ACRONYMS

EBM: Economic Branch Model
MFI: Microfinance Institution
PDC: Pavement Dweller Center
SDG: Sustainable Development Goal
SF: SAJIDA Foundation
SHEC: Sexual Harassment Elimination Committee
WASH: Water, Sanitation and Hygiene
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>About SAJIDA Foundation</td>
<td>1</td>
</tr>
<tr>
<td>Foreword</td>
<td>2</td>
</tr>
<tr>
<td>Highlights 2015-19</td>
<td>3</td>
</tr>
<tr>
<td>Health</td>
<td>3</td>
</tr>
<tr>
<td>Special Needs Services</td>
<td>3</td>
</tr>
<tr>
<td>Poverty Eradication</td>
<td>4</td>
</tr>
<tr>
<td>Water, Sanitation, and Hygiene (WASH)</td>
<td>4</td>
</tr>
<tr>
<td>Emergency Response for Disasters</td>
<td>5</td>
</tr>
<tr>
<td>Gender equality</td>
<td>5</td>
</tr>
<tr>
<td>Agriculture</td>
<td>5</td>
</tr>
<tr>
<td>Microfinance</td>
<td>5</td>
</tr>
<tr>
<td>Climate Change</td>
<td>6</td>
</tr>
<tr>
<td>Organizational Highlights</td>
<td>6</td>
</tr>
<tr>
<td>The World We Live In</td>
<td>7</td>
</tr>
<tr>
<td>Who We Will Work With</td>
<td>7</td>
</tr>
<tr>
<td>Target Groups</td>
<td>7</td>
</tr>
<tr>
<td>How We Will Contribute to Change</td>
<td>7</td>
</tr>
<tr>
<td>Strategic Goals 2020 - 2025</td>
<td>9</td>
</tr>
<tr>
<td>Programmatic Goals</td>
<td>9</td>
</tr>
<tr>
<td>Goal 1: Healthcare for All</td>
<td>9</td>
</tr>
<tr>
<td>Goal 2: Expansion of Special Needs Services</td>
<td>11</td>
</tr>
<tr>
<td>Goal 3: Access to Financial Services</td>
<td>13</td>
</tr>
<tr>
<td>Goal 4: Poverty eradication</td>
<td>15</td>
</tr>
<tr>
<td>Goal 5: Water, Sanitation and Hygiene for All</td>
<td>16</td>
</tr>
<tr>
<td>Goal 6: Advancing Gender Equality</td>
<td>17</td>
</tr>
<tr>
<td>Goal 7: Disaster Management</td>
<td>18</td>
</tr>
<tr>
<td>Goal 8: Climate Change Adaptation</td>
<td>19</td>
</tr>
<tr>
<td>Organizational Goals</td>
<td>20</td>
</tr>
<tr>
<td>Goal 1 – People</td>
<td>20</td>
</tr>
<tr>
<td>Goal 2 – Process</td>
<td>20</td>
</tr>
<tr>
<td>Goal 3 – Services</td>
<td>21</td>
</tr>
<tr>
<td>Goal 4 – Branding</td>
<td>21</td>
</tr>
<tr>
<td>Goal 5 – Green Organization</td>
<td>21</td>
</tr>
<tr>
<td>Goal 6 – Sajida Foundation Challenge Fund</td>
<td>21</td>
</tr>
<tr>
<td>Goal 7 – Technology</td>
<td>22</td>
</tr>
<tr>
<td>Goal 8 – Restructure</td>
<td>22</td>
</tr>
<tr>
<td>Goal 9 – International Pursuits</td>
<td>23</td>
</tr>
<tr>
<td>Goal 10 – Finance</td>
<td>23</td>
</tr>
</tbody>
</table>
SAJIDA Foundation (henceforth addressed as SF) is a non-profit organization dedicated to its raison d’etre of bringing health, happiness, and dignity for all. SF’s efforts to bring about meaningful and sustainable change are defined by its values of innovation, quality, dignity, inclusiveness, compassion, empathy, empowerment of mothers and families, transparency and accountability.

Since its humble beginnings in 1987 as a small garage school for disadvantaged children, SF has grown from strength to strength, learning with each step. Today, it offers a diverse portfolio of microcredit products alongside quality healthcare services and various social development programmes for 6.1 million people, across 22 out of 64 districts, with a dedicated team of 3,613 changemakers.

With 51% shareholding of Renata Pharmaceuticals Ltd. (Formerly Pfizer Bangladesh), SF emerged as an extraordinary gesture of corporate philanthropy and stands today as a unique example of social enterprise and corporate social responsibility. SF carries forward its Founder Syed Humayun Kabir’s legacy of reaching out to those in need, not as an act of charity, but as part of its responsibility.

MISSION
To improve the quality of life in the communities where we work through sustainable and effective interventions.

VISION
Health, Happiness and Dignity for all.

VALUES

INNOVATION & QUALITY
We bring innovation and quality to everything we do.

EMPOWERING MOTHERS & FAMILIES
We recognize the central role of mothers in uplifting their families.

INCLUSIVENESS & DIGNITY
We believe all lives are equal.

COMPASSION & EMPATHY
We show compassion and empathy in our approach.

TRANSPARENCY & ACCOUNTABILITY
We are transparent and accountable in our work.
There have been some new and exciting changes for SAJIDA Foundation in the last few years. A focus on innovation and optimization of interventions, and developmental support have been key over the last few years in ensuring SAJIDA’s vision of health, happiness, and dignity for all. The SAJIDA family has undergone some changes in programme structure such as the expansion of the Microfinance Programme, expansion of coverage for hospitals and inception of the Improving the Lives of Urban Extreme Poor (ILUEP) programme. We have taken new projects under (Water, Sanitation and Hygiene) WASH and initiated new development programmes such as PROSHOMON and Working with Women Phase II. In the last few years we have also incorporated the increasing need for digitization of the Microfinance Programme and we have entered into agreements with Rocket, a mobile banking company, so that clients are able to repay their loans by themselves with the aim of financial inclusion and promoting cashless transactions.

We have upgraded our social enterprises as we launched the Psychological Health and Wellness Clinic (PHWC) and introduced Applied Behaviour Analysis — Verbal Behaviour (ABA-VB) therapy service at Inner Circle. We have also expanded our Disaster Response programmes to have greater leverage in national and international level dialogues in the management of disasters in the country. We have launched a Sexual Harassment Elimination Committee (SHEC) as a part of SAJIDA’s Safeguarding Policy, to work with zero tolerance towards sexual harassment. We have introduced conventions for all programmes so that the staff can be motivated to dedicate their work for humanity.

The changes that were implemented are a reflection of SAJIDA’s commitment towards our cause and our goals. We could not be prouder of the massive strides SAJIDA has taken and could not be happier for the support and goodwill of all standing as our pillars of strength in the last twenty-six years. We commence a new year with an ever-developing organization, and I welcome you to join us in our mission to improve the quality of life in the communities where we work through sustainable and effective interventions.

Zahida Fizza Kabir
Executive Director
SAJIDA Foundation
HIGHLIGHTS 2015-19

HEALTH

HOSPITALS
We operate two multidisciplinary secondary care hospitals, in Keraniganj and Narayanganj, for sustainable health service delivery for low- and middle-income groups, providing a full spectrum of in-patient, out-patient and emergency services, surgery, diagnostics, lab and pathology, and other specialist care.

➢ Research study on both hospitals to determine the state of current experiences of users, hospital usage of microfinance borrowers, brand perception of SAJIDA Hospital and services offered by competitors. The findings will be used to improve hospital services for patients and microfinance borrowers.
➢ Addition of phacoemulsification in Keraniganj hospital.
➢ Addition of laparoscopic hysterectomy in Narayanganj hospital.
➢ Significant improvement of emergency services.

