

The Research and Evaluation Division

ANNUAL REPORT 1990



IBRAC

BANGLADESHI RURAL ADVANCEMENT COMMITTEE
DHAKA, BANGLADESH

THE RESEARCH AND EVALUATION DIVISION

ANNUAL REPORT 1990

**Bangladesh Rural Advancement Committee
Dhaka, Bangladesh**

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I. INTRODUCTION

Research is essential for planning and managing development. Research-based information are necessary for devising strategies and designing programmes that involve a multitude of people. Research also helps in objective analysis of a situation and scientific estimation for a project. High grade data generated through research can be useful for enlightened decision making. These realities prompted BRAC to develop a research unit within the organisation. The present Research and Evaluation Division (RED) is the outcome of this vision. The primary responsibility of RED is to provide necessary research support to the multifaceted and expanding interventions of BRAC. The Division also undertakes studies on request from other organizations. It performs many other functions as required for the development of BRAC programmes.

The RED grew out of an humble beginning. Starting in 1975 with only one employee, it has evolved into a full fledged Division with professional staff drawn from various branches of social and applied sciences. This multi-disciplinary team of professionals design and carry out research in different aspects of development - Health, Social and Economic.

II. TYPES OF RESEARCH

RED conducts various types of research which can be classified under five broad categories:

- a. Baseline or benchmark studies;
- b. Monitoring studies;
- c. Diagnostic studies;
- d. Impact evaluation studies; and
- e. Policy oriented studies.

Most of the studies conducted so far are short term or 'ad hoc' in nature. In recent years the RED has been involved in planning and executing some longitudinal or long term studies. These studies aim at capturing the changes that are taking place in the socio-economic life of the villagers over time. Vital Events Registration started in 1987 and Village Study Project (VSP) initiated in late 1989 are two such long term projects. Eight teams of field researchers, posted in eight study locations of the country, have been engaged in collecting data from these study locations as per research designs.

III. HIGHLIGHTS OF 1990 ACTIVITIES

RED continued its programme of research and accomplished a good number of studies in 1990. The Division has so far published over 175 research reports many of which have received wide citation. During the year under report, the RED researchers completed 21 research reports

and produced 12 journal articles/papers. Another 26 study projects were at different stages of progress. Besides, the field researchers of village study project, which was operationalised from January 1990, produced several case studies on various aspects of rural Bangladesh.

RED also undertook several studies in collaboration with some NGOs and international agencies, viz., Helen Kellar International, PRIP, UNICEF, World Bank, and Overseas Development Institute.

The Division finalised the design of an action research, namely Home Gardening Project, in 1990. The project will be introduced in five villages of Jamalpur district. All preparatory arrangements were made in December 1990 to initiate the work. The main objective of the project is to increase the availability of vitamin A rich fruits and vegetables in rural households and increase vitamin A intake by children under six years of age through a home gardening and nutrition education programme.

As in the previous years, RED extended various kinds of support and assistance to the BRAC programme. These included developing proposals of two new development initiatives, viz., Women's Health and Development Programme (WHDP) and Baor Development Project, which are scheduled to be introduced by BRAC in 1991. The RED was also actively involved in developing indicators for the monitoring of BRAC's Rural Development Programme and WHDP.

Students and scholars from different universities and organisations, both national and international, approach BRAC every year and seek various kinds of assistance in connection with their research. The RED offered consultative services and data support to a large number of such scholars during the year. One student of Statistics Department, University of Dhaka, produced his Master's thesis with the data support, computer facility and intellectual ideas provided by RED in 1990. Facilities were extended to three foreign students in conducting their PhD level dissertation work.

The Division also offered useful services in initiating a new venture designated Essential National Health Research (ENHR). BRAC, in collaboration with the Commission on Health Research for Development, took leading role in promoting ENHR in Bangladesh. A working group comprising scholars from several organisations was formed in January 1990. The working group devised ways and means of promoting ENHR in the country by building research awareness and capability, creating a positive research environment, stimulating demand of research in decision making, disseminating research results, etc. The RED assumed the responsibility of coordinating the activities of the ENHR Working Group and organised two national workshops on ENHR in January and November 1990. Dr. AMR Chowdhury, Head of the RED participated as member secretary of the ENHR group.

IV. MANPOWER

The strength of core researchers increased to 18 in 1990 : One with Ph.D. and seven hold master's degree from different foreign universities. Induction training of 14 new field researchers

was completed in January, and they were posted in two VSP study locations. The total strength of the Division rose to 90 with over 50 in the field.

Growth and diversity of the BRAC interventions demand larger quantity of diagnostic evaluation and policy oriented research. Wider research support was considered necessary to strengthen the non-formal primary education, nutrition, para legal and income generation programmes. To meet this growing needs, steps were taken to increase the number of professionals in the research team.

Recruitment

Four core researchers were recruited in 1990:

- i. Mr. Ashim Kumar Kar, with a master's degree in Economics from Jahangirnagar University joined RED in March 1990.
- ii. Mr. Shah Asad Ahmed, with a master's degree in Sociology from the University of Dhaka joined in August 1990.
- iii. Mr. Rezaul Karim, with a master's degree in Statistics from the University of Dhaka joined in August 1990.
- iv. Ms. Aleeze Sattar, with Honors in Anthropology from the Smith College, USA, joined RED in September 1990.

At the field level, 6 female field researchers were recruited to work in the village study project.

Promotion and Upgradation

The salary structure of young researchers and field researchers was upgraded to attract bright university graduates in research work.

Mr. Syed Shuaib Ahmed, Senior P.O. (Research), Mr. Nurul Amin, Field Researcher under VSP and Mr. Mizanur Rahman, P.O. (Research) of Health study team were promoted during the year.

Staff Development

RED encourages its researchers to develop their capability and professional competence through higher training. Preparatory works were initiated to send up a few young researchers for higher education in foreign universities in 1991.

RED arranged two training workshops for the benefit of its field researchers of the Village Study Project (VSP). The first workshop was on "methodological issues of VSP" held at Jessore Training and Resource Centre (TARC) in January and the second one was on "qualitative methods of information collection" which was held at the Management Training Programme (MTP), Dhaka in August 1990.

V. SOME NEW DIMENSIONS OF WORK

RED's activities were reviewed in a consultative forum under the chairmanship of the Executive Director of BRAC in December 1990. Heads of all BRAC programmes and core researchers of RED took part in the review. Some useful guidelines and new dimensions of work emerged out of the consultation which are expected to increase the effectiveness of the RED. Following were the major recommendations:

- a. **Developing the Capacity of RED:** RED's capacity are to be developed by increasing the strength of the core research team. Capability of the researchers are to be developed through appropriate training within and outside BRAC. Every researcher will endeavour to publish his/her own research work in professional journals.
- b. **Improving the Quality of Reports:** Depth and readability of research reports are to be enhanced. An internal review body should be set up to look at the reports at their draft stage. Consultation with some selected experts (professors of universities, reputed scholars, etc.,) might be made in designing studies and editing the reports. Specialised training in qualitative methods of research may also be arranged at BRAC for the researchers.
- c. **Dissemination of Research:** The research reports should go for wider circulation both internally and externally. The reports should be made available to the relevant institutions and experts outside BRAC and to all the Area offices of different programmes under BRAC. Summary of each report should be translated in Bengali and circulated at the field level for the benefit of field level workers of BRAC.

