

# Narrative Progress Report

July 2018 – December 2018





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Submitted to:

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Kingdom of the Netherlands

**Embassy of the Kingdom of the Netherlands**

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## List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ACPR	Associates for Community and Population Research
BCC	Behavior Change Communication
CSE	Comprehensive Sexuality Education
FSWs	Female Sex Workers
HIV	Human Immunodeficiency Virus
HTC	HIV testing and counselling
IDUs	Intravenous Drug Users
KPs	Key Populations
MSM	Men who have Sex with Men
MTCT	Mother to Child Transmission
NASP	National AIDS/STD Program
NGO	Non-Governmental Organization
NSP	National Strategic Plan
PC	Population Council
PLHA	People Living with HIV/AIDS
PSTC	Population Services and Training Center
RH	Reproductive Health
SGBV	Sexual and Gender-based Violence
SHR	Sexual Health & Rights
SRHR	Sexual and Reproductive Health and Rights
STIs	Sexually Transmitted Infections
TGW	Transgender Women
UNAIDS	Joint United Nations Program on HIV and AIDS
UNESCO	United Nations for Education, Science and Cultural Organization
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VYKPs	Vulnerable Young Key People
WHO	World Health Organization



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## Executive Summary

SANGJOG, an intervention, aiming to improve sexual reproductive health and rights (SRHR) for the young key population (KP) (15-24 years) who are at risk of HIV/AIDS, in Bangladesh. This project is a joint collaboration between Population Services and Training Center (PSTC) and Population Council (PC), with the financial aid extended by the Embassy of the Kingdom of the Netherlands (EKN)., This is a two-year project in place since December, 2016. But the project has been extended to continue till December 2019, considering the need of the project beneficiaries. The intervention areas of the project are, Chattogram, Cox's Bazar, Dhaka, Dinajpur, Gazipur, Jashore and Kushtia. SANGJOG as a part of its humanitarian response, has been embarked on providing primary health care services focusing SRHR for the Rohingya Refugees in Cox's Bazar, since October 2017. The current project progress report documents the reporting period of July to December, 2018.

To meet the project goal, SANGJOG reaches its target population for instance transport workers, pavement dwellers/street children, floating female sex workers, and young people working as day labor or engaged in small trades through peer networks. Trained Peer Educators, a total of 70, 10 from each working district, belonging to each target group are working with SANGJOG as frontline workers. SANGJOG has given much emphasis on its advocacy activities to meet young key people's (KP's) Sexual and Reproductive Health and Rights (SRHR) need through community mobilization. The project also provides health services and other relevant services to address the needs of vulnerable young key people (VYKP) recommended by the updated National Reproductive Adolescent Health Strategy 2017-30. Another important aspect of the project is generating evidence on this important SRHR issue to recommend and fine tune existing and similar national and international interventions through its monitoring and evaluation activities for the concerned stakeholders, policy makers, government and wider public health communities.

### Activities Performed

- SANGJOG reached a total of 9,795 adolescent and young people during the reporting period July to December 2018 through its different activities focusing on SRHR and HIV/AIDS.
- 82 Orientation sessions were organized during the same period where 1,679 young people were provided Comprehensive Sexuality Education (CSE).
- 13,200 young people were provided RTI/STI and counseling services through different referral health centers.
- During the current reporting period SANGJOG provided health care services focused on SRHR needs among 11,059 of Rohingya refugees residing in Balukhali and Kutupalong health camps.

### Conclusion

The midterm evaluation of SANGJOG intervention showed that the intervention had a positive effect on most of the aspects of sexual and reproductive health knowledge and behavior. VYKP in seven districts where the SANGJOG intervention was implemented, showed improved knowledge and behavior related to STIs. This is likely to be related, in part, to the intervention's facilitation of peer sessions and referral linkages among VYKPs, government health facilities, and non-governmental organization (NGO) operated health facilities, which made it possible for facilities to offer youth friendly and free-of-cost services to VYKPs. Moreover, a positive effect was also observed on VYKP's knowledge of HIV/AIDS, safer sex, and use of contraception.

Improving HIV/AIDS testing and counselling (HTC) services by VYKP was a challenge for SANGJOG as HTC services were not offered by all the government led health facilities, available only in 3 districts: Dhaka,



Chattogram and Cox's Bazar, with whom SANGJOG made referral linkages. The good news is that at the beginning of the year 2019, the government has taken initiatives to offer HTC services in 19 districts of Bangladesh of which six districts are SANGJOG intervention areas except Kushtia. The intervention is now focusing more on HIV/AIDS testing and counselling (HTC) services in coordination with government facilities. Special initiatives has been taken for Kushtia to increase the number of HTC by the VYKP in coordination with the NGO health clinics.

We appreciate the support of the embassy of the Kingdom of the Netherlands (EKN) in strengthening the health camps initiatives for the Rohingya refugees focusing SRHR, which would have positive impact on their health and wellbeing.



## Background

SANGJOG is an intervention focusing on improving sexual reproductive health and rights (SRHR) for young people, vulnerable to HIV in Bangladesh. Population Services and Training Center (PSTC) in collaboration with Population Council (PC), has been implementing the program in seven districts of Bangladesh since December 2016 and will continue the initiative till December 2019. SANGJOG has been working on to incorporate SRHR interventions to existing community-based HIV programs and create linkages with public and private sexual and reproductive health (SRH) services providers. The project has received all financial support from the Embassy of the Kingdom of the Netherlands (EKN).

