

RCC LEARNING WORKSHOP REPORT 2017



Photo credit: BRAC JPGSPH

Report of Learning Workshop with Participants of SRHR and Law Courses 2016

SUPPORTED BY



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PREFACE AND ACKNOWLEDGEMENTS

The Learning Workshop was organized in January 2017, with participants of two capacity building short courses on SRHR and the Law, held in 2016 for legal and health practitioners, to assess the changes in their knowledge on SRHR and related laws, and their experiences of using their learning.

Participants were from ActionAid, BAPSA, BLAST, Marie Stopes Bangladesh, Phulki, Turning Point Foundation, and We Can/SHOKHI Project. We thank all the participants for making time to attend and for making commitments to carry forward certain actions.

We would like to thank our resource person, Maheen Sultan (Visiting Fellow, BRAC Institute of Governance and Development), who facilitated the sessions and documented participants' understanding of the issues learned in previous SRHR short courses, and their day-to-day personal and professional experiences of applying SRHR knowledge. We also thank Ayesha Siddika, Project Coordinator, Centre for Gender, Sexual and Reproductive Health and Rights (CGSRHR), BRAC James P Grant School of Public Health, of BRAC University, for coordinating the workshop, and Shahanoor Akhter Chowdhury, Project Coordinator, Recognising Consent and Choice (RCC), Bangladesh Legal Aid and Services Trust (BLAST) and Chowdhury Samiul Haque, Publication Officer, RCC, BLAST for their logistic support. Photographs used in this report are taken by Mukul Barman, Senior Communication Officer, BRAC James P Grant School of Public Health, BRAC University.

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Bangladesh Legal Aid and Services Trust (BLAST)

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Dean and Professor

BRAC James P. Grant School of Public Health



ACRONYMS

BAPSA	Bangladesh Association for Prevention of Septic Abortion
BCC	Behavioral Change Communication
BDHS	Bangladesh Demographic and Health Survey
BIGD	BRAC Institute of Governance and Development
BLAST	Bangladesh Legal Aid and Services Trust
BRAC	Building Resources Across Communities
DMCH	Dhaka Medical College Hospital
IEC	Information, Education and Communication
BRAC JPGSPH	BRAC James P. Grant School of Public Health
MR	Menstrual Regulation
MRM	Menstrual Regulation with Medication
NGO	Non-Governmental Organization
NIPORT	National Institute of Population Research and Training
OCC	One-Stop Crisis Centre
RCC	Recognizing Consent and Choice Project
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
SRR	Sexual and Reproductive Rights
UBR	Unite for Body Rights
VAW	Violence against Women
VAWG	Violence against Women & Girls

BACKGROUND

The Bangladesh Legal Aid and Services Trust, in partnership with the BRAC James P. Grant School of Public Health, BRAC University, is implementing the Recognizing Consent and Choice (RCC) project, supported by the Swedish Association for Sexuality Education (RFSU).

We held a half-day learning workshop for 23 participants, selected from those attended the two short courses organized by the project for legal and SRHR practitioners in 2016 (17 legal practitioners, and other development workers). The workshop was facilitated by gender expert, Maheen Sultan from BIGD, with support from Sara Hossain, HED, BLAST.

AIMS

The workshop aimed:

1. To understand changes in participants' knowledge on SRHR and related laws,
2. To share and document their' everyday experiences of applying concepts of gender, SRHR, and law at work personally and professionally
3. To map and identify gaps in knowledge and other barriers faced when applying this knowledge in public and private spaces.



Picture 1: A workshop participant sharing her expectations (Photo credit: BRAC JGSPH)

PARTICIPANTS' EXPECTATIONS

1. How can we address legal aspects of SRHR in critical situations (eg in case of MR rejection, rape)?
2. Can we discuss which laws directly relate to SRHR?
3. How can we mainstream SRHR issues in programme for adolescents and persons with disabilities?
4. Are there any strategies to provide legal support to SRHR programs in the RMG sector?
5. How can we incorporate sex workers' rights in the curriculum?
6. Can we discuss on our post-short course experiences, existing gaps and ways to overcome gaps?
7. How can we apply our knowledge on SRHR and laws in project design and implementation?
8. How can we relate our SRHR knowledge to ensure the rights of LGBT and other marginalized groups?
9. Can we discuss existing gaps/barriers in applying SRHR in the public and private domain, and the kind of policies we need; to change the existing situation?

While the expectations listed did not entirely cover the scope of learning in the courses, or fit the workshop objectives, the facilitator explained that these could be further discussed during group work.

INDIVIDUAL KNOWLEDGE ASSESSMENT

Participants were asked to fill out a structured questionnaire (See Annex 1), to understand how the previous two short-courses impacted, if at all, on their personal and professional lives and whether they were able to practically apply the learning. It included both open ended and closed questions. The facilitator went over the questions to ensure clarity. 21 participants¹ did this; of whom twelve were female and nine were male.

¹ Two participants were late hence did not participate in this assessment.



