENESS AND EDUCATION

BWHC observed and celebrated several International and National important days related to its vision and mission to create mass awareness and educate its beneficiaries throughout the country. Below were a few snapshots of these events:

- **INTERNATIONAL WOMEN'S DAY (08 MARCH)**

"Gender equality today for a sustainable tomorrow"

Advancing gender equality in the context of the climate crisis and disaster risk reduction is one of the greatest global challenges of the 21st century. Women are increasingly being recognized as more vulnerable to climate change impacts than men, as they constitute the majority of the world's poor and are more dependent on the natural resources which climate change threatens the most.

At the same time, women and girls are effective and powerful leaders and change-makers for climate adaptation and mitigation. They are involved in sustainability initiatives around the world, and their participation and leadership results in more effective climate action.

Continuing to examine the opportunities, as well as the constraints, to empower women and girls to have a voice and be equal players in decision-making related

to climate change and sustainability is essential for sustainable development and greater gender equality. Without gender equality today, a sustainable future, and an equal future, remains beyond our reach. (Source: United Nations)

Due to COVID – 19, BWHC celebrated this important day as a member of National Girl Child Advocacy Forum (NGCAF) held on 14 April 2021 and the celebration was conducted through virtual platform.

- **WORLD HEALTH DAY (07 APRIL)**

BWHC along with its all the health centers around the country successfully observed the 'World Health Day-2021' on 7th April 2021. In presence of beneficiaries, community peoples, and other stakeholders including govt. representatives, conducted in-house discussion meeting in its own premises maintaining the COVID – 19 guidelines. In the discussion meetings were held on the theme of this day. The community beneficiaries, change-makers, members of the self-help group, local elites, govt. representatives participated in the discussion meetings.

Besides, special services which included free Medical checkups, Blood Grouping, Pregnancy tests, etc. were provided on the occasion of this day.

Apart from this, a discussion meeting was also held in the BWHC head office where all levels of staff members took part in the discussion.

- **GLOBAL MENSTRUAL HYGIENE DAY (28 MAY)**

Poor menstrual hygiene caused by a lack of education on the issue, persisting taboos and stigma, limited access to hygienic menstrual products and poor sanitation infrastructure undermines the educational



opportunities, health and overall social status of women and girls around the world. As a result, millions of women and girls are kept from reaching their full potential.

Menstrual Hygiene Day (MH Day) is a global advocacy platform that brings together the voices and actions of non-profits, government agencies, individuals, the private sector and the media to promote good menstrual health and hygiene (MHH) for all women and girls. More specifically, MH Day:

- breaks the silence, raises awareness and changes negative social norms around MHH, and
- engages decision-makers to increase the political priority and catalyze action for MHH, at global, national and local levels.

MH Day has grown tremendously since its first celebration in 2014. Maintaining the COVID - 19 guidelines, on this day, all of the BWHC centers along with the BWHC head office observed the day arranging rallies and discussion among the local people and also the local government officials joined in the session for making the program more informative & effective.

- **INTERNATIONAL SAFE ABORTION DAY (28 SEPTEMBER)**

28 September, International Safe Abortion Day, is the annual day of action in support of the right to safe abortion. It has been celebrated since 1990 in Latin America, and since 2011 around the world. Recent years have seen hundreds of activities in dozens of countries across all global regions. National and world leaders have begun to make statements in support of the day, and a growing number of media outlets report national and international events and write articles on the theme.

The past 16+ months have seen both successes and setbacks in the right to safe abortion in the midst of the Covid-19 pandemic. A pandemic puts the need for access to safe abortion into sharp relief, increases the risks of unsafe abortions, and reinforces the need for safe abortion to be available as essential health care. With the poorest and most marginalized women and girls worst affected, the pandemic has restricted access not only to safe abortion but also all other sexual and reproductive healthcare services, including pregnancy and delivery care. Maternal deaths have risen substantially in some places, alongside violence against women. Right-wing governments are showing increasing hostility to women's rights. Progressive sexuality education and anything related to gender are condemned without rhyme or reason.



