

# LAMB

## ANNUAL REPORT 2019-2020



ল্যাম্ব  LAMB

যেন জীবন পরিপূর্ণ হয়  
*That all may have abundant life*

সমন্বিত পল্লী স্বাস্থ্য ও উন্নয়ন  
Integrated Rural Health and Development



## **Vision**

People of Bangladesh transformed by the love of God,  
experience abundant life in healthy and just communities.  
“I have come that they may have life - life in all its fullness.”  
Jesus’ Words in John 10:10

## **Mission**

To serve God by serving the poor and underprivileged,  
especially women and children.

## **LAMB Values**

Following the example of Jesus.

## **Compassion**

Care for patients and one another by putting ourselves in others’  
place.

## **Humble service**

Work in ways that benefit others before self.

## **Integrity**

Speak truth courageously and act from an upright character.

## **Equal Respect for All**

Avoid favoritism or preference because the Creator made people  
in His likeness and values people equally.

## **Forgiveness**

Reconcile over relational mistakes and not take offense.

## **Committed**

Pursue an objective faithfully despite hardship.

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### Message from the Departing Board Chairperson

I have been pleased to be Chair for the LAMB Board for about 2 years now. Having been on the board previously for numerous years, it was a privilege to take over the chair from a previous chairperson who had exercised policy so effectively, i.e. John Marsden. It was like standing on the shoulders of a giant, but I stood for 2 years.

LAMB has certainly had a rough year considering the pandemic, but has emerged from this as a better 'oiled' project. I'm proud to say that early on when COVID-19 was evident, LAMB took its role as a community 'light' and formed a COVID-19 isolation ward so they could be fully prepared. As time progressed, COVID-19 was not affecting the rural community as was the case in the cities. However, if and when it does, LAMB is fully prepared. In the physical absence of the ED and several of the expats, proudly, management stepped up and were able to continue to effectively serve the community's needs. Surveys of staff and the community show that satisfaction has increased over the years which is the trend we wish to keep. The board specifically wishes to listen to the staff and community; thus, we specifically spend time during our board meetings to do just that.

Lastly, as board chair, my job has been to support the ED in his work and development. Kyle Scott reached out often when such support was required and our relationship grew because of this. Next year, I am proud to state that Dr. Peter Halder has been selected as the new Chair. Not only is this the first time a Chair has been a Bangladeshi national, but in selecting Peter, the LAMB Board has selected a great leader who will drive and shape LAMB for the future.

### Dr. Craig Meisner LAMB Board Chairperson



### Message from the Board Chairperson

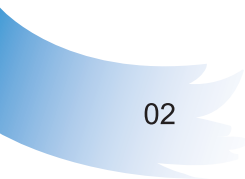
I am so happy to learn that LAMB is going to publish its annual report for 2020. It is much known to all of us that it was not an easy year because of the historic pandemic crisis. There is a saying, survival of the fittest. So LAMB served and is running well, though some of its services were running at less capacity for a few weeks due to the coronavirus.

We are so grateful to each and every financial partner for your generous and heartiest support during the difficult times which is remarkable and unforgettable. We deeply wish you will continue their support in the future too.

I am thankful to the immediate former chairman and his leadership, all the current board of directors of LAMB and the Executive Director Mr. Kyle Scott and for his excellent leadership in running LAMB along with his staff team.

All the very best in 2021.

### Dr. Peter Halder LAMB Board Chairperson







Message from the  
**Executive Director**

I am very pleased to be able to present the Annual Report for fiscal year July 2019 – June 2020.

This annual report primarily highlights LAMB's achievements and impact according to our established goals. For the first time, we are making an effort to highlight our work according to programs which are aligned with the goals of the organization. Over the course of the next several months, LAMB management will be looking at ways of organizing itself around these programs in an effort to provide necessary integration of our work across departments.

The pandemic provided a test of LAMB's capacity to manage a truly unique situation. Although I was able to provide only limited support from a distance from March while outside of Bangladesh for the last 3rd of the fiscal year, the teamwork exhibited by the international team of administrative and medical personnel helped LAMB weather the storm.

I would like to thank Almighty God for his protection on our staff and the blessing of external financial assistance when hospital patient numbers dropped precipitously with the Government enforced lockdown of the country. We are pleased that since the opening up of the country in June, 2020, patient numbers have increased and work has returned to some semblance of normality.

I thank all of our supporters and partners in Bangladesh and around the world who all contribute so significantly to the outcomes as presented in this annual report. I hope that you find the information both encouraging and inspiring.

**Kyle Scott**  
LAMB Executive Director

## Introduction

Through steady economic growth, Bangladesh is expected to emerge in 2021 as a Middle-Income Country, (MIC). Nevertheless, challenges remain, including internal inequities (urban-rural, majority-minority), health service quality and accessibility, and social determinants of health such as early marriage (world's highest rate of under-15 girls' marriage). LAMB works toward improved health of Bangladeshis as well as strengthening local health systems for sustainable contributions to universal health coverage. As Executive Director Kyle Scott noted in his message, LAMB is further developing the conceptual and practical framework for organizing work and reporting according to programs. This report recounts stories of impact, including that of Covid-19, as well as describing programs and some plans for deliverables in FY2020-21.

## LAMB Strategic Plan 2019 to 2023

A brief summary of strategic priorities includes progress toward LAMB's improved capacity to contribute to improved health, responsible leadership, community ownership, and pro-poor health policy and implementation. All LAMB planning and implementation is founded on a cross-cutting understanding of wholistic and integrated initiatives which demonstrate Jesus' love and care to those in contact with LAMB, so "That All May Have Abundant Life."



**Wholistic and Spiritual Health.** LAMB continues its effort to wisely live out its Christian identity in the multi-faith context of Bangladesh. In FY2019-20, LAMB managers sought artful compromise in diverse justice issues, eg acceptable uniform dress requirements and variable compensation for higher- and lower-level staff. In FY 2020-21, LAMB hopes to make progress in convening a multi-faith discussion group to promote wider engagement and understanding.



**Improved Health.** Mental and emotional health was the area of greatest overall program development, with initial training of community adolescent facilitators, and through them, peer educators and lay counselors. Next year the team expects to publish results of its extensive baseline and action research findings, as well as more firmly establish a mental health clinic in LAMB Hospital. The Health Access program plans to further validate the criteria to assess and target the very poorest to reduce financial barriers for potential services users.