A dissemination cell is to be organised within RED to undertake translation work, publication and circulation of the reports. The consultation stressed on improved communication between the RED and programme management. Several new areas of study were also suggested.

Quick actions were initiated to actualise the recommendations of the consultation.

VI. ACCLAMATION OF RED'S ACTIVITIES

Activities of the Research and Evaluation Division (RED), continued to be highly acclaimed far and wide. In 1990 one particular research report entitled 'A Tale of Two Wings: Health and Family Planning Programmes in an Upazila in Northern Bangladesh' created widespread interest among researchers, experts and policy makers of the government and various development agencies working in Bangladesh. The findings of the report were highlighted in two reputed dailies of Dhaka. Besides, the Ministry of Health, Government of Bangladesh, several NGOs and international agencies extolled the usefulness of the study. Excerpts of their views can be seen at the Appendix.

VII. VILLAGE STUDY PROJECT

The Research and Evaluation Division designed a long term village study entitled "Village Study Project" (VSP) in 1989 covering 10 villages in two locations - Monirampur (Jessore) and Jamalpur. Following a multidisciplinary approach, VSP attempts to analyse rural dynamics with an anthropological focus. This longitudinal study covers various aspects of village life: demographic, education, human resources, employment, income and expenditure, occupational pattern and wage structure, gender and familial labour, agro-technology and agrarian structure, ideological and institutional aspects, rural credit, social system and social elite, class formation and social structure, family planning, nutrition, health care, etc.

VSP has the capacity to continuously feed the BRAC programme with diagnostic and monitoring impact evaluation on all the programme strategies starting from economic changes to awareness, values, human behaviour and rural power structure.

Baseline survey of the 10 study villages and 4 control villages were nearly completed in 1990. The data are being computerised. In addition, collection of data on income, expenditure, consumption, health situation and village development activities are being carried out on a continuous basis. By the end of 1991, several reports on various aspects of the study villages will be published.

VIII. COLLABORATIVE RESEARCH PROJECTS

BRAC and the Maternal and Child Epidemiology Unit of the London School of Hygiene and Tropical Medicine have agreed to launch a joint collaborative research project in Bangladesh entitled "An Investigation into the Nature and Determinants of Maternal Morbidity related to Delivery and Puerperium in Bangladesh". The preliminary work has started. The data collection will start from May 1991 and will continue for two years.

RED initiated a case study in late 1990 on development and dissemination of agricultural technology in collaboration with the Overseas Development Institute, UK. The study focuses on the technologies developed and disseminated through the poultry and irrigation programmes of BRAC and the modus operandi of BRAC-GOB collaboration. The study is scheduled to be completed in March 1991. Three other NGOs of Bangladesh are also participating in this study, each covering specific technologies.

IX. RESEARCH REPORTS COMPLETED IN 1990

At the time of producing this report, 21 study reports were completed. Abstracts of these reports are provided at the end of this report. Titles of the reports can be seen in the following pages.

	Title	Researcher
1.	Who Don't Get Loan and Why: A Look into Unequal Credit Mobility in Landless Groups	Sanzidur Rahman
2.	Demographic Characteristics of the Population of Three Unions in Manikgonj: A Baseline Assessment, 1986	Sadequr R Chowdhury
3.	Demographic Registration System - Manikgonj and Joypurhat, Vol. II: An Evaluation of the Quality of Data Collected during 1986-88	Sadequr R Chowdhury
4.	Gender Differences and Role of Women in the Households: The Case of Female Loanees in BRAC	Zafar Ahmad A Kabir Chowdhury Monira Hasan
5.	An Alternative Approach to Women's Development: Potentials and Constraints of BRAC's Empowerment Strategy	Zafar Ahmad Monira Hasan
6.	Utilization of Small Trading Loans under RDP	Sarwar Jahan
7.	Production and Employment Aspects of Small Enterprises for Women: A Case for Betila Production Centre	Mahmuda R Khan
8.	Impact of IGVGD: Case Studies of Poultry Workers	Shams Mustafa
9.	Technology Development and Diffusion: A Case Study of Collaboration Between BRAC and the Government of Bangladesh	Shams Mustafa
10.	Impact of IGVGD: An Exploratory Study of Poultry Workers in One Upazila - A Research Paper	Shams Mustafa
11.	Primary Education for Older Children : Changes in Perception and Attitude of Learners - An Exploratory Study.	Aleeze Suttar
12.	Health Research in Bangladesh: An Update	AMR Chowdhury, et al.
13.	A Tale of Two Wings: Health and Family Planning Programmes in an Upazila in Northern Bangladesh	AMR Chowdhury, et al.

14.	Can Imams Teach in NFPE Schools: Report of a Survey from Four Rural Areas	Fazlul Karim
15.	A Brief Report on Growth Monitoring at BRAC	Nasreen Huq
16.	Growth Monitoring at BRAC: Experience from Satoria	Nasreen Huq
17.	Issues for Survival During A Disaster: Flood of 1988 and People's Response	Nasreen Huq
18.	Health Post: A Model for Integrated Health Services in Rural Bangladesh	Nasreen Huq
19.	Training Programme of the Family Welfare Assistants in Bangladesh: An Assessment of Retention of Knowledge	Nazrul Islam
20.	A Summary Report on the Mid-Term Evaluation of BRAC's Primary Health Care Programme: Investigating Changes in Certain Process Variables	Fazlul Karim AMR Chowdhury Nazrul Islam
21.	Roof Over My Head: Study of the Housing Programme of BRAC	Ashim K Kar AMR Chowdhury

X. ON GOING RESEARCH PROJECTS

The following studies (26) initiated in 1990 and in early 1991 were at various stages of progress at the time of producing this report. The studies are scheduled to be completed in 1991.

Title/Topics	Researcher
1. Measurement of Effective Usage of ORT	AMR Chowdhury
2. Health Impact of a Non-health Intervention	AMR Chowdhury Ahmed Ali
3. Review of the RDP's "Issue-based Meetings" Programme	AMR Chowdhury
4. Federation of the Landless Groups: A Review of Experiences and Possibilities at BRAC Organised Groups	AMR Chowdhury, et al.
5. Health Researches done in Bangladesh during 1986-90: What were the Priorities	AMR Chowdhury Shahana Karim Rukshana Gazi
6. Demographic Registration System: Manikgonj and Joypurhat	Rezaul Karim