National and local lockdowns, quarantine, travel bans and closed borders, while necessary for making people safe from Covid-19, have made access to health care of all kinds even more challenging than usual since March 2020. Abortion is time-dependent. Delayed access to safe abortion creates a risk to life and health, as does

turning to unsafe abortion in a panic when nothing else is available.

Telemedicine has been proved as a means of providing for many critical health care needs by phone or computer, especially during a pandemic. It is being adopted for a rapidly expanding list of clinical consultations, with delivery of medications through the post or by local pharmacies. Telemedicine for arranging self-managed abortion is a safe solution for many women, both now and after the pandemic. As hospitals and other healthcare facilities are overwhelmed with caring for large numbers of Covid-19 patients, pharmacies have become an even more vital access point for medicines, healthcare services and advice. Some of these changes have emerged as positive developments during the pandemic. They will remain valuable going forward as a way to reduce unsafe abortion. BWHC centers and particularly, the 24/7 provided tremendous support during the whole pandemic.

- **INTERNATIONAL DAY OF OLDER PERSON (01 OCTOBER)**

International Day of Older Persons is celebrated on 1st October every year to pay attention to the particular needs and challenges faced by many older people. If adequate guarantees are in place, the majority of older men and women can continue to provide their contribution to the functioning of society.

The 2021 theme “Digital Equity for All Ages” affirms the need for access and meaningful participation in the digital world by older persons.

The fourth industrial revolution characterized by rapid digital innovation and by exponential growth has transformed all sectors of society, including how we live, work and relate to one another. Technological advances offer great hope for accelerating progress towards the Sustainable Development Goals (SDGs). Yet, one-half of the global population is off-line, with the starkest contrast between the most developed countries (87%) and the least developed countries

(19%) (ITU Facts and Figures 2020). Recent reports by the International Telecommunications Union (ITU) indicate that women and older persons experience digital inequity to a greater extent than other groups in society; they either lack access to technologies, or are often not benefitting fully from the opportunities provided by technological progress.

Human rights lie at the core of all efforts in this regard. The interdependence between older persons’ social integration and the full enjoyment of their human rights cannot be ignored, as the degree to which older persons are socially integrated will directly affect their dignity and quality of life.

BWHC is the first & only organization in Bangladesh that works exclusively for older women in the country. It provides health services and social integration to the older women so that they can live in their family with sound physical and mental peace. BWHC is one of the oldest affiliated organizations of HelpAge International, Bangladesh.

As of previous years, BWHC celebrated the International Day of Older Person in collaboration with



the Ministry of Social Welfare, Bangladesh Government along with other partner organizations. Due to COVID – 19, this year’s celebration took place virtually where the Honorable Minister of Ministry of Social Welfare was the Chief Guest. BWHC participated in a colorful rally and the Executive Director delivered a speech in the discussion meeting. In addition to that, free special



services were provided to the older person through BWHC’s centers.

- **WORLD AIDS DAY (01 DECEMBER)**

Each year on World AIDS Day (December 1) we take time to reflect upon our worldwide response to the HIV/AIDS epidemic by remembering the millions we’ve lost over the past four decades, celebrating our achievements over the past year, and pledging to work in even more inclusive and innovative ways over the coming year. HIV remains a major public health issue

Division, disparity and disregard for human rights are among the failures that allowed HIV to become and remain a global health crisis. Now, COVID-19 is exacerbating inequities and disruptions to services, making the lives of many people living with HIV more challenging. The theme of World AIDS Day 2021 is “End inequalities. End AIDS”. On this day, government officials and individuals around the world educate people on AIDS prevention and control.

As of previous years, BWHC along with it’s joint venture partners PIACT Bangladesh and Nari Moitri observed the World AIDS Day together 1st December 2021 in Dhaka with 10 brothels under the project named: “STI and HIV Prevention Service Package for the Brothel Based Sex Workers and their Client Service Package-1 (SP – 1)”. It is an opportunity to celebrate and support global efforts to prevent new HIV infections, increase HIV awareness and knowledge, and support those living with HIV. On the occasion, Mr. Sharif Mostafa Helal, Executive Director, BWHC along with other staff members of joint venture, senior govt. officials participated in the celebration in front of ICDDR,B Dhaka in the human chain and discussion meeting.



that affects millions of people worldwide. Although the world has made significant progress in recent decades, important global targets for 2020 were not met.

