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There is no doubt that 2021 marked one of the most challenging years that UNFPA has ever experienced in its operations in Bangladesh.

As we sought to close the final year of our 9th Country Programme on a high note, the COVID-19 pandemic entered its second year in a row and continued to cause various hardships to families across the country. We also continued to grapple with the challenges posed by the ongoing Rohingya refugee crisis in Cox’s Bazar, as well as climate change induced natural disasters in different parts of the country.

Considering these challenges, it is my great pride and joy to share with you UNFPA Bangladesh’s Annual Report for 2021. The results highlighted in this report showcase the innovative ways in which we adapted to the obstacles on our way and managed to successfully deliver on the promises outlined in our 9th Country Programme.

Against all odds, we continued to support the Government of Bangladesh in securing the availability and accessibility of sexual and reproductive health and gender-based violence response services across the country. We also helped to ensure the continuation of life skills education among the country’s adolescent and youth, participated in several humanitarian response efforts and contributed to a variety of policy papers and studies on issues relevant to UNFPA’s mandate.

It goes without saying that these achievements could not have been possible without the continuous support from our donors and implementing partners. I humbly thank you for remaining committed to our vision of achieving a world, where every pregnancy is wanted, where every childbirth is safe and where every young person’s potential is fulfilled.

I also want to express my deepest gratitude to our staff members around the country who have been exceptional in braving the challenges posed by this unusual time. Regardless of the challenges, the results outlined in this report show that your hard work has continued to provide immense relief to hundreds of thousands people across Bangladesh in their time of need.

I sincerely hope that the momentum we managed to build in 2021 carries onto the next year, when UNFPA begins to implement its 10th Country Programme in Bangladesh. We cannot wait to increase our engagement with both old and new partners and find new ways to respond to the sexual and reproductive health and protection needs of the people of Bangladesh.

Our efforts will not cease until Bangladesh has achieved a society with zero preventable maternal deaths, zero unmet need for family planning and zero gender-based violence and harmful practices.

With warm regards,

Dr. Eiko Narita
UNFPA Representative a.i
UNFPA’s work around the globe is driven by the commitment to achieve a world with zero preventable maternal deaths and zero unmet need for family planning. These aims cannot be achieved unless every woman has access to a safe delivery performed by a skilled birth attendant and the contraceptives of their choosing.

By supporting the training of thousands of midwives and ensuring the availability of family planning services in vulnerable communities, UNFPA has contributed to the major strides that Bangladesh has taken in improving sexual and reproductive health and rights over the past decades.

Despite the challenges posed by the COVID-19 pandemic, we continued our critical support to the Government of Bangladesh throughout 2021. Our efforts proved particularly crucial in ensuring the continuation of midwifery education, expanding the availability and accessibility of modern contraceptives, and protecting the safety of pregnant mothers in health facilities across the country.
In 2021, UNFPA-supported midwives performed 102,264 normal deliveries; provided antenatal care to 642,203 women; conducted 2,122 menstrual regulation procedures and supported 10,959 women with post-abortion care.

After completing their 3-year midwifery pre-service education, 950 midwifery graduates from public midwifery institutions and 600 from private midwifery institutions applied for a licensing exam at the Bangladesh Nursing and Midwifery Council to become registered midwives in Bangladesh.

Throughout 2021, UNFPA supported the Directorate General of Nursing and Midwifery with providing remote education to midwifery students. A flipped classroom model, which allowed students to learn and complete assignments in a flexible manner, was devised to help students with limited access to the internet complete their studies.

To strengthen the capacity of local faculty to conduct the planned national Master’s degree programme in midwifery, 20 faculty members completed a certificate course on curriculum development with UNFPA’s support.

Two faculty members from Dhaka Nursing College were enrolled in a PhD programme in midwifery at Mahidol University, Thailand.

UNFPA supported the Directorate General of Nursing and Midwifery in developing a Costed Action Plan for midwifery education and services in accordance with the National Midwifery Policy for 2021-2025.

The Standard Operating Procedure for midwifery services was reviewed and approved by the Ministry of Health and Family Welfare and translated into Bangla.

In 2021, the percentage of deliveries performed by midwives in sub-district hospitals reached 86%. This marked a 50% increase from the rate in 2018.

UNFPA funded and facilitated a 28-day orientation and leadership training for 40 newly deployed faculty members from 19 new midwifery institutions.

In collaboration with Dalarna and Auckland universities, UNFPA continued to develop the curricula and syllabi for the national Bachelor’s and Master’s degree programmes in midwifery.

A total of 192,504 pregnant women with obstetric complications were managed in 26 district hospitals and 179 sub-district hospitals. This marked an 8% increase from 2020.
Compared to the rates in 2020, management of post-partum hemorrhage cases increased by 22% and the management of eclampsia cases by 26% in 179 sub-district hospitals.

After UNFPA deployed 6 midwives to 8 model district hospitals, a 26% increase in the use of ante-natal care services and an 8% increase in normal-vaginal deliveries was observed.

UNFPA supported the orientation of 158 District and Upazila health managers on providing comprehensive emergency obstetric and newborn care.

In collaboration with the Directorate General of Health Services, UNFPA completed a Performance Appraisal Workshop on maternal, newborn and child health services in all 64 districts of Bangladesh.

To ensure safe maternal health services in the context of the COVID-19 pandemic, UNFPA delivered materials on Infection Prevention and Control to all 64 district hospitals and 430 upazila health complexes in Bangladesh.

To ensure the continuation of quality maternal health services, UNFPA provided “Helping Babies Breathe” kits, delivery equipment, partograph sheets and other essential commodities to 26 district hospitals and 179 upazila health complexes.

With UNFPA’s support, 216 health service providers from Jhalokathi, Narayanganj, Tangail and Gazipur districts received training on “life-saving skills in pregnancy and childbirth”.

To ensure the continuation of maternity care in emergencies, UNFPA oriented a total of 2,712 health managers and service providers from 22 disaster-prone districts on “Environmental Health and Climate Change in Bangladesh and its Effect on Sexual Reproductive Health”.

1,032 statisticians from 14 districts received training on the computerized logistics management information system “eLMIS” to ensure uninterrupted availability of life-saving medicines and supplies in health facilities.

