



Annual Report 2024

January-December 2024



Gonoshasthaya Kendra

Address: Mirzanagar,
Savar, Dhaka- 1344.

www.gonoshasthayakendra.com



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From the Desk of the Chairman, Trustee Board



Gonoshasthaya Kendra (GK) stands firm on the values of integrity, transparency, and accountability, which continue to drive our long-term success and impact on the communities we serve. The remarkable achievements of 2024 are a testament to the dedication and passion of our employees, who embody GK's core values. We are committed to fostering an inclusive and supportive work environment where all employees feel valued and rewarded.

I extend my heartfelt gratitude to my colleagues for their unwavering commitment, professional expertise, and dedication to our mission. I particularly acknowledge the entire GK team for their invaluable contributions, especially in 2024.

The past year was pivotal for GK as we undertook critical organizational improvements. We introduced a new management framework, updated our HR policy, revised procurement guidelines, and established a structured staff pay scale. These were challenging but essential tasks that we successfully accomplished. In 2025, we must ensure the effective implementation of these policies with the dedication of our committed staff.

Our success in 2024 was made possible through the steadfast support of our funding partners, whose collaboration strengthened our partnerships. We deeply appreciate their trust and willingness to work jointly in overcoming challenges. Additionally, I extend my sincere gratitude to the government agencies, development partners, and all stakeholders whose unwavering support has reinforced GK's role as a leading healthcare provider in the country.

I would like to share an example from a June 2024 study conducted by the Center for Victims of Torture (CVT), a partner of GK. To quote their findings:

"Despite GK's success in fundraising, there is a clear downward trend in local donations. This is concerning because it represents a missed opportunity for GK. Additionally, international support has been inconsistent."

We must address this issue seriously and invest more in fund mobilization.

This is my final Annual Report note as I prepare to retire in April 2025. Serving as GK's Chairperson has been an honor and privilege. Over the years, I have witnessed the relentless dedication and hard work of GK's staff. Together, we have navigated challenges and set new standards of excellence. I step down with full confidence that GK will continue to thrive under capable leadership.

I am also pleased that GK has published its 2024 Yearbook in English for the first time. As a Trustee, I take immense pride in our team's commitment to serving those in need. I wish this publication great success and hope it becomes a valuable resource for service providers and beneficiaries alike.

Professor Altafunnesa
Chairperson Trustee Board
Gonoshasthaya Kendra,
Head Office: Mirzanagar, Savar, Dhaka-1344,
Dhaka Office: House # 14/E, Road # 6, Dhanmondi, Dhaka.

Note from Chief Executive Officer



*I*t is with great pride and reflection that we present the Annual Report 2024 of GK, an institution that has stood as a beacon of hope, resilience, and service to the people of Bangladesh for over five decades. Since its inception during the liberation war of Bangladesh, GK has remained steadfast in its commitment to healthcare for all, social justice, and sustainable development.

The year 2024 was marked by both challenges and achievements. As we continued to serve communities across Bangladesh, particularly in Cox's Bazar, Bhasan Char, and disaster-prone regions, our focus remained on strengthening primary healthcare, women's empowerment, emergency response, and sustainable livelihoods. Despite economic and environmental adversities, GK has expanded its reach, ensuring accessible and affordable healthcare, education, and humanitarian assistance for the most vulnerable populations.

One of our key priorities this year has been enhancing community-led health initiatives, integrating digital healthcare solutions, and strengthening public-private partnerships to improve service delivery. Our efforts in maternal and child health, nutrition, and mental health support have yielded promising results, reinforcing our belief that health is a fundamental right, not a privilege.

In humanitarian response, GK has continued its vital work in Rohingya refugee camps and host communities, offering critical medical services, comprehensive Nutrition programs, and capacity-building initiatives to foster resilience among displaced populations. The expansion of our operations in Bhasan Char island has further demonstrated our commitment to ensuring dignity and well-being for all, regardless of circumstances.

None of these accomplishments would have been possible without the dedication of our frontline workers, healthcare professionals, volunteers, donors, and partners. Their unwavering support fuels our mission, and we extend our heartfelt gratitude for their contributions.

As we look ahead, GK remains committed to adapting to emerging challenges, advocating for policy reforms, and pioneering community-based solutions that empower people to lead healthier, more dignified lives. Together, we will continue to build a future where healthcare, education, and justice are not just ideals but everyday realities for all.

Ms. Sandhya Roy
Chief Executive Officer
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Note from Senior Director

With immense pleasure and a deep sense of responsibility that we present the Annual Report 2024 of Gonoshasthaya Kendra. This year marks another milestone in our enduring journey toward universal healthcare, social justice, and sustainable development.



Since its establishment, GK has been driven by the vision that healthcare is a fundamental right, not a privilege. In 2024, this principle remained at the heart of our work as we expanded our reach to marginalized communities, responded to emerging health crises, and strengthened our commitment to building a just and equitable society.

Our healthcare programs have continued to evolve, integrating digital health innovations, primary care strengthening, and community-led health initiatives to ensure that the most vulnerable populations—particularly in Cox's Bazar, Bhasan Char, and disaster-prone areas—receive quality medical services. In addition, our maternal and child health, nutrition, mental health, and non-communicable disease programs have made significant progress in improving public health outcomes.

Beyond healthcare, GK has remained actively engaged in humanitarian response, women's empowerment, and livelihood development. In the Rohingya refugee camps and host communities, our interventions in health, nutrition and community education have supported thousands in need, while our expanded presence in Bhasan Char has reinforced our commitment to serving displaced populations with dignity and care.

Despite global and national challenges—including economic constraints, climate change, and public health threats—GK has adapted and innovated, ensuring that our services remain resilient, inclusive, and impactful. Our partnerships with government agencies, NGOs, and international donors have been instrumental in sustaining our mission, and we are immensely grateful for their collaboration.

At the heart of GK's success is its dedicated team of healthcare professionals, community workers, volunteers, and supporters. Their tireless efforts, unwavering commitment, and shared belief in our mission continue to inspire and drive our progress.

We do strongly believe, GK will remain focused on scaling up our impact, advocating for policy reforms, and leveraging technology and community-driven solutions to build a healthier and more equitable future for all. We invite you to join us in this journey of resilience, innovation, and service to humanity.

Manzur Kadir Ahmed, MBBS, MPH *
Senior Director
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Note from the Monitoring team



GK

*T*he Research Team is pleased to announce that, for the first time, the GK Annual Report 2024 will be published in English. This milestone reflects our commitment to transparency, accessibility, and engagement with a broader audience, particularly international stakeholders and funding agencies. We extend our sincere gratitude to the Trustee Board for their support in approving the English version, as well as to the GK Management Team for their diligent follow-up and coordination.

As the Monitoring and Research Team, we take great pride in having developed the initial draft of this report and contributed it through multiple revisions to reach its final version. This collaborative effort involved valuable inputs and contributions from all responsible colleagues across the organization. The report provides essential background information for new readers, highlights GK's key achievements over the past year, and outlines strategic plans for the future.

A special note of appreciation goes to Mr. Sultan Mahmud, Program Coordinator, for taking on the editorial responsibility. His dedication, overtime efforts, and insightful contributions were instrumental in shaping the report and bringing it to its current stage.

This achievement highlights our team's commitment to excellence and effective knowledge-sharing. We look forward to the report's positive reception and its role in strengthening GK's visibility and partnerships.

Dr. Tariqul Islam
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Editorial Note



Gonoshasthaya Kendra operates through two distinct yet interconnected pathways: its not-for-profit initiatives and its commercial ventures. This dual approach reflects GK's commitment to ensuring equitable access to essential services while maintaining financial sustainability. The not-for-profit arm, which includes public services like healthcare, is designed to be subsidized, making it affordable for all. Under this model, high-income individuals pay the actual cost of services, while those from lower economic backgrounds contribute according to their financial capacity. This sliding-scale system underscores GK's dedication to social equity and inclusivity.

To sustain these subsidized services, GK's commercial ventures play a pivotal role. By strategically reinvesting the profits generated from these ventures, they can offset the costs of subsidized programs and create a self-sustaining system. Additionally, GK occasionally receives grants from funding agencies to address emergency responses or implement need-based projects in any part of Bangladesh. These grants further bolster GK's ability to serve vulnerable communities effectively.

Historically, GK has produced annual reports for internal distribution, focusing on departmental achievements and progress. However, 2024 marks a significant milestone as GK publishes its first Annual Report intended for wider circulation. This report is designed to highlight the organization's not-for-profit activities, particularly those aligned with its NGO-type initiatives, to promote awareness and attract potential grants. A comprehensive overview of important programs and institutions, like Savar Hospital, GK Rural Health, and GK Nagar Hospital, is presented, demonstrating their impact on community health and development.

It is important to note that this Annual Report does not encompass GK's commercial ventures, as these entities maintain their own separate reporting mechanisms. By exclusively analyzing its not-for-profit initiatives, the report aims to highlight GK's mission-driven efforts and its impact on social welfare, while also functioning as a strategic instrument for advocacy and resource mobilization.

In essence, this Annual Report 2024 reflects GK's unwavering commitment to balancing social responsibility with financial sustainability. It is a testament to the organization's innovative approach to addressing community needs while ensuring long-term viability. As GK continues to expand its reach and impact, this report serves as both a reflection of its achievements and a call to action for stakeholders to join hands in fostering a more equitable and resilient society.

Sultan Mahmud
Program Coordinator,
GK-action medeor supported Project for elderly and Children,
GK - CVT supported project on Helping Survivors Heal.

Acronym

AC	Agriculture Cooperative
AC	Air Conditioned
ANC	Anti Natal Care
BDT	Bangladesh Taka
BP	Blood Pressure
BTEB	Bangladesh Technical Education Board
EPI	Expanded Program on Immunization
GK	Gonoshasthaya Kendra (People's Health Center)
GDC	Gonoshasthaya Dialysis Center
SDG	Sustainable Development Goal
SIDR	Extremely Severe Cyclonic Storm
SGHCS	Savar Grameen (Rural) Health Care Service
GGHS	Gonoshasthaya Grameen (Rural) Health Service
GSVMCH	Gonoshasthaya Samaj Vittik (Community-Based) Medical College Hospital
GVTTI	Gonoshasthaya Vocational and Technical Training Institute
GIHS	Gonoshasthaya Institute of Health Sciences
HRD	Human Resource Department
ICU	Intensive Care Unit
MoH	Ministry of Health
OT	Operation Theatre
OPD	Open Patient Department
PNC	Post Natal Care
PSF	Pond Sand Filter
PHA	People's Health Assembly
RMED	Research Monitoring and Evaluation Department
WHO	World Health Organization
BMI	Body Mass Index
PHPC	Public Health Photo Contest
GBCL	Gonoshasthaya Basic Chemicals Limited

Executive Summary

Savar Hospital's Healthcare Services:

Savar Hospital is a 250-bed tertiary care hospital, located 50 kilometers from Dhaka, has been a cornerstone of healthcare since its establishment on October 27, 1972. Evolving from a tent to a three-storied facility, the hospital has consistently delivered comprehensive healthcare services across multiple departments, demonstrating strong patient outreach and operational efficiency. Below is a summary of its key achievements in 2024:

Outpatient Consultations: The hospital served 91,504 patients, with 42% male and 58% female, highlighting a significant demand for general medical consultations. The outpatient department prioritized efficient patient triage and equitable payment systems, ensuring no patient was denied care due to financial constraints. A summary of the achievement is given below:

Table 01: Major Services from Savar Hospital

Department	Patients Served	Target	Achievement	Performance
Physiotherapy Services	10,855	12,000 patients	90% of target	Strong performance, but below full capacity
Diagnostic Services	X-ray: 6,877 Ultrasonography: 15,000	X-ray: 16,000; Ultrasonography: 15,000	X-ray: 105%; Ultrasonography: 100%	X-ray unit exceeded target; Ultrasonography met target
	Total patients served: 45,047; Diagnostic tests: 151,043; Blood transfusion bags: 4,301	50,000 patients	90% of target	Below target for total patients served
Maternal & Gynecological Care	Patients served: 1,812; Deliveries: 1,097 (50% normal, 50% cesarean)	3,000 patients	60% of target	Below target for patient intake
Surgical, Medical & Pediatric Services	6,098	7,176 patients	85% of target	Below target but strong effort

Terms like community engagement, resource optimization, or localized care models might be better. There are strategies that could be considered:

Collaborate with agricultural cooperatives or local industries (RMG, leather industries) to provide health programs.