MALARIA ELIMINATION
Our programme in Sunamgonj district to reduce morbidity and mortality from malaria using a combination of both preventive and curative measures.
➢ Strategy meet with different NGOs in November 2018 to understand how to eliminate malaria.

PSYCHOLOGICAL HEALTH AND WELLNESS CLINIC (PHWC)
A center for psychological health and wellness needs, PHWC provides premium care ranging from psychiatric assessment and psychological counselling/therapy to lifestyle modification through group wellness activities.
➢ Formal launch of services on 17 February 2018.

PROSHOMON
Through a smart card-based health voucher scheme, we provide a free package of health, nutrition and family planning services to the extreme poor in Feni and Chandpur municipalities.
➢ Launch of programme in February 2018.
➢ Inauguration of smart health card on September 2018.

SPECIAL NEEDS SERVICES

ELDER CARE
Through Elder Care we address the needs of the elderly and chronically ill in the comfort of their homes. The programme is complete with doctor visits and physiotherapy at home. Our professional caregiving team includes nurses, paramedics, counsellors, physiotherapists and physicians.
➢ App launched for Android with initial features like emergency calling services for both clients and caregivers, patient and caregiver profiles, progress tracking.

INNER CIRCLE
Inner Circle provides high end, personalized interventions for children with special needs, particularly Autism Spectrum Disorder (ASD). In Bangladesh, it is a pioneer in behaviour (ABA-VB) therapy services.
➢ Formal launch of services in October 2017.
➢ School readiness program launched in August 2018 to help children with special needs integrate into mainstream schools through orientations on classroom routines and strengthening existing academic skills.
➢ Month long training on ABA-VB therapy for 9 trainee therapists in July 2018, conducted by Autism Recovery Network, Singapore.
➢ Relocated to a 6000 square feet facility to meet demand.
POVERTY ERADICATION

SAMRIDDHI
An integrated development programme in Batazore Union under Jamalpur district to raise local community members out of poverty, it has a unique and inclusive approach to integrating an entire community, focusing mainly on health, education, and youth development activities, along with income generation, to sustainably strengthen capacity.

AMRAO MANUSH
Amrao Manush is an integrated programme that provides essential services to the extremely deprived and vulnerable urban poor living on pavements or in slums/squatters, in Dhaka and Chittagong. We operate seven Pavement Dweller Centers in these two cities under the programme.
➢ Launched ILUEP for a period of five years in February 2017.
➢ Pavement Dweller Center and public toilet inaugurated at Maniknagar.
➢ In partnership with DWASA, Water ATM card for ILUEP-Amrao Manush beneficiaries.
➢ Inaugurated community day care centre in Chittagong.

WATER, SANITATION, AND HYGIENE (WASH)

WASH4URBANPOOR
This programme ensures improved environmental health and resilience of WASH for deprived urban poor living in slums and low-income settlements.
➢ Launch of programme on 31 May 2018.

WASH FOR RMG WORKERS
The programme seeks to increase access to WASH facilities for 12,000 garment workers living in Ashulia, Savar, for improved health status for themselves and their families.
We are providing and sanitation facilities, and also hygiene awareness sessions for the community.
➢ Signed MoU with garment factories in November 2018 to build rainwater harvesting systems in Narayanganj, in collaboration with WaterAid.

PUBLIC TOILET
Partnered with WaterAid Bangladesh, SAJIDA works with Dhaka South City Corporation (DSCC) in overseeing 13 model Public Toilets.

WATERCREDIT
We enable underserved communities to access safe drinking water and improved sanitation facilities through provision of special loans implemented with the support of Water.org.
EMERGENCY RESPONSE FOR DISASTERS

Our disaster response agenda seeks to provide immediate relief and rehabilitation support to victims of both natural and man-made disasters, as well as to help them tackle the long-term effects of such events including psychological issues and traumas.

- SAJIDA Foundation became a member of UKAID’s Shifting the Power Programme focusing on disaster and emergency preparedness initiatives and development of a humanitarian strategy with technical guidance from MDF Bangladesh.

ROHINGYA RESPONSE

- In 2017, we provided emergency health services to the uprooted Rohingya, particularly pregnant women and children by setting up a makeshift health camp in Ukhia.
- Built a play zone for children equipment with recreational equipment and activities to help them cope with the trauma.

FLOOD VICTIMS

- During the devastating flood of April 2017, we took immediate measures to extend relief packages to 500 families in severely affected areas.
- Rebuilt homes and ensured safe water and sanitation for 52 selected families in the most severely affected region of Dinajpur.

GENDER EQUALITY

WORKING WITH WOMEN: PHASE II

Through this programme, we address issues of gender-based violence against female workers in the RMG sector and ensure their mental health and wellbeing, through awareness building, training and paracounseling.

- MoU signed with SNV on 14 December 2017.

AGRICULTURE

AGRICULTURE AND LIVESTOCK

The programme focuses on developing farming and livestock rearing conventions to boost agricultural productivity which ultimately generates employment and ensures food security. This is achieved using a combination of providing loans through the microfinance programme, awarding grants, giving various technical trainings and development of market chains.

- In partnership with Bangladesh Bank, signed a 3-year participation agreement to implement “Small and Marginal Size Farmers Agricultural Productivity Improvement and Diversification Financing Project” (SMAP) financed by JICA.

MICROFINANCE

We offer a diverse range of loan and savings products, customized to meet the needs of a population that cannot readily access formal financial services. The collateral-free microcredit, microenterprise and savings products are integrated with special benefits and other development programmes.

- Adoption of inclusive development plans to focus on elevation of the ultra poor from poverty, achieved in a holistic manner in partnership with our Nirapotta and Community Wellness programmes.
- OPTIX programme partnered with Mobile Financial Service organizations, bKash and Rocket to increase access to financial services for our members.

- Pilot of Customer Loyalty Programme (CLP) to provide special benefits for members with a good savings history and retain such clients.
- Introduction of Loan Review Unit (LRU), a new support unit for identifying credit risks, overall loan assessment and ensuring quality of portfolio.

Pilot of mobile banking and digitizing microfinance for low income groups in Bangladesh was successfully executed. The model was technically, but not financially, viable. In the span of 8 months, approximately 1400 members have transacted digitally around USD 100,000 per month.
**Climate Change**

SAJIDA Foundation seeks to build adaptability and resilience to climate change in communities that are most vulnerable. We also intend to build a culture of green practices among the population we work with to reduce the propagation of climate change.

<table>
<thead>
<tr>
<th>Community Climate Change Programme (2014 – 2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ Launched Community Climate Change project on 30 August 2014 in association with PKSF and World Bank, to build adaptive capacity and resilience of inhabitants to effects of climate change in Chinadulli and Noarpara unions under Jamalpur district.</td>
</tr>
</tbody>
</table>

**Organizational Highlights**

<table>
<thead>
<tr>
<th>Formation of Sexual Harassment Elimination Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>With the objective to create a gender-friendly environment within the organization that promotes mutual respect irrespective of gender, sex, ethnicity and race, a Sexual Harassment Elimination Committee (SHEC) was launched at SAJIDA in October 2017. Consisting of both internal and external members, this committee works with a zero-tolerance policy towards sexual harassment and creates awareness about SAJIDA’s gender policy, taking appropriate actions to address any policy violations.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Young Professionals Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>On 1 March 2018, we commenced our Young Professional Programme (YPP) with the first batch of ten YPs. The YPP is an intensive programme involving extensive field attachment and in-depth training in SAJIDA’s core interventions. This is part of our commitment to investing in human resource and creating future leaders for both national development and organizational sustainability.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Roll Out of Leadership &amp; Management Training for All Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>On 3 December 2017, an MoU was signed between SAJIDA Foundation and Enroute Centre for Development to provide training on management and leadership to SAJIDA staff. By April 2018, a total of 585 staff completed the first level of the training. The second level of training started in May 2018.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Formation of Monitoring Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>We set up a Monitoring Department on 15 February 2017 tasked primarily with providing activity reports of our various interventions, to determine whether they display early indications of success or failure in the achievement of programme plans.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Formation of Communications and Fundraising Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>We rebooted the support unit to work on strengthening internal and external communications of the organization, organizational branding and on establishing the organizational mission to all stakeholders.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Formation of Research Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aimed to further enhance the quality of its programmes and assist new initiatives with more accurate information and analysis.</td>
</tr>
</tbody>
</table>
THE WORLD WE LIVE IN

Bangladesh is constantly going through changes. The country has made significant improvements in both social and economic fields - poverty reduction, per capita income and gender parity in education and health. Bangladesh’s development trajectory is considered as a unique success story globally.

