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publication with due references.
The mission statement of the Acid Survivors Foundation is to stop acid violence by the year 2015 and help survivors rebuild their lives.

Only ASF has a mission statement committed to the total elimination of acid violence with a date attached to this goal. The inclusion of a target date is a sign of ASF’s compelling organizational motivation. In strong global audits, without hesitation, they do whatever it takes to achieve what others may think is not possible: the total elimination of acid violence by 2015.

The control and eventual elimination of acid violence remains a high priority of the Ministry of Home Affairs and the Government of Bangladesh. ASF is the only NGO in Bangladesh working exclusively on this issue, which makes it a key actor in helping to achieve this national priority. Despite the declining trend, there is still one attack every two days. Virtually every survivor that the 2009 evaluation team met expressed the view that ASF was a critical part of their life and recovery process and essential to lead the national fight to end acid violence.
Message from the Chairperson

I am pleased to present the Annual Report 2009 of Acid Survivors Foundation (ASF), which presents the achievements, significant improvements and developments. The year is a milestone, as ASF completes a decade of intervention both strategically and operationally to address acid violence.

ASF has now emerged as a professional and cohesive national organization in Bangladesh with systems, staffing and partnerships in place. Globally, ASF has become a model for other countries. To mark the tenth anniversary, the first International Conference of Acid Survivors took place in this year in Bangladesh.

ASF has been working since 1999 to eliminate acid violence from society, with a focus on ending acid violence by 2015. To treat the societal wound created by acid attacks, ASF has been providing medical treatment, legal advice and assistance, and psychological services, as well as education and awareness towards prevention and social reintegration.

I congratulate the ASF management, staff, survivors, doctors and surgeons who worked hard throughout the year for achieving the goals, and the Board of Trustees of ASF for their time, valuable advice and guidance.

ASF has been financially and institutionally supported by its development partners since inception. ASF has been working in partnership with the government ministries, media, NGOs, network of rights-based organizations, celebrities, lawyers, students, voluntary local and foreign doctors, surgeons, civil society, corporate houses and individuals from home and abroad.

I believe, with heartfelt support of everyone, ASF will be able to truly push forward the movement against acid violence. We hope to achieve a society where no more acid victims have to say “My dear mother, you would not recognize me any more.”

Parveen Mahmud, FCA
Chair Person
Acid Survivors Foundation

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Message from the Executive Director

I express my gratitude to all staff, survivors, donors, partners, professionals and friends of ASF and the Honourable Board Members to help me to present another exciting year 2009 along with celebration of our 10th anniversary and the 1st International Conference of Acid Survivors.

It would not have been possible for ASF to come to existence officially on 12th May 1999 without the support of UNICEF and CIWA (the Canadian International Development Agency). Ten years ago, this unique organization was formed by a group of dedicated Bangladeshi citizens with the help of Dr. John Moncrieff, a U.K. citizen whose voluntary engagement soon became a full-time commitment to fight acid violence globally. I am deeply honored to work in the second Executive Director since 2002 under the wise leadership of Mr. Kazi Nazrul Islam, the former Advisor to the First Caretaker Government of Bangladesh and the Founder of the ASF in my present shape. The journey at the beginning was not smooth. There was no example to follow. It was not necessarily the case to address a particular form of gender-based violence from holistic point of view. In its ten years of journey, many development partners joined our ranks and I sincerely acknowledge the support that we have received from Department for International Development (UK), Danai International Development Agency (Cand.,) Global Charitable Foundation, in past and we are still receiving funding from Embassy of the Kingdom of Netherlands, The Canadian International Development Agency (CIDA), Medicins sans Frontieres (MSF), Compassion International, and the government of Bangladesh. Moreover, many other organizations and individuals also extended their support to ASF, which enabled us to provide best available medical treatment, legal assistance and rehabilitation services to nearly 2000 people attacked with acid over the period of ten years. Our holistic approach has facilitated successful transformation of many individuals from the position of “Victim to the position of Survivor” and some even engaged as activists.

Within the first three years of its inception, ASF’s protection activities had been able to stop the rising trend of acid violence in Bangladesh. Since then the downward trend has been continuing and the annual total number of acid violence in Bangladesh has reduced by more than 50%.

The success of ASF in Bangladesh has stimulated formation of similar entities around the globe. Currently, there are organizations in India, Pakistan, Nepal, Cambodia and Uganda to address acid violence. The mission of ASF is to improve the quality of life for acid survivors and to work together with the power of love, peace and humanity beyond the boundaries of culture, race, religion and creed to join together and stand up against our common enemy that is the pain of acid victims, the stench of inflicted wounds and the twisted contracts of neglected burn injury.

Monira Rahman
Executive Director
Acid Survivors Foundation
Acid Survivors along with the students of North South University and Australian Youth Ambassadors walk through the red carpet in a fashion show to present we are equal regardless of color, race, religion, creed and how we look.

Her Excellency Mrs. Beate Rusches, Ambassador The Embassy of the Kingdom of the Netherlands in Dhaka, Bangladesh and Mrs. Nelly de Vries, First Secretary, Governance and Gender, Embassy of the Kingdom of the Netherlands (1939) visited ASH's Pressure Garment Unit.

The Fashion Designing Training House named 'Papago' (butterfly) was launched on 7 September 2009, by the Australian High Commissioner to Bangladesh, Dr. John L. Thwaites and journalist, Leanne Lane. The philosophy behind the name 'Papago' is the thought that after the vocational training, the participating survivors become economically independent, regain their self-confidence and like a butterfly they spread their wings and fly out.
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EXECUTIVE SUMMARY

The Acid Survivors Foundation (ASF) has made an incredible journey since the beginning of its existence with only two members in 1995. The journey was not easy, and it was initially difficult to find supporters for its cause due to the backlash against the acid attack survivors. Despite the obstacles, the foundation persisted and achieved significant milestones over the years, which have been summarized in this outline.

1. The foundation's journey and its achievements in providing medical and social support to acid attack survivors.
2. The role of the government and other organizations in supporting the Acid Survivors Foundation.
3. The challenges faced by acid attack survivors in accessing justice and rehabilitation.
4. The importance of advocacy and awareness-raising campaigns in promoting social change and rights for acid attack survivors.

Throughout the years, the Acid Survivors Foundation has continued to work tirelessly to provide medical and social support to acid attack survivors. The foundation has been recognized for its work and has received numerous awards and commendations for its efforts.

