

2017

Annual Report



HIGHLIGHTS

In May 2017, the society for Community-health Rehabilitation Education and Awareness (CREA) relocated its central office and the Dhaka branch of its substance dependence treatment and rehabilitation program (KRIYA) from 14/1 Iqbal Road, Mohammadpur, Dhaka 1207 to a more spacious 4-storey building at House 312, Road 2, Baitul Aman Housing Society, Adabor, Dhaka 1207. The year saw its Management Information System come into full operation, while its branding campaign through Internet and social media intensified further.

Among the newly launched branches of KRIYA, Barisal continued to perform at an excellent level while Khulna demonstrated a quite adequate performance.

This year CREA and UNODC undertook a joint project named ‘Instituting Parenting Skills (IPS)’ for the period of May 2017 to April 2018. The project is aimed at minimizing the risks of substance abuse among the adolescent and youth in the greater Dhaka metropolitan area through imparting relevant parenting skills to their parents or caregivers.

CREA also continued to offer other mental health services, mostly counseling, through its Psychological Research & Intervention Onward (PRIO) unit. The society in 2017 served more than 5,000 people through its projects and programs, generating a total turnover of Tk 33,146,952.00. Here follows a summary of what CREA was able to accomplish in 2015.

SUBSTANCE DEPENDENCE TREATMENT & REHABILITATION PROGRAM (KRIYA)

The year saw all the KRIYA units performing well. The following table offers an overview of the services rendered by the KRIYA centers.

Sl	Activities	Achievements				
		Dhaka	Rajshahi	Barisal	Khulna	Total
1	Guardians received consultation	594	265	243	22	1124
2	Regular admission	160	144	103	58	465
3	Review admission	40	05	21	08	74
4	Total admission & assessment	200	149	124	66	539
5	Drop-out	44	02	04	07	57
6	Psychiatric consultation	88	47	63	36	234
7	Medical (detoxification) support	198	102	124	60	484
8	Psycho-education session	917	702	870	860	3349
9	Individual counseling	1092	04	-	20	1116
10	Family counseling	172	-	-	26	198
11	After-care attendance	45	07	18	16	86
12	Client referred to other facilities	03	01	-	03	07
13	Follow-up Aftercare	142	11	78	08	239

MENTAL HEALTH

PRIO (PSYCHOLOGICAL RESEARCH & INTERVENTION ONWARD)

Counseling Service

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 2017 in total 315 new clients registered with PRIO to avail of the services that were rendered through 1237 counseling sessions.

Month	No. of New Clients	No. of Counseling Sessions
Jan	28	108
Feb	27	85
Mar	26	83
Apr	22	93
May	20	104
Jun	05	80
Jul	36	98
Aug	26	138
Sep	18	110
Oct	53	101
Nov	26	106
Dec	28	131
Total	315	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, 156 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

INSTITUTING PARENTING SKILLS (IPS)

From the very early stage of its service provision for treatment and rehabilitation of substance dependent youths in Bangladesh, CREA came to realize the centrality and high import of the roles parents and caregivers play in setting the context and conditions for and against the individual vulnerability of their wards to substance dependence. That understanding was the drive from which CREA initiated a forum to promote good parenting as early as 2001. However, as the country's health policy, law and health service delivery system has little or no focus on mental health and substance dependence, let alone such secondary issues as parenting, CREA has had little scope to launch a program that would promote and disseminate positive parenting skills until UNODC in 2017 awarded a DAPC grant to its proposed project titled Instituting Parenting Skills (IPS). This grant, though small in size, has been a great changemaker in this scenario, as before the launch of the IPS project, except some sporadic and short-term training events on parenting skills, there had been no significant intervention to improve parenting skills with a view to reducing substance abuse by children and the youth.

The project aimed at imparting positive parenting skills to parents and caregivers of children and the youth at risk of substance abuse in the greater Dhaka metropolitan area.

The specific objectives of the project were:

1. Introducing good parenting skills for the parents and caregivers of children and youth at risk of substance dependence
2. Assessing the status of current parenting skills among the parents and caregivers of children and youth at risk of substance dependence
3. Assessing the relevant issues of children and youth with their parents and caregivers
4. Developing and administering a training module and on parenting skills for the parents and caregivers of children and youth at risk of substance dependence
5. Developing and disseminating among the trainees two booklets containing, among other things, the key lessons, information and tips on rule-setting, monitoring activities, praising appropriate behavior, and pursuing a moderate, consistent discipline that would help parents and caregivers prevent substance abuse by their children and wards.
6. Setting a benchmark in parenting skills development by imparting training to approximately 120 guardians and caregivers of children and youth at risk of substance dependence
7. Assessing the efficacy of the training module through conducting an action research comprising a baseline study, a mid-course survey and a post-training survey
8. Raising public awareness on the importance of good parenting in preventing substance dependence among children and youth
9. Offering social media platforms to children and youth at risk of substance dependence to seek help and access information and other beneficial resources



Although scheduled to start from January 2017, the project Instituting Parenting Skills (IPS), the first of its kind in Bangladesh and therefore a pilot one, was launched in May 2017 due to a delayed disbursement of the grant money.