Mobile clinics with telemedicine: Use mobile units equipped with basic telemedicine tools.

Community Health Ambassadors: Train locals to provide basic care and education.

Resource-sharing networks: Partner with nearby facilities to share equipment.

Crowdfunding with local incentives: Offer health credits in exchange for community contributions.

Gonoshasthaya Rural Health

Service: GK provides essential healthcare services to 1,047,768 people across 504 villages in 20 districts, through 42 health centers primarily serving economically disadvantaged populations (15.67% poor and 22.82% lower middle class). In 2024, GK focused on maternal and child health, immunization, elderly and disability care, family planning, and preventive health services. Key achievements and challenges include:

Population Growth and Birth Rate: The birth rate declined to 6.68 per thousand, reflecting successful family planning initiatives.

Maternal and Child Health care: Infant and neonatal mortality rates improved (13.30 and 11.30 per thousand, respectively), but maternal mortality rose to 171.58 per 100,000, indicating gaps in maternal care.

Pregnancy and child follow-ups were below targets, necessitating enhanced outreach.

Family Planning: Adoption rates nearly met the target (64.87% vs. 65%), showcasing effective awareness campaigns.

Immunization: Coverage fell short for BCG (63.36% vs. 95% target) and other vaccines, highlighting the need for improved outreach.

Elderly and Disability Care: Follow-ups for elderly (54,682 vs. 80,000 target) and disabled persons (6,092 vs. 787 target) showed mixed results,

with significant improvements in disability care but underachievement in elderly services.

Gonoshasthaya Nagar Hospital:

Located in Dhaka, the hospital served 89,670 patients in 2024, achieving 77% of its outpatient target of 116,300 consultations. Although this is a reflection of significant patient engagement, it also highlights opportunities for growth and improvement across departments. This is a brief overview of the key departmental performances:

This hospital provided treatment through outpatient consultations and inpatient visits. Facilities like Diagnostic Center, ENT, Dental, Surgery, and Physiotherapy Centers.

Table 02: Major Services from Nagar Hospital

Department	Achievement Rate	Performance Summary
Physiotherapy	92%	Treated 18,472 patients, close to target.
Diagnostic Services		
- Laboratory Services	100%	Exceeded targets.
- Radiology & Imaging Services		
- X-ray	68%	Underperformed.
- Ultrasound	71%	Underperformed.
- Cardiology Diagnostics		
- ECG	71%	Mixed results.
- Echocardiography	170%	Exceeded targets significantly.
Gynecology	121%	Exceeded expectations due to high demand and efficient service delivery.
Child Ward with OPD	83%	Strong performance, but 17% gap remains.
Eye OT & OPD	28%	Significantly underperformed.
Dental	76%	Moderate performance.
Ayurveda	54%	Underperformed.
Operation Theater	81%	Close to target.
Circumcision & General Surgery		
- Circumcision	23%	Below average performance.
- General Surgery	22%	Below average performance.
Urology & Cardiology Surgery		
- Urology	54%	Moderate success.
- Cardiology Surgery	69%	Moderate success.
Psychiatric Consultation & Dermatology		
- Psychiatric Consultation	20%	Significant challenges.
- Dermatology	40%	Significant challenges.
Orthopedics and Cancer Ward		
<i>Nephrology</i>		
- Orthopedics	84%	Strong performance.
- Cancer Ward	27%	Requires further development.

This hospital's reputation as a trusted healthcare provider for low-income patients can be strengthened by focusing on innovative, community-centered strategies. The hospital will be able to attract more patients and make a lasting impact on the health and well-being of the community it serves by improving accessibility, improving service quality, and proactive community engagement. Some specific strategic plans include:

Create a scheduling system that is dynamic and prioritizes walk-in patients while minimizing wait times. Introduce a triage system to ensure that urgent cases are seen promptly.

Make it easier for working individuals to access care without losing income by extending hospital hours to include evenings and weekends.

Implement mobile clinics to underserved neighborhoods, delivering basic healthcare services, diagnostics, and health education directly to the community.

Upgrade medical equipment to provide accurate diagnostics and effective treatments, ensuring patients receive the best possible care.

Train staff in cultural competency, empathy, and communication to provide better service to low-income patients with dignity and respect.

Provide affordable specialized services like

Gonoshasthaya Dialysis Center: Gonoshasthaya Dialysis Center, established in 2017, is Bangladesh's largest dialysis facility, offering affordable and high-quality care to kidney patients. Founded by Dr. Zafrullah Chowdhury, the center addresses the financial and accessibility challenges faced by underprivileged patients. With 110 beds and three daily dialysis sessions, it serves an average of 260 patients, including over 1,500 registered individuals requiring regular treatment.

The center operates on a tiered pricing model, ensuring accessibility for all income groups: Tk 1,000 for lower-income patients, Tk 1,200 for lower-middle-class, Tk 1,700 for middle-class, Tk 2,500 for upper-middle-class, and Tk 3,000 for affluent patients. Ultra-poor patients receive free dialysis, supported by contributions from organizations like GK, BRAC, and the Affordable Health Care Trust. This model provides a cost-effective alternative to private hospitals, where dialysis costs Tk 3,000 per session, often forcing patients to discontinue treatment.

Equipped with state-of-the-art German Fresenius dialysis machines, active endotoxin filters, and a daily supply of 1.5 million liters of purified RO water, the center ensures infection-free and efficient care. Additional features include real-time blood sugar and blood pressure monitoring, oxygen

Gonoshasthaya Dialysis Center exemplifies operational excellence, combining affordability, advanced technology, and compassionate care to meet the growing demand for kidney treatment in Bangladesh. Its commitment to serving all economic groups ensures life-saving dialysis is accessible to those in need.

Specialized Health Camp (SHC): GK has redefined rural healthcare delivery through its innovative Specialized Health Camps (SHCs), designed to provide comprehensive medical services in geographically hard to reach area. Operating as temporary hospitals, SHCs integrate multiple specialties, including Medicine, Cardiology, Surgery, Gynecology, Pediatrics, Orthopedics, Ophthalmology, ENT, Dentistry, and Diagnostics. These camps, organized as Base Camps (2-8 days) or Day Camps (single-day), offer both medical consultations and surgical procedures, ensuring holistic care for rural populations.

In 2024, SHCs served 1,250 patients, with notable demand for Dermatology (625 cases), Neonatal Care (169 infants), and Pediatric Services (75 children). Surgical interventions (68 cases), Midwifery (44 women), and Orthopedics (57 cases) were also key focus areas. The camps achieved near-zero casualty and minimal referral rates,

diabetes management, maternal health, and pediatric care to address health issues that are prevalent in the community.

Launch a crowdfunding campaign to raise funds for advanced equipment and community programs, with a strong emphasis on the hospital's mission of serving the poor.

Partner with government programs and corporate social responsibility (CSR) initiatives to obtain funding and resources.

Implement telemedicine services to enable patients to consult with doctors remotely, which reduces travel costs and time away from work.

By addressing critical healthcare gaps and providing equitable access to specialized services, SHCs exemplify GK's commitment to improving rural health outcomes and ensuring quality care for vulnerable populations.

HIV/AIDS Awareness & Prevention Project: A 2024 survey in Daulatdia brothel and surrounding communities assessed the impact of HIV/AIDS awareness and prevention programs. Key findings reveal significant progress alongside critical gaps:

Awareness: 85.5% of respondents were aware of AIDS, and 83.8% received HIV prevention training, showcasing effective outreach efforts.

Misconceptions: Despite high awareness, 50.4% lacked knowledge about AIDS

supply for each bed, and advanced filtration systems. Patients benefit from fully furnished, air-conditioned rooms, personal TVs, and complimentary meals during dialysis.

The center also offers specialized services, including on-site laboratories, blood transfusion facilities, emergency dialysis, and dedicated ICU units. Separate wards for hepatitis B & C patients and private cabin options for wealthier patients further enhance care quality. For underprivileged patients from remote areas, a fourth shift is available at Tk 900 per session, including complimentary meals.

and 50 students per subject can take BTEB exams. Female students receive financial support, and stipends reduce barriers. In 2024, 213 students were trained in trades like computer applications and graphic design.

GVTTI's 2024 achievements include training 100 women in skills like tailoring and agriculture, supported by UN Association-UK. The Carol Ann Eggen Stipend Fund will provide scholarships to 900 female students from 2023-2028. Additionally, 40 students received training in computer applications and motorcycle driving with World Solidarity Movement support.

Future plans include applying for caregiving courses, enhancing staff capacity, building partnerships, and establishing a civil engineering workshop. These efforts aim to expand GVTTI's impact, align

reflecting their efficiency and quality of care.

SHCs are implemented through a participatory approach, involving local NGOs, government bodies,

educational institutions, and community members. Essential facilities, including operation theaters, sterilization equipment, and diagnostic tools, ensure high standards of care. A 50-member medical team, comprising specialists, technicians, and support staff, delivers timely and effective services. GK medical procedures are carried out in a standard manner.

GK's SHC model prioritizes patient dignity, privacy, and comfort, particularly for women, children, and the elderly.

maintained, and 400 new ones were established, enhancing food security. GKS also supported 2,201 families in vermicompost production, constructing 50 new pits and establishing 12 sales centers.

In water and sanitation, GKS installed 258 Pond Sand Filters (PSFs), providing safe drinking water to 100,000 people, and constructed 1,050 hygienic latrines. Training programs on sanitation reached 962 PSF caretakers, 200 women and adolescents, and students in 24 schools.

Challenges included delays in cooperative registration, resource allocation, and the need for sustained funding for post-Cyclone Remal recovery. Looking ahead, GKS plans to register 20 more cooperatives, expand water and sanitation programs, enhance training, and boost agricultural production through canal re-

treatment options, indicating a need for targeted education.

Condom Use: While 97.4% were aware of condoms as a preventive measure, 45.3% reported inconsistent usage, highlighting a disconnect between knowledge and behavior.

The findings underscore the success of awareness campaigns but emphasize the need for targeted interventions to address misconceptions and behavioral challenges. By refining strategies, the project can further reduce HIV/AIDS risks and improve health outcomes in Daulatdia and neighboring communities.

Gonoshasthaya Vocational and Technical Training Institute (GVTTI): In February 2014, GK established GVTTI to provide market-aligned technical education, empowering youth with skills like auto mechanics, dressmaking, and welding. Initially offering five BTEB-accredited courses, GVTTI expanded to include paramedics, food processing, and agriculture. Courses last 3-6 months, with 6-month programs being most popular. Admission requires class VIII/JSC completion,

4,511 participated in 252 hishu Parishads, promoting rights and leadership. Life skills training empowered 320 children, while the Union Shishu Parishad prevented 10 child marriages and reintegrated 60 dropouts into schools. For the elderly, 1,542 engaged in 119 self-help groups, receiving health services, medicine, and nutrition education. A Revolving Drug Fund accumulated BDT 76,109. Social safety nets supported 203 elderly, and 272 received vegetable seeds for income

with national standards, and promote socioeconomic growth through accessible, quality technical education.

Gonoshasthaya Krishi Somobay: In 2024, Gonoshasthaya Krishi Somobay (GKS) advanced its mission to empower farmers and improve livelihoods in cyclone-affected areas of southern Bangladesh. Through agricultural rehabilitation, cooperative development, and water and sanitation initiatives, GKS achieved significant progress in community development. Operating across six Upazilas in Barguna, Pirojpur, Bagerhat, and Patuakhali districts, GKS established seven unit offices, a regional office in Barguna, and headquarters in Savar and Parbatipur.

Key achievements included the formation of 100 informal cooperative groups, with 40 officially registered, enabling access to government resources. GKS re-excavated 16.16 km of canals and 54 ponds, providing irrigation for 1,000 acres of farmland and supporting crops like Watermelon, Bangi, and Boro. Additionally, 9,000 homestead gardens were

and limited access to healthcare and education. GK, supported by UNHCR, WHO, UNICEF, and Malteser International, delivered critical health and nutrition services, including over 352,000 outpatient consultations, 79,000 emergency treatments, and malnutrition programs reaching thousands of children and mothers. Despite funding shortages, GK's initiatives—such as telemedicine, mental health support, and nutrition interventions—show measurable impact, with key

excavation and salt-resistant crops. GKS remains committed to fostering resilience, improving livelihoods, and promoting sustainable development in cyclone-affected communities.

