

# BANGLADESH

## Spotlight on Family Planning: Tracking Progress on the FP2020 Pledges

The Spotlight on Family Planning series offers a snapshot on progress governments have made in delivering on their FP2020 pledges, made at the London 2012 Family Planning Summit.

The Family Planning Association of Bangladesh (FPAB, the IPPF Member Association in Bangladesh) and other civil society organizations (CSOs) have identified a number of 'high priority' pledges: progress towards these pledges is critical for increasing access to modern family planning (FP) methods. The table shows achievements and failures in delivering on these promises.



### Bangladesh's FP2020 pledges

Promote rights-based policies to eliminate inequalities in health outcomes, including adolescent pregnancy, whether based on geographical, residential or socio-economic differences

Increase youth-friendly sexual and reproductive health and FP services in one-third of maternal newborn and child health centres

Strengthen quality of care in family planning services, including informed consent and choice

Work with leaders and communities to delay early marriage and pregnancy, and increase male involvement

Improve choice and availability of long-acting and reversible contraceptives (LARCs), including for men, and post-partum and post-abortion services

### Government of Bangladesh's progress on its FP2020 pledges

- Declared a number of under-served areas 'priority zones' (e.g. Haor, Char) and focused resources on improving service delivery in these zones.
- Recruited 1,500 Family Welfare Visitors and Assistants, and 12,000 Community Health Care Providers since 2013.
- Established 13,000 community clinics around the country, which provide free medicine and family planning.

- The DGHS and the Director General of Family Planning (DGFP) issued a circular to introduce dedicated youth service delivery points in all district hospitals and DGFP-led maternity clinics in 2007. These are being implemented, though not all are fully functional to date.

- The DGHS and the DGFP adopted stock management software to enable administrators to monitor the delivery of supplies and minimize stock-outs.
- Revised National Family Planning Guidelines and introduced more choices for couples from 2013.

- Delegated authority to local governments to stop child marriage.
- Established mechanisms (e.g. hotline service) for young people to communicate directly with government and police to stop child marriages.
- The government is no longer pursuing its initiative to reduce the legal age of marriage for girls.

- Expanded post-partum services and post-abortion family planning services at family planning centres.
- The DGFP issued the National Family Planning Guidelines in 2013 and revised other policies to allow young people to access LARC services from government family planning service centres.

### What has civil society achieved?

- FPAB and other CSOs continue to advocate to government, to the Ministry of Health and the Director General of Health Services (DGHS), and to district authorities to address health inequalities, child marriage and adolescent pregnancy.
- FPAB is working with media outlets to create widespread support for government action on the above issues.
- FPAB mobilized diverse civil society actors to raise the issue of child marriage with government in workshops, seminars, and through the media.

- FPAB and other CSOs have promoted youth-friendly health services since 2006. They organized meetings and workshops attended by government officials, and demonstrated good practice through NGO-operated youth-friendly services at public facilities.

- FPAB campaigned for the government to provide a greater range of family planning methods in order to reduce unmet need for family planning, including by organizing meetings with CSOs and policy makers in 2014.
- CSOs provided rights-based infection prevention training to all field level service providers from 2013 to 2015.

- FPAB is working at community level to stop child marriage by facilitating community support groups and delivering capacity-building training to school authorities, government officials and other community leaders.
- A variety of CSOs – women's rights organizations, youth organizations, media outlets and civil society networks – are campaigning to stop child marriage.

- FPAB, Engender Health Bangladesh and Marie Stopes Bangladesh advocated for young couples have access to long-acting family planning methods.
- FPAB mobilized other CSOs to promote LARCs for young couples at district coordination meetings and through national media campaigns.

# Gaps in the FP2020 pledges and recommendations for government action

The government has made some progress towards its pledges, but existing efforts are not enough to deliver on its promises by 2020. In addition, other problems and gaps have emerged. The government must address these problems urgently.

Civil society calls on the government to:

- 1 **Increase the budgetary allocation to family planning** and reduce the resource gap for family planning by 50% by 2021. The government pledged US \$40 million per year (or US \$380 million by 2021), but since 2009, increases to the annual development budget have not met this commitment.
- 2 **Expand access to long-acting and reversible contraception (LARC)** in order to ensure that vulnerable groups have access and choice of family planning methods.
- 3 **Empower women and girls** to make family planning choices and freely exercise their sexual and reproductive rights.

## Where we are now

The following nationwide statistics<sup>1</sup> reflect, in part, recent government improvements to family planning services.

### Indicator measure in 2013



40.8% CPR (modern methods) among married women (increase of 0.5% from 2012)



4,582,000 unintended pregnancies averted (increase of 130,000 from 2012)



22.3% of married women have an unmet need for family planning (decline of 0.3% from 2012)

### Method mix in 2013



Oral contraceptive: 52%



Injectable: 22%



Condoms: 11%



Long-acting contraceptives: 0%

## FPAB's contribution to SRH services

FPAB fulfills an important role in meeting demand for sexual and reproductive health services. For example:



FPAB provided 429,004 couple years protection in 2014



FPAB services resulted in 166,903 unintended pregnancies being averted in 2014



FPAB provided family planning services to 61,003 new users in 2014

## Stories from the field



Jasmin, 23, is a garment factory worker who lives with her husband in Gaibandha, a district in northern Bangladesh.

"I struggled a lot to make a living. I know I need to continue with my job to support my family. I have watched the sufferings of other girls: they got married and after a couple of months, or sometimes a year, they became pregnant. With managing their household and taking care of their baby, they could not keep their jobs. I don't want this to happen to me.

"Without family planning, I could not have reached this level in my job. It is important to me that I am earning something myself, it gives me lot of confidence. I also dream of being a mother, maybe in another year, after I am more settled in my job and conjugal life."

<sup>1</sup> Avenir Health (nd) Track20. Available from: [www.track20.org](http://www.track20.org). [Accessed: 25/08/2015].

*Joining Voices* is an advocacy project that aims to safeguard and strengthen financial commitments to reproductive health and family planning, and reinforce political leadership on universal access. *Joining Voices* is facilitated on behalf of civil society by IPPF and the Countdown 2015 Europe Consortium, led by IPPF European Network.

For more information about FPAB: [www.fpab.org.bd](http://www.fpab.org.bd)

For more information about Joining Voices: [www.joiningvoices2020.org](http://www.joiningvoices2020.org)

For more information about IPPF: [www.ippf.org](http://www.ippf.org) UK Registered Charity No. 229476

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Association  
of Bangladesh  
Protects Sexual and Reproductive Health Rights

