

Sexual and Reproductive Health and Rights



**Analysis of Sexual and
Reproductive Health and Rights
practices of the Readymade
Garments Sector**
A Case Study of Dhaka

Contents

Preface	3
Introduction (background / objective)	4
SRHR Scenario: Bangladesh	5
Findings: Slum Areas	9
Case Stories of Workers	12
Methodology	15
Conclusion	17
Endnotes	18
Contacts	19

Preface

Sexual and Reproductive Health and Rights have been one of the crucial causes for concern in the Readymade Garment sector of Bangladesh. The implementation of SRHR have also been considered as an instrument of improvement in the various business functions of the RMG organizations.

The Ready Made Garments (RMG) industry is a mainstay of the Bangladesh economy, contributing nearly 82% of the country's annual export revenues (BGMEA, 2017). Bangladesh is the world's second largest garment producer. Above 4000 factories currently employ some 4 million workers (BGMEA, 2017), an estimated 85% of them women. It is the single largest source of employment for women who are largely migrants from rural areas and from disadvantaged backgrounds. The ready-made garments industry in Bangladesh consists of many small to medium garment factories that produce garments catering to foreign buying houses. The export income from this industry alone is one of the top sources of economic growth in

Bangladesh. SRHR issues are very important for RMG sector because majority of workers are women in this industry. Most of them has received education till the primary level and has little awareness about sexual reproductive health and rights (SRHR). SRHR is related with a person's self esteem, confidence, body image, relationship building and social role. It is closely related with gender equality. In order to provide SRHR services to garment factories, it is necessary to consider the issue of gender equality in Bangladesh society and patriarchal relations that pervade the home and family life of the workers.

This research shows the relationship between SRHR practices and productivity. The analysis of the test research taken during the initial stages of the project indicated that increased motivation in the work place helps to generate a sense of responsibility and satisfaction. This in turn leads to better productivity and lower staff turnover. Lower staff performance negatively affects workers, managers and owners alike. In the light of such realization, the current research aims to find an optimum solution in terms of policies and strategies relevant to all stakeholders.

The results of the research are also intended to clarify the relationship of SRHR with Compliance. Typically, compliance clauses in factories are more inclined towards ILO standards in upholding labor rights. This also applies to the Labor Law 2005 and 2015 of the Government of Bangladesh. The outcome of the conceptual model will not only bring forward the possible inclusion of SRHR practices into compliance and the labor law but also the necessity of awarding certifications to those factories who are deemed ideal for practicing high standards of SRHR. This will also promote the important criteria of upholding a better working environment and women's empowerment.

This research is conducting by the following researchers

Dr. Meghna Guhathakurta,
Research Supervisor

Summiya Sultana, Lecturer,
BUFT.

Mallik Rakibul Hasan,
Lecturer, BUFT.

Marjana Jahir, Lecturer,
BUFT.

Anindya Chakraborty,
Lecturer, BUFT.

Syeda Helmi Afrah, Lecturer,
BUFT.

Introduction to SRHR

Sexual and Reproductive Health and Rights encompass the right of people to gain awareness, acceptance and access to sexual and reproductive health.

Background

Ever since the industrial revolution (from around 1750 onwards), the concept of human rights began to escalate to a point where it is considered as one of the major attributes that has the ability to mitigate various disputes. Sexual Reproductive Health and Rights is one such form of social rights promoting healthy and medically secured lifestyles amongst a society or an organization. The ready-made garment sector of Bangladesh is comprised of a group of garments manufacturing organizations that employs over a million women. The establishment of the garment sector in the country in the early 1980s thought to have provided professional freedom and independence among the women of the lower classes of the society. However, while at work, many of them were also victims of forced labor, low wages, unfavorable and unhygienic working conditions leading to health problems such as frequent fever, pregnancy related diseases, genital infections, increasing child mortality and even deaths. It has been reported however, that only a few RMG manufacturers in the country are adopting SRHR practices through the help of NGOs, hospitals, social development organizations and are known to have created degree of socio-economical impact (Karim, 2014; Bearinger et al, 2007; Sikdar et al, 2014). However, it is also noted that many of the SRHR

practices are considered as an endeavor of "Corporate Social Responsibility", which is perceived as non-profitable and philanthropic by many RMG factory owners (Porag, 2014; Muhammed, 2011).

The research therefore investigates the progress of SRHR practices in the RMG sectors of Bangladesh and their resulting impact in terms of outcomes such as organizational impact, Social impact and attitude, relationship and productivity. The research intends to bring forward a case study communicating the aforementioned impacts which would be used to ascertain a standard SRHR practice in the context of Bangladesh. The city of Dhaka which is considered as one of the major hubs of RMG factories in Bangladesh would be the area of focus for the proposed case analysis.