7.	Causes of Overdue Loans in RIDP	Alamgir Hossain AMR Chowdhury
8.	Involvement of NFPE Students After their Graduation	Kaisar Ali Khan AMR Chowdhury
✓ 9.	An Evaluation of the Paralegal Programme	Aleeze Sattar Sarwar Jahan
✓ 10.	Follow up of Recommendations of Four Socio-Economic Studies (Poultry, Deep- tubewell and Social Forestry)	Mahmuda R Khan
11.	Study on Pally Rationing	Samir R Nath MG Sattar
12.	Does Growth Monitoring Promote Child Survival? An Evaluation of BRAC's Growth Monitoring Programme	Fazlul Karim AMR Chowdhury Laurine Brown Nasreen Huq R Karim
13.	Study on Socio-Economic Differentials in Utilising PHC Services	Fazlul Karim
14.	An Evaluation of BRAC's Family Planning Experimental Programme	Fazlul Karim Jalal U Ahmed
15.	Facilitation to the Government Health and Family Planning Programmes: Process Documentation of BRAC's Approach	Fazlul Karim Jalal U Ahmed
16.	Effects of Mother's Club in Changing Health Behaviour and Utilization of Child Survival Services	Fazlul Karim
17.	Study on Contraceptive Prevalence Rates in Six Rural Unions	Fazlul Karim
✓ 18.	Study of the Primary Schools: The Bastia School	Jahurul A Chowdhury AMR Chowdhury
✓ 19.	Study on the Economic Impact of Sweet Water Fisheries on the Lives of the Rural Poor	Monira Hasan
20.	Transition and Change in Rural Bangladesh: Impact of Intervention on Selected Indicators	Zafar Ahmad

21.	Nature and Determinants of Maternal Morbidity Related to Delivery and the Puerperium in Bangladesh	AMR Chowdhury Liz Goodburn Wendy Graham Shahana Karim Rukshana Gazi
22.	Safe Motherhood: Situation Analysis	Shahana Karim Rukshana Gazi
23.	Menstruation: Beliefs and Practices of Adolescent Girls in Rural Areas of Manikgonj and Joypurhat	Nasreen Huq
24.	Marriage: Through the Eyes of the Adolescent Girls	Nasreen Huq
25.	Growth Monitoring at BRAC: A Closer Look at the Programme Data	Nasreen Huq
✓ 26.	Parliamentary Elections 1991: Awareness of VO Members - Preliminary Findings	Shams Mustafa

XI. CASE STUDIES BY FIELD RESEARCHERS

The field researchers of Village Study Project (VSP) initiated several case studies on different aspects of life in the study villages. Five of the reports were completed in 1990. Work on 13 others were at different stages of progress. The following list provides the details.

A. REPORTS FINALISED (VSP)

	Titles	Researcher
1.	Rural Migration in Bangladesh: Scene From an Upazila of South West Region	Shamim Ara Sanzidur Rahman
2.	'Kayputra' Tribal Community: An Analysis of Their Socio-Economic Lifestyle	Nazneen Ara
3.	Problems of Getting Daughters Married in Rural Bangladesh: Socio-Economic and Psychological Impacts	Sobita Somani
4.	The Role of Rural Touts in Institutional Credit and Its Impact on the Loanees	M Nurul Amin
5.	An Analysis of Day to Day Situation of the Landless Poor	Rina Chakravarty

B. ONGOING CASE STUDIES (VSP)

Titles	Researcher
1. Loan Recovery Performance of the Rural Poor: Variations and Interrelationships	Zafar Ahmad
2. Rural People's Attitude Towards Working Women	M Nurul Amin
3. Gender Differentiation in Guardians' Attitude Towards Their Children	Shamim Ara
4. Rural Superstitions and Its Implication for Development	Parul Lata Biswas
5. Breaking Up of Joint-families: An Analysis of Reasons by Social Strata	M Nurul Amin
6. Polygamy : Reasons and Consequences	Dipti Das
7. Attitude of Rural People Towards Family Planning	Shamsun N Biswas
8. Higher Education of Rural Women: Attitudinal Constraints	Sadhona Biswas
9. The Sufferings and Helplessness of Old Age in Poverty-ridden Rural Bangladesh	Parul Lata Biswas
10. The Attitudes of Parents Towards Child Marriage	Dipti Das
11. The Role of Superstitions in Primary Health Care	Akhtar H Mallick
12. Divorced Women in Rural Bangladesh: An Analysis of Pre and Post Divorce Situation	Kamala Sarkar
13. The Household Economy : An Analysis of Constraints in a Resource-poor Situation	Shahnaz Akhter

XII. JOURNAL PUBLICATION/CHAPTER IN BOOK

The following articles and research papers produced by RED researches were published or accepted for publication in various journals, periodicals and books during year.

- a. The Longterm Role of NGDOs in Primary Health Care -- by P. Steefland and AMR Chowdhury Health Policy and Planning, 5, 1990. pp. 261 - 66.
- b. Folk Terms for Diarrhoea in Rural Bangladesh by AMR Chowdhury and ZN Kabir -- Review of Infections Diseases, 13 (supp. 4), 1991.
- c. Home-made ORT: A Community Trial Comparing the Acceptability of Sucrose and Cereal-based Solutions -- by AMR Chowdhury, F Karim, JE Rohde, J Ahmed and FH Abed -- Bulletin of the World Health Organisation, 69, 1991.

- d. Controlling a Forgotten: Using VIIWs for Tuberculosis Control in Rural Bangladesh -- by AMR Chowdhury, N Ishikawa, A Alam, S Islam, S Hossain, RA Cash and FH Abed -- Bulletin of the IUATLD (newsletter) (in press).
- e. Impact of Credit for the Rural Poor: The Case of BRAC --- by AMR Chowdhury, M Mahmood and FH Abed -- Journal of Small Enterprise Development (in press).
- f. Community Participation Through Village Health Committee -- by AMR Chowdhury, F Karim, P Streefland and S Ahmed -- (submitted).
- g. Lesson from Successful Experiences in Family Planning -- by AMR Chowdhury and KS Huda -- in B Duza (ed.): The South Asian Study, Dhaka, UNFPA.
- h. Empowerment Through Health Education -- by AMR Chowdhury -- in P Streefland and J Chabot (eds.) Implementing Primary Health Care: Experiences Since Alma Ata. Amsterdam, Royal Tropical Institute.
- i. The Alternative Means for Treating Diarrhoea: ORT Knowledge Universal Throughout Bangladesh -- by Fazlul Karim and M R Chowdhury -- In Touch, Vol. IX, No. 94, March 1990.
- j. Two chapters entitled (i) Food and Nutrition and (ii) Nutrition in Pregnancy and Lactation (in Bangla) by Nasreen Huq -- for Training Module of the Women's Health and Development Programme.
- k. Social Mobilization for EPI -- by FH Abed, N McKee, A Chowdhury and AMR Chowdhury -- in M Huq (ed.), Near Miracle in Bangladesh, Dhaka: University Press Ltd., 1991
- l. Daridra Niroshane Palli Riner Probbab: BRAC-er Karjakramer Ekti Mullayan. AMR Chowdhury, M Mahmud & A Alam, Unnayan Bitarka, (in press).
- m. Unnayaney Besharkari Sangstha Shamuher Bhumika: EPI Karjakram Prashanga, AMR Chowdhury, M G Sattar & S Ahmad, Unnayan Bitarka, (in press).

