



Local Policy Bulletin: Bangladesh

Why the Urgency: Sharing Evidence

Research Title:

Factors influencing access around Contraception and Menstrual Regulation (MR) Service during the COVID-19 pandemic in Barishal, Cox's Bazar, Cumilla and Dhaka.

Methodology

Facility based face to face quantitative survey and qualitative interviews with women of reproductive age (15-49) and Health Service Providers.

Respondent Coverage

Methods	Women	Service Providers	Total
Quantitative Survey	149	67	216
Qualitative Interview	39	28	67
Total	188	95	283

Key Findings:

Contraception:

Women: Major barriers mentioned: Fear, confusion/stigma, lack of information about the pandemic, requirement of showing COVID testing report before going to health facilities.

Service Providers : Travel restrictions- no transport to travel to health facility, could not communicate with others, PPE and other supplies were inadequate.

MR services:

Women: Lack of information, closure of facilities, reduced service hours, requirement of showing COVID testing report before going to health facilities; lack of quality of care that they were used to receive before corona time.

Service Providers: Service seekers were not aware of using masks, sanitizers, shortage of PPE and other supplies, shortage of staffs.



Key messages for Policy Makers & Program Planners :

The study findings are particularly important in the context of SDG3: Universal access to SRHR. There are evidences that restrictions during COVID 19 increased contraceptive drop-outs, increased pregnancy rate, unsafe abortion.

Gaps in policy responses: It was designed completely ignoring SRH care , an important component of daily lives of women and men

Ensure policy support to empower both demand (women) and supply (Service Providers) side actors to ensure availability of SRH service during any emergency situation like, COVID 19 pandemic.

Suggestive Actions:

Government level

- Engage Service providers and Service seekers during planning stage

- Extensive awareness about stigma around COVID 19 pandemic
- Smooth access to health facilities for contraception and MR services.
- Government awareness campaigns and (online) knowledge development programs about SRHR during crises.

Institutional level

- Continuity of services, including the continuation or adaptation of service provision by online/telephone consultations
- Improvement of door-to-door SRH services
- Transportation facilities and flexible service hours in the centers

Further research requirements:

- Access to contraceptive & MR care for undocumented women, adolescents/youth during emergency situation.
- Engagement of family and community gate keepers for ensuring SRHR care during emergency situation like COVID-19 pandemic.
- Implementation research on contraception and MR care given by paramedical professionals .

Source: iCoP study “Factors influencing access around contraception and abortion services during the COVID-19 pandemic in Iran, Bangladesh and the Netherlands”

Note: Upon request full report can be obtained