



ONLINE VIOLENCE

and
e-services in
Bangladesh

LEARNING AND PLANNING STUDY
FOR UNDERSTANDING HOW POPULATIONS
AT RISK FOR HIV CAN BE REACHED VIA
E-SERVICES IN BANGLADESH.

INTRODUCTION

UNAIDS Bangladesh, in partnership with the Sex Workers Network of Bangladesh and Save the Children, conducted a comprehensive study titled "Understanding How Populations at Risk for HIV Can be Reached via E-services in Bangladesh in 2022."

This study aimed to address the challenges caused by the COVID-19 pandemic, which disrupted traditional in-person outreach and service delivery.

The primary objective was to identify online audiences at risk for HIV and assess their HIV risk profile, technology usage, social media interests, access to HIV services, and their preferences for a comprehensive range of HIV prevention, care, support, and treatment services.

The collected information also encompasses the prevalence and impact of online violence among populations that are at a higher risk of HIV.



SUMMARY

The study reveals strong interest, approximately 95% among respondents from general and key populations, in using digital platforms for accessing HIV-related health services, including HIV testing kit booking. Key populations are (KPs) also interested in online education, HIV information seeking, and peer interactions.

About 73 individuals (7%) within the general population (GP) self-assessed engaging in potentially risky HIV-related behaviors, representing a group that could be unreachable and underserved by existing HIV prevention services.

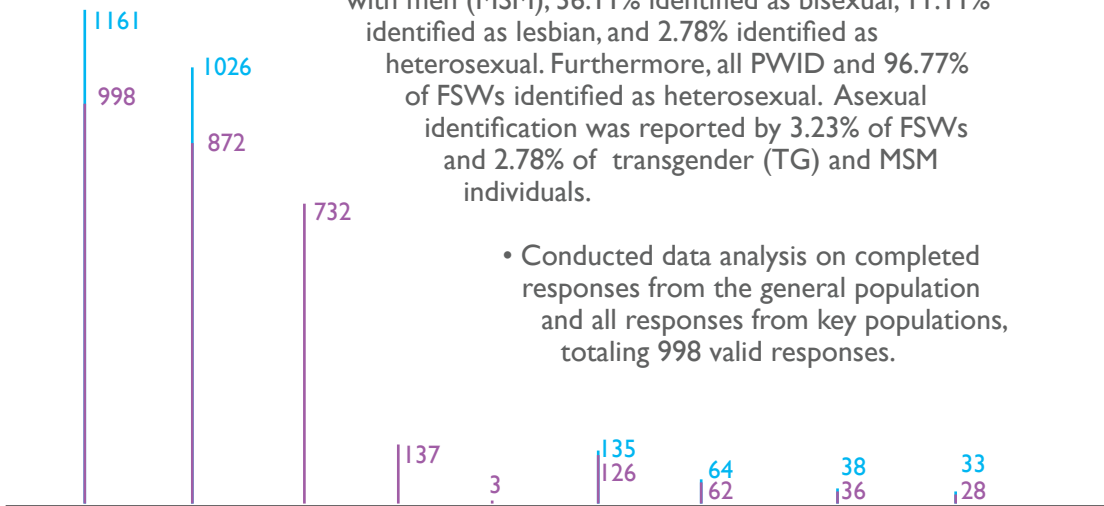
The study also brought to light concerning levels of online violence experienced by KPs. Regrettably, many victims opt not to report these incidents. About half of internet-connected key population respondents use online platforms for health-seeking practices, while one-third use Facebook and WhatsApp for drop-in-center communication.

A comprehensive web-based platform for virtual services, including appointments and violence responses, is proposed to enhance HIV programs for both populations, and a pilot program is suggested for addressing challenges and planning for scaling up.



