

HIV/AIDS Program

Continuation fo the prioritized HIV prevention services among key populations in Bangladesh

Background:

Although national HIV prevalence is <0.01% in general population and <1% among key populations (KP), Bangladesh is one of the four countries in the region where the epidemic continues to increase¹. Until 2016, the cumulative number of detected HIV cases were 4721 with 578 new recorded cases² (the estimate range of people living with HIV is 8,000-9,800)³. Save the Children, in a leading role in the national HIV and AIDS response in Bangladesh, has managed four HIV grants of the Global Fund in two modalities, a) Management Agency (March 2004 - November 2009) and b) Principal Recipient (December 2009-November 2017).

New Funding Model (NFM) titled 'Continuation of the prioritized HIV prevention services among key populations in Bangladesh aims high impact & cost effective intervention with the consideration of districts prioritization and the epidemiological trend and other contextual factors. According to the new size estimation study, NFM grant provides services to 35% PWID and 25% FSWs.

Objectives:

- Continuing HIV prevention services for key populations at higher risk – this includes female sex workers (FSWs) in streets, hotels and residences, people who inject drugs (PWID), men who have sex with men (MSM), male sex workers (MSWs) and transgender (hijra);
- Continuing required care, treatment and support activities for people living with HIV in order to ensure delivery and adherence to anti-retroviral therapy (ART); and
- Building the capacity of partners in order to increase the scale of the national response to the HIV/AIDS epidemic – including capacity building initiatives for implementing partners, higher level advocacy for creating an enabling environment and maintaining the national HIV Management and Information System (MIS).

Geographical coverage: Dhaka, Gazipur, Tangail, Rajbari, Narayanganj, Mymensingh, Jamalpur, Bandarban, Chandpur, Chittagong, Comilla, Cox's Bazar, Khagrachari, Rangamati, Rajshahi, Chapainawabganj, Sylhet, Moulvibazar, Dinajpur, Lalmonirhat, Rangpur, Barisal, Chuadanga, Jessore, Khulna, Meherpur and Satkhira
(27 districts)

Implementing partners: 3 Sub Receptients (SRs) and 7 Sub Sub-Receptients (SSRs)
CARE Bangladesh (SR) implements 'HIV prvention program for people who inejct drugs, (PWID) and their partners' with three SSRs: Ashokta Punorbashan Shangstha (APOSH), Mukto Akash Bangladesh (MAB), Khulna Mukti Seba Sangstha (KMSS)
Light House (SR) implements 'HIV Prevention Program for female sex workers and their clients' with three SSRs: Sylhet Jubo Academy (SJA), Young Power in Social Action (YPSA), Nari Mukti Sangha (NMS)
Ashar Alo Society (SR) implements 'Treatment, care & support (TCS) program for people living with HIV with two SSRs: Mukto Akash Bangladesh (MAB) and Confidential Approach to AIDS Prevention (CAAP).

Project duration: December 2015 - November 2017

Donor: The Global Fund



Target Groups



Female Sex Workers and their Clients



People who Inject Drugs and their Partners



People living with HIV



Most at risk Adolscent



Community Stakeholders, Service Providers



Law and Policy Makers

Major Achievements:

- Providing essential services to 26,000 FSWs (street, hotel and residence based) through 25 drop in centers (DICs) and 18 Sub-DICs in 26 districts and harm reduction services to 11,500 PWID through 21 DICs and 12 Sub-DICs in 19 districts;
- Around 1700 people living with HIV are receiving ART nationally from the government from June 2016;
- Active syphilis declined among most at risk populations in Dhaka i.e. among PWID from 9.3% to 4.3% and among street based FSW from 34% to 4.6% in 2011 [4];
- Use of sterile injecting equipment by PWID increased from 33.6% to 83.6% (2006-7, 2015) [3];
- Condom use has increased in PWID within the last 12 months from 39% to 75.4% (2004-2012) [5];
- Condom use has increased in FSWs in sex with new clients from 66.7% to 73.7% (2006-7, 2015) [3];
- Condom use has increased among the younger clients of hotel based female sex workers from 14.1% to 48.3% [6];
- HIV/AIDS knowledge has increased from 19% among ever-married women in 1996-97 to 70% in 2011. Among currently married men, it has grown from 33% in 1996-97 to 88% in 2011 [7];
- 22% male and 13% female aged 15–24 who correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission (End line Survey, 2008: UNGASS indicator #13) [8]; and
- The guardians, teachers and religious leaders are increasingly supportive of teaching HIV related lessons in the classroom. According to the Baseline Survey (2005), 60% guardians supported sex education for their children in the classroom, according to the End Line Survey (2008) this increased to 80% [8].

Major Challenges:

- According to the size estimation of key populations, majority of them are not under program coverage (75% of FSWs and 65% of PWID – uncovered);
- Uninterrupted comprehensive service for people living with HIV;
- Addressing stigma & discrimination and reform punitive laws to reduce criminalization.;
- Addressing structural factors (social protection, housing, livelihood etc. for key populations); and
- Continuation of motivated and skilled manpower to deliver quality programming.

Future Direction:

- PMTCT piloting using MNCH platform;
- Develop model for MARA intervention;
- Partnership with Department of Narcotics Control (DNC) for OST, primary risk reduction among youth and adolescent through private funding;
- Collaboration with Child Protection Sector to continue and expand services for CABA and Children of SexWorker; and
- Collaboration with Sponsorship Program to integrate HIV in Urban Slum Intervention.



“I have learned from sex workers DIC about safe sex practices and HIV protection. I did HIV testing too. Now my dream is to educate my daughter. I got the guidance to save money for my daughter. I have also ensured all the vaccinations for her’



- Tumpa (25), mother of three years old daughter