The overall goal of the project is to enhance the status of SRHR for vulnerable young key people (VYKP) in Bangladesh through increasing ideal sexual practices and utilization of SRHR services by young people aged 15 to 24 years representing various key population for instance transport workers, pavement dwellers/street children, floating female sex workers, young laborers and small traders. In addition to its regular program, SANGJOG has been providing Primary Health Care Services focused on SRHR for the Rohingya refugees in Cox's Bazar, Bangladesh, since October 2017.

**SANGJOG** aims to make a significant change through incorporating vital SRHR interventions and is working towards generating important evidence to aid the broader SRHR/HIV integration movement with the following Goal and Objectives:

### **Goal**

Increased access to integrate SRHR & HIV services to vulnerable young key people (VYKP)

### **Objectives**

1. Increase awareness and health seeking behavior of 75,000 VYKP on SRHR and HIV services.
2. Establish functional referral linkage with GoB and NGO health facilities for providing SRHR and HIV services to 60,000 VYKPs.
3. Increase capacity of 20 Government service facilities for providing integrated SRH and HIV services.
4. Advocacy for creating enabling environment through sensitizing 300 stakeholders for creating increase access to VYKPs to SRHR & HIV information and services.

This report documents six months' (July to December 2018) progress of SANGJOG, achievements vs targets, identified gaps and conclusion.

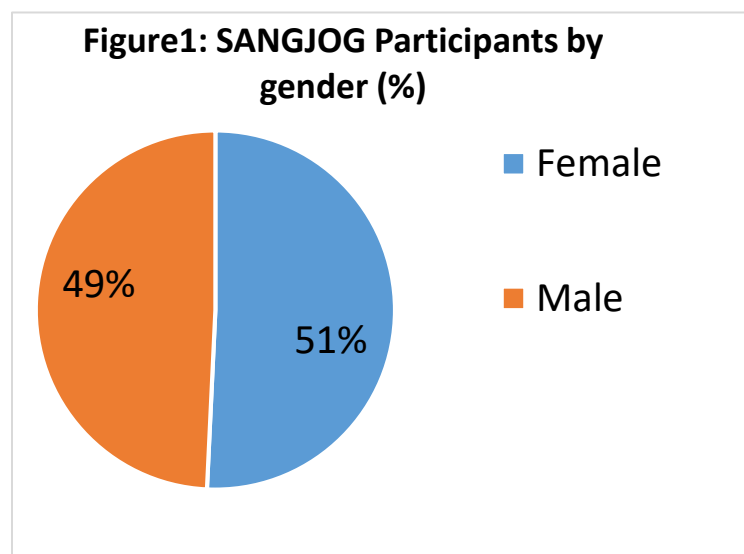


## Results Achieved According to Logframe

### *Result 1: Young people are well informed and thus able to take better decision regarding healthier choices*

#### Activity 1.1.1: Community mobilization and education to increase knowledge of VYKP for HIV/AIDS

One of the key activities of the SANGJOG project is to mobilise the VYKPs through peer sessions (courtyard meeting) within their communities. The field supervisors had received training on using SurveyCTO monitoring tool to monitor each and every peer session and to send the data to the cloud-based server for real time monitoring.



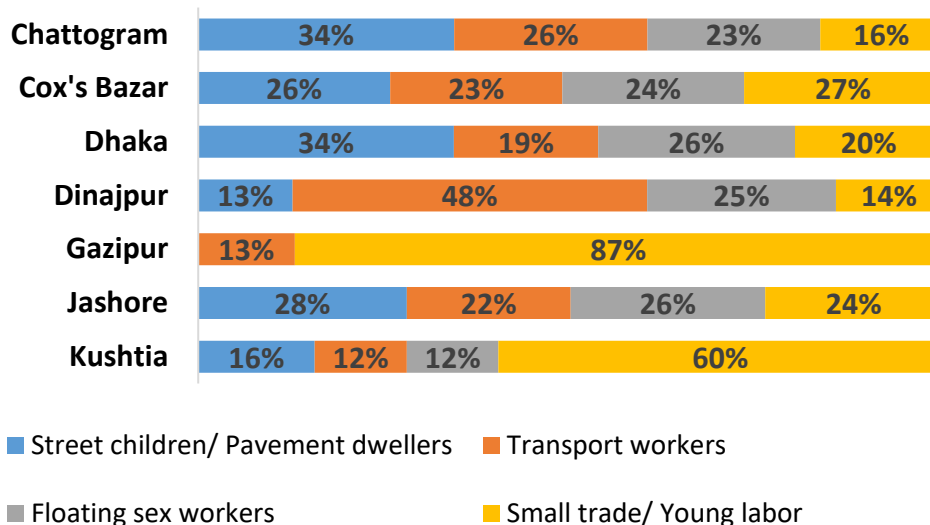
To achieve the objective one in the latter half of year two, i.e. July to December 2018, 494 peer sessions were planned to be organized. SANGJOG successfully conducted 495 sessions reaching 9,795 participants, from July to December 2018. Figure 1 provides a gender proportion of attendees of peer sessions arranged by SANGJOG project from July to December 2018. Overall gender ratio among male female is almost similar (49% vs 51%).

The total sessions arranged between July to December 2018 by all the seven districts were further classified by the attendees' vulnerable group type and the Figure 2 provides us the information that among the four different VYKP groups, overall street children/pavement dwellers group dominates in three out of the seven districts namely Chattogram (34%), Dhaka (26%) and Jashore (28%). In Gazipur, being an industrialized area, still the VYKP group of small trade/ young labourer group predominates over other groups. In Kushtia, participants from young labourer (60%) and in Dinajpur participants from transport worker (50%) were also higher than other groups.

So far SANGJOG conducted 2521 peer sessions reaching 50,392 VYKPs in the 2 years duration. Distribution of participants are as following: FSW (19%), transport workers (24%), Pavement dwellers (24%) and young labourers (33%).



