

# LAMB

## Annual Report 2021 - 2022



ল্যাম্ব  LAMB

যেন জীবন পরিপূর্ণ হয় | সমন্বিত পল্লী স্বাস্থ্য ও উন্নয়ন  
That all may have abundant life | Integrated Rural Health and Development

## MISSION VISION & VALUES

### 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.

### Organizational Identity

“LAMB is a Christian international organization which provides values based, service driven, appropriate levels of excellent care that all, especially the poor & vulnerable, may have abundant life. We serve God through serving the poor.”

### 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 BOARD CHAIRPERSON



DR. PETER HALDER  
LAMB BOARD CHAIRPERSON

I am very excited and delighted to know that LAMB is going to publish their Annual Report for 2022.

We are so grateful to our faithful Lord God for his grace and safety to serve his people in the year 2021-2022. We are happy that we are able to overcome COVID-19, though still there are some challenges around us. But it is very true that through the year we have learnt a lot which will be helpful to run LAMB programs and activities in the future.

I am so happy to know that LAMB is working hard to find a way to help the people who are suffering from mental depression and anxiety. I am sure this is a very good initiative because millions of our people are in need of help.

In the midst of it all, LAMB was able to serve so many people as well as expand its infrastructure too.

I am also expressing my gratitude to the local and national government officials, leaders for their heartiest support, and the Executive Director and his staff team for their total commitment and services for the betterment of the community people that the LAMB is committed to serve.

# MESSAGE FROM THE EXECUTIVE DIRECTOR



KYLE D SCOTT  
LAMB EXECUTIVE DIRECTOR

I am pleased to present LAMB's Annual Report (July 2021 – June 2022). It is my hope that you take some time to review last year's achievements of LAMB and her partners, with the blessing of God. It is made possible through God's grace, our successful partnerships with local, national and international stakeholders, including our donors, partners, the Government of Bangladesh, our International Board of Directors and a dedicated and hardworking staff.

The information provided in this annual report includes just a small glimpse of the results of our work. It would be impossible in these few pages to cover in detail the broad number and scope of LAMB's programs. Consider this report a small sample of the results and impact LAMB has had, which can be glimpsed in the stories of lives forever changed because of people experiencing the love of God through very practical interventions.

Over the last year much time and effort were spent on developing LAMB's organizational capacity to deliver quality programs. New networks have been established to enable LAMB to deliver more far-reaching services, such as mental health services for example, to meet the growing needs in this area. Many more examples exist.

I would like to request your prayers for the communities we serve; that they would find physical, spiritual, mental and emotional healing through the work we do. Many know that historically 'LAMB' stands for Lutheran Aid to Medicine in Bangladesh. But LAMB's name also stands for the name of our Great Healer (Matt 15:29-31\*), the Light of the World (John 8:12\*\*) and the Lamb who takes away the sin of the world (John 1:29\*\*\*). We do this work out of love for Him, "so that all may have abundant life" (John 10:10).

Thank you for your partnership and participation in this great work.

\* Jesus left there and went along the Sea of Galilee. Then he went up on a mountainside and sat down. Great crowds came to him, bringing the lame, the blind, the crippled, the mute and many others, and laid them at his feet; and he healed them. The people were amazed when they saw the mute speaking, the crippled made well, the lame walking and the blind seeing. And they praised the God of Israel. Matthew 15:29 – 31

\*\* When Jesus spoke again to the people, he said, "I am the light of the world. Whoever follows me will never walk in darkness but will have the light of life." John 8:12

\*\*\* John saw Jesus coming toward him and said, "Look, the Lamb of God, who takes away the sin of the world!" John 1:2

## LAMB STRATEGIC PLAN 2023 – 2027

LAMB has gone through a rigorous process of prioritizing the strategic focus for the next 5 years especially contributing to improved health, responsible leadership, community ownership, and pro-poor health policy and implementation. Throughout our work, planning our focus and programs, we want to demonstrate the love of Jesus to all in contact with LAMB in a wholistic way so that they may experience the 'abundant life' He wants us to have.

### Experiencing the Love of Christ

Through the character, behavior and words of LAMB staff and systems, people in contact with LAMB experience the love of Christ and are offered help to understand what they experienced.

### Wholistic Nature of Health

People living in healthy and just communities experience a wholistic and comprehensive state of well-being including physical, mental, social, spiritual and emotional health.

### Improved Health

People most in need, especially women, children and the poorest of the poor, have improved health.

### Pro-poor Health Policies

Women-friendly, pro-poor, appropriate health policies and systems are implemented by the Government of Bangladesh and other health care providers.

### Responsible Leadership

Leaders and people of influence including community leaders, health care providers, religious leaders and heads of families take responsibility for health and justice in their communities and advocate and apply Biblical/religious values.

### Community Ownership

Communities take ownership for their health and take responsibility to ensure equitable, accessible health and social systems.

## PROGRAMS AT LAMB

LAMB gives priority on implementing program activities that contribute to achieve national level goals, aligning with LAMB's aim to prioritize services and activities to reach the vulnerable and marginalized people, especially women and children.

### Spiritual Development Program

### Health Access Program

### Health Service Programs:

**Maternal, Newborn & Child Health including Sexual Reproductive Health Program**

**Mental Health Program**

**Obstetric Fistula Program**

**Disability Rehabilitation Program**

**Non Communicable Diseases Program**

**Palliative Care Program**

### Sustainable Leadership Program

### Health Workforce Development Program

### Advocacy Program

### Community Transformation Program

The graphic below illustrates LAMB's integrated programs through LAMB departments. This integration 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.



## 2022 IMPACT AND OUTCOMES



### IMPROVED HEALTH THROUGH UNIVERSAL HEALTH COVERAGE PROGRAMS



#### Health Access Program

LAMB aims to achieve three main purposes for Health Access program:

- To improve accessibility of LAMB health services to the poorest and most vulnerable (women, adolescents, children, indigenous and disabled).
- To ensure proper health care through effective management of poor fund assisted by the hospital and CHDP.
- To model an accessible health service system to reach the poorest of the poor.

#### Health Accessed by the Poorest

Maternal, newborn and child health program provided subsidy cards to **190** poorest pregnant women in Parbatipur sub-district and safety net support to **238** pregnant women of C, D & E category (C refers to low socio economic status and E to the lowest status) in Nilphamari, Gaibanda and Kurigram Districts.

**56.4%** pregnant women who received a health subsidy card through other projects of LAMB delivered at LAMB Hospital/SDU/UH&FWC or in government hospital.

