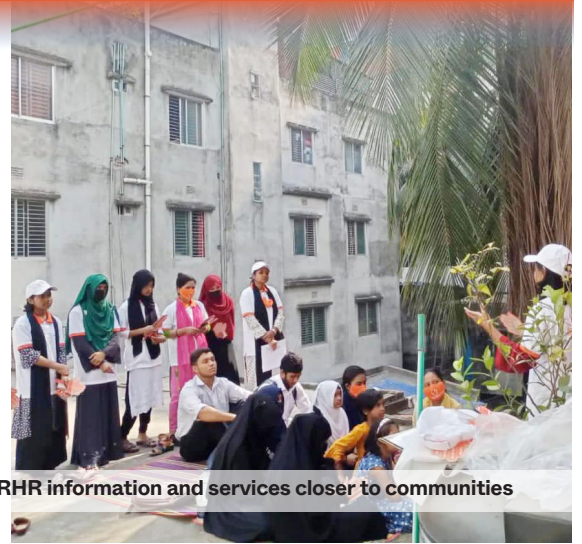


NEWSLETTER

Five Years of Advancing SRHR in Dhaka



The ISRHRD project empowered outreach workers and youth volunteers to bring SRHR information and services closer to communities

Photo Courtesy: Ipas Bangladesh

In five years, the [Improving SRHR in Dhaka](#) project has reached more than 1 million women, adolescents, and young people and delivered over 655,000 sexual and reproductive health and rights (SRHR) services across urban Dhaka, Narayanganj, and Gazipur. Implemented by Ipas Bangladesh in partnership with four

implementing organizations BAPSA, OGSB, RHSTEP, and SERAC-Bangladesh the project has been supported by Global Affairs Canada and the HealthBridge Foundation of Canada since 2021. The project was aimed to improve SRHR of underserved and vulnerable women and adolescents in urban areas, particularly focusing on a better availability and access to quality contraception, menstrual regulation (MR), postabortion care (PAC), and SGBV support; increased knowledge, social support, and self-efficacy for informed SRHR decisions and ensure essential SRH services in emergency preparedness.

[At the dissemination event](#) held on 24 June 2026 at the Bangladesh-China Friendship Conference Center, the project presented key achievements, evidence, learned lessons, and experiences, along with findings from the Independent Endline Evaluation conducted by Consiglieri Private Limited, commissioned by Global Affairs Canada; the Endline Assessment conducted by BISR commissioned by Health Bridge Foundation; also the Implementation Study on the GBV Referral Pathway conducted by Ipas Bangladesh with the support of HealthBridge Foundation.



During the dissemination event, Dr. Ziaul Ahsan Project Director and his team presented an overview of the project



The findings demonstrated that focused interventions can contribute to improving urban SRHR services, particularly the quality of family planning, MR and PAC services and the response to gender-based violence. Key approaches including the General Practitioners model, strengthened community outreach and mobilization, stigma-reduction initiatives, integrated GBV response and continued coordination with government and city corporations were highlighted and acknowledged.

The event brought together more than 200 stakeholders from policymakers, relevant government ministries and departments, development partners, professional bodies, civil society organizations, youth volunteers, media representatives including Dr. M.A. Muhit, MP, the State Minister, MoH&FW -the Chief Guest, Special Guests- Ms Jobaida Begam, Additional Secretary, MoH&FW, Professor Dr. Pravath Chandra Biswas DG-DGHS and Dr. Jinnat Rehana, DG-DGFP; and Mr Stephen Weaver, Head of Cooperation, High Commission of Canada to Bangladesh as the Guest of Honor.



594,851 clients received FP services



16,993 clients received Menstrual regulation (MR) services



32,549 clients received Postabortion Care (PAC) services



11,450 SGBV cases documented and responded



1,048,648 community people mobilized through Outreach Workers and Youth Volunteers



11,070,782 people reached through social media



1,962 calls received, information and services provided through OGSB Call Centre



Reaching Adolescents and Medical Education Network to Address the CTS Nexus and SRHR Awareness

For 16-year-old Halima (pseudonym), living in a Rohingya refugee camp in Cox's Bazar, joining a peer education programme became more than a chance to learn. She was at risk of child marriage and was initially not allowed to participate. After discussions with her parents, community leaders and camp authorities, her family agreed to support her. Her marriage was postponed, and she went on to lead awareness sessions for other adolescents.

Halima's story reflects a wider youth-led initiative implemented by Ipas Bangladesh with funding from the Norwegian Agency for Development Cooperation (NORAD) from January to June 2026. Working across Rohingya refugee camps in Cox's Bazar, low-income communities in Dhaka and medical colleges nationwide, the programme addressed the interconnected challenges of child marriage, teenage pregnancy and school dropout, while expanding access to rights-based sexual and reproductive health and rights (SRHR) information and adolescent-friendly services.



Rohingya refugee camps

In eight Rohingya camps, **48 adolescent peer educators** conducted **192 peer-learning sessions, reaching 288 adolescents**. Engagement with parents, religious leaders, Majhis, and camp authorities helped strengthen community acceptance of adolescent SRHR and referral pathways. Awareness activities, menstrual hygiene support, and interactive tools, including a customized Snakes and Ladders game and a comic book, made sensitive SRHR information more accessible, relatable, and engaging for adolescents.