**Figure 2: SANGJOG Participants by district & group (%)**



#### Objective:

- To improve knowledge base for health seeking behavior of vulnerable young key people (VYKP) on SRHR & HIV services

#### Main Components discussed in peer sessions

- PSTC and SANGJOG project background
- Primary knowledge on reproductive health
- Reproductive Tract Infection (RTI)- (Definition, Syndrome, Treatment)
- Sexually Transmitted Infection (STI)- (Definition, Syndrome, Treatment)
- HIV/AIDS (Definition, Syndrome, Transmission, Treatment)
- Proper and safe use of condom

#### Expected Results

During the period of July to December 2018, the targeted young people were able to

- have common standard of quality and understanding regarding the SRHR and HIV issue as defined by the SANGJOG intervention,
- have become aware of health seeking behavior,



- seek SRHR and STI related services from the referral centers.

#### **Activity 1.1.2: Disseminate HIV/SRHR Information through road side bill boards & banners/festoons in intervention areas**

To evoke a wider public attention on SRHR issues, the intervention utilized bill boards as one of the components of behavior change communication (BCC) to raise awareness in the community. SANGJOG had decided to set up bill boards and banners/festoons in strategic places in all the seven intervention districts since inception. Hence, in the second half of 2018, three Billboards, 350 banners/festoons were displayed at different suitable places in Gazipur. In Dinajpur, 35 banners/festoons and two billboards were displayed at different places. In Jashore, 171 banners/festoons were displayed in suitable places and one bill board and 700 festoons were placed in Kushtia. In Chattogram, 100 danglers and 200 festoons were developed and displayed in different places.

#### **Activity 1.1.3: Staff orientation on project goal and objectives with organizational rules and regulation**

The activities under 1.1.3, were completed in the first year of the project.

#### **Activity 1.1.4: Orientations on comprehensive sexuality education (CSE) for VYKP**

Comprehensive sexuality education (CSE) is absent in school curriculum and in Bangladesh sexuality is a societal taboo. This makes young people in a state of confusion, receiving wrong information and are prone to risky behaviors. Thus in order to protect SRHR well-being and dignity CSE was instrumental to make them aware of SRHR in the current project, addressing the following objectives.

##### **Objectives:**

- To build awareness among VYKP about STI/RTI
- To share proper and comprehensive knowledge about HIV/AIDS and its prevention
- To teach people about safe usage of condom

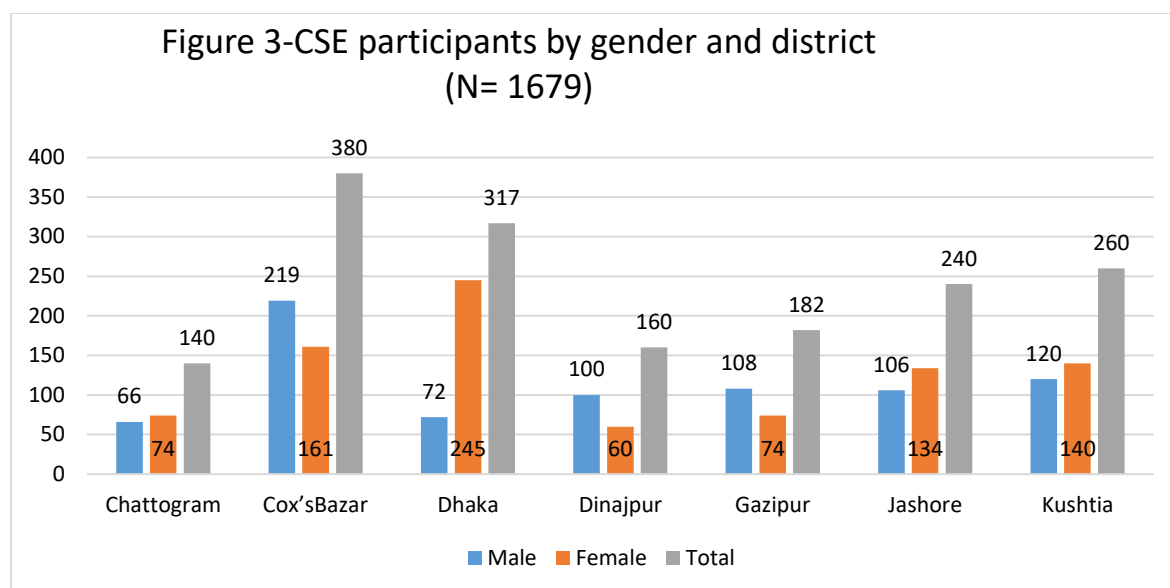
During the period of July 2018 to December 2018, 82 CSE sessions were organized. 1,679 young people received information on SRHR including RTIs/STIs and early marriage issues in all the seven districts (Figure 2).

##### **Expected Results**

Through these CSE orientation sessions, the targeted young people were expected to have:

- increased knowledge and desired attitudes towards sexual and reproductive health and behaviours,
- positively inclined to practice safer sex and its significance in their lives,
- proper knowledge and become well aware regarding HIV/AIDS,
- become proactive in realizing SANGJOG's efforts in HIV/AIDS prevention,
- become inspired to make other peers aware of SRHR and HIV/AIDS,
- become keen on having RTI/STI treatment, if required.





#### Activity 1.2.1: Capacity building training for the peer educators

This was an inception period requirement and thus completed accordingly in the first year.