Picture 2: Morning Session- before starting Individual Assessments (Photo credit: BRAC JPGSPH)



Pictures 3: Participants speaking to the workshop facilitator (Photo credit: BRAC JPGSPH)



Pictures 4: Participants speaking to the workshop facilitator (Photo credit: BRAC JPGSPH)

Below is a brief list of their responses to the questionnaire:

How did participants use their learning?

- 4 in “shalish”/village court meeting.
- 3 provided SRHR related legal advice to female clients, particularly clients from the marginalized groups.
- 1 in project implementation, advocacy, BCC planning.
- 3 in SRHR advocacy.
- 1 in counselling adolescents on SRHR.
- 1 while advising legal clients.
- 1 while supporting marginalized groups of people and their family members.
- 1 in medical consultations on SRH, and physical and mental changes during adolescence in educational institutions (e.g. school, college, madrasa).
- 1 in grassroots level capacity building programmes.
- 2 in training, VAW prevention campaigns, advocacy, IEC material development.
- 1 while conducting research and advocacy within their own organisation, and analysing legal policies/gaps.
- 2 while providing SRHR advice and training

Dissemination of SRHR knowledge:

Participants mentioned that they disseminated their knowledge to government officials, NGO representatives, lawyers, members of the local community, physical educators in high schools, health professionals, marginalized people, field staff from their own organizations, and to family members.

Ways of Dissemination:

The process of dissemination took place while conducting sessions in seminars, international workshops, and meetings with NGO partners; formally in awareness meetings or when attending rights based workshops, or informally, for example in group settings with adolescents they worked with; with peers, family members, people from marginalized communities, or during training sessions on bodily integrity, body and sexuality, distinction between sex and gender; during meetings and discussions on SRHR, consent and choice in marriage, early marriage, and VAWG.

Participants' Organizations:

These work with diverse communities, including men, women, transgendered person, adolescent girls and boys, garment workers, and people with disabilities. Some organizations work with only one or two groups (e.g. adolescent boys/ young men/ garment workers).

Reasons for Focus on Particular Groups:

One SRHR programme addresses only garment workers (women and men), who have migrated from other parts of the country, and may experience violence or encounter or engage in risky behaviour. Some programmes address only adolescents, to provide access to accurate SRHR information and reduce risk of sexual abuse. Some worked only with women, as in their view women need to know more about concepts of consent and choice. Some address only men and adolescent boys as they often cannot discuss or share SRH issues and concerns with others.

SRHR Related Organizational Activities:

- *Client consultation service related to SRHR problems/conflicts.*
- *SRHR counselling, life-skill activities, community advocacy meeting, policy-level advocacy.*
- *Workshop with SRHR experts and applying knowledge in institutional processes*

- *Working with existing SRHR networks, developing SRHR related institutional strategies (policies and plans on SRHR within their organization), training modules, and share contents among network organizations.*
- *Creating SRHR alliances and developing guidelines for micro-credit NGO beneficiaries;*
- *Organizing a film competition among young people and bringing out publications on SRHR topics.*

Key Concepts learned through the Short-Courses:

- *Women's SRHR*
- *Gender roles*
- *Gender analysis*
- *Legal constraints in marriage*
- *How to engage men in SRHR programmes/activities*
- *Choice and consent in a social and/or legal perspective*
- *Marriage and related laws, rape and related laws*
- *Labour laws*
- *ICPD and SRHR concepts*
- *Legal provisions on SRHR*
- *Power of consent, awareness, and cooperation from family to ensure SRHR*
- *LGBT rights*
- *Sex workers' rights*
- *Special Marriage Act*
- *Practical implementation of laws*
- *Importance of consent and choice in personal life*

Insights or Understanding Gained through the Short Courses:

- *Existing SRHR laws*
- *What to do and what not; how to secure places for women; understanding of masculinities (from Kamla Bhasin's interview)*
- *How to approach issues of diversity*
- *Consent, choice, and needs in respect of SRH*
- *Existing superstitions, medico-legal examination (two-finger test) for rape victims, livelihood of sex workers*
- *Understanding on SRH as a human right, and protecting SRHR through laws*

- *Distinction between preference & consent, barriers in existing laws to give consent, advocacy for awareness raising*
- *Consent and sexuality negotiation and early marriage*
- *Understanding consent, choice and LGBT rights*
- *Sexual desire is natural (from "Chokher Bali" film)*

"Consent" and "Choice" in SRHR programmes and Laws in Bangladesh:

- *Need accurate information about SRHR laws and the implementation status of those laws*
- *Challenges exist in the context of SRHR programme activities, Bangladeshi laws, and policies, e.g. marital rape, child marriage*
- *Domestic Violence (Protection and Prevention Act) 2010 can be used in case of violation of women's right to consent about marriage, also not paying "mahr"/dower*
- *Marriages are valid if there is consent*
- *Consent includes both choice and willingness of individuals, but choice does not include willingness*

Status of Bangladeshi Laws and SRHR Programmes in relation to SDGs and the ICPD:

Some stated that there is still a long way to go in case of gender equality, SRHR and legal issues to achieve SDGs, and others said that Bangladesh is at the initial stage and effective implementation of relevant laws are rare and more SRHR related provisions are needed in existing laws. A few discussed the need for more government initiatives to achieve SDGs, while some stated that due to inadequate knowledge, laws are not implemented. Suggestions were made on how youth groups need to focus more to reach SDGs in terms of SRHR; and to harmonize relevant Bangladeshi laws and existing SRHR programmes.

