SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

The example of Dhaka

Millions of women around the globe are unable to access the reproductive health services they need. That is why HealthBridge works with partners in Canada and worldwide to advance gender equality and improve the sexual and reproductive health and rights of underserved women and girls.

This includes women and adolescent girls who live in the crowded urban slums of Dhaka — the capital of Bangladesh and one of the largest cities in the world.

Almost 60 per cent of girls here marry before the age of 18. Men generally carry more economic and decision-making power in the household. Many women are unaware of their family planning options, or how to access safe termination of an early pregnancy.

Sometimes healthcare professionals lack the training or supplies to provide reproductive health services.

In this context, HealthBridge worked with partners in Bangladesh for a period of five years to improve the situation for thousands of women and adolescent girls.

Together we:

- raised awareness and provided information through community outreach;
- improved the availability and quality of reproductive health services;
- strengthened the local health system to better serve women and girls;
- addressed the needs of women and girls facing gender-based violence.

Shabnur has found peace of mind

Shabnur*, a 23-year-old mother, was not ready for another child. She became pregnant anyway after missing her birth control injection during a family crisis.

Afraid to try a new method, she went without contraception and later gave birth to her second daughter.

However, Shabnur wanted to avoid another unintended pregnancy, so she spoke to a community volunteer, part of HealthBridge's youth mobilization for sexual and reproductive health and rights (SRHR), who referred her to a nearby urban clinic.

A health worker at the clinic, who had also been trained by HealthBridge's partner, listened to her concerns and explained all her options clearly. She chose a contraceptive implant, which will protect her from pregnancy for up to five years.

Shabnur told the health worker the support she got made a big difference.

"I used to be very scared about all these procedures. But the way you explained everything to me made all my fears go away," she said. "Now I feel much better."

**not her real name*

HealthBridge Foundation of Canada

We work with partners and communities worldwide to improve health and reduce health inequities through research, policy and action. Our work includes Sexual, Reproductive, Maternal and Child Health and Rights (SRMCHR), Nutrition and Food Security, Livable Cities, and Tobacco Control and NCD Prevention.

HealthBridge has been working in Asia, Africa and the Americas since 1982, and with partners in Bangladesh since the early 1990s.

Engage communities

We engage urban and rural communities through a broad range of local players, community-based activities and communications channels to exchange knowledge and build trust, creating an environment for positive change.

Strengthen health systems

We work with local institutions and service providers, government agencies, and community actors to improve service delivery, increase collaboration and strengthen institutional capacity to ensure health and well-being.

Promote equality

Gender equality is a fundamental principle for all our work, including project implementation and service delivery. We are especially committed to upholding and promoting the rights of women and girls in the communities we serve.

SRHR in Dhaka

By the numbers

1,510 youth volunteers trained
225 outreach workers trained
130 general practitioners trained
512 healthcare workers trained
187 facilities improved
649,992 family planning services
53,751 early abortion services
1,156, 074 people attended community sessions
3,590,531 women/girls impacted

Partnerships

The success of our work depends on local partnerships, as well as on effective collaboration with international organizations, community groups, foundations, research institutions and government agencies.

With support from the Government of Canada, HealthBridge led a consortium in Bangladesh, in partnership with Ipas Bangladesh, The Association for Prevention of Septic Abortion, Bangladesh (BAPSA), The Obstetrical and Gynaecological Society of Bangladesh (OGSB), SERAC Bangladesh, and the Reproductive Health Services Training and Education Program(RHSTEP). Implementation was carried out through public, private, and factory-based service delivery platforms in collaboration with government institutions and city corporations.

HealthBridge — supported by the Government of Canada and working through partners in Bangladesh — implemented the 5-year "Improving Sexual and Reproductive Health and Rights in Dhaka" project to address the needs of underserved women and adolescent girls. ***www.healthbridge.ca***

HealthBridge · In partnership with Canada · Ipas Bangladesh Partners for Reproductive Justice · SERAC-Bangladesh · bapsa · RHSTEP