It is important to note that the Acid Survivors Foundation is a non-profit organization that relies on donations and grants to fund its operations. The foundation encourages individuals and organizations to support its work in providing medical and social support to acid attack survivors in Bangladesh.
Despite the success in bringing down the number of acid attacks over the last few years, the ASF is well aware that the road lies ahead is not smooth at all. It cannot be content by winning a few battles while losing the war. Its bigger task is sustaining the way acid violence has been decreasing since 2005. With a number of other challenges to deal off, the organization concentrated on tackling the emergence of acid crimes. There was a time when combating the acid violence was a task even more uphill. After the legislation against acid and other acts of violence near the women and children, the menace seems quite attainable. The International Acid Survivors Conference held in Dhaka last year adopted the resolution to eliminate acid violence by 2015. Now the ASF, Bangladesh is treated as a role model for similar organizations of other countries, trying to end the root cause in the next five years. Research shows that like other forms of violence against women and women, acid throwing has its roots in patriarchy, a social system in which men possess all the power and use that to their advantage.

The society in which the violence is prevalent and promotes subordination of women. It perpetuates women's financial dependence on men and thus makes them more susceptible to violence. Among the acid throwers, 90 percent are male while 72 percent victims and survivors are women and children. What is needed most is to change the popular attitudes of masculinity and end to gender stereotypes that enable violence on the women. So, if acid violence is to be eradicated, the foundation must make a real difference to the way women are viewed in society.

Taking the local NGOs on board, it must engage more and more communities in prevention of acid crimes.

The issue that needs immediate action is the availability of acid. Together with lower price it makes it easier to purchase, the ASF successfully lobbied with the government to reform the Acid Control Council. The ASF also lobbied with the government to form a monitoring cell headed by the Inspector General of Police. This committee will have district level units to monitor use and recycling of acid.

Now the challenge is to ensure strict enforcement of the law and ensure that the law enforcers take a robust role against the violence.

Lack of public medical facilities specializing in burn management is one of the hindrances for burn patients in getting better treatment. The Dhaka Medical College hospital (DMCH) has a 50-bed burn unit, not capable of handling every sort of burn. The ASC is now trying to link with the government and the donor agencies to establish a full-fledged specialized burn hospital in the capital.

The ASC is also initiating a district level survey to find out the status of acid survivors. It has supported many survivors over the years. This year, the goal of the survey is to find out what kind of changes the ASF could make in their life. The Foundation also feels the need to have a single set of psychological services tailored to suit the requirements of both the community and the victims. With the help of the partner NGOs, the ASF implemented a pilot project in two selected districts - Shariatpur and Bogra - funded by the UNICEF.

Analyzing the success of the pilot project, the project could be expanded in future.
**TRENDS AND NUMBERS**

The downward trend of acid violence began in 2003. The trend continued slowing to a steady pace of 19 deaths in 2005. According to newspaper reports, police and the ASP records, incidents dropped by 12% in 2006, then fell to 8% in 2007. The number of victims decreased by 16% in 2008, 18% in 2009.

**Acid attack trend (1999-2009)**

In 1999-2009, 2,059 persons were attacked by 22% of incidents.

**Acid attack statistics - age group - may 1999-2009**

- 35% of victims were men and boys.
- 25% were women and girls.
- 35% were elderly aged 65 and older.

**Gender Perspective - May 1999-2009**

- 35% of victims were men and boys.
- 25% were women and girls.
- 35% were elderly aged 65 and older.

**THE MOTIVES**

Not marriage or love refusal-related incidents, recorded data since 1999 show that the highest number of attacks took place for land and property-related disputes. Another decade show 39% of all attacks took place for land and property-related disputes. While 17% happened for refusal of dowry, 14% for inheritance and other advancement proposals. Only 5% of all attacks took place for dowry, 5% for family-related disputes, 4% for marital disputes and 11% for other reasons.

Causes of 13% attacks were not clear or could not be known. Like the previous years, the highest number of attacks took place last year for land and property-related disputes (45%). Out of the other motives, marital disputes made up 16%, refusal of proposals for dowry (on average 8%), conflicts over dowry 3%, family disputes 7% and other causes 12% of the attacks.

Causes of 15% attacks remained unknown. The incidents happened for land property/money disputes decreased by 18% and for marital disputes increased by 3% between 2008-2009. Acid violence for denial of dowry and inheritance and evidence of advances marked a decrease of 42% while that for dowry marked a slight increase of 1.5%. Analyzing of age and sex of the victims show that acid attacks on women/girls is mostly likely to occur when they are in the 25-34 age group, and the key reason is land property money dispute because they are still considered weaker and an easier target.

Although dowry and marital dispute related attacks are targeted mainly at women aged between 19 and 40, girls in the below 18 age group are often attacked for refusal of dowry and marriage proposals. The age of the males attacked for land property/money disputes ranges from 32 to 64.

**NOTIFICATION AND REFERRAL SERVICES (NRS)**

The Notification and Referral Services (NRS) notes down every new and old acid attack the moment the news reaches them. It takes measures to bring the victims to the ASP hospital if possible. Within 48 hours of notification, they refer the case to the local hospital for further action. A team made of acid survivors remains stationed at the cell and visits the closest attendance places that might reveal news of acid attacks. Besides, 60% of NGOs who received calls from the victim were informed of any incident. The NRS and partners have faced a number of challenges in bringing victims to Acid Survivors Foundation for treatment. These include pressure from influential sectors such as police and local government representatives, as they want to settle the issue by the arrest of the suspect, which is a legal action if the victim comes to the ASP. Differing all these obstacles, by last year the NRS recorded 146 cases of acid violence across the country thanks to an extensive network of partner organizations and others (mainly partner organizations, individuals and media).

If a victim’s condition is deemed critical, the ASP and its local partner move to have them admitted to the ASP Hospital. In that case, the Foundation bears the actual cost. However, some areas are still not covered by the network. The ASP dealt with 139 incidents last year involving 146 people, including 38 acid attacks.

