

# Landscape Review of Issues and Programs in the Garment Sector on Sexual and Reproductive Health and Rights and Gender-Based Violence

Anna Williams and Faaria Tasin  
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## I. Introduction

UNFPA Bangladesh requested that this garment sector landscape review on sexual and reproductive health and rights (SRHR) and gender-based violence (GBV) topics be carried out to inform a new strategic program direction.

The rationale for this exercise included the following:

- Multiple, diverse actors are involved work within the garment sector, reaching factories and women, however, each one has a unique set of priorities and scope for its work.
- Many initiatives and programs exist to facilitate garment workers' access to SRHR and GBV services, but they are limited in reach and scope, and driven by organizational, rather than strategic or sector-wide goals.
- This results in:
  - 1) Disparate, uncoordinated activities
  - 2) Limited availability of information on GBV and SRHR issues among female garment workers
  - 3) A lack of strong evidence of effective programs
  - 4) An inability to systematically monitor the quality of existing interventions
  - 5) A lack of understanding among the different players of one another's roles and interests

Together, these issues lead to challenges in stakeholders' ability to "speak the same language" when discussing/addressing common GBV and SRHR interests, and present barriers to capitalizing on one another's strengths toward achieving a common goal of making better services available to more garment workers.

This analysis intends to inform the development of a new, strategic approach that will bring together and help guide key stakeholders to utilize their unique roles, and areas of expertise, in support of a common vision. It is hoped that this work can support the laying of the groundwork to scale up SRHR and GBV initiative across the sector, reaching the over 4,000 factories and nearly 5 million workers that make up this major driver of Bangladesh's economy.

## II. Methodology

This review was carried out between April and December of 2017. A literature review was conducted to identify seminal research on SRH and GBV issues among garment workers in Bangladesh. Twenty-nine interviews were held (20 with program implementers, 3 with donors, 3 with buyers, 2 with factories and 1 with BGMEA). All key documents from the literature review and detailed notes from each interview are available in this [Google Drive](#) folder.

### **III. Literature Review**

#### **Overview**

To ground this work in analytical rigor, we conducted a review of relevant literature. The aim was to characterize and describe the general nature of SRH and GBV needs among female garment workers, and the resources currently available to address them. The review yielded very few journal publications. However, a small number of high-quality research reports stood out. These were primarily studies that were conducted to establish a baseline for or evaluate a garment sector project

#### **Studies on Sexual and Reproductive Health and Rights**

Two of these research reports were developed through projects directly engaged in work on SRH and GBV among garment workers. The projects are Working with Women, implemented by the Netherlands Development Organization (SNV) and HERproject, implemented by Business for Social Responsibility (BSR). Each of these studies employed random sampling and had sample sizes of over 2,000 female garment workers. They were both conducted in the Dhaka Metropolitan Area, and sampled workers from a total of 25 factories. Each also utilized qualitative methods to gather data from other groups, including male garment workers, factory managers, health service providers, peer health educators, and/or influential community members. These reports were reviewed to identify common findings. This enabled us to gain a clear sense of general levels of awareness about SRH and utilization of SRH services.

#### **Studies on Harassment and Violence**

Two additional mixed methods studies shed light on harassment and other types of violence that are present within garment factories in Bangladesh. They were conducted by CARE and the Human Development Research Centre (HDRC). The CARE study was a baseline survey, conducted in 2016, for its OIKKO ('Unity') project which works on labor rights attainment and women's empowerment within the garment sector. The HDRC study was carried out in 2011 to provide a baseline for a, now completed, joint Ministry of Labour and Employment and International Labour Organization program addressing violence against women in the workplace. They included randomly selected samples of 128 and 1,674 female garment workers respectively.

