

## Adolescent Health programs by different Organizations or Projects against district

District	Number of Organization /Project
Dhaka	12
Chattogram	11
Sylhet , Rangpur, Gazipur	10
Rajshahi, Barisal, Sirajgonj, Kushtia, Kishoreganj, Cox's Bazar, Noakhali, Lakshmipur, Cumilla, Chandpur, Moulvibazar.	9
Khulna, Mymensingh, Nilphamari, Jamalpur, Jessore, Gopalganj, Madaripur, Munshiganj, Narsingdi, Faridpur, Narayanganj, Khagrachhari, Feni, Brahmanbaria, Pirojpur, Jhalokati, Barguna, Sunamgonj, Hobiganj.	8
Lalmonirhat, Kurigram, Gaibandha, Thakurgaon, Panchagarh, Dinajpur, Natore, Naogaon, Joypurhat, Chapainawabgonj, Pabna, Bogra, Netrokona, Sherpur, Bagerhat, Chuadanga, Jhenaidah, Magura, Meherpur, Narail, Satkhira, Manikganj, Rajbari, Shariatpur, Tangail, Rangamati, Bandarban, Bhola, Patuakhali.	7



### Outcome

The overall expected outcome of SBCC activities related to adolescent sexual and reproductive health is to raise awareness and knowledge about sexual and reproductive health, rights, healthy menstrual hygiene management and practice; and reduce gender discrimination and violence against girls, early marriage and early pregnancy and provide psychological support to girls.

Teachers became aware on Adolescent Nutrition, Adolescent Sexual and Reproductive Health, Consequence of Child Marriage so they are able to share their knowledge with adolescent student during class and after class. Life skills education and Peer education were helpful for adolescents to know about their life goals, reducing early marriage and motivated other peers on SRHR, VAW topics.

## Family Planning (FP)



### Key Points

- In FP program diverse channels including private TV channels and local cable network were used. IEM Unit of DGFP have Call Center (Shuki Paribar) for FP-MCH information.
- Promotion through digital media like Facebook campaign, You Tube, Interactive Voice Recording (IVR), mHealth, website, online newspaper, eToolkit, and capacity building and knowledge management tools like eLearning course and digital archive are widely used in SBCC program on FP.
- The IEM unit of DGFP has national coverage and implemented wider range of SBCC program, besides a number of GO-NGO programs also covered different districts with specific activities.
- The main audiences reached in FP program were married women of reproductive age (MWRA), eligible couples and newlywed couples, pregnant women (PW) and Lactating Mother (with children below 2 years).
- Though a wider range of audiences are addressed through GO-NGO programs but no report mentioned specifically about Imam and Marriage Resister (Kazi) as audience. Use of satisfied client as advocate also not mentioned.



## Specific SBCC Activity

### IEM Unit, DGFP

- Observance of campaign and service week through advocacy meeting, mass communication focusing on FP-MNCH for eligible couples.
- Observation of World Population Day through advocacy meeting, publicity in media focusing on FP-MCH for the general people.
- Conducted Premarital Counseling sessions (60) on FP-MNCH, Violence Against women (VAW), and Gender for 3000 College & University level students and similar age group.
- Production and telecasting 10 TV spots through Private TV Channel on Short Acting FP Method, early marriage prevention & promoting facility delivery; 10 TV Spots in Private TV Channels on LAPM, MNCH, Breast feeding, 5 danger signs, 3 delays, birth planning for the mass people.
- Campaign through 100 advertisements in newspaper on dissemination of messages on LAPM for mass people targeting Prospective LAPM Clients.
- TV Scroll through Private TV Channel for 4 months on FP-MCH for mass people.
- Message dissemination through cable TV network and Cinema Hall –one package on FP-MCH for general people.
- Media Campaign on FP-MCH through TV channels specially LARC & PM targeting Prospective LAPM Clients through TV program.

### CCSDP, DGHS

- Client Fair with Workshop, Seminar to increase LARC and PM reaching 10,660 Newlywed couples, couples in want of spacing & limiting.
- Family Planning Campaign with 1707 events using Brochures, Leaflet, and Models for 30,518 eligible Couple and PNC Mothers to ensure FP method screening of FP users; method migration; and Long Acting and Permanent method.

### Family Planning-Field Services Delivery, DGFP

- Orientation of Newlywed Couple to delay Pregnancy up to 20 Years (40 batches of 1400 couples) and IPC on Use of contraceptive, Safe motherhood including ANC, PNC, birth planning, PPF.
- Orientation/Workshop of Service Provider of RMG Sector about Contraception and Reproductive Health with 92 garments factory in 4 batches on Family Planning method and SRH with 40-50 Doctors, Nurses and Paramedics.

### Bangladesh Television

- Aired dramas (2), documentaries (157), TV spots (4) and music videos (12) on FP methods, PPF, small family norms for Youth, Newlywed couple, and couple with low and high parity.
- Aired courtyard meetings (21) on FP methods, PPF, small family norms, FP in the light of Islam.

## **Bangladesh Betar**

- Broadcast Interviews (208) on family planning methods, benefits of family planning, encouraging small family reaching 80 lacs listeners of age group 18-49 years.
- Broadcast discussions (200) and talk shows (200) on family planning methods, benefits of family planning, encouraging small family.
- Broadcast dramas (80), radio cartoons (50), songs (300) and jingles (20) on family planning methods, benefits of family planning, encouraging small family.

## **UPHCSDP-II, LGD**

- Observed World Population Day with 273 events using FP Brochures, Leaflet, Models and Video Show to Emphasize Family Planning method users practicing method migration on regular interval; disseminated awareness-based messages to the New Couple and Post Natal Mother (for Long Term and Permanent method) to how they should take care about birth control issues reaching 4308 Eligible Couple of FP method users; New Couple; and Post Natal Mothers.

## **USAID Ujjiban SBCC Project**

- Developed IVR focusing on short & long term FP methods reaching 1500 newlywed couple, pregnant women, lactating mother and family members.
- IPC sessions on short & long term FP methods reaching 500 newlywed couple, pregnant women, lactating mother and family members.
- Placed 5 posts on Facebook on short & long term FP methods reaching about 3 million newlywed couple, pregnant women, lactating mother and family members.
- Broadcasted of Radio programs (15 episodes) on short & long term FP methods reaching 4 million newlywed couple, pregnant women, lactating mother and family members.
- Conducted 3ToTs on IPC, Counseling on birth spacing, modern FP methods, LAPM & PPFPP for 67 local NGOs.
- Distributed 600 SD cards with FP products.
- Conducted Community Group orientations (30 batches) for 873 HA, FWA, CHCP on IPC and Counseling for birth spacing, modern FP methods, LAPM & PPFPP, etc.
- Conducted community interactive meetings/courtyard sessions (42) on IPC, Counseling on birth spacing, modern FP Methods, LAPM & PPFPP for approximately 1000 HA, FWA, CHCP.

## **SMC**

- Community level group meetings (36,520 courtyard sessions) with 438,262 married women of reproductive age (MWRA) and caregivers of under five children on Healthy Timing and Spacing between Pregnancies (HTSP), and 1000 days care.
- Interpersonal communication with 3,659 newlywed couples (3,000 sessions conducted) on HTSP and Healthy pregnancy.



### **Shukhi Jibon, Pathfinder International**

- Conducted family planning service delivery trainings with major components of IPC, Counseling, Community engagement with the 75 frontline family planning service providers in Ukhiya to improve quality services in community.
- Observance of World Population Day through Market place presence and sponsoring press release.

### **Communication Unit, UNFPA**

- Observance of World Population Day 2019 with Government Representatives, Policy makers, Development Partners, CSOs, Youth nationwide.

### **Nari Maitree**

- Conducted Courtyard meetings (200) about Long and permanent Method, Permanent and temporary method with 1800 Eligible Couples (15-49 years).

### **PSTC**

- Observed World Population Day with 11000 community people.

### **AUHC (Advancing Universal Health Coverage project)**

- Family Planning Counseling on use of different FP methods in 387 clinics and 10063 Satellite spots and One to one counseling by 6090 Community Service Providers reaching 1,412,807 ever married females, ever married males and adolescent girls.

### **Plan International Bangladesh – Born On Time project**

- Development of SBCC materials – Developed and printed 1000 Flipcharts with topics on Family planning Method, Preterm Birth, Menstrual Hygiene, Infection prevention, Pregnancy and after delivery care, Nutrition, effect of Smoke and drug, Birth planning, Male engagement on MNCH and SRHR, Gender
- Conducted 1488 Sessions reaching 4960 Young Married Couple group members for through monthly group sessions.
- Counselling for 27,259 lactating mothers and family members through home visits on Family planning methods, importance of PNC services and Nutrition.

### **Plan International Bangladesh –SHOW project**

- Counseling on FP methods using FP manuals and guidelines with about 5,20,000 families in 3 SHOW project areas targeting eligible couples to increase the use of family planning methods.

### **Marie Stopes Bangladesh**

- Local satellite TV Ad & Scrolling around 36,000 times in two months on MR, ANC, PNC, Child health targeting low to middle income community women and men.
- Community radio Ads around 1200 in two months on MR, ANC, PNC, Child health targeting low to middle income community women and men.

- Airing RDC in national level Radio 300 times in 15 days on MR, ANC, PNC, Child health targeting low to middle income community women and men.
- Newspaper ads 6 times on MR, contact center number low to middle income community women and men.
- Online newspaper for 3 months in 3 newspaper on MR, contact center number low to middle income community women and men.
- Billboard display / visual change (7) on MR, contact center number low to middle income community women and men.
- Poster (72,000) on MR, contact center number low to middle income community women and men.

### **Shimantik**

- Observance of World Population Day through Rally involving community members .
- Observed Family planning week through IPC sessions (8) on Family Planning Long Term & Permanent methods with 100 couples having 2 children.

### **CWFD (MISHD project)**

- Conducted group meetings with the MWRA in 19 upazilas for Spacing, No pregnancy after 35 age, using Audio tools and Flipchart.

### **BRAC**

- Eligible Couple Visits on Family planning related issues reaching 14,635,920 Women of 15-49 years through IPC and Community media.

### **Bangladesh Association for Prevention of Septic Abortion (BAPSA)**

- Observed World Population Day : participated in Rally, conducted group meetings with the mothers' of 1-2 children and IPC sessions (70) with the mothers and fathers of 2 children on LAPM issues.

### **Ma-Moni**

- Observation of World Population Day through IPC & Discussions, designing one banner and distribution of T-shirts (1000), caps (1000) to bring attention to the importance on population issues among the mass people.



## **Audience and Issue**

The main audiences reached were married women of reproductive age (MWRA), eligible couples and newlywed couples, pregnant women (PW) and Lactating Mother (with children below 2 years).

College & University level students and similar age group received premarital counseling in selected upazilas.

Some of the programs focused on low to middle income community women and men reached through group meeting, local satellite TV advertise & scrolling, community radio etc. One program addressed RMG sector workers in selective areas received information through trained service providers.