**82%** C, D & E category pregnant women delivered at UH&FWC by skilled birth attendants in Nilphamary District.



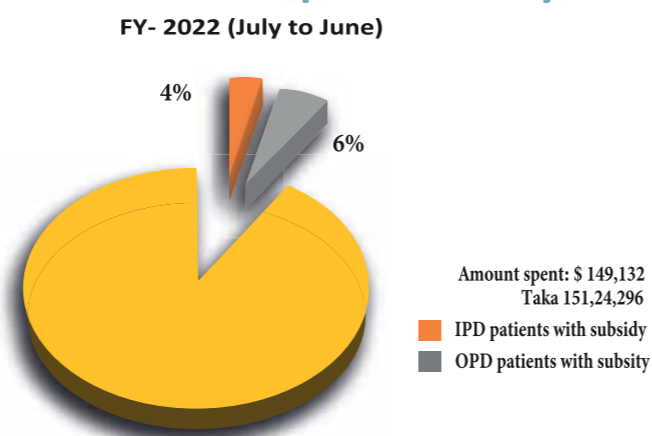
#### LAMB Modeled Accessible Health Service System: Poor Fund Facilities

With the support of many friends around the world, LAMB Hospital has been able to offer subsidized care to the very poor. This may result in no out-of-pocket expense for those who cannot afford their treatment.

In 2022 fiscal year (July'21 to June 22) **58,219** patients came to receive medical care at LAMB Hospital and we provided full or partially subsidized medical care to **6,285** in-patients and out-patients.

Over the last 15 years, LAMB has provided over **\$2.5** million in subsidy to those in need, with an annual average of **\$179,044** through 2021. We praise God for the generosity of so many.

#### Patients with full or partial subsidy



## Health Access Program

### LAPI Validation Process

#### Reaching the Poorest of the Poor

Although LAMB Hospital has a poor fund that offers free or subsidized care to those most in need, the reality is that the poorest of the poor often do not even make it through the doors of our hospital. So, how can we reach them? Let's take a look at how LAMB reaches the poorest mothers in our community to provide free or subsidized deliveries.

#### 1 Develop a Tool to Assess Ability to Afford Essential Healthcare

LAMB MIS-R Staff develop a quick but accurate tool to assess a family's ability to afford essential health care. This tool is being developed using information about assets and health care spending from 5000 households in Northern Bangladesh.



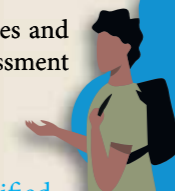
#### 2 Community Data Collectors Visit Homes

Local women have been trained in community data collection. These women collect data for all pregnant women in their neighborhood regarding antenatal care, delivery, and postnatal care. When women are known to be poor, the poverty assessment tool is used.



#### 3 MIS-R Staff Collect and Enter Household Data

LAMB MIS-R Staff collect the data from the communities and enter it into a central database. Data from the poverty assessment tool is used to identify the poorest of the poor.



#### 4 Mothers in Need are Visited and Verified

LAMB MIS-R staff visit a random sample of households to ensure that the poverty assessment tool has been used properly. If staff find significant discrepancies, they administer additional training to the community data collector.



#### 5 Cards are Given for Free or Subsidized Delivery

Mothers identified as the poorest of the poor are given a card that entitles them to free or subsidized antenatal checkups, delivery, and postnatal checkups at LAMB Hospital. A red card means that the full cost is covered. A green card means that the family must contribute approximately 710 taka (\$8) toward the costs of care.



#### 6 Mothers Deliver at LAMB Hospital

Card in hand, the pregnant mother can come to LAMB Hospital confident that she will be provided an affordable (or free!) delivery. This takes away any worry about hospital bills and assures the mother that quality health care is available to her!



#### Outcome

Of the mothers who received health subsidy cards through LAMB's LAPI Validation Process, **70%** received 4+ ANC check-ups, **72%** delivered in a facility and **76%** received 4+ PNC check-ups. (Data Source: MIS-R LAMB)

#### Momotaz



Momotaz's family of 7 was heavily in debt when she talked with MIS-R Monitoring and Evaluation Officer Nazimul Hossain. Her husband, Bahar, suffers from sickness often and is unable to work because of his health. Her

previous 4 children had all been delivered at home with the help of a neighbor. The family had little money for prenatal or postnatal checkups, let alone delivery. If Momotaz's pregnancy required a hospital delivery, it would force the family to sell their only asset, a cow, to cover the costs.

Receiving the health subsidy card allowed Momotaz to go to LAMB for 3 prenatal checkups before her delivery. When the time came, Momotaz was able to deliver at LAMB Hospital. Mom and baby were admitted for six days but did not have to worry about if their health care needs would put a financial burden on their family.

"My family and I have benefited greatly from this. We have received financial and mental peace. We proclaimed in our area, LAMB is indeed on the side of the real poor, our family is a shining example."



# 2021-2022 IMPACT AND OUTCOMES



## IMPROVED HEALTH THROUGH UNIVERSAL HEALTH COVERAGE PROGRAMS



### Health Service Program

Aiming to deliver across a continuum of care, LAMB adopted 6 sub programs under the Health Service Program which includes reproductive, maternal, newborn and child health, mental and emotional health, fistula care, disability rehabilitation and non-communicable diseases.

In Nilphamari, Kurigram, Gaibandha, Rangpur districts 80 UH&FWCs and safe delivery units (SDUs) are functioning. With the support of LAMB projects and people in these rural areas pregnant women and their babies are able to access essential health and MNCH care. The numbers below are collected from UH&FWCs, SDUs and LAMB MIS-R for the FY 2022.

#### At LAMB Hospital

75.74% were normal vaginal deliveries. 2,387 children age 0-4 were given pediatric care at LAMB Hospital.

#### At LAMB Working Area

64,980 ANC visits (service count).

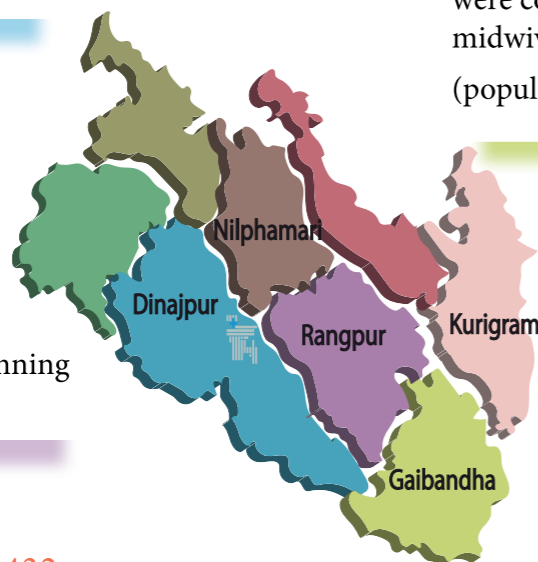
7,125 (33%) normal vaginal deliveries were conducted by trained CSBAs and midwives in these 80 unions (population approx. 32,000).

63.9% married adolescent girls of ages 15-19 years in Badargonj sub-district were using family planning methods (MIS-R, FY 2022).

26,560 women of reproductive age visited for family planning services.

94,432 (service count) >5 years old children visited for essential health care in LAMB working areas.

9,944 (service count) children age 0-4 received essential health care in LAMB working areas.