XIII. SEMINARS/WORKSHOPS/CONFERENCES

RED researchers took part in the following seminars and conferences held at home and abroad during the year:

1. Dr. AMR Chowdhury, Head of the Research and Evaluation Division, participated and presented papers in the following workshops and conferences:
 - a. Workshop on Essential National Health Research. Puebla: Maxico, January 1990.
 - b. South Asia Conference on Safe Motherhood. Lahore: Pakistan, March 1990.
 - c. International Workshop on Diarrhoea and Acute Respiratory Infection. Johns Hopkins University, Baltimore: USA, April 1990.

- d. World Conference on Lung Health. Boston: USA, May 1990.
 - e. Workshop on Case Studies on Tuberculosis Control in Primary Health Care Setting. Sturbridge, Massachusetts: USA, May 1990.
 - f. Consultation on the Maternal Morbidity Study at the London School of Hygiene and Tropical Medicine, London, September 1990.
 - g. International Workshop on Essential National Health Research. Pattaya: Thailand, November 1990.
2. Mr. M. G. Sattar, Manager RED, participated in and presented a paper entitled "Assessing the Impact of NGO Interventions: Experiences of BRAC in Bangladesh" at the Regional Consultation on Methodology for Impact Assessment, Bombay, India, 12-14 November 1990.
 3. Mr. Fazlul Karim, Senior Epidemiologist, participated in the following workshops:
 - a. Third Regional Workshop on Objective-oriented Project Planning Method for MCH/FP Programme Managers, organised by NIPORT and GTZ and held at BARD: Comilla, 3-15 February 1990.
 - b. Workshop on Lesson Learned in Practical Nutrition: Approaches and Action in Bangladesh, organised by SCF, USA and held on Dhaka, 13-17 May, 1991.
 4. Mr. Zafar Ahmad, Senior Research Economist, participated in and presented papers at two seminars/workshop:
 - a. Three-day workshop on Dissemination of Social Science Information and their Utilization System in Asia, organised by APINESS and held at Dhaka, April 1990.
 - b. Paper entitled "Adoption of Appropriate Technology for the Majority: Targetting the Poorest First" at the BIBM training seminar on Adoption and Diffusion of Appropriate Technology. Dhaka, November 1990.

XIV. RED SEMINAR AND WORKSHOP

RED organises seminars and workshops to facilitate mutual exchange of knowledge and ideas of its researchers. Every research proposal developed for conducting a study by the RED researchers are presented in a workshop. Similarly every research report produced by the researchers is presented in the RED seminar. The programme heads and field level managers also take part in the seminars to express their views and comments. During the year, several workshop and seminar sessions were organised as per programme.

XV. EXTERNAL INVOLVEMENT OF RED

The sphere of RED's external involvement widened during the year. The nature of involvement included consultancy and some other professional services given to various agencies and researchers. The major involvements were as follows:

1. Support to ENHR Activities

BRAC took a leading role in initiating a new venture in Bangladesh named Essential National Health Research (ENHR). BRAC also provided the temporary secretariat of the Working Group constituted for the ENHR in 1990. The RED assumed the responsibility of coordinating the activities of this Working Group and provided other necessary support to promote ENHR.

2. Support in Designing Study and Field Work

RED provided assistance to one American and one Dutch student in conducting field research for their dissertation works. RED also extended support in designing field work for a study on empowering rural women through credit intermediation sponsored by the World Bank.

3. Consultancy Services

- a. Dr. AMR Chowdhury, Head of the Research and Evaluation Division, worked as a consultant to the Applied Diarrhoeal Disease Research (ADDR) Project of the Harvard University, USA in November 1990 and advised a group of researchers at the University of Khon Kaen, Thailand, on the development of interventions to reduce the incidence of diarrhoea in rural Thai Community.
- b. Dr. Chowdhury was also appointed as a member of the Social Science Advisory Council of the International Centre for Diarrhoeal Diseases Research, Bangladesh (ICDDR-B) and participated in a week-long review of social science activities of the Centre in June 1990.
- c. Mr. M. Ghulam Sattar, Manager RED, worked as a member of the team constituted for evaluating the Long Term Village Study Project of BARD, Comilla in August 1990. The study project was sponsored by the Ford Foundation, Bangladesh. .pa

XVI. ABSTRACTS OF COMPLETED STUDIES

1. A Tale of Two Wings: Health and Family Planning Programmes in an Upazila in Northern Bangladesh. (p. 60).

Abstract: This study looks at how the government health system, incorporating the health and family planning wings, functions in an upazila in northern Bangladesh. By staying in one upazila for more than three months and working closely with different levels of health and family planning officials, the study team gained many insights into the dynamics of different programme components, some of which are startling. The study portrays a dismal picture of the situation at the periphery. The field staff of the two wings spend less than half of their time in official work. They tend to be more attentive to work which is more closely supervised, to programmes which involve greater national commitment (such as immunisation), to emergencies (such as floods), and to efforts where the relevant supplies (e.g., ORS) are more available. It is assumed that many of the findings will be useful to the government in assessing and improving its health and family planning services at the periphery. Based on this study a major review of the health and family planning services in rural areas is warranted.

2. Who Don't Get Loan and Why : A Look into Unequal Credit Mobility in Landless Groups (P. 43).

Abstract: The study looks into the reasons for unequal access to credit among the members of the BRAC organised groups of landless people. Though in principle no clear distinction is made among the members in providing credit, past experience shows that a certain percentage of the members received credit and other services more than once, while a segment of the group members was often left out of the benefit of loan.

A sample of 280 households, out of which 50% were loanees and 50% non-loanees, were selected and interviewed from BRAC organised groups. The sample households were spread over 33 Village Organisations of five RDP Areas of BRAC in the districts of Manikganj, Pabna and Rajbari.

The loanee households were found to be in worse off condition than the non-loanees in terms of family size, proportion of active labour force, number of dependents. The per capita income was higher for the non-loanees and their involvement as wage labourers was higher too compared to loanee households. The average value of household assets possessed by the non-loanees were also higher than that of the loanees. Proportion of households with zero land was found to be higher among the non-loanees, and both average homestead land and operational land was lower.

Households having representation in the management committee of the village organisations were found to have taken more credit from BRAC compared to the households having no representation. Non-fulfillment of pre-conditions for receiving a loan was identified as the major reason affecting equal credit mobility. "Failure of the management" and "Reluctance of the leaders to provide credit" together came up as the

second most important reason. There were also some factors beyond the control of BRAC which was another important reason.

Improving participation of the members, intensifying the role of BRAC staff, recovery of old debt were suggested as the most effective ways to solve the issue. Management should also be made more participatory and flexible.

3. Gender Differences and Role of Women in the Households : The Case of Female Loanees of BRAC. (p. 52).

Abstract: Traditionally women in Bangladesh are dependent on man and their opportunities to develop as independent members of the society is very limited. This study seeks to identify the role women play in familial activities surrounding the household economy of the rural poor, the extent of their own control in the decision making and looks into the extent of their decision making in BRAC financed schemes. The household activities which are predominantly decided by women are the activities which are less important, less risky with little financial involvement whereas the activities where men's role in decision making is predominant are the activities which are more crucial, more risky and more important for the household economy. With regard to non-agricultural activities women have a greater role in performing tasks and taking decisions. Certain agricultural activities are mostly performed by male in most of the households e.g., planting crops, weeding, giving fertilizer, harvesting, threshing, etc.