	Audience	Issue covered
Individual Level	Newlywed couple	<ul style="list-style-type: none"> <li>• Short &amp; Long term Reversible Contraceptive (LARC) methods, small family norms in the light of Islam</li> <li>• Use of FP methods to delay first pregnancy</li> <li>• Safe motherhood including ANC, PNC, birth planning</li> <li>• Information of Postpartum Family Planning (PPFP)</li> </ul>
	Young Married Couple	<ul style="list-style-type: none"> <li>• Delaying first pregnancy until wife is 20 years</li> <li>• Information of modern FP Methods</li> <li>• Care needed during pregnancy and after delivery</li> <li>• Factors causing preterm birth including effect of smoke, drug, Infection and nutrition on preterm birth</li> <li>• Menstrual hygiene management</li> <li>• Male engagement on MNCH ,SRHR and FP</li> <li>• Effect of gender in using FP methods</li> </ul>
	Eligible couple of reproductive age (age of wife 15-49 years), Married Women of Reproductive Age (MWRA)	<ul style="list-style-type: none"> <li>• FP method migration on regular interval by the users</li> <li>• Information of short and long term family planning methods/modern FP method</li> <li>• Disseminates information on Long Term and Permanent method (LAPM)</li> <li>• Role of FP for maternal, neonatal and child health care</li> <li>• Counseling on Birth spacing and PPFP</li> <li>• Risk of pregnancy for women after 35 years; no pregnancy after 35 age.</li> </ul>
	Family Planning Method users	<ul style="list-style-type: none"> <li>• FP method migration on regular interval by the users</li> <li>• Disseminates information on LAPM</li> <li>• Importance of continuing FP methods</li> </ul>
	Couple in need of spacing or limiting pregnancy /Couple having 1-2 child / Prospective LAPM Client	<ul style="list-style-type: none"> <li>• Benefit of increasing LARC &amp; PM users</li> <li>• Information on LARC methods for spacing pregnancy</li> <li>• Information on Permanent Method of FP for limiting pregnancy.</li> </ul>
	Couple with High Parity	<ul style="list-style-type: none"> <li>• FP Methods, PPFP, Small family norms in the light of Islam.</li> </ul>
	Pregnant women	<ul style="list-style-type: none"> <li>• Short and long term modern FP methods</li> <li>• Counseling on Birth spacing</li> <li>• Permanent Family Planning methods</li> <li>• Importance of PPFP</li> </ul>

	<b>Audience</b>	<b>Issue covered</b>
Individual Level	Lactating mother, PNC mother	<ul style="list-style-type: none"> <li>• Information of short and long term modern FP methods</li> <li>• Importance of PFP</li> <li>• Importance of post-natal care</li> <li>• Nutrition for lactating mother</li> </ul>
	Adolescent girls	<ul style="list-style-type: none"> <li>• Information of modern family planning methods</li> <li>• Benefits of family planning</li> </ul>
	Men and women of reproductive age (18-49 years)	<ul style="list-style-type: none"> <li>• Information of modern family planning methods</li> <li>• Benefits of family planning, encouraging small family</li> </ul>
	College & University level students and similar age group	<ul style="list-style-type: none"> <li>• Benefits of family planning (FP) and MNCH services</li> <li>• Role of gender in FP-MNCH</li> </ul>
	Youth	<ul style="list-style-type: none"> <li>• Information of modern family planning methods and PFP</li> <li>• Small family norms in the light of Islam</li> </ul>
Family Level	Family member/Caregiver/Guardian	<ul style="list-style-type: none"> <li>• Importance of Family Planning (FP) method</li> <li>• Short and long term modern FP methods</li> <li>• Nutrition for pregnant and lactating mothers</li> <li>• Importance of Post-natal Care (PNC) services</li> </ul>
Community Level	Community Group member	<ul style="list-style-type: none"> <li>• Benefits of Birth spacing, Modern FP Methods including LAPM</li> <li>• Benefits of PFP</li> </ul>
	Low to middle income community women, men	<ul style="list-style-type: none"> <li>• Information and benefit of ANC, PNC, Child health and MR services</li> <li>• Information on available service centers and contact numbers</li> </ul>
	General people /Mass people	<ul style="list-style-type: none"> <li>• Short Acting FP Method</li> <li>• Child marriage prevention and consequence of early pregnancy</li> <li>• promotion of facility delivery</li> </ul>
Organizational Level	Local NGO staff	<ul style="list-style-type: none"> <li>• IPC, Counseling on Birth spacing, Modern FP Methods, including LAPM</li> <li>• IPC, Counseling on PFP</li> </ul>
	Field worker (FWA, HA, CHCP, CHWs), frontline family planning service providers	<ul style="list-style-type: none"> <li>• IPC, Counseling on Birth spacing, Modern FP Methods including LAPM</li> <li>• IPC, Counseling on PFP</li> <li>• IPC, Counseling on FP related issues at the community</li> <li>• Community engagement skills and methods.</li> </ul>
	Doctors, Nurse, Paramedic	<ul style="list-style-type: none"> <li>• Counseling on FP method, sexual and reproductive health</li> </ul>





	Audience	Issue covered
Societal Level	Govt. Representatives, Policy makers, Development Partners	<ul style="list-style-type: none"> <li>Information on FP and Maternal Health issues and Demographic Dividend for program support.</li> </ul>

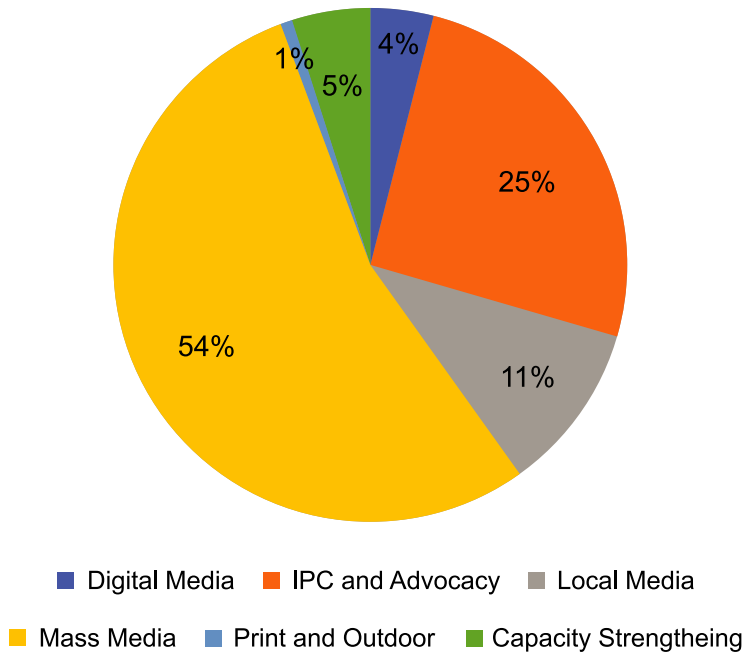


### Communication Channels and Resource Utilization

IEM unit used different communication channels including wider coverage through mass media to address the audiences of different level. The call center “Shuki Paribar” of IEM unit provides unique opportunity to know about FP-MNCH information. Ujjiban SBCC project widely promotes use of social and digital media for FP-MNCH information. One to One communication was most commonly used channel by most of the programs.

Approaches	Activities	Resource
<b>IPC and Counselling</b>	Home-based and facility-based one to one, group discussions, community interactive meetings, advocacy meetings.	79,875,898 BDT
<b>Local Media</b>	Client Fair, seminar, folk song, video shows at community level, live program in community radio, rally on World Population Day.	33,193,119 BDT
<b>Mass Media</b>	Drama, TVCs, documentary, music videos, TV Scrolling on BTV, private TV channel, cable TV network and Cinema Hall; , Radio programs like dramas, discussions, Interviews, talk shows, radio cartoons, songs, jingles, newspaper advertisements etc.	170,048,735 BDT
<b>Print and Outdoor Media</b>	Brochures, Leaflet, Poster, digital Billboard, Flip chart, Desk Calendar.	1,548,727 BDT
<b>Digital Media (Social and Web based )</b>	Facebook posts, You Tube video, Interactive Voice Recording (IVR), mHealth , website, eNewsletter, digital archive, eLearning, eToolkit, call center( Shuki Paribar).	12,755,635 BDT
<b>Capacity Strengthening</b>	Orientation and Training	15,439,134 BDT

Resource utilized through different media



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The call center “Shuki Paribar” of DGFP brings unique opportunity to know about FP-MNCH information. Maximum resource was utilized for mass media promotional activities on FP and RH issues.



**Geographical Coverage**

SBCC activities of IEM Unit, Family Planning-Field Services Delivery unit and CCSDP unit of DGFP, and mass media activities of BTV and Bangladesh Betar have nationwide coverage. SBCC activities of other organization/projects are limited to their intervention areas, and not reached all the communities. Dhaka, Sylhet, Chattogram, Rangpur and Gazipur districts have highest coverage where 9 -11 GO-NGO FP interventions; and Patuakhali and Rangamati have least programs.

## Family Planning programs by different Organizations or Projects against district

District	Number of Organization /Project
<b>Dhaka</b>	12
<b>Rangpur</b> , Gazipur, Faridpur, Madaripur, Gopalganj, Rajbari, Moulvibazar, Chandpur, Jamalpur, <b>Barisal</b> , Jhalukati, Pirojpur, Putuakhali, Sirajgonj.	11
<b>Chattogram</b> , Feni, Noakhali, Cox's Bazar, Cumilla, Lakshmipur, Brahmanbaria, <b>Sylhet</b> , Sunamgonj, Hobigonj, <b>Mymensingh</b> , Sherpur, Netrokona, Manikginj, Kishoregonj, Munshgonj, Narayangonj, Norshingdi, Tangail, Sariatpur.	10
Dinajpur, Thakurgaon, Panchaghor, Gaibandha, Lalmonirhat, Nilphamary, Kurigram, <b>Rajshahi</b> , Bogra, Joypurhat, Nator, Naogaon, Chapai Nowabgonj, Pabna, <b>Khulna</b> , Satkhira, Bagerhat, Kustia, Narail, Magura, Jhinaidah, Chuadanga, Jessore, Bhola, Borguna, Rangamati.	9
Khagrachhari, Bandarban, Meherpur.	8



### Outcome

The overall expected outcome of SBCC activities related to family planning is to increase knowledge, the family planning use rate and CYP to reduce TFR.

The expected outcome of SBCC activities is to achieve positive behaviors that small family size will be increased, child marriage will decrease and TFR will be decreased.

FP campaign showed new couple participation increased and a positive growth on method migration happened after service campaign.

Capacity development resulted in Skill development, while the Observance of World Population Day by various organizations increased social awareness.

Expected outcome of Counseling sessions is to Increase CYP to reduce TFR.

## Nutrition



### Key Points

- Nutrition issues are addressed widely by considerable number of organizations/projects either as focus program or as a cross cutting issue.
- Nutritional requirements during the first thousand days of life, IYCF and importance of breastfeeding (early initiation and exclusive BF) were addressed commonly.
- SBCC activities by NNS-IPHN on nutrition were reaching out to hard to reach people and working mothers and employees to take healthy food.
- Though a wide range of audiences were reached through different programs with nutrition information but only USAID INCA project, and Born On Time project of Plan International specifically mentioned about husband and father as an audience of their nutrition promotion activities.
- Nari Maitree working in Rajshahi City Corporation area mentioned specifically about mother of mal-nourished children as audience of their promotional activities.
- No mention of geriatric nutrition issue and healthy diet habit to prevent non communicable diseases.
- 7-8 projects implemented nutrition program in 11 common districts (Dhaka, Rangpur, Khustia, Gazipur, Noakhali, Lakshmipur, Pirojpur, Barishal, Sylhet, Chadpur, Cumilla, Khulna).



## Specific SBCC Activity

### National Nutrition Services (NNS), IPHN, DGHS

- Observed Nutrition Week through Workshop, Rally, stall, Audio & video Media, IPC countrywide to increase community awareness on Nutrition.
- Observed Breast-feeding week through Workshop, Rally, Audio & video Media, IPC countrywide on proper breastfeeding and good weaning practices.
- Participated in World Food Safety Day through Workshop, Rally, Audio & video Media, IPC countrywide to increase awareness on food safety.
- Nutrition Campaign in BTV with TVC, Song, Filler, Short Drama, Uthan Boithak, Phone in live discussion for awareness on Nutrition among general people.
- Boat Campaign on Nutrition to 15 hard-to-reach areas through Folk song on Nutrition issues, Interactive discussion with 4500 people for Motivation on Nutrition among the people in hard-to-reach areas.
- Broadcasted TV scroll on healthy food to take during Holy Ramadan.
- Conducted nutrition SBCC capacity strengthening workshops for the GO- NGOs program persons at different level.
- Conducted workshop to develop appropriate messages on nutrition for elderly people and for working mothers and employees with Nutrition.

### Bangladesh Breastfeeding Foundation (BBF)

- Distribution of SBCC materials (leaflet) on maternal nutrition through orientation programs at community level to 30,900 Pregnant and lactating mothers and their caregivers who attended, focusing on Nutritional requirement during pregnancy and lactation, food diversity, antenatal and postnatal care.
- Distribution of SBCC materials (handout) on complementary feeding, different recipes which are appropriate for 6-23 months aged children, and quantity, etc. to improve child nutrition through courtyard meetings at community level to 30,000 mothers and caregivers of 6-23 month aged children.
- Distribution of 8,120 flipchart for orientation of Mother Support Group on maternal, child and adolescent nutrition; BMS Act for use by the CHCPs of 8120 community clinics.
- Nutrition fair focusing on Importance of breastfeeding and nutrition during different ages targeting Mother and caregivers of infant and young child, health professionals, mass people. Approximately 2,000 people visited the fair.

### Bangladesh Television

- Broadcast 19 Courtyard meetings (19), documentary (30) and TV spots (7) on breast feeding, Child nutrition, Nutrition during pregnancy for pregnant mother and couples.

