

A snapshot of the SRHR situational assessment of Key Populations (KPs) in Bangladesh and other settings



MSM*

MSW*

FSW*

Hijra*

Reproductive health concerns of female KPs

*Based on local data from various sources

12% terminated their pregnancies
52-95% reported unintended pregnancies
 Pregnancies were attended by unskilled birth attendants
 Abortion episodes were conducted using unsafe, unmedicated methods
 The prevalence of current abortion is **16%** (higher than the national average of 18 per 1000 women)
 Contraceptive use:
44% hotel-based FSW
30% street-based FSW

HIV and STIs is the core of existing KP interventions

Considering the global burden of an estimated **374** million new STI infections per year, exploring the disease burden of major STIs in Bangladesh along with anti-microbial resistance among KPs remains a pressing need

Human papillomavirus (HPV) infection

*Based on global data from various sources

78% Anal infection
36% Penile infection
17% Oral infection

Global HPV infected rate
40% - 43%

Illicit drug use

30-39% engaged in chemsex*

17% of the MSW engaged in illicit drug

Qualitative evidence revealed elevated vulnerability to drug use

15% of the hijra engaged in illicit drug

*Chemsex refers to sexual activity engaged in while under the influence of stimulant drugs.

Gender dysphoria and hormone/steroid use

A growing body of evidence about gender dysphoria among MSM

Transgender women in Bangladesh often use non-prescribed hormones and gender reassignment surgeries by unskilled providers

Sexual health concerns

There is a lack of local and global prioritisation of non-disease dimensions of sexual health among MSM and transgender women, especially in Bangladesh considering the sociocultural taboos attached to sexual dialogue

(*) Definitions:

Key Populations are defined as groups, due to specific higher-risk behaviours, at increased risk of HIV and AIDS, tuberculosis and malaria irrespective of the epidemic type or local context.

For the purpose of this situation assessment, four groups of key populations have been included:

MSM are males who have had sex consensual sex within the past year.

MSW are males who sell sex to other males in exchange for money and gifts within the past month.

FSW are females who sell sex and are contacted through negotiation by clients on the street, house, or brothel for sex during the past year.

Hijra are transgender women who identify themselves as belonging to the traditional hijra sub-culture.

The "R" of SRHR: A silent and missing component for KPs

- Stigmatisation and discrimination in healthcare settings
- Gender-based violence
- Legislative barriers
- Socio-cultural, legal, and cultural impediments associated with homosexuality, drug use, and sex work
- Neglect, discrimination, and judgmental attitudes from healthcare providers

Recommendations:

- Strengthening the SRHR knowledge base
- Emphasising the rights aspect of SRHR
- Addressing the harms of illicit drugs and hormones
- Reducing the silence about taboo issues of SRHR
- Constructing evidence-based phase-wise interventions to address emerging burdens



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Based on the situation assessment of the study 'Encapsulating the scenario of Sexual and Reproductive Health and Rights (SRHR) among key populations' with the contribution of: Manwar Morshed Hemel; Samira Dishti Irfan; Golam Sarwar; Niaz Morshed Khan; Masud Reza, and Sharful Islam Khan