SRHR Scenario : Bangladesh

The changing or resulting behavior exhibited by workers regarding their sexual and reproductive health outside the influence of their workplace which might directly or indirectly affect their performances or attitudes while in the factories refers to the notion of social impact and attitude

SRHR practices in RMG sector

Sexual Reproductive Health and Rights (SRHR) are defined “as the rights of all individuals to make decisions concerning their sexual activity and reproduction free from discrimination, coercion and violence” (UAP, 2014). It also encompasses the right to access health-care and other medical facilities in order to obtain the correct and reliable treatment of various health problems. The International Planned Parenthood Federation (IPPF, 2003) divided the concept of SRHR into four notable subjects namely: Sexual Health, Sexual Rights, Reproductive Health and Reproductive Rights. However, from the perspective of Bangladesh, Sexual Reproductive Health and Rights (SRHR) amongst the workers of the Readymade Garments (RMG) sector is a concept which requires significant awareness.

According to Sikdar et al (2014), 85% of the Bangladeshi RMG production workers are women which clearly indicate their productive as well as their socio-economic importance. Her Project (2010) identifies this as a critical

issue for not just the overall healthcare of the nation but also its economy. Ahmed (2013), likewise, argued that necessary research and application of SRHR projects in RMG factories would not just improve the health-care system but also the overall productivity and operational efficiency of the manufacturing facilities. Such a development towards 85% of RMG workforce has the potential to improve the socio-economic scenario of the country immensely.

Although much work has been done on it does not come out as a major focus especially in the case of industries where majority of workers are women.

Organizational Impact

Organization impact of SRHR indicates the transformation of organizational practices and the role of management in adopting and integrating SRHR practices with current organizational policies (Shahabuddin, 2015). The RMG organizations in Bangladesh have become host to a lot of research and development projects. Among such projects, SRHR holds a notable

significance. Karim (2014), indicates the importance of awareness regarding SRHR and addresses a number of projects undertaken by various policy makers and institutions such as the Bangladesh Women’s Health Coalition (BWHC), Family Planning Association of Bangladesh (FPAB), Networking Alliance and Partnership, Coalition for Sexual and Bodily Rights in Muslim Societies (CSBR), Sexual Reproductive Health and Rights Alliance (SRHRA) and finally Sexuality and Rights Forum organized by Brac University, RHSTEP, Phulki and a collaborated effort between Brac University and IUB. Embassy of the Kingdom of Netherlands (EKN, 2014) are also initiating projects such as the Multi Annual Strategic Plan which also addresses a research and development plan regarding various SRHR initiatives. Other noticeable institutions include the Awaj Foundation, BRAC, CARE Bangladesh, Mamata, Marie Stopes Bangladesh, Pathfinder Bangladesh, Phulki, Sheva, Smiling Suns Clinics (Her Project, 2014). It is also noted that the SRHR sessions are known to be conducted by external

institutions such as the ones in Bangladesh, where no involvement of factory authorities have been notified, except for investment in these endeavours (Jordal et al, 2014). Despite that, each of the aforementioned projects has had noticeable progress regarding SRHR. The Government are also said to be involved in some of these projects, thereby a possibility of establishing a National Standard regarding healthcare governance is currently underway (Karim, 2014). Recently, the government have developed a labor law to be followed from the year 2015 (Appendix A), where considerable health issues have been addressed (Article 76-78), as well as safety (Article 42 to 73) and even reproductive health issues (Article 37-39). The labor law also mentioned about appointing a welfare officer (Article 79), but apart from rules relating to the recruitment of the said individual, the exact role of that position has not been clearly addressed. This suggests that RMG factories are yet to establish SRHR initiatives as part of their own strategy rather than call for external appointments. The initiative would establish an independent scenario in practicing SRHR which might be used to promote a self-sufficient workforce in the foreseeable future. Also, the factory management should have the affinity to employ good governance as well suggest a review regarding the current labor law to share their expertise

regarding SRHR which can be used to modify new developments. In this regard, the role of transformational leadership and the influence of informal leaders have the potential of transforming organizational performance through establishing and practicing SRHR (Women Deliver, 2014). The aspect of women empowerment is also critical in understanding the organizational impact. Some factories are currently attempting bring women at the forefront of command hierarchy who are later praised to have been pivotal in transforming organizational SRHR practices provided that they are trained by either the company or the external bodies as mentioned previously (Karim, 2014; Ahmed, 2013).

Social Impact and Attitude

The changing or resulting behavior exhibited by workers regarding their sexual and reproductive health outside the influence of their workplace which might directly or indirectly affect their performances or attitudes while in the factories refers to the notion of social impact and attitude (Majumder and Begum, 2000) According to Akhter and Sumi (2014), SRHR is purely an aspect of health and medical well-being which means it requires attention not only till the office hours, but even after that. As a result, it is obvious for the research to explore the current social lifestyles of factory workers