### Bangladesh Betar

- Broadcast 100 Interviews (100 episode), Talk Shows (100), and Discussion sessions (60) on nutrition for pregnant mother, newborn babies, teenagers reaching 70 lacs listeners.

### **INCA Project, Caritas Bangladesh**

- IPC Counseling of 268,384 pregnant mother, lactating mother on IYCF, Maternal Nutrition.
- Courtyard sessions with 219,848 Pregnant mother, lactating mother, father and husband, mother in laws, adolescent girls on IYCF, Maternal Nutrition, Adolescent Nutrition, Hygiene promotion.
- Organized Community Nutrition Day with 1,674 events reaching 60,725 community people with messages on Nutrition education, and measured BMI and GMP.
- Observed special day /week : World Breastfeeding week with 1,137 events reaching 17,197 community people with messages on IYCF, maternal nutrition, hygiene promotion; Global Hand washing Day with 5,092 community people and 190 schools to promote WASH and personal hygiene; National Nutrition Week with 1035 events reaching 28,349 community people and school students with messages on IYCF.
- Distributed to 40,081 Food plates and 38,777 Nutrition Calendars to pregnant mothers to promote balanced food, maternal nutrition.
- Distributed promotional materials: food bowl, job aid, flipchart, Ludo games for adolescent girls, nutrition manual, leaflet, brochure and festoon to 25,000 Pregnant mother, lactating mother, father and husband, mother in laws, adolescent girls and service provider.

### **FHI 360**

- Nutrition group sessions and Household family counseling
- Digital voice messages to pregnant and lactating women and family members
- Observed National Nutrition Week at national and subnational level with 29 events and reaching 3000 Pregnant and lactating mothers, their families, and nutrition stakeholders with nationally developed materials and messages for nutrition awareness, diversified diet and engagement of multisectoral stakeholders for nutrition actions.
- Observed World Breastfeeding Week at national and subnational level with 29 events reaching 2,400 Pregnant and lactating mothers and their families; and nutrition stakeholders.
- Observed Global Handwashing Day with 28 events and reaching 1,680 pregnant and lactating mothers and their families; and nutrition stakeholders on Importance of handwashing for nutrition.

### **UPHCSDP-II, LGD**

- Observation on National Nutrition Week (Rally) with 734 events for 14,878 school students to promote nutrition.

### **USAID Ujjiban SBCC Project**

- Developed and broadcast 20 Radio programs on Maternal Nutrition, Early initiation & exclusive BF, Adolescent nutrition reaching about 4 million Newlywed couple, Pregnant women, lactating mother and family members.
- Developed and broadcast 7 episodes of '10 minutes school' programs on Maternal Nutrition, Early & exclusive BF, Adolescent nutrition reaching about 3 million listeners.
- Orientations on use of Interactive Voice recording and IPC trainings on maternal nutrition, Early initiation & exclusive BF, adolescent nutrition for frontline workers.
- Conducted CG orientation of 30 batches for the 873 HAs, FWAs and CHCPs, and 42 Community interactive meetings on IPC, Counseling, ANC, PNC, Birth spacing, ENC for approximately 1000 stakeholders.



## WHO

- World Breast Feeding week 2019 observation with Inauguration programme, Infant and Young Child fair with about 1,000 Different ministries, professional societies, UN agencies and other development partners, stakeholders, NGOs, volunteers, students, nurses, Girls guide, scout as Advocacy for the protection, promotion and support of breastfeeding, harmful effects of BMS.
- The Second International Conference on Nutrition (ICN2) Follow up Actions, Technical Consultation and Symposium as Advocacy for implementation of ICN2 Framework for action (FFA).
- National Nutrition Week 2019 observation through Technical Advocacy and awareness building seminar with 120 different nutrition stakeholders for Advocacy on multisectoral approaches to improve nutrition and Healthy aging.
- National Workshop on Inter-ministerial roles to implement NPAN2 with 145 officials from 22 Ministries.

## UNICEF

- Counseling, IPC, SBCC materials distribution, Group meeting with the 5,000 Female Workers of 100 Readymade Garment Industries on Breastfeeding at workplace
- IPC with the Managers of 100 Readymade Garment Industries on importance of Breast Feeding facilities at the workplace

## PSTC/NariMaitree

- Conducted 210 meetings on child malnutrition with the 1,920 mothers of malnourished children.

## AUHC (Advancing Universal Health Coverage project)

- Counseling on nutrition for: newborn, under 5 children, pregnant mother, Adolescents in 387 clinics and 10,063 Satellite spots, and one to one counseling by 6,090 CSPs reaching 489,772 pregnant women and mothers with under-5 children, and adolescents.

## Plan International Bangladesh – Born On Time project

- Counseling for 46,606 Pregnant and lactating mothers and their family members through Household visit and at service center on maternal Nutrition, and preterm birth.

## Plan International Bangladesh – SHOW (Ad-din Welfare Centre, LAMB and YPSA)

- ICT based SBCC session with approximately 1,96,800 mothers to make aware about the consequences of malnutrition and its impact on life through modules and flipchart, etc.
- HH counseling services provided to about 520,000 mothers and families on benefits of nutritious food using modules and flipchart etc.

## Marie Stopes Bangladesh

- Organized 10 Theater for Development (TFD) on Food and Nutrition for 3,200 Youth adolescents and community people, and 1,000 courtyard meetings on Food and Nutrition for 369,000 pregnant mothers.

## BRAC

- Conducted counseling and demonstration for 2,595,434 caregivers of under-2 years child on EBF and CF.
- Conducted counseling and demonstration for 631,930 pregnant women on maternal nutrition and dietary diversity.

- Conducted Adolescent Forum Counseling for 2,322,981 adolescent girls on adolescent nutrition and dietary diversity.

### Shimantik

- Conducted group meetings for macro- and micro-nutrients awareness for more than 250 mother and child on GMP Card, food supplement and safe food.

### CWFD (MISHD project)

- Promoted importance of micro-nutrient for Nutrition of 6 months to 5 years children.



## Audience and Issue

A wide range of audiences were reached with nutrition related information through a number of GO-NGO programs/projects. From beneficiary side the married women of reproductive age (MWRA), pregnant and lactating mothers, couples, adolescent boys and girls, and from service side the front line workers are commonly addressed. However there is no specific program to address the obesity issue and nutrition needs of the elderly people. The hard to reach population are reached by the intervention of NNS but the extent of coverage needs to be reinforced.

Different ministries, professional societies, development partners, NGOs, volunteers' organizations like Girls guide and Scouts were reached through Advocacy and day observation on Nutrition.

General people received information on good nutrition through national Bangladesh television and Bangladesh Betar.

	Audience	Issue covered
Individual Level	Pregnant mother and Lactating mother	<ul style="list-style-type: none"> <li>• Nutritional requirement during pregnancy, post-natal and lactation period and food diversity.</li> <li>• Counseling and demonstration on maternal nutrition, dietary diversity and balanced diet.</li> <li>• Information on breast feeding, Importance of breastfeeding, early initiation &amp; exclusive breastfeeding.</li> <li>• Information on infant and young child feeding (IYCF) practice, child nutrition, adolescent nutrition.</li> <li>• Food safety and hygiene promotion; importance of handwashing for nutrition.</li> <li>• Balance diet, food pyramid and diversity</li> <li>• Relation of nutrition with preterm birth</li> <li>• Importance of FP for spacing and proper nutrition for the children</li> <li>• Consequences of malnutrition and its impact on life.</li> </ul>





	Audience	Issue covered
Individual Level	Mother of 6-23 month aged children/Under 5 children /infant and young child	<ul style="list-style-type: none"> <li>• Importance of complementary feeding, different cooking recipes which are appropriate for 6-23 months aged children, feeding method and quantity etc.</li> <li>• Importance of breastfeeding, BMS Act</li> <li>• Nutrition during pregnancy</li> <li>• Maternal, child and adolescent nutrition, nutrition during different age</li> <li>• GMP Card, food supplement, &amp; food safety.</li> </ul>
	Mother of children suffering from malnutrition	<ul style="list-style-type: none"> <li>• Nutrition supplementation for mal-nutrient child.</li> </ul>
	Father and Husband	<ul style="list-style-type: none"> <li>• Information on infant and young child feeding (IYCF) practice, child nutrition, adolescent nutrition.</li> <li>• Importance of maternal nutrition &amp; adolescent nutrition</li> <li>• Personal hygiene promotion &amp; handwashing for nutrition.</li> </ul>
	MWRA	<ul style="list-style-type: none"> <li>• IPC and Counseling on maternal nutrition, infant and young child feeding (IYCF), and adolescent nutrition.</li> </ul>
	Eligible couple/couple	<ul style="list-style-type: none"> <li>• Information on breastfeeding, nutrition during pregnancy and child nutrition.</li> </ul>
	Adolescent girl	<ul style="list-style-type: none"> <li>• Counseling on adolescent nutrition and dietary diversity</li> <li>• Information on IYCF practice</li> <li>• Information on maternal nutrition and child nutrition</li> <li>• Personal hygiene promotion</li> <li>• Information on breastfeeding and BMS Act.</li> </ul>
	Adolescent/teenagers/ youth adolescent	<ul style="list-style-type: none"> <li>• Information of healthy food, food habit and relation to nutrition.</li> </ul>
	Female workers of RMG Industries	<ul style="list-style-type: none"> <li>• Breastfeeding at the workplace</li> </ul>
Family Level	Caregivers/Family member/Grandmother/ other Female member of the family	<ul style="list-style-type: none"> <li>• Nutritional requirement during pregnancy, post-natal and lactation period and food diversity</li> <li>• Importance of breastfeeding, early initiation and exclusive breastfeeding, BMS Act</li> <li>• Importance of complementary feeding, different cooking recipes which are appropriate for 6-23 months aged children, feeding method and quantity etc.</li> </ul>

	<b>Audience</b>	<b>Issue covered</b>
Family Level	Caregivers/Family member/Grandmother/ other Female member of the family	<ul style="list-style-type: none"> <li>• Counseling and demonstration to support practicing exclusive breastfeeding and complementary feeding</li> <li>• Maternal nutrition, child nutrition and adolescent nutrition</li> <li>• Nutrition requirement for different age</li> <li>• Nutrition awareness, diversified diet and engagement of family members for nutrition actions</li> <li>• Importance of FP for spacing and proper nutrition for the children</li> <li>• Relation of nutrition with preterm birth.</li> </ul>
	Mother in Law	<ul style="list-style-type: none"> <li>• Information on infant and young child feeding (IYCF) practice, child nutrition, adolescent nutrition</li> <li>• Personal hygiene promotion and handwashing for nutrition</li> <li>• Importance of maternal nutrition &amp; adolescent nutrition.</li> </ul>
Community Level	Community people	<ul style="list-style-type: none"> <li>• Nutrition education – Information of healthy food, food habit and food diversity</li> <li>• Information on IYCF practice</li> <li>• Importance of measuring Body Mass Index (BMI) and Growth Monitoring and Promotion (GMP)</li> <li>• Consequences of malnutrition and its impact on life</li> <li>• Personal hygiene, safe water and sanitation practice</li> <li>• Awareness session on nutrition food plate, food card, seasonal vegetable calendar etc.</li> </ul>
	Hard-to-reach people	<ul style="list-style-type: none"> <li>• Motivation on nutritious and balanced food habit.</li> </ul>
National Level	Mass people/ General population	<ul style="list-style-type: none"> <li>• Importance of breastfeeding</li> <li>• Increase knowledge on proper breastfeeding and proper weaning practices</li> <li>• Importance of nutrition for different age group</li> <li>• Increase knowledge on food safety</li> <li>• Identify healthy food to take during Ramadan</li> <li>• Nutrition need for the working mother.</li> </ul>
Organizational Level	School student, Girls guide, Scouts	<ul style="list-style-type: none"> <li>• Information of healthy food, food habit and nutrition</li> <li>• Information for the promotion and support of breastfeeding, and disseminate harmful effects of BMS</li> <li>• Information on IYCF practice</li> <li>• Personal hygiene, safe water and sanitation practice.</li> </ul>
	Factory worker	<ul style="list-style-type: none"> <li>• Awareness session and dissemination on nutrition food plate, food card, seasonal vegetable calendar etc.</li> </ul>



	Audience	Issue covered
Organizational Level	Health professionals, and Community Health Care Provider (CHCP)	<ul style="list-style-type: none"> <li>• Promoting importance nutrition for different age group</li> <li>• Advocacy for promotion and support of breastfeeding, and harmful effects of BMS</li> <li>• Maternal, child and adolescent nutrition.</li> </ul>
	Local NGOs and Volunteers	<ul style="list-style-type: none"> <li>• Nutrition awareness, diversified diet and engagement of multisectoral stakeholders for nutrition actions</li> <li>• Importance of breastfeeding</li> <li>• Importance of handwashing for nutrition</li> <li>• IPC and counseling on maternal nutrition, IYCF and adolescent nutrition</li> <li>• Advocacy for promotion and support of breastfeeding, and harmful effects of BMS.</li> </ul>
Societal Level	Different ministries, professional societies, and development partners, and other Nutrition stakeholders	<ul style="list-style-type: none"> <li>• Nutrition awareness and engagement of multi-sectoral stakeholders for nutrition mainstreaming</li> <li>• Advocacy on multisectoral approaches to improve nutrition and healthy aging</li> <li>• Advocacy for promotion and support of breastfeeding, and harmful effects of BMS</li> <li>• Advocacy to implement NPAN2.</li> </ul>



### Communication Channels

SBCC activities on nutrition utilized multiple channels. Community based outreach activity through local media is commonly practiced by most of the programs; besides IPC and counselling is also used widely for information dissemination. SBCC activities on nutrition used mass media channels of national BTV and radio programs mostly by NNS-IPHN. TV broadcast of courtyard meetings, TV documentary, TV spots and radio broadcast interviews, radio talk shows, radio discussions etc.