99% of service delivery points in UNFPA supported districts reported of having no stock outs of modern family planning methods in 2021.

In partnership with the Directorate General of Family Planning and programme managers and academics from different medical colleges, UNFPA launched a “Family Planning Handbook for Students and Physicians”.

598,426 women were reached with modern contraceptives during the Family Planning Service Campaign Week supported by UNFPA.

A total of 1,217 intrauterine devices; 2,722 implants; 108 non scalpel vasectomies; and 144 tubectomies were provided to the host community population in Cox’s Bazar district through Long-acting Reversible Contraceptives and Permanent Method (LARC&PM) camps.

In 6 UNFPA-supported districts, 12 family planning counselors deployed by UNFPA counseled 27,188 clients, out of whom 14,902 adopted different family planning methods.

With UNFPA’s support, 423 health care providers received training on post-partum family planning. As a result, the postpartum family planning uptake increased to 45% in 2021, compared to only 5% in 2017.
500 youths and adolescents participated in the “6th Bangladesh National Youth Conference on Family Planning”, which UNFPA organized in collaboration with the youth-led organization SERAC Bangladesh.

A total of 377,739 adolescents received information and counseling on SRHR services from 292 UNFPA trained service providers in five districts.

The Ministry of Health and Family Welfare conducted an acceptability study on DMPA subcutaneous contraceptive injection in selected UNFPA-supported health facilities.

The percentage of facilities providing VIA screenings for cervical cancer by trained service providers increased from 71% to 94% in 69 health facilities supported by UNFPA.

A total of 131,046 women were screened for cervical cancer in health facilities supported by UNFPA.

253 nurses and midwives participated in a two-day training on screening cervical cancers with the “Visual Inspection by Acetic Acid” (VIA) method organized by UNFPA, the Directorate General of Health Services, Brown University and Obstetrical and Gynaecological Society (OGSB) of Bangladesh.

With the support of UNFPA, Sheikh Mujib Medical University and the OGSB provided in-person VIA training to 248 service providers (96 midwives and 152 nurses) from 25 districts.

Despite COVID-19, UNFPA was able to establish colposcopy services in 10 district hospitals out of 17 targeted facilities.

UNFPA provided financial and technical support to the Management Information System (MIS) of DGHS to improve the national electronic tracking software for cervical and breast cancer.

With the support of UNFPA, Directorate General of Health Services (DGHS) provided training on etiological management of sexually transmitted infections (STIs) to 128 doctors from 8 districts. In addition, 18 laboratory technologists from 11 districts received training on laboratory screening of STIs.
● 7,508 pregnant women were screened for syphilis in 18 UNFPA-supported district hospitals.

● UNFPA supported the DGHS in developing and testing a service register for STIs. The technical working committee approved the initiative to be scaled-up nationally.

● HIV self-testing services were provided to 1,400 adolescents and young transgender people from five city corporations. Among them, 2 were found to be HIV positive and they both received free treatment from government hospitals.

● In collaboration with the Health Economics Unit of the Ministry of Health and Family Welfare, UNFPA provided training on health sector response to gender-based violence (GBV) for 357 healthcare providers from 11 districts.

● 146 nurses and statisticians from five districts received training on maintaining a GBV registry and entering data into the Government’s DHIS2.

● 4,066 survivors of GBV received support from UNFPA-supported health facilities in 19 districts.

● UNFPA supported the DGHS in conducting a cause analysis of maternal and newborn deaths with the involvement of 18 health managers and health care providers from five divisions.

● 30 statisticians from five divisions received training to improve their MPDSR data management.

● QIS and DGHS, in collaboration with UNFPA, provided national-level training to 100 health care providers on MPDSR implementation from 20 districts.

● DGHS, DGFP, DGNM and QIS jointly organized a national level coordination meeting to strengthen MPDSR implementation with the support of UNFPA.

● UNFPA supported the government in strengthening the capacity of 450 health care providers from 18 target districts, helping the districts to review the performance of the district MPDSR programme.

● With UNFPA’s technical support, DGHS published the 2021 annual report on MPDSR in Bangladesh.
UNFPA supported the DGHS in deploying 30 medical officers to COVID-19 dedicated hospitals and 20 medical officers to call centres for providing telemedicine services.

1,076,790 households were screened for potential COVID-19 patients by 1,000 volunteers engaged in UNFPA’s Community Support Team (CST) initiative funded by the World Bank.

The CSTs distributed a total of 197,091 cloth masks and 1,370,000 surgical masks in two Dhaka city corporations.

The CSTs helped establish 394 hand washing stations in the targeted communities.

10,500 pregnant women, including 2,400 pregnant women with COVID-19 symptoms, were referred for telemedicine services provided by midwives from the Bangladesh Midwifery Society.

A total of 2,610 healthcare providers and 321 cleaners and drivers received infection prevention and control training in 20 districts supported by UNFPA.

UNFPA deployed 200 surge midwives to COVID-19 dedicated hospitals.

With the support of FCDO, 72,000 three-layer surgical masks, 2,160 hand sanitizers, 1,680 soaps, 7,000 gloves, 48 infrared thermometers, 690 5-colour paddle bins, 70 fingertip pulse oximeters and 130 cleaning logbooks were distributed to 25 health facilities in 7 districts.

With UNFPA’s support, 1,763 healthcare providers from 24 facilities managing COVID-19 cases received individual mental health counseling.
Whenever I tell a mother who has just delivered that she and her baby are safe, my heart leaps with joy.

- Arafin Mim, Midwifery Student

“The only question in my mind was: “What are they going to do about our studies?” I was mentally depressed. I immediately called my teacher and friends to see what we could do.”

This is how a midwifery student Arafin Mim described her feelings during the early months of the COVID-19 pandemic, when the Government of Bangladesh was forced to close down all educational institutions, including midwifery institutes, in the country.

In the unprecedented situation, UNFPA and the Ministry of Health and Family Welfare were determined to find a solution that would enable the midwifery students to continue their studies. As many students had unreliable access to the internet, it was not possible for them to attend online classes at specific times.

In response to this challenge, a ‘flipped classroom’ was devised for the students, where learning materials were introduced to them before class with classroom time used to deepen students’ understanding through interactive discussions with peers.