The police also supported the victims. Support from Partner NGOs especially BRAC. It investigated all the incidents within two days of notification in each case. Local police, individuals and organizations concerned came forward. The partner NGOs might not send victims to Dhaka if the injuries are minor and can be treated by local physicians.
MEDICAL SERVICES

CONTRIBUTION OF LOCAL AND INTERNATIONAL SURGEONS

A great line-up of local and international plastic surgeons helps the ASF to offer the victims best possible plastic surgery in Bangladesh. Professor Dr. A.M. Srikar, Professor Dr. Shahabuddin Haque, and Professor Dr. Shafiquillah Hasan Chaudhuri aided by a group of anesthetists and assistant surgeons work tirelessly, sometimes up to eight hours at a stretch. Alongside them, contributions of Dr. Mohammad Gumaizuddin, Dr. Nazrul Haque, Dr. Abdul Hossain, Dr. Md. Akhtar Hossain, Dr. Bashir Ahmed, and Dr. Syed A. Hossain are, of course, extremely commendable. Like every year, Dr. Ron W. Miles, a noted British plastic surgeon and a longstanding friend of ASF, did not miss his trip to Bangladesh last year.

Permanent physical disfigurement and psychological trauma are something that every survivor has to endure with in the aftermath. Since acid burns skin and tissues underneath, it causes permanent loss of eyesight and hearing, and irreversible damage to hands and other joints of those who had acid attacks. Lessening physical disfigurement and ameliorating permanent disabilities require a number of reconstructive and plastic surgeries. Length of patient's stay at hospital may vary between one and three months depending on the severity of burn. It does not end there. The survivors have to return for check-ups and follow-up treatment for several years after release.

Since most of the victims cannot afford burn treatment that is quite expensive and the public hospitals lack the essential medical facilities for burn patients, the ASF concentrate much of its resources on offering the poor survivors proper and timely treatment. The foundation is committed to ensuring free prompt and quality treatment including skin grafting and reconstructive surgical procedures that may take several dedicated sessions by highly qualified local and foreign surgeons. Besides, the ASF supplies free medicines, bandages, food and other essentials, and accessories like pressure garments and splints for smoother healing of the wound.

Pathological tests, blood transfusion and physiotherapy too do not cost anything at ASF Hospital, Dhaka. The ASF recommends that a family member accompany the survivors to give psychological support; it arranges for the minor children to be with mother under treatment so they could understand her conditions. The foundation bears the cost for the relation who attend the survivor. Now ASF Hospital can treat over 600 acid survivors a year. But the number of patients is growing every year, placing the necessity for more capacity. Last year, 884 victims received treatment here.

Since its beginning in 2001, several hundred patients admitted to the 30-bed ASF Hospital. The total count is 822 (same patients could be counted more than one time).

| Patient Admission at ASF | 225 |
| Outdoor Patient | 459 |
| Number of Operation | 154 |
| Physiotherapy | 143 (2,175 sessions) |
| Average Patient Stay In ASF | 20 days |
PSYCHOLOGICAL SUPPORT SERVICE

Anti-attack leaves a victim reeling from a severe psychological trauma. Their lives would never be the same. In a society like the Bangladeshi where modesty features as a virtue, the victims suffer a loss of self-esteem and lack of confidence. Besides the community and sometimes even the family tend to isolate the victim and often cause the survivors self-esteem plunge to a new low. The Psychological Support Service (PSS) wing of the ASF works to help the victims overcome the trauma and understand the aftermath of the horrific act. It renders counseling and services for survivors and their family members and also the community the survivors often reach. ASF also trained six psychologists in basic counseling and then appointed as counsellors in ASA and partners organization.

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<tr>
<th>Type of Service</th>
<th>Number of Survivors</th>
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<td>Counseling</td>
<td>Single: 114</td>
</tr>
<tr>
<td></td>
<td>Group: 392</td>
</tr>
<tr>
<td>Psychotherapy</td>
<td>16</td>
</tr>
<tr>
<td>Reassurance activities</td>
<td>138</td>
</tr>
<tr>
<td>Music Therapy &amp; Art Therapy</td>
<td>525</td>
</tr>
<tr>
<td>Emotional Support</td>
<td>900</td>
</tr>
<tr>
<td>Community Clinic</td>
<td>700</td>
</tr>
<tr>
<td>Social skill training</td>
<td>75</td>
</tr>
<tr>
<td>Total</td>
<td>2441</td>
</tr>
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The single last year provided one-to-one counseling to 10 survivors and family and group counseling to 254 survivors. Besides psychotherapy, music therapy and art therapy was arranged for 87 survivors.

The PSS started recreational activities for about 100 survivors throughout the year. It helps the injured recuperate their psychological health and have life back on track. In this way, they could also overcome adverse psychological effects of living day by day. Throughout the year, the Foundation organized a number of indoor cultural programs for the survivors at its hospital. Giving psychological support to the victims is indeed a hard job. But most managers and NGO programmers had to receive technical supervision for a clinical psychologist to maintain the counseling standard and prevent their emotions.

SUCCESS OF FOUR WATER CAMPAIGN

Sharmi Ahme, bullied from Feni, had no option but to drink salty water. She never knew the impact of salt water on her body. She was left in the dark and had to face the consequences. As a result, she was admitted to the Jibon Tasso hospital for 10 days and needed to receive follow-up treatment.

Though the project ranks slower than expectations, the ongoing campaign of the ASF on creating huge quantity of water at home immediately after the attack is making a significant difference.

The patients who pour a huge quantity of water at their burnt body parts recover quickly. Observing the patients of two kinds—those who used water immediately after the attack and who didn’t—has been seen that the former recover without surgery.

Ruma Begum of Mirpur was attacked in 2009. She sustained burn injury on 30% of the body—on her back and chest. Her family and neighbors knew about pouring water campaign and did so immediately after the attack. Admitted to Jibon Tasso, Ruma recovered within 20 days and did not need any surgery.

“Her mother was superfebrile, but her skin was not affected” said Dr. Palash Kamat, Manager Hospital Services of Jibon Tasso Foundation.

Case of Sharmi Ahme, bullied from Feni, was opposite as she was not poured water immediately after the attack.

Sharmi needed reconstructive surgery as 20 percent of her back skin had a thick callous-like lesion. In the first phase of her treatment, Sharmi had to stay at the Jibon Tasso hospital for 40 days and needed to receive follow-up treatment.
ACTIVITIES TARGETING JUSTICE OF ACID VIOLENCE CASES:

Since the 1970s, acid attacks have been increasing in Bangladesh, and a significant number of the victims are women and children. The government has been slow to address this issue, despite the fact that it has been documented by numerous organizations. The impact of acid violence on victimization is severe, and it is not uncommon for the victims to face physical and psychological trauma. The ASIF has been working on providing legal aid and assistance to acid attack survivors to ensure that they receive justice.