Home delivery rate is only 14.27% (n=3,073) in LAMB working area (MIS-R, FY 2022)



## Maternal, Newborn and Child Health Including Sexual Reproductive Health Program

LAMB's Maternal, Newborn, and Child Health Program seeks to deliver a continuum of care from household to clinic to hospital. Household care includes health promotion, disease prevention, case finding, and social mobilization that occurs in households and neighborhoods through paid volunteers and health workers. Clinical provisions include LAMB Hospital, Disabled Child Rehabilitation Center, and community health facilities, including UH&FWCs, CCs, and SDUs. There is a special focus on promoting midwife-led safe and respectful vaginal deliveries to counteract the new trend of choosing elective caesarean deliveries. The impacts of these programs are reduced maternal, newborn and child mortality by increasing number of antenatal visits, quality of antenatal care and facility deliveries.

### Reproductive, Mother, and Child Health Impacts and Outcomes

IMPROVED ACCESS	Indicator	FY-22	FY-21	BDHS 2017-18
	Breastfeeding rate within 1 hour of birth at LAMB	99%	98%	60%
	Adolescent birth rate in LAMB intervention area	90.4 per 1000	140 per 1000	28% or 280 per 1000
	Married adolescent delayed 1st pregnancy (at least up to 20 years of age)	74%	70%	Not available

IMPROVED SURVIVAL	Indicator	FY-22	FY-21	BDHS 2017-18
	Maternal mortality rate in LAMB intervention area	134 per 100,000	86*	173
	Neonatal mortality rate in LAMB intervention area	19 per 1000	20	38 per 1000
	Caesarean section rate	24.5%	25.9%	33%
Institutional delivery rate in the LAMB working area	85.73%	79%	49%	

\* Data collection on maternal mortality rate in LAMB intervention area in 2021 was poor due to COVID-19 Pandemic.



## COMMUNITY OWNERSHIP THROUGH COMMUNITY TRANSFORMATION PROGRAM

### Community Transformation Program and Outcomes

Economic and environmental sustainability, gender equality, quality education and community resilience are the key components of the Community Transformation Program.

**391** waste collection bins installed in different locations in Parbatipur municipality.

**17,705** community people and students had teaching to increase their knowledgeable about waste management.

**126** child marriages were stopped in Parbatipur and Nawabgonj sub-districts by the joint effort of LAMB's project staff and adolescent leaders.

**7,890** family men are directly involved in child marriage prevention activities and pledged to delay marriage of their children until age 18.

**323** religious/traditional/political leaders and local government institutions (LGIs) are directly involved in child marriage prevention activities and declare that they will make their area child marriage free.

**1,245** recently married girls are being supported to continue their education. After their marriage, they were struggling to stay in school, but LAMB's project provided them with the help they needed.

**4,513** target group members gained resilience-strengthening knowledge.

**115** students attended LAMB English Medium School.

### Reducing Health Hazards and Promoting Healthy Environment

A comprehensive waste management system has been established in Parbatipur municipality by the support of a project under LAMB's CHDP Department. People were taught the 3R's (reduce, reuse, recycle), waste segregation, and disposal systems for their household.

Moreover, color coded bins were installed in various locations around the city to dispose of solid waste. The project helped build the capacity of municipal staff and provided equipment support for the collection and transportation of waste to a central dumping place.

**18,316** students received orientation on waste management in the household and have been included in the Green Clubs.

**9** Green Clubs have formed in nine wards consisting of 25 students each. These clubs organize meetings every month and discuss different waste management issues.

**55** sets of portable plastic waste segregation bins and **7** concrete bins were installed at different sites across nine wards in Parbatipur. Fifteen schools in the municipality area received **250** bins of different sizes. The bins are fully in use at the moment.

Awareness was raised in **3,605** households, with **2,800** students, and many other groups through various programs such as educational sessions, and meetings. A substantial number of educational materials have been distributed among communities, and many billboards have been installed in the municipality for increasing community awareness.

## Access and Control Over Resources to Women

**50** beneficiaries learnt about compost making, **48** beneficiaries learnt about vertical/rooftop gardening. Almost all training participants received logistic support such as seeds, saplings and tools for composting. A small group of the beneficiaries started producing vermicompost commercially.

**90%** of female members of self-help groups and CBOs are employed in IGAs, such as, poultry, goat rearing, sheep rearing, small business (grocery shop), mortgage land in order to grow crops, vegetables with small loan or support from LAMB Project.

**5** fistula survivors received livelihood support (cattle) to start their own initiatives for economical solvency.

**53** adolescent girls continued their goat rearing, cow fattening and tailoring helping them economically to meet their family needs, and to continue their education.



Asrefa Akhter, a student of class ten, was struggling to continue her education due to the poverty of her family. The Ending Child Marriage Project identified her as an income generating activity initiator and supported her with 3 goats to rear. This small support brought a great change in her life and family. Within one year, she was able to buy a sewing machine from the goat rearing income. Now, she earns at least 1000/- taka per month by stitching as well as continuing the goat rearing project. Asrefa and her parents are very happy as she is able to continue her education and contribute to supporting her family's needs.



Sumaiya Begum belongs to a poor family of four in Majherchar village. She is 23 years old. Struggling to meet the needs of her family and with no savings, Sumaiya decided to join a self-help group and begin saving a small amount of money. She borrowed a loan and started raising a cow and cultivating a paddy of rented land. Through these efforts, Sumaiya earned 17,000 taka. Now, she is able to save in her savings group. This initiative has changed her position in her family and her savings group and her family's economic status has changed. Sumaiya now participates in decision making with her husband, happy to meet their family's basic needs and pay the educational expenses of her children. She shared that before the self-help group, she felt poor and helpless with no where to turn for help. Now, through LAMB's HFDRR Project, her eyes have been opened and she feels like she has hope.

## Responsible Leadership Development in the Community

LAMB's community health and development projects continued to work with the 80 UH&FWC management committees in Dinajpur, Nilphamari, Rangpur and Gaibandha districts. In the 6 sub-districts of Nilphamari District, **66%** of UH&FWC management committees are functioning well.

In Parbatipur **100%** of UH&FWC management committees are providing 24/7 safe delivery services with community skilled birth attendants (CSBAs). In LAMB working areas **85%** of UH&FWC management committees are able to conduct their management meetings regularly and they are maintaining proper documentation, monitoring UH&FWC activities and advocating for the community.

Community based organization leaders, self-help group members, influential individuals and change makers of all ages have been trained and motivated to take responsibility to support and continue health & community development initiatives. They hold elected leaders and local authorities accountable to their roles and responsibilities and work to influence decisions for the benefit of their community.

**11,954** adolescents, change makers, decision makers and group leaders received training on leadership and management or other capacity building training.

**2,690** women, self-help groups and CBO leaders received training on leadership, financial management and conflict resolution.

**883** adolescents, UH&FWC-MCs leaders, change makers and decision makers received training on leadership and management to ensure effective functioning of health facilities.

