



2020

Project Completion Report



Comprehensive SRHR Services to the Marginalized Population through RTMI (Ensuring Reproductive Health and Rights Services Delivery in Nayapara and Kutupalong Refugee areas)

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Introduction

RTM International is a non-profit and non-governmental organization registered with NGO Affairs Bureau in 1994. RTMI has been working with support from UNFPA since 2008 in 2 Registered Refugee Camps (Kutupalong RC & Nayapara RC). After the influx of (Forcefully Displaced Myanmar Nationals (FDMN) in the year 2017, RTMI has increased 16 more HF in Camp (Camp- 1W, 2W, 4, 4 Ext & 6) and Host areas (Sabrang UH&FWC, Baharchora UH&FWC, Jaliapalong UH&FWC, Inani SC, Balukhali SC, Ukhiya UHC, Teknaf UHC & Cox's Sadar Hospital and also in the island areas of Moheshkhali UHC, Kutubdia UHC & Matarbari UH&FWC). Through this project RTRMI has been providing midwifery-led program supported by UNFPA through 7 camp facilities and 11 GoB facilities in host population areas. Among these 18 facilities 17 are providing 27/7 SRHR services and 1 is providing only day services.

Currently, RTMI is working directly in a total of 14 Camps and 30 (1 CSH, 4 UHCs, 5 UH&FWCs, 2 SCs, 1 RD & 17 CCs) Govt. HF for Emergency Humanitarian context with other UN agencies (UNICEF, UNHCR, IOM) and INGOs (Pathfinder International, Medicines du Monde).

During the project period, we were facing a critical situation for COVID 19 Pandemic. The virus was confirmed to have spread to Bangladesh in March 2020. The first three known cases were reported on 8 March 2020 and it was increasing day by day. The Government of Bangladesh declared "Lockdown" throughout the nation from 23 March to 30 May 2020.

For this reason, as per the direction of RRRC and the advice of UNFPA, most of the activities were held down and staff movement was restricted. The performance was decreasing day by day. About 12 health care providers and support staff were affected by COVID-19 till date.

1. General Information:

| | | |
|--------------------------|--|--|
| Reporting Period: | 01 st January 2020 to 31 st December 2020 | Report type: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Interim <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final |
| Prepared by: | Md. Atiqur Rahman, Project Manager, SRH Project RTM International | Reviewed/Approved by: Dr. Humaira Begum, Additional Director, RTM International |

2. Project Information:

| | | | |
|--|--|---|---|
| Project Title | Comprehensive SRHR Services to the Marginalized Population through RTMI (Ensuring Reproductive Health & Rights Services Delivery in Nayapara and Kutupalong Refugee areas) | | |
| Project Acronym | SRHR (Sexual Reproductive Health & Rights) | | |
| Project location | Camp Areas: Kutupalong RC, UID # 339 Nayapara RC, UID # 594 Camp 2W, UID # 022 Camp 1W, UID # 008 Camp 4, UID # 043 Camp 4 Ext., UID # 208 Camp 6, UID # 055 | Govt. HFs: Balukhali SC, UID # 427 Inani SC, UID # 316 Jaliapalong UH&FWC, UID # 277 Baharchora UH&FWC, UID # 205 Sabrang UH&FWC, UID # 569 Ukhiya UHC, UID # 311 Teknaf UHC, UID # 566 Cox's Bazar Sadar Hospital | Island Areas: Moheshkhali UHC Kutubdia UHC Matarbari UH&FWC |
| Implementing Organization | Research, Training & Management (RTM) International | | |
| Human Resources | 281 Staffs | | |
| Donor | UNFPA (United Nations Population Fund) | | |
| Project Budget and Contributions (If any) | BDT 181,749,782; U\$D 2,150,885 | | |

| | | |
|------------------------|---|--|
| Project Summary | <p>Objectives of the project: Under the project RTM International has contributed to the following project outcomes</p> <p>Objective 1: To Improve the reproductive health status of the marginalized population, Rohingya refugees and population residing in the two registered camps (Kutupalong and Nayapara), 5 extension camps UMN located in Cox’s Bazar district;</p> <p>Objective 2: To reduce maternal and newborn mortality and morbidity of Rohingya Refugees and Host Community by trained staff;</p> <p>Objective 3: To Ensure effective community participation; and</p> <p>Objective 4: To Ensure quality of care and coordination with stakeholders.</p> <p>Target Population: Registered Refugees residing in Nayapara and Kutupalong camps, Forcibly Displaced Myanmar Nationals (FDMNs) at different Camps in Ukhiya extension areas, and Govt. HFs for Host Population in Ukhiya and Teknaf Upazila, Moheshkhali and Kutubdia of Cox’s Bazaar district.</p> <p>Summary of Activities:</p> <ol style="list-style-type: none"> 1. Provided Maternal Health (ANC, Safe delivery, PNC), Family Planning (FP) services, Clinical management of rape, Syndromic management of RTI/STI, VIA Screening, Referral of all complicated cases for EmONC services were done throughout the project period. One referral assistant deployed in Cox’s Bazar Sadar Hospital (CSH) who is responsible for taking care of the referred cases during admission till discharge from CSH. Family Planning activities were operated to strengthen the Long Acting and Permanent Methods (LAPM) services in coordination with the stakeholders. 2. Operation of Community Based Outreach Network (CBON) program for awareness rising in the community and referral to the Health Facilities was the essential part of the project activity. Community Health Workers (CHWs), Outreach Workers, Outreach Supervisors and Program Officer (CBON), are the part of CBON program. Moreover, Reinstatement of the TBAs in the camps was helpful to support the pregnant women to avail the clinic and referral facilities smoothly. Couple registration in each camp and daily updating the number of eligible couples were done by the Outreach Workers. 3. Sexual and reproductive health needs of adolescents were met by strengthening the existing 4 Adolescent Corners in Kutupalong RC, Camp 2W, Camp 4 & Nayapara RC. | |
| Beneficiaries | <p>Camp Area:</p> <p>Total beneficiaries: 90,881</p> <p>Gender distribution: Female: 52% and Male: 48%</p> | <p>Govt. HFs Area:</p> <p>Total beneficiaries: 6,20,220</p> <p>Gender distribution: Female: 49% and Male: 51%</p> |

| | |
|----------------------|--|
| Project status: | <input type="checkbox"/> On-going, <input type="checkbox"/> Progress % to date: <input checked="" type="checkbox"/> Completed |
| Project duration: | 1 Year (01 st January 2020 to 31 st December 2020) |
| Implementing agency: | <p>Research, Training & Management (RTM) International</p> <p>Head Office: RTM Complex, 581 Shewrapara, Begum Rokeya Sharani, Mirpur, Dhaka-1216, Bangladesh.</p> <p>Field Office: 4170, Jahangir Mohol, Khondokarpara, Courtbazar, Ukhiya, Cox's Bazar.</p> <p>Phone: +8802 9015726, 8034814,</p> <p>Email: rtm@rtm-international.org; Website: www.rtm-international.org</p> |

3. Key Activities: Under the SRHR Project, the bellow activities were performed in different Camps during the project period:

- Antenatal Care (ANC)
- Safe Delivery
- Postnatal Care (PNC)
- Neonatal/Newborn Care (NNC)
- Family Planning Services
 - a. Pill
 - b. Condom
 - c. Injectable
 - d. IUD
 - e. Implanon
 - f. Tubectomy and NSV only through the registered camps
- Syndromic management of RTI/STI
- Adolescent Reproductive Health Care and Sessions for Adolescent Mothers
- TT Vaccination for Pregnant Mother
- Referral of all complicated cases for EmONC
- Ambulance service and community level client transportation system
- Community Awareness Program by Outreach Network
- Basic Laboratory Test:
 - a. Pregnancy Test
 - b. Blood Grouping

- c. Hemoglobin Level (Hb%)
- d. VDRL
- e. Fasting Blood Glucose Level (FBS)
- f. Random Blood Glucose Level (RBS)
- g. Albumin
- h. Glucose/Sugar

N.B: RTMI_SRHR Project all services is free of cost.