Helping Survivors Heal (HSH) Project: GK, a leader in community health, partnered with the Center for Victims of Torture (CVT) in 2021 to address mental health and psychosocial support (MHPSS) needs in Bangladesh. GK aims to enhance trauma care through capacity building and workforce development. Key 2024 achievements include an inception workshop, training needs assessment, and 19-day psychologist training on clinical intake, supervision, and MEAL. Documents like the Resource Mobilization Strategy and MHPSS Framework were produced, advancing GK's goal to integrate MHPSS into health services for sustainable impact.

Improving the Physical and Mental Health of Children, and Elderly People: In 2024, the GK-action medeor project in Baharchara Union focused on improving the well-being of children and the elderly. For children

May 2024, GK delivered emergency healthcare, food, and shelter aid to coastal districts, supporting 1,000+ families with dry food, medicines, and housing materials, while rehabilitation projects restored livelihoods through seeds, latrines, and pond repairs. These efforts underscore GK's rapid response to dual disasters, addressing immediate needs and long-term recovery for vulnerable communities.

generation. Plans include a potential 5-month extension.

Center for Community Health Research: Since 1972, GK has provided Primary Health Care programs to 21 underserved rural communities in Bangladesh, supported by a robust health surveillance system. In 2022, GK established the Center for Community Health Research (CCHR) to enhance data-driven decision-making, systematically collecting and analyzing health outcomes, vital events, and socioeconomic indicators through community health workers and electronic databases. In 2024, CCHR contributed to key initiatives, including annual reporting, medical student training, project evaluations, and research publications on suicide epidemiology and undiagnosed hypertension. Future priorities include launching a Population-Based Cancer Registry, expanding climate-health research, strengthening NCD patient networks, and developing a Community Ophthalmology Program. CCHR remains dedicated to bridging data, research, and grassroots action to advance equitable healthcare in alignment with GK's mission.

Humanitarian Emergency Response: As of 2024, the Rohingya refugee camps in Cox's Bazar, Bangladesh, remain one of the world's largest and most densely populated settlements, with approximately 1 million refugees facing dire conditions, including overcrowding, poor sanitation,

achievements like 95% child malnutrition screenings and 169% stabilization center admissions in UNHCR-supported camps, underscoring the urgent need for sustained humanitarian aid.

Through its partnership with Malteser International (MI), GK established three health posts in Rohingya camps, a government health center in Bhasan Char, and a dedicated facility in Kutubdia, delivering essential healthcare to 77,360 beneficiaries in 2024, including 67,303 Rohingya refugees and 2,846 host community members. Key services included 77,360 outpatient consultations, 7,464 ANC visits, 16,908 child malnutrition screenings, and mental health support for 2,396 individuals, demonstrating a strong focus on maternal, child, and preventive care. The Kutubdia host community, facing geographic and economic vulnerabilities, received 1,831 OPD visits and 1,015 sexual/reproductive health services, highlighting GK-MI's commitment to equitable healthcare access in crisis-affected and underserved regions.

Response to Flood Affected People: In August 2024, severe flooding across 11 eastern districts of Bangladesh displaced over 100,000 people, with GK providing critical relief—including 3,800 food packs, 1,356 blankets, and medical care for 2,275 patients—to combat flood-related illnesses like diarrhea and skin diseases. Following Cyclone Remal in

Organizational Development: GK prioritized organizational development in 2024 by reviewing and updating critical policies, including the Protection from Sexual Exploitation and Abuse Policy, Finance and Accounts Manual, and Gender Policy, to strengthen governance and operational efficiency. With support from partners like Malteser International, GK consolidated its HR Policy and Jibon o Jiban Dharan into a unified manual, while also introducing a Child Safeguard Policy and conducting staff training to ensure compliance. The organization further advanced its strategic vision by finalizing a five-year plan (2023 - 2028) spanning health, education, finance, and emergency response, aligning long-term goals with evolving operational needs. The fund mobilization strategy was developed in 2024 and is now a live document. Moving forward, GK remains committed to enhancing due diligence through systematic policy implementation and continuous improvement across all levels of the organization.

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AN INTRODUCTION OF GK AND ITS HERITAGE

Empowering Communities Through Health and Development Since 1972

GK is a pioneering nonprofit, non-governmental organization dedicated to transforming lives in Bangladesh through primary health care and community development initiatives. Since its inception in 1972, GK has been at the forefront of innovative health care solutions, reaching approximately 1.2 million people across 21 diverse geographical regions.

At the heart of GK's success are its trained health workers, known as paramedics - most of whom are young women with 10-12 years of education. These dedicated professionals deliver essential health services, bridging gaps in access and care. GK has also integrated traditional birth attendants (TBAs) into its health care delivery system, significantly enhancing Maternal, Neonatal, and Child Health Care (MNCH) services.

Community participation is a cornerstone of GK's approach. Through health education programs and verbal autopsies for every neonatal, infant, and maternal death, GK fosters awareness and accountability, ensuring continuous improvement in health services.

GK's commitment to equitable health care is further demonstrated by its socio-economic class-based community health insurance scheme, operational since 1973.

This innovative model ensures that the poor pay nominal premiums while middle and higher-income groups contribute more for the same quality of care. Notably, smokers are charged higher premiums, reflecting GK's holistic approach to health and wellness.

Beyond its grassroots impact, GK has influenced national policies, including the National Drug Policy (1982), National Educational Policy (1978-79), and National Women's Policy (1979-80), showcasing its role as a catalyst for systemic change.

GK believes that health is a fundamental right, and its programs - preventive and curative are accessible to all, regardless of insurance membership. Join us in our mission to build healthier, stronger communities across Bangladesh. Together, we can create a brighter future for all.

Legal Status and Management Structures

Gonoshasthaya Kendra is registered in 1972 as a Public Charitable Trust, later it has Registered with Bangladesh NGO Bureau- Reg. No. 53, Dated- April 22, 1981, and renewed on 21.11.2016 until 2030.

Management of Gonoshasthaya Kendra Trust- GK Trust has 9 trustees; GK Trustees appoint Coordinator and other senior positions. GK Trustees approve the budget and external audit. Board of Directors (Executive Committee). GK has formed the Executive Committee since 1980. In every budget or annual meeting, the director and coordinators of GK preside on behalf of the GK Trust.

Goal:

The goal of Gonoshasthaya Kendra is to develop and foster different progress models on health, nutrition, education, disaster management, entrepreneurship, etc. that promote health equity and wellbeing alongside advocating timely and affordable healthcare to the doorsteps of the people through a sustainable way that corresponds to the global and national goals and targets.

Vision:

The vision of Gonoshasthaya Kendra is to evolve a society where every person has the opportunity to live a healthy, productive life, with given emphasis to the economic empowerment of the poor and women.

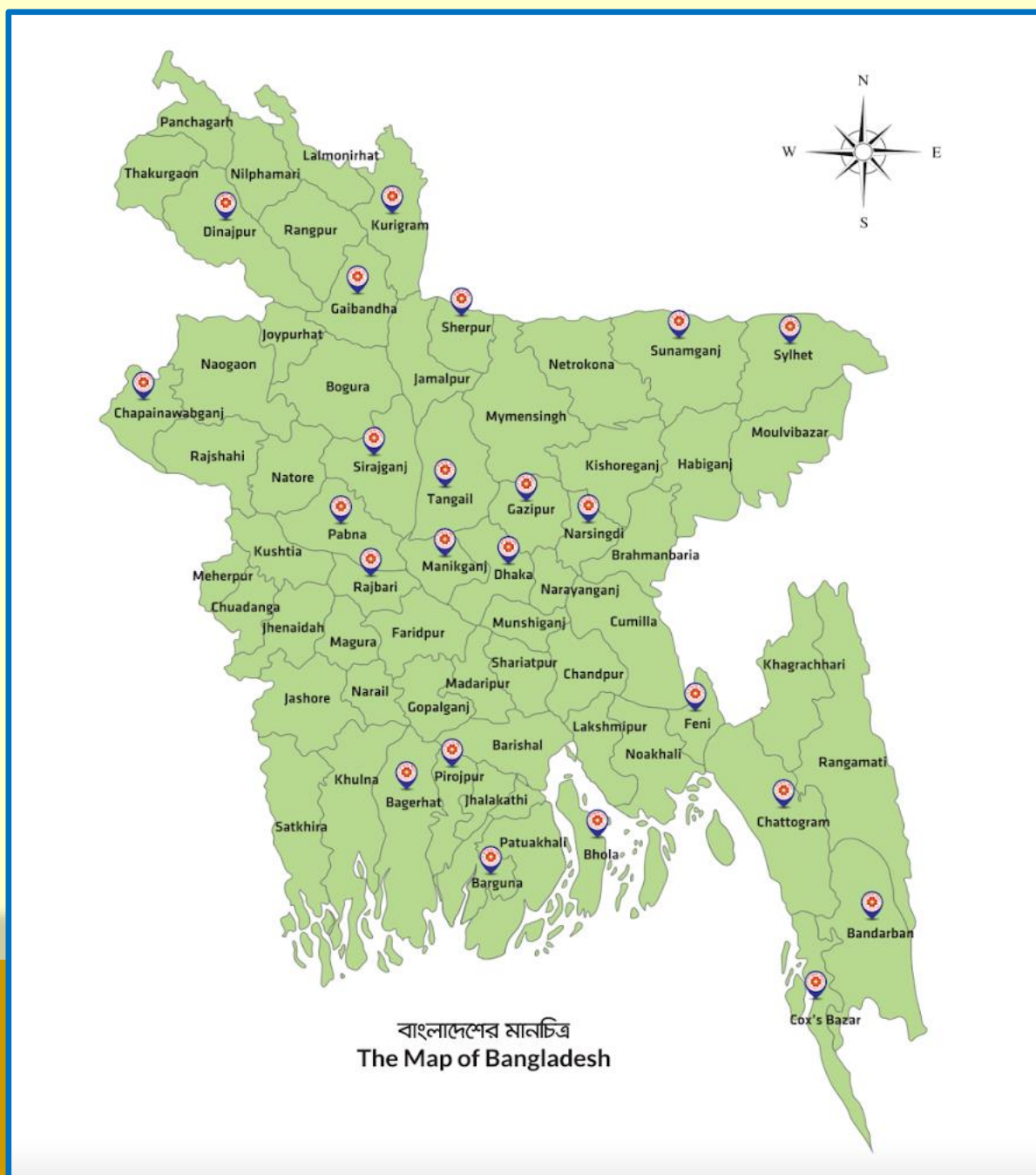
Mission:

The mission of Gonoshasthaya Kendra is to develop a community-oriented health care program that can provide comprehensive health care services, together with transforming rural areas with urban facilities in an environment-friendly way to help individuals live a healthy and productive life, free from the preventable suffering of diseases.