**“Outreach activities for promotion and demonstration of healthy nutrition practices was commonly used by most of the programs.”**

Interpersonal Communication (IPC) approach was used during one to one counseling at home and facility-based sessions, Adolescent Forum Counseling, courtyard/ group meeting, interactive discussion sessions.

SBCC materials such as food plate, nutrition calendar, food bowl, flipchart, ludu games, leaflets, brochures, festoons were used during counseling and group sessions.

<b>IPC and Counselling</b>	Counseling session, Courtyard meeting ( Uthan Boithak), Group sessions, Orientation, Workshop, Symposium, seminar, Interactive Discussion, Forum discussion.
<b>Local Media</b>	Community interactive meeting, Nutrition fair, Infant and Young Child fair, Community Nutrition Day (measured BMI and GMP), Macro- and micro-nutrients campaign, Rally, Video show, Folk song, Drama (TFD), Magazine program in Community Radio.
<b>Mass Media</b>	Documentary, TV Spot, TV Scroll, Song, Short Drama, Talk Show, radio interviews, radio talk shows, radio discussions, Billboard, newspaper supplementation.
<b>Print &amp; Outdoor Media</b>	Flipchart, Food plate, Food bowl, Ludo game, Nutrition Calendar, Leaflet, Brochure, GMP Card, Festoon, Handout.
<b>Digital Media (Social and Web based)</b>	Nutrition in 10 minutes school, Promotion on Breast Feeding on Facebook and YouTube. Phone in Live, Digital Voice Message, Interactive Voice Record, Digital device based SBCC session, Digital Archive, eLearning and eToolkit.



## Geographical Coverage

National Nutrition Services (NNS), IPHN, DGHS, Bangladesh Breast Feeding Foundation (BBF), INCA project of Caritas Bangladesh, USAID's Strengthening Multi-sectoral Nutrition Programming (SMNP) of FHI360 and Nutrition International have implemented their program focused on nutrition as key component. For rest of the projects /programs nutrition issue is one of the component of their program activities along with other issues.

SBCC program on nutrition are held both in urban and rural areas through GO-NGO programs/projects; NNS, IPHN, DGHS is also reaching the hard to reach areas with nutrition messages.



## Nutrition programs by different Organizations or Projects against district

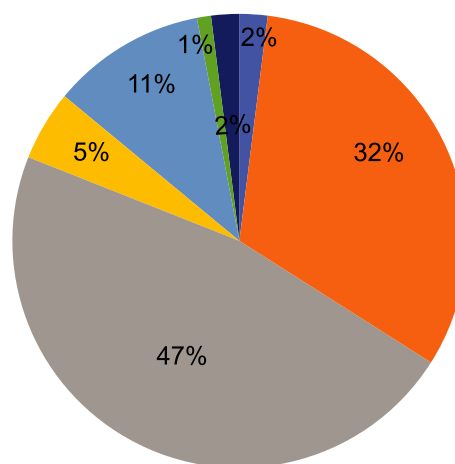
District	Number of Organization /Project
<b>Dhaka</b>	10
<b>Barishal</b> , Perojpur, Jhinaidah, Chuadanga, Jessore, Kushtia, Faridpur, Madaripur, Jhalokati and Chandpur, Gazipur	9
<b>Rangpur</b> , Gopalganj, Rajbari, Moulvibazar, Jamalpur, Patuakhali, Sirajgonj, Noakhali, Lakshmipur, Bhola, <b>Chattogram</b> , Feni, Cox's Bazar, Cumilla, Brahmanbaria, <b>Sylhet</b> , Sunamgonj, Hobigonj, <b>Mymensingh</b> , Sherpur, Netrokona, Manikginj, Kishoregonj, Munshgonj, Narayangonj, Norshingdi, Tangail, Sariatpur	8
Dinajpur, Thakurgaon, Panchaghor, Gaibandha, Lalmonirhat, Nilphamary, Kurigram, <b>Rajshahi</b> , Bogra, Joypurhat, Natore, Naogaon, Chapainawabgonj, Pabna, <b>Khulna</b> , Satkhira, Bagerhat, Narail, Magura, Borguna, Rangamati	7
Khagrachhari, Bandarban, Meherpur	6



## Resource Utilization

Resource utilized through different media:

SBCC Activity	Cost
Digital Media	2,469,200 BDT
IPC	43,537,070 BDT
Local Media	65,695,165 BDT
Mass Media	7,444,000 BDT
Print and Outdoor Media	15,600,496 BDT
Advocacy	400,000 BDT
Capacity Strengthening	2,093,450 BDT



■ Digital Media   
 ■ IPC   
 ■ Local Media   
 ■ Mass Media  
■ Print and Outdoor Media   
 ■ Advocacy  
■ Capacity Strengthening



## Outcome

The overall expected outcome of SBCC activities is to increase awareness, knowledge and improve behaviors related to maternal, infant and child nutrition, adolescent nutrition, and promotion of health and hygiene among the people.

The expected outcomes of the wide-ranging programs of National Nutrition Services (NNS), IPHN, DGHS was that people will receive information about and take nutritious food, pregnant and lactating mothers will practice proper breastfeeding and good weaning practices, and community will be aware on food safety.

Community campaigns and SBCC activities for pregnant mothers focused on increasing knowledge on proper nutritional requirements during the first thousand days of life, practice in 1000 days' nutrition, IYCF and food diversity at household level.

The aim of the Nutrition Fair was to increase nutrition and healthy lifestyle related awareness among mothers and caregivers of infant and young child, among health professionals and people from different sectors.

The outcome of the National Level workshops was to increase awareness on nutrition and better multisectoral coordination and actions among stakeholders to ensure healthy nutrition practices.

WASH



### Key Points

- WASH program was mostly addressing students and low income communities of City Corporation areas;
- Only WaterAid Bangladesh implemented WASH program in all 64 districts with schools and at community level;
- Discussion on Menstrual Hygiene Management (MHM) was held as priority;
- WaterAid Bangladesh, WSUP, CWFD reported specific project on WASH;
- There was no significant SBCC activities for general awareness.



### Specific SBCC Activity

#### WaterAid Bangladesh

- Organized 217 Campaigns in educational institutes reaching 54,607 students and teachers for WASH promotion, and organized event on WSP (Water Safety Protocol) in 359 educational institutes through campaign and discussions.
- Organized 270 Campaigns in communities reaching 34,537 community people for WASH promotion.
- Organized 792 Events on WSP (Water Safety Protocol) in the communities for safe water reaching 18,722 community people through campaign and discussions; and held 778 group discussions sessions on WSP reaching 12,079 community people.
- Conducted 1075 hand washing sessions with discussion and demonstration reaching 18,222 community people, organized 252 events of capacity building on WASH for 5,905 duty bearers, and 105 batches of training on WASH issues for 733 caretakers through group discussions.
- Conducted 71 training sessions on hygiene promotion for 1,640 community people and 15 training sessions on WASH for 1,461 Peer educators through group discussions.
- Organized 137 Advocacy sessions for WASH reaching 12,431 community people through group discussions.
- Conducted 4 sessions on Hygiene promotion through group discussions at 69 healthcare facilities, and demonstration events for promotion of handwashing at 17 Health Care Facilities (HCF).

#### Water and Sanitation for the Urban Poor (WSUP)

- Conducted 234 technical sessions and demonstration on handwashing (importance of handwashing, steps and use of handwashing agents) & menstrual hygiene management (knowledge on use of safe and hygienic material sanitary napkin, cloth etc. during menstruation and washing or disposal of materials), reaching 2842 low income community dwellers.
- Held 120 demonstration session on use and operation and management (O&M) of community toilet for operation and cleanliness of toilet, and use of cleaning agents reaching 2406 Low Income Community dwellers.
- Day observation on menstrual hygiene management “It’s time for action” with the display of best practices through SBCC materials, banners, festoon, & audio-visuals coverage reaching 400 National Level stakeholders & practitioners.

- Global Handwashing Day Observation on “clean hands for all” with the mass-demonstration on handwashing display of best practices through SBCC materials, digital billboards, festoon, posters, & audio-visuals coverage reaching 2000 National Level stakeholders & practitioners.

### CWFD (ICTIHDBPH project)

- Conducted Awareness campaign in 4 areas, formation of committee, conducted trainings, stakeholder meeting, IPC, disseminated Information of public toilets by ‘Public Toilet Bangladesh’ app to reduce WASH related risks to health and ensure MHM facilities through improved basic WASH assistance services targeting pedestrians & pavement dwellers with special focus on women & disabled, reached 394085 people.

### PSTC/Nari Maitree

- Conducted 80 IPC sessions on water and sanitation promoting pure drinking water and healthy sanitation and on healthy cooking with 800 mothers of young children.

### UPHCSDP-II, LGD

- Conducted 428 orientation sessions on pure drinking water & healthy sanitation, healthy food habit for 4242 college students.

Handwashing, safe drinking water and personal hygiene promotion also a part of School Health programs INCA project, awareness activities in community clinics of CBHC, DGHS regular health education activities of BHE, DGHS and outreach activities of DINA Foundation.



## Audience and Issue

	Audience	Issue covered
Individual Level	Students	<ul style="list-style-type: none"> <li>• Orientation on Primary Health Care &amp; Hygiene</li> <li>• Pure drinking water and sanitation, food safety</li> </ul>
	Teachers	<ul style="list-style-type: none"> <li>• Safe water and sanitation promotion</li> </ul>
	Mother of children under five	<ul style="list-style-type: none"> <li>• Pure drinking water and healthy sanitation.</li> <li>• Hand washing</li> </ul>
	adolescent boys and girls	<ul style="list-style-type: none"> <li>• Safe water, sanitation and menstrual hygiene promotion</li> </ul>
	Peer educators	<ul style="list-style-type: none"> <li>• Orientation on operation and cleanliness of toilet</li> <li>• Use of cleaning agents</li> </ul>
	Health care managers	<ul style="list-style-type: none"> <li>• Personal hygiene promotion</li> <li>• Hand washing promotion</li> </ul>





	<b>Audience</b>	<b>Issue covered</b>
<b>Community Level</b>	Community people	<ul style="list-style-type: none"> <li>• Promotion of safe water and sanitation</li> <li>• Promotion of personal hygiene and hand washing</li> </ul>
	Low Income Community dwellers	<ul style="list-style-type: none"> <li>• Menstrual Hygiene (knowledge, behavior, use of safe and hygienic material during menstruation and washing or disposal of materials)</li> <li>• Handwashing and use of handwashing agents</li> <li>• Demonstration of operation and cleanliness of toilet</li> <li>• Demonstration of use of cleaning agents</li> </ul>
	Pedestrians & Pavement dwellers with special focus on women & disables.	<ul style="list-style-type: none"> <li>• Information to adolescent on menstrual hygiene management</li> <li>• Information to women, children and men with disability (PWD) on safe water and sanitation</li> </ul>
	Duty bearers and Caretakers	<ul style="list-style-type: none"> <li>• Promotion of safe water and sanitation</li> <li>• Demonstration on management of safe water and sanitation, and hand washing</li> </ul>
<b>Societal Level</b>	National Level stakeholders & practitioners	<ul style="list-style-type: none"> <li>• Advocacy for Menstrual Hygiene Management (MHM)</li> <li>• Advocacy for Global Handwashing</li> </ul>



### Communication Channels

<b>IPC and Counselling</b>	One to One, Group discussion, Orientation, sensitization meeting, Advocacy meeting.
<b>Local Media</b>	Demonstration on Water Safety & Hand Washing, Menstrual Hygiene Management, Advocacy Session, audio-visual show.
<b>Print &amp; Outdoor Media</b>	Banners, Festoon, Poster.
<b>Digital Media (Social and Web based )</b>	Digital billboards, 'Public Toilet Bangladesh' app for information dissemination.