In case of the schemes run by men and financed by BRAC, women have no role in decision making and in rare cases women are consulted. In the case of the BRAC schemes run by women it is seen that in majority of the households it is the women who take major decisions relating to the schemes.

The female loanees have perceived some benefits after getting involved with BRAC programmes. Increase in economic well-being, increase in status in the family, increase in social status, transcending seclusion and exposure, freedom and reduction in economic dependency, increase in wealth and opportunities and rights of women both in family as well as in the society have increased.

4. A Summary Report on The Mid-Term Evaluation of BRAC's Primary Health Care Programme: Investigating Changes in Certain Process Variables (p. 24).

Abstract: This mid-term evaluation aimed at assessing the extent of effects of the Primary Health Care (PHC) programme of BRAC in bringing about positive changes in people's knowledge, attitude and practices (KAP) in the intervention areas compared to the control. The PHC, introduced in 1986, includes a total of eight components : (1) Oral Rehydration Therapy (ORT) Teaching, (2) Immunization, (3) Vitamin A Capsule Distribution, (4) Nutrition Education, (5) Training of Traditional Birth Attendants (TBA), (6) Safe Drinking Water and Sanitation, (7) Family Planning, and (8) Basic Curative Treatment. The PHC covers six upazilas of Bangladesh of which five were included in this study. The RED

carried out this evaluation study to investigate the changes in certain process variables of the programme, taking place during September-October 1989.

The findings show that all of the intervention areas achieved a considerable degree positive changes in many aspects of health behaviour practices such as use of ash/soap for washing hands after defaecation, carrying water container by right hand while going to latrine, development of mothers' club, correct knowledge on annual VAC distribution cycles, natural sources of vitamin A rich foods, etc. Most of the programme areas achieved higher results with respect to drinking tubewell water, cleaning utensils by tubewell water, installation of pit latrines, disposing stool and solid wastes in fixed places, and immunization of the target children. Immunization coverage was much higher in PHC areas of BRAC and the aggregate coverage of VAC of all the programme areas under this study was much higher than the national average. However, expected progress could not be made in several areas in respect of safe latrine construction due to certain geo-physical factors. Considering the duration of the project and the cost per target population, the achievements seemed to be encouraging in most of the indicator values covered by the study in the programme areas over the control.

5. Can Imams Teach in NFPE Schools: Report of a Survey from Four Rural Areas. (p. 43).

Abstract: Although the 3-year Non-Formal Primary Education (NFPE) programme of BRAC tailored for the disadvantaged children has shown some definite promises in combating illiteracy, in raising awareness, in preparing the children for practical life by ensuring higher school attendance rate (95%), its further expansion faces constraints like unavailability of teachers and school houses at rural situations. Involvement of the Imams and the mosque houses was thought to be potential to overcome these constraints. But before involving the Imams in NFPE, their skills and willingness needed to be explored. Towards that end, a survey was conducted in eight purposively selected unions, two from each of the four divisions. The survey results portrayed that about 99% of the Imams interviewed had attended some educational institutions. Nearly half of them had at least secondary or similar education. The Imams were administered a test to assess their practical knowledge mostly relevant to NFPE curriculum. It was found that they knew Bangla and arithmetic very well. Two-thirds of them could correctly pronounce and state the Bangla meaning of at least one of the three words asked in test (viz., Brothers, Father and Wife). Sixty four percent of the respondents could do all the five sums given in test. Over 60% of them opined that they would be willing to teach Bangla, English and Arithmetic to young boys and girls. A higher proportion said that they did not have any problem in teaching co-curricular activities. Although a large number of the Imams have had skills and were willing to teach NFPE curriculum, this may turn out different when the actual programme starts. Use of mosques/mokhtabs as NFPE schools needs permission from the mosque management committee. BRAC may face difficulties to negotiate with the committees. In involving the Imams as NFPE teachers, BRAC will have to sacrifice some important features of the NFPE such as use of female teachers, etc.

6. Impact of IGVGD: Case Studies of Poultry Workers (P.31).

Abstract: This report embodies case of ten poultry workers (PW) seven of whom were active and three had discontinued to work when the study was undertaken. All of them were from one particular upazila where BRAC introduced the Income Generation for Vulnerable Group Development (IGVGD) programme for the very poor women who were previously recipients of WFP wheat for two year. The concept of PW was developed by BRAC in its search for ways to enable these women to earn an income at least equivalent to the value of the wheat after the free ration support was withdrawn. The PWs are given training on preventive and curative aspects along with rearing management. They are routined to collect the vaccines two to four times a month from a nearby centre. The vaccines are supplied by the government free of cost and distributed to the PWs by BRAC. They also maintain a revolving stock of drugs worth Tk. 25 which is replenished with the sale proceed. The PWs vaccinate the birds of the owners and realise from them a fee of Tk. 0.15 and Tk. 0.25 per injection, for chicks and bigger birds respectively.

These case studies attempted to examine the impact of programme participation on the women's lives, the constraints and potentialities. Each case is presented in a four-component frame work: Background, economic condition, vaccination work and daily routine. Information were collected through in-depth interviews and programme records. The findings reveal that the PWs have good knowledge about the vaccines of different poultry diseases. All the active PWs were eager to continue their work and some of the inactive cases were planning to return to this work. The average income earned by the active poultry workers ranged from Tk.54.00 to Tk. 133.25 per month. This income supplementation helped some of them to improve their debt situation. Most of the active PWs spend two days a week for vaccination work and combine their household chores with the poultry work. Only one of them spends six days a week as she covers a large number of villages, she also earns a higher income.

The study is exploratory in nature which can be the basis of designing a more comprehensive study in future.

7. EPI in Bangladesh: A Study on NGO Involvement and its Cost-effectiveness (P.81).

Abstract: This paper presents results from three surveys conducted independently, using the standard "30-cluster method", in the upazilas served by BRAC (14 out of 15 upazilas), CARE (16 out of 25 upazilas) and Government (11 out 22 upazilas) areas from EPI's second phase (1986-87). The study was undertaken to compare the coverage of EPI in areas assisted by BRAC and to document the effect of additional efforts of BRAC and CARE in social mobilisation on coverage rates and its cost, and to examine the association of coverage with selected socio-economic and programme related variables. The sustenance of the EPI coverage after the withdrawal of BRAC assistance was also investigated.

The result shows that the coverage of target children (0-2 years) for different vaccines (DPT, BCG, Measles, Polio, etc) remained highest in the areas served by BRAC followed by CARE and the government areas. The coverage for each of the three doses of DPT, Polio and Measles was highest in the BRAC areas and lowest in the government area. Regarding the overall status of immunization, the number of children "fully immunized" was highest in the BRAC area (41%), followed by CARE (25%) while it was lowest in the government area (15%). Costs incurred by both BRAC and CARE in the immunization activities of the second phase upazilas were also investigated (expenditure by government was not known). The cost seems to be quite high: Taka 207 for BRAC and Taka 486 for CARE in fully immunizing each additional child on top of what is achieved by the government (15%) without BRAC/CARE involvement. This difference in costs between BRAC and CARE was due to higher coverage in BRAC areas and also probably due to differential programme methodology. The association between immunization status and different socio-economic and programme variables was also investigated. There is a positive correlation between the distance of the village from the upazila health complex and the knowledge of the mothers about the location of the vaccination. Mother's education level was also positively related to immunization status. Large number of mothers mentioned 'ignorance about vaccination', 'fear of side effects', 'place and time not known' etc., as reasons for not immunizing their children.

