

Annual Report

2014



CREA

society for
**Community-health
Rehabilitation Education
and Awareness**

Annual Report 2014



HIGHLIGHTS OF 2014

The year 2014 was a year of transition for CREA. It saw a number of strategic significant changes in the operations of the society. The extended phase of CREA-HIV Prevention Project among PWIDs (Persons Who Inject Drugs) scaled down to cater to female PWIDs only came to an end on July 31. Then on November 1, which happened to be the 15th founding anniversary of CREA, the Society opened its 4th substance dependence treatment and rehabilitation unit at Uttara Model Town in Dhaka. This was also the year in which CREA Rajshahi unit received license from the Department of Narcotics Control (DNC) to operate as a rehab center.

CREA continued to work in three of its four thematic areas, namely substance abuse, HIV/AIDS, and mental health. In 2014 CREA took a bold step to expand its interventions in mental health, setting up a research and development (R&D) unit. The R&D unit conducted a rapid assessment of mental health initiatives in the South Asia as well as the global trends, designed a program titled Be Happy Keep Well for implementation, as well as conceptualized a number of projects for possible funding.

Staffed with 110 dedicated workers, a large pool of resource pools including 33 clinical psychologists, the Society in 2014 served more than 3,000 people through its projects and programs, generating a total turnover of Tk 31,233,804.00 (US\$ 390,422.55 @ Tk 80/USD). Here follows a summary of what CREA was able to accomplish in 2014.

SUBSTANCE ABUSE

First November seems to be an auspicious day for CREA Society. It was on this day in 1999 that it kick-started its first substance dependence treatment and rehabilitation unit into operations at 1/14 Iqbal Road, Mohammadpur, Dhaka. A number of milestone events have transpired since then: CREA has become a trendsetter in treatment and rehabilitation service provision for substance dependence and expanded its areas of interventions to HIV/AIDS and Mental Health, besides opening rehab centers at Rajshahi and Noakhali. On its 15th founding anniversary on 1st November 2014, CREA opened its 4th substance dependence treatment and rehabilitation unit at Uttara Model Town in Dhaka.

A few days into celebrating the anniversary, CREA received yet another boost from its Rajshahi unit getting license from DNC as a substance dependence treatment and rehabilitation center. The 1,769.73sqft rehab center was launched in

May 2010 tailor-made to the needs of people living in the country's northern region.

CREA is the pioneer in Bangladesh in adopting the tenets of Social Learning/Socio-Cognitive Model (Bandura, A. 1977) in substance abuse intervention and creating self-sustaining units offering a treatment course far more comprehensive than those offered by similar treatment centers. CREA's substance abuse intervention units cover clients from all socio-demographic sections of the country. Following the basic tenets of Social Learning Model, CREA perceives drug-abusing behavior as an outcome of faulty coping or learning process. The principal focus of its program is on offering an environment conducive to erasing those faults and replacing them with appropriate coping skills. To reduce stigma associated with drug abuse, CREA promotes the concept of 'chemical dependence' instead of 'addiction' and

sees chemical dependence as a ‘faulty habit acquired through learning’ instead of a ‘disease’. CREA defines relapse from a learning perspective and stresses transforming the individual into an active agent of change and thus empowering her/him to deal with drug problems rather than making her/him dependent on any

outer change agents.

Through its four substance abuse treatment and rehabilitation centers located in the capital city of Dhaka, the divisional city of Rajshahi and the district town of Noakhali, CREA attended 545 drug-abusing clients and their families in 2014.

The table below provides a summary of the services provided by CREA substance abuse program in 2014:

Sl.	Activities	Achievement			
		Dhaka	Rajshahi	Noakhali	Total
1	Guardians received consultation	1112	602	311	2025
2	Client assessment and admission	307	146	92	545
3	Psychiatric consultation	120	29	10	159
4	Medical support (detoxification)	301	132	70	503
5	Psycho-educational sessions	923	924	924	2771
6	Individual counseling	1540	304	190	2034
7	Family counseling	204	52	45	301
8	Follow-up clients	69	25	6	100
9	Aftercare attendance	69	96	17	182
10	Follow-up aftercare	139	162	30	331
11	Client-referrals to other facilities	4	1		5

HIV-AIDS

CREA has been working since 2005 to contain the spread of Human Immunodeficiency Virus (HIV) and sexually transmitted infections (STIs) in the country through its HIV prevention projects funded by USAID and UNODC. The highest HIV infection rate in Bangladesh has always been recorded among the injecting drug users (IDUs) in the central region of Dhaka city. A cohort study showed 10.5% of the IDUs in one neighborhood of the city were HIV

positive. Based on the study findings, CREA undertook its latest project in this area in October 2009 with financial assistance from USAID and technical support from Family Health International 360. The project titled CREA-HIV Prevention Project among PWIDs was designed to prevent the spread of HIV and STIs among marginalized IDUs in Dhaka city by providing comprehensive treatment and psychosocial rehabilitation services.