## Geographical Coverage

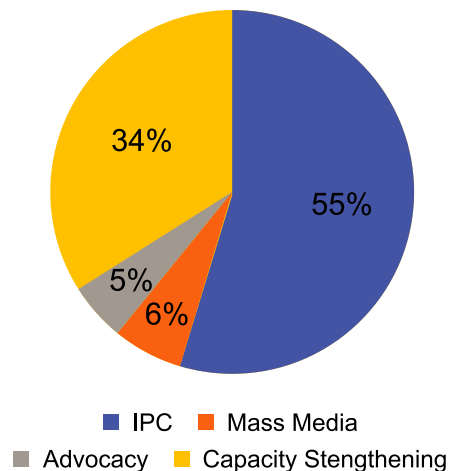
Organization	Geographic location
WaterAid Bangladesh	Nationwide coverage
Water and Sanitation for the Urban Poor (WSUP)	City Corporation : Dhaka North, Dhaka South, Chattogram and Rangpur
CWFD (ICTIHDBPH project)	Dhaka North and South City Corporation
CBHC, DGHS	Nationwide coverage
BHE, DGHS	Nationwide coverage
Nari Maitree	Rajshahi City Corporation
UPHCSDP-II,	10 City Corporations: Dhaka North, Dhaka South, Barisal, Khulna, Rajshahi, Sylhet, Rangpur, Narayanganj, Gazipur, Comilla 4 Municipalities: Sirajganj, Kushtia, Gopalganj, Kishoreganj
DINA Foundation	Cox's Bazar
INCA project, CARITAS	Bhola, Lakshmipur and Noakhali



## Resource Utilization

Resource utilized through different media:

SBCC Activity	Cost
IPC	3,878,073 BDT
Mass Media	450,000 BDT
Advocacy	372,007 BDT
Capacity Strengthening	2,411,769 BDT





## Outcome

The expected outcome of the SBCC activities related to WASH is to improve knowledge and practice of WASH and MHM with special focus to school students and low income urban communities. It is expected that the program would also build capacity of the educational institutes, health facilities and community people under interventions for facilitating better WASH and MHM system.

## Tuberculosis



### Key Points

- Mass media promotion on TB awareness was limited;
- There are outreach programs reported specifically by icddr,b, UPHCSDP-II and Shimantik for people at risk of TB in urban slum;
- There are School and College campaigns to build awareness of teachers and students.



## Specific SBCC Activity

### **MBDC, DGHS (implemented by icddr,b)**

- Conducted 22 Outreach programs (reaching out to the people at risk of TB in slum areas) for building awareness on TB and offering GXP presumptive cases where 166 presumptive were screened; 22,500 leaflets were distributed during campaigns.
- Conducted Miking (105) and distributed leaflets (121,700) on basic signs and symptoms of TB and availability of diagnostic facilities in their vicinity, and awareness raising among mass people.
- Made 71 Mosque Announcements (71) by the Imam of the mosque and distributed 83,400 leaflets after prayer and published 6 Advertisement in Daily News Paper delivered basic message on TB diagnostics and treatment facilities.
- Developed and distributed 4145 Doctors' brochures to private practitioners with Focused messages on TB diagnostics and facilities available.
- General Leaflet Distributing in 49 areas to public attendees; 281,050 leaflets were distributed with Basic sign and symptoms of TB and availability of diagnostic facilities in their vicinity.
- Total 22,500 Leaflets distribution in 7 Newspapers with Basic sign and symptoms of TB and availability of diagnostic facilities in their vicinity.
- Conducted 29 Orientation of Pharmacy (Chemist Shop) owners and chemist/pharmacist (Known as Pharmacy Info Mela) for 646 Pharmacy owners and chemist/pharmacist on Basic TB messages and referral knowledge
- Conducted orientation programs for 705 doctors of different health facilities on TB epidemiology and efficacy of different diagnostic tools, updates in treatment protocol, MDR TB and XDR TB.
- Conducted 9 Campaigns in School and College for teachers and students on Basic sign and symptoms of TB and availability of diagnostic facilities in their vicinity; distributed 12,400 leaflets.

### **MBDC, DGHS (implemented by BRAC)**

- Ad and Scroll message for cable TV network were displayed for dissemination of TB messages in 64 districts to promote the importance of preventing TB, and seeking timely treatment.
- Dissemination of TB messages in 75 billboards throughout 45 districts and 849 sign boards in all districts and urban areas to promote the importance of preventing TB, seeking timely treatment for the mass population.
- Printing of 25,000 leaflet, 90,000 posters and 90,000 stickers with Focused message on TB association with sign/symptom; 205,000 copies have been distributed.
- Conducted 194 orientation sessions of the graduate private practitioners and 186 orientation sessions for the pharmacists, medical representatives, and village doctors on TB information, screening, diagnosis and treatment at district level.
- Conducted 122 orientation sessions of the opinion leader/ religious leader on TB at district level (26 persons in each meeting) on TB information, screening, diagnosis and treatment.



### **UPHCSDP-II, LGD**

- Observance on World TB Day and reaching 230 slum dwellers with free cough test & Mantoux test. Organized outreach activities (Folk song) for their sensitization.
- Orientation sessions with the Cured TB Patient to promote that TB is curable.

### **USAID Ujjiban SBCC project**

- Broadcast 20 Radio program episodes on TB Testing Diagnosis and Treatment reaching about 4 million listeners.
- Broadcast 2 episodes of TV Drama on TB Testing Diagnosis and Treatment.
- Conducted ToT on IPC for the frontline workers and IPC training for 500 people on TB Testing Diagnosis and Treatment.
- Promote IVR on TB Testing Diagnosis and Treatment for 1500 general people, and distributed 600 SD cards with audio-visual materials on TB.

### **WHO**

- Observation of World TB Day, organized awareness building meetings with Health Professional, Civil Society, local Government, Community people in all Upazila, District, Division and National Level.
- Joint monitoring mission of TB interventions at different level facilities through meeting, field visit, interview of the field staff and community volunteers.

### **TB Care & Prevention in Bangladesh Project, CWFD**

- Conducted TB sensitization meetings with the 104 community leaders, religious leaders and teachers.
- Observed World TB day and organized rally.
- Conducted orientation sessions on TB for the garment workers (100).
- Conducted orientation sessions with the Cured TB Patients (52), and networking meetings (2) on TB with the Graduate Private Practitioners (40).

### **AUHC project**

- Counseling in 369 static clinics on TB service and refer for diagnosis and treatment with 5,278 TB suspected clients of all age and sex.

### **Shimantik**

- Observance of World TB Day, conducted awareness sessions and performed free cough test & Mantoux test for the dwellers of 25 slums.



## **Audience and Issue**

The audiences for TB SBCC interventions included different groups of community and general people throughout the country.

Pharmacy (Chemist Shop) owners, chemist/pharmacist, graduate private practitioners, medical representatives, village doctors, and graduate doctors of different health facilities received more in-depth information about TB and referral of cases.

Different professional groups participated in observance of World TB Day for awareness Building to end TB in Bangladesh.

	<b>Audience</b>	<b>Issue covered</b>
Individual Level	Suspected TB Case	<ul style="list-style-type: none"> <li>• Counseling on available TB service</li> <li>• Counselling to refer for diagnosis and treatment.</li> </ul>
	Cured Patients	<ul style="list-style-type: none"> <li>• Advocacy to disseminate information that TB is curable disease.</li> </ul>
	Teachers	<ul style="list-style-type: none"> <li>• Awareness on TB sign and symptoms</li> <li>• Information on availability of diagnostic facilities at their vicinity.</li> </ul>
	Students	<ul style="list-style-type: none"> <li>• Awareness on TB symptoms</li> <li>• Information on availability of diagnostic facilities at their vicinity.</li> </ul>
	Garments Workerts	<ul style="list-style-type: none"> <li>• Awareness on TB and importance of TB screening.</li> </ul>
Community Level	Community people	<ul style="list-style-type: none"> <li>• Awareness building on TB to end TB in Bangladesh</li> <li>• Information on Sputum collection for TB screening for suspect TB cases.</li> </ul>
	Opinion leader & Religious leader	<ul style="list-style-type: none"> <li>• Awareness on TB sign and symptoms</li> <li>• Information on TB screening, diagnosis</li> <li>• Information on availability of TB treatment</li> <li>• Advocacy to disseminate basic information on TB and importance of screening for diagnosis by the Imam of the mosque.</li> </ul>
	Slum dwellers	<ul style="list-style-type: none"> <li>• Awareness on importance of TB screening</li> <li>• Inform them about availability of free cough test and Mountox test.</li> </ul>
	Local people of slum or Hard to Reach areas have special TB intervention	<ul style="list-style-type: none"> <li>• Building awareness on TB sign and symptom</li> <li>• Importance of TB Screening for suspect TB cases</li> <li>• Information about GeneXpert test (a new test for tuberculosis) and availability of diagnostic facilities in their vicinity for TB screening.</li> </ul>
National Level	Mass people	<ul style="list-style-type: none"> <li>• Awareness on sign and symptoms of TB</li> <li>• Information on TB diagnostics and treatment facilities, and availability of these facilities in their vicinity;</li> <li>• Promote the importance of preventing TB, seeking timely treatment</li> <li>• To promote treatment available at jails</li> </ul>



	Audience	Issue covered
Institutional Level	Health professionals (Doctor, private practitioners, graduate private practitioners)	<ul style="list-style-type: none"> <li>• Promote focused messages on TB screening, diagnostics and treatment, and available facilities</li> <li>• Facilitate for awareness building on TB</li> <li>• Awareness on TB epidemiology in the world and in Bangladesh</li> <li>• Updates in treatment protocol, MDR TB and XDR TB</li> <li>• Basic of TB information, TB screening, diagnosis and treatment of TB</li> <li>• Facilitate monitoring of TB performance</li> </ul>
	Pharmacy owners and chemist/ Pharmacists, medical representatives, village doctors	<ul style="list-style-type: none"> <li>• Information on sign and symptoms of TB, TB screening and diagnosis</li> <li>• Information on TB treatment</li> <li>• Promotion of TB referral knowledge.</li> </ul>
	Field worker (HA, FWA, CHCP)	<ul style="list-style-type: none"> <li>• Awareness on sign and symptoms of TB and availability of diagnostic facilities in their vicinity; awareness about basic TB messages.</li> </ul>
Societal Level	Civil society and Local Government	<ul style="list-style-type: none"> <li>• Awareness building on TB to end TB in Bangladesh</li> </ul>
	Partner NGO staff/ Local NGOs	<ul style="list-style-type: none"> <li>• Awareness on sign and symptoms of TB</li> <li>• Monitoring of TB performance at their community</li> </ul>
	High-level stakeholders	<ul style="list-style-type: none"> <li>• Monitoring of TB performance an TB performance review.</li> </ul>



### Communication Channels

Community media included orientation programs and group discussions, Info Mela, outreach programs at the slums, campaign in School and College, outdoor display including billboard, signboards, and miking, mosque announcements.

Mass media included Radio drama reaching about 4 million people, and there were Ads and scrolling messages on local cable TV network.

Nationwide programs included Observance of World TB Day, awareness meetings at Upazila, District, Division and National Level, and newspaper ads.

<b>IPC and Counselling</b>	Orientation, group session, Awareness meeting, Counseling, Advocacy meeting.
<b>Local Media</b>	Message in Cable TV, Scroll message in Cable TV, Miking, Folk song, Magazine program in Community Radio, Rally, Mobile Film Show (A-V Van, water launch).
<b>Mass Media</b>	Newspaper Advertisement, Billboard, Signboard, Radio Drama.
<b>Print Media</b>	Leaflet, Brochure, Poster, Sticker.
<b>Digital Media (Social and Web based)</b>	Facebook post, SD card with TB materials, Interactive Voice Record, eLearning, eToolkit.