and how it affects their performance while at work. Karim (2014) did mention about institutions such as Mary Stoppes, BRAC and other relevant NGOs involved in programs that include going to their neighborhoods and conducting training sessions regarding family planning, knowledge dissemination regarding AIDS, Syphilis and other sexually transmitted diseases. The aforementioned projects brought forward by Karim (2014) clearly notify the neutrality of the findings. However, this also suggests a lack of comprehensive analysis regarding the SRHR projects in terms of their performance and progress, which would be crucial in examining the current status of SRHR projects and how effective they have been thus far in terms of the socio-economic development of the country. As a result, there are still a lot of areas that is yet to have access to such privileges simply because they either live on illegal slums or the society communities does not allow access to institutions and apart from institutions there has been no or few records of factory authorities conducting such informational sessions in societies regarding SRHR practices. Haque (2003) remarks that by conducting a survey in Savar, it was found that many RMG workers are not getting sufficient wages to the point where the remuneration does not cover the medical costs. Other difficulties are also being observed such as the negative attitude of male towards

the female in their households creates family problems that might affect their performances such as the obligation to do household activities rather than going to work creates an obstruction of freedom the woman had while she was still a spinster (Paul and Majumder, 2000; Ali et al, 1997). In this regard, the reach of NGOs should be extended and through various programs, the socio-economic benefits of joint income by both man and woman of the household should be communicated.

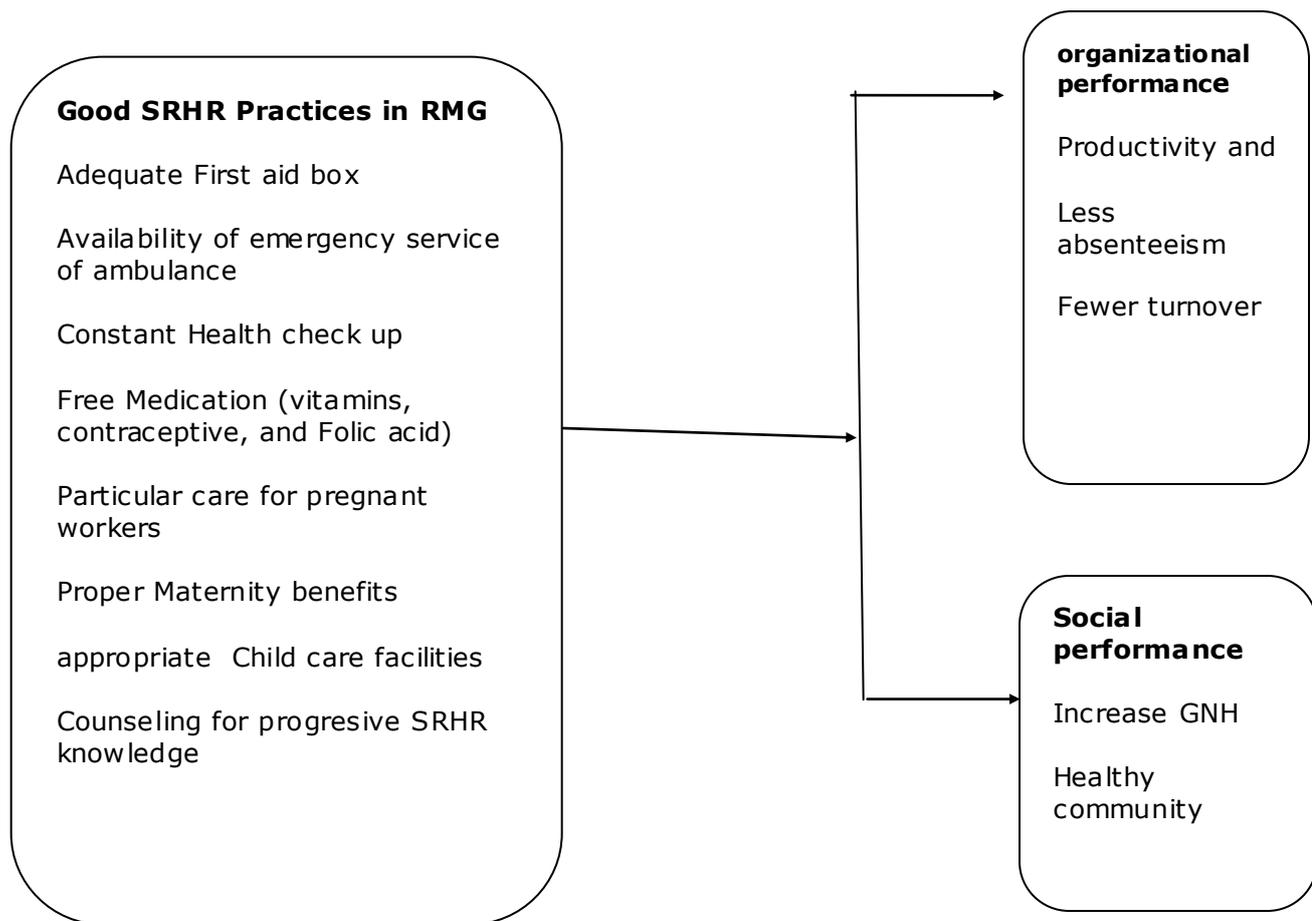
Relationship with productivity

According to HER Project (2010), it is believed that effective SRHR practices can bring forward a positive change towards productivity and efficiency of the factories. Sikder et al (2014) emphasized on the fact that effective SRHR practices will increase the motivation of workers at a substantial level. The traditional Maslow's Theory of Hierarchy signifies the contribution of increasing motivation behind the positive operational performance of industries. Thus far, few literatures have been found that analyses the repercussions of productivity due to the inclusion of SRHR practices. However, the aforementioned references do indicate a possibility of results that might encourage further research in such operational aspects. However a non-profit initiative popularly known as the