8. **Technology Development and Diffusion: A Case Study of Collaboration Between BRAC and the Government of Bangladesh. (P.39).**

Abstract: This report presents the findings of studies of two sectorial interventions of BRAC, viz. poultry and irrigation, that collaborate with the government of Bangladesh. Both these interventions utilise specific technologies and are examples of cooperation. The poultry development technologies are diffused by BRAC in formal collaboration with the government. This programme is targeted to destitute women who are not organised by any of BRAC's major programmes. The irrigation programme, on the other hand, is a part of BRAC's core Rural Development Programme and involves both male and female members of BRAC supported village organisations of the poor.

The report discusses the goals, evolution, strategic elements of intervention, management and organisations, specific technologies developed and disseminated, and goal and mechanisms of collaboration with public sector agencies relating to poultry and irrigation development. The report concludes with the discussion of two important aspects: identification and testing of new technologies by BRAC through its rural enterprise programme and sustainability aspects of the technologies introduced by BRAC.

9. **A Brief Report on Growth Monitoring at BRAC. (p. 12).**

Abstract: Growth monitoring centres have been set up as health forums in six upazilas under the Primary Health Care Programme of BRAC. Over 10,000 children under two years of age are weighed monthly in Manikganj, Gheor and Saturia upazila in Manikganj district, Santhia in Pabna and Rangpur and Taraganj in Rangpur district. The data collected

give an indication of the nutritional status of children under the age of two in the specified regions. This report is based on the monthly consolidated reports from each region from December, 1988 to December, 1989.

Growth monitoring sessions are held monthly in all the villages which are well attended (79% of the registered children attended). The forums include the following activities: weighing the children, health and nutrition education, and demonstration of weaning foods.

Monthly variations in the proportion of normal weight children were observed. The period between July and October of 1989 appeared to be one of nutritional hardship. The proportion of normal weight children declined to 50% during this time. In comparison, January and February were better months when 61% of the children were found to have weights within the normal range. Although regional and seasonal variations are present, the proportion of moderately malnourished children were quite high throughout the year in all regions. The highest rate of moderate malnutrition was observed in Rangpur (47-57%) while the greatest seasonal variations were observed in Santhia and Taraganj.

The number of severely malnourished children was relatively low. In Rangpur and Taraganj only a few incidents were reported while the numbers were higher in Manikganj, Satura and Gheor.

10. Health Post : A Model for Integrated Health Services in Rural Bangladesh.

Abstract: The report is on the concept of 'Health Post' evolved from BRAC's experience in the Primary Health Care (PHC) project. It was found that when the components of primary health care were integrated, the service delivery became more efficient. This feeling was echoed by both the service providers and recipients. At the Health Post, growth monitoring was combined with the government's satellite clinic and immunization services. Thus it was possible for women and children at the village level to have easy access to some limited health care service.

This forum required extensive cooperation between the Health and Family Planning Wings of the government. Although this cooperation was difficult to elicit, it was possible with persistence and tact. Once the forum had been launched, the workers themselves realized that it had eased their work load, and helped them to meet their targets.

The Health Post experiment demonstrates that it is possible to get the support and cooperation of the community. There are limitations, however. Some of the volunteers, despite their goodwill, can not afford to simply volunteer their services. They need some financial support.

The services at the Health Post are limited and restricted to women and children. For a true community health project, the services must be expanded. This can however serve as a model for the delivery of maternal and child health services in BRAC's Women's Health Development Project.

11. Demographic Characteristics of the Population of Three Unions in Manikganj: A Baseline Assessment, 1986 (p. 51).

Abstract: This report is based on a short survey conducted in 1986 in 3 unions of Manikganj (Betila, Jagir and Baliakhora). The report analyses demographic characteristics of population, along with some limited information on socio- economic characteristics and information on health and family planning practices of the population.

The survey covered 9,583 households (HHs) having a total of 51,739 population. Majority of them were male (26,019), the overall sex ratio being 101.2 males per 100 females. Majority of the HHs were Muslims (85%) followed by Hindus (15%). Heads of 84.7% of the HHs were male. A considerable percentage of HHs (43.5%) had no cultivable land and about a third (32.5%) of the male HHHs were related with 'Agriculture' or 'Agriculture labour' followed by 'Non- agriculture labour' (23.1%), while most of the female HHHs were related with 'Household work' (86.8%).

Among the males 21.3% were literate while only 14.8% of the females were literate. Most of the HHs were using tubewell water for drinking (85%) and Kutcha (not concrete built) latrine for defaecation. Majority (66.2%) were found as not involved with any development organisations while (16.2%) were involved with BRAC organised groups.

About 40% of the population were in the age group of 0-4 years, while only 17.1% were in the age group 45 years and above. The dependency ratio in this study area was 88%.

Percentage of the male population was 60% who never married and female population was 45.9%.

The information on fertility and mortality were both lower in this study area than the national averages. The CBR and CDR were estimated at 31.6 and 10.3 per thousand population. The TFR in this study population was 4.08 children per women and GFR was 135 live births per thousand women of productive age. The GRR was 2.05 and the NRR was 1.62. The CWR in this study was 59.3 children for 100 reproductive age women.

Both the IMR (95.4) and CMR (11.8) in the study area were substantially lower than the national (rural) figure. The

life expectancy at birth was calculated at 61.7 years for both sexes.

In the case of infant deaths, the most frequently mentioned causes were tetanus, malnutrition/weakness, while for children the most frequently stated causes were diarrhoeal diseases, malnutrition, respiratory tract infection. Although there was variation in magnitude, consistency also existed in aged group also.

12. Demographic Registration System in Manikganj and Jaypurhat, Vol.II: An Evaluation of the Quality of Data Collected during 1986-88. (p. 28)

Abstract: The Research and Evaluation Division of BRAC introduced a Demographic Registration System in some unions of Manikganj and Joypurhat districts in 1986 and 1987 respectively. As the demographic data collected in a country like Bangladesh are very often

respectively. As the demographic data collected in a country like Bangladesh are very often affected by errors like under-registration, age misstatement, etc., an effort has been made in this report to assess the quality of data and hence to guess the degree and direction of errors. To do this, different demographic techniques were applied. The data were also compared with census & other sources such as those from the Demographic Surveillance System (DSS) in Matlab managed by ICDDR,B.

The data have been evaluated for age, birth & death reporting. In the case of age reporting data have been assessed for net errors by using sex to age ratio scores & also the UN combined score. Here the lower the age ratio score implies the higher quality of age data.

