Improving Sexual and Reproductive Health and Rights in Dhaka

The Improving Sexual and Reproductive Health and Rights (SRHR) in Dhaka project is funded by Global Affairs Canada through HealthBridge Foundation of Canada. Ipas Bangladesh has been implementing the project jointly with its' local partners- BAPSA, OGSB, RHSTEP, and SERAC-Bangladesh since 2021. This five-year initiative is being implemented in Dhaka, Narayanganj, and Gazipur districts to improve availability of and accessibility to quality SRHR services and address Sexual and Gender based Violence (SGBV) issues for the disadvantaged and underserved women and adolescents.

Orientation on FP, MR-PAC for service providers

Community session by youth volunteers

Project Goal

The project aims to improve sexual and reproductive health and rights of underserved and vulnerable women and adolescents in Dhaka.

Project Interventions

- Capacity & Competency Building of service providers to provide stigma and bias free quality SRHR Services
- Addressing Sexual and Gender Based Violence (SGBV) – Prevention and Response
- Facility Readiness for quality and respectful SRHR service provision particularly for disadvantaged and poor
- Community Awareness and Social Mobilization for improving Healthy SRHR practices and Care Seeking
- Health Systems Strengthening, sustainability and linking with national program
- Response for uninterrupted SRHR service, message and logistics during Public Health Emergency

Target Population

People living in low socio-economic urban areas, particularly adolescents, women; also female garments factory workers.

Improving Availability and Accessibility of SRHR Services

The project focuses on strengthening health systems to ensure sustainable, high-quality SRHR services through providers' capacity development, improved facility readiness, strengthened Health Management Information Systems (HMIS), and uninterrupted availability of essential reproductive health commodities. The initiative supports women and adolescents in making informed and voluntary SRH choices through accessible, respectful, and stigma-free services.

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Training on MRM, mPAC and FP methods

Capacity and Competency Building:

The project strengthened the capacity of **766** service providers and **296** community health workers on Menstrual Regulation (MR), Post-Abortion Care (PAC), Family Planning (FP), and SGBV services to ensure quality, rights-based, and stigma-free SRHR service delivery.

Facility Readiness:

A total of **165** selected health facilities were supported with essential commodities and logistics to improve service readiness. This includes:

Transformation of **100** general practitioner (GP) chambers into quality SRHR service centers

Establishment of SRHR services in **15** garment factory health centers

Strengthening SRHR services at **38** Urban Health centers

Strengthening **12** secondary and tertiary level referral facilities

Health Information Systems Strengthening:

The project supported the revision of DGFP MIS tools in alignment with updated FP, MR, and PAC indicators and strengthened urban HMIS through the introduction of the unified FP Register, with **162** service providers and facility staff trained on its use to improve data quality and utilization.

Telemedicine Service:

The project initiated telemedicine services known as "OGSB Call Center" that aims to bridge the socio-economic divide and ensure equitable access to SRHR and SGBV services for underserved women and adolescent in Bangladesh. Trained doctors are providing telemedicine services highlighting the growing demand for SRHR services. The call center number is **09613-656666**.

Addressing Sexual and Gender-based Violence (SGBV)

STOP VIOLENCE

Addressing SGBV is amongst the core components of the Improving SRHR in Dhaka project, promoting zero tolerance through awareness, improved service-seeking behaviour, and expanded access to gender-responsive care. The project strengthens health service providers' capacity and survivor support via referral systems, using an intersectional approach

across **165** facilities and community with **1,000** youth volunteers. To meet rising demand, a formal GBV referral pathway has been developed. An implementation study is ongoing to assess its effectiveness as survivors-centered referrals in urban setup and for national scale-up.

Training on SGBV and Reproductive Coercion counseling

Training on SGBV and Reproductive Coercion counseling

Community Awareness and Social Mobilization

The project promotes community awareness and demand for SRHR services through active youth engagement, enabling informed decision-making and addressing SGBV. A total of **1,000** trained youth volunteers through **100** community action groups (CAG) act as change agents, bridging communities with health facilities, particularly General Practitioners, and boosting service uptake through campaigns and outreach. The project has empowered youth and strengthened youth leadership, with volunteers leading community groups. They are facilitating local and national level advocacy, developing social media contents, and performing in edutainment drama.

The project also enhanced SBCC by building outreach worker capacity and developing effective materials contributing to increased access to contraception, menstrual regulation, postabortion care, and SGBV services.

School campaign by youth volunteers

Learning visit of youth volunteers

Community Photovoice Exhibition

Edutainment drama performance

Empowering Communities Through Digital Awareness on SRHR and SGBV

The project uses different social media platforms (Facebook, Instagram, YouTube) to raise community awareness, promote support for SRH, and challenge misconceptions and stigma through issue-based information and message sharing related to SRHR and SGBV for women, adolescents and communities.

Public Health Emergency Preparedness and Response

Early preparedness and timely response during public health emergencies are essential to safeguard the health of underserved women and adolescent girls living in low socio-economic urban settings, while ensuring continued access to SRHR services. In this context, Improving SRHR in Dhaka project has developed an '**Emergency Preparedness and Response Plan**' for urban areas in collaboration with the Ministry of Health and Family Welfare, the Ministry of Local Government, Rural Development and Cooperatives, and project partners. This plan aims to ensure uninterrupted provision of essential SRH services and supplies during public health emergencies.

Project Outcome (August 2021 - March 2026)

593,219 clients received FP services

16,865 clients received MR services

32,517 clients received PAC services

11,412 SGBV cases documented and responded

1,067,118 community people mobilized through Outreach Workers and Youth Volunteers

1,759,322 people reached through social media

OGSB

SERAC-Bangladesh
(A youth focused rights and development organization)

bapsa

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