However, SF’s pillars are health, happiness & dignity for all, and from those perspectives there is still much to be achieved. Rising wealth inequality, influx of a displaced population, widening gender gaps and gender-based violence, and finally, poor access to proper healthcare, are all pertinent issues.

WHO WE WILL WORK WITH

TARGET GROUPS

Based on the socio-economic challenges mentioned above and the services they require, our programmes and services can be categorized in the following groups to address ‘all’.

SUBSIDIZED SERVICES FOR THE POOR AND ULTRA-POOR

SF will continue to stay true to its roots and offer subsidized or even free services to underserved communities. Its Amrao Manush project for pavement dwellers is a prime example of these type of services.

AFFORDABLE SERVICES FOR THE MIDDLE AND LOWER-MIDDLE INCOME GROUP

SF will offer affordable services to the bulk of the population - the middle-income and lower-middle-income groups. Its hospitals are a great example as it continues to offer quality healthcare at an affordable price.

INTERNATIONAL-LEVEL SERVICES FOR WHO CAN AFFORD

SF will also offer services to the high-income group where there is a need for international-level quality services. Income from these services can then be channelled to offer auxiliary services to underprivileged communities. SF’s Inner Circle for special needs children in collaboration with the Singapore based Autism Recovery Network is an example of these type of services.

DEFINITIONS

SF has segregated its target population into four distinct groups based on their monthly household income. We have determined our own demarcation for these groups.

<table>
<thead>
<tr>
<th>Group</th>
<th>Income per individual per day</th>
<th>Household size</th>
<th>Monthly Household Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor/Very Poor</td>
<td>1.25 USD</td>
<td>4.06</td>
<td>~153 USD</td>
</tr>
<tr>
<td>Low-Income</td>
<td>1.90 USD</td>
<td>4.06</td>
<td>~232 USD</td>
</tr>
</tbody>
</table>

Note: Calculations based on the poverty limits of $1.25/day and of $1.90/day and average household size of 4.06.

<table>
<thead>
<tr>
<th>Group</th>
<th>Monthly Household Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor/Very Poor</td>
<td>&lt; 13,000 BDT</td>
</tr>
<tr>
<td>Low-Income</td>
<td>13,000 – 20,000 BDT</td>
</tr>
<tr>
<td>Lower Middle-Income</td>
<td>20,000 – 48,000 BDT</td>
</tr>
<tr>
<td>Middle to High-Income</td>
<td>&gt; 48,000 BDT</td>
</tr>
</tbody>
</table>

Note: 1 USD = 84.7932 BDT retrieved from xe.com as at 27/11/2019

HOW WE WILL CONTRIBUTE TO CHANGE

In the next five years, we will serve at least 1.5 million of the population, covering the most vulnerable – children, women and men. Aligned with the global goals for sustainable development, we will ensure they gain greater access to and have

---

2 Household Income and Expenditure Survey (HIES), 2016, Bangladesh Bureau of Statistics (BBS)
more control over their livelihood, safety, resources, decisions and actions. We will also continue to maximise opportunities and expand services for the needs of the millions we already reached in Bangladesh.

SF will contribute to the change through –

… Increased partnerships with the national and local government, as well as the international audience

… Innovative development programmes

… Sustainable & scalable social enterprises

… A renewed focus on research & technology

… Wider coverage of Financial services
In the last 25 years, SAJIDA Foundation has worked in many different fields, from microfinance to agriculture, from education to healthcare. For the next 5-year span, it has outlined a set of strategic programmatic goals aligned with the SDGs and organizational goals.

**PROGRAMMATIC GOALS**

**GOAL I: HEALTHCARE FOR ALL**

**SDG 3 – ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES**

As of 2017, maternal mortality ratio in Bangladesh is 172 per 100,000 livebirths. Neonatal mortality rate is 17 per 1,000 livebirths while under-5 mortality rate is 31 per 1,000 livebirths. The prevalence of communicable diseases like malaria is still high at 1.64 positive cases per 1,000 population in endemic areas.\(^3\) Meanwhile, the recent epidemics of Chikungunya and Dengue pose new threats.

Alarmingly, non-communicable diseases account for 67 percent of all deaths in the country. In terms of mental health, 16.1 percent of adults and 18.4 percent of children and adolescents suffer from some form of mental disorder.\(^3\) For every 100,000 females, 8.7 commit suicide and for every 100,000 males, 6.8 die by suicide.\(^4\)

There is a great shortage of both human resources for health in Bangladesh. Estimates say there are 6.33 registered physicians per 10,000 population and 3.39 certified nurses and midwives per 10,000 population.\(^3\) The situation is exacerbated by the concentration of health workers in urban secondary and tertiary hospitals, although 70 percent of the population lives in rural areas.

Healthcare facilities are also in short supply. There are 3.24 beds in public hospitals per 10,000 population and 5.57 beds in registered private hospitals per 10,000 of the population.\(^3\) Even though for-profit private sector facilities are growing rapidly, their high cost of treatment bars access for the majority. The immense pressure on the system means many will be deprived of healthcare. Moreover, it hampers quality of the services delivered.

In line with its vision of Health, Happiness and Dignity for all, SAJIDA Foundation aims to address these gaps by bringing more equitability and accessibility in its healthcare services and be a proponent of an inclusive healthcare system. To do this, health services cut across our direct interventions as well as our work with strategic partners.

**DIRECT INTERVENTIONS**

SAJIDA Foundation operates two secondary-care hospitals, one in Keraniganj and the other in Narayanganj, as part of its development programmes. The hospital in Keraniganj also has a Neonatal Intensive Care Unit (NICU), for tertiary care. SAJIDA Foundation has a long-standing philosophy of empowering mothers. This is embodied in both our hospitals, which have a strong focus on providing Maternal and Child Health through renowned specialists and consultants, and the appropriate infrastructure.

Psychosocial support is a cross cutting component across SAJIDA Foundation’s various programmes supporting those who otherwise have very limited or no access to mental health services, including pavement dwellers through Amrao Manush and young women through ADHUNIKA. This is done via a team of qualified counselors, supported by para-counselors. SAJIDA’s own staff can also avail these counseling services. As part of outreach, these services are extended to primary and secondary schools, organizations and corporations, where we carry out trainings and workshops to raise awareness and provide psychosocial support.

Responding to the dearth of health human resources, SAJIDA Foundation established the Institute of Health Sciences (IHS) to develop paramedics and basic caregivers through learning courses, using a combination of training and post training evaluation for maximum effectiveness.

**PARTNERSHIPS**

PROSHOMON is a smart card-based health voucher scheme, through which we provide a free package of healthcare, including primary, accidental and maternal health services. Partnered with local health institutions - hospitals, diagnostic centers and pharmacies - it is aimed at 66,000 individuals living in extreme poverty in Feni and Chandpur municipalities.