As an elected member of Bangladesh Country Coordinating Mechanism (BCCM), BWHC hosted the 13th NGO Constituency Consultation Meeting of BCCM held on 27 January 2021 at the conference room of



BWHC. Some 36 Head of NGOs & representative/s and BCCM Secretariat joined the meeting and reviewed the previous meeting decision/s and way forward for the upcoming initiative/s to reinforce NGO's involvement for achieving goals of GFATM particularly, to prevent

and treat HIV and AIDS, tuberculosis, and malaria. The meeting participants joined both Physical presence and virtually from different corner of the country and abroad.



BWHC GOVERNANCE



BWHC GOVERNANCE

General Body:

Following the constitution of the BWHC, the General Body of BWHC consists of 23 members. As per the constitution and Rules and Regulations of BWHC, the General Body elects the Executive Committee for 03 (three) years. The Annual General Meeting 2021 was held on 22nd January 2022 in its own premises at Baitul Aman Housing Society, Adabor, Dhaka. The meeting was Chaired & Facilitated by the Chairperson Ms. Nasimun Ara Huque and the general

members participated agenda-wise discussions. The AGM approved the decisions, activities and initiatives taken by the Executive Committee in 2021 particularly, approved the Report of Activities 2021, Audit Report 2020, Annual Budget 2022.

It needs to mention that, the existing Executive Committee (2021 – 2023) was elected by the general members in the AGM 2020.

Executive Committee:

The 07 (seven) members of BWHC's Executive Committee comprise distinguished professionals, activists, development workers of excellent repute

who bring their diverse skills and experiences to their governance role. The current Executive Committee is for the periods of 2021 – 2023.



EXECUTIVE COMMITTEE



Chairperson

Ms. Nasimun Ara Huq is a journalist by her profession and she is the President of Bangladesh Nari Sangbadik Kendra (BNSK) a renowned organization. She is actively involved with many other development organizations in the country for long years.



Vice-Chairperson:

Ms. Jahanara Sadeque was a development worker and worked for more than 30 years in development field. Apart from BWHC, she is actively involved with many other development organizations in the country.



Treasurer:

Ms. Qumrun Nahar is a Development Worker graduated from University of Dhaka. 25+ years of experiences in development field including Pathfinder International, Swiss Development Cooperation, Marie Stops, LGED, BWHC and others. She is expertise in conducting researches focusing to slums of Dhaka city.



Member:

Dr. Maswooda Ghani is a Physician and passed MBBS from University of Dhaka. She is a retired Physician of CMO Cantonment General Hospital, Dhaka.



Member:

Prof. Nasima Ferdous, PhD is an Academia of University of Dhaka. She achieved her PhD from Australian National University. She is a retired Professor of Physics Department, University of Dhaka.



Member:

Ms. Rayhana Begum is an M. Sc. from University of Dhaka and is a Consultant Physician of Homeopathy Medicine where she is very much interested to do actual social work. Earlier, she was basically, a Development Worker and served so many NGOs including BWHC.



Member:

Mr. Kazi Ali Reza is a political scientist, studied in Political Science, University of Dhaka; he is the former Head of Agency, UN Information Center (UNIC); he is author of several books including United Nations and Bangladesh: Building a Better World.



Member Secretary:

Mr. Sharif Mostafa Helal is the Ex-officio Member Secretary of Executive Committee & Executive Director of BWHC.

Executive Committee Meeting



DEVELOPMENT PARTNERS

COLLABORATION WITH DEVELOPMENT PARTNERS AND DONORS

BWHC cares for a warm, friendly and collaborative partnership with several Development Partners (DPs), both in country and abroad, who are working in the same field to uphold the quality of life and livelihoods of the underprivileged women & Children and adolescents. In the meantime, BWHC showed remarkable achievements in this particular area

and a good number of DPs kept their faith, trust and confidences towards it's vision, mission and goals and relied on BWHC's management for achieving their priorities in the area of sexual and reproductive health service & rights. For achieving the vision, mission and goals, BWHC has/d partnerships (so far) with -



ALLIANCE & NETWORK

ALLIANCE & NETWORK

BWHC is active member of numbers of networks and alliances those work for mutual vision, mission and goals with a view to achieve the defined objectives:

◆◆	ADAB	:	Association for Development Agencies in Bangladesh
◆◆	ARC-B	:	Ageing Resource Centre -Bangladesh
◆◆	BBF	:	Bangladesh Breast Feeding Foundation
◆◆	BCCM	:	Bangladesh Country Coordinating Mechanism
◆◆	BNSK	:	Bangladeshi Nari Sangbadik Kendra
◆◆	BNWLA	:	Bangladesh National Women Lawyer's Association.
◆◆	CIC – BD	:	Citizens' Initiatives on CEDAW, Bangladesh
◆◆	CUP	:	Coalition for the urban poor
◆◆	DWAN Forum	:	Disadvantaged Adolescents Working NGOs
◆◆	FRE-B	:	Forum for the Rights of the Elderly, Bangladesh
◆◆	HASAB	:	HIV/AIDS & STD Alliance Bangladesh
◆◆	Member	:	National GO – NGO Coordination Committee
◆◆	Member	:	National Water & Sanitation Coordination Committee
◆◆	MHMP	:	Menstrual Hygiene Management Platform
◆◆	NEARS	:	Networking for Ensuring Adolescents Rights & Services
◆◆	NGCAF	:	National Girl Child Advocacy Forum
◆◆	PHM	:	People's Health Movement
◆◆	Shanghati	:	Forum for Sex Worker's Human Rights
◆◆	SANOB	:	STI/AIDS Network of Bangladesh
◆◆	VHSS	:	Voluntary Health Services Society
◆◆	WRA,B	:	White Ribbon Alliance, Bangladesh
◆◆	WPA	:	World Patient Alliance

FINANCIALS

AUDITOR'S REPORT AND AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2021



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Independent auditors' report

Of Bangladesh Woman's Health Coalition (BWHC) Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of **Bangladesh Woman's Health Coalition (BWHC)** which comprise the Consolidated Statement of Financial Position for the year ended 31 December 2021, Statement of Comprehensive Income and Statement of Receipts and Payments, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of the Organization for the year ended 31 December 2021, and of its financial performance for the year then ended in accordance with International Financial Reporting Standards (IFRSs) and other applicable laws and regulations.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (ISAs). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants (IESBA Code) together with ethical requirements that are relevant to our audit of the financial statements in Bangladesh, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation of financial statements that give a true and fair view in accordance with IFRSs and other applicable laws and regulations and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is high level of assurance, but is not a guarantee that an audit conducted in accordance with International Standards on Auditing (ISAs) will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also

- Identify and assess the risk of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Report on Other Legal and Regularity Requirements

We also report that

- a) We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purpose of our audit and made due verification thereof.
- b) In our opinion, proper books of accounts as required by law have been kept by management so far as it appeared from our examination of those books; and
- c) The Statement of Financial Position, Statement of Comprehensive Income, Statement of Receipts & Payments dealt with by the report are in agreement with the books of accounts.

Dated, Dhaka
July 26, 2022


(Md. Abdur Rashid FCA)
Partner

FAMES & R
Chartered Accountants

DVC: 2207280474A5375959



Bangladesh Women's Health Coalition (BWHC)
Consolidated Accounts of All Program & Projects
Statement of Consolidated Financial Position
As at December 31, 2021

Particulars	Notes	FY-2021	FY-2020
A. Fixed Assets (Written down value) :	5.00	9,426,665	9,753,280
Fixed Assets at cost		17,190,798	17,118,858
Less: Accumulated Depreciation		7,764,133	7,365,579
B. Investment on Fixed Deposit	6.00	7,924,577	7,825,732
C. Current Assets		8,268,520	5,237,744
Medicine Stock	7.00	-	111,421
Advance Accounts	8.00	5,901,642	3,983,867
Cash & Cash Equivalent	9.00	2,366,878	1,142,456
Total Assets : (A+B+C)		25,619,762	22,816,756
D. Fund Account :	10.00	15,068,247	16,177,413
E. Current Liabilities		10,551,514	6,639,343
Accounts Payable	11.00	435,399	517,816
Gratuity Payable	12.00	1,479,473	1,290,615
Loan Account	13.00	5,881,642	4,521,642
Advance from Staff Provident Fund	14.00	2,550,000	-
Overhead Payable	15.00	-	16,539
Provision for Expenses	16.00	-	87,731
Unearned Rent Advance	17.00	205,000	205,000
Total Fund & Liabilities (D+E)		25,619,762	22,816,756


Annexed notes form an integral part of financial statements


Executive Director
BWHC


Treasurer
BWHC

Signed in terms of our separate report of even date annexed.