**Responsible Leaders.** Leadership training was designed and piloted with a group of young Christian professionals identified as rising leaders at LAMB. An external curriculum is in earlier stages of implementation with a mixed group of managers. With the close-out of 2 projects, 60 committees with local leaders, community representatives, health providers and officials are now demonstrating independent sustainability. Next year LAMB plans grant applications for quality assurance, financial accountability, and monitoring support to those committees.



**Community Ownership.** 'Transformation' program language energized and focused planning of mechanisms to address social determinants of health such as education (through LAMB School), ending child marriage, and supporting livelihoods and the environment through the new SABUJ (green) project. LAMB will continue building community resilience, with communities and church groups helping neighbors through floods or when needs arise.



**Pro-poor Policy and Implementation.** This has been a year where more professional media have been used to disseminate LAMB work. A British photographer and German videographer visited, and LAMB staff filmed videos. The materials were used in publications, for recruiting, public relations, and fund raising. Relational advocacy as well as formal presentations are critical, and LAMB will pursue opportunities to present at national and international meetings in FY2020-21, using advocacy papers on reproductive health and universal health access.

## Programs at LAMB

The graphic below illustrates LAMB’s integrated programs through LAMB departments. This ensures good planning, implementing, monitoring and reporting across the various departments of LAMB to seek and use resources with increased efficiency and effectiveness. This program approach will help LAMB better align contributions toward board-established goals. Rather than organizing primarily around functions, the program approach looks at how the same functions serve different goals.



The WHO Health Systems Strengthening approach is similar, where interconnected parts come together to promote, restore, and maintain health. **A responsive system adapts existing functions to new health challenges, such as Covid-19.** LAMB was positioned well when the pandemic re-ordered priorities for service methods (eg protecting patients and staff with PPE supplies and isolation wards), training needs (use of PPE, proper handwashing) and methods (transitioning to online training and education).

LAMB programs listed and described in this report model a wholistic approach with appropriate service practices designed to be accessible to and benefit the poor. Impact and outcomes from model practices are analyzed, linked to details of implementation, and the Advocacy Program equips staff to disseminate those best practices where appropriate.



# 2020 Impact



## Wholistic Health through Spiritual and Wholistic Health Program

**63** days of continuous prayer for Bangladesh and world-wide Covid-related issues by 71 members of a private LAMB Facebook group, with daily requests distributed to **multi-faith** LAMB staff.

**7** chaplains and **2** from the mental health team **listened to, counselled, and prayed with** patients, family members, health care providers and staff through Covid and health-related crises.

**36** trained facilitator will develop **540** “Aunties on the Bench,” locally-trusted women who will provide mental health support to adolescents as lay counsellors.

**20** church volunteers are using creative **scripture teaching** materials from Mongol Mela (Blessing Fair) to reach out to children in their community.



## Improved Health through Universal Health Coverage Program

**11.2%** reduction in number of babies born prematurely in Rangpur District through Born on Time community health project.

**33%** fewer neonatal deaths in 2 subdistricts where LAMB has provided household to clinic to hospital **continuum of care** for nearly 25 years.

**24%** caesarean section rate at LAMB Hospital, compared to 83% nationwide average at private clinics.

**80** unions (population approx. 32,000) had access to **safe normal deliveries** through functionalizing government union-level health centres and satellite clinics.

**102** women had **free of cost repair** of female genital fistula or 4th degree tears (81% dry at discharge).

**13** questions used by LAMB research staff on the LAMB Area Poverty Index (LAPI) survey identified 163 extremely poor pregnant mothers to receive cards guaranteeing free clinic/hospital care.

**80** children with corrected **club feet** after Ponzetti (serial casting) treatment through Rehab Centre.



## Responsible Leaders through Sustainable Leadership Development and Health Workforce Programs

**90%** of UH-FWC management committees in 6 subdistricts of Rangpur, and 100% in Parbatipur are continuing services with local funds for salaries of community-based midwives and 24/7.

**>55 lac** taka held in Parbatipur sub-district committees’ bank accounts to fund future plans.

**29** Union Councils successfully advocated with district officials to obtain **budget support** for clinics from Local Government Support Program (LGSP).

**20** staff members participated in an initial phase of Christian leadership and management training.

**125** nurses, **89** midwives have **graduated** to date from LAMB training programs. Nurse deployment: 35% gov’t, 58% NGOs; midwife deployment: 40% government, 30% Rohingya camps, 30% NGOs.



## Community Ownership through Social Transformation Program

- 1 municipality (Parbatipur) is separating trash, transporting recyclable waste to women to make products as livelihood support.
- 9 social support categories (measured by light-wheel comparison) showed improved **volunteerism** over the last 2 years in Nawabganj subdistrict.
- 2 church youth groups participated in coaching primary school children in school lessons, Scripture stories, health and hygiene.
- 130 LAMB English Medium School students continued **learning** online despite Covid- 19 restrictions.
- 1380 parents and local leaders signed pledges to end early marriage.



## Pro-Poor Health Policy and Implementation through Advocacy Program

- 11 **video messages** and stories were recorded and disseminated through LAMB networks to raise awareness of the approaches and impact of LAMB work. A leaflet with key services for the poorest describing quality measures was distributed locally to counter misinformation about LAMB.
- 1 webinar sponsored by UNFPA **fistula** program allowed LAMB's Dr. Bea Ambauen to describe hygiene measures allowing continued services, resulting in at least one centre re-starting fistula surgery.
- 6 private training centres, among which LAMB is a leader, regularly meet in Dhaka and host visitors to LAMB to update influencers on the Diploma in **Midwifery** Program, a high-profile initiative of BRACU-U.
- 3 Santal (**indigenous minority**) midwives were highlighted as part of a UNFPA public campaign to raise the profile of the need for quality maternity services by providers who speak their native language.
- 11 **Christian hospitals** and clinic leaders planned for, then representatives met with senior health officials to advocate for revisions to hospital licensing regulations for non-profit institutions.
- 556 mothers and their newborns were tracked for **research** into preventing neonatal infections, part of the pilot A Plus study, a partnership between LAMB and icddr,b in Dhaka.