#### Activity 1.2.2: Refresher training for peers on making healthy choice and claiming SRH rights for VYKP

In the beginning of the first year, SANGJOG imparted knowledge among the peer educators and developed confidence on HIV/AIDS and SRHR issues. In seven working districts of SANGJOG, 70 peer educators had been working effortlessly since project inception. Peer educators were acted as changing agents between SANGJOG and target groups and regular refresher training was a prerequisite to keep them focused on the following project objectives SANGJOG

##### Objectives:

- To review the implementation process and progress of peer approach
- To refine peer educators skills
- To share experiences and lessons learned from the field
- To discuss the needs of target of people

Refresher training of SANGJOG was accordingly arranged in each district with a regular interval. The refresher training was held in July and August, 2018 in Dinajpur and Cox's bazaar respectively. In other districts, refreshers trainings were organized during the period of January to June 2018.

##### Main components discussed in refresher training:

- PSTC and SANGJOG project background,
- Primary knowledge on reproductive health,
- RTI- Reproductive Tract Infection (Definition, Syndrome, Treatment),
- STI- Sexually Transmitted Infection (Definition, Syndrome, Treatment),
- HIV/AIDS (Definition, Syndrome, How to transmit or not transmit, Treatment),
- Gender role in HIV,
- HIV in Bangladesh,



- Proper use of condom,
- Communication and counseling,
- Referral and Linkage,
- Record keeping and documentation.

### **Expected Results**

Peer educators through their participation in the refresher trainings were expected to:

- develop common standard of quality and understanding as defined by the project,
- be able to be innovative in reaching VYKP, if required,
- become aware of SRHR and HIV prevention,
- raise their level of knowledge regarding SRHR issues,
- commit to provide need base service in their community,
- be confident to discuss the issues in their meetings,
- feel empowered to disseminate their learnings,
- commit to work towards reducing HIV from the society.

### **Activity 1.2.5: Refresher Training for project staffs towards Capacity Building**

This activity was completed during January to June 2018 and reported accordingly.

### **Activity 1.3.1: Orientation on creating supportive socio- cultural environment for selected local committee members**

SANGJOG project identified parents and other members, closely related with VYKP's life for making the environment positive towards SRHR and HIV/AIDS prevention. During the current reporting period, five orientations were held with 98 participants which includes 53 males and 45 females in Cox's Bazar; four orientations were held with 90 participants of whom 43 were males and 47 females in Dhaka; four orientations were done where 20 males and 60 females participated in Dinajpur; six Orientations were held with 76 males and 41 females participants in Gazipur; three orientations were held with 60 participants including 20 males and 40 females in Jashore and six orientations were held with 121 participants including 46 males and 75 females in Kushtia.

### **Activity 1.3.2 Coordination meeting with local committees that create a supportive socio-cultural environment for the protection of SRHR of VYKP for HIV**

Community leaders, local elites who usually lead and influence community activities and mind set, can play a crucial role to create enabling environment in the community to promote SRHR and prevent HIV/AIDS. Keeping this in mind SANGJOG included these community representatives to advocate for such environment to achieve project goal. To address this issue, 19 meeting were organized with 398 community leaders of whom 265 were male and 133 were female during this reporting period.

### **Activity 1.3.3: National day celebrations**

SANGJOG team observed World Population Day on July 11, 2018 forming human chain and discussion meetings in Chattogram and Cox's Bazar. International Youth Day on 12 August 2018 and World AIDS Day on December 1, 2018 were also observed in Chattogram, Gazipur, Cox'sBazar, Jashore, Dhaka and Kushtia along with government and other non-government organizations. In addition to these, National Breast Feeding Week and National Youth Day were observed in Gazipur.



#### Activity 1.3.4: Develop and distribute Information Education and Communication (IEC)/Behavioral Change Communication (BCC) materials

SANGJOG developed IEC/BCC materials for changing behaviour, beliefs and perspectives of target people opposing SRHR, keeping local needs and issues in mind. Brochure, posters, leaflet, flip chart, hand fan, *Ludo* (a classic board game with messages on STIs/HIV/AIDS) were developed during first year of the project and distributed among the VYKP conveying SRHR and HIV related messages. This year, till December from July, 18, 36,000 IEC materials were distributed among the target groups.

### *Result 2: Young people have access to anti-retroviral drugs, contraceptives and other commodities required for good sexual and reproductive health (SRH)*

#### Activity 2.1.1: Orientation for service providers to promoting and distributing SRH services, commodities and medicines

During this reporting period, one orientation program was held in Gazipur at Shahid Ahsan Ullah Master General Hospital in July with eight male and 32 female participants to address the following objectives. The other districts have completed this activity successfully in the previous years and was reported accordingly in the 2<sup>nd</sup> and 3<sup>rd</sup> narrative progress reports.

##### **Objectives:**

- To provide a comprehensive understanding of SRHR issues,
- To encourage availing SRHR services, commodities and medicines,
- To promote positive relations between clients and service providers,
- To develop informed and responsible service providers,
- To reduce stigma and discriminations among the service providers.

##### **Expected Results:**

- The service providers would be motivated enough to provide services to the VYKP regarding SRH issues ensuring confidentiality.

#### Activity 2.1.2: Information on available health services and contact details

A total of 5240 leaflets containing addresses and contact details of government hospitals and NGO clinics where VYKP could seek help for their SRHR related issues were distributed throughout the second half of the year. This distribution helps the VYKP to obtain information about the list of health service providers/posts where they could seek their preferred support.

##### **Expected Results:**

- The number of VYKP taking services has increased at service points listed in the leaflet.

#### Activity 2.1.3: Distribute health referral cards

A total of 20,000 referral cards were printed, of them 8,519 were distributed among VYKP in seven districts during the reporting period. The referral cards were distributed by peer educators at different events like community mobilization and education sessions, comprehensive sexuality education sessions on demand of the VYKP according to their Sexual and Reproductive Health (SRH) problems.