After studying the materials, the teachers assessed how well the students had understood the material by giving them online assignments through a new dashboard system established during the pandemic. Additional support was then given to students struggling with the assignments.

“It was convenient and offered us flexibility. I could form a study group with my fellow students whenever we were able to do so. Considering the extreme pressure we were under, this was the best solution we could have come up with,” tells Arafin.

After studying remotely for almost a year, the Ministry of Health and Family Welfare finally allowed Arafin and her classmates to return to clinical training in early 2021.

“I cannot express the feeling I had in words. Never have I ever had such motivation to perform my duties. Whenever I reassure a mother who has just delivered that she and her baby are safe, my heart leaps with joy.”
Without accurate data, UNFPA cannot succeed in its efforts to support the most vulnerable communities in Bangladesh and around the world. Data allows us to allocate resources in the most efficient possible manner and focus our efforts on communities where the needs of the people are the greatest.

By supporting the Government of Bangladesh in conducting surveys and censuses, UNFPA has played a key role in mapping out the population dynamics of Bangladesh for decades. The data collected has proven crucial for the Government’s successful efforts in improving the quality and availability of sexual and reproductive health and other public services in the country.

In 2021, we continued our fruitful partnership with the Bangladesh Bureau of Statistics by helping it set-up the digital architecture for the country’s upcoming population and housing census. We also established a new data collection framework for teagardens in Sylhet Division and provided technical support to the development of various policy papers on issues relevant to the UNFPA’s mandate.
With UNFPA’s technical support, the Bangladesh Bureau of Statistics (BBS) finished the short-form questionnaire of the upcoming National Population and Housing Census. The long-form questionnaire was also drafted through an extensive consultative process that UNFPA participated in.

To support BBS in conducting the census digitally for the first time, UNFPA deployed a Census Technical Adviser, an Android Expert and a Network Administrator to provide on-site technical support to BBS’s census team.

With UNFPA’s support, BBS produced 120,000 color maps for conducting two zonal operations.

UNFPA supported BBS in producing geo-coded digital small-area maps for the disaster-prone districts of Khulna, Chandpur, Bagerhat and Cox’s Bazar. The maps will help the districts in preparing humanitarian response efforts in local communities.

In collaboration with ILO, UNICEF and UN Women, UNFPA helped develop a harmonized data collection framework for monitoring the well-being of female teagarden workers and their families in 25 tea gardens in Sylhet Division.

A harmonized data collection framework was developed to monitor the well-being of female teagarden workers and their families in Sylhet Division.

With UNFPA’s technical support, the General Economics Division of the Ministry of Planning prepared two policy papers titled “Urban Sustainability through Good Population Density Approach” and “Addressing Gender Differentials in Labour Force Participation to Reap the Demographic Dividend in Bangladesh”. UNFPA also helped conduct policy dialogues on the issues for the relevant ministries, policymakers and other stakeholders.

UNFPA supported the Bangladesh Parliament Secretariat (BPS) in producing the following policy papers:

1) Reviewing the Health and Education Policies of Bangladesh for the Effective Realization of the Demographic Dividend
2) Analysis of Public Budget Allocation for the Effective Implementation of the National Action Plan to End Child Marriage
3) Increased Accessibility for Adolescent Girls to Existing Skills Development Training Programmes at the Sub-District Level

UNFPA also supported in producing these policy papers:

1) Investing in Youth: Realizing Demographic Dividend in Bangladesh
2) Health Care Financing to Ensure Universal Health Coverage by 2030
3) Family Planning in Bangladesh: Ensuring Equity in Access to Services and Effective Contraception
4) Gender-based Violence and Its Mitigation
5) Adolescent Fertility and Policy Options to Reduce such Adverse Social Trends
6) The Anticipated Impact of COVID-19 on the Demographic Dynamics of Bangladesh and its Demographic Dividend

- 31 participants from the Bangladesh Parliament Secretariat, relevant ministries and departments and civil society participated in a capacity building workshop to identify challenges the Government’s 8th Five-Year Plan for 2021-2025 faces in achieving zero preventable maternal deaths, zero unmet need for family planning and zero gender-based violence and harmful practices.

- 20 experts on population issues participated in two policy discussions on the impact of COVID-19 on fertility rates and education in Bangladesh organized by UNFPA and the General Economics Division of the Ministry of Planning.

- In collaboration with the Department of Population Sciences, UNFPA organized an International Conference on “Emerging Population Issues and Sustainable Development Goals”, which brought together over 200 national and international experts to discuss the impact of population trends on the global effort to achieve the Sustainable Development Goals.

- In partnership with the Bangladesh Parliament Secretariat, UNFPA helped organize consultations on the harmful consequences of child marriage in five Upazilas. The Honourable Speaker of Bangladesh Parliament participated in the consultations.

- UNFPA provided training to 75 stakeholders to create a cadre of advocates for designing and implementing interventions to address urban health.

- UNFPA helped the Department of Population Sciences of the University of Dhaka in organizing a webinar titled “Rights and Choices are the Answer: Whether Baby Boom or Bust, the Solution Lies in Prioritizing the Reproductive Health and Rights of All People” for around 40 participants from the Government, NGOs and academia.

- To observe the International Day of Older Persons, UNFPA helped organize a webinar titled “Digital Equity for All Ages”, where around 160 participants discussed ways to increase the participation of older persons in decision-making.

- With UNFPA’s support, the Parliamentary Standing Committe of the Ministry of Women and Child Affairs and the Eliminating Child Marriage and Preventing Gender-Based Violence Sub-Committee (ECMSC) of the Bangladesh Association of Parliamentarians on Population and Development (BAPPD) reviewed the Domestic Violence (Prevention and Protection) Act of 2010 and Bylaws 2013. The revisions helped build the capacity of relevant law-enforcers and other implementing authorities to handle reported cases of domestic violence in a gender-sensitive manner.

- UNFPA helped the Bangladesh Parliament Secretariat in organizing consultation meetings with the Standing Committee on the Ministry of Law, Justice and Parliamentary Affairs to enquire what measures the ministry has taken to implement the High Court directives to prevent sexual violence and child marriage.

