



# Climate-Resilient SRHR Intervention Packages for Bangladesh

# Climate-Resilient SRHR Intervention Packages for Bangladesh

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# Background

- Climate-vulnerable areas of Bangladesh face recurring cyclones, salinity intrusion, flooding, drought, water scarcity, and displacement.
- Climate stresses undermine livelihoods, ecosystems, and essential health services.
- Women and adolescent girls face intensified impacts due to gender inequalities and limited mobility, heightening risks to their sexual and reproductive health and rights (SRHR).
- Climate Change and Health Promotion Unit of the Ministry of Health and Family Welfare (MoHFW) and Ipas Bangladesh jointly developed Climate-Resilient SRHR Intervention Packages to address these realities.
- The packages aim to mitigate climate impacts while strengthening resilience, equity, and dignity.



## **Climate Stressors Undermine Women's SRHR, Health, and Dignity: Evidence**

- **Menstrual Health Challenges**
- **Perinatal Health Challenges**
- **Unintended Pregnancy and Unsafe Abortion**
- **Gender-Based Violence (GBV)**
- **Sexually Transmitted and Reproductive Tract Infections (STIs/RTIs)**
- **Restricted SRHR Decision-Making and Agency**
- **Climate-Induced Migration and Vulnerability**
- **Early Marriage**
- **Interrupted SRHR Service Delivery**
- **Disruption of Public Health Services and Communication**
- **Interruption of SRHR Data Recording and Reporting**

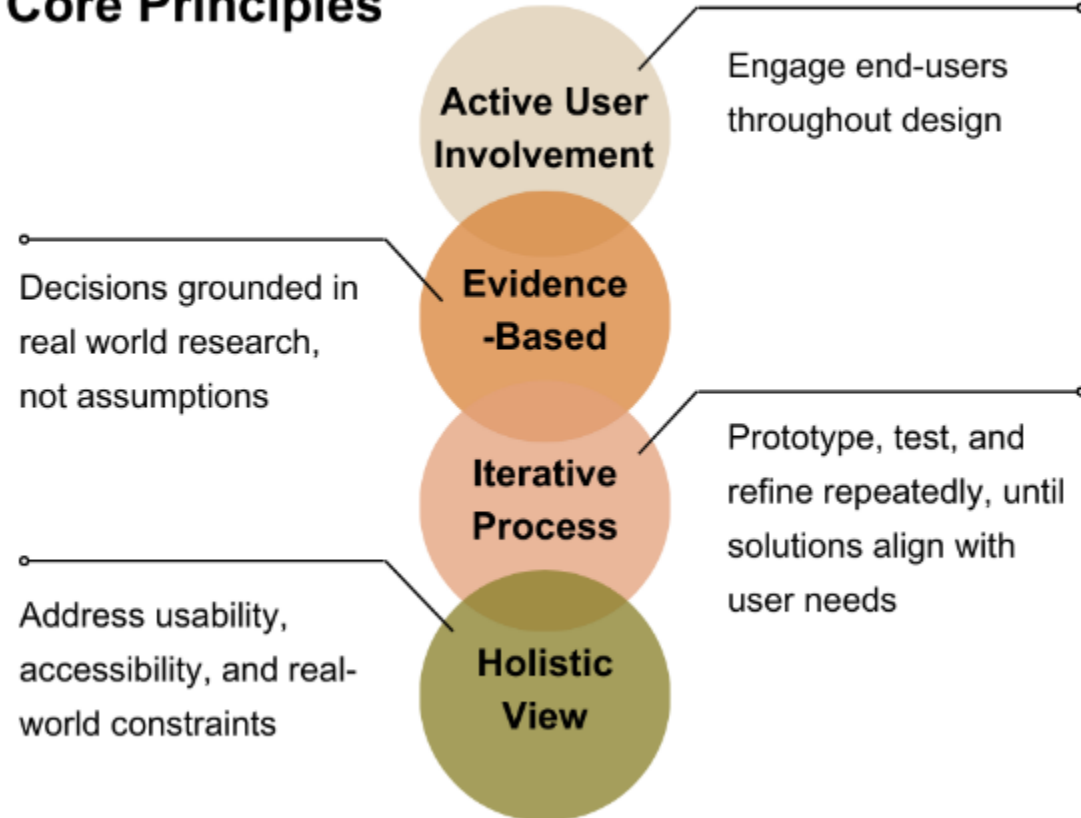
# Designing Climate-Resilient SRHR Intervention Packages