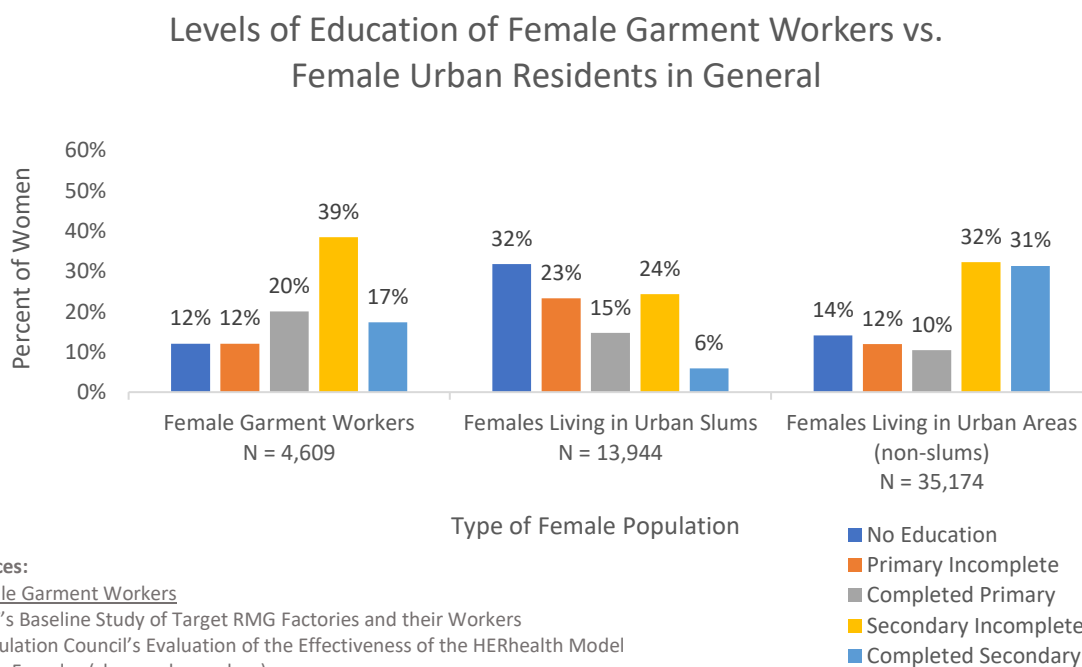
#### **Analysis of the Literature**

The collective SRH findings were compared to the results identified in the 2013 Urban Health Survey. They were also looked at against two smaller, but well-designed studies conducted among urban populations where most garment workers live. The analysis that follows provides a succinct picture of the issues and programmatic gaps that can inform organizations planning future work on SRH and/or GBV issues among garment factory workers in Bangladesh.

## Demographic Information About Garment Factory Workers

Select demographic measures were examined across the Working with Women and HERproject studies. Both these studies demonstrate that close to two thirds of female garment workers in the 25 factories studied are between 20 and 29 years old. About 80% are married and about 80% have not completed secondary school. On average, slightly over 10% have no education. The average salary among garment workers in the 25 factories studied is 6,500tk per month<sup>1,2</sup>.

This demographic profile differs somewhat from that depicted in the other urban surveys looked at, but the differences are not drastic. In general, higher proportions of women with lower levels of education are concentrated in slums. Close to 1/3 of females living in slums have no education and over 90% have not completed secondary school. Outside of slums, more than half of women have received some secondary-level schooling and upwards of 25% have completed secondary school<sup>3</sup>. The following chart demonstrates the spread of education levels among garment workers who participated in the Working with Women and HERproject studies, as compared to the larger population of urban females represented in the 2013 Urban Health Survey.



**Sources:**

Female Garment Workers

- SNV's Baseline Study of Target RMG Factories and their Workers
- Population Council's Evaluation of the Effectiveness of the HERhealth Model

Urban Females (slum and non-slum)

- Urban Health Survey 2013

<sup>1</sup> Working with Women project (2016). Baseline Study of Target RMG Factories and their Workers. *SNV Netherlands Development Organisation*.

<sup>2</sup> Hossain, Md. I. et al. (2017). Evaluation of the Effectiveness of the HERhealth Model for Improving Sexual and Reproductive Health and Rights Knowledge and Access of Female Garment Factory Workers in Bangladesh. *Population Council, The Evidence Project*.

<sup>3</sup> Bangladesh Urban Health Survey 2013 Final Report. *NIPORT, icddr, MEASURE Evaluation*.

The majority of women who live in both slum and non-slum urban areas are not employed outside the home. Yet a higher proportion of women in slums are employed outside the home, in comparison to women who live in non-slum urban areas. Among working women from slum areas, the studies looked at reflect that between 30% and 50% work in garment factories<sup>4,5</sup>. These proportions show us that there is significant overlap between garment workers and female slum residents. At the same time, general health statistics representing urban female populations do not reliably represent garment worker populations. This is because of the large overall population of women who are not engaged in paid work. However, it is still useful to look at measures applied in both studies of garment workers specifically, and of urban residents generally. These comparisons, where available, are described in the subsequent text.