STATUS OF IMPLEMENTATION:

This yearly project completion report has been prepared and compiled based on implementation of the planned and approved activities and actual progress of the reporting month covering the period of 1st January, 2020 to 31st December, 2020 under the project title of **“To Provide Comprehensive SRH Services to the Marginalized Population through RTMI (Ensuring Reproductive Health Services Delivery in Nayapara and Kutupalong Refugee areas).**

RTMI SRH project has been providing quality SRHR services through (**115 technical staff (02 Doctors, 89 Midwives, 07 FP Paramedics & 17 Lab technicians)**) out of total **281** project staffs, who are working in the different HFs in Teknaf, Ukhiya, Moheshkhali and Kutubdia Upazilas of Cox’s Bazar.

During the project period we have served total no of ANC **69,823**, total no of NVD **4,235**, total no of PNC **17,867** and total no of FP consultation **47,004** (LARC **1,663**) through 7 HFs of camp areas (5 PHCs & 2 HPs) and 7 Govt. HFs for Host Community. Among the total patients **13%** were <18 and **87%** ≥18. Highlighted of the activities undertaken in this period are as following:

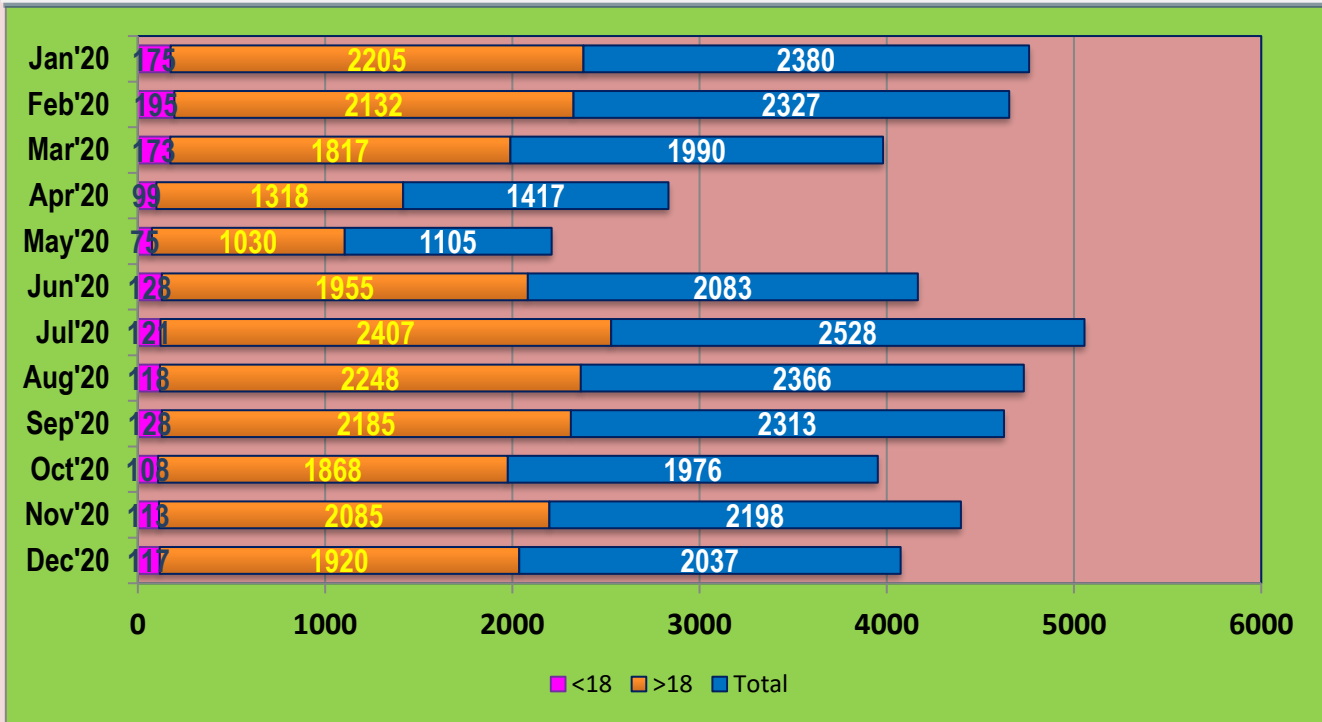
Target & Achievement of Activities-2020

| SL # | Indicator | Target | Achievement | % of Achievement | Remarks |
|------|---|---|---|------------------|---------|
| 1 | Percentage of refugee women (in registered camps) whose births were attended by SBAs. | 98.50% | 98.62% | 98.62% | |
| 2 | ANC services | 66,535 | 69,823 | 104.94% | |
| 3 | PNC services | 13,692 | 17,867 | 130.49% | |
| 4 | Number of FP services delivered by midwives. | 1,372 | 6,103 | 445.00% | |
| 5 | Number of meeting done by quality assurance team | 156 | 142 | 91.02% | |
| 6 | Number of women and girls who are referred to the facilities by CHWs | 80,335 | 64,112 | 79.81% | |
| 7 | Number of women and girls receiving FP services (≥ 18 and < 18 years) | ($\geq 18 = 1800$ and $< 18 = 44242$) | 47,004 out of which 46,770 ≥ 18 & 234 < 18 | 102.09% | |

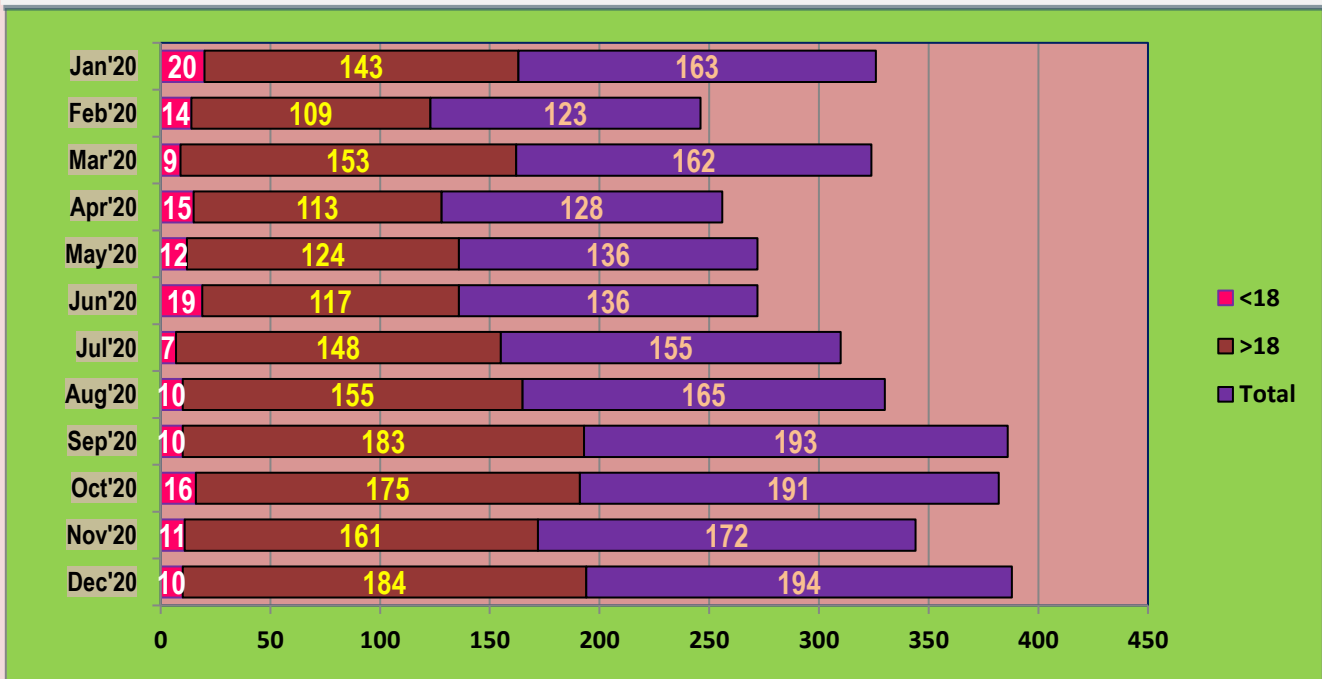
Performance (6 HFs of Camp Areas):