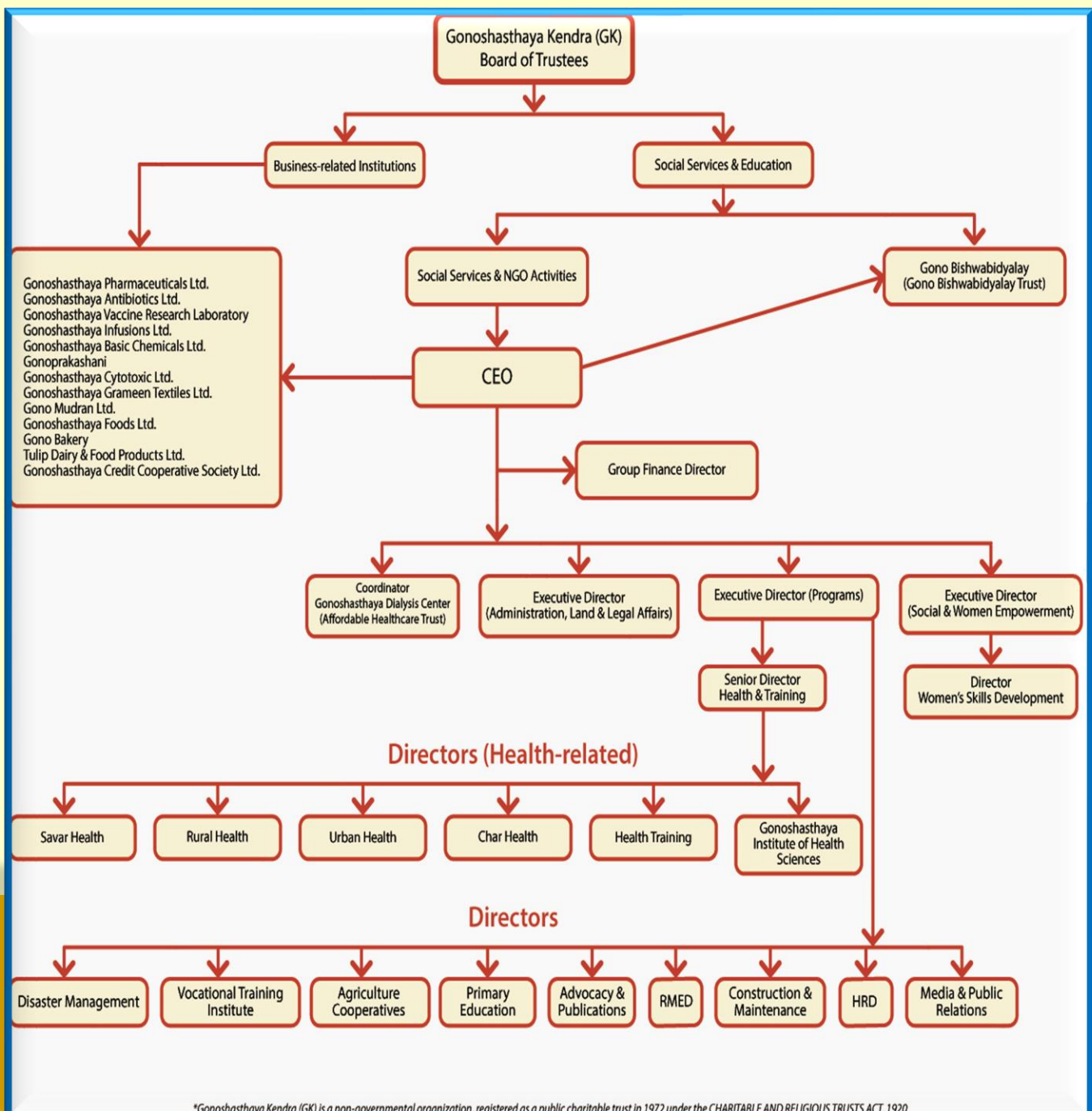


Catchment Area Map





Organogram / Organizational Tree



*Gonoshasthaya Kendra (GK) is a non-governmental organization, registered as a public charitable trust in 1972 under the CHARITABLE AND RELIGIOUS TRUSTS ACT, 1920.



Savar Hospital's Healthcare

The Savar Hospital located at 38 Kilometer of Dhaka city. It became a three-storied building from a tent and continued its primary health care services without stopping since its establishment in 1972. The facility has provided extensive healthcare services across multiple departments, demonstrating strong patient outreach and service delivery. Below is a summary of key achievements:

Outpatient Consultations

A total of 91,504 patients were served, with 42% male (38,351) and 58% female (53,153), highlighting significant demand for general medical consultations.

Effective patient triage is essential to ensuring timely and appropriate medical care. Upon arrival, patients undergo an initial assessment where medical staff evaluate their symptoms and direct them to the appropriate department. This structured process helps prioritize urgent cases while ensuring efficient service delivery for all patients. Additionally, the economic status of the visiting patient was identified through filling out a form, which helped the patient in seeking services payment. Low income groups pay less than higher income groups but receive the same treatment. No patients were refused services due to lack of payment.

In 2024, the outpatient department provided medical consultations to a total of 91,504 patients, reflecting the high demand for general healthcare services. Of these, 42% were male (38,351) and 58% were female (53,153), indicating a greater utilization of outpatient services by female patients. This trend underscores the importance of accessible and inclusive healthcare services that cater to diverse patient needs.

The department remains committed to enhancing patient flow management, reducing wait times, and improving service efficiency to meet the growing healthcare demands.

Physiotherapy Services

In 2024, the Physiotherapy Department set a target to serve 12,000 patients and successfully treated 10,855 patients, achieving 90% of the goal. This demonstrates strong patient engagement and efficient service delivery, ensuring access to essential rehabilitative care.

While the department performed well, a slight gap remains in reaching full capacity. Moving forward, enhancing outreach programs and optimizing resource allocation will be key strategies to achieving 100% service coverage, further improving patient care and ac

Diagnostic Services

The X-ray department demonstrated exceptional performance in 2024, serving 16,877 patients and exceeding its target of 16,000, achieving an impressive 105% success rate. This reflects the high demand for diagnostic imaging and the department's efficiency in service delivery. Similarly, the ultrasonography unit successfully met its target, providing 14,940 patients with essential imaging services against a goal of 15,000, achieving 100% of the target. This highlights the strong operational capacity of the unit and the continued accessibility of diagnostic services to patients. The department remains committed to maintaining high standards and further enhancing service availability to meet growing healthcare needs.

Maternal & Gynecological Care

The Maternal and Gynecological Department aimed to serve 3,000 patients in 2024 but provided care to 1,812 patients, achieving 60% of the target. This shortfall may be attributed to factors such as limited patient outreach, resource constraints, and external challenges affecting service accessibility. Moving forward, strategic initiatives - including awareness campaigns, facility enhancements, and expanded service coverage - will be essential to improving patient intake and ensuring comprehensive maternal care.

A total of 1,097 deliveries were recorded during the year, with a balanced distribution between normal deliveries (546; 50%) and cesarean sections (551; 50%). This equilibrium reflects a medically appropriate approach to childbirth, ensuring that C-sections are conducted based on necessity rather than preference. Continuous evaluation and intervention will be undertaken to optimize maternal healthcare services and promote safe, natural deliveries whenever possible.

Surgical, Medical & Pediatric Services

In 2024, the Surgical, Medical, and Pediatric Department set a target to serve 7,176 patients and successfully treated 6,098 patients, achieving 85% of the goal. This reflects strong service delivery despite falling short of the full target.

The 85% achievement rate highlights the department's capacity to manage a high patient load, though it also indicates potential challenges such as resource limitations or patient accessibility issues. Moving forward, efforts will focus on expanding service outreach, optimizing resources, and enhancing operational efficiency to ensure that more patients receive the care they need.

Pathology & Blood Transfusion

The Pathology & Laboratory Department plays a critical role in diagnostics and patient care, providing essential testing and blood transfusion services. In 2024, the department set a target to serve 50,000 patients and successfully provided services to 45,047 patients, achieving 90% of the goal.

A total of 151,043 diagnostic tests were conducted, demonstrating the high demand for laboratory investigations in guiding accurate diagnoses and treatment plans. Additionally, 4,301 blood transfusion bags were utilized, with 4,063 sourced from the in-house laboratory, ensuring efficient blood management and availability for critical patients.

While the department performed well, efforts will continue to enhance service capacity, reduce turnaround time, and expand outreach initiatives to achieve full target completion in the coming year.

Key Strategies & Forward-Looking Plan

Table 03: Forward-looking plan

Strategic Priority	Key Actions	Targets
Enhance Outpatient Efficiency	Implement digital triage systems	Reduce wait times by 30%; manage 90,000+ annual consultations
Strengthen Maternal Health Services	Expand community awareness campaigns and antenatal programs	Increase antenatal visits by 40%; sustain 50:50 normal/C-section delivery ratio
Optimize Diagnostic Capacity	Upgrade X-ray/ultrasound infrastructure	Handle 110% demand (vs. 2024's 105% X-ray achievement)
Improve Surgical & Pediatric Access	Deploy mobile clinics in underserved areas	Achieve 95% service coverage (from 85% in 2024)
Modernize Pathology Services	Procure advanced lab equipment and streamline workflows	Reduce test turnaround time by 20%
Sustainable Service Model	Scale physiotherapy outreach and retain sliding-scale pricing for low-income	Achieve 100% physiotherapy coverage; maintain equitable pricing for 100% of patients



Gonoshasthaya Rural Health Service

The GK survey indicates that 42 GK's Rural Health Centers cover a total population of 1,047,768 (219,824 families), which is distributed across 504 villages in 20 districts. The economic classification of this population is as follows:

Classifying the economic status of the rural health population served

Table 04: Economic status of rural health population served

Economic Class	Number of Individuals	Percentage
Poor	164,258	15.67%
Lower Middle Class	239,096	22.82%
Middle Class	86,574	8.26%
Upper Middle Class	1,572	0.15%
Rich	1,572	0.15%

The data reflects significant economic disparity, with a majority classified as poor or lower middle class, and only a small segment categorized as wealthy. The classification is Destitute/Ultra Poor, which is likely referring to a subset.

GK's primary services for this rural population included maternal and child healthcare, immunization, elderly and disability care, healthcare workforce training, family planning and reproductive health, as well as community and preventive health services. This Annual Report 2024 presents a comparative analysis of key health and demographic indicators below.

Population Growth and Birth Rate

GK's operational area data during the last three years showed that the birth rate declined from a target of 10 per thousand to 6.68 per thousand in 2024. This suggests successful population control measures through family planning and healthcare initiatives.

Maternal and Child Health Status

Data on maternal and child health is given in a table format with clear comparisons and contextual notes:

Table 05: Status of Maternal and Child Health Provided

Indicator	Target Rate	Achieved Rate	Status	Notes
Infant Mortality Rate	15 per 1,000	13.30 per 1,000	Improved	Exceeded target reduction.
Neonatal Mortality Rate	15 per 1,000	11.30 per 1,000	Improved	Significant progress.
Maternal Mortality Rate (MMR)	100 per 100,000	171.58 per 100,000	Increased (Challenges)	Highlights gaps in maternal healthcare.

Family Planning and Reproductive Health

Family planning adoption was nearly met (65% target vs. 64.87% achieved), indicating effective awareness programs.

Immunization Coverage

The following table presents vaccination data with targets, performance gaps, and status:
Table 06: Immunization coverage vs. targets and gap

Vaccine / Dose	Coverage Achieved	Target	Gap (Percentage Points)	Status
BCG	63.36%	95%	-31.64	Significantly low
Pentavalent (3rd Dose)	85.76%	95%	-9.24	Moderate shortfall
Polio (3rd Dose)	85.76%	95%	-9.24	Moderate shortfall
Measles	85.91%	95%	-9.09	Moderate shortfall
Tetanus Toxoid (TT2)*	74.2%	90%	-15.8	Substantial gap
Tetanus Toxoid (TT5)**	52%	75%	-23	Critical shortfall

* TT2: 2nd dose for women aged 15–49 years.

** TT5: 5th dose for women aged 15–49 years.

Elderly and Disability Care

The following data represent follow up data on elderly and disabled populations, including targets and performance status:

Table 07: Follow-up status of elderly and disabled populations

Category	Population / Follow-ups	Expected/ Target	Difference	Status
Elderly Population	58,857	50,000	+8,857	Higher than expected
Elderly Follow-ups	54,682	80,000	-25,318	Underachievement
Disabled Population	1,882	1,037	+845	Higher than expected
Disabled Follow-ups	6,092	787	+5,305	Significant improvement

Pregnancy and Child Follow-up

The following table represents the status of pregnancy and child U5 follow-up.

Table 08: Follow-up status of pregnancy and children under 5

Category	Achieved	Target	Status
Pregnancy Follow-ups	22,534	40,000	Underachievement
Follow-ups of Children (under 5 years)	19,482	35,000	Underachievement

The gaps in healthcare delivery were apparent in both pregnancy and child follow-ups, which fell significantly short of the targets. Pregnancy follow-ups achieved only 56.3% of the goal, while child follow-ups achieved 55.7%. Strengthened outreach, awareness, and resource allocation are needed to improve performance and ensure better coverage of maternal and child healthcare.

Healthcare workforce and training

The following table summarizes the achievements against targets for key healthcare training programs:

Table 09: Training achievements of healthcare workforce

Training Category	Achieved	Target	Status
Trained Workers for Child Delivery	18	20	Slightly Below Target
Basic Midwifery Training	98	150	Underachievement
Midwifery Refresher Training	120	250	Significant Gap

Although child delivery workers almost achieved their goal, basic and refresher midwifery trainings were not enough, indicating the need for enhanced recruitment, funding, or logistical support to bridge the gaps in skilled healthcare workforce development.

Community health outreach performance

The table below summarizes achievements in community health service delivery initiatives:

Table 10: Achievements in community health outreach services delivery

Activity	Achieved	Target	Percentage	Status
Courtyard Meetings	106	-	N/A	Baseline Established
Patient Advice in Communities	71,126	45,000	158%	Exceeded Target
Blood Pressure Measurements	47,572	80,000	59%	Significant Shortfall
Hygiene Services (Nail Cutting)	39,434	20,000	197%	Exceeded Target

Community health outreach has shown strong performance in patient advice (158% of target) and hygiene services (197%), indicating effective mobilization. The target for blood pressure screenings was only 59%, which suggests resource or access challenges. Despite being untargeted, courtyard meetings provide a baseline for future maternal/elderly engagement programs. Priorities should address the gap in blood pressure screening.