Santal Youth





## COVID-19 RESPONSES

### Patient Care: Hospital and Community Clinics



Handwash Stations  
\*5 additional at hospital  
\*22 new at community clinics with safe delivery services



The triage system screened for possible Covid symptoms



24 hrs/7day services with isolation wards for labouring and general patients.



Staff were provided appropriate PPE and patients given teaching aids for home care.



## Community Prevention

### Risk Communication and Community Engagement

Seeking to reduce the fear of local residents, LAMB also compiled available risk reduction information to produce banners and leaflets for distribution throughout LAMB working areas to help people understand hand washing, mask wearing, and social distance.







## Staff and Operations Relief: Food Distribution, Cash Transfer

The initial days of Covid-19 prevention lockdown were filled with planning and adapting facilities for pre-screening all patients for symptoms of Covid-19 and providing isolation wards. LAMB was able to maintain patient care at a time when income was sharply reduced by the nation-wide lockdown. Staff agreed to salary reductions graduated by level, some reduced work days, and others were furloughed through the lockdown, saving money for longer-term job sustainability.



Financially, LAMB fared surprisingly well, through increased international donations and reduced expenses due to fewer services and restricted field activities. LAMB ended the fiscal year in a stronger position than last year.

Staff accepted these decisions, as most understood the pandemic significantly affected LAMB's income over the last third of the fiscal year. Even considering those reductions, many LAMB staff joined international supporters, in donating for LAMB and community relief.

Support for LAMB Covid-19 Response		
Hospital	Relief	Operations
Tk 3,042,688	Tk 53,58,856	Tk 49,17,791
USD \$36,244	US \$63,834	US \$58,580

## Project Support Services Covid Response

### Security

- Developed and implemented new changes regarding visitor in-take management
- Compassionately coached patients and guests on best practices (wearing masks/washing hands)

### Maintenance

- Created new structures and devices, including innovative handsfree soap pump stations, numerous sink basins, and a Covid observation unit

### Vehicles

- Ventured outside of the compound during lockdown to obtain essential goods and transport staff to critical meetings
  - Transported expats departing the country to Dhaka

### Dhaka Office

- Assisted procurement and government affairs on crucial activities
- Assisted staff that had essential travel responsibilities in Dhaka

### Procurement

- Worked around the clock to procure difficult to source PPE and medical items
- Compassionately educated vendors on how to submit email bids

### Public Relations

- Communicated with government officials for support and vital information
- Educated and encouraged shop owners outside the gate about the importance of Covid best practices

### Information Technology

- Coached LAMB staff on the use of distance media for conducting meetings over the internet
- Found solutions to increased network demands

### Guest House

- Provided a safe place for hospital staff in the Covid unit to stay and eat
- Assisted hospital housekeeping with their increased duties

### Human Resources

- Communicated and explained new organizational processes and practices
- Implemented emergency staffing decisions

### Stores and Inventory

- Created and adapted to processing and distributing vital materials, such as face shields, gloves, masks, and hand sanitizers.





## Wholistic, Spiritual Health Program Description, Outcomes

The purpose of this program is for LAMB to demonstrate loving service and explain the experience of love as coming from staff following the example of Jesus. All staff are equipped through training in mission, vision, values, and how to tell LAMB’s story in ways that are acceptable in a pluralistic religious context. Wholistic health is seen as LAMB and partners pursue and practice relational peace (shalom, fullness) as part of health. This will be achieved through integrated, wholistic planning, including providing emotional (counseling, safeguarding) and spiritual helpers with other physical and social health interventions.

During Covid lockdown, daily prayers were distributed via email and Facebook group. Hospital and community chaplains provide mobile-based prayer support, especially helpful for field staff during the pandemic lockdown time.

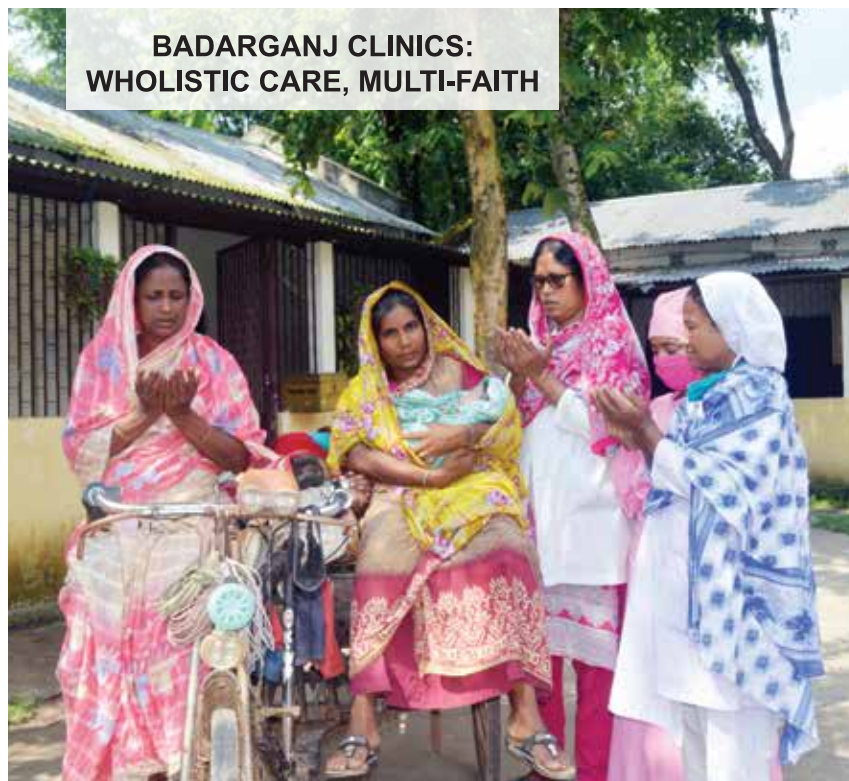
Another type of community wholistic health initiative is through local churches, where ‘Mongol Mela’ (Blessings Fair) material provides simple children’s scripture teaching. Church groups pursue local projects with encouragement from scripture truth.

### ***New Initiative: Integrated Child Development Program (ICDP)***

Parenting training has started in the International Child Development Program (through Normisjon). Trained facilitators encourage parents or care-givers to enable children, particularly vulnerable ones, to achieve their full potential. After piloting, the Training Center expects to roll out this training for churches and communities.