| Health Facility | HFs UID | SRH Services | | | | |
|--------------------|---------|--------------|-------|-------------------|-------|---------|
| | | ANC | PNC | Facility Delivery | Refer | RTI/STI |
| KTP RC | 339 | 6653 | 1632 | 635 | 169 | 583 |
| Camp-6 (FF Zone) | 055 | 3721 | 164 | 0 | 0 | 302 |
| Cam-1W (BB Zone) | 008 | 486 | 77 | 0 | 0 | 28 |
| Camp-4 (Extension) | 208 | 4267 | 705 | 236 | 109 | 291 |
| Camp-4 (OO Zone) | 043 | 3636 | 984 | 225 | 45 | 331 |
| NYP RC | 594 | 5957 | 2060 | 822 | 213 | 490 |
| Total Services | | 24,720 | 5,622 | 1,918 | 536 | 2,025 |

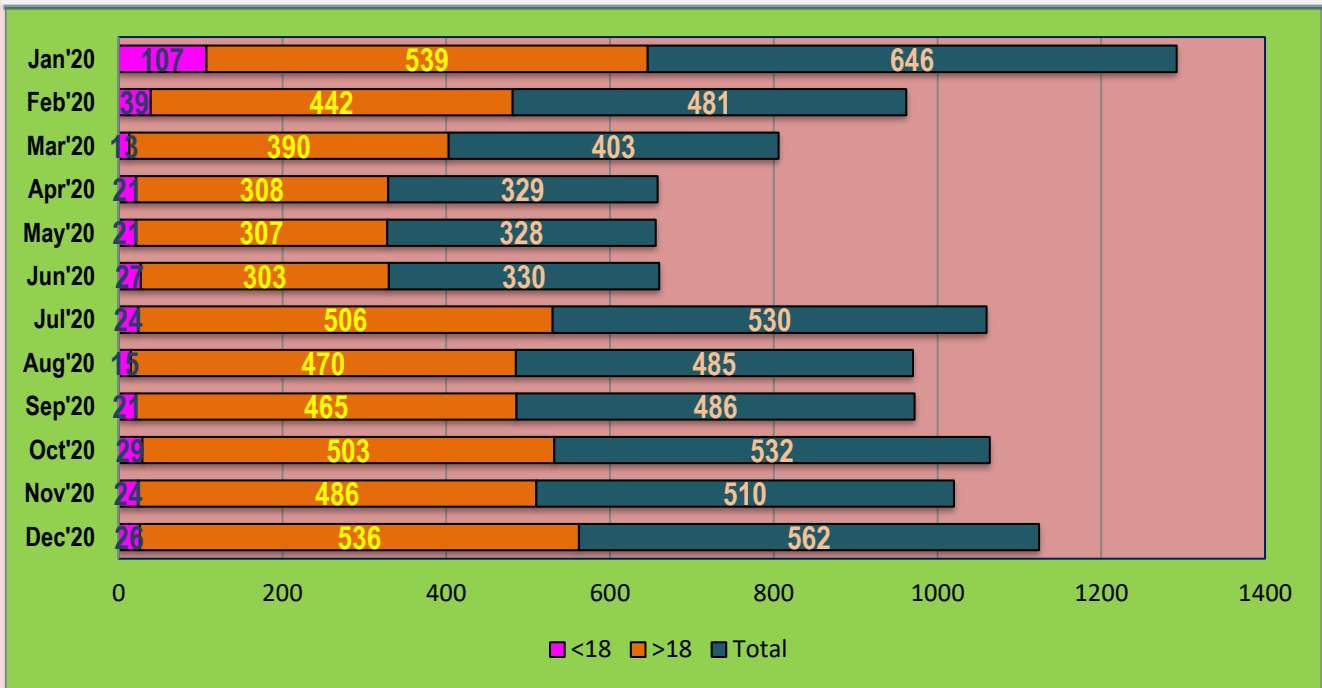
ANC Service in 6 HFs at Camp Area-2020



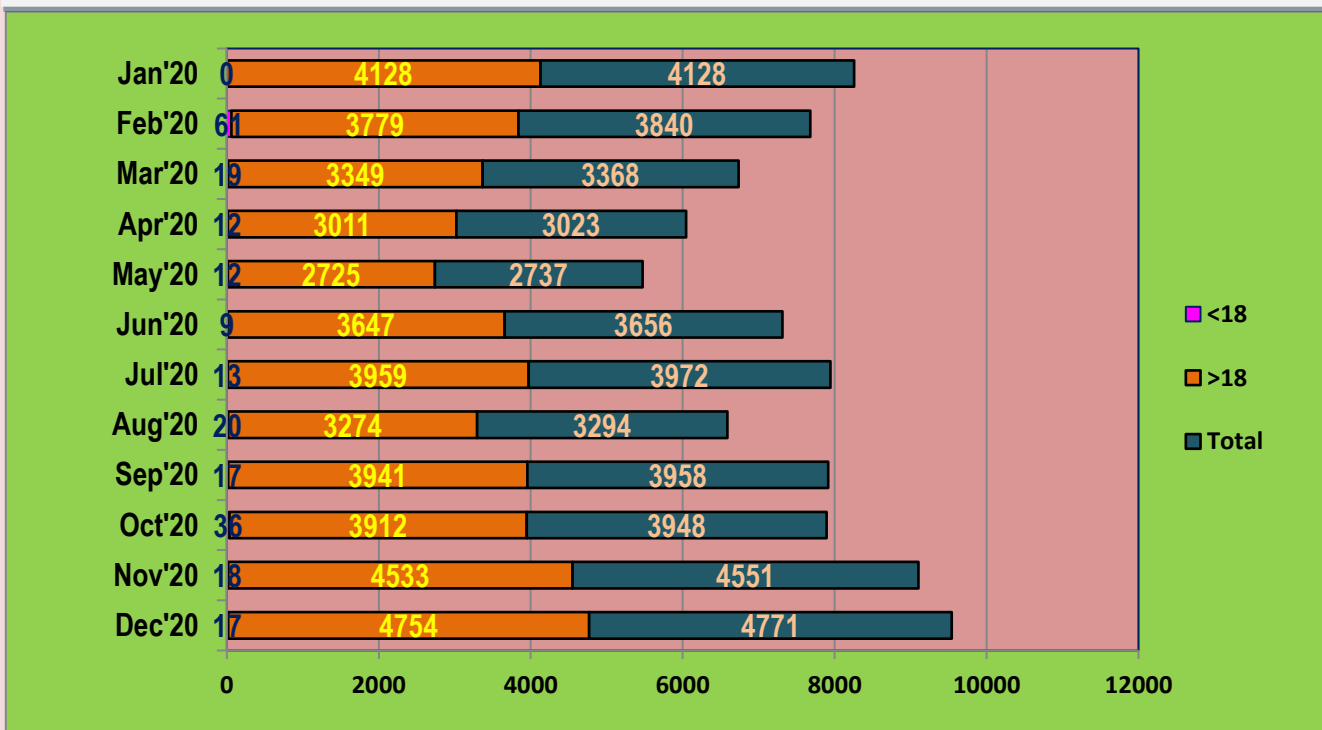
NVD Service in 6 HFs at Camp Area-2020



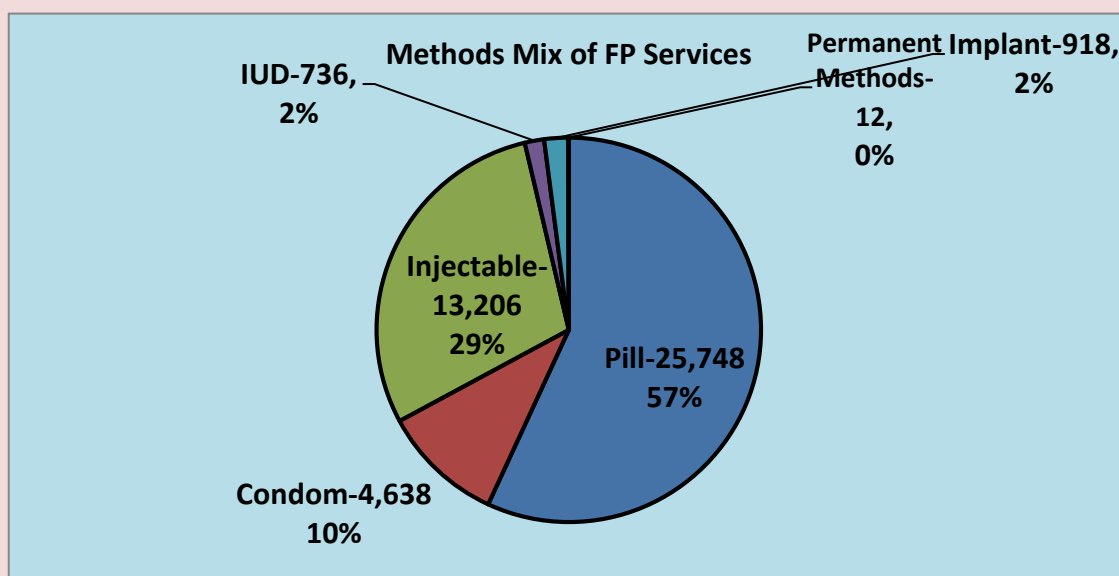
PNC Service in 6 HF's at Camp Area-2020



FP Services in 6 HF's at Camp Area-2020



| Health Facility | HFs UID | FP Services | | | | | | Total FP |
|--------------------------|---------|---------------|--------------|---------------|------------|------------|-------------------|---------------|