### Geographical Coverage

The SBCC activities on TB of MBDC, DGHS were conducted throughout the country. Different development partners and NGOs were working through MBDC, DGHS on TB interventions.

The geographic coverage of WHO for TB SBCC was all Upazilas, Districts, Divisions and at National Level.

<b>Organization</b>	<b>Geographic Location</b>
BRAC with MBDC, DGHS	Nationwide coverage
icddr,b with MBDC, DGHS	Dhaka, Chattogram and Sylhet City Corporation
UPHCSDP-II	City Corporations (10): Dhaka North, Dhaka South, <b>Barishal, Khulna, Rajshahi, Sylhet, Rangpur</b> , Narayanganj, Gazipur, Cumilla Municipality: Sirajganj, Kushtia, Gopalganj, Kishoreganj (14% of total urban population)



Organization	Geographic Location
USAID Ujjiban SBCC project	<b>Chattogram</b> , Noakhali, Feni, Laxmipur, Chandpur, B. Baria, Cumilla, Cox's Bazar, Khagrachari, Bandarban (10 districts), <b>Sylhet</b> , Moulvibazar, Habiganj, Sunamganj (4 districts) 63 District (except Patuakhali)
AUHC project	63 District (except Patuakhali)
Shimantik	Dhaka South City Corporation
TB care & prevention project, CWFD	Dhaka North and South City Corporation
HALOW project, CARE-BD	Gazipur, Savar, Valuka (selected area)
WHO	National Level



### Resource Utilization

Information on resource utilization for SBCC activities on TB was incomplete as expenses was not mentioned in many cases. Based on the information received from UPHCSDP -II, USAID Ujjiban project, Shimantik, CWFD and CARE expenses included 278,652 BDT for IPC, 400,250 BDT for Digital Media, 30,042 BDT for Advocacy (World TB Day), 51,282 BDT for Orientation and 1000 BDT for Local Media activities.



### Outcome

The overall expected outcome of SBCC activities related to TB was to raise awareness about TB among the general population and motivate them for diagnosis and treatment, and to increase symptomatic referrals for TB-free Bangladesh.

The outcome of the outreach activities in slums was that a group of people at risk were screened, informed on TB disease and diagnostic facilities in their vicinity.

The aim of Paper Ads, Cable TV network Ads and scrolling message was that people will get the basic TB message about two week cough, that diagnosis and treatment is available and free of cost, get information of places where they can get TB treatment, and that TB is preventable.

Pharmacy owners and chemist/pharmacist have been sensitized about current TB situation in the country, and have improved knowledge on TB symptoms, referral and management.

Physicians have gained knowledge through orientations on current TB epidemiology, and latest more effective TB diagnostic tools, and about ongoing TB control program led by NTP, current treatment of MDR and XDR TB patients.

## Occupational & Environmental Health



Only few organizations reported SBCC activities on Occupational and Environmental Health.

**CBHC, DGHS** implemented following activities nationwide;

- Developed Medical waste management Flipchart for all 482 upazilla health complex and distributed to 10410 Hospital staff to be used during Health Education sessions on How to manage medical waste with Patients and attendants who visited UHC.
- Developed and distributed 20,000 Medical waste management Stickers to all 482 upazilla health complex for Health Education sessions on How to manage medical waste with Patients and attendants.
- Developed and distributed 25,000 Medical waste management Leaflets to all 482 upazilla health complex for Health Education sessions on How to manage medical waste with Patients and attendants.

**Shimantik** implemented activities with the slum dwellers of Dhaka South City Corporation. Conducted awareness meetings on Environmental & Occupational Health Hazard and arranged free health camp for 150 Urban poor (particularly for poor and women and children) and slum dwellers.

**HALOW project, CARE-BD** organized demonstration sessions, Video & Audio clips shows on health hazards management for the selected Garment Factory Workers of Gazipur, Savar and Valuka.



**SHOW Project, Plan International** organized demonstration sessions of properly dispose of biological and medical waste of 71 UH & FWCs union level facilities of 8 selected upazilas of Nilphamari, Barguna, Khagrachari districts.

The program mostly expenses resources on developing SBCC materials on medical waste management (699,800 BDT) and conducting orientation and awareness sessions on waste management and occupational health hazards (4,286,000 BDT).



Few reports were received on SBCC activities focusing on non-communicable disease control. **Bureau of Health Education, DGHS** addressed Non Communicable Disease Control (NCDC) related issues widely through following activities:

- Advertisement in daily Newspaper and broadcasted TV scrolling message in different TV channels for mass people awareness on healthy lifestyle practice for prevention of diabetes, heart diseases and hypertension, Road traffic injury and drowning. During reporting period 150 newspaper advertisement were published in national dailies.
- Developed TV documentary (2) on accessing health services for maintaining healthy lifestyle .
- Conducted advocacy meeting, seminars and other awareness raising activities on Non Communicable diseases including Road Accident and Snake bite.
- Outdoor activities like Bus Branding (20) in Dhaka and Chattogram cities, displayed posters (10,000), distributed leaflets (5,000) and developed TV spots (6) on healthy lifestyle included messages for preventing diabetes, heart diseases and hypertension.
- Installed digital Mega Billboard in Dhaka city for promoting Lifestyle related message for prevention of NCD including diabetes, heart diseases and hypertension.

The **HALOW project of CARE** working in selected area of Gazipur, Savar, Valuka with the workers of 17 Garment Industries and at the community level conducted awareness activities on Breast cancer and Cervical cancer and availability of screening facilities through discussion session, Leaflet, banner and miking .

**BCCP** conducted research programs to generate local evidence on tobacco control and organized dissemination sessions at national level to feed the program with local evidence. Researchers of different universities and organizations, Post graduate students and the policy makers were addressed through this program.

**CBHC, DGHS** installed billboard (36) on available health service facilities including NCD at urban areas, and conducted IPC and health education sessions in Rangamati, Khagrachori and Bandarban to increase awareness regarding availability of modern health services among tribal people.

BHE implemented the SBCC activities nationwide mostly focusing to mass people. Rest of the interventions were addressing selective group of audiences like garment workers, tribal people, researchers, policy makers etc.

Resource utilized for communication activities:

<b>Mass Media</b>	TV Documentary, Newspaper advertisement	31,000,000 BDT
<b>Outdoor</b>	Billboard	20,500,000 BDT
<b>Outreach</b>	Bus branding, video shows, poster and leaflet distribution	53,455,500 BDT
<b>Research</b>	Tobacco Control research, Dissemination Workshop	14,336,470 BDT

## School HPN Education Program



## Key Points

- Health education program in schools and other educational institutes (Madrassa and College) was reported by 16 organizations/projects.
- IEM unit and FP-FSD unit of DGFP and MNC&AH unit of DGHS implemented school health education program nationwide.
- Most of the programs only addressed the school, college and madrassa students as their primary audience; 4 organizations (BHE, USAID Ujjiban, Marie Stopes, WaterAid Bangladesh) mentioned about teachers as their audiences too; and Marie Stopes Bangladesh also mentioned about parent /guardians of the students as their audiences.
- School Health program commonly organized awareness and demonstration sessions on primary health care (HPN) issues included personal hygiene, hand washing, sanitation, healthy food habit, prevention of early marriage etc.
- High School Girls were specifically addressed by WaterAid Bangladesh for creating awareness on Menstrual Hygiene Management (MHM).
- No mention of linking school health education program using digital tools like social media or mobile messaging.

## Audience

School students from class five to class ten were the primary audience for the School Health programs, besides some programs also addressed the madrasa students and college students. They received messages on SRHR, Adolescent Nutrition, Personal Hygiene, Primary Health Care, consequence of drug abuse, prevention of tobacco use, consequence of early pregnancy, gender issues, Drowning, Road traffic injury prevention through Health education sessions, and different awareness events campaigns.

Teachers of School and Madrasa and parents of the students were also addressed by 1-2 programs.

Revitalization of school health program trained SACMO, Managers and service providers on School HPN Curriculum to train the School students.

## Activities and issue covered

Conducted Seminar /Workshop with 2100 High School teachers, 2550 Primary School teachers in 155 batches by BHE, DGHS.

Revitalization of school health program through Training of SACMO, Managers and service providers by IEM Unit, DGFP ; and health education sessions conducted by the SACMO with 120000 students in 60-70 schools by FP-FSD, DGFP.

Broadcast 100 Documentaries (100) & conducted 10 Outdoor sessions (10) on child marriage, dowry, eve teasing, gender equity reaching 50,000 school, college students by Bangladesh Betar.

School Health Campaign on SRHR, Adolescent Nutrition, Personal Hygiene, Adolescent pregnancy in 14 schools targeting School & Madrasa Students of Class IX-X and Teachers and reaching 783 students through Video Show, Quiz, IPC by USAID Ujjiban SBCC project.

Comprehensive Sexual and Reproductive Health and Rights (SRHR) Education through 160 School Health Sessions with 35,000 In-School Adolescent 10-19 years by PSTC.

Conducted group discussions (40) targeting adolescents and children on TT vaccination and adolescent health and personal hygiene with 480 adolescents by Nari Maitree.

Arranged school health education session on consequence of child marriage; benefit of late pregnancy; healthy timing and spacing from pregnancy by 369 static clinics with the students (boys and girls) by AUHC.

Conducted 236 orientation sessions on Primary Health & Hygiene for 6,650 School Students by UPHCSDP-II, LGD.

Organized Nutrition Olympiad (11 events) during National Nutrition Week with 1,333 adolescent students; and awareness sessions on personal hygiene & demonstrations on hand wash (11 events) during Global Handwashing Day with the students by INCA project, Caritas Bangladesh.

Conducted 350 Group sessions about ARH, Sexual Health, Adolescent Development, Adolescent Nutrition with 25,000 students of school, college & madrasahs by DINA Foundation at Cox's Bazar. Arranged Video & Meena cartoon shows, Drama shows on ARH, Sexual Health, Adolescent Development, Adolescent Nutrition with the students (25,000-30,000) of school, college & madrasahs by DINA Foundation at Cox's Bazar.

Conducted 30 Parents' meetings on SRHR with 2,823 Guardians and parents; teachers training on SRHR with 120 School & Madrasa Teachers; conducted 50 Students' meetings on SRHR, for 3,000 school students; and arranged 285 sessions on demonstration of Sanitary Napkin use to 142,500 girls on Menstrual Hygiene by Marie Stopes Bangladesh.

Held total 2,200 School Health Sessions on ASRH, personal hygiene, nutrition, negative consequences of child marriage and teenage pregnancy, substance abuse reaching 97,098 Adolescent girls and boys (class VII-XI) by Social Marketing Company.

Conducted 133 sessions on Menstrual Hygiene Management (MHM) with 4,953 High school girls through group discussions at school; work in 287 educational institutes and Organized 7 Campaign events on Menstrual Hygiene Management by WaterAid Bangladesh.

Organized Campaign and 468 demonstration sessions on Hygiene Promotion reaching 6,231 persons in educational institutes and conducted 368 awareness and demonstration sessions on Handwashing for 20,975 persons in educational institutes by WaterAid Bangladesh.

Conducted Group meetings (100) with Adolescent girls on menstrual hygiene by BAPSA and awareness meetings on personal and menstrual hygiene with the girl students and their guardians by Shimantik.

### **Geographical Coverage**

The seminar/workshops by BHE, DGHS were nationwide at National, Division, District, Upazila, Union, and Village levels. The Revitalization of school health program by IEM Unit, DGFP was also nationwide. The Family Planning-Field Services Delivery, DGFP's School Health Program conducted by SACMO was also countrywide. The broadcasts of Documentary and Outdoor meeting by Bangladesh Betar also had national coverage.

The programs of few other organizations like Marie Stopes Bangladesh and WaterAid Bangladesh cover all 64 districts while those by AUHC (Advancing Universal Health Coverage project) are in 63 districts, and by Social Marketing Company (SMC) are in 77 upazilas of 20 districts, UPHCSDP-II, LGD works in 25 PA (10 CCs & 4 Municipalities) and USAID Ujjiban SBCC project works in 9 districts in Chattogram division and all 4 districts of Sylhet Division Rest of the projects implement activities at their intervention areas.

## Resource Utilization

The reports received show that School HPN Program spent 20,112,865 BDT for education sessions, 15,500,000 BDT for IPC, 254,353 BDT for local media events, 1,500,000 BDT for mass media events and 82,550 BDT for print materials.