## Health Workforce Development Program



LAMB Training Center, now known as LAMB Learning and Development Center, aims to develop competent, caring health care professionals who contribute effective, responsive health services and are accountable for quality and respectful care at hospitals, clinics, and community based health promotion. Since 2012, **271** nurses and midwives have completed their 3-year diploma education from LAMB Nursing and Midwifery Institution. Around **94%** of those graduates are working all over Bangladesh.

Employers shared **100%** satisfaction with the quality of care of the health service providers who have graduated from LAMB.

LAMB aims to ensure that nursing and midwifery education is accessible to all who are interested and capable of studying, particularly those from disadvantaged community groups. Last year **59 (35%)** students with low socioeconomic status received a student loan or stipend to pay their educational costs.



Resma was a nursing student at LAMB's Nursing Institute and the journey to complete her nursing education was not easy for her. It was hard for her to adapt to the discipline and various restrictions initially. She loved the learning environment, sincerity and cordiality among students and instructors. After adjusting, Resma found her place and got good results on her exams. She received the opportunity to work as a nurse at LAMB Hospital and then as a Junior Instructor at the Nursing Institute. Resma is thrilled to work at the Nursing

Institute where she has graduated from. She enjoys sessions with the students and working opportunities with other instructors and peers. Resma is inspired by the senior staff who encourage her to continually improve her work. She loves to work in a team that values members equally and has accountability and transparency. She appreciates the supports she receives from peers or colleagues or supervisors. Resma is very thankful to the Almighty for this wonderful opportunity to work at LAMB.

## Technical Skill Development for Health Service Providers

LAMB Learning & Development Center (previously known as the Training Center) provides different training courses to improve the technical knowledge, attitudes and skills for health service providers and also for health workers at the community level. These trainings include safe surgery, fistula care, infection prevention, helping babies breath (HBB), quality care in the hospital, healthy pregnancy, basic mental health (coping skills) and primary health care courses.

**724** midwives, nurses, medical doctors, paramedics and community skilled birth attendants (CSBAs) received technical training and **1,343** health care providers and health workers or community members attended other short training courses. **90** hospital staff received technical training appropriate to their profession.

**347** hospital staff participated in health related training conducted by LAMB Hospital.



Training sessions



## Disability Rehabilitation Program

LAMB prioritizes the work to help children who are physically challenged through identifying, treating, rehabilitating, assisting, teaching, counseling, and motivating. Our Disability Rehabilitation Program includes activities in the nearby communities, services from the LAMB Rehabilitation Center and in-patient care in the hospital.

### Disability Care and Support from LAMB Rehab Centre

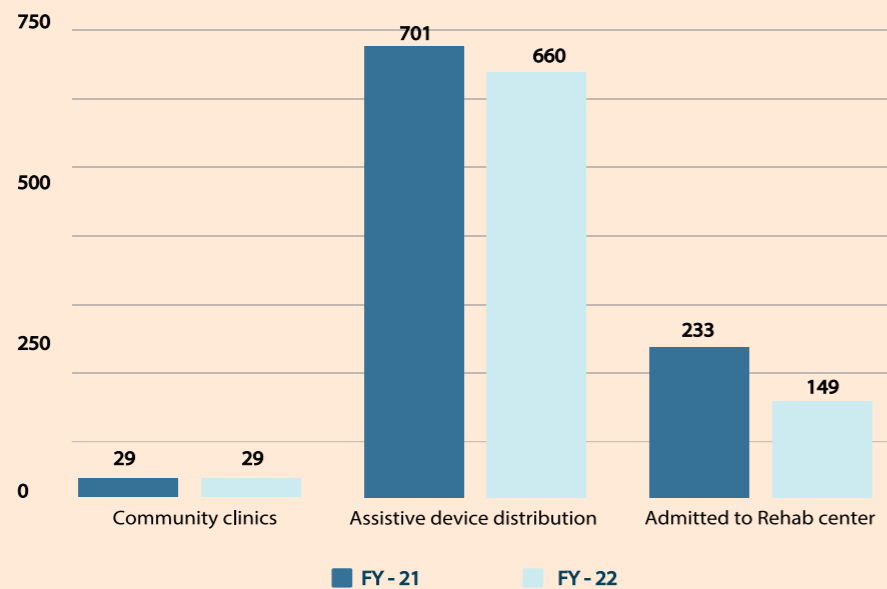
28 monthly community disability clinics were conducted to provide necessary support and care to parents and physically challenged children in 26 unions of Parbatipur, Chirirbandar and Badargonj sub-districts.

701 assistive devices were made for differently abled children.

10,960 participants received health education sessions conducted by the rehab staff.

233 rehab patients were admitted into LAMB Hospital and received treatment with a subsidized cost.

## Disability Care



"I believe that I have gotten my life back by the grace and love of God. I could have died from this critical infection in my leg. My parents are delighted that I am still alive although my leg has been amputated. They are grateful to Jesus and to the doctors, nurses and all who took care of me and helped me to recover well."



## RESPONSIBLE LEADERS DEVELOPING THROUGH SUSTAINABLE LEADERSHIP AND HEALTH WORKFORCE PROGRAMS

### Sustainable Leadership Program

LAMB recognizes that one of the most vital activities in both organizational health and socio-economic change is the cultivation of future leaders. Therefore, LAMB is committed to sourcing, equipping, and developing the leadership capacity of employees, community leaders, and adolescents. Through these efforts LAMB hopes to create a sustainable leadership pipeline that facilitates innovation, different ideas, and personal responsibility. At the organizational level, this program is being implemented through all departments, helping LAMB reach strategic goals and establish a sustained competitive advantage.



### Sustainable Leadership

**BUILDING A LEADERSHIP PIPELINE**  
**STRATEGIC RECRUITMENT**  
 Developing future leaders means sourcing candidates with the potential for growth. Indicators show that improvement needs to be made on attracting quality applicant pools, while simultaneously improving the applicant experience.

### Succession Planning

LAMB has begun a Succession Planning cycle that seeks to develop talent pools and build bench strength. The implementation is moving at a conservative pace, with only a quarter of the mission critical positions being covered at the time of this report. However, the process has already proven its value when it comes to selecting and identifying high potential leaders within LAMB.

### Employee Development & Performance Management

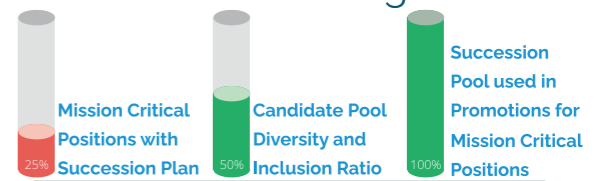
Although training opportunities remain accessible at LAMB, employee access to job rotation and stretch assignments will need to be explored.

A new performance management approach focusing on job specific competencies and incorporating goal planning throughout the next year aims to create a year-round cycle of continuous coaching and consistent feedback.