SNV promoted by the Embassy of Netherlands have gradually been able to incorporate SRHR practices with business case in terms of productivity and operational performance, where they have been able to establish Sexual and Reproductive Health indicators from either government labor laws or theoretical ideologies (EKN, 2014). When applied, either through training or medical applications, the performance of the potentially healthy workers is then computed to note the changes in productivity which at a later point becomes a standard method productivity and efficiency calculation (EKN, 2014). A good SRHR practice potentially indicates the possibility of decreasing employee turnover through the aspect of less absenteeism (Sikdar et al, 2014). However it is yet to be investigated as to how worker's turnover has any repercussions on productivity and efficiency and if at all, the developments occur due to effective SRHR practice.

Conceptual Framework

Based on the theoretical and practical aspects mentioned previously, the following conceptual framework has been considered for the research:



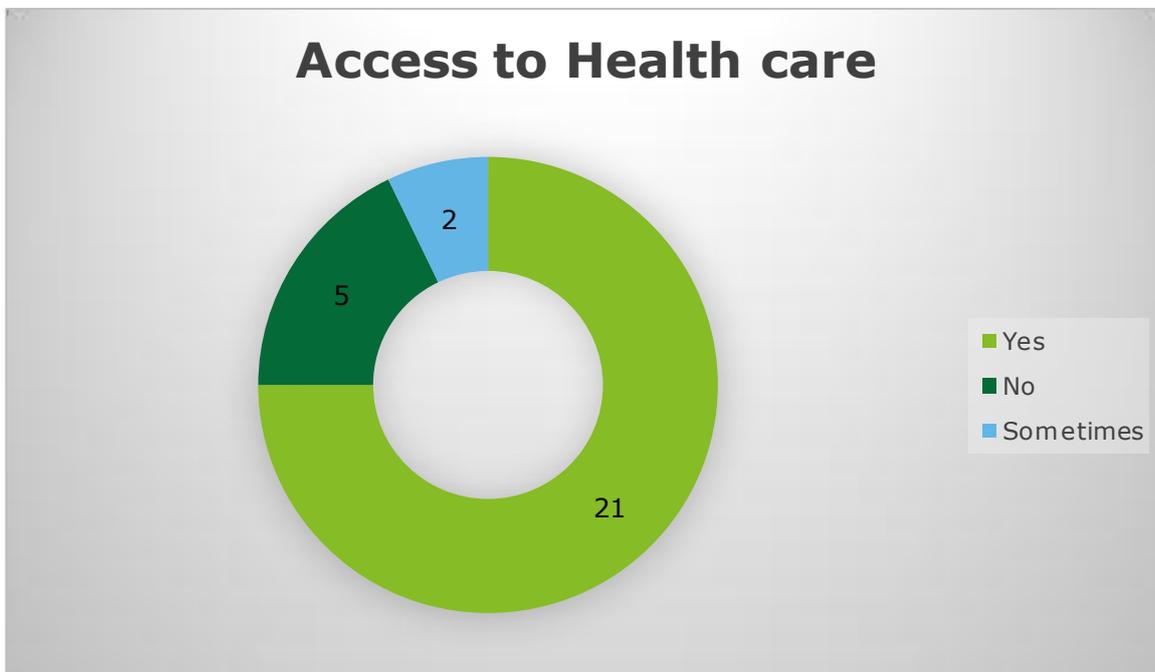
Findings: Slum Areas

A survey concerning the status of SRHR among the RMG workers was taken in one of the very prolific slum areas of Gazipur. A majority of the inhabitants in the area works either as an operator, helper or supervisor in the nearby garment manufacturing facilities. One of the major reasons behind choosing slum areas for the survey is to find an unbiased response from respondents. It was observed in a test survey that the workers exhibited significant hesitations while responding to queries in the factories which was later observed as having second thoughts to reply about such matters before factory authorities. As a result, it was deciphered that if they are asked the same queries in their households instead, they would be more frivolous and honest in their response which will also bring forward a biased approach towards the overall research design.

The respondents were given close-ended questionnaires where various queries were answered. After collecting data from 28 respondents, the research has found information on these crucial matters concerning SRHR.