### **SRH Awareness and Service Use Among Garment Factory Workers**

The female factory workers represented in the Working with Women and HERhealth studies have relatively high levels of knowledge about basic sexual and reproductive health topics. Over 95% of female workers are aware of at least one family planning method, 85% are aware of the importance of antenatal care (ANC), and well over 50% know of at least one place they can go to receive SRH services. Two thirds are aware of menstrual regulation services. Well over 75% have heard of HIV/AIDS, and among this group, more than  $\frac{3}{4}$  know at least one HIV prevention method. Knowledge of other topics, however, is limited.

For example:

- Fewer than 50% of factory workers are aware that four ANC visits are recommended during pregnancy.
- Fewer than 50% have basic general knowledge about sexually transmitted infections, their symptoms or how to prevent them.
- Fewer than 40% are aware of the importance of drying cloth sanitary pads in the sun.
- Fewer than 30% are aware of emergency contraception or when a woman is most likely to get pregnant during her menstrual cycle.

Regarding factory workers' use of SRH services, well over 2/3 of workers use contraception. This corresponds closely to the rates of contraceptive use reflected in the Urban Health Survey - 70% of women in slums are contraceptive users and 65% of women in non-slums are. Among contraceptive users, the most popular method is the birth control pill, followed by injectables

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<sup>4</sup> Amin, S. (2015). Urban adolescents needs assessment survey in Bangladesh. *BIED, BRACU, and Population Council*.

<sup>5</sup> Naved, R.T., & Amin, S. (2014). Impact of SAFE intervention on sexual and reproductive health and rights and violence against women and girls in Dhaka slums. *icddr'b*.

and then condoms. Long acting reversible methods (intrauterine devices and implants) are used by fewer than 1% of workers. Over ¾ of workers purchase their contraceptives from pharmacies.

Among ever pregnant women, over ¾ had at least one antenatal care check-up during pregnancy, and just under 40% had four. More than half who had delivered a baby in the previous year reported having delivered at home. These statistics do not differ significantly between factory workers and female urban residents<sup>3</sup>.

Roughly 60% of workers use fabric scraps, or cloth pads, for menstrual hygiene management, while the rest used disposable sanitary pads. However, data from HERhealth show a dramatic increase in use of disposable sanitary pads (up to 90% of women), if they are made readily accessible at a subsidized rate<sup>1,2</sup>.

### **Characteristics of and Mechanisms for Addressing GBV within Garment Factories**

The United Nations describes violence against women as encompassing physical, sexual or psychological violence occurring within the family, the community and/or perpetrated or condoned by the State<sup>6</sup>. The definition specifically references workplace harassment and intimidation, which is the type of violence most commonly faced by female garment workers. The CARE and HDRC studies on violence and harassment that were referenced earlier surveyed workers about the different types of violence present in over 50 garment factories in Dhaka, Gazipur, Iswardi and Chittagong.

The CARE study documented a 22% prevalence of workplace harassment among women surveyed<sup>7</sup>. Both studies found that about 90% of women who face workplace harassment experience verbal outbursts, shouting and/or rude language from their male supervisors. This most frequently happens when supervisors identify mistakes in their employees' work, though workers also perceive that it also happens fairly regularly for no apparent reason. Threats, bullying, inappropriate touching and other physical harassment are also common, though much less so than verbal harassment<sup>8</sup>.

The 2009 directive on sexual harassment issued by the High Court of Bangladesh provides a legal mandate for the prevention of and response to sexual harassment in all educational institutions and places of work within the country<sup>9</sup>. Laying a framework for its implementation within garment factories are the Standard Operating Procedures for Violence Against Women Units in Ready Made Garment Factories. This document provides guidance to factory personnel

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<sup>6</sup> General Assembly (1993). A/RES/48/104 Declaration on the Elimination of Violence against Women. *United Nations*.

<sup>7</sup> Habib, S. (2016). CARE OIKKO (Unity) Project Baseline Study Report. *CARE*.

<sup>8</sup> Barkat, A. (2011). Baseline Survey to Know the Extent and Severity of Violence Against Women in Selected Sectors. *Human Development Research Centre*.

<sup>9</sup> Bangladesh National Women Lawyers Association (2009). Writ Petition No. 5916. *High Court Division, Supreme Court of Bangladesh*.

on gender responsive workplace behaviors and management of cases of violence against women<sup>10</sup>. Implementation across the industry remains in its nascence.