Date: 26 July, 2022
Place: Dhaka


Md. Abdur Rashid FCA
Partner
FAMES & R
Chartered Accountants

DVC/2207280474 AS 395959



**Bangladesh Women's Health Coalition (BWHC)
Consolidated Accounts of All Program & Projects
Consolidated Statement of Comprehensive Income
For the year ended December 31, 2021**

Particulars	FY-2021						FY-2020
	RSHP Central Office	SAAF Round 4	STD & HIV (SP-1)	ASROI	HAK Project(CO VID 19)	Total	Total
Income :	980,019	7,894,471	5,079,549	-	103,264	14,057,303	7,149,380
Fund received from donor	-	7,889,864	5,078,045	-	98,976	13,066,885	5,939,554
Contribution from BWHC FUND Account	-	-	-	-	4,288	4,288	-
Vaccine Sale	404,800	-	-	-	-	404,800	330,800
Sale of medicine	189,464	-	-	-	-	189,464	148,811
Bank interest	5,997	4,607	1,504	-	-	12,108	71,903
Interest on fixed deposit	379,758	-	-	-	-	379,758	658,312
Fund received :	8,263,296	-	-	-	-	8,263,296	684,376
Fund received from SAAF project	8,263,296	-	-	-	-	8,263,296	-
BWHC HAK project(COVID 19)	-	-	-	-	-	-	684,376
Overhead :	1,780,673	-	-	-	-	1,780,673	666,497
ASROI Project	-	-	-	-	-	-	119,609
SAAF Project	-	-	-	-	-	-	546,888
Different Project	1,780,673	-	-	-	-	1,780,673	-
Other receipts	80,060	-	-	-	-	80,060	1,096,585
Office Rent received	-	-	-	-	-	-	1,008,865
Membership fees	10,100	-	-	-	-	10,100	-
Sale of Scrap	69,960	-	-	-	-	69,960	87,720
Total	11,104,048	7,894,471	5,079,549	-	103,264	24,181,332	9,596,838



Particulars	FY-2021						FY-2020
	RSHF Central Office	SAAF Round 4	STD & HIV (SP-1)	ASROI	HAK Project(CO VID 19)	Total	Total
Expenditure :	7,020,832	6,192,292	6,926,747	135,455	103,264	20,378,590	17,995,496
Salary & benefits	3,621,409	3,973,912	5,366,004	96,350	-	13,057,675	10,859,690
Office rent	583,000	775,152	326,830	5,000	-	1,689,982	1,370,733
Utilities	90,006	-	11,992	500	-	102,498	134,258
Communication	71,436	31,499	80,504	1,700	-	185,139	117,256
Refreshment	8,960	3,820	-	-	-	12,780	30,384
Office supplies and stationery	65,292	-	26,895	863	-	93,050	67,365
Office equipment	-	-	-	-	-	-	317,419
Office maintenance	1,410	18,536	11,098	-	-	31,044	-
Medical supplies	14,076	-	-	-	-	14,076	37,028
Local conveyance	35,638	17,280	18,749	7,510	-	79,177	110,059
Tour travel & per diem	35,036	67,808	81,188	-	-	184,032	185,368
Medicine purchase	-	296,439	475,802	-	-	772,241	878,648
Vaccine purchase	264,078	-	-	-	-	264,078	-
Repair and maintenance	65,304	1,322	-	-	-	66,626	114,155
Toner for printer	-	-	-	-	-	-	14,533
Audit Expenses	-	-	-	-	-	-	91,982
Printing and publication	59,122	41,570	-	-	-	100,692	144,712
Day observation	1,809	-	19,592	-	-	21,401	32,201
Meeting seminar and workshop	57,718	180,803	11,716	-	-	250,237	146,017
Fees & charge	74,219	-	-	-	-	74,219	75,909
Miscellaneous exp.	15,928	-	10,269	-	-	26,197	158,352
Program support	-	223,902	36,027	-	-	259,929	64,710
Overhead exp.	-	556,474	445,000	23,532	-	1,025,006	760,545
Donation to Centre	281,000	-	-	-	-	281,000	52,450
Common service charge	30,000	-	-	-	-	30,000	35,000
Vehicle operation and maintenance	310,483	-	-	-	-	310,483	220,718
Depreciation	349,834	-	-	-	-	349,834	407,039
Wastage Medicine (Date Expired)	105,423	-	-	-	-	105,423	-