Medical Care Service

The utilization of crucial medical services compared to their projected targets is highlighted in the following table, revealing significant increases in all categories.

Table 11: Achievements in medical care services delivery

Service	Achieved	Target	Status
Patients in Sick Rooms	8,129	4,025	102% Above Target
Dental Treatments	6,570	3,000	119% Above Target
Pathological Tests	54,822	14,790	271% Above Target
Ultrasonography	16,511	3,077	437% Above Target
X-ray Procedures	16,402	1,500	994% Above Target

Service utilization vastly exceeded targets, with X-rays (994% above target) and ultrasonography showing the most dramatic surges. This indicates that demand may have been underestimated, service access may have expanded, or reporting may have been improved. To ensure quality is not compromised by high volume, resource allocation should be reevaluated to match actual needs, particularly for diagnostics (X-rays, ultrasounds, and pathology). Key Strategies & Forward-Looking Plan

Table 12: Forward-looking plan

Focus Area	Action Plan
Maternal & Child Health	Strengthen antenatal follow-ups (56%→100%) via community health workers; reduce MMR (171.58→100).
Immunization	Target low-coverage vaccines (BCG: 63%→95%; TT5: 52%→75%) with mobile clinics.
Healthcare Workforce	Train 150+ midwives annually to bridge 33% basic and 52% refresher training gaps.
Elderly/Disability Care	Scale home visits to meet 80,000 elderly follow-ups (currently 54,682).
Diagnostics	Reallocate resources to manage X-ray/ultrasound demand (994%/437% over target) sustainably.



Gonoshasthaya Nagar Hospital

GK's 250 Beds and Lifesaving Dialysis in Dhaka City Provide Advanced Health Care for All.

In 2024, the Outpatient Department (OPD) at Nagar Hospital in Dhaka recorded 89,670 patient consultations, nearing its annual target of 116,300. Although this achievement reflects substantial patient throughput, it also identifies opportunities for enhanced capacity and service optimization.

A summary of the services performed by the key department and their achievements is given below in a table, followed by a description.

Table 13: Summary of Key Departmental Achievement

Department	Target	Achieved	Progress Bar
Physiotherapy	20,000	18,472	██ 92%
Laboratory services	28,000	29,408	██ 105%
X-ray	8,000	5,455	██ 68%
Ultrasonography	4,500	3,206	██ 71%
ECG	2,000	1,248	██ 62%
Echocardiography	300	509	██ 170%
Gynecology	2,600	3,150	██ 121%
Child Ward with OPD	2,600	2,161	██ 83%
Eye OT & OPD	1,700	481	██ 28%
Dental Department	5,500	4,156	██ 76%
Ayurveda Department	10,000	5,363	██ 54%
Operation Theater	4,075	3,282	██ 81%
Circumcision	500	113	██ 23%
General Surgery	2,500	555	██ 22%
Urology Surgery	1,000	536	██ 54%
Cardiology Surgery	1,000	690	██ 69%
Cardiology & Medicine	1,100	652	██ 59%
Psychiatric consultation	500	99	██ 20%
Dermatology	2,500	990	██ 40%
Orthopaedics	2,000	1,683	██ 84%
Nephology			
Cancer Ward	2,500	680	██ 27%

Physiotherapy

The Physiotherapy Department achieved 92% of its set target by treating 18,472 patients in 2024, which was an impressive achievement in its service delivery. The department's commitment to patient care and ability to meet a large portion of the demand for physiotherapy services can be seen in this solid performance.

The following table highlights the performance of diagnostic services, and a description is given below the table:

Table 14: Performance data of diagnostic services

Key Types of Diagnostic Services	Target	Achievement	Achievement Rate	Remarks
Laboratory Services	28,000	29,408	105%	
Radiology and Imaging Services	8,000	5,455	68%	X Ray
	4,500	3,206	71%	Ultrasonography
Cardiology Diagnostics	4,500	3,206	71%	ECG
	300	509	170%	Echocardiography

The diagnostic services performance in 2024 shows both successes and areas for improvement. Laboratory Services exceeded their targets, achieving 29,408 against 28,000, with a 105% rate. This reflects high demand and efficiency. Radiology and Imaging Services did not perform well. X-ray achieved 68% (5,455 out of 8,000), and ultrasound achieved 71% (3,206 out of 4,500). These results suggest challenges such as equipment shortages, staffing gaps, or accessibility issues.

The results of Cardiology Diagnostics were mixed. ECG underperformed by 71% (3,206 out of 4,500). Echocardiography was able to achieve a 170% success rate (509 out of 300). High demand and effective resource use are highlighted in this.

Echocardiography and Laboratory Services show operational excellence. Radiology and Imaging Services, along with ECG, need focused efforts to address challenges and attract more patients.

Gynecology

The Gynecology Department has demonstrated outstanding performance in 2024, exceeding its target by achieving 121% of the goal. The department served 3,150 patients, surpassing the target of 2,600, reflecting a strong demand for maternal and reproductive health services. This exceptional achievement can be attributed to several key factors:

Child Ward with OPD

The Child Ward with the OPD Department demonstrated strong performance in 2024, achieving 83% of its target by serving 2,161 children out of the 2,600 initially planned. This indicates a high level of service delivery and patient engagement, with a slight shortcoming in meeting the full target.

Eye OT & OPD

The Eye OT & OPD Department faced significant challenges in 2024, achieving only 28% of its target by serving 481 patients out of the 1,700 initially planned. This underperformance highlights a substantial gap between the department's goals and actual outcomes.

Dental

The Dental Department achieved 76% of its target for 2024, serving 4,156 patients out of the 5,500 initially set. This reflects a solid level of service provision, although there is room for improvement to meet the department's full potential.

Ayurveda

The Ayurveda Department achieved 54% of its target in 2024, serving 5,363 patients out of the 10,000 targeted. While this represents a moderate performance, it highlights an opportunity for growth and improvement in engagement with patients seeking traditional medicine.

Operation Theater

The Operation Theater Department performed commendably in 2024, achieving 81% of its target. This reflects solid operational efficiency and a good level of patient care. Even after achieving this, there is still room for improvement to fully meet the goal.

Circumcision

The Circumcision Department faced significant challenges in 2024, achieving only 23% of its target with 113 procedures performed out of the planned 500. This represents a notable shortfall, suggesting the need for a reassessment of strategies to improve service utilization.

General Surgery

The General Surgery Department faced challenges in 2024, achieving 22% of its target with 555 surgeries performed. While this reflects a shortfall in meeting the goal, it also provides valuable insights into areas for improvement and growth.

Urology Surgery

The Urology Surgery Department achieved 54% of its ambitious target by successfully completing 536 procedures in 2024. Despite the potential for growth, this performance has provided valuable insights and laid the foundation for future improvements. Opportunities have been identified by the department to improve patient outreach and streamline operations, and initiatives are already underway to increase awareness of urological surgical services and improve scheduling efficiency.

Cardiology Surgery

The Cardiology Surgery Department demonstrated strong performance in 2024, completing 690 surgeries, which amounts to 69% of its target. This reflects significant demand for cardiology surgeries and highlights the department's ability to efficiently serve a large number of patients despite the challenges of high-demand specialty care.

Cardiology & Medicine

The Cardiology and Medicine Department faced challenges in 2024, but nevertheless achieved 59% of its target. Despite serving a significant number of patients, the department failed to meet its goal, which shows that improvements need to be made in terms of patient engagement and access to care.

Psychiatric consultation

In 2024, the Mental Health Department faced significant challenges, but only achieved 20% of its target. Only one psychiatrist provided two days' time at Nagar Hospital and two days' time at Savar Hospital.

Dermatology

The dermatology department achieved 40% of its target in 2024, reflecting a significant shortfall in patient engagement.

Orthopedics

The Orthopedics Department achieved 84% of its target in 2024, reflecting strong patient engagement and effective service delivery.

Cancer Ward

The Cancer Ward faced challenges in 2024, achieving 27% of its target with 680 patients served. While the achievement rate indicates a significant gap, it also highlights an important area for development and improvement in the coming year.

Key Strategies and Forward-Looking Plan

Here are the key strategies and forward-looking plans designed to enhance patient care and operational excellence in the cancer ward.

Table 15: Forward – looking plan

Focus Area	Key Strategies	Targets
OPD Expansion	Optimize patient flow via digital triage systems.	Achieve 100% OPD target (116,300 patients).
Diagnostic Capacity	Upgrade X-ray/ultrasound equipment; train staff.	Boost radiology/ECG performance to 85%+ .
Specialized Care	Deploy mobile clinics for Eye/Dental/Ayurveda.	Increase underperforming departments by 40% .
Mental Health	Combat stigma; hire psychiatrists.	Double consultations (20%→40%).
Cancer Care	Launch screening camps; improve diagnostics.	Achieve 50%+ Cancer Ward target.
Resource Allocation	Recruit surgeons; ensure medicine/equipment supply.	Address 90%+ staffing gaps.

Gonoshasthaya Dialysis Center

"I experienced the hardships faced by kidney patients firsthand when I underwent dialysis at the Mirpur Kidney Foundation. This experience drove me to establish an affordable dialysis service for underprivileged patients."

Dr. Zafrullah Chowdhury (December 27, 1941 – April 11, 2023), was one of the prime founders of Gonoshasthaya Kendra.



Gonoshasthaya Dialysis Center in Dhaka city, which opened on May 13, 2017, is the largest dialysis center in Bangladesh with 110 beds. It inaugurated its second dialysis center at GK's hospital in Savar with 25 beds on April 7, 2019. This new center houses a 25-unit dialysis facility equipped with state-of-the-art dialysis apparatus, including infection-free active endotoxin filters. It is staffed by highly skilled biomedical technicians, doctors, and nurses. The facility features automated dialyzer machines that can be reused multiple times following U.S. protocols. Additionally, these machines are capable of recording real-time blood sugar (RBS) levels and blood pressure during dialysis sessions.

Fighting Silence with Strength – GK’s Dialysis Heroes

The dialysis center kept providing its services at tiered pricing in 2024 to meet the needs of individuals with diverse economic backgrounds. A consultation fee structure is given below:

Table 6: Consultation fee structure

Patient Category	Fee in BDT	Fee in USD
Lower-income patients	1,000	8
Lower-middle-class patients	1,200	10
Middle-class patients	1,700	14
Upper-middle-class patients	2,500	20
Affluent patients	3,000	24

Furthermore, patients with low incomes received dialysis free of charge. To sustain these services, the center seeks financial contributions from wealthy individuals and organizations. The center's funding is dependent on GK, BRgfqAC, and the Affordable Health Care Trust.

Gonoshasthaya Dialysis Center offered services during 2024

On average, the center provides dialysis to 260 patients daily in three consecutive sessions. Over 1,500 registered kidney patients receive treatment there. Most require dialysis three days a week.

Table 17: Services provided to each dialysis patients

Service Category	Details
Comfort and Convenience	<ul style="list-style-type: none"> - Fully furnished, air-conditioned rooms with ultra-modern renal chairs/beds - Attached recreational/working tables and personal television
Advanced Medical Equipment	<ul style="list-style-type: none"> - Special oxygen supply for each bed - State-of-the-art German Fresenius dialysis machines - Daily supply of 1.5 million liters of purified RO water - Active endotoxin filters in all machines
Comprehensive Patient Care	<ul style="list-style-type: none"> - 24/7 physicians and trained nurses - On-site biomedical engineers and caregivers - Blood sugar/blood pressure monitoring (3x per session)
Emergency & Specialized Support	<ul style="list-style-type: none"> - Extra ventilators, defibrillators, and cardiac monitors - On-site lab, blood transfusion, and emergency dialysis - Dedicated ICU and separate wards for hepatitis B/C patients
Nutritional Support	<ul style="list-style-type: none"> - Complimentary meals (bread, eggs/chicken, fruit) during dialysis
Special Considerations	<ul style="list-style-type: none"> - Underprivileged patients: Dialysis at Tk 900 (4th shift) with free dinner/breakfast - Private cabin option: Tk 500 extra per session for wealthier patients

Key Strategies & Forward-Looking Plan

Gonoshasthaya Dialysis Center is dedicated to improving its services through the use of key strategies and forward-thinking plans to improve accessibility, innovation, and clinical excellence.