120,000 colour maps were produced to support the Bangladesh Bureau of Statistics in conducting two zonal operations

The short-form questionnaire for the upcoming National Population and Housing Census was completed with UNFPA’s technical support

20,000 colour maps were produced to support the Bangladesh Bureau of Statistics in conducting two zonal operations.
My home district of Gazipur has always had high rates of child marriage. I always felt hurt for the girls whose parents married them off before they had completed their education and gained the necessary skills to fulfill their potential.

When I was elected as a Member of Parliament, I knew I was in a privileged position to push for strong laws and policies to protect the girls of Bangladesh. I knew I could influence people’s behaviour by educating them on the harms of child marriage, promoting gender equality and speaking against sexual and gender-based violence (GBV).

Fortunately, I received the opportunity to become the Chair of the Eliminating Child Marriage and Preventing GBV Sub-committee (ECMSC) of the Bangladesh Association of Parliamentarians on Population and Development (BAPPD) in 2019. In my role, I have had the pleasure of working in close collaboration with UNFPA to prevent child marriages and gender-based in violence in Bangladesh.

Together, we have reviewed existing laws and policies and built the capacity of relevant public institutions to handle child marriage and GBV cases in a gender-sensitive manner. We have organized public hearings, consultation meetings and workshops to enhance the capacity of Parliamentarians and Union Parishad members to mobilise political will to end child marriage and GBV at both national and local levels. We have also established dozens of Adolescent Clubs to educate youth and adolescents on child marriage and other relevant issues to young people.

So far, administrations from 20 districts have informed us how they have enhanced their efforts against child marriage and GBV by forming community committees; strengthening monitoring systems; training public representatives and organizing awareness raising campaigns. Ending child marriage and GBV has also been included as an agenda item in monthly coordination meetings at the district and Upazila levels.

Despite our achievements, a lot of work remains to be done for Bangladesh to achieve zero gender-based violence and harmful practices. I look forward to strengthening our fruitful partnership with UNFPA as we continue making this long and challenging journey towards a more gender equal nation.

“When I was elected as a Member of Parliament, I knew I was in a privileged position to push for strong laws and policies to protect the girls of Bangladesh.”

- Begum Meher Afroze, Member of Parliament and Chair of the Eliminating Child Marriage and Preventing Gender Based Violence Sub-committee of BAPPD
Gender equality is an essential building block of happy, safe and prosperous societies. This is why UNFPA works around the world to combat gender-based violence and harmful practices that prevent women and girls from being fully participating and contributing members of their communities.

While Bangladesh has taken massive strides in improving women's and girls' rights over the past decades, domestic violence, sexual harassment, child marriage, dowry and other harmful practices remain prevalent in the country.

Throughout 2021, UNFPA continued to provide support to the Government of Bangladesh in tackling these persistent issues. With the help of our partners, we established Women Friendly Spaces in disaster-prone communities, trained local police officers on providing women friendly services and hosted awareness raising sessions on support available to survivors of gender-based violence across the country.
As a result of UNFPA’s successful advocacy, the Bangladesh Police integrated the Standard Operating Procedure on providing women-friendly service to survivors of gender-based violence into the curriculum of 29 in-service training centers and police training academies.

458 police officials were trained on the new Standard Operating Procedure to strengthen their ability to provide support to survivors of gender-based violence.

With UNFPA’s technical support, the Ministry of Women and Children Affairs developed a costed monitoring and evaluation framework for the National Action Plan on Violence Against Women (NAP-VAW).

Two training modules on gender-biased sex selection were developed. The modules will be used to develop the capacity of local communities and media to address son preference.

16 psychosocial counselors were trained on providing virtual mental health and psychosocial support to survivors of gender-based violence.

A multi-sectoral referral mechanism was established to provide justice and legal aid, as well as health, protection and social services to survivors of gender-based violence in four districts.

17,189 survivors of gender-based violence received assistance from 33 UNFPA-supported Women Help Desks in police stations across the country.

29,160 women and girls received multi-sectoral GBV services in four districts supported by UNFPA. 25,686 of the women and girls received information on gender-based violence through community outreach sessions and 3,474 were referred for further support after being subjected to gender-based violence.

17,189 women and girls received support from 33 Women Help Desks located in police stations in Dhaka, Patuakhali, Jamalpur, Cox’s Bazar, and Bogura. According to a cell phone survey conducted in 2021, around 74% of the respondents were satisfied with the support they received from the help desks.

37,639 women and girls received GBV and SRHR services from UNFPA-supported One Stop Crisis Centers in Cox’s Bazar District. The services included psycho-social support, clinical management of rape and referrals for legal and medical support.
During 2021, the UNFPA-led national GBV Cluster held 28 national and sub-national meetings, bringing together 128 organisations to discuss issues ranging from national referral pathway guidelines for GBV cases; Forecast Based Anticipatory Action; and policy on Protection from Sexual Exploitation and Abuse (PSEA).

8 Women Friendly Spaces were established in the disaster-prone districts of Jamalpur, Gaibandha, Khulna and Satkhira. 12,248 women and girls received support from these spaces during disasters.

UNFPA developed a training module on ‘Women Leadership and the Prevention of Gender-Based Violence in Emergencies’. 2,000 Cyclone Preparedness Programme volunteers from 21 coastal districts received training based on the new module.

64,264 community members in Cox’s Bazar received information on gender-based violence through various UNFPA-supported awareness raising activities.

4,550 women and adolescent girls in Cox’s Bazar received self-reliance training to increase their confidence and resilience in the face of the challenges they face in their communities.

In partnership with the Ministry of Women and Children Affairs, UNFPA developed a social and behavior change communication plan (SBCC) for 2022-2026 to address gender-based violence in Bangladesh. The plan aims to tackle harmful gender norms and practices that contribute to gender-based violence by promoting positive attitudes and behaviors among communities across Bangladesh.

UNFPA provided technical support to the Ministry of Health Family Welfare in drafting a National Guideline to address son preference in Bangladesh. The guideline is expected to be finalized during 2022.

8 Women Friendly Spaces were established in the disaster-prone districts of Jamalpur, Gaibandha, Khulna and Satkhira.
While women used to be unaware of the support they should receive if they faced violence, now they understand where to go for help.