#### **IV. Analysis of Interview Findings**

Interviews were conducted with representatives from select donor agencies, managers of corporate social responsibility portfolios from major international buyers, and export factory senior management. In addition, discussions were held with the Bangladesh Garment Manufacturers and Exporters Association (BGMEA) and with international and local organizations involved in implementing projects to address SRH and/or GBV issues among garment workers. A summary of main takeaways from these interviews is provided below. Detailed notes from each interview are available for review in the Google Drive folder.

##### **Donors**

The donor agencies contacted included the Embassy of the Kingdom of the Netherlands (EKN), the German Society for International Development Cooperation (GIZ), the Swedish International Development Cooperation Agency (SIDA), the United States Agency for International Development (USAID), the Department for International Development (DFID), and Global Affairs Canada. We also learned about projects that other donors support through interviews with implementing organizations who receive funding from them. Among all agencies, EKN, SIDA, and the European Union have the most significant portfolio investment in SRH and GBV programs for garment workers. In addition, one component of USAID's Mayer Hashi II project (implemented by EngenderHealth) plays an important role in providing long-acting and permanent family planning methods to garment workers.

##### **Buyers**

International buyers (i.e., private companies who source clothing and other textile products from export certified factories in Bangladesh) use the term "brand" to refer to themselves within their industry. For the purpose of this report though, "buyer" is used, as this term is more familiar to development and public health program managers. The buyers interviewed for this assessment include Auchan International, Lindex, and Marks & Spencer. H&M, ICA Global Sourcing, and C&A Foundation were also contacted, however, all three they indicated that they do not currently support SRH or GBV interventions in their Bangladesh factories (though C&A Foundation is interested in doing so in the future).

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<sup>10</sup> BGMEA, UNFPA (2015). Standard Operating Procedures for Anti-Harassment Committees (renamed Gender and Violence Against Women Unit) in Ready Made Garment Factories. *Bangladesh Garment Manufacturers and Exporters Association with technical support from UNFPA.*



- **Auchan International** is implementing a five-year project (1.5M Euro/year) called Weave Our Future. Weave Our Future trains nurses from factory-based health clinics and is also rolling out two health insurance schemes within selected factories.
- **Lindex** participates in HERproject, together with numerous other buyers, donors and private companies, to educate and empower women around financial management and sexual and reproductive health topics. Lindex has a significant global Corporate Social Responsibility budget, most of which is dedicated toward women's health and empowerment.
- **Marks & Spencer** is also a participant in HERproject, however, in addition to HERproject it co-funds (with GlaxoSmithKline) a larger initiative called Health, Access and Linkage Opportunities for Women (HALOW). HALOW is implemented by CARE. It trains factory nurses to counsel women on family planning and maternal health topics, works to ensure contraceptive commodities and disposable sanitary napkins are available in factories, and has offered cervical cancer screening and the HPV vaccine to female factory workers.

### **Factories**

Interviews were conducted to gather general information from two mid-sized factories (500-2,000 employees) about their initiatives and interests related to SRHR and GBV programs for their workers. One of the factories wished to remain anonymous; the other one is called Orion Knit Textiles Ltd. Neither factory had internal investments or external partnerships aimed at connecting their workers with SRH services or GBV programmatic interventions. Each factory, however, had limited, basic health care available on-site and various other mandated social services. These included a childcare center, a VAW Unit and life insurance. Both factories also place a high importance on ensuring full compliance with national laws and export regulations.

An interesting takeaway from these interviews was that both interviewees indicated that there is a low prevalence of gender-based violence in export factories. Both also shared that its occurrence would not be tolerated within their companies' factories. One interviewee explained that interpersonal dynamics can become tense between line managers and the workers on their production lines, especially when difficult quotas need to be met. However, this was not interpreted by the interviewee as harassment or violence. It was also explained that senior management is almost never involved in addressing challenges between managers and production line workers. This is demonstrative of the knowledge gap among senior and mid-level factory managers about the definition of workplace violence, the dimensions of gender inequality that are part of it, and its impact on workers. This is especially relevant because verbal harassment toward female workers, perpetrated by their male supervisors, appears to be the most prevalent form of gender-based violence within factory settings.

### **Organizations Implementing SRHR and/or GBV Programs with Factory Workers**

Interviews were held with 20 organizations implementing SRHR and/or GBV programs with garment factory workers. On the whole, the most common activities conducted fell within the category of training and awareness raising on SRHR and/or GBV topics for workers.