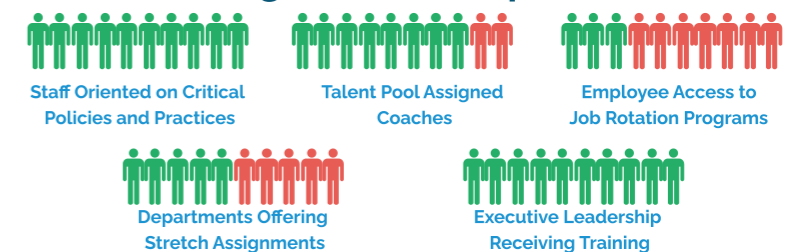
### Strategic Recruitment



### Succession Planning

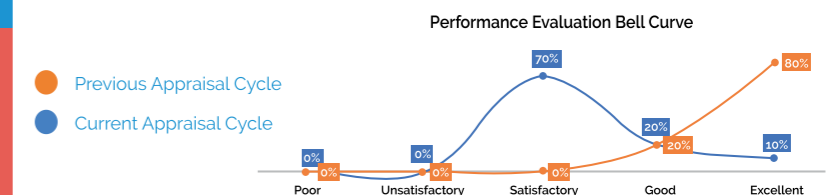


### Training and Development



### Performance Management

LAMB is significantly altering its approach to performance management. At the time of this report, employees are undergoing an appraisal that measures their performance against job specific competencies. Early Indicators show a more accurate distribution of talent. Below you will find the difference one department found in talent distribution between the old system and the new. By more accurately measuring performance, LAMB can more adequately identify emergent leaders and staff ready for the next step in their career journey.



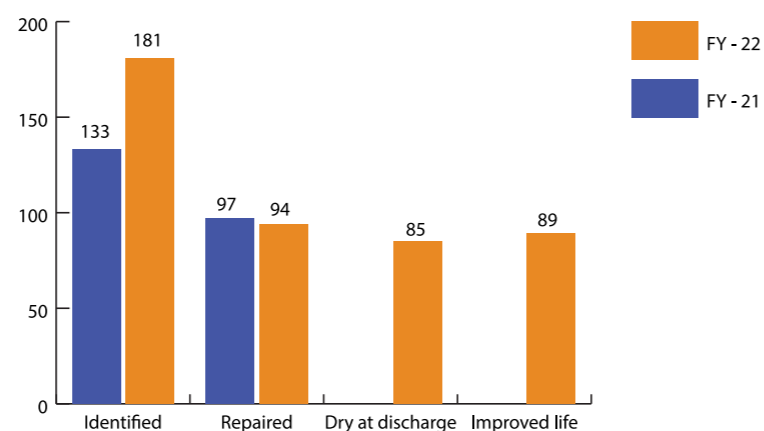
## Obstetric Fistula Program

Obstetric fistula is a leading scourge for women in developing countries resulting in severe individual suffering and devastating socio-economic repercussions for family. The underlying causes of obstetric fistula stem from multiple factors including poor nutrition, early marriage, insufficient education and the inferior social status of women as well as substandard medical care. The ultimate goal is to eradicate obstetric fistula in Bangladesh by 2030. While the number of new obstetric fistula has come down, there is a worrying trend of increasing surgical iatrogenic fistula due to often unnecessary surgeries in the private sector. LAMB's key objective is to reduce the prevalence of fistula in the northern part of Bangladesh by identifying, motivating, treating, rehabilitating and reintegrating the women into the community.

## Improved Quality of Life

### Fistula Patients

Average **90%** patients are dry at discharge. **95%** fistula survivors reported an improved health and quality of life.



LAMB covers 11 districts of Rangpur and Rajshahi Division in collaboration with government hospitals, community advocates and health service providers. **142** divisional, district and sub-district level workshops, meetings and seminars were arranged to engage different levels of government health workers (HA, FWA, FWV, FPI, HI, CHCP, midwives and volunteers) and shared about fistula diagnosis and treatment aiming to identify, treat/repair, rehabilitate and reintegrate fistula patients. The number of participants in these events was **6,874**. We expect that the participants from these different events will follow the surgery protocols, not practice in unauthorized clinics, make appropriate referrals, identify fistula patients, reduce child marriage, improve gender equality, community resilience, etc.

A total of **181** fistula patients were identified, and **94** fistula patients had restorative surgery at LAMB Hospital. See the above table for surgery outcomes at LAMB Hospital.

**11** Fistula corners are functioning in 11 district hospitals in Rangpur and Rajshahi Divisions where fistula patients are primarily diagnosed and confirmed fistula patients are being referred from 2 medical college hospitals.

To build capacity development of fistula survivors, LAMB organized residential training for **20** women. These women received hands-on skills on making reusable sanitary pads using cloth. A sewing machine was given to each woman.

**101** fistula survivors and vulnerable family members received support from local government and different sources and **52** fistula survivors are linked to respective government departments to be assessed for income generating activity (IGA).

For 30 years, Rashida Begum suffered from a fistula. Rashida's husband lost all his savings, sold their property and borrowed money for Rashida's treatment. Unfortunately, she still was not cured. Sleeping was difficult and she often had to change her clothes due to leaking from the fistula. Finally, after years of suffering, Rashida was identified as a patient needing help and underwent successful surgery. She is now cured and can get back to her normal life. Rashida and her husband are very happy that Rashida has been released from her pain. Abdul Quader, Rashida's husband, says "I became restless and totally hopeless. At last Almighty blessed us through LAMB to get normal life."



Awareness raising meeting



Training to empower women who have recovered from a fistula



Workshop on Safe Surgery with govt. doctors & surgeons



Fistula Day Observation

## Mental Health Program

LAMB aims to promote mental health and to open pathways of care for those who struggle with issues of mental illness and related stigmatization. Over the last year the program has been blessed by God to continue to expand. In **neighborhoods** over 10,000 adolescents met regularly for peer support and education. Our **community clinic** staff received training in Basic Mental Health, Advanced Listening & Referral, and in the delivery of the Edinburgh Postpartum Depression Screen. Our **hospital** provided Listening Therapy (counseling) to **57** clients (41 female, 16 male). Northwest Bangladesh mental health care providers from various agencies completed the mhGAP training from WHO. This training was provided by Sajida Foundation at the LAMB venue. These efforts are all aimed to strengthen the delivery of mental health care across the referral spectrum illustrated below.



In 2020 LAMB started the Adolescent and Community Transformation (ACT) Project, with a goal to improve mental health and psychosocial well-being among adolescents in Nawabganj sub-district after the news of a number of adolescent suicides. Under the program, **405** respected middle-aged women referred to as “Aunties” were trained in advanced listening and referral. They provided front-line support to the adolescents. The popularity of this new cadre of workers is now seen as they see a large number of adolescents.

### ACT Statistic

At baseline in the ACT program in 2020, the adolescents knew of no one in their community who was trained to listen to people with mental health concerns. One year later (midterm) 56 of the 220 girls surveyed (25.5%) reported knowing someone and 54 of that group identified the known person as the trained Aunty. Fifty (50) respondents (22.7% of the 220 girls) had visited the Aunty within the prior 6 months and all of those users would recommend the Aunty to a friend.