Lobbying the government to get the ASIF help for different departments to regulate the trade and usage of corrosive materials. The ASIF also provides legal aid to the victims who are facing difficulties in court proceedings. The ASIF has been successful in getting convictions for acid attack cases. The ASIF has been working with local authorities to raise awareness about the dangers of acid attack.

In 2009, a total of 10 people were convicted in acid attack cases. According to data collected from different courts, it was found that the courts handed down punishment to 107 people in 20 years since 2000. In 2009, the number of convicted persons was 25, which is the highest number of convictions in recent years.

ACTIVITIES TARGETING SOCIAL REINTEGRATION OF ACID SURVIVORS:

The ASIF has been providing various activities to help acid attack survivors reintegrate into society. These activities include educational support, vocational training, and job placement.

The ASIF has been working with local authorities to raise awareness about the dangers of acid attack. The ASIF has also been working with local authorities to raise awareness about the dangers of acid attack. The ASIF has been working with local authorities to raise awareness about the dangers of acid attack. The ASIF has been working with local authorities to raise awareness about the dangers of acid attack. The ASIF has been working with local authorities to raise awareness about the dangers of acid attack.
Few examples of successful burn care (from acute to rehabilitation to recovery) in Bangladesh.
CASE STUDIES

Neela had a break of study for two years. She had to go a
terrible time since her husband passed away (she has two
children and a daughter). Now her life has changed
forever. She has to take treatments for months and
undergo surgeries for several times. But psychological,
medical and financial support of the ASF encourages her
to dream for life again.

"I used to think I am not part of the society. But now I don’t have
that inferiority complex," said Neela. She was wearing a veil as
she does that whenever she goes out. Only a small portion of her
face was uncovered. Her eyes were glowing in confidence.

Under the project, Neela has got medical treatment and educa-
tional as well as mental support from ASF. Leaving behind all
the bad times Neela started her studies again. Now she is a student
of University of Madras Women’s College in Chennai. ASF provides
stipends to continue her education.

"Before launch of this project, some of our neighbors used to
blame me for the incident. Neela said that community
work under the projects changed the situation. "Now I find people
around me more cooperative," she commented. "The council
i gave me emotional and moral support and I found these
support increased the pace of my work," she said. "I used to be
mentally very disturbed after that terrible incident, but the
therapy helped me overcome that situation," she added. Now
Neela is a member of "Survivors Network." She sold her hands
towards the other survivors. She set an example to other sur-
vivors. "Some organizations work in the society in this way. It will
help many girls like me to dream again," she expressed her hope.

IT HELPS NEELA TO DREAM AGAIN!!

Neela

Sex: Female

Educational Qualification: Graduated in Business Studies

Marital Status: Divorced (husband pre-deceased)

Accident Attack: District: Chennai

Monzu

Age 48
Sex: Male

Educational Qualification: Eighth grade

Marital Status: Married father of a daughter and son

Village: Chandrapura, Upatadi district

District: Dibrugarh

"Accident Attack: May 15, 1985

Just beside Chandrapura High School is a concrete and tarmacked small fort along the
Bank of Chandrapura river mostly used
The fort is outside of the main home yard.
Monzuul Alam and his young family of two
children and wife live in this small hut. Not only
there, his brother, wife of Monzuul, keeps their
brother and his wife are the most valuable asset of this
poor family, at this brittle time. They cannot take any risks of stealing the cash. This means so much to them.

"Monzuul said, "I have to take medicine every day. My brother sold out a large portion of his property for
the treatment of his son since he was attacked. Monzuul survived with a disfigured face and blind eyes. But
he could not leave home to earn money. I used to run a small medical shop at this yard with the help of my father.
But my father died three years ago. And slowly I ran out of capital and had to stop it," he said. I did not have
any means of income." Later ACF and NRC Foundation stepped forward to help me with cash money
and medical treatment. "They arranged for me a piece of land, 27 decanal, where I am cultivating this year
with the help of workers." With the rest of the money, I bought a taxi at Tk 2000. With the cash, I am earning
the taxi price has already been offered at Tk 3,500. "I might sell it because I will have to work in the rice
market. I don't know what to do. I am just a worker."

Sometimes people from ACF and NRC came to talk to me.
"I feel really good. I must say now I am in a better position than earlier," he added. The attackers of Monzuul
wore from the same village. Three of the perpetrators are serving life terms in jail, while another served a jail
term for 10 years. Many people, especially relatives of these perpetrators, do not take him very easily.

"They used to be reluctant to come to me even on the same name. I am in a mosque. But now I feel they are behaving
better," he said. Abdul Malik, cousin of Monzuul, is the only friend of him.

Asked about the situation of Monzuul, Malik said he used to be impressed himself in this house. But now he
goes to mosque with me. He also feels good as his father is supportive from ACF. The local ACF chapter
of ACF often sends him some support. But it’s very much better.

"I think we will do better. We have come to the stage of helping injured people. Some training for his wife could help him as well. Monzuul will never forget the date 15 May 1983, the day he came under the acid attack. ACF stepped forward to help Monzuul after 23 years of the attack. None other government or non-government organisations extended a helping hand to Monzuul all these years.

Asked Monzuul said, "ASF should have started their journey long before my accident. Then my life could have been much better now."
**ASF HAS GIVEN ME A DIGNIFIED LIFE**

Taslima

Age: 30 years  
Sex: Female  
Marital Status: Widow with two children  
Educational Qualification: Literate  
District: Sisganj

Taslima Begum, 30, a widow with two children had no options but staying at the house of her in-laws. Her brother-in-law took good care of her son Rahul Amin, 15, and her daughter Samima Begum, 7. But everything changed when Selim Mia, a neighbour poured acid on her as she refused to marry him. “All of my in-laws started pinning the blame on me for the incident,” said Taslima. As a result, she had to return to her father’s house to reunite with her father’s family. “But my brothers are poor; They did not have any means to continue my treatment and run the case I filed against Selim Mia,” she said.