Additional findings include:

- Ten out of 12 organizations that conduct training or awareness raising activities on SRHR topics provide referrals to nearby service delivery points.
- Six out of the 15 organizations that conduct GBV training or awareness raising activities link individuals to legal services if needed.
- Eight organizations focus training efforts on mid-level managers as well as workers.
- Two have offered training for factory-based service providers.
- Four organizations are involved in directly providing SRH services to workers, either within factories or in neighborhoods where many factory workers live.

A matrix of each organization's SRHR and GBV programs targeting garment workers is included as an appendix, and detailed notes from each interview are in the Google Drive folder.

## V. Effective and/or Promising Initiatives

Over the course of this review, the following current projects and initiatives stood out:

- The **Working with Women** project, implemented by the Netherlands Development Organization (SNV), is exploring different commercially viable approaches for linking female workers with SRHR services. As part of phase II of the project, SNV will be working with the Bangladesh Institute of Labour Studies (BILS), Underprivileged Children's Education Programs (UCEP), Phulki, and Sajida Foundation to pursue three unique, sustainable program strategies that cover education for workers and managers on GBV and SRHR topics, direct SRHR service provision in factories, linkages to comprehensive SRH services and health insurance.
- **HERproject** is led at the global level by Business for Social Responsibility, and within Bangladesh by Change Associates and Mamata. Its approach consistently relies on rigorous program design, pilot testing and evaluation. With this approach, HERproject is developing a strong foundation for intellectual leadership around SRHR, GBV and women's empowerment programs targeted female garment workers in Bangladesh.
- **Health Access and Linkages Opportunities for Women (HALOW)**, implemented by CARE, stands out due to its strong focus on linking workers to SRH services through a variety of mechanisms, and because of its intended reach. With funding from GlaxoSmithKline and

Marks & Spencer, the project intends to scale up to 20 factories, reaching over 100,000 workers in Gazipur.

- **BGMEA, DGFP, EngenderHealth** partnership agreement. A five-year Memorandum of Understanding (MoU) was signed in 2016 between BGMEA, the Directorate General of Family Planning and EngenderHealth. This MoU lays an institutional foundation for the expansion of the DGFP's support to family planning and reproductive health service access for garment workers. The MoU establishes that the DGFP will provide training and supply family planning commodities to approximately 40 BGMEA factory health clinics. As part of its current Operational Plan, the DGFP intends to expand support to 120 BGMEA factories and later to 500 factories by 2020.
- Through **Weave Our Future**, RTMI has trained over 100 factory doctors, nurses and paramedics in 70 factories in Gazipur, Ashulia, Savar, Bhaluka, Mymensingh and Kishoreganj to strengthen their knowledge and skills for basic health service delivery. Trainings were conducted in 11 sessions covering topics of occupational health and safety, first aid, nutrition, family planning, antenatal and postnatal care.

## VI. Key Observations

The key observations from this review include:

- **Buyers** have essential links to factories that funders, government ministries and NGOs are not adequately leveraging. Many buyers have played leading roles in helping to improve occupational health and safety standards in factories and have ongoing political and dedicated Corporate Social Responsibility budgets for improve conditions for factory workers. Certain buyers have significant budgets for working on SRH and GBV issues in support of improving the lives of factory workers. They view corporate social responsibility achievements as increasing the competitiveness of their brands. However, while they may be partnering with donors and/or NGOs, they are not working in partnership with the government. At the same time, they have direct access to factories, which the government needs (and does not currently have) in order to link workers to services.
- The **Directorate General of Family Planning** has dedicated funding and political will to bring family planning services to in-factory clinics across the ready-made garment sector, however, organizational development related issues (e.g., lack of data for budgeting on numbers of factories and numbers of workers, and lack of a dedicated garment sector team) present barriers to implementation.

- **Factory owners’** and **BGMEA’s** primary interest is sustaining and growing factories and the garment industry overall. Social services are unlikely to be a strategic or funding priority for most factories, though BGMEA is an interested and willing partner.
- **Donors and NGOs** are engaged in many useful SRHR and GBV projects targeting garment workers, however, there is a lack of overall coordination and strategic direction at the national level to guide synergistic efforts and scale-up across the garment sector.

## VII. Recommended Strategic Direction

Based on these observations, it is recommended that UNFPA initiate the following two actions:

- 1) Play a technical support role with the relevant government directorates to develop a written multi-year strategy outlining national goals and objectives for ensuring SRH services and GBV programs are rolled out at scale across the sector’s 5 million workers.
- 2) Convene buyers, donors and the government to shape donors’ and buyers’ future portfolios around achieving the goals and objectives outlined in the national strategy.

