



ENHANCING COMMUNICATION AND STRENGTHENING ADVOCACY: COMMUNITY ADVOCACY OUTREACH PROGRAM

Organised by: Youth Advocacy Institute for Development
Supported by: Asia Safe Abortion Partnership
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Table of Contents

ACRONYMS	3
INTRODUCTION	4
BASIC CONCEPTS ON GENDER	4
BASIC UNDERSTANDING ON SRHR	5
PUBERTY, MENSTRUATION AND MENSTRUAL HYGIENE	7
INFORMATION ON MR, MRM AND PAC	8
CONCLUSION	10
ANNEX 1	10

Acronyms

Acquired Immunodeficiency Syndrome	AIDS
Asia Safe Abortion Partnership	ASAP
Family Welfare Assistants	FWA
Family Welfare Visitors	FWV
Intra Uterine Device	IUD
Last Menstrual Period	LMP
Menstrual Hygiene	MH
Menstrual Regulation	MR
Menstrual Regulation with Medication	MRM
Mother and Child welfare Centres	MCWC
Non-Government Organisation	NGO
Post Abortion Complication	PAC
Sub-assistant Community Medical Officers	SACMO
Sexual and Reproductive Health and Rights	SRHR
Sexually Transmitted Infection	STI
Union Health and Family Welfare Centres	UH&FWCs
Upazila Health Complexes	UHC
World Health Organisation	WHO
Youth Advocacy Institute for Development	YouthAID

Introduction

Youth Advocacy Institute for Development (YouthAID) organised the first ever community advocacy outreach programme in the Dalit community from Barishal, Bangladesh with the support from Asia Safe Abortion Partnership (ASAP) on 30th March, 2019. The aim of the programme was to enhance knowledge on Sexual and Reproductive Health and Rights (SRHR) and safe abortion services and rights in Bangladesh. The workshop was attended by 20 young women from the Dalit community.

This year, YouthAID decided to reach women from Dalit community to inform them on SRHR and safe abortion in Bangladesh because these women poses more vulnerability because of their religious sanctions and social, economic and political status. These marginalised women face multiple forms of discrimination, especially with regard to access to education, employment and health care, housing, protection from violence and access to justice.

In this light, YouthAID has organised this programme to reach out to the women from Dalit community and orient them on the basic SRHR issues and safe abortion services and rights which are available so that they can access the services when it is needed and spread these information in their community.

Anika Binte Habib, the founder of the YouthAID and the youth champion of ASAP, Fariha Hossian, the Master Trainer of the YouthAID a and the youth champion of ASAP, and Sabina Islam, the Chairman of the Parbirtan; a local NGO facilitated the sessions.

Anika welcomed the participants and facilitated the introduction. After the introduction, she shared that the aim of the programme and the programme agenda (Annex 1).

Basic concepts on Gender

The first session was facilitated by Sabina Islam. She discussed the basic definition of gender and sex. In this session, she explained how gender is assigned by the society right after a child is born and the impact of gender role in the society. She asked the participants to write the role of their fathers and mothers. All the participants shared that, their mothers work tirelessly every day at home without getting proper recognition. They also shared their fathers are likely to be more dominant as they are the breadwinners. She explained the patriarchal structure of the society hinders women's social and economic participation. This also leads women to accept all sort of domestic and intimate partner violence.



She also talked about the difference between gender equality and gender equity.

Basic understanding on SRHR

This session was jointly facilitated by Anika and Fariha.

Fariha started the session explaining the definition of health by World Health Organisation (WHO). She asked the participants what their understanding on good health and bad health. Most of the participants said that health means state of physical well-being. Then Fariha clarified that, health means much more than this. Health means state of physical, mental and social well-being completely.

Following to that conversation, she mentioned that we often ignore sexual and reproductive health because of social stigma. Then Anika provided the participants with the basic definitions on sexual and reproductive health.



She explained that, good sexual and reproductive health is a state of complete physical, mental and social well-being in all matters relating to the reproductive system. It implies that people are able to have a satisfying and safe sex life, the capability to reproduce, and the freedom to decide if, when, and how often to do so. She also added that, to maintain one's sexual and reproductive health, people need access to accurate information and the safe, effective, affordable and acceptable contraception method of their choice.