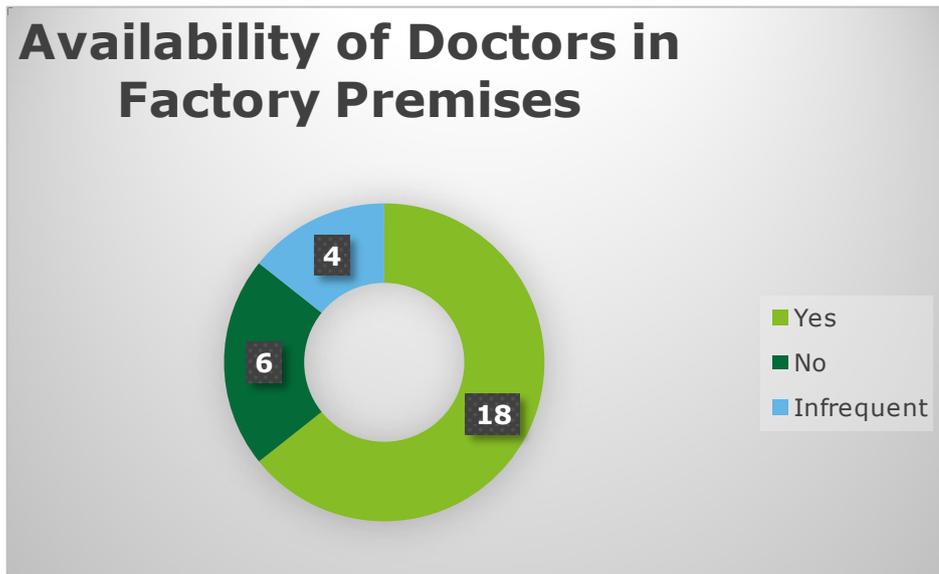
Access to Health care

The chart below will display the workers’ response regarding their opinion concerning access to healthcare in the factory they work in:



It has been observed that a majority of the workers have claimed that they receive significant access to healthcare. However, the following query clarifies how evident is their understanding of “Access to Healthcare”, where another query was put forth, much in line with the same query presented earlier.

When the workers were asked if there was a doctor available in their factory premises, the following response does not seem to agree with the aforementioned findings.

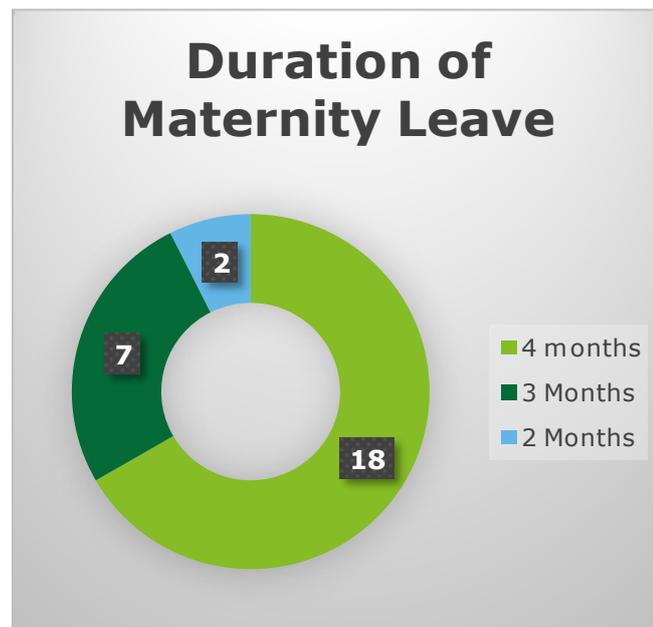


The Chart above clearly gives a similar picture to the previous one. The research recognizes that the term “Access to Health-care” and “Availability of Doctors” might not bear the same perspective for the workers. Many of the workers have demanded full-fledged medical facilities in the workplace, while an almost equally sizable amount of them expressed their satisfaction of the treatment they have received from the “floor doctors” and consider their presence “more than enough” to mitigate their health issues.

Reproductive Health

Company policies concerning reproductive health have been instrumental in bringing forward a highly motivated workforce coupled with better performance and lesser rates of absenteeism. To investigate an impact in this front, the research have gained data from the respondents regarding their reproductive health and how it has been dealt with, by the company they work for and themselves.

The following chart represents their opinions concerning their company policy on maternity benefits



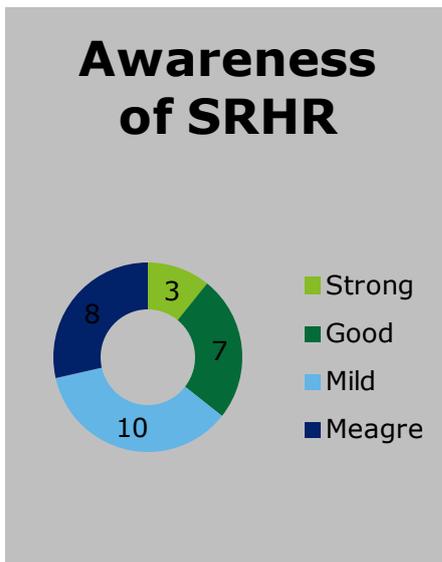
It is noted that the workers receive considerable benefit from their companies as far as Maternity Leave is concerned. A majority of them claimed to be awarded 4 months of post-natal leave. Some of the respondents also expressed the caring attitude of the managers giving them additional benefits apart from just maternity leave such as providing additional financial support during both pre and post pregnancy period.