Effectiveness of Bangladesh Laws in Addressing SRHR: Positive & Negative Examples

Positive Examples:

- *The Child Marriage Restraint Act, 1929 (only in fixing an age below which marriages would be penalised)*
- *The High Court provided guidelines on sexual harassment*
- *The Prevention of Oppression Against Women and Children Act 2000 (amended 2003);*
- *Special Tribunals on Suppression of Violence against Women and Children*
- *Implementation of effective laws.*

Negative Examples:

- “Special Clause” in Child Marriage Restraint Act 2017
- Lack of implementation of guidelines on sexual harassment and lack of setting up complaint committees
- Provisions in *2003 Nari o Shishu Nirjaton Domon Ain* related to marital rape (only in case of sex with wife below 16)

Actions or Supports Need to Improve the SRHR situation:

- Include SRHR issues in the curriculum for sex workers and sexual minority groups;
- Ensure access to contraceptives for (unmarried) adolescents;
- Facilitate collaboration with related organizations/ local government affiliates.
- Raise awareness through building alliances and conducting sessions with related NGOs by sharing legal situations as possible strategies.
- Create an alliance among the participants at the RCC workshop to work on SRHR issues and related laws, or link to existing network/alliance (e.g. Unite for Body Rights/UBR, SHOKHI, Nirapad, Girls Not Brides/GNB, Right Here Right Now/RHRN).

Potential Collaboration:

- *Reach out to grassroots organizations with similar SRHR initiatives (e.g. RCC workshop)*
- *Build an alliance and action research group that work together to take up cases, conduct policy level advocacy, raising awareness among youth*
- *Create initiatives for working together to enact relevant SRHR laws*
- *Sensitize the public to create a space for open discussions on SRHR issues among family members*
- *Organize workshops with SRHR experts every six months to get updated information and new ideas*
- *Build an alliance between this network and others for identifying gaps and opportunities and for providing legal and content support.*

Proposed Areas for Future Facilitation:

Participants said they may be interested in conducting these sessions in the upcoming short courses

- *Sexual harassment and society’s attitude about overlooking VAWG matters*
- *Gender roles and responsibilities*
- *LGBT and disabled people’s rights*

- Early marriage
- Cyber violence against women & girls
- Marital rape and law
- Consent, choice, and law
- Gender, sexuality, and SRHR
- Reproductive health, fertility control research, and marginalization of women
- Comprehensive sexuality education

Support from BLAST/ BRAC JPGSPH for Future Actions:

One participant mentioned that they received adequate support but, a few called for this initiative to continue every year. Some suggested taking action for effective monitoring support to track country-level progresses of SRHR activities towards SDGs; advocacy support focusing on overcoming legal barriers; support for legal workshops; assistance in developing content and materials; support for hosting SRHR courses and follow up workshops, and support towards organizing grassroots projects e.g. awareness raising meetings, trainings, and refresher sessions.

Personal and Professional Experiences Shared by Participants:

“I learned about what to do in case of rape during the short course, and I shared what I learned with my women friends. One of them survived rape from a family member and applied this knowledge which helped her to deal with the situation.”

“My family members, particularly my wife, has become concerned about sexual and reproductive health and rights because of our discussions.”

“I often discuss SRHR awareness issues with my daughter and husband.”

“Learning from the short course enabled me to sensitize one of my friends on SRHR, which later on helped her to make some important decisions about her life.”

“After the short course, I have taken several initiatives (informally) to improve the SRHR knowledge of adolescents in my working area. The initiatives include: SRHR sessions, counselling, activities to build life skills, community advocacy meetings, helpline counselling, and policy level advocacy.”

“I have created a student network while working in a programme that raises awareness about sexual harassment. I have oriented about 150 student volunteers from different public university on SRHR issues learned from the short course.”

<i>“After participating in the short course, I will now give priority to my own desires and satisfaction during sex.”</i>
<i>“I have more knowledge about family and marriage laws now.”</i>
<i>“I have learned about topics on SRHR history (ICPD), cybercrimes, and gender roles, and how society determines gender roles, deals with rape cases, early marriage, disabled person’s rights, and sexual harassment, which I have included in my SRHR training module.”</i>
<i>“I will apply my SRHR knowledge during counselling sessions for my clients to make them aware.”</i>
<i>“A fifteen-year old girl came to me for support to stop her marriage fixed by her father. Knowledge from the short course enabled me to convince her father to postpone her marriage till she reached a marriageable age determined by our laws.”</i>
<i>“A young woman was molested by one of her cousins. She was engaged with our “Youth Friendly Service Centre”. When I heard about that, I talked with her and gave some legal information to defend her, which I got from the short course.”</i>
<i>“I shared SRHR knowledge with my clients who came seeking legal services at the BLAST office.”</i>
<i>“I had to handle a case for a married adolescent girl. She was not happy with her sexual life; she went back to her parental home, but could not share anything with her parents and as a result her parents forcefully sent her back to her husband’s place. I came to know from the girl that her husband always forced her to have sex with him, and her desire and preference was always ignored by him. Then I talked with her husband, discussed some important SRHR issues which I have learned from the course with him.”</i>
<i>“When any of my female clients came with SRHR problems, I ask them to bring their husbands along, so that they could also get SRHR-related counselling.”</i>
<i>“I work on gender, gender-based violence, and sexual and reproductive health and rights. After the course, now I can relate legal issues with work areas/issues.”</i>