By working through an existing (e.g., a Local Consultative Group working group), or new, government-donor coordination system, the Ministry of Health and Family Welfare and the Ministry of Women and Children Affairs could be positioned at the head of planning and oversight initiatives on SRHR and GBV topics within the RMG sector. Through this type of mechanism, a set of strategic goals and objectives could be used to align and guide all key players’ future investments. As part of the strategic plan, monitoring and evaluation priorities should be outlined, and specific roles for donors, buyers, NGOs, BGMEA, factory owners and workers’ unions should be described.

An important factor in the potential for this approach to be successful is the engagement of buyers. Many buyers are investing significant resources and staff time in addressing gender and healthcare access issues within their suppliers' factories. It is envisioned that through this approach, donor and buyer funding would be channeled more strategically to NGOs than is currently done. Funding channels would be in alignment with a common national vision for reaching scale across the garment sector in the delivery of GBV and SRHR programs and services. In addition, more government resources (e.g., commodities, supplies, training opportunities and monitoring/oversight mechanisms) could be more closely directed toward in- and near-factory GBV and SRHR programs and services. It is hoped that this strategic approach may serve as the foundation for more efficiently organized programs that have the potential for systematic scale-up.

## Appendix

Appendix page 1

Organization Name	Project Names (presented as provided by interviewees)	SRHR and GBV Activities with Garment Workers	Geographic Coverage and Reach (information presented as available)	Funders
<b>ActionAid Bangladesh</b>	1. Sustainable and Responsible Actions for Making Industries Care (SRAMIC)  Partner: Agrajattra	<ul style="list-style-type: none"> <li>• <b>Training on gender</b> issues for workers and managers</li> <li>• Women's Cafés in factory communities where women congregate, discuss problems and get help finding solutions</li> <li>• <b>Referrals and linkages to health and legal</b> services via 5 'Master Cafés'</li> </ul>	<ul style="list-style-type: none"> <li>• 17 Women's Cafés in Dhaka, 18 Women's Cafés in Chittagong</li> <li>• 6,357 female workers reached through Women's Cafes, 674 referred to health services, 87 referred to legal services</li> </ul>	European Union
<b>Agrajattra</b>	1. Empower RMG Workers in the Industry 2. Sustainable and Responsible Actions for Making Industries Care (SRAMIC)	<ul style="list-style-type: none"> <li>• Community-based <b>training on maternal health</b> and other topics for factory workers</li> <li>• <b>Referrals and linkages to health and legal</b> services</li> </ul>	<ul style="list-style-type: none"> <li>• Over 100,000 workers in Chittagong trained</li> </ul>	GIZ, European Union
<b>Awaj Foundation</b>	1. HERhealth 2. KIK project 3. Improving the Quality of Life of RMG Workers	<ul style="list-style-type: none"> <li>• <b>Training on full range of SRHR</b> topics for factory workers</li> <li>• <b>Direct SRH service provision</b> through Awaj satellite clinics (inc. pap smear, HPV vaccine, HIV testing)</li> <li>• <b>Informal referrals</b> to government hospitals</li> </ul>	<ul style="list-style-type: none"> <li>• Over 20,000 workers in Dhaka, Chittagong and Comilla trained</li> <li>• Over 60,000 workers received medical treatment</li> </ul>	BSR (via funding from DFID and buyers), C&A Foundation (buyer), KIK (buyer)