### Activity 2.2.1: Coordination meeting with GoB Health Officials for improving access to the HIV/SRH services

Referral linkages were established in the first year of the project with government counterparts. In this reporting period, 20 coordination meetings were held at different government health facilities with GoB health officials to continue the effective liaison. In these meetings, a total of 250 service providers, 156 males and 84 females, from different government hospitals took part. These coordination meetings have played a positive role in collaborating with the government in delivering curative health services to the VYKP at working districts of SANGJOG.

#### Meeting Objectives:

- To share SANGJOG's activities on SRHR and HIV issues.
- To discuss potential program options including ways to establish improved coordination.
- To chart out steps to expand and ensure effective coordination among stakeholders working on SRH and HIV.
- To improve performance of health organizations by inspiring and motivating staffs.

#### Expected Results:

These meetings were intended to help

- smooth referral services,
- install Bill Board at hospital premises, and
- build youth friendly corners at government hospital premises.

### Activity 2.2.2: Counselling for vulnerable young key people on HIV/STI/RTI

A major activity of SANGJOG project is to promote SRHR and HIV/AIDS services. Counselling is one of the essential components of HIV/STI/RTI service delivery. Counselling was done by previously selected and trained health workers stationed at easily accessible (GoB) and/or NGO health facilities in all the working districts. A total of 7,086 VYKP were counseled which included 2,271 males and 4,815 females. Counselling services were incorporated in SANGJOG to help VYKP, to make informed decisions, to cope better with their condition, to live life with more positivity, and to prevent further transmission, encompassing the objectives mentioned below.

#### Objectives:

- To provide an opportunity for VYKP to know their HIV status and to avoid transmitting the virus to others.
- To receive personalized risk reduction counselling to help prevent acquisition or further transmission of HIV.
- To enroll HIV-positive individuals in rapidly expanding services for support, care, and treatment
- To make the connection between sexually transmitted diseases and HIV and explain how other STIs facilitate HIV transmission.

#### Expected Results:

This activity ensured

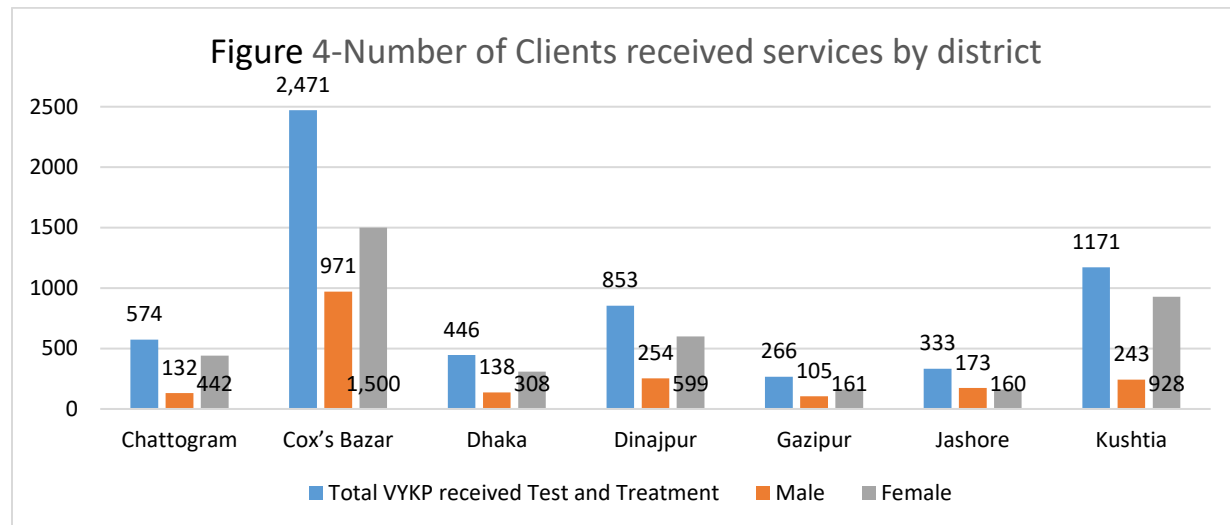
- increased testing activity,
- improved partner notification,
- reduced risk through communication,



- patient education and counselling,
- condom usage demonstration and provision.

### Activity 2.2.3: HIV/STI/RTI test and treatment for VYKP

In addition to counselling, 6,114 VYKP, (2,016 males and 4,098 females), received HIV/STI/RTI services including test and treatment from nearby government hospitals and NGO clinics. The district wise number of VYKP who received tests and treatments are shown below in the figure 4:



#### Objectives:

- To prevent transmission of HIV
- To reduce the impact of HIV infection
- To prevent STI
- To manage STI

#### Expected Results:

Through this activity the project intends to ensure that the

- prevalence of STI is reduced by syndromic case management,
- treatment interval is minimized,
- treatment of partners is ensured,

### Activity 2.2.4: Partnership with service providing organizations (STI/RTI services)

In the previous years we have established effective partnership with government health facilities through referral linkage in the working areas of SANGJOG. In order to facilitate better service, the project extended its support through donating necessary furniture and gadgets, in some government hospitals for instance examination beds, screens, executive tables and chairs, fans and television during the latter half of 2018.



**Objectives:**

- To improve SRH service delivery for the VYKP through collaboration with GoB and NGOs
- To organize local and/or national seminars, workshops, trainings and meetings in order to promote SRH service development in the district.
- To collaborate strategically with public/private health service providers for access to treatment of PLHA

**Expected Results:**

- Good quality comprehensive and friendly services are ensured.