*“I have learned to study the scripture and how to make a vegetable garden in the home yard from our scripture reading group.” Kajoli, Nawabganj*



*Birthing centres in Badarganj have provided health services for over 20 years. Caring community midwives uphold LAMB values and provide some spiritual care with the support of the local committee and community.*





## Universal Health Coverage Program and Outcomes

Based on nearly 40 years of providing a continuum of care from household to clinic to hospital, LAMB programs adopted WHO Health Systems Strengthening approach to health improvement for rural northwest Bangladesh. The overall Universal Health Coverage program is divided into Health Access and Health Services Programs.



### HEALTH ACCESS PROGRAM

The MIS-R department developed the LAMB Area Poverty Index (LAPI) as a short (13 questions), easily completed questionnaire that would identify the poorest families, especially those with inability to pay for maternity care. The effort arose out of a recognition that the poorest families may not even be getting to the gate of LAMB hospital where they might be eligible for poor fund. Since August 2019 newly pregnant women in Parbatipur Upazilla whose households had been assessed previously as falling in the lowest 20% of the country economically (compared with Bangladesh Demographic Health Survey data) were assessed using the LAPI questionnaire. Answers to the questions are weighted according to perceived impact on overall economic solvency and ability to pay, and a cut off set for the poorest mothers. Women under the cut off are issued a card with their picture, personal identifying details, and a list of free facilities available at their local safe delivery unit, or LAMB hospital. To date 163 women have been issued a card for free care. The plan is to further analyze where card holders deliver and validate the system against the gold standard asset survey in the coming year.

**“ONE KEY DELIVER-ABLE OF THE HEALTH ACCESS PROGRAM WAS DISTRIBUTING ID CARDS TO THE POOREST PREGNANT MOTHERS TO FAST TRACK ACCESS TO SUBSIDIZED SERVICES AT LAMB HOSPITAL AND COMMUNITY DELIVERY CENTERS”**

**Last year, 24% of total patients admitted in the hospital received treatment with a free or subsidized cost. For outpatients this was 7%.**



**HEALTH SERVICES PROGRAM** delivers household to clinic to hospital continuum of care. Clinical provision includes the LAMB Hospital, Disabled Child Rehabilitation Centre, and in community health facilities (government and independent social enterprises). Health promotion, disease prevention, case finding, and social mobilization occur in households and neighborhoods through paid and volunteer health workers. Impact includes increased antenatal care and facility deliveries, with reduced mortality of newborns and children. Disabled children have improved function, and more are able to attend school; recovered fistula patients trained as advocates refer the highest number of new patients.



### Strategic Initiative: Mental Health Program

In FY2019-20, this program sought to open additional pathways for care for those with mental and emotional health needs. Listening services were made available to staff dealing with stresses as a service provider during the Covid pandemic. There is continued development of the mental health program, including training for 'Aunties Benches' where lay counsellors will work with adolescents. The team is laying groundwork to improve community and hospital-based mental health care and support. Data collection was completed on a baseline survey, some results of which were presented in June 2020 at a seminar at the mental-health-focused Christian Connections in International Health meeting held online.



### Reproductive, Mother, and Child Health Outcomes

	Indicator		Current	Baseline
<b>Improved Access</b>	<i>Commcare BoT Project Monitoring Software Rangpur Dist.</i>	Preterm Delivery	7.8%	19% (BDHS '14)
		ANC X 4 visits	56%	47% (BDHS '17)
		Institutional delivery	81%	66%
	Government facilities	Cervical Cancer Screening	9 cases found 3 treated on spot	7500 screened
<b>Improved Survival</b>	Maternal Mortality Ratio per 100000 live births		245	195
	Perinatal Mortality Ratio per 1000 live births		42	59
	Neonatal Mortality Rate		20	30
	Infant Mortality Rate (<1yr old)		24	38
	Under 5 Mortality Rate		27	45
	TB Cure rate		98%	96%
<b>Improved Function</b>	Indicator		Service	Result
	Disabled children given assistive devices, # in school		#595	#607
	Club Feet Corrected			#80
	Female Genital Fistula and 4 <sup>th</sup> degree tear repaired		#76 #26	81% dry at discharge
	Prolapsed uterus: vaginal hysterectomies		#88	-
	Cured fistula patients trained as advocates		#20	#1 referral source



## Outcomes for Women with Fistula: Improved Quality of Life

Fistula patients are referred from 13 districts of the North. All care is free of cost for the patients. This year a total of 244 fistula patients were identified and 76 fistula patients had restorative operations at LAMB Hospital (number lower because of Covid restrictions).

Some were trained as 'Community Fistula Advocates,' a component of which is livelihood training. After receiving curative fistula repair surgery, 12 women were trained as tailors and received sewing machines. These women produced 2500 masks, prepared and packaged for sale (clean/disinfect, packaged in plastic sleeve). LAMB coordinated with them to facilitate market linkage at no cost to the women. The two ladies pictured below with certificates successfully advocated to receive government social support payments as fistula sufferers.



### Sanowara Went Home Dry

Sanowara went to school up to class 5. She was likely less than 18 years old when she got married and got pregnant right away. When she laboured for her first baby, suddenly the baby's hand came out first, so she had a cesarean section. In her second pregnancy, she had another cesarean section (not at LAMB Hospital). Right after the second operation, she noticed that she was constantly leaking urine.

Finally - 5 years later - she was found by a Community Fistula Advocate (CFA) and brought to LAMB. Testing by a LAMB gynecologist revealed a suspected vesico-cervical fistula. This was confirmed when she was taken for restorative surgery. The surgery was successful, but the cervix was very weak. Sanowara was strongly advised against any further pregnancies due to the risk her womb would rupture. She went home dry and with long-lasting family planning (Implanon) in place.





## Health Workforce Program and Outcomes

LAMB training seeks to deploy competent, caring professionals who contribute effective, responsive, health services accountable for quality care at hospital, clinics, and community-based health promotion. The Training Center, which is a leader in clinical skill development gained by practice at both the busy LAMB Hospital as well as nearby community clinic sites. The Program demonstrated remarkable flexibility and resiliency in quickly transitioning to online classes for nurses and midwives during the Covid lockdown period.



