Workplace Family Planning Interventions: Expanding Access to Services for Garment Workers in Bangladesh
Acknowledgments

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Supporting Organizations:

[Logos of USAID and EngenderHealth]
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Presentation Outline

- Significance/Background
- Program Intervention/Activity Tested
- Methodology
- Results/Key Findings
- Program Implications/Lessons Learned
Significance/Background

**Reaching Women Where They Work**

The garment industry in Bangladesh employs approximately four million people, many of whom are women of reproductive age. Many factories (those of a minimum size) are legally required to provide basic healthcare, but most fail to offer family planning (FP) and reproductive health services.
Working in select urban factories, EngenderHealth:

- Conducted FP educational sessions for garment workers
- Provided garment workers with short-acting FP methods through factory mini-clinics
- Referred garment workers to off-site facilities for long-acting reversible contraceptives and permanent methods
Using a phased approach, EngenderHealth trained a workplace coordinator and team of peer educators in each of the targeted factories who then cascaded information to garment workers by:

- Facilitating group education sessions
- Disseminating FP promotional materials to facilitate spousal communication
- Conducting follow-up with participants and referring prospective FP clients to appropriate providers—either within or outside the factory

EngenderHealth signed agreements with the national garment trade association and the Government of Bangladesh to allow for the provision of FP services on factory premises and to ensure the necessary supply of select FP methods to factory mini-clinics.
Results/Key Findings

Working across the 58 target factories, EngenderHealth:

- Conducted 2,920 education sessions
- Provided 88,169 garment workers with FP information and referrals for FP services
- Facilitated adoption of FP methods for 8,691 garment workers
Results/Key Findings

Contraceptive Method-Mix (N=8,691)

- Oral Contraceptive: 2680 (31%)
- Condom: 2312 (26%)
- Injectable: 343 (4%)
- Long-Acting / Permanent Method: 3356 (39%)
Program Implications/ Lessons Learned

- Peer-facilitated education sessions held within workplaces with a large underserved population can rapidly and cost-effectively increase FP demand and uptake.
- Facilitating a partnership with the government to ensure availability of FP commodities is essential to providing workplace FP services.
- By negotiating special FP days with managers, workers can instantly access FP services with minimal disruption to the working environment.
- Providing referrals to nearby facilities can improve adoption of FP methods that are unavailable on-site.
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Thank you!