---

\(^3\) Health Bulletin, 2018, DGHS

\(^4\) Preventing Suicide: A global imperative, 2014, WHO
The Malaria Elimination programme in Sunamgonj and Netrokona districts is working to reduce the vulnerability, in terms of morbidity and mortality, of the local population to malaria. A combination of preventive measures, like awareness building, use of Long Lasting Insecticide Treated Nets (LLIN), and curative measures, like prompt diagnosis and treatment.

SF is a major investor in the Psychological Health and Wellness Clinic (PHWC), a private mental health clinic that provides world class, personalized mental health services, including psychiatric assessment and treatment, individual and group psychological counseling, and wellness-based group activities. As part of its outreach activities, PHWC conducts staff welfare programmes and wellness day workshops in corporates and universities.

Based on these areas of strength, the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020 - June 2025 are:

➢ Contribute to achieving universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all, through expansion of our health voucher system and establishment of community clinics. (SDG Target 3.8)
➢ Contribute to reducing the maternal mortality ratio. (SDG Target 3.1)
➢ Contribute to reducing neonatal and under-5 mortality. (SDG Target 3.2)
➢ Contribute to reducing the prevalence of malaria through localized interventions. (SDG Target 3.3)
➢ Increase mental health awareness and access to mental health services in all strata of the society, with a focus on middle- and lower-income groups, to promote mental health and well-being. In doing so, contribute to reducing premature mortality rates due to suicide. (SDG Target 3.4)
➢ Contribute to increasing the recruitment, development, training and retention of the health workforce, and improve the distribution of health workers. (SDG Target 3.3)

To achieve the aforementioned objectives, the approaches we will adopt are as follows:

➢ Improve quality and speed of services with the use of modern technologies such as telehealth and health informatics.

For direct interventions -
➢ Through a smartphone app, pilot eHealth services across interventions.
➢ Continue providing services through our two hospitals.
➢ Start programs in communities and deploy mobile clinics to reach remote areas around 10 microfinance branches in both urban and rural regions to serve 250,000 individuals by providing healthcare and promoting wellbeing through caregivers.
➢ Set up 10 community clinics in urban regions targeting at least 150,000 individuals.

For partnerships -
➢ Extend communicable disease control through awareness, prevention, diagnosis and treatment to Dhaka, Chittagong, Sydheth and Mymensingh.
➢ Introduce insurance-based healthcare financing targeting at least 50,000 individuals.
➢ Capacity building for rural hospitals and clinics in 10 upazilas.
➢ Pilot capacity building in 10 private clinics in urban regions.
➢ Provide psychosocial support to at least 88,000 of Amrao Manush beneficiaries, 250,000 beneficiaries of community-based wellness program and 18,500 RMG workers: develop the necessary paracounselors to deliver such service.
➢ Through PHWC, provide private mental health services to at least 20,000 individuals and 50,000 staff of corporations across all 11 major cities in Bangladesh by 2025 and invest heavily in developing mental health professionals.
GOAL 2: EXPANSION OF SPECIAL NEEDS SERVICES

SDG 3 - ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES
SDG 10 - REDUCE INEQUALITY WITHIN AND AMONG COUNTRIES

FOR NEURODIVERGENT CHILDREN

A UNICEF report published in 2014 estimates that between 1.4 and 17.5 percent of children in Bangladesh have special needs or disabilities - as many as 10 million. The variance in the estimate is high because of a lack of availability and reliability of data. According to the ‘Nationwide Survey on Young Children with Autism Spectrum Disorder in Bangladesh 2017’ conducted by IPNA, 17 per 10,000 children are affected by Autism Spectrum Disorder (ASD), nationwide. Research has shown early interventions built on evidence-based practices are most effective. However, access to such interventions is limited due to poor infrastructure, affordability and quality. Due to inaccessibility, families from villages and towns shift to metro cities for treatment which increases their financial and emotional burden. In Dhaka, the behavioural treatment services cost over BDT $3,200 per year, an amount that is not affordable by the majority.

There are about 62 centres in the country catering to special needs children, but most of them lack skilled clinicians, the treatment quality is not optimum and treatment plans lack customization. Usually treatments last for years, with slow progress. The lack of synergy in interventions by schools, parents and clinicians, compounds these issues further.

SAJIDA Foundation’s Inner Circle is a socially responsible business providing world-class interventions for children with special needs, particularly children with Autism Spectrum Disorders (ASD). Partnered with Autism Recovery Network, Singapore, it is a pioneer in personalized behaviour (ABA-VB) therapy, in Bangladesh.

Based on these areas of strength, the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020 – June 2025 are:

➢ Increase access to evidence based therapeutic and rehabilitative services for neurodivergent children from middle- and lower-income families.
➢ Contribute to promoting social, economic and political inclusion of all, irrespective of disability or economic status. (SDG Target 10.2)

To achieve the aforementioned objectives, the approaches we will adopt are:

➢ Expand to and open centers in 5 major cities across Bangladesh.
➢ Expand scope of service to children over 12 years. Pilot a live-in facility for this group.
➢ Set up training center and provide certification to develop therapists in-house and train external stakeholders, like teachers and parents.
➢ Outreach programmes for middle- and lower-income families.

FOR THE ELDERLY, DISABLED & CHRONICALLY ILL

In 2017, the average life expectancy was 71.5 years in Bangladesh, while it was 67.7 years in 2010. Those over 60 years of age account for about 5 percent (7.3 Million) of the total population, which will reach 7 percent (14.6 Million) by year 2025. As the elderly population is increasing substantially, there is a growing need to address their medical and sociological problems. With its expertise, SAJIDA will cater those needs with a diverse range of services.

Elder Care provides in-home care to the elderly, disabled and chronically ill through trained caregivers. The service is segregated into three tiers based on the level of care required and the expertise needed to deliver that level of care. The caregiving is comprehensive, complete with physiotherapy, home visits by doctors and necessary supplies.

Based on these areas of strength, the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020 – June 2025 are:

➢ Expand operations and services to address the growing need of home care in all strata of the society, promoting social inclusion of all irrespective of age, disability or economic status. (SDG Target 10.2)
➢ Develop human resources for the home care industry, contributing to the development and training of the health workforce. (SDG Target 3.C)

To achieve the aforementioned objectives, the approaches we will adopt are:

---

6 Situation Analysis on Children with Disabilities in Bangladesh, 2014, UNICEF.
➢ Increase the number of service recipients to 600.
➢ Recruit a total of 1500 caregivers across all levels of skill to meet the increased demand.
➢ Train, groom and equip caregivers based on their levels of skill required, to achieve excellency in service provision.
➢ Introduce Intensive Care Unit (ICU) services at home.
➢ Rebrand as a home care service rather than an elderly care service.
**GOAL 3: ACCESS TO FINANCIAL SERVICES**

**SDG 8 - PROMOTE SUSTAINED, INCLUSIVE AND SUSTAINABLE ECONOMIC GROWTH, FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL**

We bring innovation and quality to everything we do, as a result we have been able to reduce our interest rates on loan products to a level which makes our rates among the lowest in the market. Our long-term goal is to operate within single digit spread to adhere our commitment to affordable and responsible financing policy. We plan to achieve this through -

- Improving productivity by harnessing digital technology
- Reducing operating expenses by streamlining support functions through automation
- Reducing our dependency on brick and mortar branches for programme expansion
- Adopting best practices from around the world

SAJIDA Foundation had two divisions, Suchona for the poor (loans below $1,000) and Biborton for market based micro enterprises (loans between $1,000 - $10,000). The foundation has recently setup a new division (Sonail) to support ‘small business segment (loans between $10,000 - $100,000)’. We believe small businesses will play a pivotal role in Bangladesh for generating youth employment as we are transitioning into a lower middle-income country. These businesses are the ‘new missing middle’ i.e. too big for MFIs and too small for Banks. This division will play a major role in the growth of our programmes for the next five years. We have recruited a team for this division who have both microfinance and banking experience.