Picture 5: Participants sharing their post-short course experiences (Photo credit: BRAC JPGSPH)

GROUP WORK SESSION

The facilitator asked participants to divide into three groups:

- A. Institutional limitations from providing legal support in the context of SRHR, opportunities to improve the situation**
- B. Social and legal barriers to implementing any particular SRHR programme**
- C. SRHR Collaboration and Alliance**

Two groups included professionals, from legal, health and development backgrounds (Groups B and C) and one only legal practitioners (Group A). (See Annex 2 for a list of group members)

Group A:

Group members identified the following institutional barriers in the context of SRHR in providing legal support:

- No specific laws related to SRHR
- Difficult environment for females
- Many people are not aware about SRHR-specific laws. The court system is not women-friendly (e.g. vehicles used for transportation of women in courts are not adequate/ appropriate, there are no separate toilets for women in district courts, there is no feeding corner or prayer room for women).

- Legal procedures are delayed or complex e.g. lengthy DNA-testing processes for confirming child custody and medical tests for rape survivors of rape.
- There is a need for strict rules about maintaining time, and penalising delays.
- Need a woman-friendly environment in the court system.
- Family members have negative attitudes towards SRH which are seen as “private” and not easy to discuss.
- Include SRH in the curriculum at particular education levels and in an accessible way (language should be understandable and age-appropriate).
- Sensitizing members of the law enforcement agencies and the local government bodies is crucial for improving the SRHR situation.



Picture 6: Group A members busy in discussion and poster-making (Photo credit: BRAC JPGSPH)

One person said that village court officers are not always aware that DNA tests for children can be done at any time, even when the child is 6 or 7 years old. Even in the OCC police often talk about rape survivors in front of others, since they are not aware of the fact that they must maintain the privacy or anonymity of rape survivors. Also, getting a medical test report is often a time-consuming process, and if the doctors involved are transferred, then it becomes really difficult to trace him/her, as no record on the doctor/service provider’s basic information (e.g. ID/reg. no. etc.) is maintained in many govt. facilities (the DMCH has recently started to maintain these records).

Proposed action to address institutional:

- Enacting effective laws
- Creating a women-friendly environment in the court system

- Reducing delays in prosecution
- Increasing awareness and sensitivity among law -enforcement agencies
- Increasing knowledge of Union Parishad elected members on the legal system
- Stopping the misinterpretation of religion
- Addressing poverty
- Improving education system
- Eradicating stigma/ superstition (“gorami”) related to family laws and rights

Group B:

This group discussed social and legal issues and SRHR-related governmental policies. It focused Menstrual Regulation (MR)²/ Menstrual Regulation with Medication (MRM) programme. Discussions took place regarding customary beliefs on “sexual life”, early marriage, patriarchal society, MR/Child marriage/sexual harassment, laws and their effective implementation.

Barriers, identified by Group B:

- Social stigma
- Service providers are not well-trained
- SRHR services are inaccessible to disabled people
- Problematic “Rules of Business”/ lack of inclusiveness (in case of rules and services for disabled people)

Group B members identified “social stigma” as a major barrier in case of MR/MRM. MR/MRM is still seen as an unacceptable thing/practice in many families, irrespective of their level of education.

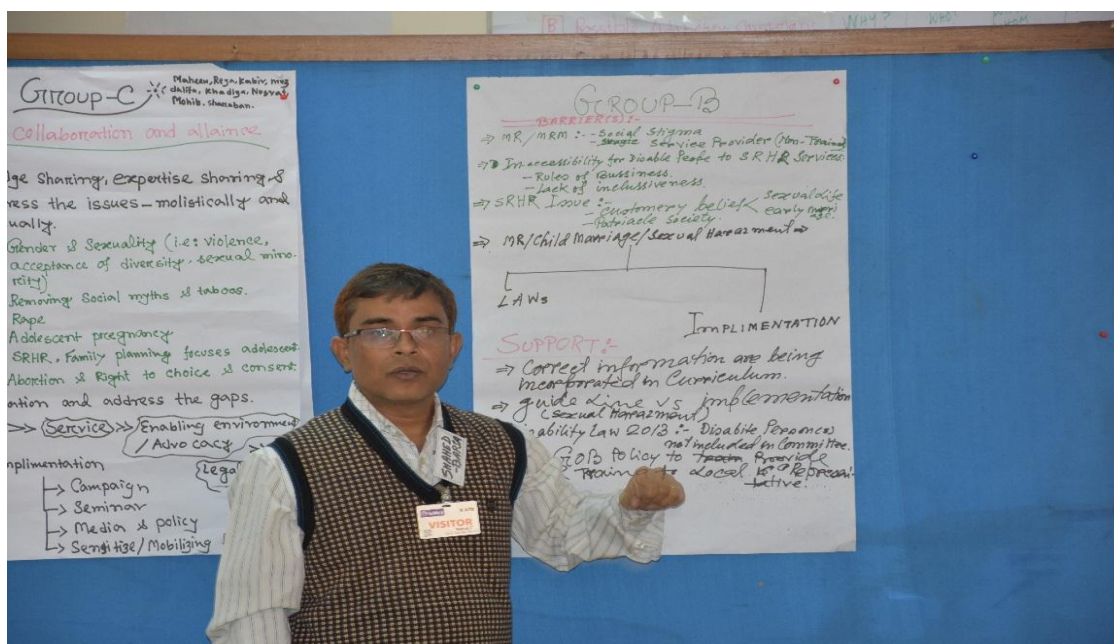
Another crucial problem mentioned is that MR/MRM service providers are not trained and in a majority of the cases, local untrained ayahs and nursemaids conduct MRs in government hospitals, BAPSA (particularly on MR), NIPORT/BDHS, and in some cases Population Council have researched this issue and family planning.