According to the UN combined score, the age data is better in Manikganj (65.0) than in Joypurhat (74.6-76.9). In case of birth rates, Manikganj shows a consistency from year to year (33.09 to 34.5/thousand population) and also the rates are consistent with national rates. But in Joypurhat, the birth rate dropped abruptly in 1988 (27.72) as compared to 1987; the reverse survival technique also indicates an average of at least 8 to 10% under registration. Death rates are consistent from year to year in both Manikganj and Joypurhat, but the rates are slightly lower than the national average.

On the whole considering age, birth & death data, the registration system appears to work fairly well in Manikganj. But in Joypurhat the data are speculative of some under registration of births and female deaths in the earlier age group. Nevertheless, it can be concluded that the birth and death recording system in Manikganj & Joypurhat is functioning satisfactorily, particularly in the initial years.

13. Issues for Survival: The Flood of 1988 and People's Response

Abstract: The flood of 1988 was the most severe flood in Bangladesh in recorded history. A study was conducted in Gheor Upazila, one of the worst affected areas, to get a picture of how the people survived and to what extent they received any kind of relief.

People had not received any warnings about the impending flood from the government or the media. Despite the lack of warnings, people responded very quickly. It was the people's own responses, both individual and collective, to the emergency that ensured their survival. They built machas, moved their cows to the main road, chickens were put on the roof tops. Some of these preparations proved to be futile as the flood of 1988 surpassed all recorded levels. While seeking shelter, it was the rich that received priority in all the buildings (hospitals, colleges, Upazila Health Complex). Some sought shelter on the rooftops while most stayed in their homes. As they could keep very little food stock, and relief was scant they had to buy rice at a much higher rate. They either borrowed from friends or sold their meager assets, ducks, chickens, mango tree. The floods damaged the crops tremendously. People who worked as wage labour had to go without income for a month and lost all possibilities of income in the post flood period. Those interviewed had received some "relief" either from an NGO or the government. However the distribution was scattered, uneven and insufficient.

Women, especially poor young women, were more vulnerable during the disaster. Parents worried about the security of the girl, especially if she had to be sent for shelter elsewhere. Secondly, privacy is considered to be more important for women even in times of emergency. All the latrines were washed away and women had to wait until dark.

14. Growth Monitoring at BRAC: Experience from Saturia.

Abstract: BRAC undertook growth monitoring of children aged 0-2 years through its primary health care programme in 1987. This report is a documentation of that experience in Saturia upazila of Manikganj from April 1987 to March 1990. The programme has been successfully promoted in the villages and draws wide participation from the community. The findings are summarized below.

- 239 growth monitoring centres are managed by the local community and BRAC every month. Government field workers are involved in over 85% of the centres.
- Over 4000 children were weighed every month in the third year. This suggests a great interest in the community for growth monitoring.
- 31% of the children who had ever attended the sessions gained weight every time they were weighed.
- Over 40% of the children who had ever attended the sessions in this period suffered from two or more incidents of growth faltering.
- 65% of the boys and 55% of the girls were found to be within the normal weight for age.
- The number of severely malnourished girls was three times higher than that of boys.
- 11 months after being identified as severely malnourished, 50% of the girls and 38% of the boys continued to be severely malnourished.
- The death ratio of severely malnourished children was 19% compared to 2.4% for others.
- The main causes of death were diarrhoeal diseases, acute respiratory infection and malnutrition.

15. Primary Education for Older Children : Changes in Perception and Attitude of Learners - an Exploratory Study. (p. 39).

Abstract: BRAC introduced its Non-formal Primary Education (NFPE) Programme in 1983 with a view to extend facility of education to the children of rural poor who are largely bypassed by the formal system of education. In 1988 Primary Education for Older Children (PEOC) was started for those who were too old to meet the NFPE requirement. This report incorporates the findings of a study on PEOC. The objective was to explore changes in the attitude and perception of the children who had been to PEOC, and more specifically to look at changes in students' professional aspirations, attitude towards gender roles, health and sanitation related knowledge, and behaviour perceptions of marriage and dowry. The study was conducted as a comparison between 18 adolescents who had been to

PEOC and another 18 adolescents who had never been to school. It was found that education was important to women and adolescents who felt that education was necessary to "keep up with time." There was little difference in professional aspiration between the two groups of respondents. PEOC students felt that 1-3 years of non-formal schooling was not enough for their employment opportunities. In matters of health and sanitation, adolescents who had been to PEOC were better equipped with knowledge than those who had not. However, the PEOC students were found to have changed little in their attitude towards gender roles and women's decision making powers. In the categories of marriage and dowry, there was no significant difference between perceptions of the two groups. The study indicates that the PEOC curriculum does not contribute enough towards encouraging students to challenge social evils such as dowry. This exploratory study provides a basis for designing further studies in this field in future.

16. Health Research in Bangladesh: An Update. Presented in National Workshop on ENHR in Dhaka, Nov. 1990 and in an International Workshop on ENHR in Pattaya, Thailand, Nov. 1990 (p. 16).

Abstract: The paper incorporates the initiatives taken by BRAC, in cooperation with some other institutions in Bangladesh to promote essential national health research (ENHR). The objectives of ENHR are:

- To promote health research in Bangladesh and associated activities by building research awareness.
- To collect essential background information for health research and health research capacity in Bangladesh.
- Collection of detailed demographic and epidemiological data and associated investigations.
- Coordination with the NGOs and the country research institutions.
- Training for the community health researchers.
- Research related survey and evaluation.
- Initiatives to encourage the ENHR in Bangladesh.

Background of ENHR:

- In January 1989 the first meeting was organized in Dhaka, sponsored by BRAC and CHRD.
- In June 1989 BRAC, in collaboration with CHRD, arranged a 3 day workshop in Dhaka.
- In January 1990, a one day follow up workshop and a 9 member working group was formed; eight meetings were held since it was formed.

Activities performed by the working group

- The ten year perspective plan [1990-'99]
- Survey of selected research institutions
- List of research priorities in Bangladesh
- Research award scheme
- Formation of ENHR National Forum [proposed]
- Job description for ENHR coordination.

17. The Alternative Means for Treating Diarrhoea: ORT Knowledge Universal Throughout Bangladesh. Paper published in In Touch, Vol.IX, No.95, Sep.'90.

Abstract: This paper attempts to document the importance of diarrhoea, inherent social values on diarrhoeal diseases, its impact on socio-economic development. Special focus has been given in analysing BRAC's interventions to control diarrhoeal hazards, the background and operational strategies of BRAC's Oral Therapy Extension Programme (OTEP), its achievements, effects and major programmatic changes taking place over time, based on field experiences and evaluations. The article is mostly based on secondary data sources. Under the OTEP, BRAC had been disseminating messages on diarrhoea - teaching a simple, cheap, readily available and acceptable method of diarrhoea treatment known as Lobon-Gur Saline (LGS) [Salt, molasses in drinking water] to at least one woman in each household throughout the country since July 1980 and covered about 1,14,16,778 households by December, 1989. Ongoing monitoring and periodic evaluations on the safety of LGS, its administration and usage revealed encouraging results. However, based on field experiences and evaluations, several programmatic changes were made over time in OTEP to reach the ultimate goal. The prominent changes include establishment of different forums to contact the males, review of messages, shifting to group approach from one to one teaching method, etc.