Table 18: Forward-looking plan

Focus Area	Key Strategies	Targets
Affordability & Access	Expand outreach to remote areas; maintain tiered pricing.	Increase free dialysis services by 20% (2025).
Technology & Safety	Upgrade filtration systems; train staff on latest protocols.	Achieve zero infections via advanced endotoxin filters.
Patient Care	Enhance nutritional support; add mental health counseling.	Ensure 100% real-time BP/RBS monitoring compliance.
Funding & Sustainability	Strengthen partnerships with BRAC/trusts; seek global grants.	Secure \$500k annual donations for subsidized care.
Expansion	Establish 2 new centers in underserved regions by 2026.	Increase capacity to 50 dialysis units nationwide.

Specialized Health Camp

Health camps are traditionally organized in rural areas to provide medical services outside conventional clinics and hospitals. These camps consist of a team of healthcare professionals who treat patients in underserved regions. The Specialized Health Camp (SHC) operates through two primary methods:

Base Camp – A comprehensive setup that integrates medical services with minor and major surgical procedures. The camp runs for 2 to 8 days.

Day Camp – A single-day camp that offers medical services and conducts one minor surgical procedure.

Innovative Approach by GK

GK has redefined the concept of health camps by establishing SHCs that integrate multiple medical specialties, including Medicine, Cardiology, Surgery, Gynecology & Obstetrics, Pediatrics, Orthopedics, Ophthalmology, ENT, Dentistry, Physiotherapy, ECG, Ultrasonography, Pathology, and Pharmacy services. healthcare delivery.

These camps function as temporary hospitals in remote rural areas, ensuring comprehensive

Surgical services cover a broad range, including general surgery, pediatric surgery, eye operations, gynecological and obstetric procedures, and orthopedic surgeries. All surgical procedures are conducted by Professors and Senior Physicians from Gonoshasthaya Samajvittik Medical College and Hospital (GSMCH). Blood transfusion services are also available when required. The referral rate is minimal, and the casualty rate is nearly zero, reflecting the efficiency of the SHC model.

Medical Team Composition

In response to the crisis, GK mobilized a well-equipped medical team comprising 50 healthcare professionals to deliver comprehensive emergency healthcare to affected communities. Their coordinated efforts ensured timely medical support, addressing urgent health needs and mitigating the impact of the disaster.

Table 19: Department-Wise Patients Served during 2024

Department/Service	Patient Count (2024)
Dermatology	625 cases
Neonatal Care	169 infants
Pediatrics	75 children
Medicine/Cardiology	92 cases
Surgical Interventions	68 patients
Midwifery Services	44 women
Orthopedics	57 cases
Dental Services	58 cases
Ophthalmology	62 patients

Key Strategies & Forward-Looking Plan

GK's commitment to equitable healthcare will be strengthened by the initial introduction of specialized health camps, which will provide critical services such as diagnostics, education, and subsidized treatment to remote and low-income populations.

Table 20: Forward - looking plan

Focus	Action	Target
Expand Outreach	Scale multi-specialty Base/Day Camps in remote areas.	Add 3 new specialties (2025).
Surgical Capacity	Train local teams; partner with GSMCH for advanced procedures.	Reduce referral rate to <1%.
Resource Efficiency	Strengthen neonatal/pediatric care; integrate telemedicine.	Boost patient capacity by 30%.
Sustainability	Mobilize community health workers for post-camp follow-ups.	Train 100+ local staff annually.

HIV/AIDS Awareness & Prevention Project

In 2024, a comprehensive survey was conducted to assess the impact of awareness and training programs related to HIV/AIDS prevention within the Daulatdia brothel with around 2,000 sex-workers and its surrounding communities. The survey provided key insights into knowledge levels, misconceptions, and behavioral patterns regarding HIV/AIDS.

Table 21: Key findings

Category	Key Findings	Implications
AIDS Awareness	85.5% of respondents demonstrated awareness.	Strong community outreach efforts in education.
HIV Prevention Training	83.8% received formal training.	High engagement in prevention programs.
Misconceptions Identified	50.4% unaware of AIDS treatment options.	Critical gap in treatment-related education.
Condom Use Awareness	97.4% aware of condoms for prevention.	Effective dissemination of safe practice info.
Inconsistent Condom Usage	45.3% reported inconsistent use.	Behavioral interventions needed despite awareness.

Note: Data highlights both successes (high awareness) and challenges (knowledge gaps, behavioral inconsistencies).

Recommendations of the survey

The survey results indicate a strong foundation in HIV/AIDS awareness and prevention training. However, key gaps persist, particularly in understanding AIDS treatment and ensuring consistent condom usage. Moving forward, targeted interventions should focus on:

- **Addressing Misconceptions:** Strengthening education on AIDS treatment options through community workshops and peer-led discussions.
- **Behavioral Reinforcement:** Encouraging consistent condom usage through incentive programs, counseling, and accessibility improvements.
- **Sustained Engagement:** Continued collaboration with healthcare providers, NGOs, and local leaders to reinforce key messages and ensure long-term impact.

Key Strategies & Forward-Looking Plan

The findings are used to refine strategies and strengthen interventions to further reduce HIV/AIDS risks in Daulatdia and neighboring communities. Based on the recommendation, the following table indicates the forward-looking plan.

Table 22: Forward-looking plan

Focus Area	Key Strategy	Target
Bridge Treatment Gaps	Peer-led workshops on AIDS treatment.	Reduce unawareness by 40%.
Boost Condom Consistency	Incentivize usage + accessibility drives.	Cut inconsistent use to <30%.
Strengthen Community Partnerships	Collaborate with NGOs/health workers.	Sustain 90%+ awareness/training.

Gonoshasthaya Krishi Somobay



In 2024, Gonoshasthaya Krishi Somobay (GKS) pursued its mission of empowering farmers and improving livelihoods in the areas affected by cyclones in southern Bangladesh. GKS has made significant progress in agricultural rehabilitation and community development by forming cooperatives, providing farm machinery, re-excavating canals and ponds, and implementing water and sanitation programs. GKS's key achievements, challenges, and future plans in 2024 are highlighted in this report.

Implementation area

In southern Bangladesh, GKS operates mainly in six Upazilas across four districts, which suffered severe damage from Cyclone Sidr. These include:

- **Barguna District:** Barguna, Amtali, Taltali, and Patharghata Upazilas
- **Pirojpur District:** Mathbaria Upazila
- **Bagerhat District:** Sharankhola Upazila
- **Patuakhali District:** Galachipa Upazila

GKS has established 7 unit offices in these Upazilas, one regional office in Barguna, and headquarters in Savar and Parbatipur. The main accomplishment mentioned below:

Formation of Cooperatives

GKS continued its support with 100 informal cooperative groups organized after the Sidr cyclone in 2007. Each comprising at least 20 members, to implement agricultural rehabilitation programs.

The Government Cooperative Department has officially registered 40 by 2024, which allows farmers to access government aid for tillers, irrigation, seeds, and fertilizers.

Farm equipment such as tractors, power tillers, power pumps, sprayers, and tractors are valuable. They were maintained and continued to be utilized by the cooperative groups during 2024. This equipment has enabled farmers to increase productivity while receiving technical support at a reasonable cost.

Irrigation support

During the reporting period, farmers used irrigation water that was sourced from GKS-rehabilitated canals, which required excavating 16.16 km of canals in Galachipa and Barguna Upazilas. This initiative provided irrigation facilities for 1,000 acres of farmland, supporting the cultivation of Watermelon, Bangi, and Boro crops. In 2024, fifty-four ponds (out of 326 excavated in the past years) were re-excavated to preserve freshwater for irrigation, drinking, and domestic use, and people were provided with facilities.

GKS provided 210,000 Tilapia and carp fingerlings to cooperative members to support their nutritional and economic needs.

Homestead garden support

In 2024, GKS maintained 9,000 homestead gardens and created 400 new ones. These gardens offer both nutritional and economic benefits to families, enhancing food security and livelihoods.

Vermi Composting

GKS provided support to 2,201 families in vermi compost production in 2024, which included the construction of 50 new vermi compost pits, which contributed to better soil fertility. Also, 12 vermi compost centers were kept as exclusive sales outlets, enhancing the availability of organic fertilizers and promoting sustainable agricultural practices.

Pond Sand Filters

GKS installed 258 Pond sand filters in Mathbaria, Sharankhola, and Patharghata Upazilas, providing safe drinking water to 100,000 beneficiaries. In 2024, thirty-five new PSFs were installed, and 233 inoperable PSFs of other organizations were rehabilitated.

Sanitation and Hygiene

GKS constructed 1,050 hygienic latrines in five Upazilas, improving sanitation and reducing disease prevalence.

Training programs on sanitation were conducted for 962 PSF caretakers, 200 women and adolescents, and students in 24 schools.

Table 23: GKS implemented four projects with foreign grants

Project	Donor	Target	Achievements
Access to Drinking Water & Sanitation (ERARD Year-3)	Cher Support Committee	35 PSFs, 200 latrines, 40 re-excavated ponds	Improved drinking water supply, sanitation, augmentation of rain water and homestead gardens.
Rehabilitation of Old PSFs and Latrines	France Support Committee	121 PSFs, 121 latrines, 52 re-excavated ponds	Rehabilitated PSFs and constructed new latrines, trained caretakers and latrine users and school children improved sanitation.
Parbatipur Integrated Project Phase-2	Self-funded	1,200 households (6,000 beneficiaries)	Provided vocational training, agricultural support, and income-generating activities.
Access to Drinking Water through PSF and Re-excavation of Ponds and Canals	Espoir Eau Bangladesh, France	Improved water supply and sanitation in six Upazilas	Ongoing project to enhance irrigation , sanitation , systems and livelihood .

Key Strategies & Forward-Looking Plan

Gonoshasthaya Krishi Somobay will prioritize farmer-centric innovations, including organic farming training and digital agricultural services, to ensure equitable growth for rural communities. The key forward-looking plan is tabled below.

Table 24: Forward-looking plan

Focus	Action	Target
Cooperatives	Fast-track registration	100% by 2025
Agriculture	Expand irrigation/compost	50% yield increase
Water/Sanitation	Install 300+ PSFs/latrines	100% access
Cyclone Resilience	Secure donor funding	Post-Remal recovery
Equity	Audit distribution systems	Fair allocation

Gonoshasthaya Vocational & Technical Training Institute



Women Empowering through Skill Training

In February 2014, GK established the Gonoshasthaya Vocational and Technical Training Institute (GVTTI) to align with national and international labor markets and empower youth. Initially, GK offered five courses accredited by the Bangladesh Technical Education Board (BTEB): driving and auto mechanics, dressmaking, general electrical work, carpentry, and welding.

Later, BTEB approved additional courses for 30 trainees per session, lasting 3 to 6 months, in paramedics, food processing, block/boutique painting, and agriculture/nursery development. These programs expand skills, enhance workforce readiness, and promote socioeconomic growth through accessible, market-driven technical education.

Participants are responsible for covering course costs for the self-funded GK training program. Female students have been supported by external funding in various initiatives, which has enabled many, particularly women, to gain valuable skills without financial strain. Courses are short-term, offering 3-month or 6-month options, with the latter being the most popular due to its comprehensive yet concise curriculum.

Admission is open to all, only requiring the completion of class VIII or JSC. Each subject allows 50 students to take the BTEB exam, with 40 spots for regular students and 10 spots for dropouts, selected based on their class exam performance.

In 2023-24, the Carol Ann Eggen Stipend Fund will offer annual stipends to 60 students in 5 subjects, which will reduce financial barriers and encourage participation. Passing the board exam results in graduates receiving BTEB-certified credentials, which ensures standardized recognition.

The program's alignment with national standards and commitment to quality technical education have been confirmed by BTEB's approval of 7 subjects under GK since 2014. This endorsement reinforces the program's credibility and value.

GK complied with the following guidelines during 2024



Table 25: GVTTI's accomplishments in running courses in 2024

Sl. No	Name of Trade Course	Total Students trained during January - December 2024		
		Male	Female	Total
01	Computer Office application	58	60	118
02	Dress making and Tailoring	0	37	37
03	Driving cum Auto mechanics	3	5	8
04	Motor cycle driving	0	10	10
05	Graphic Design and Multimedia	0	20	20
06	Block, Boutique and Painting	0	20	20
Total =		61	152	213

The following table presents a summary of foreign funding with the number of beneficiaries.