<b>BADAS Bangladesh Diabetic Somiti</b>	1. Weave Our Future 2. Universal health coverage	<ul style="list-style-type: none"> <li>• <b>Health insurance</b></li> </ul>	<ul style="list-style-type: none"> <li>• Insurance coverage for over 15,000 workers in Gazipur, Ashulia and Narayanganj</li> </ul>	SDC, Auchan International (buyer)
<b>Better Work Bangladesh</b>	1. Improving Working Conditions in the Ready-Made Garment Sector	<ul style="list-style-type: none"> <li>• <b>Training on SRHR and GBV</b> menstrual hygiene, sexual harassment, laws related to pregnancy and maternity leave</li> </ul>	<ul style="list-style-type: none"> <li>• 120 factories in Dhaka, Chittagong and Mymensingh</li> <li>• Training on sexual harassment was a pilot with 1,200 workers in two factories</li> </ul>	ILO (via funding from SIDA)
<b>BILS Bangladesh Institute of Labour Studies</b>	1. Social Dialogue, Gender Equality and Decent Work in Bangladesh 2. Working With Women	<ul style="list-style-type: none"> <li>• <b>Training on GBV</b> (inc. high court directive on sexual harassment) for union members and mid-level factory managers</li> </ul>	<ul style="list-style-type: none"> <li>• Intention to train 450 mid-level managers from 30 factories in Dhaka, Gazipur, Savar, Narayanganj and Ashulia in 2017</li> </ul>	FNV (Netherlands-based trade union), SNV (via funding from EKN)
<b>BSR Business for Social Responsibility</b>	1. HERproject (HERhealth, HERrespect, HERfinance)  Partners: Change Associates is lead implementing organization in Bangladesh, Mamata (for Chittagong), others	<ul style="list-style-type: none"> <li>• <b>Training on SRHR</b> (via peer health educators) and <b>GBV</b> (via a six module course) for factory workers and managers</li> <li>• <b>Referrals</b> to government and private <b>health</b> facilities</li> </ul>	<ul style="list-style-type: none"> <li>• HERhealth 75 factories in seven districts</li> <li>• HERrespect pilot in four factories to be extended to others</li> </ul>	DFID (global) and numerous buyers
<b>CARE</b>	1. Health Access and Linkages Opportunities for Women (HALOW) 2. RMG Worker's Health Initiative 3. Empowering Women Garment Workers Through Career Mobility, Financial Literacy And Reduced Violence Against Women 4. OIKKO 5. Women in Factories Initiative (WIFI)  Partner: Sheva Nari O Shishu Kallyan Kendra	<ul style="list-style-type: none"> <li>• <b>SRH service delivery and training</b> for workers</li> <li>• <b>GBV training</b> for workers to address <b>sexual harassment</b></li> </ul>	<ul style="list-style-type: none"> <li>• HALOW: Pilot conducted in two factories, reaching 7,000 workers, scale up to 20 factories (100,000+ workers) in Gazipur over next three years</li> <li>• WIFI: Will train 30,000 workers in Dhaka, Gazipur, Narayanganj and Chittagong</li> </ul>	GlaxoSmithKline, Marks & Spencer (buyer), UN Women, European Commission, Austrian Development Agency, Walmart (buyer)
<b>EngenderHealth</b>	1. Mayer Hashi II	<ul style="list-style-type: none"> <li>• <b>SRH service delivery</b> (esp. long acting and permanent family planning methods) for workers</li> <li>• <b>Training on family planning</b> service delivery for factory health service providers</li> <li>• <b>Training on SRHR</b> topics for factory workers</li> </ul>	<ul style="list-style-type: none"> <li>• Trained over 37,000 workers in 35 factories</li> </ul>	USAID
<b>Fair Wear Foundation</b>	1. United Nations Trust Fund to End Violence Against Women  Partners: Awaj Foundation, Karmojibi Nari, Bangladesh Mohila Ainjibi Samity	<ul style="list-style-type: none"> <li>• <b>Training on GBV</b> for factory workers</li> <li>• Helpline provided for workers to report harassment</li> </ul>	<ul style="list-style-type: none"> <li>• Trainings conducted in 29 factories nationwide</li> </ul>	UN Trust Fund to End Violence Against Women