## Outcome

The overall expected outcome of SBCC activities related to School HPN program and campaign is to increase awareness and knowledge about health, nutrition and social issues, and improve the health of students, adolescents and youth.

The Health education sessions, group meetings have resulted in adoption of healthy behavior at schools, families and communities; improved knowledge and some positive changes in practices of the target communities and develop personal health & hygiene with healthy lifestyle.



Few of the projects reported specific SBCC activities on HPN issues in urban slums. The HPN awareness program was mostly implemented in the slums of Dhaka North and Dhaka South City Corporations. Personal health & hygiene are commonly addressed issue.

IEM, DGFP and FP-FSD, DGFP worked with Adolescents in Slums of Dhaka, Sylhet and Chattogram City Corporations disseminating messages on prevention of early marriage, adolescent care, and nutrition.

UPHCSDP-II worked in City Corporations of: Dhaka North, Dhaka South, Barisal, Khulna, Rajshahi, Sylhet, Rangpur, Narayanganj, Gazipur, Comilla with slum dwellers and pregnant mothers to raise awareness on primary health care services and personal health & hygiene.

Water and Sanitation for the Urban Poor (WSUP) worked with Adolescent girls of low Income community in Dhaka North, Dhaka South, Chattogram and Rangpur City Corporation with messages on menstrual hygiene, hand washing, and operation and cleaning of community toilet.

CWFD worked with Pavement dwellers in Dhaka North and Dhaka South City Corporations on personal health & hygiene, hand washing, and operation and cleaning of community toilet.

Shimantik worked with Slum dwellers and Adolescent girls in Dhaka South City Corporation with information about personal health & hygiene, menstrual hygiene, and raising awareness on TB and TB screening facilities, and awareness on primary health care services.

ICDDR,B worked with slum dwellers in Dhaka City Corporation to raise awareness on TB. CBHC also reported promotional activities ( billboard and leaflets ) to increase awareness regarding availability of modern health services for Urban Population but not specifically focused on urban slum.




There were many programs for Observation of National and International Day and Week. World Population Day and Safe Motherhood Day was observed by maximum (9) organizations. There were less programs to observe World TB Day and World Health Day.

**World Population Day** was observed by a large number of organizations viz., IEM, MaMoni, UPHCSDP-II, UNFPA, PSTC, Shimantik, BAPSA, Shukhi Jibon, CARE Bangladesh. The events included Campaigns through national events, Road shows, Community and mass media events, discussions with stakeholders, Press release, Rallies, awareness-based messages to the New Couples and Postnatal Mothers, Orientation on FP with garment factory workers. There was distribution of T- Shirts, Cap, banner, festoon, Leaflet, poster during these events. The day observation activities spent 16,121,962 BDT.

**Safe Motherhood Day** was observed by MNC&AH, WHO, BAPSA, MaMoni, PSTC, UPHCSDP-II, Shukhi Jibon, AUHC, CARE Bangladesh. This included organizing Rally; Awareness building meetings with Health Professional, Civil Society, Local Government, and Community people; Developing and dissemination of Theme song and posters, brochures, banners, T- Shirt, cap, festoon, leaflets; IPC and group meetings; Providing newspaper supplement; Organizing Radio talk show; Group meeting and Quiz with garment factory workers. The day observation activities spent 1,863,455 BDT.

**World Health Day 2019** was observed by BHE through Seminar, Rally, Health Exhibition, Essay competition, and distribution of IEC materials. INCA celebrated the Day through community level events and BAPSA celebrated the Day through Rally and awareness session at the slum. The day observation activities spent 2,219,101 BDT.





**Global Handwashing Day** was observed by WSUP, FHI 360, INCA through Demonstration on handwashing, digital billboards, festoon, posters, audio-visual materials; Discussion session on Importance of handwashing with pregnant and lactating mothers and their families, and stakeholders; and WASH and personal hygiene session with community people and school students. The day observation activities spent 482,513 BDT.

**World Breast Feeding week** was observed by BBF, UPHCSDP-II, CARE Bangladesh, NNS-IPHN, INCA, FHI 360, WHO. Events included Orientation and discussion programs; Community events; Audio and Video shows; Workshop; Rally; Discussion session on Importance of breastfeeding with pregnant and lactating mothers and their families, and stakeholders; Distribution of Brochure, Banner, Poster and Leaflet, T- Shirt, Cap, festoon; Advocacy meeting for the protection, promotion and support of breastfeeding, and on harmful effects of BMS. The activities for celebrating the week costed 2,703,554 BDT.

**National Nutrition Week** was observed by NNS-IPHN, UPHCSDP-II, INCA, FHI 360, WHO, and Sisimpur. Events included were Country wide Workshop, Rally, Nutrition stall, Audio & video media, IPC, Discussion on IYCF issues with Community people and school students, Discussion session on Importance of nutrition with pregnant and lactating mothers and their families and stakeholders, Advocacy on multisectoral approaches to improve nutrition and Healthy aging, and Reinforce messages on Nutrition in national TV. NNS-IPHN and Sisimpur not reported the resource utilized in celebrating the week; the week observance activities of the rest spent 804,711 BDT.

**World TB Day** was observance was reported by UPHCSDP-II, WHO, Shimantik with Rallies and awareness building meetings.

**World AIDS Day** was observed by PSTC, BAPSA through Awareness event with at-risk youth, and Rallies. The day observation activities spent 4,54,500 BDT.

**World Prematurity Day** was observed only by MaMoni through Discussion session with health service providers that costed 50,000 BDT.

**International Youth Day** was observed only by PSTC through discussion sessions on skill based education with the youth. The day observation activities spent 3,70,000 BDT.

**FP –MCH Campaign and Service week** was observed by IEM Unit of DGFP. The theme of this service week was 'Increase facility delivery: ensure postpartum family planning.' There were several activities round the week from national to upazila level. The event included advocacy meeting, Press Briefing, Round table discussion, TV Talk show, TVC Telecasting, RDC Broadcasting, TV scroll messaging, Newspaper Advertisement, develop and distribution of IEC materials. The activities for celebrating the week spent 4,098,000 BDT.

**National Health Service week** was observed by BHE through development and distribution of Posters. The activities for celebrating the week costed 4,900,000 BDT.

## ICT and Innovation



A range of ICT based tools and resources are currently available for SBCC that might help to achieve project objectives and strengthen project or program. Innovation taps the power of ICT in promoting accessibility and sustainable health information to provide to the underserved and the unreached people.

Considering the power of ICT, innovation and social media different units under Directorate General on Health Services (DGHS) and Directorate General of Family Planning (DGFP), national NGOs and local NGOs are working in the HPN fields becomes the immediate beneficiary of this digitization process as they are successfully using this technology for their critical target groups in particular and community people as a whole.

The **Ujjiban SBCC Project** is working with the Ministry of Health and Family Welfare (MoHFW) and has been successfully harnessing ICT for knowledge management and client counseling for the program managers, planners and field workers of the HPN sector. In this context; the eToolkit, eLearning course, digital achieves for SBCC materials and software application on the Online Material Submission and Approval (OSMA) has been profusely contributing to health promotion, awareness building, community participation, surveillance, and research to foster behavioral changes among people with the aim to increase health seeking behavior of individuals and families.

As part of **GoB effort**, while analyzing the use of the ICT and social media, it reveals that IEM unit has developed and is maintaining digital achieve for Family Planning related SBCC materials along with their departmental website. Bangladesh Betar is using Facebook and YouTube and they are regularly posting HPN related messages and upload videos. The Bureau of Health Education and National Nutrition Service has also started use of ICT through digital platform and websites to promote public information on health and nutrition issues.

However, the national level NGOs are profusely using ICT to reach critical target audience group with HPN message and information with different and audience appropriate approaches. NGO specific approach includes:



**Breast Feeding Foundation:** They are making promotions through interactive posts in Facebook and upload videos in the YouTube.

**BRAC:** Is creatively integrating mobile phone-based technology; an adaptable mobile solution provides tools that target distinct user groups and are implemented at the community level to support frontline health workers, provide community members with access to health information and services and allows SBCC program managers to rapidly collect data to facilitate informed decision-making for Family Planning, pregnant mother and child information.

**Dina Foundation:** Facebook-group interaction, Email-Web-phone based discussion-interaction for the adolescents and youths includes students of high-school, colleges and madrasahs.

**Caritas:** Mobile app and dashboard for real time monitoring and video show for Community Nutrition Promoter, pregnant and lactating mothers.

**USAID'S MaMoni MNCSP:** Facebook post on importance of Kangaroo Mother Care Method and importance of KMC in saving lives targets 15-50 years men and women using Facebook. MNCSP also had Facebook post on importance of Universal Health coverage and bringing everyone, 15-50 years men and women using Facebook, under the health coverage. In addition, they had a week-long Facebook campaign on Safe Motherhood Day 2019 and Facebook post on critical newborn stage for special care to prevent deaths.


**Marie Stopes Bangladesh:** Promoted through Facebook page and had a post boost on Family Planning for 15-35 years old male/female.

**PSTC:** Created the Ucon Interactive Website for Adolescent and Youth Adolescent Sexual and Reproductive Health Issues for 10-24 years adolescent and Youth.

**Plan International Bangladesh –SHOW:** An ICT based innovation as online Data entry using through CommCare online software including GPS of pregnant and PNC mothers, adolescents, mothers and child for TT, EPI and other services.

Community Engagement





Community Engagement reached out to diverse audiences. Some of the SBCC community engagement activities are nationwide like by CBHC, Bangladesh Betar, Marie Stopes Bangladesh, Sesame Workshop Bangladesh. Others are in many districts like AUHC (Advancing Universal Health Coverage project) in 63 districts, Bangladesh NGOs Network for Radio & Communication (BNNRC) in Dhaka, Chattogram, Sylhet, Khulna, Barishal, Rajshahi & Rangpur divisions and by SMC in 20 districts. Rest are by the organizations conducted in their respective working areas.

**Community people** including women, men, children, adolescents' boys and girls, pregnant mothers, newlyweds, students, youth, community women of reproductive age of low to middle income family were given information about Health, Nutrition and FP as well as social issues like gender and VAW, and about the services offered. Walkaround appearances (by life size Sisimpur characters) attracted children and reinforced Sisimpur messages through Child-facing events.

**Influential audiences** were targeted for advocacy and support on seeking information and services regarding Health, Nutrition, FP and social issues. These included Opinion leaders (local government representatives, community and religious leaders, teachers, social elite), Fathers' group, Change Maker groups (Imam, Teacher, UP member, elite person, Freedom fighter, Adolescent etc.), HH Decision Maker group members (Housewife, farmer, tailors, imam, UP member, teacher, small businessman etc.).

**Community Leaders**, members of Community Group (CG) and Community Support Groups (CSG), Community Nutrition Support Group (CNSG), Service providers, pharmacists, and journalists were reached for promoting services and ensuring user satisfaction. The Community Radio (BNNRC) broadcasted programs for local community people for enhancing knowledge & skills on SRHR, LAPM, MR & PAC and changing attitude & behavior, and ordinary people could get 24/7 normal delivery at facilities, 4 ANC, 4PNC and general treatment. SBCC activities also increased service utilization by urban poor (particularly for poor and women and children) and slum dwellers and to meet their priority needs. DINA Foundation conducted Social dialogue for empowering people, influencing power and reducing social stigma and taboo for use of services. IPT shows, volunteer fairs and microphone messaging conducted for improving knowledge and some positive changes in practices of the target communities in Cox' Bazar.

Health services and information were provided to Refugees and Flood affected people. Information on health, nutrition, hygiene, prevention of early marriage, gender equity was disseminated through courtyard meetings, Students' club, orientations, distribution of printed materials resulting in positive behaviors, and empowerment of women and girls. Meetings of Changemaker groups, HH Decision maker groups, Husbands' groups resulted in women and adolescent empowerment, male engagement, reduced VAW, Early marriage protection. Media channels included

- IPC: One to one and Group discussion, courtyard meeting, Walkaround appearances (by life size Sisimpur characters), Student Clubs;
- Community media: Theater for Development (TfD) shows, Community Radio Stations, Community Interactive meetings, Advocacy meetings, Mela-volunteer fairs, IPT shows; meetings of Support group Community Support group, Community Nutrition Support Group (CNSG);
- Mass media: Live Radio Magazine and Radio Talks, Mobile, Facebook, Text Message, PSAs on Radio and mobile, Social dialogues/panel discussions with different levels of stakeholders, Observation of world health day, population day, Independence day;
- Print materials: Features in Newspapers, Distribution of folders, leaflets, booklets, flashcards, Desk Calendar, Posters, Handwritten posters and FP Primer.