18. The long-term role of national non-government development organisations in primary health care: Lessons from Bangladesh. Published in Health Policy and Planning; 5(3): 261-266).

Abstract: This paper discusses the future role of national non-government organisations (NGOs) in health development. Taking the case of Bangladesh, it is shown how some national NGDOs have developed into large professional organisations and how their position relates both to foreign donor support and the state. It is argued that the future contribution of national NGDOs to the development of primary health care (PHC) may be considerable, including strengthening of health care delivery by government staff. A division of tasks and responsibilities between state and national NGDOs must be based on

complementarity. The discussion also has relevance for countries where state involvement in development and sustenance of PHC is diminishing because of economic problems.

19. Utilization of Small Trading Loans under RDP (p. 43)

Abstract: The Rural Development Programme (RDP) of BRAC has introduced several types of income and employment generation schemes for the members of its village organizations. Of all these schemes, small trading (ST) occupies the highest position in terms of total loan money allocations. About 54% of the loans issued by RDP in 1989 was on small trading.

This study attempted to look at the utilization aspects of such vast loan money allocated for Small Trading. More specifically, it examined the extent to which the amounts were being utilized for the purpose for which the loans had been issued, to find out if a certain portion of the loan was not utilized for the approved schemes and the causes of diverted use of the loans, if any.

To collect the information, one hundred small trading loan beneficiaries (42 males, 58 females) were selected and interviewed, with a structured questionnaire, from two RDP branches at Jamalpur II and Jhikargacha. The data were collected in July - August, 1990. On some specific aspects, eight programme organizers of the two RDP branches were interviewed with a separate check list.

The study revealed that a vast majority of the respondents (89%) were using the loan money in their proposed schemes. Only a few (11%) were found to have made diverted use of their loan money. The number of respondents who were not utilizing their loans in the proposed schemes were slightly higher in Jamalpur than in Jhikargacha. The respondents mentioned various causes of diverse use of loan money. Among these, family consumption and other familial emergencies scored the highest. Respondents also suggested some measures to make the small trading scheme more effective and dynamic.

Most of the respondents suggested for an increased amount of loan for running the small trading operations more profitably. On some specific aspects, the respondents and the programme personnel had identical views. They felt that increased amount of loan and improved marketing facilities were needed to achieve the overall objective of small trading scheme.

20. Production and Employment Aspects of Small Enterprises for Women : Case of Betila Production Centre. (p.35)

Abstract: There are 24 sub-centres functioning under the Ayesha Abed Foundation (AAF) at Manikganj. AAF established the sub-centres for employment and income generation of BRAC's target women groups.

The study was designed to assess the performance of the sub-centres, the focus being on one particular sub-centre (Betila). The Betila sub-centre (SC) was selected for this study because it was started first. The study specifically looked into timely availability of the

inputs at the sub- centre, its output and profit, level of income and employment generated by the project.

For collecting information records of the sub-centre, cost and output related documents were consulted. 54 women working in the Betila weaving sub-centre were interviewed. The study covered the period Sept. 1988 to August 1989.

The findings reveal that the labour cost of the centre for the study year was Tk.2,80,154.05. The total cost of operation for the year was Tk.7,46,415.79 and the total revenue earned was Tk.2,50,919.96. The mean wage rate for male and female labourers in the Manikganj area stands at Tk.27.50. But 47% of the workers (all female) of the SC who were involved in Nali Bobbin making earned less than Tk.11 per day during the study period while another 41% earned between Tk.11 and Tk.14. This means their wage was much lower than the prevailing mean wage in Manikganj area. Out of 20 workers (10 male & 10 female) engaged in looms, 7 were getting below Tk.20 per day, and incidentally all them were female. Seven of the workers (all male) got the highest wage per day (above Tk.30). It shows that male workers are getting higher wages compared to the female workers.

Wages of the workers who operated looms at AAF and Betial Sub-centre also showed some significant difference. In the sub-centre 26.67 percent of the workers got below Tk.10 per day, whereas none of the workers at AAF got below Tk.10. On the other hand, 40% of the workers at AAF get above Tk.21 per day while only 4% of the workers of the sub-centre got that amount.

The study came up with some recommendations which include - (a) improvement of the management, (b) proper maintenance of records, (c) improvement in the skill of the weaving assistant as well as the workers and (d) adequate and timely supply of raw materials to the sub-centre.

Extracts from the Comments On**A TALE OF TWO WINGS : HEALTH AND FAMILY PLANNING PROGRAMMES IN AN UPAZILA IN NORTHERN BANGLADESH.****Produced by a research team of BRAC, Dhaka, May 1990.**

1. "The [amount of] work actually done by the field workers of the Health and Family Planning sector is not altogether unknown to us. Information documented through this study are close to those found by some of our own assessments. The analysis provided in this study on the amount of time spent in a week by the field workers on their assigned duties has given us a new perspective of looking at the problem. What has been documented through this study is a harsh reality" (from Bangla text).

M. Asahabur Rahman
Sr. Assistant Secretary
Ministry of Health and Family Welfare, Dhaka

2. "I would like to congratulate you and your research team for undertaking field study on the operational aspects of health care delivery, and innovative approach for Bangladesh. ---- The study brought to focus once more the major problems impeding health care delivery in Bangladesh."

R.S. Giri
Acting WHO Representative, Dhaka

3. "We found that the findings of the case study would be useful particularly to our Action Research Programme Division while planning its projects not only in Bangladesh but in our other member countries".

ATM Shamsul Haque
Director
Centre on Integrated Rural Development
for Asia and the Pacific (CIRDAP), Dhaka

4. **"It has been a revelation worthy of emulation, and has demonstrated the value of combining both quantitative and qualitative methodologies".**

**James L. Ross
Program Officer
The Ford Foundation, Dhaka**

5. **"I was fascinated with its content and the thoroughness of the investigation".**

**Abbas Bhuiya
Associate Scientist
International Centre for Diarrhoeal
Disease Research, Bangladesh (ICDDR,B), Dhaka**

6. **"It makes interesting reading, though it is somewhat depressing to read of such complacency within the health services. Are you planning to investigate another area or an NGO for comparative purposes. If so, it would be interesting to see the difference in service provision".**

**Fiona Duby
Project Coordinator
Overseas Development Administration, Dhaka**

7. **"The lack of supervision, the lack of commitment on higher levels and more specific the lack of proper supply/logistics described in the report as key issues is also our findings".**

**Finn Schleimann
Adviser
Primary Health Care Preparatory Unit, DANIDA, Dhaka**

8. "It is depressing but extremely valuable and enlightening reading. Congratulations on a job well done!"

David R Gwatkin
Director
International Health Policy Program
Washington, DC, USA

9. "Unlike most research it has the human touch. It can be read by both technical and general background people, very easily. I hope the Government of Bangladesh takes this study in good grace and spirit and uses it as a basis to improve health and family planning services to the people".

Sandra M. Kabir
Executive Director
Bangladesh Women's Health Coalition, Dhaka

10. "Through this [study] the actual situation prevailing in the health sector of the country has been clearly presented" (from Bangla text).

Letter to the editor, The daily 'Sangbad'.