Table 26: GKS projects with foreign grants in 2024 and beyond

SI No	Name of Project and Donor	Implementation Period	Targeted and implemented works.
1.	Empowering 100 women through Skill Development. Supported by: United Nations Association - UK	August 2023 to July 2024	100 females were trained to establish economically on computer office applications, sewing and tailoring, driving and block, boutique and painting, and skill development training on agriculture and nursery development.
2.	Enhance Girls' and Women's Education to Liberate. Supported by: Carol Ann Eggen Stipend fund and and Inter Peres, Canada.	July 2023 to June 2028	900 female students from universities, medical and dental colleges, paramedics, vocational colleges, and nursing students will receive scholarships as a part of this project.
3.	Supported by: World Solidarity Movement	January to December 2024	There were 40 students who received training, with 30 of them being females trained in computer office applications and 10 of them being males trained in motorcycle driving.

Key Strategies & Forward-Looking Plan

Leveraging our legacy of vocational excellence, we will launch digital learning platforms and apprenticeship tie-ups in 2025, ensuring learners thrive in Bangladesh's evolving job market.

Table 27: Forward-looking plan

Strategy	Target
Expand vocational courses (IT, agri-tech, caregiving courses)	10+ courses; align with global labor demands
Boost female enrollment (current 71%)	85% female participation via stipends & outreach
Strengthen donor partnerships	Secure \$200k+ funding for scholarships
Enhance job placement programs	Achieve 90% employment for graduates
Introduce hybrid training models	Train 500+ youth annually with BTEB certification

Health Care Scheme for Ready-Made Garment Workers

In 2024, 27066 ready-made garment workers (12998 females and 14068 males) from four factories in Gazipur and Dhaka districts accessed healthcare services under this scheme. In addition, 209 patients (males 104 and females 105) were in the hospital. They received comprehensive health check-ups, diagnostic tests, and outpatient (OPD) services at Savar Hospital, including antenatal/postnatal care, menstrual regulation, and immunization. Medical officers, dental surgeons, physiotherapists, and ENT specialists were also involved in specialized consultations. Through GK's insurance scheme, patients contributed to the costs. The premium for the scheme is based on the direct health costs, which are BDT 600 (USD 5) per worker per year, and the coverage is BDT 25,000 (USD 200) per person per year.

The Health Care Scheme (Insurance Model) for RMG workers in Bangladesh is partially financed by Medico International, Germany, and Bashati, Stichting voor Bangladesh, The Netherlands.

The project team observed that this scheme contributed to the well-being of workers, cost savings, and operational efficiency in garment factories.

Key Strategies & Forward-Looking Plan

Building on our legacy of worker-centric care, GK will implement a pioneering healthcare initiative for RMG employees in 2025, combining preventive health screenings, chronic disease management, and emergency medical support including mental health care support to create healthier workplaces. The following table highlights the way forward plan:

Table 28: Forward-looking plan

Strategy	Target
Expand insurance coverage	Include 50,000+ RMG workers (50%↑)
Strengthen mental health services	Integrate counseling in 30% factories
Boost partnerships	Engage 2+ new donors for scalability
Digitize enrollment/tracking	Achieve 100% digital adoption
Enhance worker feedback loops	Implement annual satisfaction surveys

Helping Survivors Heal Project

GK, a pioneer in community-based health services, continues to lead transformative initiatives in the health and protection sectors. Recognizing the growing need for mental health and psychosocial support (MHPSS) in Bangladesh, GK partnered with the globally renowned Center for Victims of Torture (CVT) in 2021. This collaboration marked a significant step toward addressing the psychological needs of vulnerable communities. Through its exemplary track record, GK has been selected to participate in the prestigious *Helping Survivors Heal (HSH)* project, generously supported by USAID. The project spans from September 1, 2023, to July 31, 2026, providing an opportunity to redefine care for survivors of trauma.

The *HSH project* aims to strengthen organizational effectiveness and enhance service delivery through intensive capacity development. A core objective is to build the expertise of the MHPSS workforce, equipping them to operate in diverse local settings and respond effectively to community needs. By fostering collaboration with relevant projects and focusing on beneficiary-driven strategies, GK will leverage the lessons learned to mainstream and integrate MHPSS within its existing health services, ensuring sustainable impact across Bangladesh.

Table 29: The key accomplishments of 2024

<i>Key Activities Accomplished</i>	<i>Documents Produced</i>
<ul style="list-style-type: none"> • One inception workshop for the HSH project has been done. • An assessment of training needs and a one-day basic training on MEAL for psychologists were held. • Structured individual/group supervision for psychologists. • Fund mobilization strategy developed and agreed upon on principle by the GK trustee board. • Mapping for MHPSS mainstreaming in Dhaka has been completed. • Organized training sessions for psychologists covering: <ul style="list-style-type: none"> • Individual and group supervision • Psychological symptoms and clinical assessment factors • Purpose and approach to clinical intake • Case sharing and discussion of psychological techniques/tools • Assessment and mental status examination • Setting expectations, boundaries, and ground rules • Supervision role-play discussions • Case consultation, file review, and didactic teaching 	<ul style="list-style-type: none"> • The Strategic Document for Resource Mobilization • Key proposed activities for mainstreaming. • A brief mental status exam • Creative Expression Session: What Makes You Feel Good (English and Bengali versions) • Tea-talk session: Myth vs. Facts on Mental Health • Monitoring, Evaluation, Accountability, and Learning Framework for MHPSS Services. • Report on MEAL basic training for psychologists.

Key Strategies & Forward-Looking Plan

As per GK's proposal to CVT, MHPSS will be integrated into GK's project with sexual workers and at Savar Hospital.



Homegrown Happiness: Skipping Through Sunny Days

Improving the Physical and Mental Health of Children and Elderly People

*"No matter how strong the storm, we can grow like tiny seeds into mighty trees—with courage, care, and a little sunshine."
A girl from Baharchara – 12 years*

The focus of this project is to improve the well-being and rights of children and elderly citizens in Baharchara Union, Teknaf Upazila, Cox's Bazar. In 2024, the project was completed for 18 months of the 34-month project that will conclude on April 30, 2025. Celebrating children's achievements:

Empowering young voices

In 2024, a total of 4,511 children aged 7 to 15 continued to form 252 Shishu Parishads (SP)—child-led councils that promote their rights and leadership skills. 136 boys' councils and 116 girls' councils were part of these councils, which promoted advocacy, teamwork, and active participation.

Building Life Skills

A total of 320 children received life skills training in the past and continued their focus on communication, self-esteem, empathy, creative thinking, and decision-making. The children who were trained became peer educators, sharing their knowledge and skills with others and enhancing community learning.

Advocacy and Action

- In 2024, the Union Shishu Parishad (USP), which consisted of a 9-member council elected by 4,015 Shishu Parishad members, continued to play a significant role in achieving the following:
- Putting an end to 10 child marriages.
- Reuniting 60 school dropouts in classrooms.
- Celebrating children's achievements during Child Rights Week 2024, with minimal support from project staff.

Promoting Safer Environments

The USP initiated a dialogue with employers to address hazardous child labor for the first time. Efforts are being made to ensure that children can grow and thrive in safer environments.

Community Engagement

The project engaged 1,542 elderly persons (787 men and 755 women) aged 60 or older through 119 self-help groups. These groups provided a platform for mutual support, community bonding, and empowerment.



A Moment of Care: Ensuring Clear Vision for Golden Years

Health support

The project physician continued to providing health services by visiting in their bi-monthly meeting at the community. The elderly were provided with prescriptions or referred to, and they also purchased medicine either with cash or credit.

604 Elderly people purchased medicine from the project's supply 3660 from local market. As of December 2024, a total amount of BDT 76,109 (USD 609) has been accumulated on 8 separate bank accounts as Revolving Drug Fund owned by the elderly for future use. Expanded access to healthcare through referral of 188 cases of chronic conditions such as arthritis and hypertension.

The project staff continued to impart health, nutrition, and diet education to women members of the family. During 2024, a total of 419 such sessions were conducted with the participation of 5385 women. The field staff observed a significant increase in the practice of taking balanced food. Social safety nets

Up until October 2024, social safety nets were being used by 203 elderly people who hadn't given up their old-age benefits to meet their financial needs. Vegetable seeds and seedlings were given to 272 poor and ultra-poor individuals to grow vegetables for consumption and sell the surplus, as per the project.

Key Strategies and Forward-Looking Plan

The GK - action medeor Project is committed to protecting the rights and well-being of children and elders, recognizing their achievements, and creating brighter futures in Baharchara Union. The funding agency is currently having a discussion about a 5-month extension that doesn't cost anything.

Center for Community Health Research

Since 1972, GK has been delivering Primary Health Care programs across 21 marginalized and underserved rural communities in Bangladesh, alongside maintaining a robust health surveillance system. To enhance program quality and oversight, GK established the Center for Community Health Research (CCHR) in 2022.

CCHR systematically collects and analyzes data on health outcomes, vital events (births, deaths, pregnancies), non-communicable diseases, domestic violence, healthcare costs, and socioeconomic indicators.

Community health workers (paramedics) gather field data, which is stored electronically using SPSS software.

This repository supports evidence-based decision-making, academic research, and policy advocacy. Key stakeholders - including Gono Bishwabidyalay (University), Gonoshasthaya Somaj Vittik Medical College (GSVMC) faculty, students, and policymakers - leverage this data for publications, conferences, and curriculum development. Additionally, develop grant proposals to submit to funding agencies.

In 2024, CCHR contributed to

- Completing the Annual Report 2023–24,
- Supporting medical students' Residential Field Site Training and research on undiagnosed hypertension,
- Evaluating GK's Water and Sanitation Project and an HIV/AIDS awareness study among Faridpur sex workers,
- Publishing findings on suicide epidemiology in the Journal of Gono Bishwabidyalay.
- Ongoing initiatives include assessing paracetamol's public health impact, advancing the Pathology-Based Tumor Registry at GSVMC, and documenting 25 years of community-based medical education.

The focus of the future will be on

- Launching a Population-Based Cancer Registry across five sites,
- Expanding climate-health research using mortality and weather data,
- Strengthening NCD patient-paramedic networks for treatment compliance,
- Developing a Community Ophthalmology Program in Kashinathpur.
- CCHR remains committed to bridging data, research, and grassroots action to uphold GK's mission of equitable healthcare.



Humanitarian Emergency Response

As of 2024, the Rohingya refugee camps in Cox's Bazar, Bangladesh remain one of the largest and most densely populated refugee settlements in the world. Initially established in 2017 after a mass exodus of Rohingya Muslims fleeing violence in Myanmar, the camps now consist of 33 settlements housing approximately 1 million refugees. The camps are still experiencing dire living conditions, with overcrowding, inadequate sanitation, and limited access to healthcare and education. Humanitarian organizations are still providing essential services, but challenges have become more difficult due to funding shortages and resource constraints. Additionally, the prolonged displacement has led to growing concerns about the mental health and future prospects of the Rohingya population, as repatriation efforts to Myanmar have stalled due to ongoing instability and lack of guarantees for their safety.

Lifesaving support was provided by GK on its first day and it continues to provide health services.

GK projects were supported by the following funding agency in 2024. They were UNHCR, WHO, UNICEF, and Malteser International. The support they provide is described separately below:

UNHCR

Three Health Posts (HP) were established to operate for 8 hours and 6 days weekly, and three Primary Health Care (PHC) services were provided 24/7. Continued to provide in-Patient Department and emergency service from 2 centers during 2024 in collaboration with RRRC. The following table includes outpatient consultations and other services:





Table 30: Services provided, and people reached

Activities	People Served / Reached
People reached through outpatient consultations & free medicine	3,52,383
People received emergency services	70,112
People received IPD services	5,707
Women accessed to ANC services	8,976
Women accessed to PNC services	3,259
People accessed pathological services	1,93,316
Patients received dental services	9,578
Patients accessed and sessions on physiotherapy	17,354
Children covered EPI	14,735
People reached through MHPSS	95,284



Table 31: Services provided, and people reached

Inpatient (IPD) Patients	230
Total Outpatient (OPD) Consultations	352,383
Total IPD Patients	5,707
Emergency Patient Management	79,483
Facility-Based Deliveries	756
Telemedicine Services by Specialist Doctors	2,316
Minor Surgeries Conducted	299
Emergency Referrals to Secondary Facilities	4,289
Emergency Referrals to Tertiary Facilities	93
SAM Children with Medical Complications (Stabilization Centers)	161
SAM Children without Medical Complications (Nutrition Centers)	2,578
MAM Children (Nutrition Centers)	11,917
MAM Pregnant & Lactating Mothers (Nutrition Centers)	792
Pregnant & Lactating Mothers (IYCF Counseling)	17,123
Mental Health (mhGAP) Consultations	4,922
MHPSS Individual Consultations	1,629

UNHCR, WFP, and UNICEF

The nutrition support project followed UNHCR, WFP, and UNICEF guidelines in providing the following services:

- Outreach activities
- Outpatient Therapeutic Program (OTP)
- Targeted Supplementary Feeding Program (TSFP)
- Stabilization Center (SC) services for acute malnutrition management
- Supplementary food ration distribution for under-5 children and pregnant/breastfeeding women (PBW)
- Nutrition Sensitive E-voucher Program (NSEP) for mothers/caregivers of children aged 24-59 months
- Growth Monitoring & Promotion (GMP) for children aged 0-59 months
- Community-based Management of At-Risk Mothers & Infants (C-MAMI)
- Infant & Young Child Feeding (IYCF) support
- Mother-to-Mother Support Group (MtMSG) establishment and sessions
- Cooking demonstration sessions
- Vitamin-A supplementation
- Deworming and Mass MUAC screening campaigns
- Early Childhood Care & Development (ECCD)
- Mental Health & Psychosocial Support (MHPSS) activities
- These services ensure comprehensive nutrition support for refugees. The achievement indicators are provided in the following matrix by the funding agency.