Particulars	FY-2021						FY-2020
	RSHP Central Office	SAAF Round 4	STD & HIV (SP-1)	ASROI	HAK Project(CO VID 19)	Total	
Contingencies	-	-	-	-	-	-	8,390
Provision for Gratuity	188,858	-	-	-	-	188,858	165,644
Distribution on Relief for Older Person	-	-	-	-	103,264	103,264	585,400
BCC Sessions for community women	-	-	-	-	-	-	31,926
Adjustment	-	-	-	-	-	-	428,080
Bank charges	24,793	3,775	5,081	-	-	33,649	52,600
Contribution Transfer to head office	666,000	-	-	-	-	666,000	296,925
Fund Transfer :	7,993,128	-	-	-	-	7,993,128	3,619,554
SAAF project	7,889,864	-	-	-	-	7,889,864	3,034,154
BWHC HAK Project(COVID 19)	103,264	-	-	-	-	103,264	585,400
Total Expenditure	15,013,960	6,192,292	6,926,747	135,455	103,264	28,371,718	21,615,050
Excess/Deficit of income over expenditure	(3,909,912)	1,702,179	(1,847,198)	(135,455)	-	(4,190,386)	(12,018,212)
Total :	11,104,048	7,894,471	5,079,549	-	103,264	24,181,332	9,596,838

Annexed notes form an integral part of financial statements

As. D. J. J. J.
Executive Director
BWHC

M. A. B. R.
Treasurer
BWHC

Signed in terms of our separate report of even date annexed.

Md. Abdur Rashid FCA
Partner
FAMES & R
Chartered Accountants



Date: 26 July, 2022
Place: Dhaka

Particulars	FY-2021					FY-2020	
	RSHP	SAAF Round-4	STD & HIV (SP-1)	ASROI	HAK Project (COVID 19)	Total	Total
Loan Realized :	4,520,000	-	-	-	-	4,520,000	213,570
Advance adjusted	-	-	-	-	-	-	213,570
NASP Project	2,670,000	-	-	-	-	2,670,000	-
BWHC SAAF Project	1,850,000	-	-	-	-	1,850,000	-
Overhead Income :	1,780,673	-	-	-	-	1,780,673	666,497
ASROI Project	-	-	-	-	-	-	119,609
SAAF Project	-	-	-	-	-	-	546,888
Different Project	1,780,673	-	-	-	-	1,780,673	-
Other Receipts :	567,100	-	-	-	-	567,100	1,143,765
Office Rent	-	-	-	-	-	-	1,008,865
Donation Received from Communities	557,000	-	-	-	-	557,000	-
Paper sale/ Sales of Scrap	-	-	-	-	-	-	74,900
Membership	10,100	-	-	-	-	10,100	-
Advance Office Rent	-	-	-	-	-	-	60,000
Total :	22,295,253	9,124,080	9,792,284	368,085	103,264	41,682,966	33,974,600
Payments :	6,441,298	6,262,727	6,926,747	135,455	103,264	19,869,491	24,663,229
Salary & benefits	3,621,409	3,973,912	5,366,004	96,350	-	13,057,675	10,702,864
Office rent	572,000	748,152	326,830	5,000	-	1,651,982	1,368,733
Utilities	90,006	-	11,992	500	-	102,498	134,258
Communication	71,436	31,499	80,504	1,700	-	185,139	118,756
Refreshment	8,960	3,820	-	-	-	12,780	30,384
Office supplies and stationary	65,292	-	26,895	863	-	93,050	67,365
Office equipment	71,940	-	-	-	-	71,940	323,418
Office Maintenance	1,410	18,536	11,098	-	-	31,044	12,905
Medical supplies	14,076	-	-	-	-	14,076	23,261
Medicine purchase	-	296,439	475,802	-	-	772,241	818,514
Local conveyance	35,638	17,280	18,749	7,510	-	79,177	110,059
Tour travel & per diem	35,036	67,808	81,188	-	-	184,032	185,368
Repair and maintenance	64,504	1,322	-	-	-	65,826	107,564
Common service charge	-	-	-	-	-	-	35,000