| | | Pill | Condom | Injectable | IUD | Implant | Permanent Methods | |
| KTP RC | 339 | 3345 | 868 | 3823 | 88 | 239 | 6 | 8369 |
| Camp-6 (FF Zone) | 55 | 5365 | 1062 | 1908 | 179 | 26 | 0 | 8540 |
| Cam-1W (BB Zone) | 8 | 493 | 62 | 196 | 0 | 0 | 0 | 751 |
| Camp-4 (Extension) | 208 | 3042 | 335 | 1570 | 94 | 126 | 0 | 5167 |
| Camp-4 (OO Zone) | 43 | 2551 | 540 | 1786 | 197 | 96 | 0 | 5170 |
| NYP RC | 594 | 10952 | 1771 | 3923 | 178 | 431 | 6 | 17261 |
| Total FP Services | | 25,748 | 4,638 | 13,206 | 736 | 918 | 12 | 45,258 |



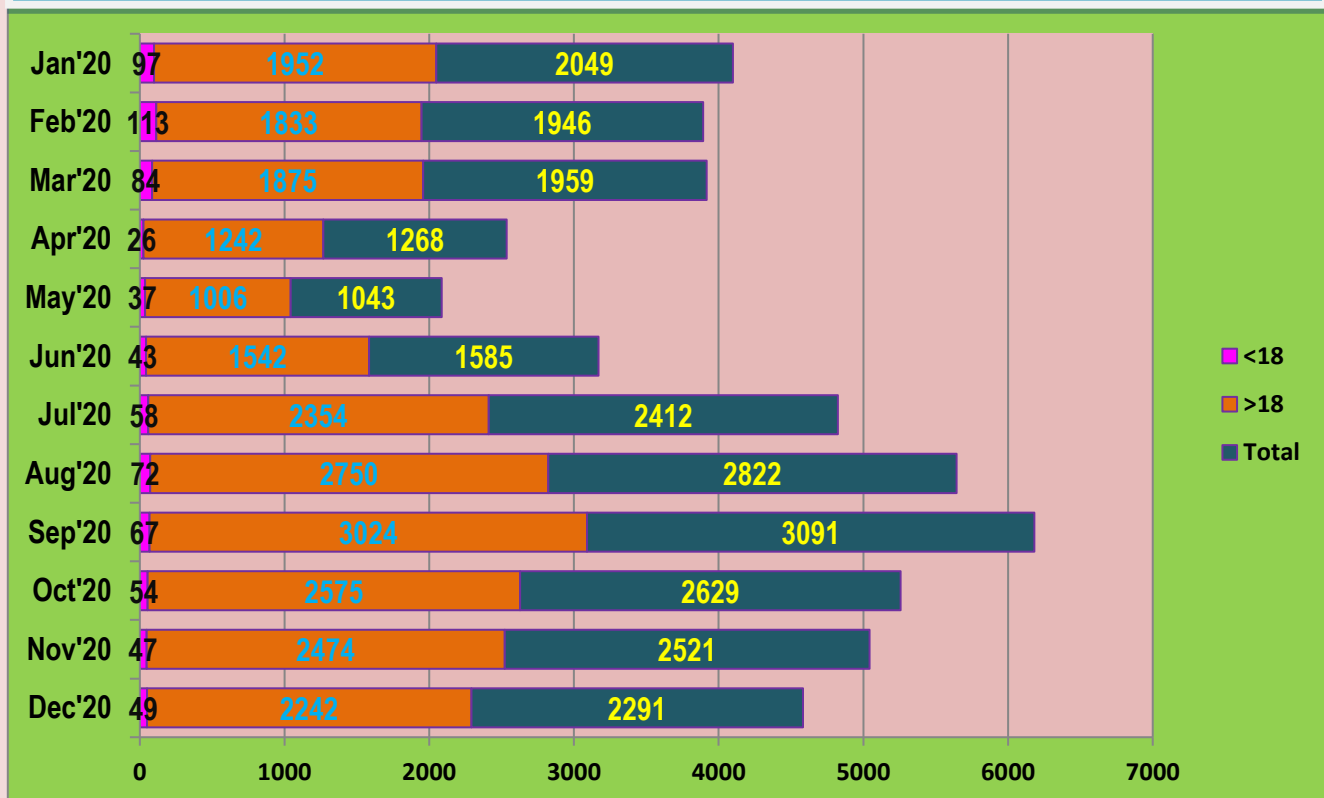
❖ RTM International has been receiving awards on family planning as best NGO in "Clinical services" & "Community based distribution" both categories for the last 3 years in a row (2018-2020) in Upazila and District level (Cox's Bazar). We have received award in Chattogram division level in year 2019 as well. For our continuous effort to improve family planning services especially long term methods, we are appreciated by the Govt. Family Planning Department.