This brings forward the possibility of understanding further in terms of how workers define "access to healthcare" and what they demand as "healthcare access" which would be further investigated.

The data above was collected from the first visit made by the research team which indicates the need for further visits which have already been scheduled and therefore the research expects to investigate further on other SRHR aspects such as family planning, child care and medical assistance. The research will also investigate the resulting benefits enjoyed by the factories as a result of adopting practices pertaining to SRHR.

Awareness of SRHR

In order to find current loopholes concerning SRHR practices, it was imperative for the research to investigate the present stance of workers regarding the concept of SRHR and its importance. In light of this situation, a select few workers were asked about their opinion concerning SRHR. The chart below represents that current status of their awareness concerning SRHR.



Conclusion

Although the empirical output has given enough encouragement in terms of the significant progress made as far as the SRHR practices are concerned, the research is yet to ascertain its consequence on the business front in terms achieving productivity, profitability and lesser employee turnovers.

This can be achieved by approaching the management of certain

factories (conversely the factories where many of the sample slum dwellers are working) and thereby gathering sufficient data from them. The research also wishes to engage in talks with experts who have already been involved in similar projects in order to find out the challenges and aspirations of being involved in such initiatives.

The results of this research would prove to be a comprehensive documentation of what the RMG sector has achieved and are yet to achieve as far as the progress of SRHR practices are concerned. From an academic viewpoint, this research also intends to create a conjecture that will allow manufacturing entities such as the Garment industries to ascertain SRHR practices as one of the methods of achieving significant profitability and productivity since such generalizations are yet to be utilized which will inadvertently revolutionize the socio-economic scenario of the country.

Case Stories of Workers

The case of Fatema

Shoripon is a 35 years old women. She is currently living in Gazipur, Dhaka. She is one of the four daughters of her parents. Her mother used to work as housemaid. Her father was a fisherman but in an accident, he lost his eyesight. Both of her parents died when she was in her mid-twenties. Her sisters live in village & all of them are illiterate. Her childhood was not so easy due to poverty. She used to work as a housemaid in her childhood. She came to Dhaka one year and two months ago for a better life. She got married at the age of 12 & her husband is a rickshaw-puller. Her only son is married. She started her career as a garment worker one year ago. She is working for future savings. She started working in the garment because most of the women she knows, works in Dhaka, specifically in RMG sector. She doesn't have any medical issue. Her seniors and co-workers are supportive. Now all she wants is to save some money for the future and also want better future for her grandchildren.

The case of Rahima

Rahima has been working for a Garments factory for past two years. She currently lives in Chandana, Gazipur. She is 23 years old. Her father is unble to work due to old age & her mother is peralized for last one year. She has four brothers & three sisters but only two of them are educated. She got married at the age of only 13 and she has two daughters. She got separated from her husband and her husband got remarried when her younger daughter was only a month old. Her elder daughter studies in class 3. Her younger daughter studies in 1. Both of her daughters are studing in a school funded by the Factory she is working with. Right now her only wish is to educate her daughters and to have secured future for her daughters

The Case of Kohinur

Sadia, 21 years old girl lives in Gazipur with her family. Currently she joined a factory because she wanted to do sewing. Her father is a construction worker and her mother is housewife. She has two brothers and one younger sister. She studied till class four, then she quit school due to poverty and lack

of interest in education. Her younger brother and sister are studying in school. She got married at the age of 18. Her first child died and she is having difficulties to conceive. She is having some physical issues but she is not understanding what to do as her husband is threatening her to have another marriage for baby. She is feeling very frusteded and she felt which also impacting on her work.

The Case of Shefali

Tarabanu aged 26, lives in Gazipur. Her father died 4 years ago and her mother lives in village with her other siblings. She has 3 sisters and 2 brothers. She came from a poor family and due to poverty she is uneducated. She got married when she was only 16 years old and has two sons now. Her husband works at fish market. Her in laws have never been supportive. She has been working in garments sector for 10 years. Her working environment is favorable. Her earnings get spent every month and she is not capable of saving money. All she wants is to come out of poverty and a better life for her sons.



Analysis of the Case Study

The case of these five individuals brought forward a far more detailed insight. It has been observed that the workers face a plethora of problems in their personal lives. One of their major concerns was to find the best means through which they will be able to sustain and even improve the livelihood of their family members especially the young ones who are being educated as a majority of workers in the cases proclaim themselves to be the sole earner of their family. The workers in the case have also claimed to be married at early stages of their lives, due to which, at times, it becomes difficult for the workers to make crucial decisions that would help safeguard the family.

From a very basic level, they expect a timely wage system from their factory. On the other hand, the workers also exhibited satisfaction in terms of the behavior of their supervisors towards them. Some of the workers even showed signs of loyalty indicating their genuine regard about the welfare of the factory environment and growth status.