The specific objectives of the project were to:

1. Provide a range of medical and psychosocial care and treatment to drug users, their sexual partners and families;
2. Strengthen the continuum of care by enhancing referral mechanisms and linkage with other agencies;
3. Increase knowledge, skills, and access to products such as needles, syringes, and condoms used to prevent HIV and sexually transmitted infections (STIs);
4. Support economic rehabilitation of drug users through vocational training and income-generating programs;
5. Create an environment supportive to HIV prevention and care of and support for drug users by mobilizing the society, especially the law enforcement agencies;
6. Increase organizational competence through capacity-building initiatives and programmatic expansion;
7. Create a structured quality assurance and quality improvement (QA/QI) system; and
8. Improve medical waste management.



Thanks to the cost effectiveness of the project implementation and the savings made, the project that came to an end in July 2013 was extended for one year till July 2014, although scaled down to cover female PWIDs only. The extended phase ended duly on July 31.

Salient Outputs of the Project (October 2009 to July 2014)

Beneficiaries	Number
Community outreach to individuals	1,717
One-to-one and group contacts	2,61,951
Condoms distributed	1,23,828
Testing and counseling (T&C) services for HIV	1,495
Individuals found HIV-positive (male 29 and female 11)	40
Individuals attending STI clinic sessions	1,244
Patients diagnosed and treated at STI clinics	495
Patients screened for suspected TB	298
PWIDs receiving detoxification services	1,284
PWIDs receiving vocational training	172
PWIDs receiving job placement	122

The project also referred clients to DMCH, NIMH, AAS & MAB and other agencies linked with CREA for various reasons and purposes. It placed 84 graduated clients to the **Mainstreaming of Marginalized IDUs project** named Uttaran implemented by CREA and some plastic factories for job placement. A total of 292 clients (male 182 and female 110) were re-integrated in their families. The success of the project is reflected in the fact that 100 recovered clients attended a recovery recognition

ceremony with enthusiasm and jubilation. The project found active community participation helps reduce relapse as well as enhance socialization of recovered clients, half-way houses help homeless PWIDs, job placement creates positive changes amongst recovering drug users, participation of family members in chalking out the treatment plan and their involvement in aftercare services help lengthen recovery life, and vocational rehabilitation prevents relapse.



MENTAL HEALTH PRIO (Psychological Research & Intervention Onward)

Month	Contacts	Registrations	Therapeutic Sessions
Jan	59	54	202
Feb	45	41	206
Mar	53	49	232
Apr	48	45	172
May	53	47	166
Jun	55	54	204
Jul	40	40	225
Aug	32	31	138
Sep	66	66	162
Oct	26	22	105
Nov	45	44	139
Dec	38	36	125
Total	560	529	2076

A group of psychologists and clinical psychologists launched this unit of CREA following a series of discussions, workshops, and plenary where the past, present, and future of mental health situation of the country, its knowledge base, human resources, and service gaps were studied. The PRIO team exercised a

logical framework analysis of the mental health situation of the country and came up with some strategies and set the following objectives:

1. To promote psychological health;
2. To create an enabling environment to access psychological services; and
3. To influence the implementation and revision of the country's mental health policy.

In pursuance of the objectives PRIO runs a mental health clinic which does psychometric assessment and provides psychotherapeutic assistance to adults and children with psychological and behavioral problems. A pool of clinical psychologists provides psychological/ clinical psychological services throughout the year from the clinic from 9:00am to 9:00pm every day.

In 2014, a total of 33 clinicians served 529 clients at PRIO through 2,076 therapeutic sessions.

DRUG PLACEMENT

CREA has been hosting a professional placement on drug abuse and chemical dependency for MPhil students of the DU Department of Clinical Psychology since 2004 with a view to narrow down the existing huge human resource gap in mental healthcare.

The aim of the placement is to enhance knowledge and clinical skills of the trainees in treatment and rehabilitation of chemical dependents. The trainees are required to go by the following objectives:

- Understanding the nature of chemical dependence
- Identify and apply functional techniques of managing urge/cravings for drug use

- Understanding different chemical dependency treatment approaches and receive training
- Application of different techniques and assess their efficacy
- Apply and evaluate the psychological tools for relapse prevention
- Involve family members in the treatment process and provide psychological support to them
- Adaptation of different psychotherapy models to work with the street-based injecting drug users
- Receiving counseling training on drug and HIV/AIDS-related risk behaviors to

provide counseling to the targeted population and assess outcome

So far, 98 graduate students of the DU department have successfully completed this placement that includes extensive study, training and learning different intervention approaches regarding substance abuse and chemical dependency/drug addiction. A direct

outcome of this specialized professional placement hosted by CREA is the clinical psychologists now working at different public and private healthcare facilities. Almost all of them have been trained under the program that also has resulted in a positive quality shift in service provision in substance abuse treatment and rehabilitation.