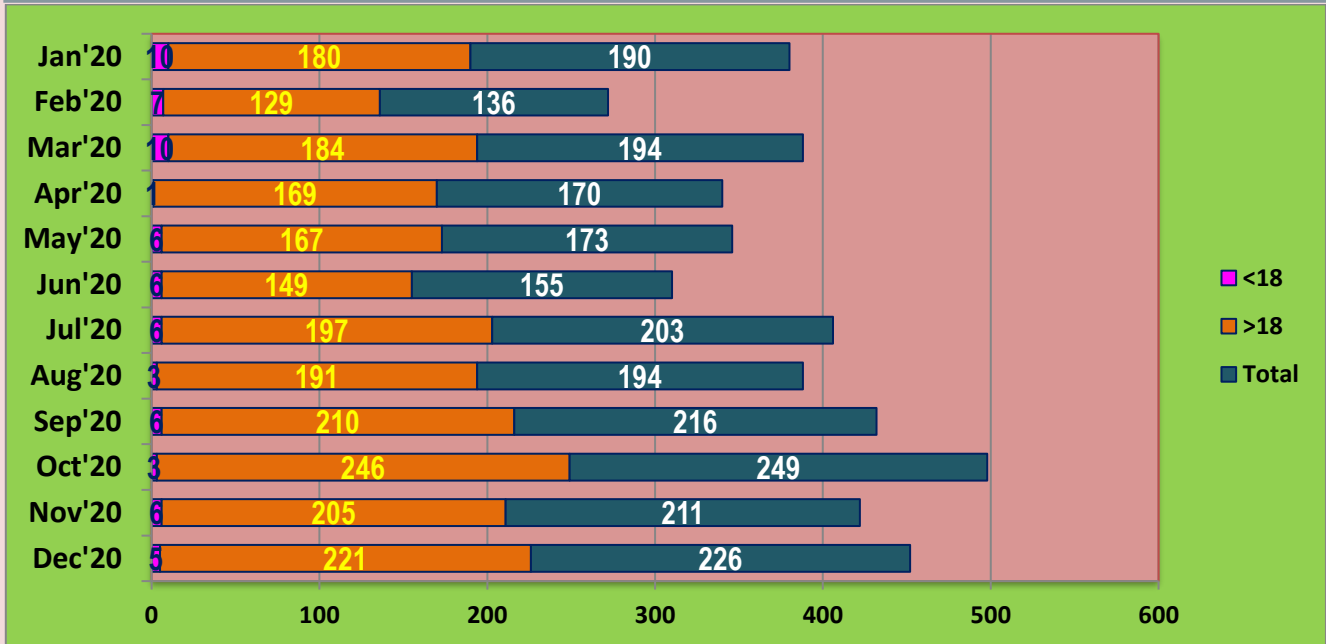
Performance (7 HFs in Host Areas including CSH):

| Health Facility | HFs UID | Services | | | | |
|-----------------------|---------|---------------|--------------|-------------------|------------|------------|
| | | ANC | PNC | Facility Delivery | Refer | RTI/STI |
| Balukhali Sub center | 427 | 3431 | 424 | 137 | 50 | 79 |
| Inani Sub center | 316 | 4845 | 863 | 363 | 38 | 2 |
| Ukhiya UHC | 311 | 4387 | 832 | 357 | 143 | 52 |
| Jaliapalong UH&FWC | 277 | 2044 | 803 | 231 | 28 | 40 |
| Teknaf UHC | 566 | 2903 | 649 | 286 | 23 | 0 |
| Sabrang UH&FWC | 569 | 2876 | 658 | 237 | 26 | 7 |
| Baharchora UH&FWC | 205 | 5130 | 1752 | 706 | 79 | 29 |
| CHS | | 6498 | 2155 | 2354 | 60 | 0 |
| Total Services | | 32,114 | 8,136 | 4,671 | 447 | 209 |