A consultation with 12 teens aged 11 to 16 was held on 21 July 2017 Wednesday at CREA under the project Instituting Parenting Skills (IPS). The session was aimed at gathering the youth's perspective on the kind of parenting they experienced in their life and the issues they identified in parenting in order to accommodate the pertinent issues in the training module on parenting skills IPS was preparing. The participants were students of Bangla and English medium schools in Dhaka. Professor Dr. M Mahmudur Rahman of the Clinical Psychology Department of University of Dhaka moderated the session.



The Principal Module Developer in conjunction with the Module Development Advisor drafted a two-step training module where the training course on parenting skills relevant and appropriate for the target beneficiaries comprised a 2-day Primer and a 1-day Booster. They also prepared the training materials including two booklets (one for the primer training course and the other for the booster/advanced training) for the trainees that included, among other things, the key lessons, information and tips on rule-setting, monitoring activities, praising appropriate behavior, and pursuing a moderate, consistent discipline that would help parents and caregivers prevent substance abuse by their children and wards.

A half-day consultation meeting with experts on the draft training module on Parenting Skills was held on August 20, 2017 Monday at the CREA Conference Room in Dhaka to gather the feedback and recommendations of the participants with a view to finalize the module. The training module and psycho-educational materials were then finalized incorporating the recommendations and feedback gathered from the Review Session with Experts.

In way of promotion and branding a webpage, a Facebook page and a Facebook group were designed and hosted — all linked to UNODC and DAPC social media and websites, in addition to CREA webpage and social media sites. The Facebook and webpage admin regularly uploaded and disseminated the project activities and messages through the online platforms.

As part of the outreach work, a brochure was designed and 5,000 copies of it were published by a designing and publishing firm. The brochure was distributed at multiple levels – during outreach work, to and through parents and caregivers, to and through clinicians (clinical psychologists and psychiatrists), etc. A 6 column inch (6” x 1.5”) newspaper advertisement was also designed and published in the daily Prothom Alo describing the aim, objectives and duration of the project and eligibility, venue, registration and other details of the training program.

The training program was administered in two phases – a two-day primer followed by a one-day booster course. There were 6 batches of trainees. Six primer training courses were held, but the number of booster training courses had to be reduced to four as a significant number of trainees dropped out due to a number of constraints.

Primer Courses

Although the project implementation team registered a total of 127 parents/caregivers, i.e., seven more than the targeted number, as trainees in order to minimize the risk of dropping out, in actuality 93 registered trainees could make it to the primer courses. Of them, 34 trainees were male and 59 were female.



Booster Courses

While organizing the Booster training courses, the project team received communications from most of the trainees who took part in the Primer courses that they were facing a wide spectrum of constraints and obstacles, including those related to housework, childcare and job, to joining this advanced training phase. In view of the reported restraints, the project team cropped the number of Booster training courses from the scheduled six to four.

Individual Counseling

Based on the intensity of parenting problems, a total of nine (9) clients (parents) were selected and provided with counseling/clinical support from three clinical psychologists during the period of November 2, 2017 to April 30, 2018. Out of them, eight clients sat for individual counseling, while the remaining one and his family of four were approached through the Systemic Family Therapy (SFT). A total of 53 therapeutic/counseling sessions were conducted between November 2, 2017 and April 30, 2018.

A survey was also carried out under the project on the participants to see the impact of the training on their parenting behavior. Alabama Parenting Questionnaire (Frick, P. J. 1991) a 42-item self administered questionnaire was administered during the primer and the booster phase to see any change in behavior of the parents. Final data came from 51 participants, who participated both in the Primer and Booster sessions. The scale measured five dimensions of parenting practices, which were: *Positive Parenting Practices, Poor Parental Monitoring/ Supervision, Parental Involvement, Inconsistent Discipline and Corporal Punishment*. No significant change in parenting behavior has been noticed; however, slight positive change in two dimensions, viz., Positive Parenting Practices and Poor Parental Monitoring/ Supervision, are evident. These quantitative findings however do not correspond with the qualitative responses of the participants which show that the parents have become aware, informed and skilled in a number of parenting tasks. This discrepancy will be explored in the final analysis of the survey, which is underway.

Project Achievements

- Attitude and skills of a group of parents on parenting issues have been reframed
- Public awareness has been raised regarding importance of learning and using good parenting skills
- A module has been developed which has been validated by the trainees' need
- Demands have been created to extend parenting skill training at educational institutions
- A structured parenting program has been piloted among BD population which has opened avenue for further thinking and actions.