Low-income urban communities in Dhaka

In urban communities, Ipas Bangladesh adapted activities in response to changes in the health system. Ten SRHR fairs reached about **1,200 adolescents, youth, and parents**, while **25 trained youth volunteers** performed **11 interactive theatre sessions** addressing child marriage, contraception, menstrual regulation, GBV, and other SRHR issues.



Bangladesh Medical Students' Society network

Through partnership with the Bangladesh Medical Students' Society, **30 national SRHR trainers** were developed, **300 medical students** from more than 30 colleges participated in regional boot camps, and around **1,000 additional students** were reached through local events. Fifteen students also received research support, resulting in three studies presented at a national scientific conference.



SRHR Conversations Over Tea → Trust → Referral → Service

In Rohingya refugee camp life, tea stalls are common gathering places for men to talk and socialize, and these informal conversations over tea are increasingly leading to action. With funding from UNFPA, Ipas Bangladesh has been implementing the Tea-Stall Session initiative since 2025, using these familiar community spaces to promote Sexual and Reproductive Health and Rights (SRHR) and Family Planning (FP).

Since 2025, Ipas Bangladesh has been using tea stalls, familiar gathering places in Rohingya camps, as spaces for conversations on Sexual and Reproductive Health and Rights (SRHR) and Family

Planning. Trained Imams engage community members, other Imams and Muajjins to address misconceptions, encourage informed decision making, and promote positive health seeking behaviors.

The model reached 1,223 people through 133 sessions in 2025 and expanded to 192 sessions reaching 1,620 people from January to June 2026.

Beyond the tea stalls, trained religious leaders share accurate, faith aligned messages through Friday sermons and encourage community members to seek FP services. Tea stall owners also reinforce key messages by displaying educational materials.

As SRHR discussions become more common in these familiar spaces, men are increasingly engaging in sensitive conversations, helping reduce stigma, improve couple communication, and promote positive health behaviors.

The model will now strengthen referral tracking, introduce peer groups of satisfied FP clients, and expand to additional camps and Bhasan Char, demonstrating how trusted community spaces can contribute to lasting social and behavioral change.



Tea-stall session with community people at Camp 22

Photo Credit: Abser Uddin

VCAT Workshop for CSO Forum Members

Values Clarification for Action and Transformation (VCAT) is a participatory workshop methodology developed by Ipas to help individuals and groups explore and reflect on their beliefs, attitudes, and behaviors regarding abortion care. On 23 June 2026, Ipas Bangladesh brought this approach to 21 SRHR stakeholders from 14 CSO Forum member organizations through a one-day workshop facilitated by Ipas technical experts.

The workshop focused on stigma around



menstrual regulation (MR), giving participants space to reflect on personal values and biases and examine how stigma affects people seeking care. Through VCAT exercises and discussion, participants explored ways to promote more rights-based, empathetic, inclusive, and non-judgmental approaches to MR.

The 14 participating organizations—Family Planning Association of Bangladesh (FPAB), Bangladesh Legal Aid and Services Trust (BLAST), James P. Grant School of Public Health, Naripokkho, Ain o Salish Kendra (ASK), Bangladesh Mahila Parishad, Obstetrical and Gynaecological Society of Bangladesh (OGSB), Bangladesh Midwifery Society, Bangladesh Medical Students' Society (BMSS), SERAC Bangladesh, International Rescue Committee (IRC), BRAC, Narimaitree, and RTMI—play active roles in shaping SRHR discourse, advocacy, community engagement, and accountability. Participants recommended expanding VCAT training among member organizations working on MR and postabortion care (PAC), as well as introducing additional VCAT tools and exercises in future sessions.

Building a national pool of CAC (CMRC) and SRHR trainers

Under the CMRC project, funded by FCDO through DAI, a national pool of 42 CMRC Master Trainers was developed through a Training of Trainers for doctors from the four National Training Hubs. The training strengthened clinical competence, facilitation skills, confidence, use of standardized protocols, and understanding of rights-based and stigma-free care. Average knowledge scores increased from 63.10% before training to 80.82% afterward, a gain of 17.72 percentage points. The Master Trainers are positioned to cascade learning through provider training, bedside coaching, simulation, supervised clinical practice, mentoring, and supportive supervision. They will also reinforce infection prevention, clinical quality standards, use of job aids and FP decision-making tools, and accurate recording and reporting.

42 CMRC Master Trainers

Beyond the four hubs, Ipas Bangladesh convened a national networking workshop for 61 existing and newly trained FP, MR, and PAC trainers from DGFP, DGHS, secondary and tertiary referral facilities, professional bodies, partner organizations, and Ipas Bangladesh. Participants reviewed current MR, PAC, FP, postpartum FP, postabortion FP, and second-trimester PAC guidance, including complication management, using national protocols, WHO recommendations, technical presentations, interactive assessments, practical demonstrations, and peer exchange. The trainer list was shared with government so participants could be considered resource persons for future government-led training. Together, the Master Trainer pool and wider trainer network strengthened national capacity to maintain standardized knowledge and clinical skills beyond individual projects.