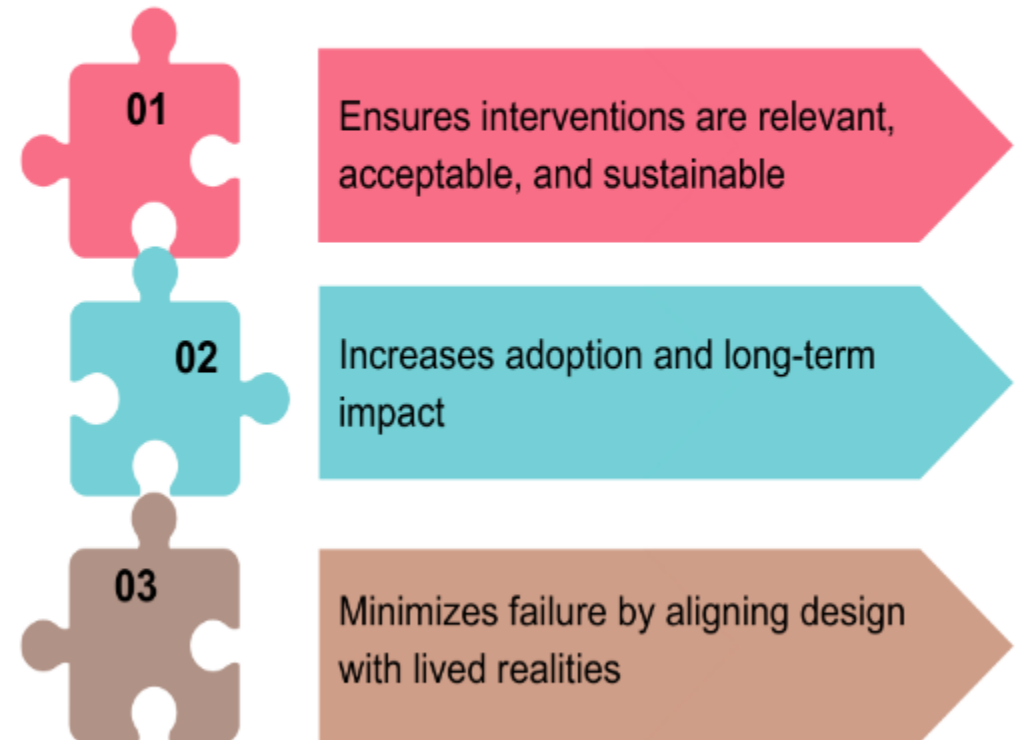
# User-Centered Design (UCD)

A systematic, iterative design methodology that prioritizes users' needs, experiences, and contexts at every stage of development.