- Muntaha Fatema, 28, GBV Caseworker in Dhulhata Union, Cox’s Bazar District

“I have seen lots of violence against women here. What often happens is that a girl and a boy get intimate and a girl gets pregnant. If the boy’s family accepts the girl after the child is born, they claim a high dowry for which women are often brutally beaten in this area. Sometimes I feel that girls here are born to be survivors of gender-based violence.

A change in the people’s mindset is happening, but very slowly. While women used to be unaware of the support they should receive if they faced violence, now they at least understand where to go for help. They clearly want safety and security.

The women in these villages need our services to live a better life. They want to study. They want to earn money and contribute to their households. It is our duty to help them.”

With funding provided by the Government of Canada, UNFPA is tackling gender-based violence in 18 unions across Cox’s Bazar District through its ‘Strengthening Sexual and Reproductive Health and Rights and Gender-Based Violence Prevention Services in Host Communities in Cox’s Bazar’ project.

28-year old Muntaha Fatema is one of the 18 caseworkers that the project has deployed to Union Health and Family Welfare Centers and Community Clinics around the district to provide support to survivors of gender-based violence.

By frequently organizing events, trainings, and court-yard sessions, she is raising awareness of the harms of gender-based violence among the local communities and giving local women and girls the courage to seek justice if they face abuse.
To achieve their full potential, young people must be able to make informed decisions over their bodies and lives. That is why UNFPA works to ensure that young people around the world have access to comprehensive life skills education that raises their awareness of sexual and reproductive health and rights, gender-based violence and harmful social practices.

While young people across Bangladesh have seen their opportunities expand in the past decades, they continue to face many difficulties on their path to adulthood. Over half of adolescent girls are married off before the age of 18 and the country’s adolescent pregnancy rate remains highest in all of Asia.

Despite the challenges posed by COVID-19, UNFPA utilized different innovative tools to reach young people throughout 2021. For example, tens of thousands of young people received vital information on adolescent health and harmful practices through life skills education teleclasses broadcasted on national TV and UNFPA’s Alapon Helpline continued to provide remote counseling to youth and adolescents coping with the hardships of the COVID-19 pandemic.
Despite challenges posed by the COVID-19 pandemic, 122 UNFPA-supported adolescent girls’ clubs remained operational by hosting outdoor sessions with smaller group sizes. 11,900 adolescent girls, 3,122 of whom were married, received life skills education through the clubs in four districts.

After educational institutions reopened in September 2021, 52,312 students (29,309 girls; 23,003 boys) attended life skills education classes aligned with the curriculum of the UNFPA-supported Gender Equality Movement in Schools (GEMS).

250 adolescent corners were established in schools and madrasas in 5 target districts to educate and refer young people to local adolescent friendly health services.

884 youth leaders were trained on sexual and reproductive health and rights, prevention of gender-based violence and referral systems through virtual orientations.

18,082 adolescents and youth between the ages of 10 and 24 accessed sexual and reproductive health and rights counselling services through the UNFPA-supported Alapon helpline. 84 of the callers were referred to visit nearby health centers for sexual and reproductive health and rights services.

Facebook Live sessions hosted by the Alapon helpline on Kishore Batayon’s Facebook page reached 517,355 people. The sessions provided the viewers with critical information on sexual and reproductive health, mental health and gender-based violence during the most severe stages of the pandemic in Bangladesh.

A total of 43 educational sessions on topics such as safe motherhood, gender discrimination, family planning and COVID-19 were broadcast to adolescents and youth on Radio Naf 99.2 FM.

9,134 Menstrual Hygiene Management kits were procured and distributed to adolescent girls in 80 schools and madrasas in flood-prone Jamalpur and Cox’s Bazar Districts.
UNFPA and UNICEF’s joint Global Programme to End Child Marriage began supporting the “Eliminating Child Marriage and Preventing Gender-Based Violence” sub-committee of the Parliament and advocated for adequate budget allocation to the effective implementation of the “National Plan of Action to End Child Marriage” and other interventions addressing child marriage.

With UNFPA’s support, Parliament’s sub-committee on ending child marriage and preventing gender-based violence hosted community sensitization meetings in two districts. Approximately 4,500 community stakeholders participated in the meetings.

UNFPA commissioned a nationally representative situation analysis of the impact of the COVID-19 pandemic on the lives of adolescent girls, including their vulnerability to child marriage.

UNFPA’s Shahana Cartoon, an edutainment series covering sexual and reproductive health issues, was officially recognized by the The Directorate of Secondary and Higher Education as a tool to teach adolescents in all 33,000 secondary schools across Bangladesh. 30,000 CDs and USBs containing the episodes were distributed to schools around the country.

160 youth volunteers were remotely trained on raising awareness of the harms of child marriage in Jamalpur and Cox’s Bazar districts.

The UNFPA-supported Anti-Sexual Harassment Committees, which operate in secondary schools in five districts, won the first-place award in the Innovation Showcasing 2021 competition organized by the Ministry of Women and Child Affairs.

UNFPA’s Shahana Cartoon Series was recognized as a tool for teaching adolescents in all 33,000 secondary schools in Bangladesh.
“When I came to school one day, I found my best friend Shila crying in the corner of the classroom. When I asked her what was wrong, she told me that her parents had arranged her marriage and she could not study anymore.

I had learned about the negative consequences of child marriage after attending UNFPA’s education sessions at an adolescents’ center near my house. I knew I had to do something to stop the marriage.

I told my school’s headmaster about what was happening. She immediately went to Shila’s home with some other teachers and a local ward counselor to meet her family. Luckily, they were able to convince her parents that the marriage was not a good idea.

I am so happy that I was able to stop the marriage of my best friend. As young girls, we have to be aware of our rights so our parents will not be able to marry us before we turn 18. If we girls support each other more, I know we can reduce the rate of child marriage in our communities.”

Through its “Global Programme to End Child Marriage” with UNICEF, UNFPA supports a network of Kishori Resource Centers in communities across Bangladesh. The Kishori Resource Centers empower adolescent girls by engaging them in a gender-transformative education programme focusing on sexual and reproductive health and rights.