The overall expected outcome of SBCC activities related to Community Engagement is to promote health, FP and nutrition services in the community, improve the quality of services, make these services accessible to all, empower them and support the community to use these services.

## Capacity Development



SBCC capacity development activities was reported by 14 organizations. SBCC capacity development activities included training on Basic SBCC, IPC and Counselling on HPN issues, and skill based training on use of SBCC tools for the Units and district and upazila level Program Managers of DGHS and DGFP; training on use of SBCC tools and community mobilizations for the frontline workers of Health and FP; advocacy and awareness building trainings for the national and local level stakeholders; and community engagement orientation sessions with the beneficiaries.

### **BHE, DGHS**

- Training on Prevention of communicable and non-communicable disease at District level for 40 batches of Health personnel on Physical exercise, tobacco, harmful effect of dietary salt, drowning, Importance of swimming, First aid, etc.
- Effective health communication/ Occupational Health Training 5 days long at NIPSOM for Sr/Jr Health Education Officer on Culture Influence, Barrier, Strategy, Rule of Media, Risk Communication, Nutrition.
- Basic Training on L&HEP 15 days long for Hospital Health Educator on Health Education, Communication, IPC, Media, Message Development etc.

### **IEM Unit, DGFP**

- Providing 44 batches of training with 40 participants each, on eToolkit and eLearning course to the frontline service providers (FWAs, FWVs, Projectionists) to equip them with ICT knowledge and skills.
- Organized Strategic SBCC training for 45 DGFP, Betar and BTV Pop Cell officials for knowledge development on Strategic SBCC.
- Skill development training on IPC (70 batches of 25 participants each) for service providers (FWA, FPI, FWV, SACMO etc.).

- Training of Audio-Visual Zone Manager and technical Staffs/Projectionists (4 batches of 30 participants each) for Effective AV show.
- Workshop with Print & Electronic Media Journalist (13 batches of 20 participants each) on FP-MNCH.
- Capacity Building of IEM and DGFP officials on improvement on communications skill on SBCC within country (20 batches of 30 participants each).

## **BBF**

- Conducted 272 Training on Baby Friendly Hospital Initiative for 3630 Doctors, nurses and midwives on How to make hospitals baby friendly and practice steps of baby friendly hospital.
- Conducted 1545 Orientation programs on maternal nutrition for 30,900 pregnant mother, lactating mother and their caregivers on Nutritional requirement during pregnancy and lactation, food frequency and diversity during these period, antenatal and postnatal care etc.
- Conducted 1200 Courtyard meetings on complementary feeding including hand washing practice for 30,000 mothers of 6-23 months aged children and caregivers focusing on Importance of complementary feeding, feeding method and quantity etc.
- Orientation facilitated by Mother Support Group members on maternal, child and adolescent nutrition for 8120 CHCP of community clinic, Lactating mother, mother of under 5 child, female member, grandmother and adolescents.

## **USAID Ujjiban SBCC project**

- SBCC Capacity Assessment & CS plan by IEM, BHE & IPHN (2 day workshop) for 22 Unit level officials to Identify SBCC capacity gaps.
- Field Workers eToolkit & eLearning training for 65 batches of 1790 FWs (CHCP, HA, FWA) on Integrated messaging and knowledge management.
- Program Manager's eLearning course training (7 batches of 164 PMs from Health and FP and 73 University students on SBCC Monitoring and Evaluation.
- Develop new eLearning course on AH and Nutrition for FWs (CHCP, HA, FWA) on AH and Nutrition: 1000 days care.
- Workshop on Entertainment Education approach with 53 BCCWG member through interactive discussion for use of Entertainment Education approach for HPN program design.
- Conducted 2 Training programs on Basic SBCC (2 days trainings) through Interactive discussion, presentation, group discussion for 89 Mid-level Officials on SBCC approaches and How to plan audience centered program.
- Conducted 7 ToTs (2days duration) on eToolkit and eLearning Course on HPN issues and Use guidelines through Interactive discussion, Hands on training for 112 Mid-level Officials.
- Development of Pre-marital guidebook and Handbook through 2 ToTs with 75 FP PMs through Interactive discussion, Hands on training on HPN issues and Use guidelines targeting Unmarried youth, Boys and girls.
- Conducted 3 ToT on IPC with 67 local NGOs on ANC, PNC, Nutrition, IYCF, Birth spacing, Modern FP Methods, LAPM & PFP and TB.
- Conducted 2 UP EHFP SC Orientations with 50 MWRA, Pregnant Women on ANC, PNC, Nutrition, IYCF, Birth spacing, Modern FP Methods, LAPM & PFP and TB; and conducted 30 batches of CG orientation with 873 CG Members on ANC, PNC, Nutrition, IYCF, Birth spacing, Modern FP Methods, LAPM & PFP and TB.

## WHO

- Training on Baby Friendly Hospital Initiative (BFHI) in quality assurance mechanism at Divisional level in 2 batches of total 50 Medical Professionals: doctors and nurses on 10 steps to successful breastfeeding and its implementation at facility.

## UPHCSDP-II, LGD

- Conducted 73 Orientations for 1160 Pharmacists on Promotion of PHCC services to the community people.
- Conducted 7 Computer Training for 600 Adolescent Girls/Boys for Promotion of PHCC services to the community people.

## Marie Stopes Bangladesh

- Conducted 3 Workshops for 150 Clinic managers and field staff for Communication skill development on SRHR.

## BRAC

- BRAC Shasthay Kormi and Shasthay Shebika training for 44,591 Community Health Workers for Updating about different health issues.

## Sesame Workshop Bangladesh

- Conducted content development workshop on ECD focused Content development for children aged 3-8 years; and developed one curriculum on ECD .

## Plan International Bangladesh – Born on Time project

- Conducted IPCC and use of SBCC materials 12 trainings for 351 project staff on Communication, Interpersonal Communication, Counselling, SBCC use and Facilitation.
- Training for Theater for 25 development (TfD) group members for TfD script (Child marriage and Domestic violence).

## Plan International Bangladesh

- ToT of 55 Project Community Health Workers and managers through Participatory training on Capacity Development/ Building for SBCC on MNCH/SRHR/GE; and training/Orientation of 856 Project Community Health Workers on SBCC for capacity building on 26 video clips.

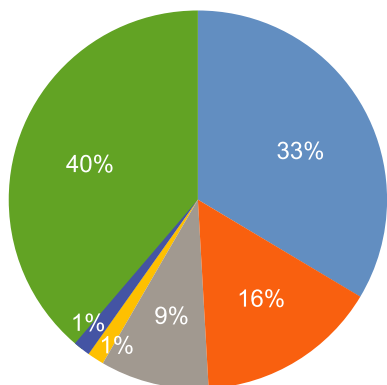
## CWFD (MISHD project)

- Conducted 12 meeting with 640 Gold star members (community people) in 10 upazilas on Capacity building on skills of health products sales through Audio tools, Flip charts.

## Communication Channels

Communication channels used for the training included informative and practical training through verbal and audiovisual communication, Interactive discussion, Hands on training on HPN issues and Use guidelines, group discussions, group work and group planning. Training for the e-toolkit included orientation on use of online platform.

## Resource Utilization



- Training (Service Provider & Manager)
- Orientation (beneficiaries)
- Court yard session
- Skill based training (provider & manager)
- Stakeholders WS
- Training: Frontline workers

Activity	Resource
Training & Orientation for Service Provider & Manager	81,909,284 BDT
Skill based training for provider & manager	3,279,878 BDT
Training for Frontline workers	96,709,721 BDT
Stakeholder WS on SBCC	1,437,967 BDT
Orientation for the beneficiaries	38,170,311 BDT
Demonstration through court yard sessions	22,612,080 BDT

## Outcome

The expected outcome of SBCC capacity development was to develop and strengthen the knowledge and skills of health personnel so that program managers and service providers can play appropriate role in SBCC program implementation; developed a resource pool of master trainers to facilitates sessions for SBCC skill building; equip field workers with ICT knowledge and skills, and IPC and SBCC skills to implement effective SBCC interventions; and skills-building of the community.

**Leadership and  
Coordination**







The SBCC program implementation upholds the necessity of leadership as it fosters communication with other members of the staff. Envisioning program goal aligned with the leadership role will specifically contribute to:

- Reducing the vulnerability to the program impacts by building adaptive capacity and resilience.
- Facilitate the integration of the program intervention adapted in a coherent manner in to relevant new and existing policies, program and activities.
- Address cross programmatic issues like gender.
- Bring alignment with the national vision and priorities.

As like leadership the planning and coordination of a program and its activities ensures implementation of policies and practices. The program coordination is an integral part of SBCC program implementation, monitoring and evaluation. The program coordination contributes to:

- Bring together the human and material resources of the organization.
- It helps to make optimum utilization of resources. These resources are used to achieve the objectives of the organization.
- Coordination also minimizes the wastage of resources in the organization.
- Composite and orderly effort established through team spirit and executive leadership enables employees deriving a sense of security and personal contentment.

Emphasizing on the role of leadership and coordination, the 4th HPNSP has categorized the program priorities and strategies as;

- building capacities in leadership, management and regulation with stronger governance and stewardship role of the MOHFW for better quality services
- rolling out an upgraded Essential Services Package (ESP) with greater functional coordination of services at the field level and a functional referral system.

The GoB units and different NGOs made their best effort to run through the 'Leadership and Coordination' approach for better program impact. The following activities are portraying their determination of just doing good job.

**Workshop on Leadership in Strategic Health Communication:** A high-level leadership workshop titled as 'Leadership in Strategic Health Communication' was held on April 28-30, 2019. Ministry and Unit level government officials and relevant departmental officials attended this 3-day course organized by USAID-Ujjiban SBCC project. A total of 26 high-level GoB officials from different ministries including MoHFW participated the course. The course sessions planned for a participatory approach where participants provided their individual understanding along with their experience and views about the Leadership in Strategic Health Communication. This course led participants to commit exercising their leadership role to improve current situation with the understanding from this leadership workshop.

**Advocacy meetings:** There were local and regional level advocacy meetings organized by the UPHCSDP-II, LGD projects. The objective of their advocacy meetings was to mobilize different stakeholders and community groups for their support to this urban based service delivery project. They organized as many as 142 such advocacy meetings during the reporting period.

**National and divisional level BCCWG meetings:** The BCCWG is a forum for networking, sharing, learning and coordination between the GoB and NGOs working in the health, population and nutrition field. The national

level BCCWG has now been extended to the divisional level to have meetings on quarterly basis. The formation of this forum has been officially proclaimed by a GO from the MoHFW. A total of 34 GoB units and NGOs are now the member of the BCCWG. In the reporting period a number of 3 meetings of the national level and 4 divisional level meetings of the BCCWG have been held.

**HPN OP coordination workshop:** Inter-OP coordination amongst the GOB units played a vital role for attaining a better program impact. The overall objective of the workshop was to facilitate the functional coordination between and amongst the relevant units of DGHS and DGFP around their OP-based HPN SBCC interventions to maximize effort, resource and avoid duplication. This year's workshop has identified 4 areas for coordination as:

- Coordination and collaboration in HPN national level communication campaign
- Uniform use of School Health Curriculum
- Integrated messaging for uniform and univocal messaging
- Community outreach/local level campaign.

**HPN Coordination committee:** A formal coordination through a committee amongst the units under DGHS and DGFP has contributed a great level of synergistic impact in SBCC interventions. This committee had 4 meetings during this period and identified critical areas of cooperation. This coordination has brought many SBCC activities shaped and implemented in a better manner following the comprehensive SBCC strategy.

**OP specific planning and implementation workshop:** The IEM has organized an OP planning and implementation workshop. They invited other OPs of DGFP and DGHS in this workshop for their suggestions in further improving the planning and reciprocal cooperation to derive benefits in implementation of different OP activities.

**SBCC Coordination Committees at District and Upazila level:** Following the government circular, the formation and activation of the SBCC Coordination Committees at District and Upazila level have been started. In this period 23 meetings of the District SBCC Coordination committee and 11 Upazila SBCC Coordination committee meetings have been reported. In addition, these committees have developed annual SBCC implementation plan with 12 Districts and 14 Upazilas. Few NGO also have their coordination committees at different levels aiming at attainment of better program outcome.

## SBCC Monitoring and Evaluation