## Core Principles



## Why It Matters for Interventions



# Evidence/documents/recommendations review and synthesis



**Evidence from Study**



**Literature Review**



**Identification of Problem Statements**



**Development of Guideline for Co-design Session**



**Identification of Potential Interventions**



## Five Rounds of Participatory Co-Design Sessions for Prototype Development

# Participants of Co-design Sessions

Category	Participants	Category	Participants
<b>Community Women</b>	<ul style="list-style-type: none"> <li>- 15–19 years</li> <li>- 20–24 years</li> <li>- 25–49 years</li> </ul>	<b>Community Health Workers</b>	<ul style="list-style-type: none"> <li>- Family Welfare Visitor (FWV)</li> <li>- Family Planning Inspector (FPI)</li> <li>- Assistant Health Inspector (AHI)</li> <li>- Family Welfare Assistant (FWA)</li> <li>- Health Assistant (HA)</li> <li>- Community Health Care Provider (CHCP)</li> </ul>
<b>Community Men</b>	General community representatives	<b>Health Service Providers (Upazila level)</b>	<ul style="list-style-type: none"> <li>- Upazila Health &amp; Family Planning Officer (UH&amp;FPO)</li> <li>- Resident Medical Officer (RMO)</li> <li>- Medical Officer, Maternal &amp; Child Health, Family Planning (MoMCH-FP)</li> <li>- Upazila Family Planning Officer (UFPO)</li> <li>- Senior Staff Nurse (SSN)</li> <li>- Midwife</li> <li>- Sub-Assistant Community Medical Officer (SACMO)</li> <li>- Statistician</li> <li>- Storekeeper</li> </ul>
<b>Local Key Stakeholders</b>	<ul style="list-style-type: none"> <li>- UP Chairman</li> <li>- UP Members</li> <li>- Selected Women Member</li> <li>- Imam</li> <li>- Purohit</li> <li>- Teachers</li> <li>- Local NGO workers</li> <li>- DMC members</li> <li>- CPP members</li> </ul>		

# 1<sup>st</sup> Round Co-design Sessions (Dacope, Khulna):

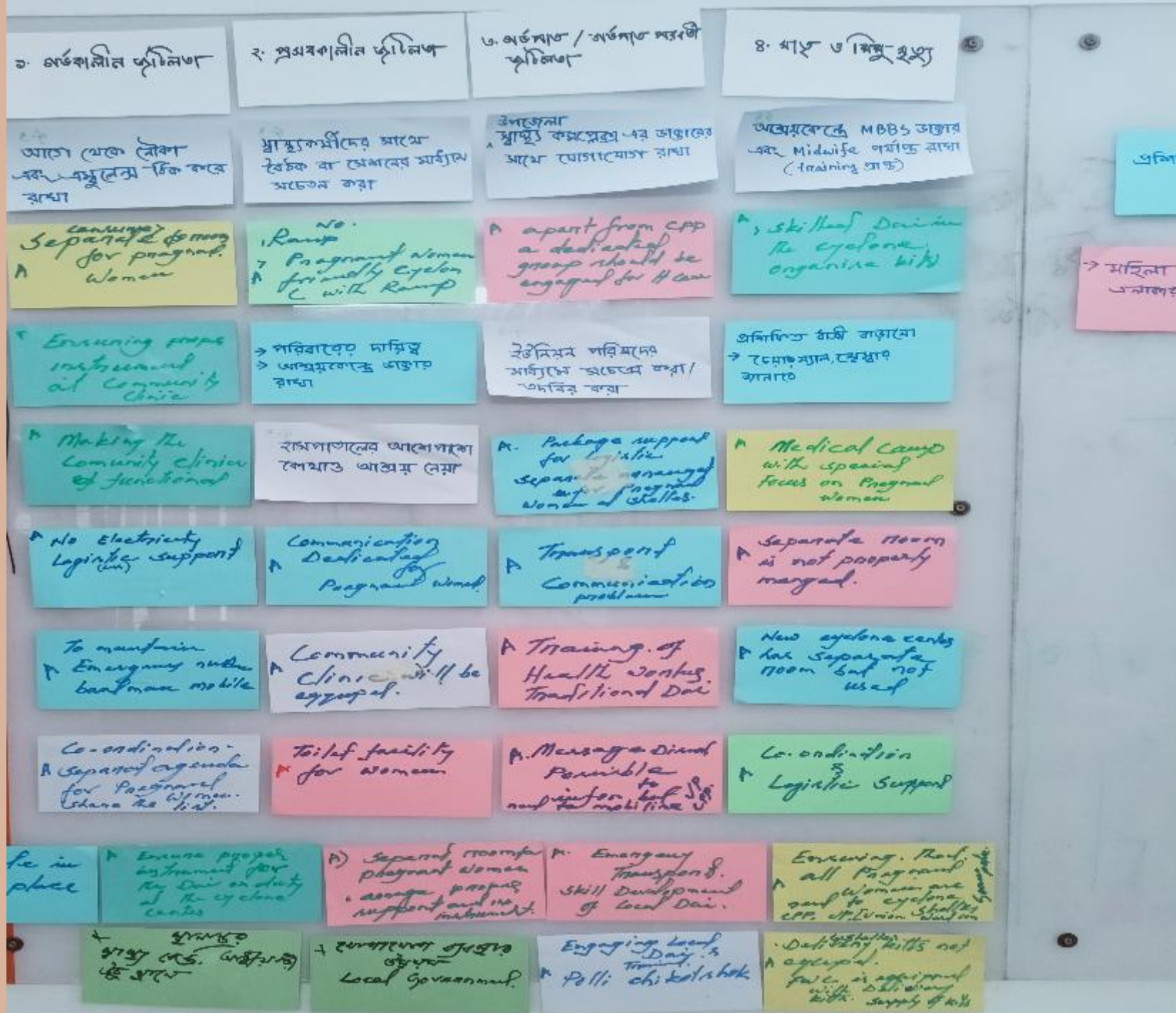
## Solution Generation and Low-Fidelity Prototype Development