Suicide rates were 67.4 per 100,000 among female adolescents in the intervention area and wider community whereas 24.7 per 100,000 female adolescents in groups nurtured by LAMB’s project.

LAMB nursing students cover a module on psychiatric nursing and midwifery students have a module on mental health in their regular training. It is our goal for the coming year to add the Basic Mental Health training course to their regular studies. We hope this will help them deal with their own mental health challenges as well as be good providers of psychosocial support to others during their nursing careers.

LAMB Learning and Development Center (previously known as Training Center) now offers Mental Health related trainings that include

- Basic Mental Health Training (44 attendants in this year), Advanced Listening Course (6 attendants)
- International Child Development Program Parenting Training in partnership with Normisjon (40 attendants)
- An adolescent curriculum (COPE) which is based on a behavioral therapy-based skills-building approach has been translated and field tested. The field testing will be completed within December of 2022.

At our hospital, we continue to offer mental health counseling services to both inpatients and outpatients. Our medicine doctors can provide primary mental health care in addition to the psychosocial counseling support provided by our counsellor and other trained listeners.



**10800**  
**ADOLESCENTS**  
**BOYS AND GIRLS**  
**LEARNED ABOUT**  
**MENTAL HEALTH**  
**COPING SKILLS**

**AUNTIES BENCH APPROACH IS MUCH APPRECIATED BY THE ADOLESCENTS IN NAWABGANJ!**

## Community Resilience

A health focused Disaster Risk Reduction project in Kurigram District provided training and economic support to 160 households. During the program, **54%** of the group members were able to earn at least their minimum pre-defined income, a number they had determined the previous year, from the supported activities of the project as well as various other sources. Supported activities included alternative crop growth, sheep rearing, household vegetable gardening, and composting.

Households were able to prepare an average of five types of preparedness for flooding including food, shelter, saline, and training in house repair and infection management when they return home after a flood. **62%** of households were able to establish some promoted resilience-strengthening measures.

Additionally, **42** local communities undertook various initiatives for spiritual, moral, and ethical development among laymen, youth, and adolescents this year. For example, drug abuse was an immense issue faced by the church community at Nawabganj. They considered this issue for spiritual development and held 8 advocacy workshops with **161** church people in the church community. **8** anti-drug committees were formed after completing the workshops. The local thana assisted the CCT project in facilitating these sessions.

## Toward Gender Equality

**180** adolescent girls have developed their leadership capability to take part in preventing child marriages in their community and advocating with the local government institutions (LGIs) and others locally.

**146** women are in leadership roles in different community level committees in LAMB working areas. They were involved in making 1215 decisions.

**360** very young adolescents received sessions on 'a gender equitable attitude.' They have become agents of change in their communities.

**2,911** boys and men in the 10 unions of Parbatipur sub-district signed a code of conduct agreeing to honor and value girls and women.

**65** religious leaders/Kazi/marriage registrars received orientation to take part in preventing early marriages and pledged to stop registering early marriages.

**480** out of 567 married adolescent girls and their husbands gave their commitment to plan to have their first baby after 20 years of age.

## Access to Quality Education

LAMB School students attend school regularly. **87.4%** of all students were present on **90%** or more school days. Most of the absences were in preschool and kindergarten. In Grades 1 - 9, that number is **94.3%**. Students completed **84.9%** of the homework set. To improve attendance and increase work completion, individual data is available on-line for parents. Teachers use the information to adjust work so that children are motivated and able to complete tasks set. For one student with special needs, the school has a separate program with dedicated teachers. For others with special needs, the teachers provide additional support in class and in the after-school homework class.

All but one girl who studied at LAMB School were able to complete high-school within four years of graduating from Grade 10. The range of further study includes nursing, medical studies, engineering, business studies and administration. There are 1.61 boys for every girl enrolled at the school. School has actively sought to encourage and prioritize girls through sponsoring and selecting girls over boys during the admission process.

**31.6%** of married adolescents involved with ACT Project are continuing their education in Nawabganj sub-district. **18.6%** are at the secondary school level, and **13%** are at the higher secondary level.



## INFLUENCING PRO-POOR HEALTH POLICY THROUGH ADVOCACY PROGRAM

LAMB promotes its advocacy program through all its departments, including the community to influence the Government of Bangladesh and other health care providers to implement women friendly, pro-poor, appropriate health policies and systems.

The Parbatipur municipality signed an MOU with the 'SABUJ' project and ensured its involvement and responsibility to continue and sustain the waste management that LAMB started in 2020. The municipal body that includes all ward councillors is active now. Recently a waste management work plan has been developed by the municipality. Once it is approved by the central government, the waste management system will have a strength. **142** networking meetings were organized with different groups of stakeholders such as GOs and NGOs working in the Parbatipur municipality and other local groups like the press club. **3,371** participants attended these events towards a clean Parbatipur.



Waste management, Parbatipur (SABUJ Project)



Obs. Fistula learning & sharing meeting



Declaration of End Obstetric Fistula in Panchagarh District

**100** community leaders and adolescent leaders took the initiatives in Parbatipur, Badargonj and Nawabgonj sub-districts to lead advocacy workshops to stop child marriage, establish justice and reduce violence against women. They worked to ensure 100% birth registration, promote the use of hotlines numbers 109 and 999 to address child protection and gender-based violence (GBV) and provide sufficient materials to CCs and UH&FWC to ensure quality health services.

**5** advocacy meetings were held at Parbatipur sub-district where **124** participants (81 male & 43 female) attended. Participants were from sub-district administrative staff, Upazila Parishad members, and other stakeholders. Key objectives were to increase child welfare, reduce child marriage, encourage close monitoring of marriage registers and cross checks with NIDs, reduce gender-based violence, support one stop crisis centers, and promote a focus on safeguarding.



## WHOLISTIC HEALTH THROUGH SPIRITUAL DEVELOPMENT PROGRAM

The purpose of this program is for LAMB to demonstrate loving service and explain the experience of compassion as coming from staff following the example of Jesus. All staff are equipped through training in the LAMB mission, vision and values always with respect in our pluralistic religious context. We understand wholistic health to include peace (shalom, fullness) in relationships, as well as our physical health. This will be achieved through integrated, wholistic planning, including providing emotional (counseling, safeguarding) and spiritual helpers with other physical and social health interventions.

### Spiritual Development Program

Wholistic health is seen as LAMB partners and stakeholders seek peace and justice in our relationships and in communities to improve health and well-being. Activities were taken to build spiritual maturity in leadership and relationship with believers of other faiths.

Staff who are interested to study theology courses were given opportunity to continue their studies.

**102** staff are continuing TEE courses.

**39,598** patients, youth and community people have been offered counseling support at the hospital, community health facilities, other service centers and in their communities by the hospital chaplains, mission vision and values counselors and other staff. This initiative comforted the individuals who asked for mental and prayer support.

**782** prayer sessions were held across the departments. Staff pray for the communities and the families they serve. They pray that the people affected by poverty, illness and discrimination act to come out of the situation and live in a just community.