SAJIDA continuously encourage its members to save for future investment and cushion against economic shock. We have also developed number of deposit products matching lifecycle needs of our clients. Microfinance department will extensively promote these products in next few years.

Keeping to SAJIDA’s strong commitment to quality of services, we have completed a two year long training programme for all our field-based managers. This programme was conducted by a company who specializes in capacity development. We will continue spending 5%-7% of our operating expenses on capacity development and explore best practices around the world. SAJIDA has also recruited a number of senior management staff in the last few years from leading MFIs in Bangladesh. We have recently formed a Microfinance - Business Development Unit (BDU). In the last two years SAJIDA recruited young professionals (YPS) from reputable universities of Bangladesh and these YPs went through a yearlong extensive classroom and field-based training before joining the BDU team. This team will play a major role in testing innovative products, processes and technology for the microfinance programme, working closely with our senior management staff.

Our programmes are transparent and accountable to our clients and other stakeholders. The Foundation has setup independent microfinance monitoring department to complement the internal audit department. We have also recruited experienced staff for the compliance department. These three departments will jointly develop operational plan to make our organization internationally compliant.

We will expand our call center to address client’s grievance and building awareness about our client protection policy.

We show compassion and empathy in our approach to microfinance. SAJIDA Foundation is strongly committed to preserving quality of its loan portfolio, but we also understand that the clients sometime go through financial distress. We will continue to work on setting up more structured loan refinancing and loan forgiveness programme. Our distress clients will be able to take advantage of these programmes once their problems are verified by the monitoring department. We have identified health issues as one of the major reasons for finical distress of our clients. SAJIDA microfinance and SAJIDA hospital plan to develop health products catering to our clients.

We believe in inclusiveness and dignity for all. SAJIDA will expand subsidized financing programme for people in extreme poverty. Microfinance programme will commit portion of its earning for financial literacy and business financing to this particular segment and will deliver this service through SAJIDA’s various development programme.

Based on these areas of strength, the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020 – June 2025 are:

- Improve access to financial services for marginalized and underserved segments, supporting productive activities, entrepreneurship and encourage the formalization and growth of micro-, small- and medium-sized enterprises. *(SDG Target 8.3)*
- Establish NBFI to expand access to banking and financial services for all. *(SDG Target 8.10)*

To achieve the aforementioned objectives, the approaches we will adopt are:
➢ Automate and streamline support functions and reduce dependency on physical branches through digital technology including:
  o Shift to paperless record keeping for administrative and supervision of staff through field force management platform.
  o Web based loan management for end-to-end management of core banking operations.
  o Cheque based cashless ecosystem for both disbursements and collections.
  o Develop a digital model for transactional record keeping system for clients and obtain approval for implementation from Microfinance Regulatory Authority (MRA).

➢ Adopt best practices to achieve operational excellence:
  o Economical Branch Model – Enable staff to carry out both business and support functions, hence reducing the total number of staff required to operate a branch.

➢ Grow current operations:
  o Increase number of total members onboarded to 714,000.
  o Increase number of borrowers to 614,000.
  o Increase portfolio size to USD 470 million.
  o Expand operations to four more districts (Faridpur, Rajbari, Joshor, Tangail) bringing the total to 25 districts.
  o Increase total number of physical branches to 340.

➢ Innovate products and process:
  o Partnerships with aggregators and/or fintech companies to enhance current products.
  o Agritech – Provide information on agricultural products lifecycle and predictive analytics on weather.
  o Customer Loyalty Programme – Cashbacks, interest free loans for long term clients and consistent savers.
  o Provide services through customer service points in areas with small enterprise concentrations.

➢ Adhere to international compliance:
  o Form a dedicated unit for Social Performance Tracking.
  o Achieve Smart Campaign Client Protection Certification.

➢ Ensure at least 2.5 percent of the borrowers are from below the extreme poverty line through Buniad which provides loans of up to USD 700.
GOAL 4: POVERTY ERADICATION
SDG 1 - END POVERTY IN ALL ITS FORMS EVERYWHERE

In Bangladesh, 24.3 percent of the population live in poverty. Although extreme poverty has significantly reduced from 17.6 percent in 2010 to 12.9 percent in 2016, the rate of reduction is falling. Urban areas witnessed no progress in reducing extreme poverty: the proportion was 7.7 percent of the urban population in 2010 and 7.6 percent in 2016. Moreover, Bangladesh continued to urbanize during this time, hence in absolute terms the number of people living in extreme poverty in urban centres actually grew from 3 million to 3.3 million during this time period.  

SAJIDA Foundation works to improve the living standard of people living below the poverty line, defined as those with an income below $1.90 per day. We will focus our interventions in both urban and rural regions where SAJIDA Foundation already has a strong presence. We intend to expand to the disaster-prone coastal belt in the south and in “haor” areas. We will target the most vulnerable people including: the aged, the adolescents, the physically/mentally challenged and those who have inadequate access to social protection schemes.  

SAJIDA Foundation applies a holistic approach to eradicate poverty with integrated components of healthcare, microfinance and WASH.  

Amrao Manush, supported by Concern Worldwide, Irish Aid and a private donor organization, provides essential services to the urban extreme poor to improve their livelihood. People who live on pavements or in dilapidated slums/squatter settlements, get a fighting chance for rehabilitation and capacity building that enables them to integrate with the economy.  

SAMRIDDHI is an integrated development programme in Batazzore Union under Jamalpur District aimed to raise the local community members out of poverty. Implemented in partnership with Palli Karma-Sahayak Foundation (PKSF), the programme has a unique and inclusive approach of integrating an entire community, focusing on health, education, and youth development activities, along with income generation, to sustainably strengthen capacity.  

Alongside our comprehensive programmes, SAJIDA has several cross-cutting components that alleviate poverty.

Our microfinance programme has loan products for those living in extreme poverty, like “Buniad” which provides up to USD 700 in credit and “Apon”, a water credit loan, to improve access to safe drinking water and sanitation facilities for those in need. The Agriculture & Livestock Unit creates employment and ensures food security of poor farmers by training them, giving them microcredit and linking them with market chains.

Based on these areas of strength, the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020–June 2025 are:

➢ Contribute to reducing the proportion of individuals living in poverty in all its dimensions according to national definitions. (SDG Target 1.2)
➢ Contribute to the eradication of extreme poverty for all people everywhere, currently measured as people living on less than $1.25 per day. (SDG Target 1.1)
➢ Contribute to ensuring equal rights to economic resources and improving access to basic services, natural resources, technology, financial services, including microfinance, for the poor and the vulnerable. (SDG Target 1.4)
➢ Contribute to achieving full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value. (SDG Target 8.5)

To achieve the aforementioned objectives, the approaches we will adopt are:

➢ In Dhaka South City Corporation (DSCC), extend services to 87,000 individuals living in poverty through the Maniknagar and the Sadarghat Pavement Dweller Centers (PDC), and three satellite centers.
➢ In Dhaka North City Corporation (DNCC), extend services to 40,000 individuals living below the poverty line through two satellite centers.
➢ In Chittagong, extend services to 20,000 individuals living below the poverty line, by setting up two more PDCs along with the two existing ones.
➢ Extend services to 100,000 individuals living in poverty in rural areas.
➢ Provide certified skill development trainings in partnership with the National Skills Development Council (NSDC).
➢ Advocate for policies of identity registration (national identity card, birth certificate) and right to housing.
➢ Form partnerships with the government to bolster the effectiveness of both urban and rural interventions.