- Seven co-design workshops with seven groups of stakeholders
- Stakeholder groups:
  1. Adolescent girls (15–19 years)
  2. Young Women (20–24)
  3. Women between 25–49 years
  4. Male community members
  5. Local key stakeholders
  6. Community health and FP service providers
  7. Upazila level health and FP service providers

\* Each workshop included seven to sixteen participants.



# Low fidelity prototype development based on the findings from the co-design sessions



# 2<sup>nd</sup> Round of Co-design Session:

## Feedback on Low-Fidelity Prototype and Medium-Fidelity Development

Six co-design workshops were conducted with the similar stakeholder groups:

1. Adolescent girls (15–19 years)
2. Young Women (20–24)
3. Women between 25–49 years
4. Male and local Key stakeholders
5. Community health and FP service providers
6. Upazila level health and FP service providers



**Medium fidelity  
prototype  
development  
based on the  
findings from the  
co-design sessions**



# 3rd Round Co-design Sessions:

## Stakeholder Validation of Medium-Fidelity Prototype

Shared with the Climate Unit under the Government of Bangladesh

Three validation workshops conducted with following stakeholder groups:

- Community-Level Stakeholders- including community women and men; local key stakeholders
- Community level health service providers
- Upazila level health service providers



**High fidelity  
prototype  
development  
based on the  
findings from  
the co-design  
sessions**

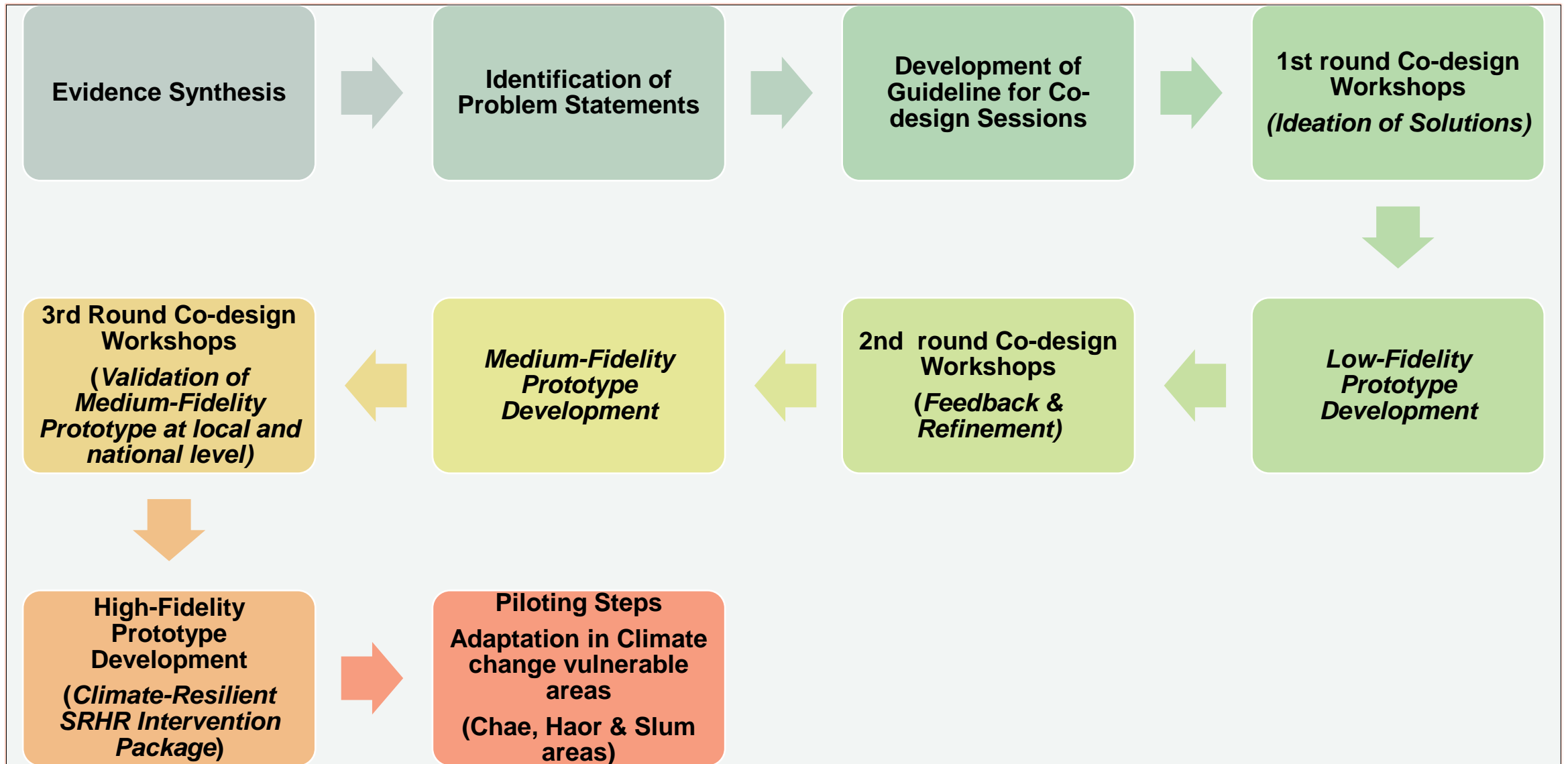


# National Level Workshop



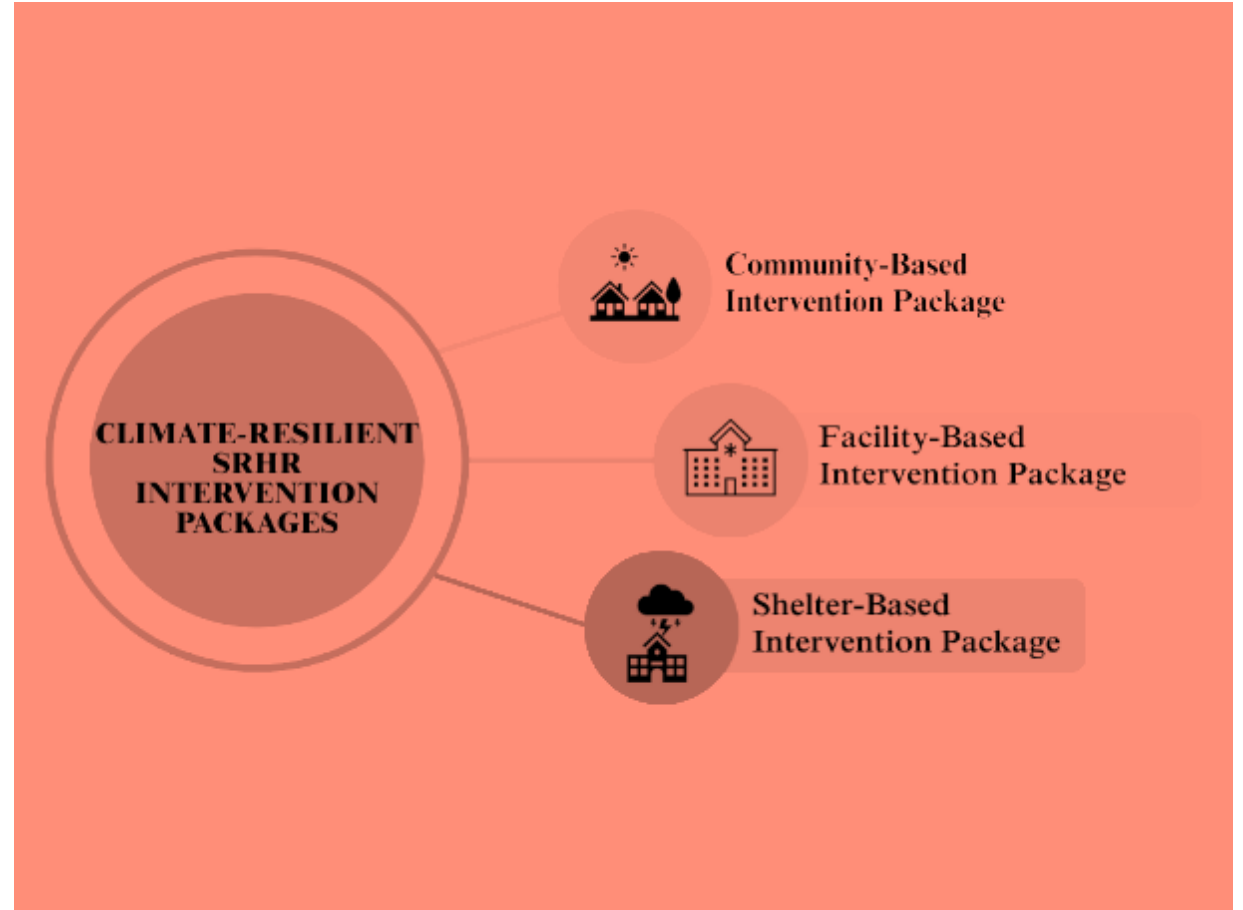
**Finalization of the Climate Resilient SRHR Intervention Package**