*Mukta Ara Akhtar is one graduate nurse who stepped into a new role as quality assurance coordinator for community delivery centres just as the Covid lockdown hit in March. Her on the job learning was propelled by the need to help design and deliver Covid 19-related practical training on PPE use, as well as strengthen the community midwives' commitment to remaining in contact with pregnant mothers. As a result, there was a less-than-expected dip in deliveries at community birth centres. Deliveries at LAMB Hospital actually increased from 2017/18 levels.*

### A Midwife's Duty

"At the end of April [2020], a pregnant mother came to deliver her baby at our Family Welfare Clinic. No hospitals or clinics were admitting her, as she had just returned from Dhaka, a high-risk zone. I and my colleagues were committed to help her. That is what we were trained for. By the grace of God Almighty she delivered a healthy baby boy. Later some journalists asked why I performed the delivery knowing the woman could have been COVID-19 positive. I said that as a front-line health worker it was my duty to respond. My co-workers and I were quarantined for 15 days after the delivery. Though a difficult and uncertain time, I felt proud I could fulfill my duty."





## Hand Washing Shows Love

An MBBS doctor at LAMB for 6 years now works in a Rohingya camp medical clinic. When asked what is different about his practice of medicine after his time at LAMB, he mentioned the simple practice of handwashing before seeing any patient. He observed senior physicians at LAMB regularly washing hands during rounds and in OPD, and recognized it as part of the LAMB 'culture.' It had also become his unconscious habit, that he only recognized as different seeing its contrast with his current setting. He connected this to following the example of Jesus as a servant and healer, a practical action which demonstrates the priority of God's loving care for people (and is of course a best practice in infection control). He encouraged his current employer to install washbasins in their clinic. When Covid 19 came, the clinic was ready for the increased need of handwashing. In a time of increased sensitivity to this habit, we believe this young professional is acting as a model himself.



Nursing students begin their journey toward a lifetime of caring service.





## Sustainable Leadership Program and Outcomes

The Sustainable Leadership Program ensures community projects contribute to local leadership development through training, mentoring, and coaching for oversight (governance), administration and management of clinics or other social services. Christian wholistic leadership, as well as general management skills, are built for LAMB and other organizations, in areas such as vision and direction, resource management, advocacy, and change management.



## Community Managed Health Care



Committees and groups sat with many government officials many times to finally receive authorization for local UH-FWC management committees to deploy C-SBAs for the safe delivery units to continue 24/7 services. More than 90% of UH-FWC management committees in the 6 sub-districts of Rangpur, and 100% in Parbatipur sub-district are continuing services with local funds for salaries and materials. Parbatipur committees have >55 lac taka deposited in their bank account after meeting the salary of CSBA and other necessary needs, so can plan for the future.



## Liaison with Health Officials and Elected Officials

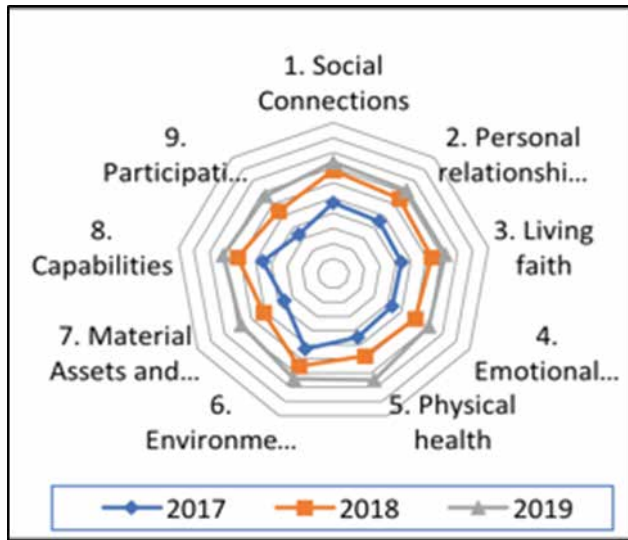
The Government Directorate of Family Planning is providing necessary materials, equipment, medicines and training to the safe delivery facilities and service providers. The Local Government Support Program (LGSP) has committed to allocate government funds to 29 clinics, to continue services after phase out of the Born on Time project in Rangpur District. Some management committees (21) already purchased ambulances for effective referral.



## Community Transformation Program, Outcomes

The Community Transformation Program will see communities take responsibility to address social determinants of their health and wellbeing, implement social risk protection activities, and advocate with people in power to use their influence to support just access to social development opportunities.

### CT1 Social Support: Churches Engage Neighbours



The light-wheel chart at the left provides a glimpse of how one community assessed their change over time in stronger wholistic interrelationships of congregations.

*“Our scripture study group saves handfuls of rice and uses that in lean periods.”*

*Pastor*

*“To prevent dengue, we cleaned our house area with village people. Our neighbours responded positively and took part with us in the activity.”*

*Group facilitator*



*“I would like to give thanks to the scripture study group for the campaign on hand washing in our school. This is a very important education initiative. I like to give thanks those who are involved with the initiative.” - School teacher, Nawabganj.*





## Social Support Initiatives by Community Groups Impact Lives



*Youth group coaches younger children who speak Bangla as their second language in school lessons, health, hygiene, scripture.*



*Women's self-help group uses own funds to meet their needs*

*One local youth group contributed to Covid-19 prevention through neighborhood handwashing clinics.*



*Tree planting community initiative*

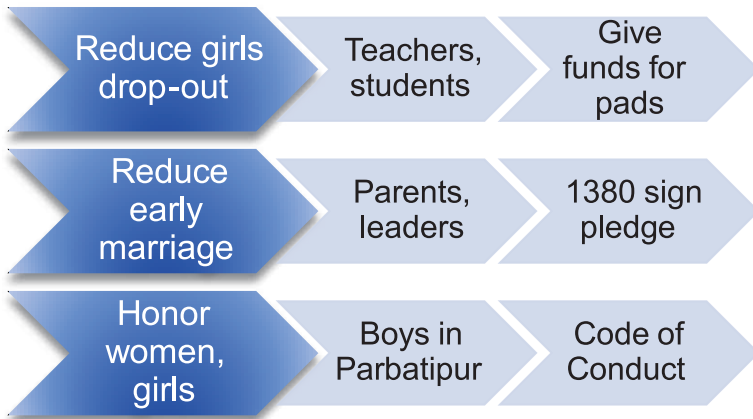


*Adult literacy class led by women for women*



## CT2 Ending Child Marriage

In this program, parents, leaders and community people are mobilized to develop initiatives which allow expressions of new norms, attitude and behaviour regarding adolescent sexual/reproductive and mental health.