**Activity 2.3.1: Increase provision of user friendly services by GoB health centers – such as HIV treatment – to VYKP**

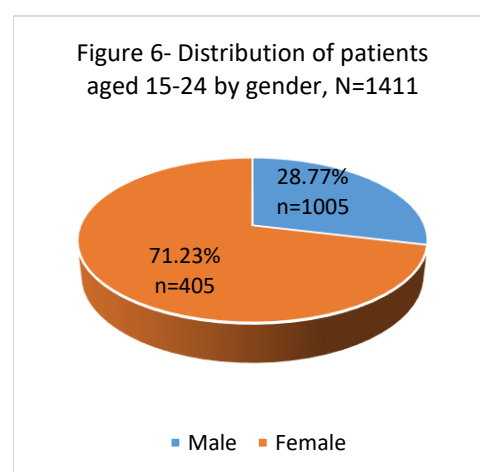
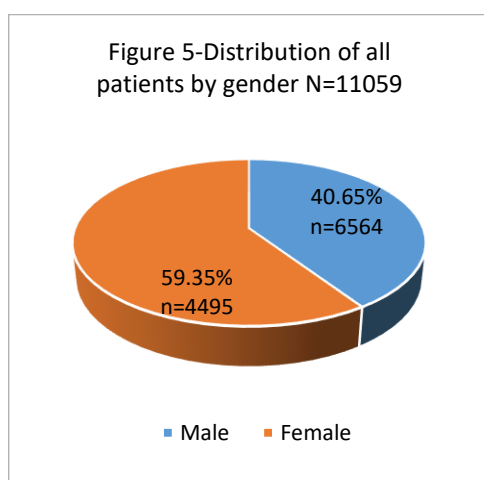
More than 1 million Rohingya refugees are sheltering in Bangladesh since August 2017. The vast majority of them are women and children. The scale of influx into Cox's Bazar district and the scarcity of resources, resulted in a critical humanitarian emergency situation that exceeded the coping capacity of the local communities and systems. To respond to this humanitarian emergency, SANGJOG has extended the following health care services to the Rohingya refugees from its two health camps at Balukhali and Kutupalong:

- Maternal and child health care services,
- Reproductive health care services,
- General health care services,
- Providing Medicines, distribution of Hygiene kits,
- Counseling, and
- STI, HIV, Pregnancy, Diabetes, and Hepatitis B & C screening.

**Immediate Results:**

- A total of 4,579 patients (1,761 males and 2,818 females) from the Balukhali health camp and 6480 patients (2,734 males and 3,746 females) from the Kutupalong health camp of all ages received services during the reporting period. The total number of patients, 11059, who received services from both the camps are shown in Figure 5.
- However, 1,411 of these patients (406 males and 1,005 females) were at the age bracket of 15 to 24 years (Figure 6).





#### Activity 2.3.2: Distribution of commodities through health facilities - such as hygiene kits for the VYKPs

In addition to medicine, hygiene kits are also distributed among the young Rohingya women which includes one packet of sanitary napkin, one torch light with battery, soap, comb, nail cutter, tooth paste and tooth brush. In the year 2018, the project has made provision of 1000 sets of hygiene kits. This was planned to be distributed throughout the reporting period.

#### Activity 2.3.3: Organize health camps in community

Apart from referring patients to health facilities, SANGJOG organized 101 health camps in the reporting period to cover VYKP from hard to reach areas. A total of 3,455 patients were provided services related to STI and HIV/AIDS at the health camps.

Intervention Districts	Number of Health camps	Total VYKP received services through Health camps	Male	Female
Chattogram	16	602	46	556
Cox's Bazar	17	495	133	362
Dhaka	8	464	54	412
Dinajpur	17	574	427	147
Gazipur	15	479	169	310
Jashore	16	338	160	178
Kushtia	12	503	42	461
Total	102	3,493	1,031	2,426



*Result 3: Government service facilities provide improved integrated SRH& HIV service to more young people.*

**Activity 3.1.1: Training for GoB health service providers to increase user friendly SRH/HIV services**

This activity has been completed in the first year and was reported accordingly in the second narrative progress report.

**Activity 3.1.2: Refreshers training for GoB health service providers to increase user friendly SRH/HIV services**

Refresher training sessions for GoB health service providers to increase user-friendly SRHR/HIV services was a major activity under objective 3, i.e., increase capacity of selected government service facilities for providing integrated SRH and HIV services. Eight refresher trainings were conducted in the reporting period in different GoB health service centers in Chattogram, Cox'sBazar, Dinajpur, Gazipur, Jashore and Kushtia that trained 166 service providers which included 86 males and 80 females.

**Activity 3.2.2: Meeting with GoB health officials for increasing affordable demand of VYKP**

SANGJOG organized nine sensitization meetings with GoB health officials which includes 76 males and 51 females to ensure the easy access and confidentiality to VYKP. The project wanted to ensure that when young people seek services, they are met by highly qualified, non-judgmental providers offering affordable services to VYKP, majority of whom were living at or below the poverty line.

**Activity 3.3.1: Meeting with civil society organizations (CSO) to increase technical and programmatic capacity**

Seven meetings were held in all the working areas of SANGJOG with 179 participants including 99 males and 80 females.

**Objectives:**

- To represent the collective voice of the CSO to influence decision-making processes regarding SRHR issues,
- To strengthen civil society response and contribution to fight against HIV and STI,
- To strengthen partnership within Government, CSO and private sector for an integrated and expanded response to HIV/AIDS and STIs.

**Expected Results:**

- They effectively contribute to the attainment of the goal of SANGJOG,
- Created supporting environment, and
- Increased number of services received.



