Type of action	Main challenges	What our organization regards as the most important challenges related to children's health	Examples of best practices towards defending and promoting boys' and girls' right to health, especially for children in particularly difficult circumstances	What we consider the most important obstacles to fulfilling children's right to health
Direct actions taken to address breaches and violations of children's and adolescents' right to health	Access to quality primary healthcare services	Poverty, poor implementation of Government policies, Inadequate budget for health sector	Making collaboration with likeminded health organizations to increase access of primary healthcare services for community people in urban communities.	Inadequate primary health care services, Poor communication, Lack of adolescent friendly health services
	Development of prevention- based healthcare systems	Illiteracy, Customs and beliefs, poor implementation of Government policies	 Using Behavioural Change Communication (BCC) materials during awareness raising sessions. Arranging separate sessions on health issues for different groups of beneficiaries-students, teachers and parents. 	Lack of quantitative and qualitative Behavioural Change Communication (BCC) services
	Child survival	Poverty, poor implementation of Government policies, Malnutrition, Inadequately addressed gender issues	Distribution of de worming tablets for students and their family members and vitamin A capsules for the students twice in a year to address malnutrition of the children.	Inadequate maternal and child health centers, Lack of awareness of the parents regarding childrens' health and diseases
	Immunizations	Superstition	Arranging vaccination sessions for the community people in urban community.	 Lack of proper information on Tetanus immunization during pregnancy, Incomplete vaccination of children
	Survival of children under 5 years old	Poverty, illiteracy of parents, high prevalence of Acute Respiratory Infection and Diarrhoeal diseases among under five children, Malnutrition	Arranging awareness session on Exclusive Breast Feeding and Weaning Foods including demonstration of proper breast feeding techniques for the pregnant and lactating mothers.	Poor water and sanitation facilities, Inadequate maternal and child health centers, Lack of skilled health personnel for children,

	Morbidity among children under 5 years old	Poverty, illiteracy of parents, high prevalence of Acute Respiratory Infection and Diarrhoeal diseases among under five children, Malnutrition	Arranging awareness session on Exclusive Breast Feeding and Weaning Foods including demonstration of proper breast feeding techniques for the pregnant and lactating mothers. This contributes to reduce morbidity among children.	Poor water and sanitation facilities, Inadequate maternal and child health centers, Lack of skilled health personnel for children, lack of exclusive breast feeding and Poor weaning practices,
	Maternal and neonatal health	Poverty, Customs and beliefs, Early pregnancy, Maternal malnutrition, Inadequately addressed gender issues	Facilitate safe delivery in the communities through providing training for Community Birth Attendants in some communities.	Inadequate maternal and neonatal health services, Lack of safe delivery centers, Lack of antenatal and post natal services, Delivery by untrained birth attendants,
	Breastfeeding	Illiteracy, Customs and beliefs, Early pregnancy, Maternal malnutrition,	Arranging awareness session on Exclusive Breast Feeding and Weaning Foods including demonstration of proper breast feeding techniques.	Lack of proper information on Exclusive Breast Feeding and breast feeding techniques
	Nutrition	Poverty, Illiteracy, Customs and beliefs, Inadequately addressed gender issues, Inadequate food security	 Providing supplementation of nutritious foods for the students and assessing their nutritional status. Arranging different sessions on nutrional issues for various groups of beneficiaries-students, teachers and parents. 	Lack of proper information on nutritious foods, faulty cooking practices.
Reinforcement of public mechanisms and structures	Access to quality primary healthcare services	Countrywide the scope of collaboration with public entities is not similar.	Making collaboration with likeminded Non Government health organizations to increase access of primary healthcare services for community people in urban communities, who implement the Government projects.	-
	Development of prevention- based healthcare systems	 Countrywide the scope of collaboration with public entities is not similar. Lack of effective monitoring and evaluation of Government projects all over 	Making collaboration with some other health entities who implement the Government's projects on preventive health services.	-