The case was settled through a village arbitration where the perpetrator Selim Mia was fined Tk. one lakh. “But we had to spend more than that to run the case and also for my treatment,” she said.

Everybody around used to treat Taslima as if she had committed a crime. “I did not know what to do. I used to think that I would commit suicide,” Taslima described her helpless situation.

Indicating the poor counsellors, Taslima said they came at this stage.

They encouraged me to dream further and live life with dignity. Even they talked with my family members and the neighbors. They helped me and supported me. They arranged money and gave help to get food. They even helped me to pay the legal fees.

Now, Taslima’s son Rahul Amin is going to school but not her daughter Samima. Both of them are staying with their uncles. They often visit their mother. “Now my situation has really improved, God bless them,” Taslima said.

**SURVIVOR LUNA HAS TRANSFORMED HERSELF INTO A SOCIAL WORKER**

Luna

Age: 25 years  
Sex: Female  
Educational Qualification: SSC  
Marital Status: Divorced (First husband perpetrator) Married again  
District: Sisganj

Luna was enriched and grief-stricken. But those days are now over. Now she works as an inspiration to other survivors in Sisganj district. Luna’s ex-partner father set her marriage when she was only 15 years old. But her gambler husband did not want to understand her teen mind. Within one year of marriage, he wanted to sell all her ornaments my father gave me during our marriage. But I did not let that happen and he poured acid on me,” said Luna. “The family of the perpetrator was influential. He was arrested but was released on bail.”

“My father preferred my treatment than running the case.” The situation was better when Luna came in contact with ASF. She was paid for her rest of the treatment including several plastic and reconstructive surgeries in ASF Hospital completely free of cost. She got married again and now happily living with her second husband Rashid Ahmed and two-year-old son Lutfi Momin Reza.

ASF appointed Luna as a peer counsellor in 2009 to provide door-to-door psychological support to survivors and their family in Sisganj District. “Initially, it was really very tiring job.” describe Luna as her job was meeting 15 survivors in two upazilas – Bishushon and Shabazpur – twice a month. “I personally talk with them as well as their family members and the community,” she said. All of the survivors were mentally stressed and poverty stricken. Their family used to consider the survivors as a burden. “To them, I tried to turn their mood to make them feel happy and to feel like a normal person.”

Now Luna is a social worker. She works at a local NGO and she has been a peer counsellor.”

But now with the help of ASF, she has transformed herself not only as a survivor but also as a social worker.
ASF HELPED BULBULI LIVE LIKE OTHERS IN THE SOCIETY

Bulbuli
Age: 30
Sex: Female
District: Bogra

Not others than Bulbuli’s husband threw acid at her after a few years of her marriage. At village celebrations, she was compensated with $1,000 as the price of her spoiled face. But Bulbuli could not use the money for herself; she did not buy any property with that money but want she could use it for her treatment or saved it for the education of her children’s future. She had to give the money to her brother-in-law, husband of her younger sister. Bulbuli’s younger sister was sent back to her father’s house with a demanded dower, but her father did not have any means to entertain that demand. When she came back to our parents house after the accident, everybody used to throw negative anything towards her. Bulbuli said, “Everybody used to ask me the same question about the accident and how I felt.” Bulbuli replied, “You stopped going out of my house. Even I tried to commit suicide once but gave up the idea for the sake of my children.” Why parents used to shun me saying: I was not the only one to have that fate.

Bulbuli did not have any income to feed her children and bear their expenses. She was becoming weak and impatient day by day. ASF started helping her with logistics, mental, and medical support at this stage. They gave her cash money and also bought her a sewing machine as a means to earn money. She said, Bulbuli paid all was bought by the society. ASF did everything what they had committed doing for her. Bulbuli said when the caregiver of ASF did a great support for her. She feels ASF helped her to live with dignity. She said, “I want to live like other people in the society. I want to lead my life independently.”
ASF PARTNER’S ACTIVITIES 2009

ASF is concentrating its activities at grassroots level through partner NGOs. The partner organizations of ASF are: PAWO in Narsingdi, AUN Comilla in Comilla, Jagriti Chetra Foundation in Jessore, Jagtit Shiksho in Kushtia, Jagriti Sanghatna in Sylhet, Shakhola Welfare Organization in Sylhet, Light House in Bogra, PRWBD Bangladesh in Dinajpur, Manoja Mukti Sanghatna in Shariatpur, Co-Operative Trust in Sylhet, SAMS in Sylhet and BRAC to cover 64 districts. In the selected districts where most acid attacks take place, ASF’s partners activated pressure groups involving local human rights activists, journalists, teachers and survivors of acid attacks. ASF’s partners also became members of the District Acid Control Committee (DACC) and continued to play active role to activate DACCs to meet survivors’ medical, legal and economic needs and to control illegal use of acid.

To raise awareness against acid violence, ASF’s partners are implementing pressure group meetings and panel discussions, arranging mass gathering of survivors, government officials and civil society groups at district level, meetings and workshops with journalists to media advocacy and meeting with acid victim and their association to identify ways to control illegal use of acid. ASF’s partners are also implementing community level meeting to enhance survivors’ better acceptance in the community and to prevent further attack.

As a result of ASF and its partners’ lobby 54 survivors of these ten districts received NACC’s fund for rehabilitation.

Images:
- Meeting with Acid Seller & victim, JIS, Khulna
- Workshop between ASF & BRAC
- Community Meeting, COAST Trust, Bida
- School Campaign, JCI, Jessore
- Sector Meeting, JCI, Comilla
- Sector Meeting, PRP, Narsingdi
- Sector Meeting, ROHS, Dinajpur
- Sector Meeting, Light House, Bogra
- Sundwea Gathering, SAMS, Natore
- IWAS, SYMP, Sylhet
- IWAS, SYMP, Sylhet
- Monabi Mukti Sanghatna (MWS)
MEDIA CAMPAIGNS AND MATERIAL DEVELOPMENT

The SDF develops different promotional materials working to discourage people from harming acid on others. The organizations prepare and distribute pamphlets, and leaflets and displayed banners at the different day programs. Several electronic media televisions and talk shows raised issue on acid violence issue on the International Women's Day. Name of the TV channels are Pro, Ne, Pro, ARD Bangla and ETV.

Besides, SDF published advertisements in different national dailies. Several news reports were published about the acid related violence and follow-up of the tragic incidents.

