

Annual Report

2016

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Highlights of 2016

The year 2016 was a period of consolidation for the society for Community-health Rehabilitation, Education and Awareness (CREA). The society closed down its substance abuse treatment and rehabilitation center for women opened in 2015 as not enough clients sought treatment there. Instead, CREA opened a new substance abuse treatment and rehabilitation center on August 1, 2016 in the southern divisional city of Khulna.

The year also saw CREA launch the process of designing and hosting a new-look and user-friendly website with a new logo. The society also became active on social media platforms and the research and development activities had also been geared up.

The contracted “Consultancy services for conducting ‘Drug Treatment and Management Training’ and updating the final draft manual incorporating feedback received during the training” with the Dhaka office of Gesellschaft für Internationale Zusammenarbeit (GIZ) extended till April 2016 in actuality continued till December 2016 to include a number of additional training courses held across the country.

CREA continued to offer other mental health services, mostly counseling, through its Psychological Research & Intervention Onward (PRIO) unit. Staffed with 110 dedicated workers, a large pool of resource persons including 33 clinical psychologists, the society in 2016 served more than 3,000 people through its projects and programs, generating a total turnover of Tk 32,307,335.00. Here follows a summary of what CREA was able to accomplish in 2016.

Substance Abuse Treatment & Rehabilitation

Drugs abuse is widespread throughout the country. To widen the coverage of its services the substance abuse treatment and rehabilitation unit of CREA called KRIYA set up a new centre in the southern divisional city of Khulna.

Through its four substance abuse treatment and rehabilitation centers located in the capital city of Dhaka, the divisional cities of Rajshahi, Barisal and Khulna, CREA attended around 500 drug-abusing clients and their families in 2016.

The table below gives a summary of the services provided by the KRIYA branches in 2016. The statistics for Khulna has been omitted as it was still in the process of initiation of its services:

Sl	Activities	Achievements			
		Dhaka	Rajshahi	Barisal	Total
1	Guardians received consultation	708	257	156	1121
2	Regular admission	165	137	79	381
3	Review admission	77	19	11	107
4	Total admission & assessment	242	156	90	488
5	Drop-out	41	10	01	52
6	Psychiatric consultation	97	39	48	184
7	Medical (detoxification) support	241	104	90	435
8	Psycho-education session	921	924	894	2739
9	Individual counseling	992	152	-	1144
10	Family counseling	203	82	-	285
11	After-care attendance	131	139	18	374
12	Client referred to other facilities	02	01	-	03
13	Follow-up Aftercare	57	56	26	139

Mental Health

PRIO (Psychological Research & Intervention Onward)

Counseling Service

PRIO has been running 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 2016, 252 persons registered with PRIO to avail of the services that were rendered through 1237 counseling sessions.

Counseling Sessions		
Month	No. of Registration	No. of Sessions
Jan	17	108
Feb	18	85
Mar	17	83
Apr	20	93
May	17	104
Jun	27	80
Jul	21	98
Aug	37	138
Sep	23	110
Oct	12	101
Nov	23	106
Dec	20	131
Total	252	1237

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, 135 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.

Donor-funded Project

“Consultancy services for conducting ‘Drug Treatment and Management Training’ and updating the final draft manual incorporating feedback received during the training”

Donor: Gesellschaft für Internationale Zusammenarbeit (GIZ)

Project Period: 20.09.2015-31.12.2017

The capacity of Bangladesh prisons is 34,460, but currently the actual prison population is 77,058 and unfortunately 72% of them are un-convicted. Most of them are poor, having no access to legal remedies. They are denied their legal rights and sometimes they spend longer time waiting for trial

than their actual sentences. The prison population include women held by the state for their “own protection” (safe custody), some are children and others are drug-users, and some are mentally ill and physically challenged. Sometimes people are detained for immigration reasons but they are not criminals. As a result, a large number of prisoners are languishing in custody indefinitely; they are denied their right to reintegration, which creates an ideal breeding ground for explosion of diseases such as pulmonary tuberculosis and also for radicalization of poor people in prisons. Sometimes prisons are considered as “Universities of crime” – and they generate more crime instead of crime prevention.