This shows that despite all hardships and tribulations, the workers still have faith and aspirations towards the RMG industry. Eventually, they do recognize that their lives would have been a lot worse if they haven't had the opportunity to work in a RMG manufacturing facility



She was one of the workers interviewed. The respondents gave the researchers a lot of encouragement with their interesting stories and sharing their amazing way of life.



The Picture above shows the kind of settle that the workers live in. They stay in small quarters of brick houses. This is actually an improvement compared to the huts that they used to live in, when the RMG industry just began their journey.

Methodology

The research intends to bring forward a case study of notable slum areas located in the city of Dhaka. The concept of a study requires extensive investigation, analysis, comparisons and a conclusion which would have the potential to conduct further research in the future.

Sample Size

According to National Human Rights Commission of Bangladesh, as of the year 2015-16, there are a total of about 3 million female workers working in more than 4000 factories (BGMEA, 2017), which is considered as the total population for the research project due to the fact that this was the latest information that the research could find and thereby consider this as a standard information for the survey to be taken. Since the main emphasis was given on social as well as organizational impact, the research will therefore be conducted on slums or related areas where the workers are living to investigate the social impact and attitude and the management of factories to investigate the organizational impact. Data will also be collected from the workers in factories to verify their way of living at work and away from work. Therefore, survey will be conducted on 200 workers of 4 selected slum areas and 20 management individuals who are in control of the chosen respective factories of the sample workers.

Selection Criteria and Sample Design

The research intends to bring forward a case study of notable slum areas located in the city of Dhaka. The concept of a study requires extensive investigation, analysis, comparisons and a

conclusion which would have the potential to conduct further research in the future. Therefore, in order to create a relationship between organizational as well as social impact, the research should be conducted in those slum areas which are in close proximity with the respective factories the inhabitants work in. These factories would be the focus of organizational impact to establish relationship between their lifestyles inside and outside their factories. This would mitigate the challenge of time and distance constraints the researcher might have to contend with. Furthermore, the center of research is located in Dhaka itself which would provide additional transportation benefits. For the comparison purposes of the case study, 3 factories would be selected who are deemed to conduct the best SRHR practices. The main objective behind this is to establish norms in the case study, through comparison, that would bring forward various standards in terms of practicing certain SRHR activities that will be utilized in comparison with the respective factories of workers living in the selected slums.

Data Collection

The research will collect data through open-ended questionnaires, Focus Group Discussions, individual interviews and observation. This indicates that the result of the data collected would both be quantitative and qualitative. The quantitative data would be used for analyzing responses of workers in

questionnaires and observations. Through the concept of the Likert Scale, qualitative aspects in the questionnaires would be collected in terms of their opinion regarding the presence and absence of certain SRHR practices (Saunders et al, 2009). The FGD and individual interview would provide further information, which will be used as case evidences of the current status of sexual and reproductive health and their resulting impact in the slum and factory environments (social impact) and how they are affected by it. The FGD is intended to provide a detailed insight regarding the social impact and attitude resulting from the current SRHR practices. It aims to select randomly (in this case) a group of 15-20 workers who would be asked about their status of Sexual and Reproductive Health and how does it affect them both professionally and personally. The responses of the individual interview would provide the avenues of relationship between organizational and social impacts regarding SRHR and would further investigate the level of knowledge that the interviewee possess regarding SRHR practice and examine such awareness would make a difference in his/her views about the matter. The individual questions would entirely depend upon the questionnaires and FGD responses since, as previously mentioned, the research intends to create relationship between organizational SRHR practices and the resulting life-styles of the workers. However, the individual

assessment would explore the following:

- Current SRHR practices of the factory.
- Interviewee's awareness and knowledge regarding the term.
- Emotional connections between the management and workers.
- Average output per day. (productivity)

Data Analysis

The presence of quantitative responses encourages the research to compute statistical calculations. In order to do so, the research is encouraged to use the SPSS software which not only records the frequency of the responses but also gives graphical representations of the data which would provide a relative ease in grasping analytical correlations and the resulting justifications of data frequency. Popular comments taken from FGDs and questionnaires would then be the issue of focus for interviews with management and resulting case analysis.

The research therefore also intends to not only document the challenges but also the success stories of the factories that exhibits a better social performance. It would be interesting to observe the resulting productivity and frequency of absenteeism in these successful organizations. This would aid the research in not only obtaining information in terms of the successes of SRHR practices but also understand the perspectives of the factories in terms how they established these practices, what challenges they faced while practicing them and how did they overcome them, Further research is also required in order to understand the perspectives of the workers in terms how such practices have changed their way of life, style of professionalism and level of income.

The aforementioned positives would serve to be the best possible solutions to the problems pertaining to SRHR practices since the research intends to find those norms of SRHR that gives the benefit of increasing productivity and decreasing labor turnover in a said factory, collected from the perspectives of those factories that have seen significant success in this field.