	the country.		
Child survival	Inadequate accessibility of people in urban and rural areas to the Government health facilities.	The collaborative organizations implementing Government's projects conduct Sick students treatment campaigns in urban schools, that contributes to child survival.	 Sometimes the collaborated organizations can not maintathe treatment schedules. Some of the parents of referred children do not take their children for treatment from the referral centers.
Immunizations	-	Conducting vaccination sessions with support of UTPS, which is a implementing partner of Dhaka City Corporation (a public entity).	-
Survival of children under 5 years old	Inadequate accessibility of people in urban and rural areas to the Government health facilities.	From the static clinic of collaborated organizations, the children under five of the communities among our beneficiaries also receive treatment support. It contributes to survival of children under 5 years.	 Some of the parents do not the health centers for treatment of their sick children. Inability of the parents to continue treatment in case of long term sufferings of the children due to poverty.
Morbidity among children under 5 years old	Inadequate accessibility of people in urban and rural areas to the Government health facilities.	From the static clinic of collaborated organizations, the children under five of the communities among our beneficiaries also receive treatment support. It helps to reduce the sufferings from diseases of children under 5 years.	 Some of the parents do not the health centers for treatment of their sick children. Inability of the parents to continue treatment in case long term sufferings of the children due to poverty.
Maternal and neonatal health	 Inadequate access of women to have safe pregnancy and delivery in Government health centers. Lack of specialized 	From the static clinic of collaborated organizations, the pregnant mothers of the communities among our beneficiaries also receive treatment during pregnancy, delivery and after delivery. It helps to increase safe delivery. Besides, mothers and neonates also get treatment from there, if required. It contributes to maternal and neonatal health.	 Sometimes pregnant mothe and their family members at not aware about receiving Ante natal and post natal ca Still many families prefer delivery at home instead of institutional delivery.

		neonatal health centers of Government in rural areas.		
	Breastfeeding	Superstition.	From the static clinic of collaborated organizations, the pregnant mothers and mothers of new born babies receive Ante natal and post natal care including counseling on Exclusive Breast Feeding.	Some mothers and their family members do not practice Exclusive Breast Feeding realizing its importance.
	Nutrition	The nutrition projects of Government are not implemented countrywide.	Providing supplementation of nutritious foods to the students of Government Registered Schools in Bhaluka.	Nutritious foods are not always available in nearest communities.
	Access to quality primary healthcare services	Government Community Clinics are not active all over the country.	We are continuing our efforts to motivate the community people for taking treatment from the Community Clinics.	Qualified health personnel are not always available in the Community Clinics.
Strengthening communities' and civil society's capacity to guarantee children's and adolescents' right to health	Development of prevention- based healthcare systems	Illiteracy	 Formation of groups (Health Committee, Adolescent groups) involving the community people. Building capacity of the formed community groups through awareness campaigns (orientation, yard conference) on health issues. 	Lack of services to strengthen the capacity of the community, Involvement in their daily activities,
	Child survival	Illiteracy, Customs and beliefs	Arranging orientation session on Basic Medical Symptoms for the teachers of the schools, which help the teachers to identify sick children and enable them to take initiatives accordingly.	 Lack of initiatives of the community people to take their sick children for treatment. Inability of the parents to continue treatment in case of long term sufferings of the children due to poverty.
	Immunizations	-	Motivating pregnant mothers and mothers of new born babies to complete vaccination of their children during Ante natal and Post natal care sessions.	Inadequate effort of the parents to complete vaccination of their children.
	Survival of children under 5 years old	Illiteracy, Customs and beliefs	Arranging training for the selected Community Birth Attendants of the communities help to reduce the mortility of the children under five.	Lack of initiatives of the community people to take their sick children for treatment.

	Morbidity among children under 5 years old	Illiteracy, Customs and beliefs	Arranging training for the selected Community Birth Attendants of the communities contributes for reducing the morbidity among the children under five.	Lack of initiatives of the community people to take their sick children for treatment.
	Maternal and neonatal health	Illiteracy, Customs and beliefs	Arranging training for the selected Community Birth Attendants working in the community.	Inability of some Birth attendants to participarte in training for family reasons, as most of these types of trainings are residential.
	Breastfeeding	Illiteracy, Customs and beliefs	Arranging awareness session on Exclusive Breast Feeding and Weaning Foods including demonstration of proper breast feeding techniques.	Inadequate participation of community people in awareness sessions.
	Nutrition	Illiteracy, Customs and beliefs	Arranging different sessions on nutrional issues for various groups of beneficiaries-students, teachers and parents.	Inadequate participation of community people in awareness sessions.