² Footnote and explain MR



Picture 7: Group B members preparing their poster presentation (Photo credit: BRAC JPGSPH)

Group B discussed access to SRHR services for disabled persons. This is very limited for disabled people (e.g. hospital commodes are not user-friendly). One person shared that ADP provides loans for “inclusive health.” One participant mentioned that ramps exist but alleyways to those ramps are not accessible for disabled people. Group B members also talked about lack of cooperation from Ministries in providing information regarding services, etc.; and another challenge being that SRHR rights are not the function of specific Ministries, making it difficult to compel them to act or coordinate actions.



Picture 8: A member from Group B is making a presentation (Photo credit: BRAC JPGSPH)

Under the Disability Rights Act, local committees are working on improving conditions for disabled people. In reality, few committees are active. There is little representation and visibility of disabled people in the NGO sector, also in policy making and in the rate of employment. Accurate information is needed (e.g. which services are available and where to access available services), and strict and impartial guidelines (e.g. persons with physical disabilities should not face any barriers in case of choosing any particular contraceptive option; also disability should not be considered as something that make sexual acts inappropriate or that needs to be controlled).

The local government and law enforcement agencies need sensitization training, to respond to rape survivors. In some cases, government institutions avoid initiating actions by saying that these kinds of social work are done by NGOs. There should be specific guidelines on the roles and responsibilities of both the government and NGOs, and also adequate and clear information on how they both work better together to improve any particular situation.

Support Needed:

- Correct information in the curriculum
- Assess levels of implementation (sexual harassment)
- Persons with disabilities not included in the committees set up under the 2013 Act
- No GOB policy to provide SRHR training to local govt. representatives

Group C:

This group worked on “SRHR Collaboration and Alliance”.

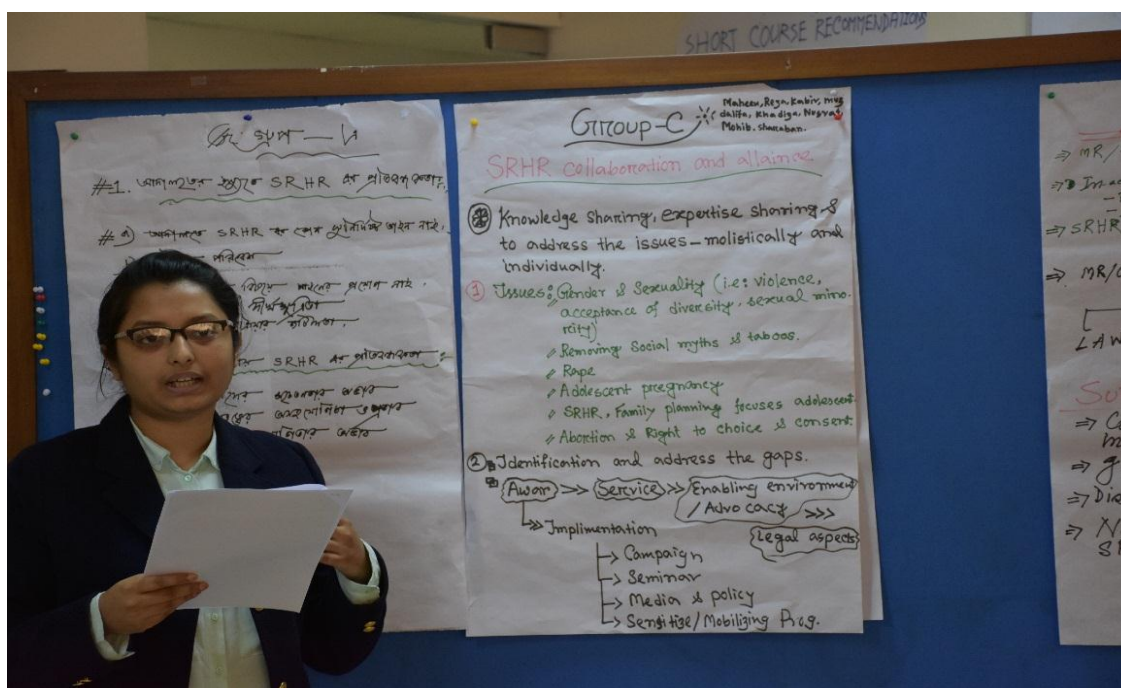
- Group C shared that an alliance is needed for sharing knowledge, expertise sharing, and addressing work issues/areas, and an alliance can work collectively and individually.



