## **CONTACT REPORT, NOVEMBER 2024**:

Grantee Name: Speak Up for the Poor

Reports Due: May 2024 and November 2024

The purpose of this report is to ensure contact with Together Women Rise every six months during the course of a grant. This report may be sent in the body of an email to TOGETHER WOMEN RISE Program & Grants Manager, Quinn Hayes at grants@togetherwomenrise.org

**Organization**: Speak Up for the Poor

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Project Name: Girls Health and Safety Program (an element of Speak Up's Girls Education and

Empowerment Program in Bangladesh) **Grant Start Date**: December 1, 2023

## 1. Please describe the progress you have made with this project in the last six months. (300 words or less.)

Our three-person Girls Health and Safety Team (described in our first Contact Report and in our Interim Report submitted May 2024), along with the rest of our GEP staff team, have continued to conduct village Health and Safety Seminars and Health and Safety Training Meetings throughout the working area of the GEP, as originally expressed in our grant proposal and budget that we submitted last year.

In the past six months, we have held an additional 26 group meetings which have given at least 1,205 participants from our GEP exposure to our girls' and women's health and safety curriculum, an average of about 46 participants per meeting.

As indicated in our first Contact Report from May 2024, in addition to education and training, we also distribute personal health and hygiene supplies at these meetings. And, a member of the three-person Health & Safety Team (Antara, one of the MATS graduates) continues to integrate health awareness and girls' and women's safety training into all aspects of the Girls Empowerment Program (GEP) in Bangladesh.

## 2. Please describe challenges or setbacks you experienced with this project during the last six months. (300 words or less.)

Transportation between the city (where our office, and our Women's Dormitories are located) and village / rural areas (where most of the GEP girls and young women live) is always a challenge, roadways are often crowded and difficult to navigate.

As indicated in our first Contact Report, there is a very low baseline in Bangladesh for counseling and mental health awareness, it is not an aspect of the culture and society to anywhere near the degree it is in the US. So, the basic ability of staff and adults to do a good job of individualizing care for girls tends to be lower than in America, for example. It is a challenge to fully train our GEP staff team to individualize care for girls, and to provide expert counsel to them. Due to the typical pressures of teenage girls' lives, and the tremendous problems that many girls face at home and in relationships and the pressure to marry

and other gender-related issues, mental health issues and even suicide attempts are an ongoing common challenge among teenage girls in Bangladesh.

There are also many cultural obstacles and ways of thinking that make it difficult for Bangladeshi girls to think about their long-term planning for health and safety. Girls believing that they have agency to truly build their lives and futures, is often a huge mental obstacle. Shaped by cultural forces, many girls tend to have a very traditional mindset, that their parents will eventually decide everything, and when married the husband will decide everything. This level of thinking among the population with whom we work is our greatest obstacle at times, and we are always seeking to develop a sense of agency and self-confidence in the girls and young women of the GEP and our working area.

## 3. What progress and challenges do you expect in the next six months? (300 words or less.)

Regarding the topic of mental health and attempted suicide above, we continue to provide counseling and support for specific girls who are suicide attempt survivors, and girls who have experienced harassment or abuse. Our health and safety team is doing more counseling and teaching on these issues that we had anticipated.

Dengue fever, carried my mosquitos, has been a huge health issue around Bangladesh this past year. We have adding teaching on this issue to every Health Seminar, provided medications, and conducted health screenings for many village girls on this topic. We have also screened and tested all the young women in our dormitories. As with all of our health and safety programming and activities, Together Women Rise funding has assisted with this.

Bangladesh has now committed to providing free HPV vaccines to all girls aged 10 - 14. Our health and safety team is helping all GEP girls to receive them. Some GEP girls' parents easily give permission. Others need more counsel or encouragement. Some families have religious objections to the HPV vaccine. We are taking special care to handle parent questions and permissions, letting parents ultimately decide, though we suggest in most cases that the vaccine is a good idea.

Head lice is another common intervention and teaching topic of our health and safety team. Most Bangladeshi girls have very long hair, and in poor and crowded conditions, lice is a frequent threat. Our team gives out lice treatment kits, and addresses other common practical needs such as stomach aches from drinking impure water, menstrual pain, and cold and flu. Much of the felt-need for girls and women in our working area is with these day-to-day issues.

(End of November 2024 Contact Report)

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