The centers provide a safe and non-judgmental environment for adolescent girls to learn about taboo subjects, such as bodily autonomy, sexual and reproductive health and rights, and gender-based violence. By building their confidence, agency and bodily autonomy, the initiative aims to lower the risk of adolescent girls being married off during childhood.

"We have to be aware of our rights so our parents will not be able to marry us off at a young age."

- Tahiya, 18, Jamalpur District
In humanitarian emergencies, access to sexual and reproductive health services and protection from gender-based violence is often compromised. As a result, the vulnerability of women and girls to unsafe deliveries, unintended pregnancies, sexual harassment and other forms of violence often increases.

As one of the world’s most vulnerable countries to the impacts of climate change, Bangladesh has suffered from intensifying natural disasters for decades. The country has also hosted over a million Rohingya refugees in Cox’s Bazar since 2017. The ongoing COVID-19 pandemic has only complicated the efforts to address these simultaneous crises.

In 2021, UNFPA continued its active role in humanitarian response efforts across Bangladesh. In collaboration with our partners, we developed a database on families most vulnerable to natural disasters in five districts and maintained the availability of essential sexual and reproductive health and rights services in the Rohingya camps and surrounding host communities.
In collaboration with WFP, FAO, UNICEF and Bangladesh Red Crescent Society, UNFPA developed a common beneficiary database with information on 130,000 households most vulnerable to natural disasters in Jamalpur, Kurigram, Gaibandha, Khulna and Satkhira Districts. The database will be used to provide both anticipatory and responsive relief to families affected by natural disasters in the near future.

UNFPA and its partner ActionAid Bangladesh surveyed a total of 21,327 households in Jamalpur District and enlisted 16,624 households most vulnerable to monsoon floods to the common beneficiary database.

After UNFPA’s continued advocacy, SRHR and GBV issues were incorporated into the Nexus Strategy (2021-2026) on humanitarian-development collaboration for climatic disasters, endorsed by the Ministry of Disaster Management and Relief.

156 health care providers from four disaster-prone districts received a daylong orientation on taking anticipatory action to prepare for natural disasters.

78 midwives from six districts received orientation on humanitarian preparedness, including providing sexual and reproductive health services during emergencies.

In collaboration with the UNICEF-led Child Protection Working Group, six sub-national GBV Working Groups in disaster prone districts received support in enhancing the capacity of local organizations to prevent and respond to gender-based violence in emergencies.

UNFPA continued providing lifesaving sexual and reproductive health services in the Rohingya camps and surrounding host communities through 22 health facilities and 40 safe spaces for women and girls (30 Women Friendly Spaces; 10 Multipurpose Women Centres).

112,511 women and girls, 73.8% of whom were Rohingya refugees, received modern family planning services with UNFPA’s support. 30,638 of the women and girls received family planning services for the first time.

8,490 facility-based deliveries, 83,501 antenatal care visits and 21,353 postnatal care visits were reported in UNFPA-supported health facilities in the Rohingya camps and surrounding host communities.

127 health service providers were trained on the Minimum Initial Service Package (MISP) for sexual and reproductive health, which is a series of lifesaving activities required to respond to the sexual and reproductive health needs of affected populations during humanitarian crises.

22 disaster-prone districts were supported with MISP implementation capacity.
● After major fires and flooding in the Rohingya camps, 1,061 women of reproductive age, including 545 pregnant women, received life-saving sexual and reproductive health services. 93,778 members of the Rohingya community also received information on COVID-19 and sexual and reproductive health services available to them.

● 1,447 health workers (1,163 female; 284 male), including midwives, doctors, paramedics and program managers, received training on providing respectful maternity care, health education and counseling.

112,511 women and girls in the Rohingya camps and host communities accessed modern family planning services

The Maternal and Perinatal Mortality Surveillance and Response subcommittee reviewed all 59 facility-based maternal deaths reported in the Rohingya camps during 2021 and provided recommendations to prevent future deaths.

● 75 midwives in the Rohingya camps and surrounding host communities received training in Infection Prevention and Control.

● 24,000 items of personal protective equipment were distributed to both UNFPA’s implementing partners and partners of the Sexual and Reproductive Health Working Group in Cox’s Bazar.

● The UNFPA-led Sexual and Reproductive Health Working Group developed the “SRH Working Group Strategy on Family Planning for the Rohingya Humanitarian Crisis 2021-2023”, which was endorsed and approved by the Office of the Refugee Relief and Repatriation Commissioner (RRRC) and the Directorate General of Family Planning (DGFP).

Gender-based Violence

● 262,581 women and girls accessed GBV prevention and response services in 30 Women Friendly Spaces in the Rohingya camps and surrounding host communities.

● 7,828 vulnerable women and girls received dignity kits to maintain their personal hygiene and protect themselves from gender-based violence.

● 60,375 participants (55,320 female; 5,055 male) attended gender-based violence prevention and women’s empowerment programs in the 10 UNFPA-supported Women-Led Community Centers in the Rohingya camps and surrounding host communities.

133,248 reusable cloth masks were produced by female community volunteers and distributed in both the Rohingya and host communities.

● 250,297 people (160,131 female; 90,166 male) were reached with information on gender-based violence and harmful gender norms with the help of community activists mobilized by UNFPA’s SASA! social mobilization programme.

● The GBV Sub-Sector Coordination Team developed an interactive “SW Response” dashboard that allows lead agencies, partners and donors to coordinate activities in the camps and host communities effectively, as well as to ensure that activities are rationally conducted based on the gap analysis presented by the dashboard.

● 388 advocacy campaigns were conducted in the Rohingya camps and host communities as part of the annual “16 Days of Activism” campaign against gender-based violence.
Adolescent and Youth

- 6,984 adolescents and young adults (3,800 boys; 3,184 girls) from 3 host communities and 16 Rohingya camps were equipped with the knowledge and skills to make informed decisions regarding their sexual and reproductive health through UNFPA’s life skills education sessions.

- UNFPA’s Girl Shine life skills education programme communicated with 1,804 parents and guardians (743 male; 1,061 female) to encourage their adolescent daughters to access life skills education classes in UNFPA-supported Women Friendly Spaces.

- 156 youth leaders (118 male; 38 female) received peer-education training on life skills, gender equality, and safeguarding adolescents and youth.