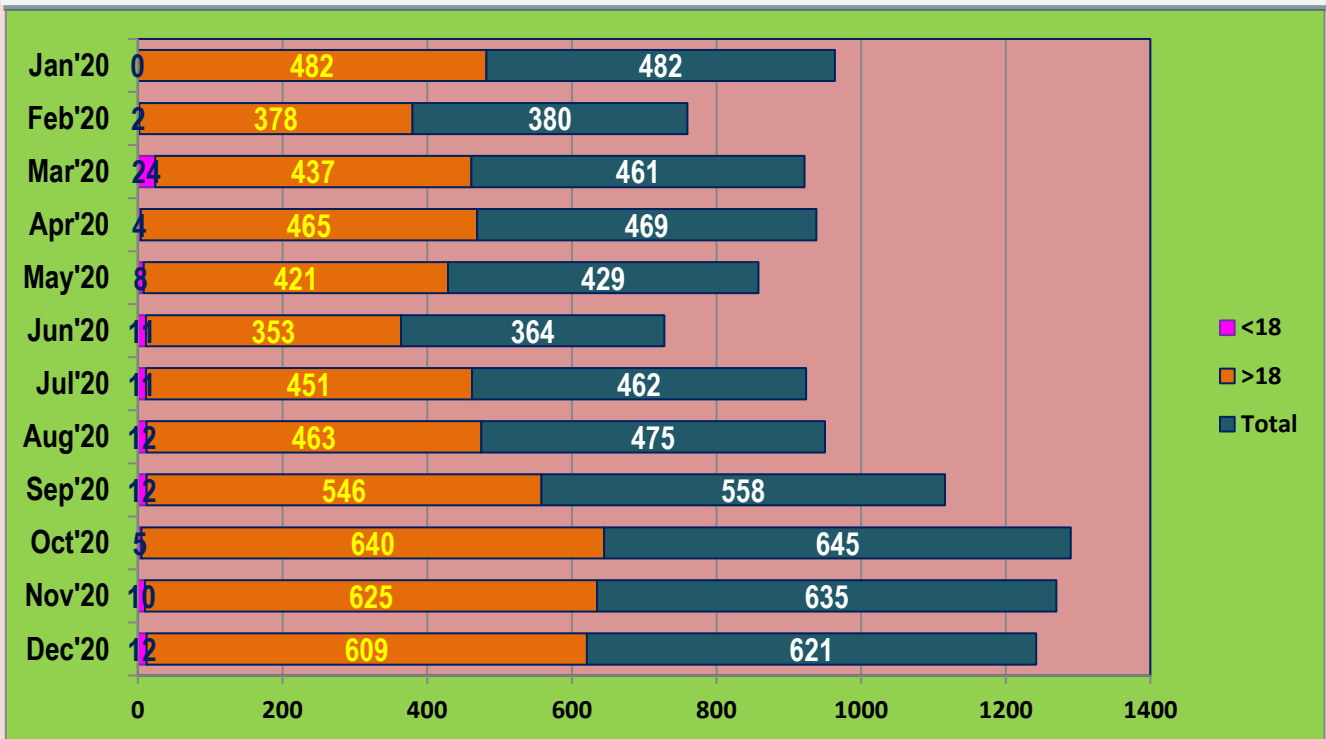
ANC Service in 7 Govt. HFs-2020



NVD Service in 7 Govt. HFs-2020

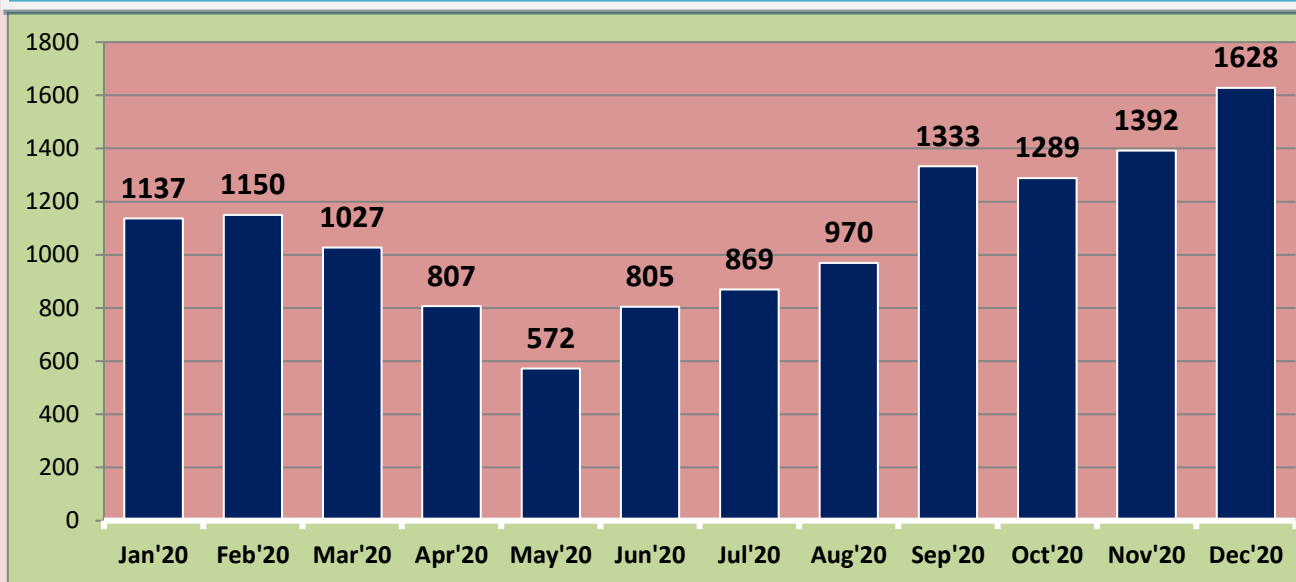


PNC Service in 7 Govt. HFs-2020

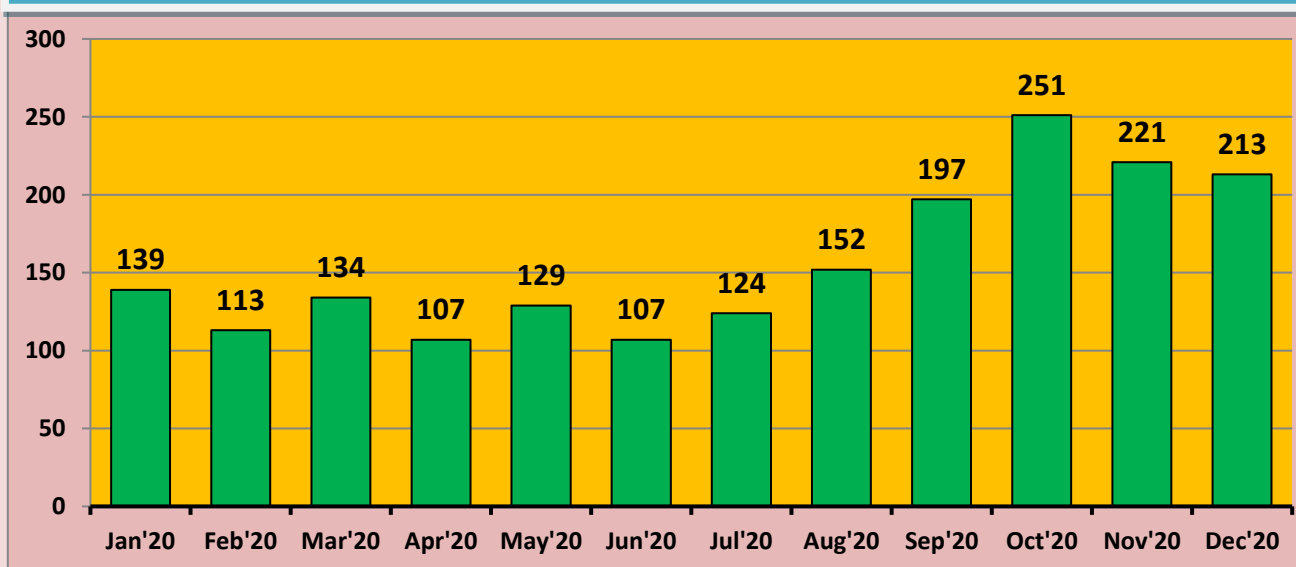


| Health Facility | SRH Services in Island Area | | | | | | | |
|-----------------------|-----------------------------|-------------|-------------------|-------------|------------|------------|-----------|-------------|
| | ANC | PNC | Facility Delivery | Pill | Condom | Injectable | IUD | Total FP |
| Moheskhal UHC | 7612 | 2344 | 1002 | 68 | 45 | 0 | 0 | 113 |
| Matarbari UH&FWC | 3047 | 815 | 475 | 1033 | 223 | 298 | 75 | 1629 |
| Kutubdia UHC | 2330 | 950 | 410 | 0 | 0 | 0 | 4 | 4 |
| Total Services | 12989 | 4109 | 1887 | 1101 | 268 | 298 | 79 | 1746 |

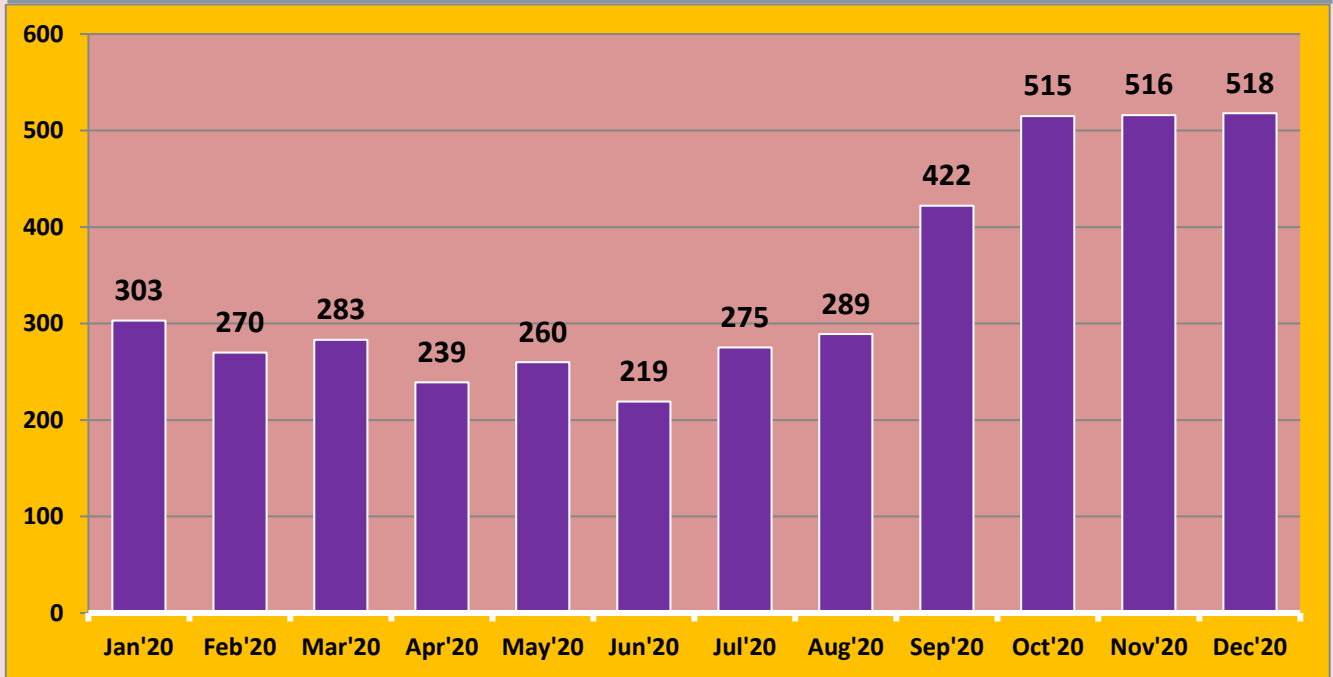
ANC Service in 3 HFs of Island Areas-2020