PUBLICATIONS

The popular newsletter of the SDF, VOICE, documents its activities and stories of the victims, survivors and those fighting against the cause. The SDF distribute VOICE among the target groups.

The 4SF have developed and distributed different awareness raising materials suitable for semi-literate and illiterate groups people. Throughout the year, the partners NGOs of the 4SF distributed and used these materials while campaigning against violence.
CAPACITY BUILDING & TRAINING

ASP is continuously building its own capacity to strengthen the capacity of the partners, survivors and professionals including doctors and nurses, police and public prosecutors, social welfare officers and local journalists to achieve its mission to help and survivors rebuild their lives and to stop acid violence by 2015. ASP is also engaging experts to develop training modules, training materials and to facilitate specialized training programs.

Capacity building of health professionals:

ASP continued to provide Essential Burn Care Course for the local level doctors and nurses to enhance prompt and effective first aid for the acid victims. This knowledge and skills also help trained health professionals to provide better burn care to other types of burn injured people of the country. In 2009 Interburns for second time provided the TOT to develop local resource group to implement this course around the country. A total number of 216 doctors and nurses from 70 hospitals in 5 districts participated in this course. The course was coordinated by Professor AIM Jale and facilitated by ASP’s doctors and physiotherapists. Participants of this course mentioned in the post-evaluation form that for the first time they received such an interactive course on burns care. This course not only increasing their knowledge but also inspiring them to find ways to provide best treatment in limited resources.

Capacity building of the survivors:

In the year 2009 ASP focused on developing training modules for enhancing self skills of the acid victims to help them regain confidence to face the social barriers that they encountered in everyday life. A total number of 25 survivors received this training facilitated by the professors of the Clinical Psychology Department of Dhaka University.

ASP also developed a leadership training program for the survivors. A total number of 104 survivors received this three day long residential training where they followed a process to analyze the socio-cultural aspect of acid violence and its medical, legal, social and economic consequences and ways to live a life with dignity.

ASP also implemented basic counseling training for selected survivors to develop them as peer counselors/educators. After this training 14 survivors are actively engaged in providing psychosocial support to acid survivors and their family in ten selected districts.

Capacity building of local NGO’s:

In 2009, ASP developed a staff of its Partner NGOs as local resource group to work on parallel conflict management to prevent violence (domestic and community level) and psychosocial support services for better reintegration of the victims of gender based violence. ASP also developed education materials to help the local resource group to lead community meetings on these issues. These training and training materials were highly appreciated by the participants and the partner NGOs.

ASP also arranged participatory monitoring and evaluation training for its staff and partners together to develop result based monitoring tools and system.

ASP since its inception in 1998 is working with BRAC on notification and referral of acid attacks and legal and rehabilitation support to survivors. In 2009 a joint review and planning workshop helped these two organizations to identify areas for effective coordination resulted to help acid survivors better access to services at local level.
On the eve of its 10th anniversary, the Foundation arranged the first International Conference of Acid Survivors. Survivors and people working for the cause from Pakistan, England, Uganda and Cambodia attended the conference along with 500 local survivors. The conference noted that the acid violence has taken place in many countries of the world but Bangladesh was the first to act. The situation of the acid victims is ever worse in Pakistan due to the absence of proper laws to try the criminals.

The day's proceedings started with a colorful procession from the Fine Arts Institute of Dhaka University. The procession ended at the Institution of Engineers Bangladesh.

Social Welfare Minister Enamul Huq Mostafizur Khan was the Chief Guest during the inaugural session of the daylong conference while Home Minister Sahara Khatun was the chief guest for the concluding session.

The opening & concluding session of the conference was chaired by ASI acting Chairperson Parvin Malhuardi British High Commissioner Stephen O'Brien, Canadian High Commissioner Robert Beadle, plastic and reconstructive surgeon Ronald Williams Hills, Chief Child Protection (section Unit 156) Bangladesh Rose Irene Fagavaro and Editor of the Daily Prothom Alo Motii Rahman spoke on the occasion. Later, acid victims developed the Dhaka declaration and lit candles. A cultural program was also held.

Zero tolerance against violence against women and girls including acid violence at all levels.

- Enhance community capacity for peaceful resolution of local conflicts (conflict at family level, community level).

- Government and NGOs should take appropriate measures for changing social attitude towards women and girls for preventing discrimination and violence against women.

- Government and NGOs should take appropriate measures for changing social attitude towards disfigurements to enhance inclusion of acid survivors at all levels, family, community and society.

- Government and NGOs should take holistic approach to deal with acid violence and violence against women issues.

- Government should take appropriate measures for decentralizing the burn treatment facility across the country.

- Government should ensure effective implementation of acid laws, including security and safety of the victim and witness, appropriate investigation, speedy and effective trial, execution of verdict, legal aid fund.

- Government and NGOs should take appropriate measures for economic rehabilitation of the acid survivors including education, skill development training, loan/grants for income generation, job and easy access to land.

- Government should take awareness raising campaign appropriate for different groups (men & boys, professionals, family and community) regarding Masculinity-Disfigurement-Legal and Media.

- Government and civil society organizations should work together to address the cause and effect of acid violence.
First International Conference Photo Feature

Survivor, Bangladesh
Survivor, Uganda
Survivor, Pakistan

Survivor, Cambodia

Dr. Jufin Mahtani
Chairperson
Acid Survivors Trust International (ASTI)

Ms. Sumana Niz, ASF - Pakistan

Mr. Motlui Rahmoun
Guest Reader
United Nations

Dr. Jim Gelligly
IMF Cambodia

Representative, Uganda

Mr. Stephen Evans
High Commissioner
The British High Commission

Ms. Rosae Ann Fajardo
Chief, Child Protection Services
UNICEF Bangladesh

Mr. Robert Boodle
Director-Designate
Bangladesh Programme of the Canadian High Commission (CPKDA, Canadian High Commission)

Opening & closing session of First International Conference

Opening Session was graced by the Honorable Minister Mr. Enamul Haque Motala, Ministry of Social Welfare as chief guest.

Closing Session was graced by the Honorable Minister Advocate Sahara akhtahat, Ministry of Home Affairs as chief guest.
Over 95% of burn injuries worldwide occur in low- or middle-income countries: 20% of these affect children.


Nearly 4 million women in low-income countries are severely burnt each year – a similar number to those diagnosed with HIV & AIDS.