These services provide comprehensive nutrition support for refugees. The following matrix provides an overview of the achievement indicators, as per the funding agency.

Table 32: Nutrition support by funding agency and indicators

Achievements of the Nutrition Program of 2024	UNICEF supported camps			UNHCR supported camps			WFP supported camps			Bhasanchar		
Indicators	Target	Achievement t	Achievement t in %	Target	Achievement t	Achievement t in %	Target	Achievement t	Achievement t in %	Target	Achievement t	Achievement t in %
# of children 6-59 months screened per month in the community by the community nutrition volunteers	13680	12433	91%	30646	28976	95%	31332	29762	95%	6154	6204	101%
# of children 0-59 months screened in the growth monitoring and promotion(GMP) programme	5948	5359	90%	30440	30887	101%	31332	32781	105%	6154	6700	109%
# of boys and girls age 0 to 59 months with SAM with medical complications admitted in the stabilization centre	670	523	78%	95	161	169%	n/a	n/a	n/a	n/a	n/a	n/a
# of boys and girls age 0 to 59 months with SAM without medical complications admitted in the outpatient therapeutic programme (OTP)	n/a	n/a	n/a	2410	2055	85%	n/a	n/a	n/a	496	363	73%
# of boys and girls age 6 to 59 months with MAM admitted to targeted supplementary feeding programme (TSFP)	n/a	n/a	n/a	11367	9386	83%	12667	9953	79%	1997	1964	98%
# of pregnant and lactating women (PLW) with MAM admitted to targeted supplementary feeding programme (TSFP)	n/a	n/a	n/a	701	608	87%	599	696	116%	223	96	43%
# of boys and girls aged 6 - 23 months enrolled and reached in blanket supplementary feeding programme (BSFP)	n/a	n/a	n/a	15877	13931	88%	14381	10681	74%	5417	6416	118%
# of boys and girls aged 24 - 59 months enrolled on Nutrition Sensitive Evoucher Program (NSEP)	n/a	n/a	n/a	14768	14592	99%	18,827	18169	97%	n/a	n/a	n/a
# of enrolled mother baby pairs newly admitted to community management of at risk mothers and Infants (CMAMI)/MAMI program.	186	212	114%	n/a	n/a	n/a	819	1321	161%	356	378	106%
# of Mother-to-mother support groups (MTMGS) established	480	480	100%	1008	1063	105%	418	418	100%	55	55	100%
# of adolescent girls (10-19 years) received IFA supplementation in the community	8700	7949	91%	20441	20710	101%	11225	17577	157%	3454	3776	109%
# of IYCF One-to-one counselling of care givers of children 6 - 23 months and pregnant women	2866	3770	132%	8171	10069	123%	17326	24113	139%	1642	1616	98%
# of pregnant and lactating women (PLW) and caregivers of children aged 6-23 months provided with IYCF messaging	4699	5005	107%	17002	13626	80%	2300/month	7271/month	316%	3458	3072	89%
Number of PLW screened per month in the community by the community nutrition volunteers	n/a	n/a	n/a	n/a	n/a	n/a	8818	6883	78%	1563	1163	74%
Number of PLW enrolled and reached in blanket supplementary feeding programme (BSFP)	n/a	n/a	n/a	n/a	n/a	n/a	8818	7775	88%	1439	1639	114%



Malteser International

Healthcare Service Delivery Under the GK-MI Partnership

Through the GK-MI collaboration, three fully staffed health posts were established across various camps, operating daily (six hours/day, six days/week), complemented by one government health center in Bhasan Char. These facilities served as critical access points for primary healthcare services to Rohingya populations.

Additionally, a dedicated health center was established on Kutubdia Island, extending essential health services to local community members.

In 2024, this integrated network achieved remarkable reach, serving 29,638 beneficiaries - a testament to its significant impact on healthcare accessibility in the region. The comprehensive beneficiary count was facilitated through digitalized service record-keeping systems. Location wise beneficiaries served are given in the following table.

Table 33: Beneficiary Distribution of GK-MI Health Services

Category	Total	Rohingya Camp (87%)	Bhasanchar (1%)	Kutubdia Host Communities (4%)
Total Beneficiaries	77,360	67,303	970	2,846
Female (61%)	47,190	41,054	592	1,736
Male (39%)	30,170	26,249	378	1,110

The following table includes outpatient consultations, emergency services, ANC/PNC services, and other services during 2024.



Refugee family, Putibunia camp. Several of its members were beaten and killed.

Table 34: FDMN beneficiaries reached and services provided

Activities	People Served /Reached
People reached through outpatient consultations & free medicine	77,360
People received emergency services	3,565
Women accessed to ANC services	7,464
Women accessed to PNC services	2,726
People accessed pathological services	7,266
Children covered EPI	9,084
Children screened for malnutrition	16,908
Women screened for malnutrition at Community	2,560
Elderly screened for malnutrition at Facility	1,440
Women counselled on IYCF	6,594
People reached through awareness & hygiene demonstration sessions	42,792
People reached through MHPSS	2,396

Host Community Kutubdia is a coastal Upazila (sub-district) in Cox's Bazar, Bangladesh, known for its vulnerable geography and limited healthcare access. The region faces frequent natural disasters, exacerbating health challenges for its predominantly low-income population. With MI's support, GK managed to provide health services to the host community on Kutubdia island in 2024. The key services are presented in the following table:

Table 35: Services provided for host community and beneficiaries reached

Service	Number of Beneficiaries
Outpatient Department	1,831
Sexual and Reproductive Health	1,015

OPD dominates healthcare delivery, suggesting that preventive and curative general health services are in high demand.

SRH services are well-utilized, indicating effective outreach to women and possibly strong community health programs.



Emergency response from GK during a flood in August 2024

In the third week of August 2024, heavy rainfall and upstream water releases triggered severe flooding across multiple districts in Bangladesh, with 11 districts in the eastern regions experiencing the most significant impacts. The worst-affected districts - Feni, Noakhali, Lakshmipur, and Cumilla - suffered extensive damage, leaving over 100 villages submerged and displacing more than 100,000 people.

In Feni, approximately 7,350 families were forced to evacuate their homes. Many sought refuge in government-run shelters, while others relocated to higher ground, particularly on pond embankments and other elevated areas.

Relief distribution

GK's relief efforts played a crucial role in ensuring essential supplies reached the most affected areas, offering both immediate aid and long-term recovery support.

In response to the crisis, GK mobilized its own managed funds and donations to provide immediate relief to affected communities. The key highlights of the relief efforts included:

Table 36: Distribution of relief items and quantity

Category	Items Distributed	Beneficiaries/Quantity
Food Security	3,800 food packs	Nearly 19,000 people
Safe Drinking Water	650 bottles (5-liter each)	Provided clean drinking water
Clothing & Warmth	1,500 essential garment sets + 1,356 blankets	Supported families in need
Livelihood Support	1,011 packs of animal feed	Sustained livestock for farmers
Nutritional Aid	1,300 Minavit packages	Assisted vulnerable groups

Health Services as Part of Flood Response

The flood-affected communities faced a surge in health issues, with 2,275 patients receiving medical assistance. The most prevalent conditions included diarrhea, skin diseases, fever, and respiratory tract infections (RTI), reflecting the health risks associated with prolonged exposure to floodwaters and inadequate sanitation.

GK relief assistance for cyclone Remie in 2024

GK extended emergency healthcare, relief, and humanitarian assistance to five coastal districts affected by Cyclone Rimal on May 26-27, 2024. The cyclone left millions stranded, causing extensive damage to homes, fields, and livelihoods, particularly in Khulna, Bagerhat, Satkhira, Bhola, and Barguna districts. Key relief and healthcare efforts were:



Hope in Transit: Relief Rolls Toward Those Who Need It Most

Medical Assistance & Food Support

- Medical teams were deployed in 12 affected Upazilas, providing first aid and essential healthcare services.
- More than 600 individuals from 1,000 affected families received dry food and free medicines.
- Health services and relief materials were distributed in Mongla and Rampal (Bagerhat district).

Food & Shelter Assistance

- 100 families in Mathbaria Upazila received aid:
- 80 families were provided with 8 kg rice, 1 kg lentils, 2 kg potatoes, 1 kg salt, and 1-liter soybean oil.
- 20 families received corrugated tin bundles to rebuild homes.
- GK plans to distribute relief to 900+ families across Barguna Sadar, Taltoli, Patharghata, Pirojpur Mathbaria, and Sharankhola Upazilas.
- 110 families will receive corrugated tins in phases.

Three rehabilitation projects were implemented by Gonoshasthaya Krishi Somobay in its project area in southern Bangladesh after Cyclone Remal in May 2024. These were:

Table 37: Relief items supported beneficiaries and their donors

Project	Donor	Families supported	Achievements
Immediate Food and Housing Material Support	France Support Committee	570 families (2,850 beneficiaries)	Distributed food packets and C.I. sheets for house repairs.
Immediate Food, Housing Material, and Livelihood Support	Medico International, Germany	570 families (2,850 beneficiaries)	Distributed vegetable seeds, saplings, fish fingerlings, and repaired latrines.
Remal Recovery in Patharghata, Mathbaria & Sharankhola Upazilas	Espoir Eau Bangladesh, France	22,699 beneficiaries	Distributed seeds, repaired PSFs and latrines, and protected ponds with nets.

Organizational Development

Enhancing efficiency, adaptability, and long-term success requires organizational development (OD) by aligning strategies, processes, and culture with evolving business needs. Structured change management fosters employee engagement, improves productivity, and ensures sustainable growth. OD's proactive approach to addressing challenges helps organizations stay competitive in dynamic markets.

As part of its ongoing commitment to organizational development, GK, with support from humanitarian response partners, has developed and implemented several critical policies and manuals. During 2024 GK management continued to follow and reviewed the following manuals and guidelines. Under this review process, the Protection from Sexual Exploitation and Abuse (PSEA) Policy has been updated in 2024.

A list of policy and guidelines is listed in the following table

Table 38: List of policy and guidelines

Resources (HR) Policy	Gender Policy
Protection from Sexual Exploitation and Abuse (PSEA) Policy	GK Safety & Security policy
Feedback and Complaint Response Guidelines	Policy Against Fraud
Procurement Guidelines	Whistle blowing Policy
Policy Against Fraud and Corruption	Jibon o Jibon Dharan (Service policy)
Code of Conduct	Terms of Reference for Rest and Recuperat

With financial support from Malteser International, GK commenced the consolidation of the Jibon o Jiban Dhara and HR Policy into a unified manual in late 2023. The finalization process required extensive consultations with stakeholders at various levels, resulting in a longer-than-anticipated timeline. The HR Manual has been consolidated and is currently being awaiting management approval, along with a final review to ensure legal compliance and the creation of roughly 26 templates.

In 2024, GK developed a Child Safeguard Policy and conducted staff orientation sessions to familiarize teams with its key components. Additionally, GK formulated a five-year strategy (2023–2028) as a living document, covering key sectors including Health+, Education, Finance, HR, Resource Mobilization, and Emergency Response. This strategy is currently under implementation.

GK's leadership is determined to enhance organizational due diligence by systematically implementing and refining policies and procedures across all GK offices in the future.