She asked the married participants if their partners have ever forced them to have sex with them. They did not make any comments on this however, all the married participants said that, they only have sex when their partners ask them. They never said no to their husbands as they think it is unacceptable for married women to say no to their husbands and they never asked their husbands to have sex with them as they think only "bad women" have such desire.

Anika then clarified the concept of consent and married women have the rights to say no to their husbands. Then many women opened up and shared that, many times they did not feel to have sex as they were too tired doing the house chores but they were scared to say no to their husbands as this might lead to physical abuse.



Anika also clarified that having desire for sex does not make any women "bad" women. This is very normal.

After that, Anika talked about safe and satisfying sex. All the married women said that they never experienced orgasm and they thought only men can have such "feeling". She explained that women can have orgasm too and it is important that all women experience satisfying sex with their partners/husbands for their well-being.

She also spoke about safe sex. She explained that, safe sex refers to what we do to lower our and our partners' risk of Sexually Transmitted Infection (STI).

She explained that, to reduce the risk of infection for partners/husband-wife is to avoid exchanging body fluids. The fluids to be most careful about are blood, ejaculate, pre-ejaculate, vaginal fluids, and the discharge from sores caused by STI. She only spoke about using male condom as the practice to lower the risk.

The participants did not know that, condom can also prevent STIs.

Most of the participants said that they were not aware of the such infection, however they knew about Acquired Immunodeficiency Syndrome (AIDS).

Following to this conversation, Anika asked the participants if they knew about different contraceptive methods. Most of the participants said that they know about condom, oral pills and Depo-Provera which is commonly known as "injection".

All the married participants said that their husbands do not use condom as they were told it was the responsibility of the wives. It is their responsibility to ensure the contraception. Many participants have taken Depo-Provera shots and many are using oral pills.

Anika explained that, both partners/husband-wife are responsible to ensure safe sex and to avoid unplanned pregnancy.

She also explained that, condom lowers the risk of STIs, and oral pills and Depo-Provera do not protect anyone from STIs.

Anika also briefly talked about Intra Uterine Device (IUD), tubal ligation and vasectomy.

Puberty, menstruation and menstrual hygiene

This session was jointly facilitated by Anika and Fariha.

Fariha explained the definition of adolescent and the range of physical, mental and social challenges they face during this period. As many of the participants were married off during the adolescent period, it was important to clarify the concept.

After that she talked about puberty. She explained that everyone goes through physical changes during this period. Girls develop breasts, hips get wider and start getting period. Boys hair may grow on face, chest and back. Some boys may have swelling around their nipples during this period. Everyone may get acne, grows hair under armpits and around genitals.



After that, Anika spoke about menstruation and menstrual cycle. She explained that menstruation is process in which women discharge blood through vagina.

She explained that menstrual cycle is the hormonal driven cycle and these hormones are estrogen and progesterone. Day 1 is the first day of period and day 14 is the approximate time when women start ovulating. She explained that women have 2 ovaries and ovaries release matured eggs for fertilisation. If the mature egg is not fertilised by the sperm cell, then period occurs. She also shared that menstruation varies women to women; the flow might be light, moderate or heavy, length can vary from about 2 to 7 days. Some women face abdominal pain, bloating, nausea and so on. Participants asked if eating fruits or fish cause pain and nausea. She explained that, it is very normal to have pain and nausea during menstruation and it is very important to drink lots of water to stay hydrated and eat nutrient foods such as fruits, fish, meat and so on during menstruation.

Further she added that, in case of heavy bleeding more than regular period and severe pain, they must contact the Upazilla doctors.

After that, she talked about some basic menstrual hygiene. Most of the participants said that they cannot afford to buy sanitary napkins and they mostly use strips of clothes. She then said that, it is important to wash the clothes with clean water and soap, dry it in the sun and store it in the safe and clean place. She also said that, the one cloth should not be used more than 3 times and should be disposed properly. She explained that poor menstrual hygiene can cause different and severe health risks such as vaginal irritation to infections and STIs.

She said that, menstruation is normal and they should also inform their neighbours and family members about menstrual hygiene.