***Result 4: Advocacy for creating enabling environment sensitizing 300 stakeholders for increasing access to VYKP to SRHR & HIV information and services***

***Activity 4.1.2: Advocacy with district level stakeholders***

In Dinajpur, Gazipur and Chattogram and Cox'sBazar four meetings were held with 61 male and 9 female participants from different stakeholders.

**Expected Results:**

- Necessity to identify opportunities for collaboration and coordination across all HIV and SRHR programs
- Need to develop strategies to communicate with target groups

**Activity 4.1.3: Media Campaigns with electronic media**

Since the media can challenge ongoing stigma and discrimination regarding RTI/STI and HIV effectively and faster, SANGJOG had been regularly involving media in its campaigns in Chattogram, Dhaka, Dinajpur, Jashore Kushtia, Gazipur and Cox'sBazar by telecasting messages on HIV/AIDS through TV scroll.

**Activity 4.1.4: Publish monthly magazine *PROJANMO Kotha***

*PROJANMO Kotha*, is a PSTC monthly publication, which contains a dedicated page for incorporating youth and adolescent related information and SANGJOG updates. *PROJANMO Kotha* also welcomes and entertains news of various information, briefs on project and/or program of different development organizations working in the country. SANGJOG with the support from PSTC, had published around 5000 copies of *PROJANMO Kotha* during July to December 2018 and distributed it to embassies in Dhaka and other fellow organizations. Till December 2018 PSTC has successfully published its 18<sup>th</sup> issue.

**Activity 4.2.3: Create linkages with other relevant advocacy networks and partners with similar agendas**

To develop strategies and messages for advocacy in the area of SRHR and to protect from HIV/AIDS, SANGJOG involved all implementing agencies working in related fields in the country. In Dhaka, Chattogram, Dinajpur, Jashore, Gazipur and Kushtia 10 meetings were held with relevant organizations where 149 males and 66 females have attended.

**Expected Results:**

This meetings helped to

- develop standardized information and advocacy messages and strategies,
- involve the root level policy maker and practitioner from related sector,
- have better opportunity to share experiences and lesson learned,
- create the space to integrate ideal practices in related fields.



## Gender in SANGJOG

Gender equality is an ongoing concern in Bangladesh like any other countries in the world varied by societies and culture. Thus ensuring gender equality to have a positive impact on KP encompassing SRHR is a daunting task. Accordingly SANGJOG is committed to work to address the gender issues to ameliorate the prevailing gender dynamics opposing desired SRHR activities.

SANGJOG is committed to reduce the consequences of gender inequality in promoting SRHR and preventing HIV/AIDS. The Project ensured the participation of its target population regardless of societal taboos and stigma related to gender identity. Meaningful and effective participation of women, girls, boys, men from all classes, occupations and ethnicities was ensured in the planning, design, recruitment and implementation of SANGJOG. From the very beginning, it was decided to ensure gender representation in the process of recruitment of peer educators in SANGJOG. The project maintained gender balance effectively though it was not that much easy to get female peer educators and their turnover is higher than that of male peer educators.

Lack of comprehensive knowledge on HIV/AIDS, sex workers are still considered to be only transmitter of HIV. People also fail to acknowledge that sex workers are also victims of this virus. Inequality of gender relations make sex workers vulnerable to negotiate in practicing safe sex, increasing their chance to experience violence while negotiating for safe sex. FSWs shared that, most of the time, condom use is depends on clients' will. Majority of clients think it reduces their sexual pleasure, FSWs also were apprehensive to spend longer time with clients as they believe it takes extra time to ejaculate while using condoms. Considering these facts SANGJOG prioritized to educate the target population on the necessity and proper use of condom through demonstration.

## Challenges

During the current reporting period government health facilities having provision of HIV Testing and Counseling (HTC) was only available in Dhaka, Chattogram and Cox's Bazar. In other SANGJOG intervention districts, government HTC services were not available which was a challenge of SANGJOG to increase the number of VYKP availing HTC services.

SANGJOG is keen on promoting local ownership in all its advocacy activities and thus included influential in the process as important community stakeholders. Although community leaders found to be spontaneous in their intended project participation of creating awareness in the community. But to guide their different individualistic ideas under one effective way of project advocacy outcome, was a challenge which needs continuous efforts to nurture and sensitize towards realizing project goals.

Another issue which still exists in the working areas, is the people's conservative mind set regarding the SRHR issues. Long term strategies should be included to bring in positive attitudes in the society towards SRHR for improved QoL for the young people. In this regard, ensuring privacy and confidentiality while arranging sessions was a challenge for the peer educators and field supervisors in the community. . Considering all these, it can be said that the inclination towards bringing changes in planning and strategies to meet up these challenges is SANGJOG's strength to way forward. .

## Conclusion

The extension of SANGJOG to continue till December 2019 was welcomed by all concerned stakeholders. The project performance was more than satisfactory in the first two years of the project tenure. This



built a strong ground along with the sudden need to humanitarian response for the Rohingya refugees. Moreover the project felt that there was a need to continue providing services to better sustain the outcomes beyond the project life to accommodate the current vulnerability of the beneficiaries. SANGJOG's achievement was praiseworthy during the previous reporting period and it has been also continued in the current phase of July-December, 2018. Specially to be mentioned in this regard, the project's response to the worst humanitarian crises, facing the coastal areas of the country of Rohingya refugee influx. The project served Rohingya refugees with health care consultation and free medicines to all who took the service. Provision of free medicines to them, was much needed in a foreign land; displaced by ethnic cleansing, with a refugee status. Hence, this helped popularize the SANGJOG health camps among the refugees and drawn a substantial in flow of patients in the project camps. Also another achievement of the project was that it was able to provide STI and HIV/AIDS services to 3455 patients in all the seven districts in a context, where service seeking tendency was low among the key population. This was possible for the effective referral linkage established by the project with the GOB service providers in consensus with other BCC activities. The ongoing effort of trainings and refreshers of service providers and their spontaneous participation which was reflected in the GOB participant's number, surpassing the initial targeted number, is an evidence of positive project advocacy activities. The work of SANGJOG is ongoing through opening of the much required youth corners to accommodate this sensitive health intervention to the key population to ensure service quality and attract more clients to take services. The project hopes to achieve even better results addressing the previous challenges in its upcoming phases.