More school-age children in low-income countries die of burns annually than of tuberculosis or malaria.

WHO (2002), Deaths by age, sex and cause for the year 2000, Children 5-14 who die of burns by age: 5, 6th of tuberculosis; 9, 5th of malaria; 14, 4th of measles.

The epicenter of burn injuries is South East Asia. There, three times as many women are burnt than contact HIV & AIDS, and women are 17 times more likely to be burnt than those in high-income countries.


The Forgotten global crisis of burns.

In India, burns are the third largest cause of disease and the seventh leading cause of death among school children.


It is estimated that the related burn account for 10 million disability adjusted life years (DALY’s) lost globally annually – this statistic does not include the disfigurement that burns so often cause.


As a recognition of distinctive performance of ASI, the Executive Director of ASI Ms Monita Rahman received two awards last year. Ben Ki-moon, the Secretary General of the United Nations, handed over the prestigious American for UNHRA Honorary Award 2009 to Monita Rahman in New York on October 5.

Monita Rahman also received President Top 10 2009, a local award given to women for their outstanding achievements in their respective fields. In the Social Welfare Category, Monira received it last year for her work as an executive director of ASI.
### Acid Survivors Foundation

#### Balance Sheet
As at December 31, 2009

<table>
<thead>
<tr>
<th>Amount in Taka</th>
<th>As at December 31, 2009</th>
<th>As at December 31, 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Property and Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fixed Assets</td>
<td>3</td>
<td>2,043,812</td>
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<td>Current Assets</td>
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<tr>
<td>Inventory</td>
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<td>462,433</td>
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<tr>
<td>Investments</td>
<td>49,902,499</td>
<td>41,003,526</td>
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<tr>
<td>Advances and deposits</td>
<td>5</td>
<td>5,527,885</td>
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<tr>
<td>Cash and cash equivalents</td>
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<td>19,830,495</td>
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<tr>
<td>Accounts receivable</td>
<td>7</td>
<td>97,815</td>
</tr>
<tr>
<td>Loss - Current Liabilities</td>
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<td>75,951,688</td>
</tr>
<tr>
<td>Provisions for Expenditure</td>
<td>8</td>
<td>211,722</td>
</tr>
<tr>
<td>Accounts Payable</td>
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<td>211,722</td>
</tr>
<tr>
<td>Net Current assets</td>
<td></td>
<td>75,359,424</td>
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<tr>
<td>Financed by</td>
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<td></td>
</tr>
<tr>
<td>Endowment fund</td>
<td>9</td>
<td>10,641,459</td>
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<tr>
<td>Emergency fund</td>
<td>10</td>
<td>7,317,310</td>
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<tr>
<td>General purpose fund</td>
<td>11</td>
<td>6,386,627</td>
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<tr>
<td>Fixed assets replacement fund</td>
<td>12</td>
<td>1,876,606</td>
</tr>
<tr>
<td>Land purchase fund</td>
<td>13</td>
<td>3,074,078</td>
</tr>
<tr>
<td>Rehabilitation fund</td>
<td>14</td>
<td>2,542,762</td>
</tr>
<tr>
<td>Centre project fund</td>
<td>15</td>
<td>2,292,361</td>
</tr>
<tr>
<td>Pressure garments fund</td>
<td>15</td>
<td>2,221,099</td>
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<tr>
<td>Fund Account</td>
<td>17</td>
<td>29,670,204</td>
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<tr>
<td>Secured Loan</td>
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<td>4,060,060</td>
</tr>
<tr>
<td>Shareholders' Funds</td>
<td></td>
<td>27,210,926</td>
</tr>
</tbody>
</table>

**Footnotes:**
1. Auditors' Report - Page 1
2. The annual notes form part of the financial statements.

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### Acid Survivors Foundation

#### Income and Expenditure Statement
For the year ended December 31, 2009

<table>
<thead>
<tr>
<th>Expenditure</th>
<th>Year-ended December 31, 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td>Note</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants for research fund</td>
<td>18</td>
</tr>
<tr>
<td>Donation to individuals</td>
<td>18</td>
</tr>
<tr>
<td>Donation from Organizations</td>
<td>20</td>
</tr>
<tr>
<td>Other Income</td>
<td>21</td>
</tr>
<tr>
<td>AGP Overhead Cost Recovery from Donor's Fund</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Expenditure</td>
<td>Administrative and general</td>
</tr>
<tr>
<td></td>
<td>Management &amp; Internal Operation</td>
</tr>
<tr>
<td></td>
<td>Personnel expenses</td>
</tr>
<tr>
<td></td>
<td>Communication</td>
</tr>
<tr>
<td></td>
<td>Utilities</td>
</tr>
<tr>
<td></td>
<td>Travel &amp; subsistence expenses</td>
</tr>
<tr>
<td></td>
<td>Program</td>
</tr>
<tr>
<td></td>
<td>Support to Survivors</td>
</tr>
<tr>
<td></td>
<td>Medical support program</td>
</tr>
<tr>
<td></td>
<td>Research and education program</td>
</tr>
<tr>
<td></td>
<td>Legal unit</td>
</tr>
<tr>
<td></td>
<td>Psychosocial support unit</td>
</tr>
<tr>
<td></td>
<td>Increase Organizational Capacity</td>
</tr>
<tr>
<td></td>
<td>Human resources development</td>
</tr>
<tr>
<td></td>
<td>Increase organizational capacity</td>
</tr>
<tr>
<td></td>
<td>Professional &amp; Academic</td>
</tr>
<tr>
<td></td>
<td>Other expenses</td>
</tr>
<tr>
<td></td>
<td>Repatriation Charges</td>
</tr>
<tr>
<td></td>
<td>Financial charges</td>
</tr>
<tr>
<td></td>
<td>Fund raising unit</td>
</tr>
<tr>
<td></td>
<td>Total Expenditure</td>
</tr>
<tr>
<td></td>
<td>Excess of Income over Expenditure during the year</td>
</tr>
</tbody>
</table>

**Footnotes:**
1. Auditors' Report - Page 1

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Coordinator Finance & Accounts (Page 45)
A. Qasem & Co. Chartered Accountants
Dated: June 30, 2010

Executive Director
A. Qasem & Co. Chartered Accountants
Dated: June 30, 2010
## Acid Survivors Foundation