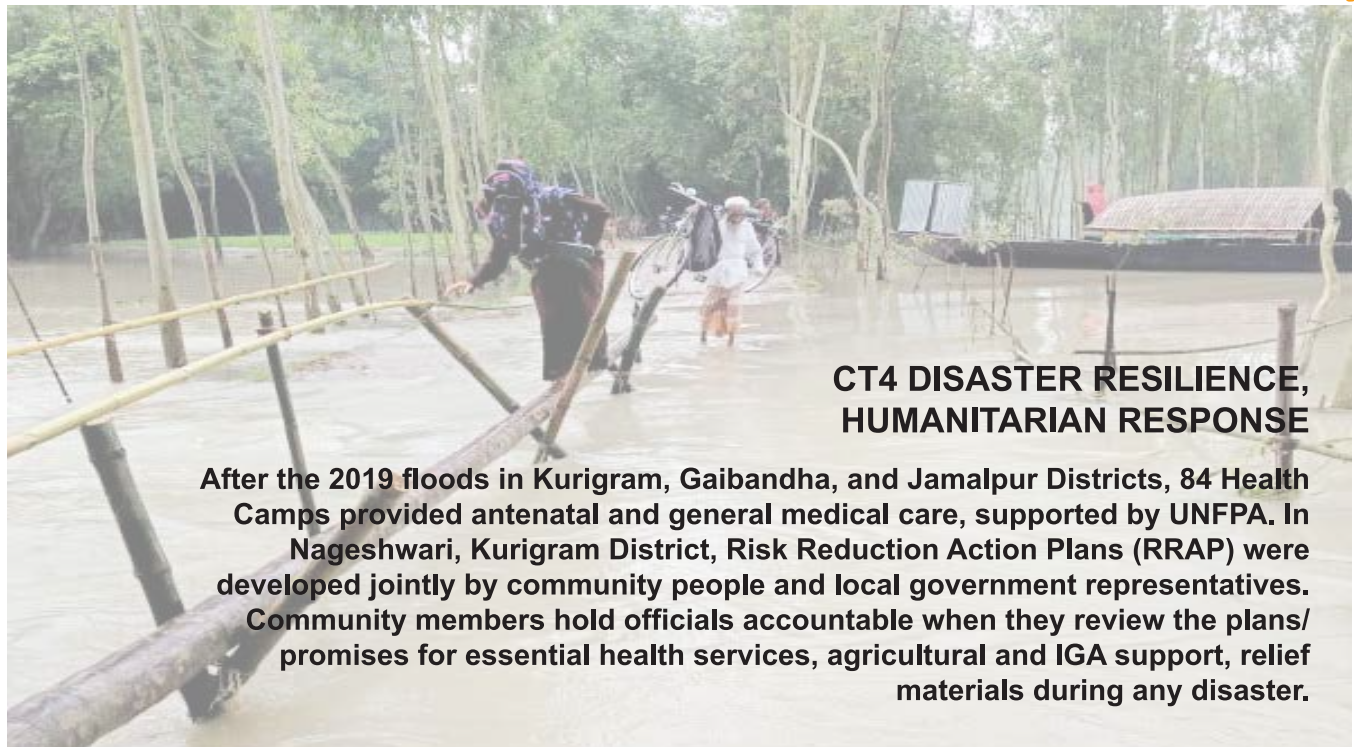


## CT3 Environment, Livelihood

The expected outcome of this program is a functional waste management system, including renewable energy and recycling, modeled by the local committees in LAMB working areas through collaborative engagement of authorities, institutions, and women's groups.

**New Initiatives: Shyamol Bangla Waste Management Project** started in April 2020 in Parbatipur. The municipality is already seeing separation of trash and pathways for the recyclables to go to women to make products.

**LAMB Hospital Environment: Treatment Plant, Solar Energy** Environmental protection is an important part of hospital management. In cooperation with Christian Engineers for Development and Cranfield University, an effluent water system and solid waste management plan have been drawn up, to be partially funded under the Shyamol Bangla project. LAMB campus will serve as a pilot site for innovation and a model for hospital waste management. Solar installation is planned in 2021.



### CT4 DISASTER RESILIENCE, HUMANITARIAN RESPONSE

After the 2019 floods in Kurigram, Gaibandha, and Jamalpur Districts, 84 Health Camps provided antenatal and general medical care, supported by UNFPA. In Nageshwari, Kurigram District, Risk Reduction Action Plans (RRAP) were developed jointly by community people and local government representatives. Community members hold officials accountable when they review the plans/promises for essential health services, agricultural and IGA support, relief materials during any disaster.



Flood-resistant crops support livelihoods for the vulnerable.

### CT5 Education Access

LAMB English Medium School during Covid 19 was able to sustain teaching through the transition to on-line learning (chart at right shows student access). Education is one of the crucial social determinants of health, and keeping girls in school is one way to prevent early marriage. LAMB also provides support for post-graduate training by a loan/scholarship program.

LAMB teachers used their science knowledge to contribute to hygiene methods; school cleaners showed commitment and ownership by working at the hospital during a time of fear.







## Advocacy Program and Outcomes

Core communication elements are being applied to advocacy targets prioritized for PPHP influence: developing data-grounded compelling messages, using creative methods of dissemination, and connecting messengers well with audiences. These will help achieve the purpose of LAMB's wholistic, pro-poor ethical framework and best practices promoted to influential leaders and policy makers.

*LAMB's part in the BRACU- midwifery program and the UNFPA campaign pictured, "Leave no one Behind," demonstrate the value of midwives in key roles as part of a strategy to improve maternal and newborn survival and prevent fistula.*



## Relational Advocacy

Hospital staff made tireless efforts and built on established relationships with government health officials resulted in relatively prompt allocation of PPE and other supplies to support LAMB's **COVID-19** response as a designated government isolation ward, contributing to **universal health coverage** in the pandemic. LAMB continued fistula surgeries during lockdown when patients were willing to come and allow time for preoperative quarantine. We learned another clinic re-started fistula surgeries after a UNFPA webinar for **fistula** centres in Bangladesh where Dr. Bea Ambauen, Swiss Ob-Gyn, shared LAMB experiences. High-profile visitors have praised LAMB's work, and assured us of help to address delicate fistula issues.