According to accounts of patients, they have witnessed a difference in services by LAMB, especially with regard to behavior of service providers, quality care, attention to the most vulnerable, and the counseling and prayer which brings peace and comfort in their lives. There are examples of attitudes and behaviors among staff changing for the better, especially new staff who experience for the first time LAMB's commitment to its faith-based values.

"I am very much grateful to my Almighty Lord because He gives me a peaceful, happy and united family," says Ashunta Hasda. After starting their family prayer and attending the Sunday service regularly, they saw plenty of blessings in their lives. Poverty, quarrels, anxiety and dissatisfaction are reducing gradually, and they are very happy to have this peaceful life.



## LAMB ACTIVITY REPORT

### LAMB Annual Report Data 2021-FY2022 (through June 2022)

	Jul 21 to Jun 22	Jul 20 to Jun 21
<b>CHDP General Information</b>		
Sub-district (all Rgp Div)	58	58
Population estimate	26,560,827	26,560,827
Community Health Workers	313	322
Village Health Volunteers	368	368

	80 unions	49 unions
<b>Mother child health (MCH)</b>		
Villages (Population varies)	11,863	11,863
Households covered	4,350,331	4,350,331
Safe Delivery Unit	7	7
Family Welfare Centers (FWC)	80	53
Community Clinic(CC)	199	199
C-SBA/nurse	92	92

	7 unions	7 unions
<b>MNCH SDU data (LAMB data)</b>		
Antenatal Care, clinic visits	7,472	8,003
Family Planning, clinic visits	2,090	1,863
Child 0-4 yrs. old, clinic visits	132	170
Child >5 yrs., adult clinic visits	8,529	7,972
Total deliveries in LAMB SDU	1,475	1,425
	<b>20 unions</b>	<b>20 unions</b>
Pregnancy surveillance	13,548	12,923

Project Opening/Closing Impacts Clinic Number and Population

	80 unions	105 unions
<b>MNCH FWC data (GOB data)</b>		
Child 0-5 yrs. old, clinic visits	9,944	19,153
Child >5yrs. old, clinic visits	94,432	203,209
Antenatal Care, clinic visits	64,980	84,128
Family Planning, clinic visits	26,605	36,809
Total deliveries in FWC	7,125	8,675

	29 unions	29 unions
<b>Adolescent Health</b>		
Teaching/ counselling	677	636
Library/Safespace	54	54
Girls received Life Skill training	4,042	3,927
Boys & girls received basic mental health training	10,800	

	3 upazilas	3 upazilas
<b>Disabled Child Rehabilitation</b>		
Community Clinics	29	29
Assistive devices distributed	701	660
Health Teaching participants	10,960	10,055
Admitted to Rehab centre	233	149

	4 upazilas	4 upazilas
<b>TB Control</b>		
Sputum tests	20,969	18,815
Patients - new and relapse	1,707	1,632
Patients- cured/ treatment complete	1,405	1,407

	1 upazila	1 upazila
<b>Disaster Resiliency/Response</b>		
Awareness Session on DRR	1142	726
Flood Area Mobile Clinics	NA	NA

	Jul 21 to Jun 22	Jul 20 to Jun 21
<b>HOSPITAL - Inpatients (#beds)</b>		
Total	90	90
Male	7,478	7,594
Female	2,061	2,041
Obstetric	5,417	5,553
Paediatric 0-4 years	3,031	3,183
Paediatric 5-14 years	2,387	2,252
Medicine, surgery, gynaecology	176	179
	1,884	1,980

<b>Operation /procedure</b>		
Mothers delivered	2,432	2,533
Caesarian Section	590	657
Surgery (gynaecology, general)	862	906
Fistula/Prolapse operation	228	234

<b>Outpatients</b>		
Total	50,741	44,451
Male	16,773	14,334
Female	22,846	19,477
Antenatal	11,122	10,640
Children 0-4 years	6,583	5,431
Children 5-14 years	9,940	2,856
Medicine, surgery, gynecology	23,096	25,524
Eye	480	478

<b>Laboratory Services</b>		
Blood Transfusions	807	697
Laboratory Tests	80,707	74,824

<b>Fistula Activities</b>		
Fistula workshops	143	103
Workshop participants	4,805	3,648
Fistula advocates Trained	NA	20

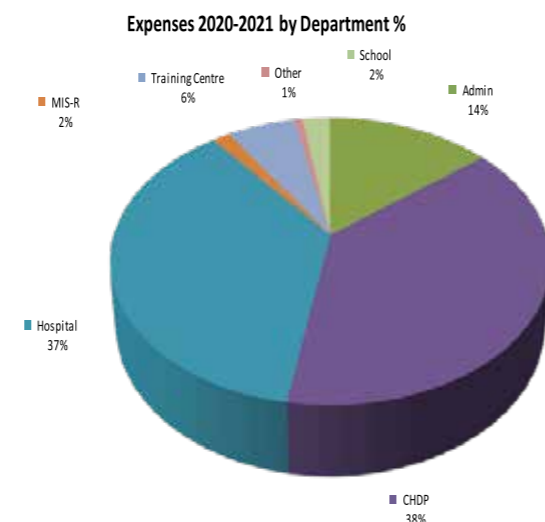
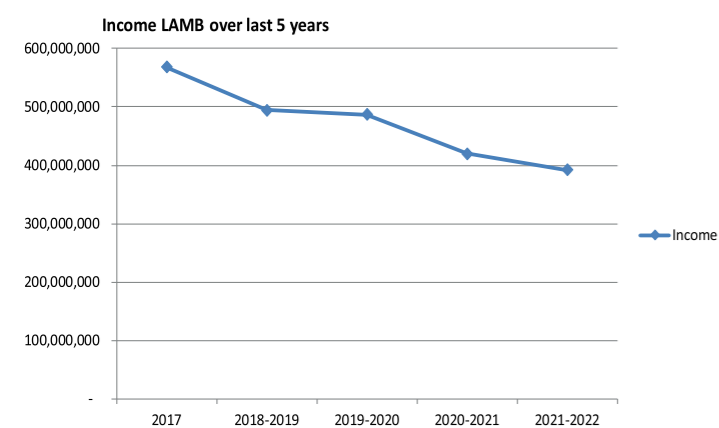
<b>LLDC</b>		
Total Courses	24	20
Nursing Institute 3yr. students	168	100
Midwifery 3 years students	110	65
6 month C-SBA	0	0
KMC, HBB, Primary Health, Etc.	1,033	596
Total Trainees	1,311	761

<b>SCHOOL</b>		
Students	115	138
Teachers	22	23

<b>LAMB STAFF</b>		
Total	535	529
Male	287	275
Female	248	254

FINANCIAL STATEMENT (1st July 2021- 30th June 2022)