Conclusion

Sexual and Reproductive Health and Rights of the millions of workers, here in Bangladesh is a necessity which needs to be fulfilled by the factory authorities concerned. It has to be noted that the workers interviewed thus far, for this project has only belonged to a few of the factories among the thousands in existence in this sector. The project recognizes the presence of factories that have given workers better facilities in terms of health-care, finance and even personal development programs in terms of training, awareness building, etc.

It has to be noted that if good practices pertaining to SRHR is spread in this way, it will alleviate the brand image of the factories that would be considered as the "pioneers of SRHR in Bangladesh" as well as the factories adopting those practices in order to improve their market image as well.

Endnotes

- Haque, T. (2003). A View over Discrimination and Harassment Situation of Daily Unskilled Female Workers in Work Place in Bangladesh. *Journal of Business Research*, 5.
- Akhter, S., Salahuddin, A. F. M., Iqbal, M., Malek, A. B. M. A., & Jahan, N. (2010). Health and occupational safety for female workforce of garment industries in Bangladesh. *Journal of Mechanical Engineering*, 41(1), 65-70.
- Ahamed, F. (2013). Improving Social compliance in Bangladesh's Ready-made Garment Industry. *Labour and Management in Development*, 13.
- Sikdar, M. Sarkar, S. Sadeka, S. (2014). Socio-Economic Conditions of the Female Garment Workers in the Capital City of Bangladesh. *International Journal of Humanities and Social Science*. 4 (3), p173-179.
- Karim, S (2014).). *Agenda Setting Exercise for Share-net*. Dhaka: Share-Net International. P1-105.
- Her Project. (2010). *BSR| Female Factory Workers' Health Needs Assessment: Bangladesh 1 Country Context Women represent 85 percent of the total 2.4 million employees in the Ready-Made-Garment (RMG) industry 1. Empl*. Available: http://herproject.org/downloads/country-resources/her_health_needs_bangladesh.pdf. Last accessed 20th Sept 2015.
- IPPF. (2003). *IPPF Framework for Comprehensive Sexuality Education (CSE)*. Available: http://webcache.googleusercontent.com/search?q=cache:Tz_xrDpkUSoJ:www.ippf.org/system/files/ippf_framework_for_comprehensive_sexuality_education.pdf+&cd=1&hl=en&ct=clnk&gl=bd. Last accessed 22nd Sept 2015.
- Universal Access Project. (2015). *BRIEFING CARDS: Sexual and Reproductive Health and Rights (srhr) and the Post-2015 Development Agenda*. Available: <http://www.unfoundation.org/what-we-do/campaigns-and-initiatives/universal-access-project/briefing-cards-srhr.pdf>. Last accessed 22nd November 2015.
- Star Online Report. (2015). *Child born in toilet: 3 factory officials summoned*. Available: <http://www.thedailystar.net/country/child-born-toilet-3-footwear-factory-officials-summoned-81487>. Last accessed 22nd November 2015.
- Bearinger, L; Sieving R; Ferguson J; Sharma V. (2007). Global perspectives on the sexual and reproductive health of adolescents: patterns, prevention, and potential. *Adolescent Health* 2. 369 (),
- Muhammad, A. (2011). Wealth and Deprivation: Ready-made Garments Industry in Bangladesh. *Economic & Political Weekly*. 47 (34), p23-27
- Jordal M, Wijewardena K, Ohman A, Essén B, Olsson P. (2014). Negotiating respectability: migrant women workers' perceptions of relationships and sexuality in free trade zones in Sri Lanka.. *Health Care Women International*. 35 (6), p658-676.
- Majumder, P; Begum, A (2000). *The Gender Imbalances in the Export Oriented Garment Industry in Bangladesh*. Geneva: World Bank. P1-37.
- Ali, S; Diamond, I; Naved, R; Newby, M. (1997). Transition to Adulthood of Female Factory Workers: Some Evidence from Bangladesh. *Advances in SRHR Practices*. 103 (1), p2-47.
- Shahab Uddin, S. (2015). *An Analysis of the Condition of Bangladesh Female RMG Workers*. Available: <http://southasiajournal.net/analysis-of-the-condition-of-bangladesh-female-rmg-workers/>. Last accessed 12th Jan 2016.
- Kabeer, N., & Mahmud, S. (2004). Rags, Riches and Women Workers: Export-oriented Garment Manufacturing in Bangladesh. In M. Carr (Ed.), *Chains of Fortune: Linking Women Producers and Workers with Global Markets* (pp. 133-164)

Contacts



**Dr. Meghna Guhathakurta
(Project Coach)**

Executive Director, Research
Initiatives Bangladesh, House 54,
Road 11, Block F, Banani, Dhaka-
1213, Bangladesh.



**Ms. Farhana Jannat (Lead
Researcher)**

Lecturer, BGMEA University of
Fashion and Technology, 105 S.R.
Tower, Sector 7, Uttara, Dhaka-
1230, Bangladesh.