## Christian Organizations United for Health

The Christian Health Care Forum, Bangladesh, (CHCFB) established in 2018, in part through the leadership of LAMB, continued its advocacy in coordination with its member organizations during 2019-20. The primary point of focus was similar to 2018-2019; how to adapt regulations to allow "charity" hospitals to obtain licensure. Members, including representatives from LAMB, met with senior health officials on several occasions to discuss the regulations (restrictions on bed numbers according to unrealistic and unsustainable doctor/nurse to bed ratios). In January, 2020, LAMB received a temporary license from the DGHS, but the CHCFB is also now working together to advocate for continued capacity building among Bangladeshi professionals.



## LAMB Annual Report Data FY 2019-2020

	Jul 19 to Jun 20	Jul 18 to Jun 19
<b>CHDP General Information</b>		
Upazillas (2019, + all Rgp Div)	58	107
Population estimate	25,623,165	21,052,896
Community Health Workers	455	907
Village Health Volunteers	295	660

<b>Mother child health (MCH)</b>		<b>136 unions</b>
Villages (Population varies)	11,863	10,839
Households covered	4,350,331	4,881,324
Safe Delivery Unit	14	10
Family Welfare Centers (FWC)	102	126
Community Clinic(CC)	211	495
C-SBA/nurse	169	265

<b>MNCH SDU data (LAMB data)</b>	<b>5 unions</b>	<b>5 unions</b>
Antenatal Care - clinic visits	6,302	9,243
Family planning clinic visits	1,883	2,107
Child 0-4 yrs. old clinic visits	105	248
Child >5yrs, adult clinic visits	560	936
Total deliveries in LAMB SDU	1,170	1,304
	<b>20 unions</b>	<b>20 unions</b>
Pregnancy surveillance	12,221	10,656

Project Opening/Closing Impacts Clinic Number, Population

<b>MNCH FWC data (GOB data)</b>	<b>141 unions</b>	<b>141 unions</b>
Child 0-5 yrs. old - clinic visits	28,739	29,704
Child >5yrs old - clinic visits	299,338	305,359
Antenatal Care - clinic visits	131,332	168,537
Family planning clinic visits	49,317	42,114
Total deliveries in FWC	13,747	17,917

<b>Adolescent Health</b>		<b>10 unions</b>
Teaching/ counseling	26,743	10,435
Library	102	30
Theatre for development	562	10

<b>Disabled Child Rehabilitation</b>	<b>3 upazilas</b>	<b>3 upazilas</b>
Community Clinics	29	30
Assistive devices distributed	607	690
Health Teaching participants	20,620	41,641
Admitted to Rehab centre	177	373

<b>TB Control</b>	<b>4 upazilas</b>	<b>4 upazilas</b>
Sputum tests	17,031	17,021
Patients - new and relapse	1,487	1,417
Patients- cured/treatment complete	1,547	1,285

<b>Disaster Resiliency/Response</b>	<b>1 upazila</b>	<b>1 upazila</b>
Awareness Session on DRR	280	942
Flood Area Mobile Clinics - 3 Districts	84	

	Jul 19 to Jun 20	Jul 18 to Jun 19
<b>HOSPITAL - Inpatients (#beds)</b>		
Total	155	115
Male	7,004	7,273
Female	1,752	1,823
Obstetric	5,252	5,450
Paediatric 0-4 years	3,145	3,279
Paediatric 5-14 years	2,248	2,300
Medicine, surgery, gynaecology	158	169
	1,453	1,525

<b>Operation /procedure</b>		
Mothers delivered	2,450	2,526
Caesarian Section	565	601
Surgery (gynaecology, general)	788	842
Obstetric fistula cases	252	243

<b>Outpatients</b>		
Total	46,410	57,002
Male	16,051	20,291
Female	20,666	25,977
Antenatal	9,693	10,734
Children 0-4 years	5,416	6,175
Children 5-14 years	3,314	4,232
Medicine, surgery, gynecology	27,987	35,861
Eye	339	462

<b>Laboratory Services</b>		
Blood Transfusions	518	548
Laboratory Tests	68,775	75,811

<b>Fistula Activities</b>		
Fistula workshops	125	105
Workshop participants	6,654	10,956
Fistula advocates Trained	20	20

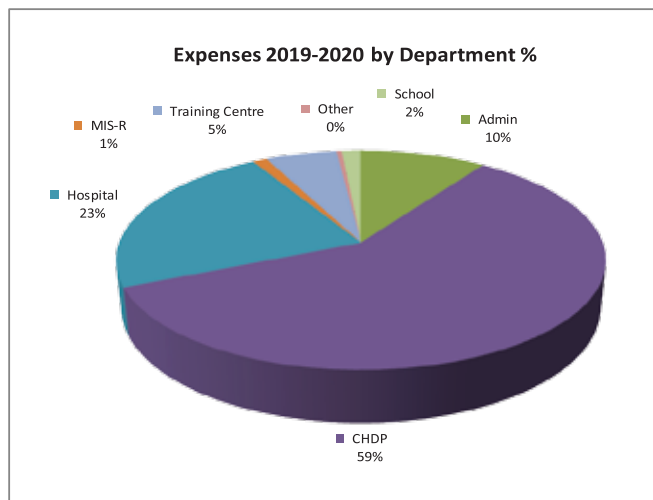
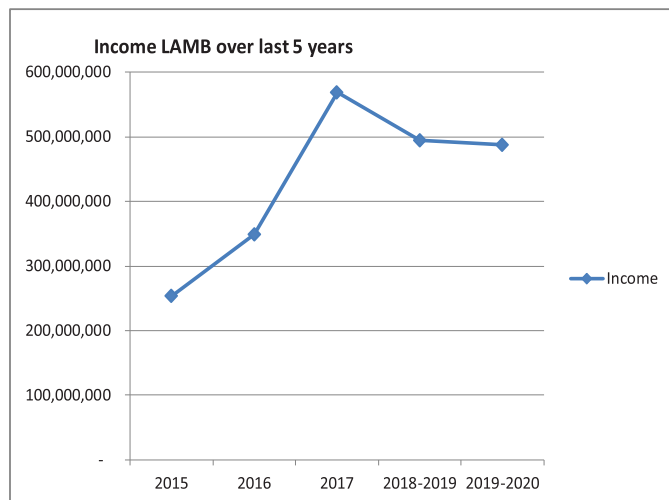
<b>TRAINING CENTER</b>		
Total Courses	17	16
Nursing Institute 3yr. students	123	83
Midwifery 3 years students	96	62
6 month C-SBA	0	107
KMC, HBB, Primary Health, Etc.	686	605
Total Trainees	905	774