**Receipts and Payments Account**

For the year ended December 31, 2009

### Amount in Taka

<table>
<thead>
<tr>
<th>Year ended</th>
<th>December 31, 2009</th>
<th>December 31, 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Receipts</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Opening Balance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash in Hand</td>
<td>115,524</td>
<td>115,452</td>
</tr>
<tr>
<td>Cash in Bank</td>
<td>10,012,090</td>
<td>14,460,008</td>
</tr>
<tr>
<td><strong>Project Donations</strong></td>
<td>39,824,982</td>
<td>41,578,519</td>
</tr>
<tr>
<td>Donation from Organizations</td>
<td>1,754,081</td>
<td>6,008,846</td>
</tr>
<tr>
<td>Donation from Individuals</td>
<td>2,278,638</td>
<td>1,860,696</td>
</tr>
<tr>
<td><strong>Self-financing Project</strong></td>
<td>57,808,014</td>
<td>50,029,060</td>
</tr>
<tr>
<td>Pressure garments &amp; tailoring</td>
<td>719,918</td>
<td>1,062,260</td>
</tr>
<tr>
<td>Contain Project</td>
<td>1,090,468</td>
<td>2,948,370</td>
</tr>
<tr>
<td><strong>Other Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recovery from Overhead</td>
<td>43,313</td>
<td>223,818</td>
</tr>
<tr>
<td>Realization of advances and deposits</td>
<td>506,281</td>
<td>62,216</td>
</tr>
<tr>
<td>Investment Income &amp; other receipts</td>
<td>6,644,382</td>
<td>4,011,070</td>
</tr>
<tr>
<td><strong>Total Receipts</strong></td>
<td>81,879,928</td>
<td>77,484,513</td>
</tr>
<tr>
<td><strong>Payments</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support to Survivors</td>
<td>17,799,584</td>
<td>17,620,031</td>
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<tr>
<td>Medical support</td>
<td>3,078,533</td>
<td>2,714,466</td>
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<td>Payroll support unit</td>
<td>3,424,435</td>
<td>3,543,066</td>
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<td>Legal support</td>
<td>16,296,670</td>
<td>6,652,416</td>
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<tr>
<td><strong>Self-financing</strong></td>
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<td></td>
</tr>
<tr>
<td>Pressure garments &amp; tailoring</td>
<td>402,413</td>
<td>402,413</td>
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<tr>
<td>Contain Project</td>
<td>1,720,261</td>
<td>1,977,061</td>
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<tr>
<td><strong>Total Payments</strong></td>
<td>21,144,362</td>
<td>22,508,482</td>
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<tr>
<td><strong>Closing Balance</strong></td>
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<tr>
<td>Cash in hand</td>
<td>160,635</td>
<td>115,234</td>
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<tr>
<td>Cash at Bank</td>
<td>1,662,852</td>
<td>1,662,650</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>196,001,212</td>
<td>171,608,312</td>
</tr>
</tbody>
</table>

### Administrative and General

<table>
<thead>
<tr>
<th>Year ended</th>
<th>December 31, 2009</th>
<th>December 31, 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Management &amp; Internal Operation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personnel Costs</td>
<td>7,207,277</td>
<td>7,074,120</td>
</tr>
<tr>
<td>Running Costs</td>
<td>2,276,637</td>
<td>2,441,046</td>
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<td>Transport Costs</td>
<td>430,920</td>
<td>307,564</td>
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<tr>
<td>Overhead</td>
<td>481,510</td>
<td>220,818</td>
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<tr>
<td><strong>Increase Organizational Capacity Building</strong></td>
<td>1,190,152</td>
<td>730,317</td>
</tr>
<tr>
<td>Professional &amp; Audit Fees</td>
<td></td>
<td></td>
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<tr>
<td>Human Resources Development</td>
<td>176,980</td>
<td>15,072</td>
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<tr>
<td>Capacity Development Training</td>
<td>486,494</td>
<td>57,821</td>
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<tr>
<td><strong>Others</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment, Furniture &amp; Fixtures</td>
<td>335,000</td>
<td>1,000,523</td>
</tr>
<tr>
<td>Investment</td>
<td>6,680,886</td>
<td>10,332,904</td>
</tr>
<tr>
<td>Fund raising</td>
<td>90,930</td>
<td>456,196</td>
</tr>
<tr>
<td>Financial Charges</td>
<td>27,857</td>
<td>20,377</td>
</tr>
<tr>
<td>Advance payment</td>
<td>23,060</td>
<td>11,286</td>
</tr>
<tr>
<td>Payment against last year provision</td>
<td>526,240</td>
<td>exclusive</td>
</tr>
<tr>
<td><strong>Total Payments</strong></td>
<td>2,761,152</td>
<td>15,871,709</td>
</tr>
<tr>
<td><strong>Amount in Taka</strong></td>
<td>26,745,452</td>
<td>25,706,597</td>
</tr>
</tbody>
</table>

### Footnotes

2. The annexed notes form part of the financial statements.

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MITTED BY:
[Signature]
[Signature]

Chartered Accountant
Chartered Accountant

Date: June 30, 2010
I would like to send you my greetings on the occasion of the 10th anniversary of the Acid Survivors Foundation. I recall very clearly my visit to your Rehabilitation Centre on my visit to Bangladesh in 2002, when I met staff, trustees and survivors and was much impressed with the dedication of everyone in helping the survivors with medical treatment, rehabilitation, legal and moral support and other services. I understand since then you have gone on to develop a very successful prevention campaign.

I would like to congratulate everyone at ASF on their achievements. Not only do you continue to provide first-class services but the number of attacks has declined dramatically. Bangladesh is notable in that your successive Governments have acknowledged the problem of acid violence and worked with you to initiate effective action to combat it. This is a great credit to you all.

I know that acid violence is not confined to Bangladesh but is present in a number of other countries and that Acid Survivors Foundations based on your model have been established in Uganda, Cambodia, Pakistan, India and Nepal. Acid violence is a subject that is difficult to highlight, prevent and treat. Your expertise will have been of inestimable value to these organisations and the individuals whose lives they have saved and changed.

To trustees, staff and survivors of ASF I send my congratulations on your achievements and wish you success in your future endeavours to end the problem of acid violence.

From Her Royal Highness, Princess Anne

on the occasion of ASF’s 10th anniversary on 12 May 2009