



Women for the Women Leaving Behind in Marginalized Teagarden Community Addressing the Unmet Need for Family Planning

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National maternal and perinatal death surveillance and responses (MPDSR) data of Bangladesh represents that 120 maternal deaths occurred in Moulvibazar district during 2014, 39.1% (47 maternal deaths) of which occurred in Tea Gardens catchment areas. Verbal autopsies conducted in those deaths also identified poor care seeking behaviour; access to services; availability and utilization of appropriate MNH services and family planning services including referral. Women living in the hard to reach tea gardens areas in Moulvibazar are struggling with early marriage, adolescent pregnancy, family planning and poor health seeking behaviour during gestational period. Unwanted pregnancy can lead to serious health consequences including maternal death. Majority of the married adolescent are not physically ready for pregnancy which causes high risk of complications. Globally, complication during pregnancy and childbirth is the second leading cause of death among the adolescent girls aged between 15 - 19 years.

Considering the context of the Sylhet division, the marginalized people of tea gardens in Moulvibazar district require support from the government to strengthen the family planning services. UNFPA, Bangladesh is continuing supporting to government to improve reproductive health of tea garden mothers in Moulvibazar for many years.

About 50 thousand eligible couples live in the 92 teagardens in Moulvibazar district. Eligible couple in the teagardens is mostly affected by the family planning related problem. It was found that only 29.7% women in teagardens had knowledge on family planning. 82.9% of them know the tablet (Maya or Sukhi) as main types of contraceptives. 29.6% mentioned condom and 7.2% ligation.

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Only 20% women perceived that two years is needed for planning of 2nd baby after 1st baby. Lack of awareness is the main barrier to prevent early marriage (34.6%). Illiteracy (29.7%) also mentioned as the major obstacle to prevent early marriage in respect of education and age. The consequences include early marriage, early pregnancy, unwanted pregnancy, abortion and maternal deaths.

Capacity development of the volunteers on family planning related counseling and advocating the community people and eligible couple is essential. To ensure the dissemination of message and quality family planning methods, training of family planning workers/Midwives will be conducted adapting evidence based training package to enhance and refresh skills and competency of existing nurse and midwives to improve quality of midwife led continuum of care. The evidence will provide an experience for future scale of the training across the country.

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