<b>SCHOOL</b>		
Students	138	123
Teachers	31	22

<b>LAMB STAFF</b>		
Total	888	1,490
Male	371	417
Female	517	1,073

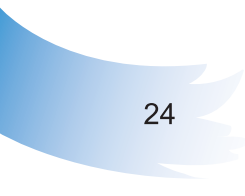
## FINANCIAL STATEMENT (1st July'2019- 30th June'2020)

Amounts in Taka	Jul'19-Jun'20			Jul'18-Jun'19
	LAMB	LAMB-Plan partnership	Total	Total
<b>Income</b>				
Hospital Fees and Medicine	69,066,086		69,066,086	70,071,115
Training Centre	22,891,368		22,891,368	22,243,080
School	5,830,651		5,830,651	4,986,717
Other activities	49,012,304		49,012,304	27,532,096
Grants	183,061,641	154,991,374	338,053,015	350,965,942
<b>Total Earned Income</b>	<b>329,862,050</b>	<b>154,991,374</b>	<b>484,853,424</b>	<b>475,798,950</b>
Donations	2,267,648		2,267,648	18,466,657
<b>Total Donations to LAMB</b>	<b>2,267,648</b>	<b>-</b>	<b>2,267,648</b>	<b>18,466,657</b>
<b>Total Income</b>	<b>332,129,698</b>	<b>154,991,374</b>	<b>487,121,072</b>	<b>494,265,607</b>
<b>Expenses</b>				
Operating Expenses				
Salary and Benefits	130,466,915.60	96,029,927.00	226,496,842.60	251,594,258
Health	90,913,876.31		90,913,876.31	79,598,197
Family Planning & Population	424,687.00		424,687.00	1,876,133
Public Health	35,870.00		35,870.00	-
Education, Youth and Culture	2,887,023.13		2,887,023.13	2,686,475
Social Welfare	401,131.14		401,131.14	268,763
Women & Children Affairs	3,406,687.65		3,406,687.65	5,874,805
Ethnic minority affairs	2,492,588.18		2,492,588.18	968,112
Disaster, Relief & Rehabilitation & Housing	12,973,079.66		12,973,079.66	4,202,941
Environment, reservation and development	9,261.00		9,261.00	62,020
Depreciation	6,308,781.80		6,308,781.80	6,189,359
Project Capital Expenses	4,169,116.52	15,821.00	4,184,937.52	1,813,808
Supplies And Services	17,742,849.56	16,903,842.80	34,646,692.36	44,794,074
Training, Meeting and Entertainment	9,096,003.68	36,318,042.00	45,414,045.68	87,319,200
Repair and Maintenance	48,425.89	3,858,551.62	3,906,977.51	17,238,741
Project Material Expenditure	503,358.70	8,617,317.00	9,120,675.70	8,501,157
Emergency Relief	42,031,238.02		42,031,238.02	
<b>Total expenses</b>	<b>323,910,894</b>	<b>161,743,501</b>	<b>485,654,395</b>	<b>512,988,043</b>
<b>Operating result</b>	<b>8,218,804</b>	<b>6,752,127</b>	<b>1,466,677</b>	<b>18,722,436</b>
<b>Capital Expenditure</b>				
Land	100,000		100,000	25,236
Building addition	471,052		471,052	556,162
Medical and Office equipment	919,023		919,023	1,418,865
Furniture	431,279		431,279	123,850
Vehicle/Bicycle			-	4,796,075
<b>Total Capital Expenditure</b>	<b>1,921,354</b>	<b>-</b>	<b>1,921,354</b>	<b>6,920,188</b>





**Note:**





## Glossary

ANC	Antenatal Care or Antenatal Clinic
BRACU	BRAC University
BDHS	Bangladesh Demographic & Health Survey
CBO	Community Based Organization
CC	Community Clinic
CCM	Church and Community Mobilization
CCT	Church and Community Transformation
CD	Clinically diagnosed
CEOC	Comprehensive Emergency Obstetrics Care
CFA	Community Fistula Advocate
CFDE	Community fistula diagnosis events
CG	Community Group
CHCFB	Christian Health Care Forum, Bangladesh
CHDP	Community Health and Development Program
CHW	Community Health Worker
Commcare	Community Care (MIS Software)
CNR	Case notification rate
CSBA	Community Skilled Birth Attendants
CSG	Community Support Group
DGHS	Director General for Health Services
DT	District
DRR	Disaster Risk Reduction
ECM	Ending Child Marriage
ED	Executive Director
EP	Extra pulmonary
FWC(MC)	Family Welfare Center Management Committees
GBV	Gender-based violence
GoB	Government of Bangladesh
HF-DRR	Health Focused Disaster Risk Reduction
HBB	Helping Babies Breathe
IGA	Income Generating Activities
ICDP	Integrated Child Development Program
KMC	Kangaroo Mother Care
LAMB	Lutheran Aid to Medicine in Bangladesh
LAPI	LAMB Area Poverty Index
LGSP	Local Government Support Program
MNCH	Maternal Newborn Child Health
MIS-R	Management Information System-Research
MoHFW	Ministry of Health and Family Welfare
NGO	Non-Government Organization
OPD	Out Patient Department
PNC	Post Natal Care or Post Natal Clinic
PPE	Personal Protective Equipment
PPHP	Pro-Poor Health Policy
RRAP	Risk Reduction Action Plans
SDU	Safe Delivery Unit
SHOW	Strengthening Health Outcomes for Women and Children
SRH	Sexual and Reproductive Health
SS-FGF	Stop Suffering caused by Female Genital Fistula
TB	Tuberculosis
UH&FWC	Upazila Health & Family Welfare Center
UNFPA	United Nations Population Fund



## LAMB Activities Continued Despite Coronavirus Restrictions Hospital, School, Field Work, Relief, Nursing/Midwifery Classes



### World Mission Prayer League (LAMB Hospital)

An Organization of World Mission Prayer League, Inc (USA)

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