**Activity 1.1.1: Community mobilization and education to increase knowledge of VYKP for HIV/AIDS**



**Activity 1.1.2: Disseminate HIV/SRH Information through bill board & festoon beside road in implementing area**





**Activity 1.1.4: Orientations on comprehensive sexuality education (CSE) of VYKPs for HIV by peers**



**Activity 1.2.2: Refresher training for peers on entitlement, healthy choices and claiming SRH rights for VYKP (2 days)**





Activity 1.3.1: Orientations on create supportive socio- cultural environment for selected local committee members



Activity 1.3.2 Coordination meeting with local committees that create a supportive socio-cultural environment for the protection of SRH rights of VYKPs for HIV





### Activity 1.3.3: National day celebrations (World AIDs day and youth day)



### Activity 1.3.4: Develop and distribute Information Education and Communication (IEC)/Behavioral Change Communication (BCC) materials





### Activity 2.1.2: Information on available health services and contact details





Activity 2.2.1: Coordination meeting with GoB Health Officials for improve access to the HIV/SRH services



Activity 2.2.4: Partnership with service providing organizations (STI/RTI services)





Activity 2.3.1: Increase provision of user friendly services by GoB health centers - such as HIV treatment - to VYKPs



Activity 2.3.3: Organize health camps in community





Activity 3.1.2: Refreshers training for GoB health service providers to increase user friendly SRH/HIV services (2 days)



Activity 3.2.2: Meeting with GoB health officials for increase affordable demand of VYKPs





**Activity 3.3.1: Meeting with GoB service providers and civil society organizations to increase technical and programmatic capacity**



**Activity 4.1.2: Advocacy with district level stakeholders**

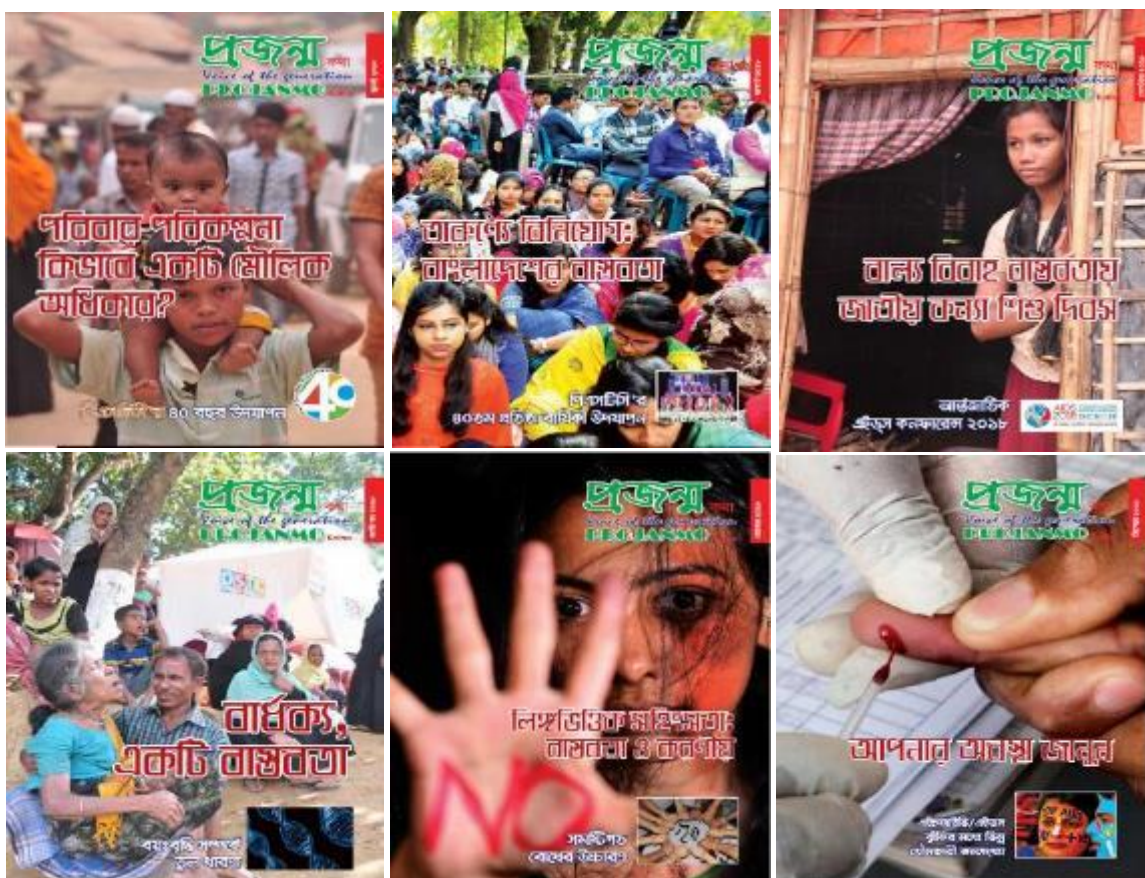




### Activity 4.1.3: Media Campaigns with electronic medi



### Activity 4.1.4: Publish monthly magazine Projanmo Kotha





### Activity 4.2.3: Create linkages with other relevant networks