SUPPORTING RESEARCH

Since its inception CREA has been a place of attraction for public health researchers. CREA supports researchers from public and private universities by permitting its clients to get involved as research participants (sample) in innovative studies.

CREA is strict about the ethical issues associated with any research and this side is taken care of by the Chief Executive himself following the Ethical Guideline of the Society. In total, 11 researchers collected data from CREA in 2014.

OTHER ACTIVITIES

Research & Development

In 2014 CREA took a fresh move to expand its interventions in mental health, setting up a research and development (R&D) unit. The R&D unit conducted a rapid assessment of mental health initiatives in the South Asia as well as the global trends, designed a program titled Be Happy Keep Well for implementation, as well as conceptualized a number of projects for possible funding. The year saw two responses to CREA's project concepts – one from the Rotary Club and the other from Economic Development Initiatives (EDI) Group International.

CREA-Rotary MoU Signed on Treatment of Female Drug Users

The Rotary Club of Dhaka Sadar and the society for Community-health Rehabilitation, Education and Awareness (CREA) signed a memorandum of understanding (MoU) on 27 September 2014 Saturday under which the Club will provide CREA with matching grants for treatment and rehabilitation of poor and low-income women and girls who use drugs.

Rotary Club of Dhaka Sadar President Abul Kalam Bhuiyan and CREA Chief Executive Tarun Kanti Gayen signed the memorandum on behalf of their respective organizations at a ceremony held at the Dhanmondi Club in the city. This is the first-ever humanitarian project undertaken by the newly formed Club, said Abul Kalam Bhuiyan at the function.

Rotary District Governor Safina Rahman, Bangladesh Federation of Chambers of Commerce and Industry former vice-president Md Helal Uddin, Rotarian TIM Nurul Kabir and CREA Finance Director Iftekhar Ahmed Chowdhury, among others, also spoke on the occasion.

In her address, Safina Rahman emphasized the importance of mental health service provision and expressed her commitment for promoting people's mental health. She urged CREA to undertake mental health projects and offered continued support of the Rotarians for that cause.

Anti-Drug Awareness Programs

This year CREA participated in a number of anti-drug awareness programs including those hosted by Prothom Alo Bondhu Sobha and those aired by electronic media channels.

Meeting

CREA on 22 June 2014 Sunday organized in Dhaka an Exchange of Opinion meeting to on "YABA ADDICTION AND PSYCHOLOGICAL DISORDERS: A NEW CHALLENGE IN EFFECTIVE TREATMENT AND REHABILITATION" on the occasion of 26 JUNE 2014, International Day against Drug Abuse and Illicit Trafficking.



Central Drug Addiction Treatment Centre Chief Consultant Dr. Syed Emamul Hossain and Resident Psychiatrist Dr. Akhtaruzzaman Salim and Pabna Mental Hospital former director Professor Dr. M. Ahsanul Habib were among the psychiatrists, clinical psychologists, therapists and representatives of different drug addiction treatment and rehabilitation centers who took part in the discussion.

VISIT

US State Dept Officials Visit Crea

Melissa Habedank, Program Manager, and Sarah Mielke, Foreign Affairs Officer, Global Drug Demand Reduction Programs, Bureau of International Narcotics & Law Enforcement Affairs, US Department of State, visited CREA on August 4, 2014 and had a meeting with CREA representatives led by its Chief Executive Tarun Kanti Gayen.

The US State Department officials were on an official visit in Dhaka to assess the local service-provision scenario in drug dependence treatment and rehabilitation under a global project aimed at training service providers to drug-abusing street children.

The Bureau of International Narcotics & Law Enforcement Affairs (INL) is the lead entity for international drug-demand reduction in the US government. The INL demand reduction program consists of five core program components: Drug-Free Community Coalition Program, Regional Training on Treatment, Regional Training on Prevention, Women's Drug Treatment Initiative, and Child Drug Addiction Initiative.

The US officials and the CREA team held a two-hour threadbare discussion on the role and stance of CREA in treatment and rehabilitation of drug-abusing population, especially the children and adolescent.