- 6,235 solar lanterns were distributed to adolescents affected by fires in the Rohingya camps. The lanterns were distributed to ensure adolescents and youth could safely access toilets and washing areas after dark.

- 510 radios were distributed among adolescent girls in the Rohingya camps to enable them access SRHR and GBV focused recorded and live sessions.

- 7,129 Menstrual Hygiene Management kits were distributed to adolescent girls to ensure they could take care of their menstrual hygiene during natural disasters.

- 236 community stakeholders (196 male; 40 female) received training on protecting adolescents and youth during disasters.

- With the support of four counselors, 1,629 Rohingya adolescents received counseling and information on COVID-19, menstruation, child marriage, mental health and sexual and reproductive health issues through the UNFPA-supported Alapon Helpline.

- 43 radio sessions and quiz competitions on sexual and reproductive health and rights, gender issues, child marriage, gender-based violence, and menstruation were aired through community radio channels. In addition, 5 jingles were produced and aired through community radio channels to raise awareness of the harms of child marriage, COVID-19 and the importance of protecting one’s mental and sexual and reproductive health.

- To ensure meaningful youth engagement in the humanitarian programme cycle, the UNFPA-led Youth Working Group in Cox’s Bazar developed the terms of reference for the Youth Advisory Panel.

- In partnership with UNICEF and UNHCR, UNFPA rolled out the Inter-Agency Standing Committee guidelines on working with and for young people in humanitarian and protracted crises within the humanitarian programme in Cox’s Bazar.
With the soaps we received, my children and I were able to wash ourselves whenever we wanted.

- Mongli, Dignity Kit recipient, Kurigram District

“It’s hard to list all the struggles we face during floods. Even going to the toilet becomes difficult. If the water level is low, my kids and I take turns to go to a temporary toilet once a day. If the water level is high, we have no other option but to somehow do it in the water in our house.

Last year before the flood hit our village, UNFPA gave us some useful items that helped us with these challenges. With the soaps we received, my children and I were able to wash ourselves whenever we wanted. With the torchlight, I was able to move safely after dark!

However, the menstrual cloth was definitely the best thing we received. Previously during floods, we would have to rip our old clothes or other fabrics in the house and use them as menstrual clothes. I am so happy that I did not have to do it this time.”

Since 2020, UNFPA has distributed 6,000 of its signature Dignity Kits to vulnerable families in Kurigram, Gaibandha, and Jamalpur District to support them in preparing for floods anticipated to hit their villages. The kits have been distributed through the CERF Anticipatory Action Pilot Project funded by UN OCHA and Australian Department of Foreign Affairs and Trade. The initiative marks the first time ever that anticipatory disaster relief has been provided to disaster-prone communities in Bangladesh.

In 2021, the project established a Common Beneficiary Database on 130,000 households most vulnerable to natural disasters in Jamalpur, Kurigram, Gaibandha, Bogura and Sirajgonj Districts. The database will ensure that whenever a disaster strikes in these districts, UNFPA will be able to coordinate actions with other humanitarian actors like WFP, Bangladesh Red Crescent Society (BDRCS), UNICEF and FAO to provide immediate assistance to the affected families.
LEAVING NO ONE BEHIND

Every country has groups of people whose needs are often overlooked by the society around them. By adhering to the principle of “Leaving No One Behind”, UNFPA tries to ensure that these neglected groups get to enjoy the full benefits of the progress their societies make in improving health, safety and welfare.

In Bangladesh, UNFPA has played a critical role in breaking the silence around the challenges faced by many of the country’s most vulnerable and left behind groups. These groups include transgender and gender diverse people, sex workers, persons with disabilities and female teagarden workers.

Throughout 2021, we continued to respond to the unique needs of these communities. For example, we ensured that testing and treatment for HIV and sexually transmitted infections remained available to groups vulnerable to sexual violence and that mental health and psychosocial support services were accessible to stigmatized communities.
With UNFPA’s support, the National Institute of Mental Health developed a training module on mental health and psychosocial support to strengthen the capacity of health service providers to provide mental health support to women and girls, particularly female sex workers.

2,956 female sex workers received integrated sexual and reproductive health services in eight brothels. 1,017 of the sex workers were tested for HIV and none were found to be positive.

In collaboration with UNFPA’s Regional Office in the Asia-Pacific, a study on “gender-based violence against female sex workers and transgender people during the COVID-19 pandemic in Dhaka and selected brothels” was conducted. The study findings will be used to address gender-based violence issues among these vulnerable populations and to advocate with the government and other relevant stakeholders to mobilize resources for protecting their rights.

1,480 sex workers were tested for syphilis. Among them, 41 tested positive and received treatment with UNFPA’s support.

1,430 of female sex workers received UNFPA’s support after being subjected to gender-based violence.

1,400 HIV self-tests were done among young gender diverse populations in 5 city corporations. Two of them were found positive and are now receiving antiretroviral drugs.

With UNFPA’s support, 285 transgender people received emergency personal protective supplies to take care of their hygiene needs in the aftermath of natural disasters.

3,050 transgender people were provided with integrated sexual and reproductive health services through two UNFPA-supported wellness centers in Cox’s Bazar District. 1,104 transgender people were also tested for HIV, only one of whom was found positive and received Anti-Retroviral Drugs.
563 deliveries were performed by professional birth attendants in tea gardens and their catchment areas in Sylhet Division.

- 1,686 female workers from 25 tea gardens in Sylhet Division attended UNFPA-supported awareness raising sessions on accessing social protection and social safety net programmes.
- 174 healthcare providers from tea gardens in Sylhet Division received training on sexual and reproductive health, women’s rights and gender-based violence.
- 563 deliveries were performed by professional birth attendants in the tea gardens and their catchment areas in Sylhet Division.

1,849 female tea garden workers received antenatal care and 940 postnatal care in health facilities in the tea gardens and their catchment areas.

- 325 tea garden workers with pregnancy-related complications were referred from health facilities in the tea gardens to higher-level facilities for specialized care.

6,213 normal vaginal deliveries and 707 postpartum hemorrhage cases were managed by UNFPA-supported midwives in urban slums.