Amounts in Taka	Jul'21-Jun'22			Jul'20-Jun'21
	LAMB	LAMB-Plan partnership	Total	Total
<b>Income</b>				
Hospital Fees and Medicine	89,665,519		89,665,519	79,926,591
Training Centre	23,280,752		23,280,752	20,510,283
School	5,976,355		5,976,355	5,665,240
Other activities	52,275,812		52,275,812	40,003,998
Grants	163,672,707	56,278,268	219,950,975	272,716,604
<b>Total Earned Income</b>	<b>334,871,146</b>	<b>56,278,268</b>	<b>391,149,414</b>	<b>418,822,716</b>
Donations	950,947		950,947	1,164,062
<b>Total Donations to LAMB</b>	<b>950,947</b>	<b>-</b>	<b>950,947</b>	<b>1,164,062</b>
<b>Total Income</b>	<b>335,822,093</b>	<b>56,278,268</b>	<b>392,100,361</b>	<b>419,986,778</b>
<b>Expenses</b>				
Operating Expenses				
Salary and Benefits	158,129,291.00	35,420,280.00	193,549,571	209,870,706.61
Health	126,199,735.65		126,199,736	112,203,450.30
Family Planning & Population	615,985.00		615,985	552,170.00
Public Health	68,533.00		68,533	86,273.00
Education, Youth and Culture	4,391,073.00		4,391,073	3,539,786.83
Social Welfare	528,420.56		528,421	520,137.49
Women & Children Affairs	3,276,908.00		3,276,908	5,371,425.41
Ethnic minority affairs	1,107,005.60		1,107,006	1,504,333.74
Disaster, Relief & Rehabilitation & Housing	2,554,542.00		2,554,542	4,945,805.45
Environment, reservation and development	7,219,195.37		7,219,195	5,983,373.16
Depreciation	6,004,450.20		6,004,450	5,847,478.78
Project Capital Expenses	4,335,016.01		4,335,016	291,650.00
Supplies And Services	9,302,825.85	6,600,536.29	15,903,362	26,237,834.00
Training, Meeting and Entertainment	5,152,306.00	13,715,490.00	18,867,796	18,056,366.00
Repair and Maintenance	8,864.00	58,838.00	67,702	323,033.65
Project Material Expenditure			-	2,839,718.72
Emergency Relief	-		-	
<b>Total expenses</b>	<b>328,894,151</b>	<b>55,795,144</b>	<b>384,689,296</b>	<b>398,173,543</b>
Operating result	6,927,941	483,124	7,411,065	21,813,235
Land	-	-	-	-
Building addition	-	-	-	225,253
Medical and Office equipment	1,831,583		1,831,583	1,113,305
Furniture	559,445		559,445	55,950
Vehicle/Bicycle	3,130,813		3,130,813	
<b>Total Capital Expenditure</b>	<b>5,521,841</b>	<b>-</b>	<b>5,521,841</b>	<b>1,394,508</b>



GLOSSARY

<b>ANC</b>	Antenatal Care or Antenatal Clinic	<b>HF-DRR</b>	Health Focused Disaster Risk Reduction
<b>BOT</b>	Born on Time (Plan Int'l, Global Affairs Canada)	<b>HBB</b>	Helping Babies Breathe
<b>BRAC-U</b>	BRAC University	<b>IGA</b>	Income Generating Activities
<b>BDHS</b>	Bangladesh Demographic & Health Survey	<b>ICDP</b>	Integrated Child Development Project
<b>CBO</b>	Community Based Organization	<b>KMC</b>	Kangaroo Mother Care
<b>CC</b>	Community Clinic	<b>LAMB</b>	Lutheran Aid to Medicine in Bangladesh
<b>CCM</b>	Church and Community Mobilization	<b>LAPI</b>	LAMB Area Poverty Index
<b>CCT</b>	Church and Community Transformation	<b>LGSP</b>	Local Government Support Program
<b>CD</b>	Clinically diagnosed	<b>LLDC</b>	LAMB Learning Development Center
<b>CEmOC</b>	Comprehensive Emergency Obstetrics Care	<b>MIC</b>	Middle-Income Country
<b>CFA</b>	Community Fistula Advocate	<b>MIS-R</b>	Management Information System Research
<b>CFDE</b>	Community fistula diagnosis events	<b>MNCH</b>	Maternal Newborn Child Health
<b>CSBA</b>	Community Skilled Birth Attendant	<b>MoHFW</b>	Ministry of Health and Family Welfare
<b>CG</b>	Community Group	<b>MOU</b>	Memorandum of Understanding
<b>CSG</b>	Community Support Group	<b>NGO</b>	Non-Government Organization
<b>CHCFB</b>	Christian Health Care Forum, Bangladesh	<b>NID</b>	National Identity
<b>CHDP</b>	Community Health and Development Program	<b>OPD</b>	Out Patient Department
<b>CHW</b>	Community Health Worker	<b>PNC</b>	Post Natal Care or Post Natal Clinic
<b>Commcare</b>	Community Care (MIS Software)	<b>PPE</b>	Personal Protective Equipment
<b>CNR</b>	Case notification rate	<b>RRAP</b>	Risk Reduction Action Plans
<b>DGHS</b>	Directorate General of Health Services	<b>SDU</b>	Safe Delivery Unit
<b>DT</b>	District	<b>SHOW</b>	Strengthening Health Outcomes for Women and Children
<b>DRR</b>	Disaster Resiliency/Response	<b>SRH</b>	Sexual and Reproductive Health
<b>ECM</b>	Ending Child Marriage	<b>SS-FGF</b>	Stop Suffering from Female Genital Fistula
<b>ED</b>	Executive Director	<b>TB</b>	Tuberculosis
<b>EP</b>	Extra pulmonary (Tuberculosis)	<b>TEE</b>	Theological Education by Extension
<b>FRRei</b>	Elimination of Genital Fistula by Capturing, Treating, Rehabilitating and Reintegrating in Bangladesh	<b>UH&amp;FWC</b>	Union Health & Family Welfare Center
<b>FWC-MC</b>	Family Welfare Center Management Committees	<b>UNFPA</b>	United Nations Population Fund
<b>FY</b>	Fiscal Year	<b>UP</b>	Union Porishad (Council)
<b>GBV</b>	Gender-based violence	<b>WHO</b>	World Health Organization
<b>GOs</b>	Government Organizations	<b>WM</b>	Waste management
<b>GoB</b>	Government of Bangladesh		

LAMB Program activities in the Hospital, Rehab Centre, MIS-Research, Community (through CH&DP) and all the training courses in the Learning and Development Center continue because of the financial support from donors and generous support and prayers from the friends of LAMB around the world.



[www.lambproject.org](http://www.lambproject.org) | [www.wmpl.org](http://www.wmpl.org)

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

**Head Office:** Rajabashor, Parbatipur, Dinajpur-5250 **T** +88 01712 083675 **E** [lamb@lambproject.org](mailto:lamb@lambproject.org)

**Liaison Office:** House 18 (2nd Floor), Road 15, Block - D, Banani, Dhaka 1213 **T** +88 02 9849846 **E** [dhakaoffice@lambproject.org](mailto:dhakaoffice@lambproject.org)