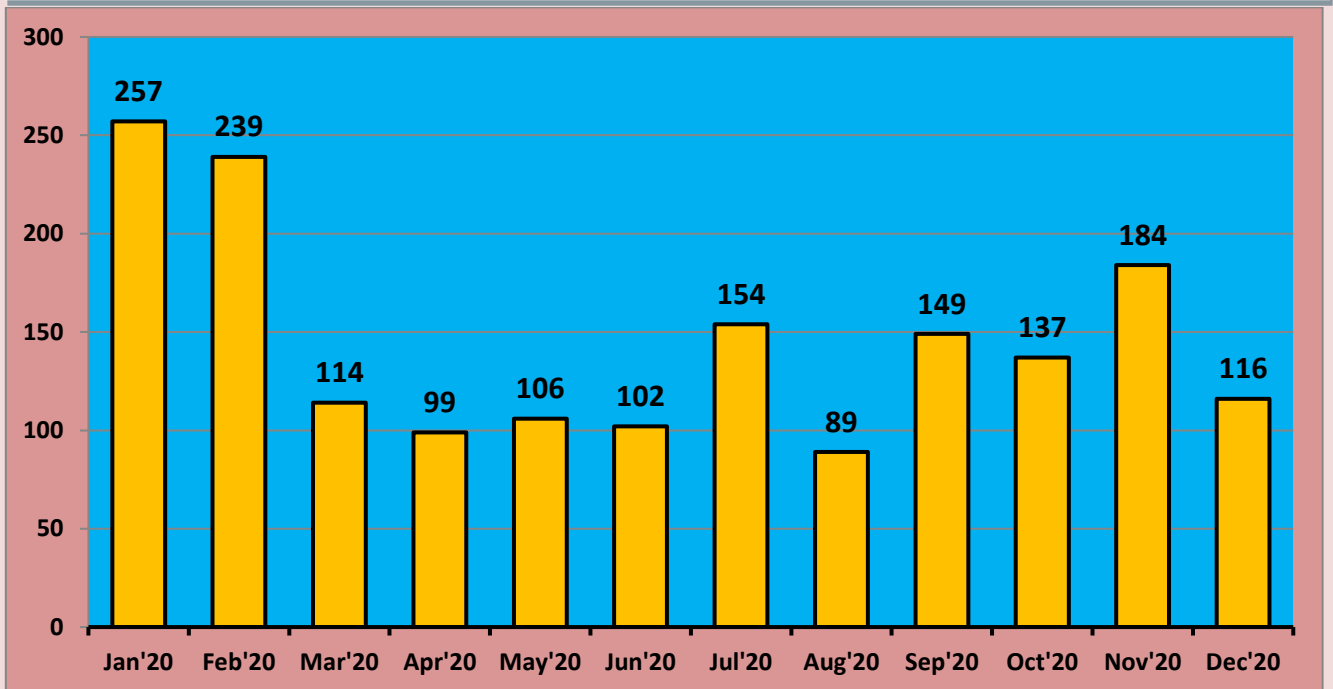
NVD Service in 3 HFs of Island Areas-2020



PNC Service in 3 HF of Island Areas-2020



FP Service in 3 HF of Island Areas-2020



Quality Assurance & Monitoring Activities:

Quality Assurance Team Activities:

Total 142 quality assurance team meetings were organized in 2020. Total 1853 participants were attended those meetings. The quality assurance team identified opportunities, gaps and challenges for improving the quality of services; shared update information to improve knowledge of the service providers and ensured supply of commodities and strengthening the coordination among the agencies.



Monitoring Activities:

RTMI-UNFPA field office and Dhaka office staff are visited the UNFPA supported health facilities regularly as per their work plan. And team members are monitoring the day-to-day activities, service quality, supply of commodities/logistics (including date of expiry), result-based performance as per indicators, record keeping, and reporting in timely manner.



Achievements:

- Comprehensive and multi organizational approach with improved communication & coordination is ensured to uphold the services provided by the facility.
- Improvement in the services quality (ANC, PNC, Delivery & FP) by knowledge assessment & practical demonstration of service providers.
- Improvement of the Infection Prevention & Control procedures by providing updated SOP & ensures orientation of all service providers by job training sessions.
- Improvement of the record keeping system, proper maintenance of the medicine stock registers & management of the nearest expired/expired medicines are ensured.
- Improvement of the handover & takeover system with patient & strictly monitoring primary stabilization of the emergency obstetric cases.
- Proper screening & triage system has been ensured to minimize the spread of COVID-19.
- Orientation of all cleaners on proper management of bio-anatomical and hazardous waste.
- Along with the quality aspect, the QA team also ensures establishment of hand washing station point, maternity red zone/isolation area, incinerator, water motor & pipeline system by liaising with Govt. authorities, UNFPA and other stakeholders.

Community Engagement Activities:



In 2020, total **1038** Courtyard sessions were conducted and **9313** participants were present. Among them, **2503** were male and **6810** were female. Total **64,112** women and girls were referred to the UNFPA supported health facilities by CHWs/CHVs. In addition to assigned SRHR works, outreach team has done contact tracing (COVID-19), support to EPI/Vaccination campaign and assigned activities of Community Health Working Group.

Good Practices:

- Continuous follow up of clients by doing household visits and identify potential clients with SRHR needs, high risk mothers, family planning clients etc.
- Having good follow up mechanism and updated lists of pregnant women, expected date of delivery (EDD), high risk pregnant mothers; we have ensured highest level of facility based delivery and reduced the maternal & neonatal deaths.
- Regular training for the outreach team with latest information enabled them to stay updated.
- Prioritizing community needs improved the health seeking behavior and service uptake.

CASE STUDY:

Fatema Begum, working as a community health worker at Camp 2W. As her routine activity, she went to her designated block for household visits and discover one pregnant mother. After some conversation, she learnt that the mother has previously delivered one child at the home and she didn't want to avail healthcare services at the health facility. Fatema tried to explain the mother about the importance & benefits of antenatal checkups and facility delivery, but still the mother is not convinced to avail the services.

Fatema came back to facility & informed her supervisor about the mother and the Outreach supervisor then visited that house along with the block leader/Majhi. They all together convinced the mother and she came for the antenatal checkup. Later she completed all 4 ANC checkups and does deliver her baby at the facility. She is currently using Implanon as a contraceptive method and really pleased about the care & services of CHWs and service providers.



Young Mother Support Group Program Activities:

In 2020, total **132** sessions were conducted with adolescent mothers & family members under Young Mother Support Group Program and **1848** participants were present. Due to COVID-19, from April 2020 to late August 2020, as per guidance of RRRC office, RTMI has received instructions from UNFPA to avoid gathering and hold the YMSGP sessions.