---

8 Household Income and Expenditure Survey (HIES) 2016, Bangladesh Bureau of Statistics (BBS)
9 Bangladesh Development Update, 2018, World Bank
GOAL 5: WATER, SANITATION AND HYGIENE FOR ALL

SDG 6 – ENSURE AVAILABILITY AND SUSTAINABLE MANAGEMENT OF WATER AND SANITATION FOR ALL

Among the total population of 160 million in Bangladesh, 4 million still lack access to safe drinking water. Regardless of source location, 41 percent of all improved water are contaminated with E. Coli bacteria and 13 percent with arsenic. Rural areas are worse off in comparison to urban regions.

85 million out of 160 lack improved sanitation facilities. The impoverished living in slums in the top 5 cities have 5 times less access to such improved sanitation compared to regular households. Only 28 percent of the entire population have handwashing stations with both soap and water. 3 out of 4 healthcare facilities do not have separate toilets for women. Only 50 percent of primary schools have separate toilets for their female students, and 1 in 4 skip school when menstruating.

SAJIDA Foundation has been working to deliver integrated WASH (Water, Sanitation and Hygiene) services through several innovative projects in partnership with donors and the Government of Bangladesh. We support the installation of safe drinking water and sanitation facilities, provide and promote usage of mobile toilets, and create awareness. These initiatives are targeting school children, Ready Made Garments (RMG) workers, and the urban poor living on pavements and in slums. Moreover, our WaterCredit programme provides special loans for underserved communities enabling them to take ownership of the development and management of their WASH facilities.

Based on these areas of strength, the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020 – June 2025 are:

➢ Contribute to achieving universal and equitable access to safe and affordable drinking water for all. (SDG Target 6.1)
➢ Contribute to achieving access to adequate and equitable sanitation and hygiene for all, ending open defecation, paying special attention to the needs of women and girls and those in vulnerable situations. (SDG Target 6.2)
➢ Through WASH loans and community engagement, support and strengthen the participation of local communities in improving water and sanitation management. (SDG Target 6.B)

To achieve the aforementioned objectives, the approaches we will adopt are:

➢ Provide WaterCredit loans along with hygiene awareness to 70,000 individuals in both urban and rural regions.
➢ Equip 75,000 slum and pavement dwellers with WASH facilities in urban centers.
➢ Equip 100,000 households of RMG workers with WASH facilities and hygiene awareness.
➢ Set up rainwater harvesting in 20 communities and institutions in both urban and rural regions.
➢ Build hygiene awareness and set up WASH facilities for 20,000 students in 25 schools in urban regions.
➢ Reach usage of 9,600,000 times through public toilets.

---

10 Bangladesh’s water and sanitation crisis. Water.org
GOAL 6: ADVANCING GENDER EQUALITY

SDG 5 – ACHIEVE GENDER EQUALITY AND EMPOWER ALL WOMEN AND GIRLS

In Bangladesh, only 36.3 percent of women are part of the labour force, whereas 80.5 percent of men are employed.\(^{12}\) Female participation is also concentrated in lower-level jobs and wages are about half of that of their male counterparts.\(^{13}\) Literacy rate for women is 56.87 percent which is lower than that of men at 61.28 percent. Although there is gender parity in primary and secondary education enrolment, drop-out rates are higher for girls, specifically in rural regions.\(^{12}\)

Violence against women is a major national issue significantly impacting the health, wellbeing and rights of women. 51.8 percent women in urban areas and 48.5 percent in rural areas have experienced physical violence from their partners.\(^{12}\) A recent study found that majority of ready-made garment workers suffered verbal, mental, physical and sexual harassment from employers and colleagues. To make matters worse, enforcement of laws preventing violence against women is still a major challenge.

With the aim to ensure mental health and wellbeing among women RMG workers and address issues of gender-based violence faced by women in this sector, SAJIDA Foundation is running the project “Working with Women Phase II”. The target group is 3500 RMG workers in two different garment factories, of whom two-thirds are women and the rest are men. We create awareness, encourage dialogue and practice of mental health and wellbeing alongside physical health of women RMG workers, through trainings of various stakeholders, including supervisors, who are crucial for the effectiveness of such interventions.

Adhunika Women’s Initiative, funded by the Adhunika Foundation, USA, helps young women become financially and socially independent through its two centers. The project empowers these women by giving them access to ICT training, important life skills education, scholarship support, psychosocial counselling, and awareness building on gender-based violence, reproductive health and breast cancer.

Additionally, several of our programmes have cross cutting components which promote gender equality. PROSHOMON provides free maternal health services and 74 percent of its clients are women. SAJIDA Hospitals, which provide family planning services and specialize in Maternal and Child Health services, have at least 60 percent female patients. Suchona, the entry level division of our microfinance programme, has a portfolio where all of the beneficiaries are exclusively women, helping them start their own business and become self-sufficient entrepreneurs. Amrao Manush provides night shelter particularly for ultra-poor women and girls. It provides vocational trainings, enabling them to participate in economic activities, and raises awareness on gender-based violence. It also supports working mothers with a day care centre. WASH for Urban Poor has 70 percent female beneficiaries. Women make up almost 80 percent of the beneficiaries of both WASH for RMG Workers and WaterCredit.

Based on these areas of strength, the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020 – June 2025 are:

- Contribute to eliminating all forms of violence against women and girls in the public and private spheres, including sexual and other types of exploitation. (SDG Target 5.2)
- Contribute to ending all forms of discrimination against all women and girls everywhere. (SDG Target 5.1)

To achieve the aforementioned objectives, the approaches we will adopt are:

- Continue providing services through Working with Women to the 3,500 RMG workers till 2021. From 2022, revise the current structure of the programme to fit into a one-year timeline and serve 15,000 workers by 2025.
- Serve 3700 women through Adhunika in the next five years.
- Disaggregate targets and projections by sex for all existing and new programmes going forward.
- Design all new programmes with specific components to promote gender equality.
- Expand scope of the Sexual Harassment Elimination Committee to beneficiaries and create awareness about its functions and complaint mechanism.
- Include men, alongside women, in all gender equality awareness raising activities.

\(^{12}\) Women and Men in Bangladesh: Facts and Figures, 2018. BBS
\(^{13}\) Gender Equality, Bangladesh, World Vision Bangladesh
GOAL 7: DISASTER MANAGEMENT

SDG 11 – MAKE CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE, RESILIENT AND SUSTAINABLE

Because of its geography, Bangladesh is prone to natural calamities like cyclones, storm surges, floods and landslides. Most severely impacted are the coastal areas which are home to 25 percent of the population.14 The cyclone in 2007, SIDR, alone caused an estimated $1.7 billion in damages, or about 2.6 percent of the GDP.15

Though Bangladesh has taken preparedness measures for natural disasters, the country is less prepared for incidents such as the Rana Plaza factory collapse or the influx of over 910,000 Rohingya who have taken refuge in the country.16

SAJIDA Foundation implemented the DIPECHO VIII project titled “Enhancing inclusive disaster resilience in Bangladesh” in Wards 5 and 6 under Dhaka South City Corporation (DSCC). The project aimed to reduce disaster risk and mitigate damages from potential disasters. It sought to enhance the disaster resilience of vulnerable communities and institutions, and establish the practice of disaster risk reduction among them.

Besides providing support to flood, cyclone and fire victims, SAJIDA was one of the first responders in devastating crises like Rana Plaza and the ongoing Rohingya crisis. While making extensive contributions to healthcare, we also provided recreational activities like setting up a play zone for refugee children.

Our disaster response agenda not only seeks to provide immediate relief and rehabilitation support to the victims, but also seeks to help them tackle the long-term effects of such events including psychological issues and traumas.