Lessons Learnt

- Parents have huge parenting education and skill gap in raising their child in current digital age
- Parental demands for parenting skills are diversified which seems difficult to address with current available knowledge and skill base
- Parents are continually stressed out of their parenting job which they do not know how to resolve
- Parenting training is difficult where parents are in conflict over parenting role, tasks and/or in conjugal conflict
- Parenting skill training needs to start from zero years for all parents who are in need of it
- Some parents need individualized support for parenting tasks
- Creative approaches are to be followed to reach and organize parents group for a successful parenting training program

Constraints

- To reach out parents and make them listen to the project objective was difficult
- Parents had enormous day to day parenting issues that could not be addressed in a 3 (2+1) day training
- Even after confirming participation some parents did not show up on the training day
- Some parents were not on time in the training venue which made delayed starting.

Impacts

The perceived impacts of the IPS project are as follows:

1. Many of the parents and caregivers facing trouble in managing their wards, who have already become vulnerable to drugs and different other risk behaviors, have for the first time come to realize that the task of parenting can be converted into specific skills and be learned.
2. They have learnt that the seemingly difficult and 'resistance to change' behavioral patterns of their offspring can also be dealt with efficiently, creating hope among them.
3. They have understood that much of the success of parenting lies in changing their own attitudes, beliefs, expectations, and reactive pattern of behavior than focusing on and coercing the children only.
4. Many parents now have increased self-control, anger management capacity, quality time, listening capacity, and reduced personal stress and anger.
5. A number of parents who used to face critical situations with their children have also been benefitted by individual and family counseling.
6. Observing the marked improvements among the beneficiary parents in their roles as caregivers, CREA is inspired to scale up and replicate the current project and also plans to design a parenting program that will cover the age range of zero year to teenage.
7. From the response to this project, CREA is convinced that much of the prevention work should concentrate more on family education, specifically on parenting skills.
8. CREA now considers parenting as one of its core programs for the near future.
9. DAPC grant has also increased our outreach manifold.

10. The project conducted multi-stream outreach work – through leaflets and face-to-face contacts, over telephone and through emails, dedicated project website and social media and Facebook group, in addition to newspaper ad, that resulted in a primary outreach of more than 1,000 targeted parents and caregivers.
11. However, the outreach activities have had unmistakable multiplying effect.
12. The reach of the project's Facebook page was standing at around 3000,000 as on 24 April 2018, and its multinational following that includes people from Bangladesh and 35 other countries across the globe, as well as 7,217 people interacting with the project's Facebook group are clear indications of the multiplied span of awareness raised and the intensity of need people do feel for parenting skills training and similar interventions.

Recommendations & Way Forward

- The present training can be continued and customized further in terms of duration and content.
- Parenting training should be designed for different parent groups with children of the following age ranges: new born -12 months, toddlers (12-36 months), 3-10 years, 11-15 years and 16-21 years.
- Parenting training should be designed for other caregivers too, especially for teachers.
- To be effective future parenting programs in Bangladesh should be informed by adequate research.
- Every drug prevention and treatment program should incorporate parenting education and skill training.
- There can be specialized parenting training for parents of drug-using children and children with challenging behavior (ADHD etc.).
- CREA will try its best to incorporate parenting as one of its core programs in near future.
- UNODC can fund further for scaling-up of this training program.

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 2017 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, 9 researchers collected data from CREA in 2017.

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 2017: BDT 33,146,952.00

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.

&

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

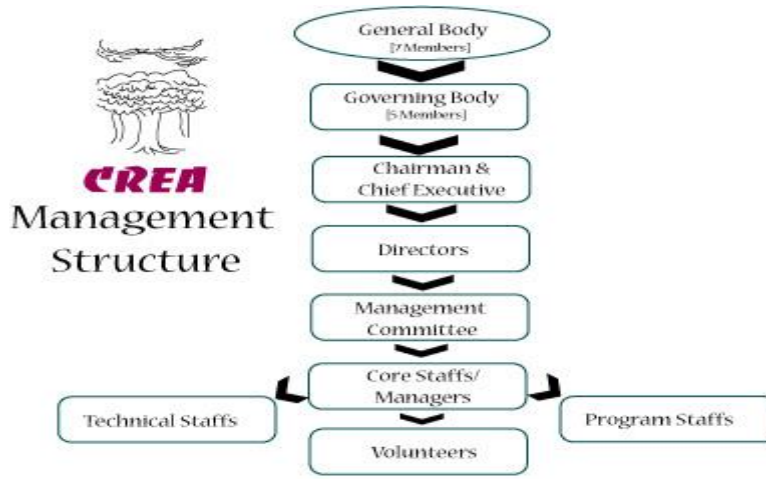
CREA has set forth three general objectives and supporting strategies that address its thematic areas. The objectives are:

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