GIZ is working to develop this work into interventions focusing specifically on prevention for vulnerable prisoners to (re) offending, diversion of petty offenders in community-supervised re-integration processes into society and skills building and rehabilitation of convicted prisoners, especially women, in several districts of Bangladesh. From 2013 UK Aid – DFID has been engaged in the area of prison reform and rehabilitation of prisoners more actively in the future and have provided co-funding to the project implemented by GIZ. In order to provide specific services under BMZ and DFID financing, GIZ sought services of a consultant for providing trainings namely ‘Basic Training on Drug Treatment and Management’ to the medical and relevant non-medical personnel from the local prisons, medical practitioners from local government hospitals and participants from local private drug treatment centres. Inside the prisons, medical personnel provide symptomatic treatment to the drug user prisoners. But, symptoms of drug use are not familiar to the general medical practitioner in common. Managing drug users’ withdrawal symptom is also very important to reduce physical consequences that non-medical person can also help if they have the knowledge. The trainings under the consultancy were conducted locally at each of the project working areas where ‘Reducing Recidivism’ output is working in order to equip the local prison authority and other relevant actors with the knowledge for providing better treatment and management of the drug user prisoners inside and outside the prisons.

CREA as a consultant carried out the following activities:

- Design training sessions on Basic Drug Treatment and Management Training based on the manual in close collaboration with GIZ and its partner NGOs
- Conduct training sessions on Basic Drug Treatment and Management in close collaboration with GIZ and its partner NGOs
- Receive and synchronize feedback from the trainings and incorporate those in the manual for finalization
- Recommend next steps for institutionalizing Basic Drug Treatment and Management Training by the relevant stakeholders

Around 300 participants from different district jails, civil surgeon’s offices and local drug treatment and rehab centres participated in the 10 training courses held during the project period.

Other Activities

Anti-Drug Awareness Programs

As usual, CREA this year continued to participate in anti-drug awareness programs including those hosted by Prothom Alo Bondhu Sobha and those aired by electronic media channels.

The branches of CREA, too, took part in anti-drug addiction campaign held by the Department of Narcotics Control (DNC) on June 26 to mark International Day against Drug Abuse and Illicit Trafficking 2016 across the country.

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, 12 researchers collected data from CREA in 2016.

Mental Health Publication

CREA also continued with extending all-out editorial, secretarial and publication supports to Bangladesh Clinical Psychology Society in bringing out its journal Monobhuban and drafting other documents.

Financial Statement

Yearly turnover in 2016: Tk 32,307,335.00

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.

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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

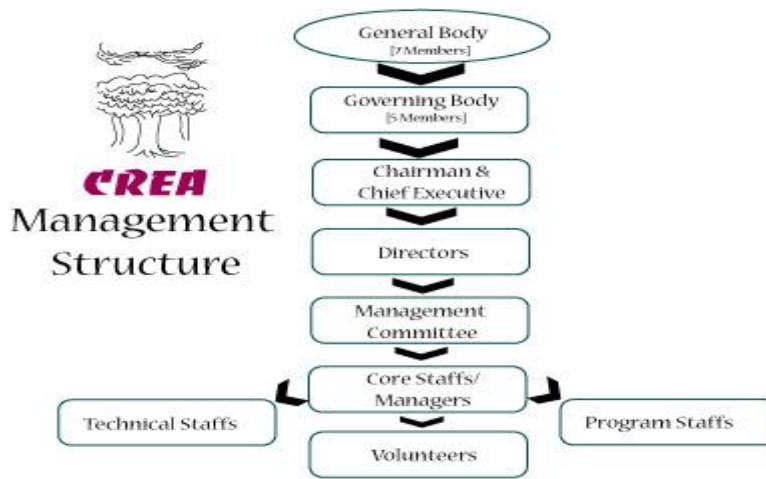
CREA has set forth three general objectives and supporting strategies that address its thematic areas. The objectives are:

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