Picture 8: Ongoing discussion among Group C members (Photo credit: BRAC JPGSPH)

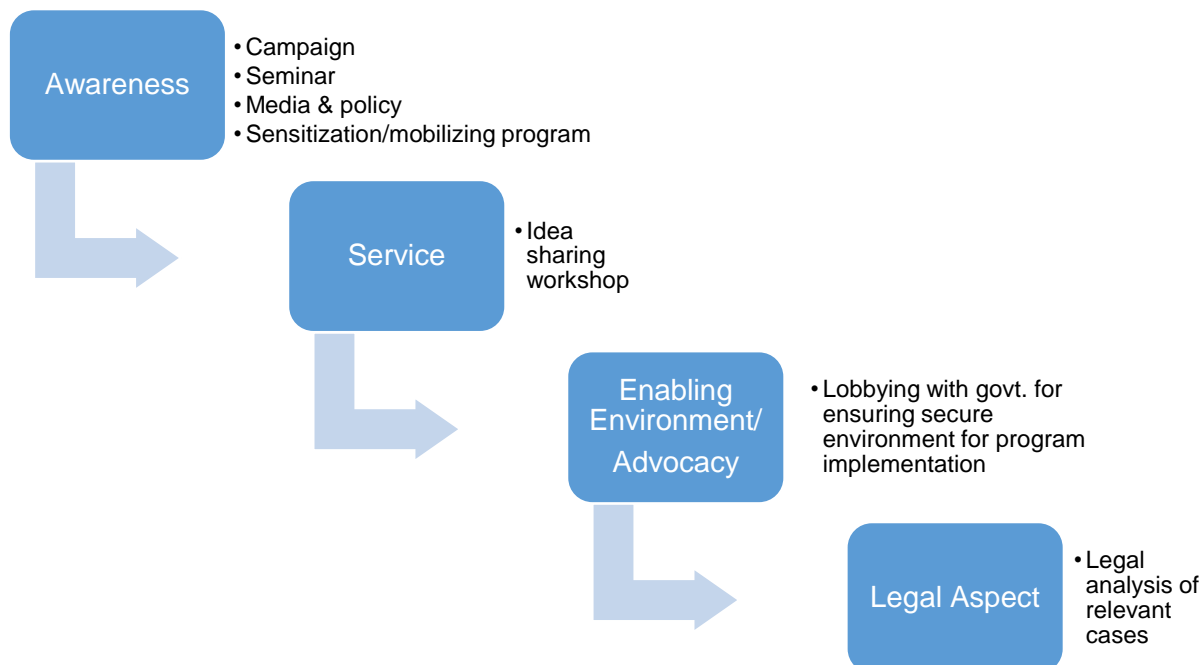
Possible Issues identified by the group members:

- Gender and sexuality (e.g. violence, acceptance of diversity, sexual minority groups)
- Eradicating social myths and taboos (as a society, we are now more accepting of transgendered people (hijras), but not of identified lesbian, gay, and bisexual people)
- Rape
- Adolescent pregnancy (adolescents should have access to adequate information on contraceptives)
- SRHR and adolescent-focused family planning
- Abortion and right to choice and consent (currently, there is a possibility of penalization)



Picture 9: Presentation by a Group C member (Photo credit: BRAC JPGSPH)

They emphasized **gaps Identified** in alliances, and then they suggested the following areas to reduce/eliminate the identified gaps:



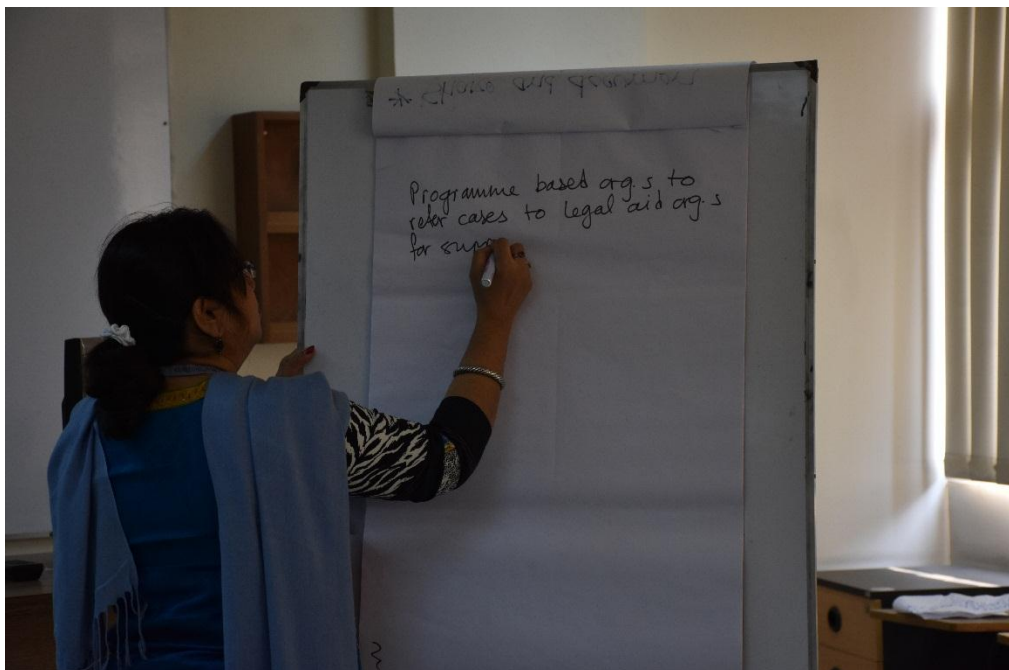
Some of the best practices this group identified are:

- Common ground of understanding (a common ground gives more strength, and enable people to identify strategies more innovatively from discussion with different organizations)
- Coverage
- Referral (this will enable the alliance people/organization to cover many different SRHR issues)

Limitations of Working in Alliance:

- Maintaining coordination (different organizations can have different viewpoints/ political understandings, work objectives, so good coordination and common ground is mandatory to maintain smooth operations)
- Funding and sustainability

LEARNING WORKSHOP RECOMMENDATIONS



Picture 10: Workshop facilitator, Maheen Sultan writing down the recommendations

(Photo credit: BRAC JPGSPH)

Recommendations:

1. Programme-based organizations should refer cases to legal aid organizations for support (should be done more systematically)
2. Inter-organizational information/experience sharing
3. A mapping of SRHR service providers for specific areas
4. Sharing of IEC materials on SRHR
5. Publicizing the “109 National Helpline no. for VAWC” information, govt.’s “national emergency helpline no. 999”
6. Inclusion of representatives from organisations in SRHR UNFPA mapping services
7. Information through adolescent-focused campaign (e.g. giving information on phone apps, booklets, etc.)
8. Identification of causes to be analysed
9. Approach RFSU for research funding

ANNEX 1:

INDIVIDUAL ASSESSMENT QUESTIONNAIRE

RECOGNIZING CONSENT AND CHOICE (RCC)

Bangladesh Legal Aid and Services Trust (BLAST) and BRAC James P. Grant School
of Public Health, BRAC University

Learning Workshop on SRHR and the Law

12 January, 2017 | 9:00 AM – 1:00 PM | Class room # 4, BRAC JPGSPH, BRAC
University

INDIVIDUAL ASSESSMENT QUESTIONNAIRE

Name: Designation: Organization: Email Mobile:
--

1. What work are you doing in relation to SRHR?

a) How did the SRHR course impact your everyday work (e.g. in your advocacy, research activities, communication campaigns/BCC activities, legal work (advice, mediation, litigation), training, or personal affairs). Please explain briefly.

.....
.....
.....
.....
.....
.....

b) Did you disseminate your knowledge to others? Who did you disseminate it to? Please tick (✓) one or more response.

- | | |
|--|---|
| <input type="checkbox"/> Family Members | <input type="checkbox"/> NGOs: (who? |
| <input type="checkbox"/> Local Community (who? | <input type="checkbox"/> Health professionals |
| <input type="checkbox"/> Lawyers | <input type="checkbox"/> Government officials |
| <input type="checkbox"/> Police | <input type="checkbox"/> Others (who? |
| <input type="checkbox"/> Judges | |



Briefly explain what information you shared and how:

.....

.....

.....

.....

.....

c) To whom are your SRHR programme(s) addressed to, and why? Please tick (✓) one or more of the following.

- | | |
|---|--|
| <input type="checkbox"/> Only women / adolescent girls | <input type="checkbox"/> Particular ethnic communities |
| <input type="checkbox"/> Only men / adolescent boys | <input type="checkbox"/> People with disabilities |
| <input type="checkbox"/> Women and men | <input type="checkbox"/> People living in urban areas |
| <input type="checkbox"/> Women / men and girls and boys | <input type="checkbox"/> People living in rural areas |
| <input type="checkbox"/> Gender diverse groups | <input type="checkbox"/> Young people (under 25) |
| <input type="checkbox"/> Particular religious groups | <input type="checkbox"/> All |

Please briefly explain why your programme(s) addresses this particular group(s) of people:

.....

.....

.....

.....

.....

.....

d) How do your organizational activities relate to SRHR? Please tick (✓) one or more of the following.

- Got involved in cases on the issue
- Organized workshop(s) involving SRHR experts
- Built a new SRHR network/alliance for sharing activities (e.g. on research, advocacy, SRHR related communication activities, lobbying with govt. bodies, legal advice, litigation, legal awareness programme or training programme) ideas before starting any initiatives among each other).
- Other activities (Specify

Please briefly explain the activities:

.....
.....
.....
.....

e) Please share one personal and one professional/workplace experience in which your short course knowledge has contributed in some way?

Personal experience:

.....
.....
.....
.....

Professional experience:

.....
.....
.....
.....