Organization Name	Project Names (presented as provided by interviewees)	SRHR and GBV Activities with Garment Workers	Geographic Coverage and Reach (information presented as available)	Funders
<b>Gonoshasthaya Kendra</b>	1. Weave Our Future 2. Social Health Insurance for RMG workers	<ul style="list-style-type: none"> <li>• Health insurance for workers</li> </ul>	<ul style="list-style-type: none"> <li>• Anticipates reaching more than 17,000 workers in Dhaka, Gazipur and Savar</li> </ul>	Auchan International (buyer), Medico International
<b>Karmojibi Nari</b>	1. Strengthening Civil Society and Public Institutions to address Combating GBV and build Community Resilience to adapt to Climate Change 2. Sustaining and Responsible Action for Making Industry's Care (SRAMIC) 3. Anti-Harassment Committee and Violence Prevention System in Export Oriented Garment Factories	<ul style="list-style-type: none"> <li>• Training on GBV (sexual harassment and anti-harassment committees) for workers and mid-level managers</li> </ul>	<ul style="list-style-type: none"> <li>• Anticipates over 4,500 workers in Ashulia and Mirpur</li> </ul>	SIDA, ActionAid (via the European Union), Fair Wear Foundation
<b>Mamata</b>	1. Chittagong EPZ Corporate Pilot Project 2. Development of the Status of Women Workers' Rights 3. HERhealth (in Chittagong) 4. Women in Factories Initiative (WIFI)	<ul style="list-style-type: none"> <li>• Training on SRHR and GBV for workers and mid-level managers</li> <li>• Linkages to SRH services</li> </ul>	<ul style="list-style-type: none"> <li>• Trainings provided to over 200,000 workers in Chittagong</li> </ul>	Patagonia (buyer), DFID, BSR (via DFID and buyers), Walmart (buyer), Dutch Ministry of Foreign Affairs
<b>Manusher Jonno Foundation</b>	1. Jukto Hoye Mukto 2. Strengthening Civil Society and Public Institutions to Address Gender Based Violence and Build Community Resilience to Adapt to Climate Change  Partners: Phulki, Bangladesh Occupational Safety Health and Environment Foundation and Shobujer Ovijan Foundation, Karmojibi Nari, Awaj Foundation	<ul style="list-style-type: none"> <li>• GBV training for factory workers to raise awareness about sexual harassment</li> </ul>	<ul style="list-style-type: none"> <li>• Over 1,000 workers trained in Dhaka and Chittagong</li> </ul>	European Union, SIDA
<b>Naripokkho</b>	1. End GBV in RMG Industry in Bangladesh  Partners: BLAST, BRAC, SNV and Christian Aid	<ul style="list-style-type: none"> <li>• GBV training for factory workers</li> <li>• Linkages to legal services</li> </ul>	<ul style="list-style-type: none"> <li>• Aims to reach 10,000 workers in 10 factories in Ashulia and Gazipur</li> </ul>	Global Fund for Women
<b>OWDEB Organization for Women's Development Bangladesh</b>	1. Promotion of Social and Environmental Standards in the Industry (PSES) 2. Working Women's Access to Rights through Socio-Cultural Intervention	<ul style="list-style-type: none"> <li>• Training on SRHR and GBV for workers and mid-level managers</li> <li>• Linkages to SRH and legal services</li> </ul>	<ul style="list-style-type: none"> <li>• Over 50,000 workers trained in Chittagong</li> </ul>	GIZ, Women's World Day of Prayer
<b>RHSTEP Reproductive Health Services Training and Education Program</b>	1. Promotion of Sexual and Reproductive Health and Rights Program	<ul style="list-style-type: none"> <li>• Training on SRHR and GBV for workers and mid-level managers</li> <li>• Linkages to SRH services through medical college and government hospitals</li> </ul>	<ul style="list-style-type: none"> <li>• 24,000 workers trained from 23 garment factories in Savar, Gazipur and Ashulia</li> </ul>	SIDA
<b>RTMI Research, Training and Management International</b>	1. Weave our Future 2. ALDI Factory Advancement Project	<ul style="list-style-type: none"> <li>• Training on SRHR for factory-based health service providers (nurses, doctors, paramedics)</li> <li>• Training on SRHR and GBV for workers</li> </ul>	<ul style="list-style-type: none"> <li>• Over 100 service providers trained in Gazipur, Ashulia, Savar, Bhaluka, Mymensingh and Kishoreganj</li> <li>• 100 workers trained</li> </ul>	Auchan International (buyer), ALDI (buyer)
<b>Sheva Nari O Shishu Kallyan Kendra</b>	1. Health Access and Linkages Opportunities for Women (HALOW) 2. OIKKO	<ul style="list-style-type: none"> <li>• Training on SRHR and GBV for workers</li> <li>• Linkages to SRH services</li> </ul>	<ul style="list-style-type: none"> <li>• 2,200 workers trained in Tejgaon, Mirpur and Gazipur</li> </ul>	CARE (via the European Commission, GlaxoSmithKline, Marks & Spencer)
<b>SNV Netherlands Development Organization</b>	1. Working With Women	<ul style="list-style-type: none"> <li>• Training on SRHR and GBV topics for factory workers and mid-level managers</li> <li>• Direct SRH service provision in factories (inc. family planning commodities, not long-acting)</li> <li>• Referrals for SRH services</li> <li>• Health insurance for workers</li> </ul>	<ul style="list-style-type: none"> <li>• 10 garment factories in Dhaka</li> </ul>	EKN