FINANCIAL STATEMENT

Yearly turnover in 2014: BDT 28,097,260

ABOUT CREA

AN OVERVIEW OF CREA

The inception of CREA on November 01, 1999 was to serve the country's substance dependent people and their families by offering a culture-sensitive and, at the same time, low-cost, scientific treatment program that would ensure a lower rate of relapse, i.e., a higher rate of treatment success. The organization launched its operations by mobilizing local resources and with fulltime involvement of its founding directors, who were adequately conversant with treatment and rehabilitation of substance dependence. The initiation of CREA as a trendsetter had two dimensions – one was to set an example that a drug rehabilitation center could sustain completely on local resources, which was not the reality of the time, as similar centers were very much dependent on foreign funding and donation. This instance later inspired others—mainly ex-users at the grassroots—to venture into setting up such generic centers across the country. The second dimension was application and promotion of modern approaches (Social Learning Theory etc) in the understanding of and interventions in drug dependence and related high-risk behaviors.

CREA expanded its activities to other areas of development by incorporating the organization into a society in 2004 under Section 21 of the Societies Act, 1860.

VISION

CREA envisages a human society of healthy and creative individuals who are aware of their rights and responsibilities, proactive to create a society free from stigma and discrimination, and open to new ideas for actualization of their potentials.

MISSION

CREA will promote and advance public awareness, education, and health services for improving community wellbeing within the context of scientific knowledge.

CORE VALUES

OPENNESS: (we are) open to new ideas and criticism and (keen to) unprejudiced study of the changing phenomena.

NON-DISCRIMINATION: (we are) responsive to the needs of the beneficiaries irrespective of sex, race, ethnicity, nationality, religion, socio-economic condition, and type of morbidity.

COMMITMENT: (we are committed) to build a society of healthy and creative individuals.

&

INTEGRITY: (we value integrity) of intention and honest transparent action.

THEMATIC AREAS

In pursuance of its vision and mission and considering a “political economic social and technological” (PEST) situation analysis of the country, CREA has chosen public health as its main domain of work. It has further narrowed down its focus, considering its track record and expertise, to the following thematic areas:

1. Substance abuse;
2. HIV/AIDS;
3. Mental health; and
4. Community health.

GENERAL OBJECTIVES

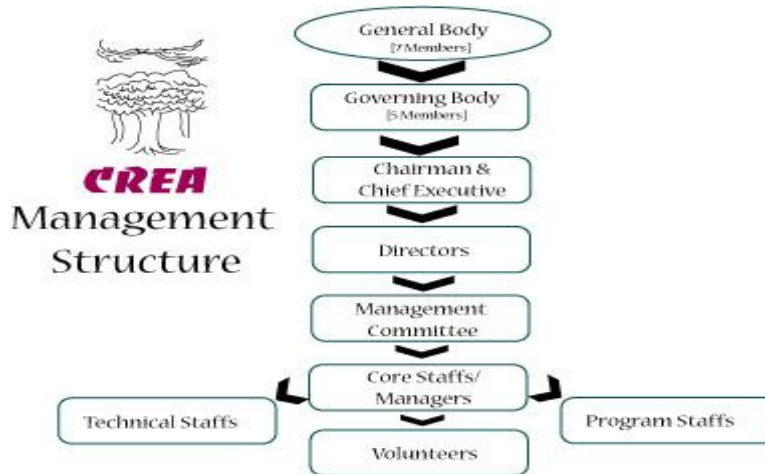
CREA has set forth three general objectives and supporting strategies that address its thematic areas. The objectives are:

1. To improve people’s access to prevention, treatment, care, and support services to reduce substance abuse, HIV/AIDS, mental health and community health vulnerability.
2. To exclusively advocate for supportive policies for persons affected by issues related to substance abuse, HIV/AIDS, mental health, and community health.
3. To develop the knowledge base on substance abuse, HIV/AIDS, mental health, and community health.

OBJECTIVES WITH SUPPORTING STRATEGIES

- A. Being an effective organization (institutionalization).
- B. Raising awareness of the masses on issues like substance abuse, HIV/AIDS, and general and mental health and do advocacy at policy and all stakeholder levels on the same issues.
- C. Developing a number of health service delivery systems.
- D. Developing the knowledge base on thematic areas (*i.e., substance abuse, HIV/AIDS, and mental & community health*) through social and scientific research and related publications.
- E. Building networks and partnerships with national and international organizations pursuing human development objectives.
- F. Ensuring sustainability of the CREA Society.

ORGANOGRAM



GOVERNING BODY

Tarun Kanti Gayen	-	Chairperson
Iftakhar Ahmed Chowdhury	-	Member
Sajedul Murad	-	Member
Iqbal Faruk Milky	-	Member
Naimul Haque Joarder	-	Member