Information on MR, MRM and PAC

This session was jointly conducted by Anika and Fariha.

Fariha started the session explaining about the family planning. She said that family planning allows people to attain their desired number of children and determine the spacing of pregnancies. It is achieved through use of contraceptive methods and the treatment of infertility.

After that, Anika talked about Menstrual Regulation (MR), Menstrual Regulation with Medication (MRM) and Post Abortion Complication (PAC).

She explained that, abortion is only legal to save the life of a pregnant woman, however, MR and MRM is available under family planning programme of Bangladesh.

She mentioned that, MR is a procedure of regulating the menstrual cycle when menstruation is absent for a short duration. It is performed in a health care facility by a trained provider within 9-12 weeks since a woman's Last Menstrual Period (LMP).



She told the participants that, this service is available in Upazila Health Complexes (UHCs), Mother and Child welfare Centres (MCWCs) and Union Health and Family Welfare Centres (UH&FWCs). UH&FWCs are staffed by Family Welfare Visitors (FWV) and Sub-assistant Community Medical Officers (SACMO), who are trained to provide the MR service and in most cases PAC, however, this is very unlikely. Both MR and PAC are available in medical college hospitals and district hospitals.

She also explained that, MRM is also available in Bangladesh. It uses a regimen of mifepristone and misoprostol, distributed by a trained medical provider affiliated with a health care facility and up to 9 weeks since the LMP.

She explained these are safe procedures to terminate the pregnancy and available in public facilities. Participants also explained that Family Welfare Assistants (FWA) often visited them and told them about the service, however they have never availed it.

Conclusion

In the closing remarks, Sabina expressed her gratitude to YouthAID for organising this workshop.

Anika concluded the programme thanking the participants to participate in the workshop. She also sincerely thanked Paribartan NGO for their support to successfully conduct the workshop. Participants also shared that, this programme was useful for them and they believe such information should be provided to the other women from their community.

Annex 1

Concept paper: Enhancing Communication and Strengthening Advocacy: Community advocacy outreach program

Introduction: Asia Safe Abortion Partnership (ASAP) is a network that works to promote, protect and advance women's sexual and reproductive rights and health in Asia, by promoting access to comprehensive safe abortion services and by reducing unsafe abortion and its complications.

Youth Advocacy Institute for Development (YouthAID) is the first ever Country Advocacy Network (CAN) of ASAP in Bangladesh that works to build a social movement to address safe Menstrual Regulation (MR) rights, women's rights, LGBTQI rights and youth friendly health services.

YouthAID has been building capacity of the young people so that they can join the movement.

Objectives:

1. To build awareness about right of women and girls to terminate unwanted pregnancy safely and with dignity.
2. To create a forum for capacity building of capable youth from different universities/institutes to become effective advocates
3. To work with key stakeholders and health service providers to reach out to the most vulnerable and marginalised people in need of safe abortion services and other SRHR related health information and services.

About the outreach programme:

Dalit Community is not a caste or a group of castes, but a group of population marginalised to the extreme by partly religious sanctions and partly by social and economic deprivations. Girls and women from Dalit communities in Bangladesh often fall victim to prostitution and trafficking of bonded labour. They are deprived from the control; not only over property, but also over their own bodies.

In this light, YouthAID is organising a sensitisation workshop with 20 young girls from the Dalit community.

Aim: To enhance knowledge on sexual and reproductive health and rights and safe MR rights in Bangladesh

Target audience: Young girls from Dalit community

Date: 30th March, 2019

Time: 9:00 am - 1:00 pm

Venue: Saint Bangladesh, Akter Mansion, C & B Road, Barisal.

Number of participants: 20

Programme Outline:

Time	What	Who
9:00 am – 9:10 am	Introduction and welcome	Anika Binte Habib
9:10 am – 9:55 am	Basic concept on Gender	Sabina Islam
9:55 am – 10:10 pm	Tea Break	
10:10 am – 11:10 am	Basic understanding on SRHR	Anika Binte Habib and Fariha Hossain
11:10 am - 11:45 am	Puberty, menstruation and menstrual hygiene management	Fariha Hossain
11:45 am - 12:30	Information on MR, MRM and PAC	Anika Binte Habib and Fariha Hossain