# Methodology for Designing Climate-Resilient SRHR Intervention Packages



# Climate-Resilient SRHR Intervention Packages

- Developed through evidence review and participatory design.
- Each package addresses a specific level of vulnerability and service delivery in climate-affected contexts.



# Climate-Resilient SRHR Intervention Packages for Bangladesh

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Coordinator/Director, CCHPU, MoHFW





# 1. Community-Based Intervention Package



# 2. Facility-Based Intervention Package



# 3. Shelter-Focused Intervention Package





# Community-Based Intervention Package





## Significance of the Community-Based Intervention Package

- Bridges the gap between knowledge and action by combining awareness-building with readiness strategies.
- Empowers women, adolescents, and communities with the information, tools, and agency to safeguard SRHR.
- Reinforces local systems with skills, commodities, and infrastructure to withstand climate stress.
- Responds to evidence from Ipas Bangladesh's research while offering a replicable model for climate–SRHR integration.
- Affirms that climate resilience requires gender equity and that SRHR is a core pillar of climate justice.



# 1. Community-Based Intervention Package

**Aims** to build community readiness and empower women and adolescents through awareness, behavior change, and grassroots mobilization.

## **Two Reinforcing Components:**

- 1.1 Community Awareness Building:** Enhance climate-resilient SRHR knowledge, reduce stigma, and strengthen agency through SBC, peer education, schools, and trusted influencers.
- 1.2 Community Readiness:** Prepare communities by organizing volunteer groups, training CHWs and volunteers, and pre-positioning essential SRHR commodities to sustain care and uphold safety during disruptions.

Together, these components aim to create informed, equipped, and resilient communities that can anticipate risks and uphold women's safety, dignity, and inclusion.



# 1.1 Community Awareness Building

**Goal:** Enhancing climate and SRHR knowledge for positive behavior change, and strengthening individual and community agency through inclusive education and peer-led approaches

**Objectives:**

- 1.1.1 Increasing knowledge and practices related to climate-resilient SRHR through social and behavior change initiatives.
- 1.1.2 Strengthening individual and collective agency so that communities can adapt their SRHR behaviors in response to climate risks.
- 1.1.3 Reducing stigma, myths, and social taboos around SRHR that act as barriers to care.