Particulars	FY-2021					FY-2020
	RSHP	SAAF Round-4	STD & HIV (SP-1)	ASROI	HAK Project (COVID 19)	Total
Distribution on Relief for Older Person	-	-	-	-	103,264	585,400
Conducting BCC seasons or reproductive health & rights issue	-	-	-	-	-	31,926
Toner for printer	-	-	-	-	-	8,534
Printing and publication	59,122	41,570	-	-	-	138,398
Vaccine purchase	264,078	-	-	-	-	264,078
Common Service charge	30,000	-	-	-	-	30,000
Day observation	1,809	-	19,592	-	-	21,401
Meeting seminar and workshop	57,718	180,803	11,716	-	-	250,237
Fees & charge	74,219	-	-	-	-	74,219
Miscellaneous exp	15,928	-	10,269	-	-	26,197
Others exp.	-	-	-	-	-	428,080
Project exp.	-	321,337	36,027	-	-	64,710
Legal fee/ Audit Fees	-	-	-	-	-	21,547
Donation to Centre	281,800	-	-	-	-	349,375
Overhead expenses	-	556,474	445,000	23,532	-	744,006
Contingencies	-	-	-	-	-	6,890
Investment during the year	-	-	-	-	-	7,450,000
Vehicle operation and maintenance	310,483	-	-	-	-	220,718
Contribution Transfer to Head office	666,000	-	-	-	-	666,000
Provision for Adjustment	3,641	-	-	-	-	3,641
Bank charges	24,793	3,775	5,081	-	-	33,649
Fund Transfer	8,193,967	-	-	232,630	-	8,426,597
SAAF project	7,889,864	-	-	-	-	7,889,864
BW/C HAK Project (COVID 19)	103,264	-	-	-	-	103,264
BW/C Gratuity Fund	200,839	-	-	-	-	200,839
BW/C ASTOI Project	-	-	-	232,630	-	232,630
	60,000	-	-	-	-	60,000
Loan to Jatrabari Center	-	-	-	-	-	80,305
Loan to Narayangonj Center	60,000	-	-	-	-	60,000



Particulars	FY-2021					Total	FY-2020 Total
	RSHP	SAAF Round-4	STD & HIV (SP-1)	ASROI	JAK, Project (COVID 19)		
Loan Disbursement	6,420,000	1,850,000	2,670,000	-	-	10,940,000	4,280,719
Bills Payables	-	-	-	-	-	-	580,719
Loan to SAAF Project	1,150,000	1,850,000	2,670,000	-	-	5,670,000	700,000
Loan to NASP Project Advance to ED	5,270,000	-	-	-	-	5,270,000	3,000,000
Sub-Total	21,115,265	8,112,727	9,596,747	368,085	103,264	39,296,088	32,785,144
Closing Balance	1,179,988	1,011,353	195,537	-	-	2,386,878	1,189,456
Cash in hand	27,593	-	-	-	-	27,593	114,143
Cash at bank	1,152,395	991,353	195,537	-	-	2,339,285	1,028,313
Cash at bank (project office advance)	-	20,000	-	-	-	20,000	47,000
Total	22,295,253	9,124,080	9,792,284	368,085	103,264	41,682,966	33,974,600

Annexed notes form an integral part of financial statements

Signed in terms of our separate report of even date annexed.

M. A. Hossain
Executive Director
BWHC

Md. Rashid FCA
Treasurer
BWHC

FAMES & R
Md. Abdur Rashid FCA
Partner

Date: 26 July, 2022
Place: Dhaka

FAMES & R
Chartered Accountants