Work Goes Beyond the Day



Menstrual Hygiene Day



International Day of the Midwife



Safe Motherhood Day

Between April and June, Ipas Bangladesh observed Safe Motherhood Day, International Day of the Midwife, and Menstrual Hygiene Day through different projects, highlighting safe motherhood, the vital role of midwives, and menstrual health and dignity.

‘Samadhan Ghurni’: A New Tool for MRM Counselling

In Rupganj sub-district of Narayanganj district, Ipas Bangladesh is field testing ‘Samadhan Ghurni’ (Solution Wheel), a job aid developed under the Taragaon Co-Lab with support from The David and Lucile Packard Foundation to support Community Health Workers (CHWs) in providing accurate information, counselling, and referrals on menstrual regulation with medication (MRM).

Between April and June 2026, 15 CHWs from Rupganj participated in a needs assessment and consultation workshop to identify women’s common MRM questions, community misconceptions, and challenges CHWs face in providing guidance. Their insights informed a co-created prototype featuring concise Q&A content and quick-reference guidance for use during counselling.

The tool is designed to strengthen consistent MRM counselling and referral pathways at the community level. Its field testing will help assess its usefulness and inform further refinement as part of Ipas Bangladesh’s broader SRHR work to improve access to reliable MRM information and reduce misinformation.

“This innovation demonstrates how community-driven solutions can strengthen access to accurate SRHR information and support,” said Faria Zaman, Family Welfare Assistant (FWA).



Helping Women Understand the MRM Process



When a woman has questions about menstrual regulation with medication (MRM), she may not feel comfortable asking them out loud. Stigma remains a barrier, and finding safe, private, and accurate information is not always easy.

Ipas Bangladesh is working to make trusted information easier to access through platforms women already use, including pharmacies and the internet. As a continuation of the QR-based helpline channel, the The David and Lucile Packard Foundation-funded Taragaon Co-Lab project has launched an online video explaining the MRM process. The video provides initial guidance on self-managed MRM.

From Challenge to Choice: Strengthening Bangladesh's Family Planning Program

A roundtable co-hosted by Ipas Bangladesh and The Daily Star brought stakeholders together to discuss strengthening Bangladesh's family planning programme, with a focus on contraceptive access and service delivery challenges. Supported by NORAD, the dialogue called for timely action and stronger systems to safeguard reproductive choice and ensure equitable access to family planning services nationwide.



After decades of progress, the total fertility rate fell from 6.3 in 1975 to 2.3 in 2011 and remained stagnant for over a decade. **However, recent Multiple Indicator Cluster Survey 2025 data show it has risen to 2.4**

Dr Sayed Rubayet
Country Director, Ipas Bangladesh



From Community to Gallery

Sixteen photo stories. Fourteen young storytellers. One exhibition that let lived experience speak where statistics often fall short. On 20 April 2026, Ipas Bangladesh held the second phase of its youth driven photovoice exhibition, 'Silent Frames, Loud Voices: Exploring SRHR through Community Lens', at Bishwo Shahitto Kendro, Dhaka. The event was organized with support from SERAC-Bangladesh under the Improving SRHR in Dhaka (ISRHRD) project, funded by Global Affairs Canada through the HealthBridge Foundation of Canada. Fourteen youth volunteers from low-income communities had trained in photography, SRHR, and ethical documentation, producing 16 photo stories that captured lived experiences around family planning (FP), menstrual regulation (MR), postabortion care (PAC), menstrual health (MH), and gender based violence (GBV). Alongside the exhibition, 25 youth volunteers performed an edutainment community drama called 'The Price of Mistake'.

More than 100 people attended, including senior government officials, implementing and development partners, and media representatives. Former Director General

See the Album



The images and stories displayed here today are honest, courageous, and deeply human. They confront silence, stigma, and inequality, and they demand that we listen, reflect, and act.

-Ajit Singh

High Commissioner of Canada to Bangladesh



of DGFP Dr. Ashrafi Ahmed, NDC, and Canadian High Commissioner Mr. Ajit Singh visited the exhibition, walked through the gallery, and addressed attendees. Youth contributors received a token of appreciation at the close of the event. The exhibition reflects a broader goal, using photography and storytelling to surface barriers like stigma, misinformation, and limited access to SRHR services and to build young people's role as storytellers and advocates in their own right. As Dr. Ashrafi Ahmad said, **'We believe sustainable progress requires collaboration across government, development partners, civil societies and communities themselves'**

Our Impact for the April to June Quarter

At Ipas-supported
health facilities-

98,561 people
received Family Planning services

3,416 people
received Menstrual Regulation service

5,978 people
received Postabortion Care service

1,645 people
received support on
Sexual and Gender Based Violence

Through community
engagement programs,
Ipas Bangladesh
reached-

100,534
Bangladeshi people

22,834
Rohingya people



Check out the
earlier edition

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