Going forward, SAJIDA Foundation will work in all four steps of disaster management: risk reduction, preparedness, response, rehabilitation. Our approach will be to develop a dedicated disaster management unit that will work around the year to build its own capacity, build partnerships with relevant stakeholders and develop protocols to have the readiness to tackle disasters promptly. By building awareness and preparedness, it will also help reduce incidence of man-made disasters and improve resilience to natural calamities of communities in which SF works.

Based on these areas of strength, the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020 – June 2025 are:

- Contribute to significantly reducing the number of deaths and the number of people affected and substantially decrease the direct economic losses relative to global gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations. (SDG Target 11.5)

To achieve the aforementioned objectives, the approaches we will adopt are:

- Form a specialized unit tasked with the development of the disaster management system.
- Form and maintain relationships with key stakeholders within the disaster management network.
- Develop a comprehensive humanitarian response policy manual.
- Explore sources of funds and avail funds through direct membership with donors and/or through association with organizations that are already members.
- Develop an emergency response kit containing essentials for survival.
- Assign focal points in disaster prone regions to form fast response committees.

---

14 The changing climate. UNICEF
15 Bangladesh: Building Resilience to Climate Change. 2016, World Bank
16 Rohingya crisis. UNICEF
GOAL 8: CLIMATE CHANGE ADAPTATION

SDG 13 - TAKE URGENT ACTION TO COMBAT CLIMATE CHANGE AND ITS IMPACTS

The 2015 Climate Change Vulnerability Index puts the economy of Bangladesh at high risk to climate change. Being a coastal country means the nation is highly vulnerable to rising sea levels due to global warming. Economic losses in Bangladesh over the past 40 years were at an estimated $12 billion, depressing GDP annually by 0.5 to 1 percent.\(^\text{17}\)

The adverse impacts of global warming are already apparent in Bangladesh. Extremes of temperature is worsening with hotter summers and colder winters. Rainfall is becoming irregular, causing droughts and sudden, heavy downpours which leads to water logging and landslides. During monsoon, incidence of overflowing rivers is rising, resulting in increased frequency and intensity of floods. Climate change is also increasing prevalence and outbreak of tropical diseases like dengue, malaria, cholera, etc. It is causing rates of coastal and riverbank erosion to rise. It has been reported that a large proportion of urban slum dwellers are victims of riverbank erosion.\(^\text{18}\)

Based on the current situation in Bangladesh and the global goals for sustainable development, our objectives for primary healthcare for the period of July 2020 – June 2025 are:

- Contribute to strengthening resilience and adaptive capacity to climate-related hazards and natural disasters. (SDG Target 13.1)

To achieve the aforementioned objectives, the approaches we will adopt are:

- Form a specialized unit to develop Climate Change Adaptation program build in adaptation measures for people to cope with the effects of climate change.

---


\(^{18}\) [Views of Bangladesh on Climate Change and Its possible Security Implications](https://www.bkssri.org/)
ORGANIZATIONAL GOALS

GOAL I – PEOPLE

SF’s biggest asset is its people. So, when it comes to investing in the organization the first and most important focus will be its staff. Below are the tasks to achieve that goal:

BUILDING STRONG TEAMS
SF will continue its work of building strong teams across the organization. This effort will include:

... Developing strong leaders for all business units.
... Always having a pipeline of leaders including a strong mid-management level who can take on leadership roles.
... Ensuring a strong and efficient workforce of individual contributors and field staff.

RECRUITING TOP TALENT
As the organization grows, SF needs to continually recruit top talents to meet the growth requirements of our programmes and services. It will focus on the following:

... Recruit experienced people from the industry who can bring in their expertise.
... With over 55 percent of employees at the head office below 30 years of age, continue to acquire, develop and retain young talent.

GENDER DIVERSITY
In line with its goal of advancing gender equality, SF will create a more gender balanced workforce by:

... Recruit more women to increase their proportion in the workplace
... Introduce more women in its ranks of senior leadership and executive management.

RETIING TALENT
While SF hires top talent from outside, it will also focus on retaining existing talents within the organization. To ensure retention of top talent, it will:

... Identify high performing staff through a measurable performance management system.
... Reward high performers with faster growth and advanced learning opportunities.
... Provide training for medium/low performers to improve their skillset.

FOCUSING ON VALUES AND CULTURES
Ensuring the values and the culture of the organization will increasingly become more important as the organization grows. SF will take a longer-term approach to building the values and the culture:

... Conduct regular trainings on values and culture, but in a more creative and engaging model.
... Build a cross-team working group to focus on values and culture. The team will champion our efforts and drive the adoption of new values and cultures.

GOAL 2 – PROCESS

As SF plans to scale up its programmes and services, and grow the organization, it is more important than ever to strengthen its policies and processes. As part of that, it will work on the following areas:

DEVELOPING STANDARD OPERATING PROCEDURES
SF will develop Standard Operating Procedures (SOPs) across the organization for all programmes, services, and support divisions. This will ensure that it has consistency across the board as it grows as an organization.

ENSURING COMPLIANCE
With its programmes and services growing, SF will need to ensure that it continues staying compliant with policies, laws, and regulations of both the organization and other relevant regulatory bodies.

ASSURING QUALITY
SF has always made quality a central focus of its work. It will continue doing that to ensure delivery of quality services to its clients and beneficiaries.
GOAL 3 – SERVICES

To provide the best services to its clients and beneficiaries, SF will continue to improve its current programmes and services and at the same time invest in incubating new ideas so that it not only remains relevant, but also stays ahead of competitors in addressing timely opportunities.

IMPROVING AND SCALING UP CURRENT SERVICES

SF will continue to strive towards improving its programmes and services while scaling up. This will ensure that it is addressing the needs and challenges as the programmes and services grow.

INCUBATING NEW IDEAS AND SERVICES

As SF continuously improves its existing programmes and services, it also needs to ensure that it is incubating new ideas, so that it can address new opportunities in this fast-changing era, both nationally and globally. Successful incubations will eventually become part of its regular programmes and services and strengthen its portfolio.

GOAL 4 – BRANDING

As SF expands its reach to impact investors, local donors, corporate sponsors, and others, it is extremely important to develop a strong brand for the organization. It will focus on the following tasks to create the branding:

DEVELOPING AND IMPLEMENTING A BRAND STRATEGY

SF will develop an integrated brand strategy for the organization along with its programmes and services including social enterprises.

This will help us with the following tasks:

➢ Increase exposure to potential donors, corporates, as well as prospective employees.
➢ Market products and services to more people.

REBRAND SOCIAL ENTERPRISES AS ‘SOCIALLY RESPONSIBLE BUSINESSES’

A socially responsible business is a for-profit venture with a social mission; it operates with dual objectives of maximizing shareholders’ return as well as generating social benefit for its stakeholders. Such a business is willing to reduce profits in its pursuit of creating positive externality. Under this model, SF would raise more funds in the form of traditional investments.

CREATING DISTINCT BRAND FOR EACH SOCIALLY RESPONSIBLE BUSINESS

As SF ventures into different socially responsible businesses, especially with a focus on profitable business models, it needs to ensure:

➢ Assessment of reputation risk before establishing any business.
➢ Development of a separate brand for each business that caters to the target audience for that business.

GOAL 5 – GREEN ORGANIZATION

For the next five years, our focus will be to establish a strong culture of environmentally friendly practices within the organization. Reducing usage of disposable materials while replacing them with reusable materials, taking steps to eventually becoming paperless, achieving optimum energy efficiency, reducing wastage of water are some of the initiatives that will be taken on the path to becoming a “Green Organization”.