**Activities:**

Activities priorities using SBC, peer education, schools, and engagement of trusted influencers (religious leaders, teachers, youth) to improve climate-resilient SRHR knowledge, reduce stigma, and boost agency.



## 1.2 Community Readiness

**Goal:** Preparing individuals, community, and structures to anticipate, and adapt with climate-related SRHR health challenges.

**Objectives:**

1.2.1 Ensuring inclusive participation in planning and decision-making

1.2.2 Equipping communities with knowledge and practical skills

1.2.3 Strengthening stockpiling of essential SRHR commodities and logistics

**Activities:**

Activities focus on organizing CPP/DMC/SRHR volunteer groups, training CHWs and volunteers on preparedness and referral, and pre-positioning essential commodities (contraceptives, menstrual supplies, clean delivery kits, water-purification items).



# Facility-Based Intervention Package





## Significance of the Facility-Based Intervention Package

- Provides a holistic approach by strengthening infrastructure, workforce, preparedness, supply chains, and data systems.
- Ensures SRHR services remain available, accessible, and equitable in both crises and stable conditions.
- Directly responds to evidence gaps identified in Bangladesh's climate–SRHR studies.
- Positions health facilities as pillars of resilience for communities during climate stress.
- Complements the community-based package to form a comprehensive climate-resilient SRHR model for government, donors, and partners.



## 2. Facility-Based Intervention Package

Aims to strengthen health facilities to ensure uninterrupted, inclusive, and climate-resilient SRHR service delivery.

### Five Reinforcing Components:

- 2.1 Infrastructure Strengthening:** Upgrade facilities to be resilient, safe, and client-friendly.
- 2.2 Capacity Building:** Equip providers with climate-resilient SRHR knowledge and skills.
- 2.3 Preparedness and Communication:** Establish protocols and systems for uninterrupted SRHR care.
- 2.4 Supply Chain Management:** Ensure timely availability of essential medicines, equipment, and commodities.
- 2.5 Health Information Management:** Strengthen data collection and use for evidence-based planning and accountability.

Together, these components aim to build health facilities that can deliver uninterrupted, inclusive, and rights-based SRHR services under climate stress.



## 2.1 Infrastructure Strengthening

**Goal:** Strengthen health facility infrastructure so that SRHR services can withstand climate shocks and continue

### **Objectives:**

- 2.1.1 Upgrade facility infrastructure (buildings, WASH, and energy systems) to withstand climate impacts and ensure uninterrupted SRHR service delivery.
- 2.1.2 Establish climate-resilient storage systems that protect medicines, contraceptives, and essential SRHR supplies from floods, salinity, heat, and humidity

### **Activities:**

Activities focus on upgrading facilities to ensure resilient and safe, and client-friendly service environments.



## 2.2 Capacity Building

**Goal:** Develop an adequate, skilled, and empowered health workforce capable of delivering climate-resilient, women- and adolescent-friendly SRHR services and managing effective referral pathways during both everyday climate stresses and emergencies.

### **Objectives:**

- 2.2.1 Strengthen the capacity of health workers to deliver climate-resilient, women- and adolescent-friendly SRHR services.
- 2.2.2 Strengthen provider and community capacity to implement effective, climate-resilient referral systems.

### **Activities:**

Focus on equipping health providers with the knowledge and skills to deliver quality SRHR services to climate vulnerable population.



## 2.3 Preparedness and Communication

**Goal:** Ensure health facilities are adequately prepared, coordinated, and equipped with resilient systems to maintain uninterrupted SRHR services during both climate emergencies and day-to-day climate stresses.

### **Objectives:**

2.3.1 Ensure health facilities are fully prepared with contingency mechanisms, rapid response teams, and resilient communication systems for SRHR service continuity during emergencies.

### **Activities:**

Focus on Establishing readiness protocols and effective communication for uninterrupted SRHR care.



## 2.4 Supply Chain Management

**Goal:** Ensure uninterrupted availability, monitoring, and redistribution of essential SRHR commodities and supplies year-round and during climate emergencies.