2. Knowledge gained through the short course

a) Please list up to three key facts that you learned through the course (if any)?

.....
.....
.....

b) Please write out up to three insights or understandings that you gained through the course (if any)?

.....
.....
.....



c) How are the terms “consent” and “choice” understood by SRHR programmes and in Bangladesh laws?

.....

d) How far are SRHR programmes and Bangladesh laws consistent with provisions in SDGs and the ICPD?

.....

e) How effective are Bangladesh laws in addressing SRHR rights? Give a positive and a negative example.

Effective law:

.....

Ineffective law:

.....

3. How will you include the learning of previous short courses and today’s workshop in your work?

a) Based on your knowledge from the short course, what actions can you take or what kinds of support do you or your organization need (think of existing opportunities/challenges/gaps) to improve the SRHR situation in Bangladesh?

- | | |
|---|--------------------------------|
| <input type="checkbox"/> Build an alliance | <input type="checkbox"/> Other |
| <input type="checkbox"/> Conduct action research | |
| <input type="checkbox"/> Build an action research study group (update /brainstorm new ideas on identified issues) | |
| <input type="checkbox"/> Take up cases | |



b) Are there any ways you can work jointly? Do you or your organization have any plans for working jointly in or creating an SRHR related alliance? Briefly explain your plan(s) (if any).

.....
.....
.....

c) Will you be interested in facilitating a session in any upcoming course? Or proposing any subject for discussion?

.....
.....
.....

d) Is there any particular support that you would welcome from BLAST/ BRAC JPGSPH going forward?

.....
.....
.....

ANNEX 2**RECOGNIZING CONSENT AND CHOICE (RCC)**

Bangladesh Legal Aid and Services Trust (BLAST) and James P. Grant School of
Public Health, BRAC University

Learning Workshop on SRHR and the Law

12 January, 2017 | 9:00 AM – 1:00 PM

Class room # 4, BRAC James P. Grant School of Public Health (BRAC JPGSPH),
BRAC University

68 Shahid Tajuddin Ahmed Sharani, 5th Floor (Level-6), ICDDR,B Building, Mohakhali,
Dhaka-1212

Workshop SCHEDULE

Time	Subject	Methodology	Resource Person
9:00-9:15	Registration and Tea		
9:15-9:30	Welcome remarks and objectives of the workshop (3 minutes) Participants Introductions and review of expectations (7 minutes)	Objectives will be written on flip chart Sabina to introduce Facilitator and provide background to earlier courses. Facilitator to ask for introductions and expectations on VIPP cards	Prof. Sabina F. Rashid, Dean. BRAC JPGSPH
9:30-10:45	Recap of Learnings Introduction to the session (15) Individual assessment Completion (30 minutes) Q & A (30 minutes)	Recap of the Short Course recommendations Explanation of the Assessment Form Individual assessment forms to be completed by each participant (30 minutes) Q&A for any clarifications required on the assessment forms or course contents	Maheen Sultan, BRAC Institute of Governance and Development
10.45-10.50	Health Break		
10:50-11:00	Brief on group work process, group distribution	Tea to be served during group work preparation	Maheen Sultan/
11:00-12:00	Group Discussions (3 groups) A. Mapping institutional limitations in providing legal support in relation to	Group A to be of lawyers only Group B to be mixed of lawyers /health professionals / CSOs	Maheen Sultan

	<p>SRHR and identifying opportunities to overcome them</p> <ol style="list-style-type: none"> 1. What are the court based constraints? 2. What are the community based constraints? 3. What are the opportunities to improve the situation? How can these opportunities be accessed? By whom? <p>B. How do social and legal issues, and government policies impact on your SRHR activities? How can you work jointly to address those and to strengthen/improve the situation for the individuals or communities with whom you work?</p> <ol style="list-style-type: none"> 1. Are there any barrier(s) to implement any particular programme? 2. Stereotyped attitudes and existing ways of doing things do not allow institutions and practitioners to act differently 3. You do not get enough support for carrying out existing govt. policies 	<p>Groups C to be mixed (as above)</p> <p>Responses to be put on flip charts and presented to plenary by two persons from each group (preferably different genders)</p>	
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	<p>C. SRHR collaboration and alliance: What are our existing strengths in collaborative working? What do we need to do? What challenges might we face?</p> <ol style="list-style-type: none"> 1. Is an alliance needed? Why or why not? On what kind of issues? 2. What do we want to achieve through an alliance? 3. What would be the advantages of working through an alliance? 4. What would be the constraints of working through an alliance? 		
12:00-12:45	Group presentation (10 minutes each group) Q&A after each group presentation (5mins max)	To obtain feedback and reach consensus BLAST and BRAC JPG management to be present	Maheen Sultan Sara Hossain HED, BLAST
12:45-12:55	Summary and Next Steps/Take Home Messages	BLAST and BRAC JPG management to be present	Maheen Sultan Sara Hossain
12:55-13:00	Vote of Thanks		Aisha Siddika Project Coordinator, BRAC JPGSPH, Shahanoor Akter, Project Coordinator, RCC
13.00	Group Photo		
13.05-14.00	Lunch		