GOAL 6 – SAJIDA FOUNDATION CHALLENGE FUND

In line with its value of Innovation and Quality, SF is introducing the SAJIDA Foundation Challenge Fund (SFCF). The fund is aimed at overcoming the lack of capital in the developing market of Bangladesh, which acts as a barrier to cultivating a culture of innovation. SAJIDA aims to nurture change makers with innovative business or social development ideas which will have sustainable impact on the society/economy/environment.

All individuals, development programmes, enterprises, and departments of SAJIDA Foundation along with individuals/organizations outside of SAJIDA Foundation will be eligible for SFCF. A single participant can propose multiple concepts.
The focus areas of the project should be aligned with the mission, vision, values, and strategies of SAJIDA Foundation. It may include innovative financial services, health services that includes hospital services, elder care, psychological health and wellness, community health, programme for the children with special needs, WASH, women empowerment, programme for the pavement dwellers, squatters, and slum dwellers, organizational systems improvement, talent management, technology improvement, agriculture, climate change and ICT.

Targeted beneficiaries maybe from any socio-economic class including ultra-poor, poor, lower income, middle income, and high-income groups. All projects, except those targeting the ultra-poor, must be sustainable/must have a revenue model.

SFCF will be held once every year. The total amount for the year 2019 will be BDT 33,000,000 (3.3 crores). The amount may increase in later years.

GOAL 7 – TECHNOLOGY

Technology will play a key role in the transformation and growth of the organization. SF will primarily focus on the following areas:

CONTINUING DIGITIZATION ACROSS THE ORGANIZATION

SF will continue being a leader for IT integration and implementation within the industry. It will invest in technology for all its major programmes such as hospitals and microfinance. SF will also invest in integrating all its data sources so that it can run data analysis across its programmes and services and explore new opportunities based on that.

MAKING IT A CORE FOCUS

With the digitization process happening across the organization, IT will move out from being a support role to becoming a core focus for all programmes and services. With the right IT tools and services, SF will be able to take data informed decisions and improve our programmes and services across the organization.

GOAL 8 – RESTRUCTURE

Supporting the programmatic and organizational goals, the organization will restructure. SF’s Microfinance activities are registered with and regulated by the Microfinance Regulatory Authority (MRA). SF’s Development Programmes are registered with the NGO Affairs Bureau. The following Development Programmes which require grant support to reach the poorest, will continue to operate under SF:

Hospitals, Community Health, Institution of Health Science (IHS), Proshomon (health voucher scheme), Amrao Manush (programme for pavement dwellers), Community Wellness Programme, SAMRIDDHI (community-based education and training programme), Water Sanitation & Hygiene (WASH), ADHUNIKA Women Centre, Agriculture & Livestock development programme and humanitarian response.

A new trust will be created, called SAJIDA Trust, to which the shares of SF in Renata Limited, PHWC (Psychological Health and Wellness Clinic), Inner Circle and Home and Community Care will be transferred. SAJIDA Trust, surplus from SF’s Microfinance activities and local and foreign donations will support new and existing SF Development Programmes. In addition, SAJIDA Trust will focus on:

- Innovation and programme development through the SAJIDA Foundation Challenge Fund mentioned above.
- Management of socially responsible businesses.
- Partnership development for socially responsible businesses.
- Management of other for-profit investments.
- Research and impact evaluation of the various development programmes and businesses.
- Assistance to other organizations to replicate the SAJIDA success stories.

The SF Microfinance and Development Programmes are governed by the SAJIDA Foundation Board and the foundation is registered under the Societies Act. The new SAJIDA Trust will have its own Board of Trustees and will be registered as “SAJIDA TRUST”. The new trust will also recruit the staff needed to fulfill its independent functions.
GOAL 9 – INTERNATIONAL PURSUITS

In the next 5 years SF will look to expand its impact beyond the borders of Bangladesh.

With more than 25 years of experience of bringing health, happiness, and dignity to the people of Bangladesh, the organisation now believes it has the strength to deliver its programmes in other emerging economies across the globe.

Through due diligence and strong partnerships, SF hopes to cement its international presence within the next decade.

GOAL 10 – FINANCE

As it invests significantly in the organization along with programmes and services, SF must ensure that its growth is backed up by a strong financial plan. Following will be the key tasks:

FUNDING STRATEGY

Every fiscal year, SF’s retained funds grows by 8-10%. The primary source of this retained funds is from dividend earnings from Renata Pharmaceuticals Ltd.

The retained fund generates income from two sources:

i. Interest earned on fixed deposit in bank

ii. Income on investment in different sectors and assets

As retained fund grows, so will the income. This income will be used to fund development programs and social enterprises of SF for their incubation periods. The length of the incubation period will depend on the targeted socioeconomic class of the intervention.

<table>
<thead>
<tr>
<th>Targeted Beneficiaries</th>
<th>Incubation Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Poor</td>
<td>5</td>
</tr>
<tr>
<td>Poor to Low Income</td>
<td>2</td>
</tr>
<tr>
<td>Lower Middle Income</td>
<td>1</td>
</tr>
<tr>
<td>Mid to High Income</td>
<td>0</td>
</tr>
</tbody>
</table>

As retained fund grows, so will the income. This income will be used to fund development programs and social enterprises of SF for their incubation periods. The length of the incubation period will depend on the targeted socioeconomic class of the intervention.

TURNING SOCIAL ENTERPRISES PROFITABLE

SF needs to turn all its social enterprises profitable so that they can sustain on their own and at the same time, support SF’s development programmes through that profit. In order to do that, it needs to ensure the following:

... Develop financial plan for all its social enterprises with a focus on profitability or sustainability as appropriate for the enterprise.

... Continually monitor and update its service pricing model for all social enterprises to ensure that our service prices are aligned with market standards.

... Establish a timeline for each enterprise to become sustainable and an exit plan in case the enterprise cannot meet the target timeline.

ESTABLISHING A FUND FOR SUBSIDY

While it focuses on turning its social enterprises profitable, SF will continue to stay true to its roots and provide subsidized services to the poor and ultra-poor groups. In order to provide subsidized services within its social enterprises, it will accomplish the following tasks:

... Establish a separate fund dedicated to providing subsidized services. Each year, the governing board will decide the total fund to be made available for this pool

... Develop an application process through which each social enterprise will request for an annual fund to provide subsidized services. At the beginning of financial year, the governing board will decide the allocation for each enterprise.

AVAILING FUNDING THROUGH IMPACT INVESTMENT

The trend of organizations and groups making impact investments to NGOs and social enterprises is on the rise. To access this funding source, SF will focus on the following tasks:

... Build relationships with impact investors globally whose portfolio matches with its programme and service areas.

... Identify programmes and services that will be attractive to impact investors and pitch the ideas to those groups and organizations.

RAISING FUNDS LOCALLY

As Bangladesh moves upward economically to the middle-income country level, there is a possibility of foreign funds decreasing. To address this challenge, SF will start to focus on local fundraising through the following initiatives:

... Build a strong team to focus on local fundraising strategy and implementation

... Focus on major gifts and corporate CSR funding opportunities

... Develop donation and sponsorship packages to attract donors

... Conduct fundraising events and activities on a regular basis

... Maintain continual relationships with individual donors and corporate sponsors

... Set a fundraising target every year and continue increasing it year over year

INCREASING DONOR FUNDING

With Bangladesh’s progress towards middle-income country, donors are now changing their strategy and investing in new areas where there are opportunities to have impact. With its strategic focus on areas such as digital financial services, urban extreme poverty, disaster management, technology-based healthcare to reach the
Last mile, SF is uniquely positioned to attract donors for these innovative programmes and services.

In order to increase this to 10% year-over-year within the next five years, SF will take the following initiatives:

... Increase exposure of innovative programmes and services to donor groups.

... Strengthen network with international and local donor agencies and embassies.

... Apply for grants that align with SF’s strategy and donors’ interests