During this period, we have taken initiative of household visits of listed adolescent pregnant mothers (plus new adolescent pregnant mothers) & providing prior information on COVID-19 in addition with SRHR related information by the health educators of adolescent program. We have visited **952** households & follow up adolescent mothers to ensure SRHR service uptake.



Training and Workshop:

RTM International with the support from UNFPA, organized training for the staffs of all level to keep them updated with the latest information and guidelines. Due to COVID-19 pandemic, we take necessary precautions and health safety measures while arranging the trainings. In 2020, following trainings were organized.

| Training Title | Facilitated by | Duration | # Participants |
|---|-------------------------------------|-----------------------|--|
| Implications of Maternal Health SOPs in the context of COVID-19 for Facility/Project Managers | Health Sector and SRH Working Group | 1 & 2 July 2020 | 42 (Facility/Project Managers) |
| Implications of Maternal Health SOPs in the context of COVID-19 for Clinicians | Health Sector and SRH Working Group | 15, 16 & 19 July 2020 | 111 (Health Care Providers) |
| Training on home based care (Ensuring active surveillance system for identification of suspected cases) | RTMI | 16-23 July 2020 | 92 (CHWs) |

| | | | |
|--|--------------|----------------------------------|------------------------------------|
| Training on raising awareness about hand washing identifying symptoms of COVID-19 in communities | RTMI | 12 & 13 August 2020 | 20 (CHVs) |
| Capacity building and training on Infection Prevention and Control (IPC) | RTMI | 09-23 September 2020 (5 Batches) | 100 (Health Care Providers) |
| Training on raising awareness about hand washing identifying symptoms of COVID-19 in communities | RTMI | 17 & 19 September 2020 | 20 (CHVs) |
| Capacity building and training on Life Saving Protocol | RTMI | 27-28 September 2020 | 51 (Midwives) |
| Capacity building and training on EmONC | RTMI | 29-30 September 2020 | 46 (Midwives) |
| Consultative Workshop on EmONC Service Provision and Referrals | UNFPA & RTMI | 30 December 2020 | 25 |
| Consultative Workshop on SRHR Service Provision and Reproductive Health Commodities Supplies | UNFPA & RTMI | 31 December 2020 | 25 |

Challenges:

- ❖ Short term project period (3 months).
- ❖ Fund disbursement system takes long period of time which affects smooth implementation of the program.
- ❖ COVID-19 global pandemic outbreak created panic among all and due to Govt. lockdown & local authorities restriction in movement, affected the smooth implementation of the program.
- ❖ Lack of supplies of personal protective equipment (PPE) and general precautionary items such as surgical masks, gloves, gown, infrared thermometer, protective goggles, hand sanitizer and hexisol etc. at the initial months of COVID-19 which created challenges to provide services.
- ❖ Decrease of service utilization during lockdown period due to Covid-19 pandemic situation
- ❖ No fund for medicines and laboratory supplies in Q3 & Q4 period which created several challenges to provide quality services.
- ❖ Weakness in Referral Pathway; Lack of strong referral mechanism & coordination.
- ❖ Unrest situation between registered refugees & FDMNs and concern related to shifting to Vashan Char.
- ❖ Unavailability of mobile network & poor internet connection created problems to attend/conduct virtual meetings.

- ❖ Decrease in field monitoring hampered the evaluation of activities during the lockdown & movement restrictions during initial months of COVID-19 pandemic.
- ❖ Space Limitation in facilities for setting up maternity red zone
- ❖ Service providers & support staffs found COVID-19 positive causes panic among the others.
- ❖ Lack of CHWs/Referral Assistants in Camp 4 Ext.

Lesson Learned:

- In 2020, the biggest challenge that we faced is the COVID-19 pandemic. Despite the challenge, we continued the health care services and community level awareness maintaining the social distances and safety precautions.
- With limited supplies, we have managed the health facilities through the support of UNFPA, Health Sector and other partners.
- We have monitored the activities in both physically and virtually (via telephone, online meeting).
- COVID-19 pandemic created panic among the frontline health care workers and 14 were COVID positive. We have motivated the staffs and ensured safety items & measures for all.
- We have improved the community level awareness on COVID-19, in addition to our regular SRHR activities.
- Though UNFPA discontinued the financial support for Medicine & Laboratory item procurement from Quarter 3 2020, we have somehow managed the health facilities through the support of Health Sector and other partners.

Way Forward:

- ✦ Project period should be 6 months (instead of 3 months) for properly addressing all the activities. Fund disbursement system should be efficient for the smooth implementation of the programs.
- ✦ To continue SRHR services, we will need UNFPA's quick response on procurement of medicines & laboratory items and availability at the health facilities.
- ✦ To ensure quality of services, we need better referral mechanism and coordination system.
- ✦ RTMI-UNFPA is one of the leading projects to provide quality SRHR services with trained professionals. Till now, we have health facilities of BEmONC level services. We are keen to start CEmONC level health facilities with the support of UNFPA.
- ✦ RTMI-UNFPA has always emphasized on the quality of services. We will continue our effective monitoring and supportive supervision mechanism to ensure the quality of services.

Visit Information:

In 2020, honorable foreign delegates from different donor countries & agencies have visited our health facilities in camp areas & host communities. Honorable Country Representative of UNFPA Bangladesh Dr. Asa Torkelsson visited us in February. Newly appointed honorable RRRC Mr. Shah Rezwan Hayat also visited our health facilities inside the camp.



Dr. Asa Torkelsson, Country Representative of UNFPA Bangladesh visiting Kutupalong RC health facility.



High officials from Canada visiting Jaliapalong UH&FWC.



Mr. Shah Rezwan Hayat, Refugee Relief & Repatriation Commissioner visiting Camp 4 extension health facility.



High officials from World Bank visiting Baharchora UH&FWC.

Year 2020 at a glance:



Establishment of hand washing station



Screening at the health facility



Providing Antenatal care



Providing Postnatal care



Proper cleaning with disinfectant



Weekly on-the-job orientation with updated information



Monthly key staff meeting to review performance



Establishment of Maternity Red Zone



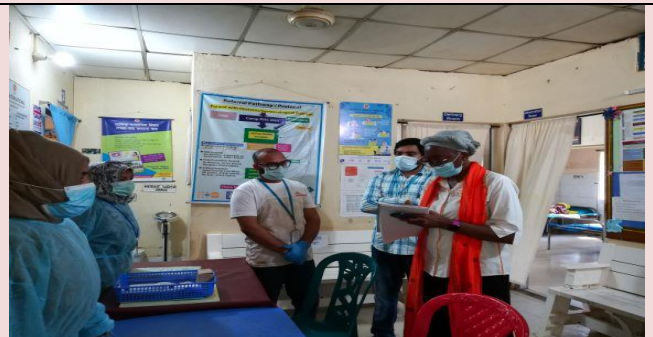
Honorable RRRC Mr. Md. Mahbub Alam Talukder inaugurating IPC training



Dr. Stenly Hely Sajow, Team Lead-UNFPA CxB attending a training session



Ms. Carin Zetterlund, Deputy Head of Development, Embassy of Sweden visiting health facility



Ms. Rosalidah Raphael, Head of Sub Office, UNFPA-CxB visiting health facility



Mr. Syed Jaglul Pasha, Honorable Executive Director, RTM International with RTMI-UNFPA Team



Receiving awards on "World Population Day 2020"



Training organized by RTMI-UNFPA



SRHR Workshop organized by RTMI-UNFPA