**Objectives:**

2.4.1 Strengthen supply chain systems with climate-resilient logistics, digital monitoring tools, and emergency stockpiles to maintain continuous availability of essential SRHR supplies.

**Activities:**

Focus on ensuring timely availability of essential medicines, equipment, and commodities



## 2.5 Health Information Management Systems (HIMS)

**Goal:** Establish resilient, real-time, and climate-sensitive health information systems to monitor SRHR service delivery, support emergency response, and inform preparedness planning.

### **Objectives:**

2.5.1 Strengthen health information systems to capture, analyze, and respond to climate-sensitive SRHR data, supporting both preparedness and rapid response.

### **Activities:**

Focus on strengthening data collection and use for evidencebased decision-making and accounta



## Shelter-Focused Intervention Package





## Significance of the Shelter-Focused Package

- Provides a holistic approach by strengthening infrastructure, workforce, preparedness, supply chains, and data systems.
- Ensures SRHR services remain available, accessible, and equitable in both crises and stable conditions.
- Directly responds to evidence gaps identified in Ipas Bangladesh's climate-SRHR studies.
- Positions health facilities as pillars of resilience for communities during climate stress.
- Complements the community-based package to form a comprehensive climate-resilient SRHR model for government, donors, and partners.



## 3. Shelter-Focused Intervention Package

Aims to equip shelters to provide safe, inclusive, and coordinated SRHR services during climate-related disasters.

### Two Reinforcing Components:

**3.1 Shelter Infrastructure Strengthening:** Integrate women- and adolescent-friendly design, privacy measures, and essential SRHR services so shelters function as safe spaces that uphold dignity and ensure care continuity during crises.

**3.2 Coordination and Collaboration:** Strengthen linkages among shelters, health facilities, and community systems through joint planning, clear protocols, and rapid referral mechanisms to prevent service gaps.

Together, these components aim to transform shelters into inclusive, protective spaces that guarantee timely and dignified SRHR services during climate emergencies.



## 3.1 Shelter Infrastructure Strengthening

### **Goal:**

Strengthen the infrastructure of shelters to support safe, dignified, and continuous access to SRHR care during climate change induced emergencies and displacement

### **Objectives:**

3.1.1 Improve physical infrastructure and privacy measures in shelters to ensure safe, women and adolescent-friendly spaces for SRHR service provision

3.1.2 Ensure essential SRHR service spaces and systems are functional within shelters.

### **Activities:**

Focus on integrating women- and adolescent-friendly design, privacy measures, and essential SRHR services in shelters.



## 3.2 Coordination and Collaboration

### **Goal:**

Establish effective emergency coordination and collaboration mechanisms among health facilities, Disaster Management Committees (DMC), Cyclone Preparedness Programme (CPP), SRHR volunteer groups and other relevant stakeholders for ensuring essential SRHR care in shelters.

### **Objective:**

3.2.1 Strengthen coordination among health facilities, DMC, CPP, SRHR volunteer groups, and other relevant stakeholders to ensure timely stockpiling and distribution of SRHR commodities, establish emergency referral and transport systems, and enhance community capacity for violence prevention and response.

### **Activities:**

Focus on establishing strong coordination among shelters, health facilities, and community systems to prevent service gaps through joint planning, clear protocols, and rapid referral mechanisms, to ensure timely delivery of lifesaving SRHR services and protection in emergencies

# Way Forward: Cross-Contextual Piloting and Adaptation

- To ensure relevance across Bangladesh's diverse climate-vulnerable geographies, validation and contextual adaptation essential.
  - Riverine Islands:** Adapt for mobile and displaced populations facing erosion, flooding, and seasonal changes.
  - Wetlands:** Ensure service continuity in seasonally submerged areas with poor infrastructure and limited access.
  - Heatwave/Drought Zones:** Integrate measures to address SRHR needs under extreme heat and water scarcity.
  - Urban Slums/Coastal Zones:** Tailor for overcrowded settlements with sanitation gaps, heightened GBV risks, and limited SRHR services.
- Piloting will refine the packages for scalability and adaptability, ensuring safe, dignified, and uninterrupted SRHR services for the most vulnerable.



**Questions?**

**Thank You!**