- 16,083 women from urban slums in 5 city corporations (Dhaka North, Dhaka South, Rajshahi, Chattogram and Sylhet) accessed the DMPA-SC self-administered injectable contraceptive with UNFPA’s support.
- To improve vulnerable women’s access to emergency obstetric and newborn care services, UNFPA developed an Android-based mobile application for nineteen midwifery-led maternity centres in urban slums. The mobile application is currently being used to establish a 24/7 referral platform for reducing delays in women reaching hospitals in emergency situations.
- UNFPA designed an intervention to integrate SRHR services and counseling into pharmacies located in urban areas of Bogura and Bagerhat districts. 536 pharmacists from the districts received training on providing SRHR services, referring complicated cases to appropriate health facilities and reducing harmful medicine dispensing practices.
- UNFPA conducted a study in the urban slums of Dhaka, Khulna and Rajshahi to gain a better understanding of the SRHR needs of climate migrant women and girls. An intervention based on the findings of the study is currently being designed.
PERSONS WITH DISABILITIES

- UNFPA supported the Directorate General of Family Planning in endorsing the Standard Operating Procedure on disability-inclusive family planning and sexual and reproductive health services. An action plan to guide family planning managers in serving persons with disabilities in a respectful manner was also developed.
- 191 girls with disabilities received Menstrual Health Management kits in Jamalpur and Cox’s Bazar Districts.
- 5,334 women and girls with disabilities accessed gender-based violence prevention and response services in 30 UNFPA-supported Women Friendly Spaces in the Rohingya camps and surrounding host communities.
- 498 persons with disabilities (462 female; 36 male) attended gender-based violence prevention and women’s empowerment programs for the first visit and revisit in 10 UNFPA-supported Women-Led Community Centers in the Rohingya camps and surrounding host communities.

FISTULA SURVIVORS

- Throughout 2021, the Ministry of Health and Family Welfare and UNFPA continued their joint “Elimination of Fistula” programme in Rangpur, Sylhet, Chattogram and Rajshahi Divisions.
- In 2021, Directorate General of Health Services declared Panchagarh District as the first obstetric fistula free district in Bangladesh.
- UNFPA supported the Directorate General of Health Services in operationalizing 23 fistula corners in district hospitals of the four target divisions.

477 fistula survivors
had their fistulas surgically repaired with UNFPA’s support

- With UNFPA’s support, 524 fistula survivors were admitted to the hospital for fistula surgery, out of whom 477 had their fistula surgically repaired.
- 88% of the women who had their fistula surgically repaired received needs-based rehabilitation and reintegration support from UNFPA.
- In Rangpur division, fistula survivors were trained to knit reusable sanitary pads to help them earn money and reintegrate into society.
- 450 fistula survivors also received psychosocial counseling via UNFPA-supported telemedicine services.
As a result of her hearing and speaking impairment, 12-year old Arifa Akter* faces many difficulties in her daily life as an adolescent girl living in a host community near the Rohingya camps in Ukhiya Upazila.

As the sole breadwinner of her family of five, Arifa’s father often finds it challenging to cover the medical expenses for treating Arifa’s disability. Furthermore, as nobody in the family speaks sign language, Arifa often faces difficulties in communicating her needs to them. Without a common language, making friendships with other girls in the community is also challenging.

In 2021, Arifa’s mother discovered that there was a UNFPA-supported Women Friendly Space near their house. The Women Friendly Space would provide Arifa a safe space to go and socialize with other girls her age, as well as receive life skills training on issues relevant to youth and adolescents.

Arifa was immediately exalted by the new things she was learning from the caseworkers at the Women Friendly Space. She was particularly happy with the learning sessions on menstruation as she had previously struggled to understand the concept.

The highlight for Arifa came in March, however, when UNFPA and the Foreign, Commonwealth and Development Office of the United Kingdom distributed Menstrual Hygiene Management kits to vulnerable adolescent girls in the Women Friendly Space. Receiving the kit marked the first time in Arifa’s life that she had sanitary pads during her period.

"After receiving the sanitary pads, Arifa started going out during her period for the first time. Previously, she had always stayed home, because our family could not afford sanitary pads. I had never seen her this confident and relaxed before!" Arifa’s mother said about the way in which receiving the kit changed her daughter’s demeanor.

*Name of the person has been changed to protect her identity
In 2021, UNFPA finished its 9th Country Programme in Bangladesh. The 9th Country Programme focused on four key outcome areas of sexual and reproductive health and rights, adolescents and youth, gender equality and women’s empowerment, and population dynamics, each with their own expected outputs. In this section, you may find an overview of our programme delivery in 2021 as per the outcome areas outlined in the 9th Country Programme Document.
2021 DELIVERY

Total Delivery
50,211,056 US$

Outcome 1: Sexual and Reproductive Health and Rights

Output 1: Strengthened national policy and health-sector capacity to deliver a midwife-led continuum of care and emergency obstetric and newborn care.

Total Delivery 6,341,521 US$

Output 2: Enhanced national capacity to increase demand for, and supply of, family planning information and services.

Total Delivery 3,533,62 US$

Output 3: Increased institutional capacity to deliver integrated and equitable sexual and reproductive health services, including sexually transmitted infections and HIV, in development and humanitarian contexts.

Total Delivery 24,279,619 US$

Budget breakdown as per the outcome areas of the 9th Country Programme:
Outcome 2: Adolescents and Youth

Output 1: Increased capacity to implement evidence-based policies, strategies and services for adolescents and youth, including sexual and reproductive health and reproductive rights, gender-responsive life skills education, and prevention of child marriage.

Total Delivery 3,541,852 US$

Outcome 3: Gender Equality and Women’s Empowerment

Output 1: A national mechanism operationalized to plan, coordinate and monitor strategies, policies and protocols to address gender-based violence and harmful practices.

Total Delivery 510,023 US$

Output 2: Increased availability of information and services to prevent and address gender-based violence and harmful practices, in both development and humanitarian settings.

Total Delivery 11,003,205 US$

Outcome 4: Population Dynamics

Output 1: Increased capacity of national institutions to further disaggregate, analyse and disseminate quality population data in a timely and user-friendly manner in order to inform evidence-based planning, budgeting and monitoring progress.

Total Delivery 772,939 US$
Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled

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