METHODOLOGY

- Utilized a cross-sectional design.
- Employed a combination of quantitative and qualitative data collection methods.
- Prioritized participant anonymity to ensure privacy and confidentiality, abstaining from collecting personally identifiable information.
- Engaged a total of 1161 respondents, of which 1026 participated in Computer Assisted Web-Interviewing (CAWI) using the SurveyMonkey platform.
- Implemented random stratification techniques for participant selection from the general population.
- Specifically sampled 135 individuals from key populations affected by HIV, targeting Dhaka-based drop-in centers and HIV program-covered hotspots.
- Among the sampled KPs individuals other than female sex workers (FSWs) and people who injects drug (PWID), 44.44% identified as men who have sex with men (MSM), 36.11% identified as bisexual, 11.11% identified as lesbian, and 2.78% identified as heterosexual. Furthermore, all PWID and 96.77% of FSWs identified as heterosexual. Asexual identification was reported by 3.23% of FSWs and 2.78% of transgender (TG) and MSM individuals.
- Conducted data analysis on completed responses from the general population and all responses from key populations, totaling 998 valid responses.



	Number	GP	Men	Women	GDP*	KP	FSW	TG/Hijra/MSM/MSW	PWID
Total Respondents	1161	1026	-	-	-	135	64	38	33
Counted Respondents	998	872	732	137	3	126	62	36	28

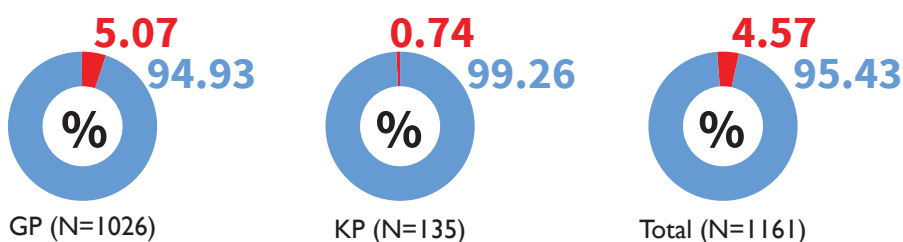
*Gender diverse people (GDP) from general population

HOW MANY RESPONDENTS DESIRE HIV PREVENTION AND TREATMENT E-SERVICES?

The survey found that almost 100% KPs showed interest in using apps/websites for HIV-related health services

Respondents interested in using web platform for HIV services

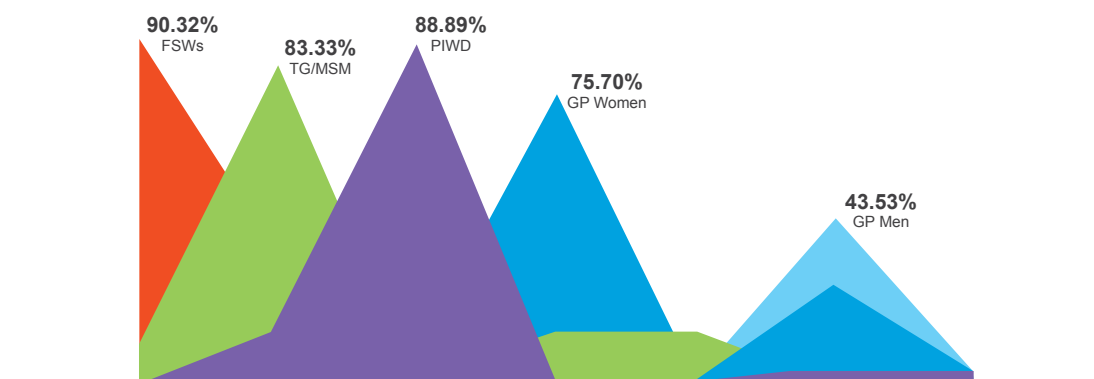
● Interested in e-services ● Not interested



HIV RISK ASSESMENT AMONG THE RESPONDENTS

(N=727, GP=601, KP=126)

■ GP Men ■ GP Women ■ FSW ■ TG/MSM ■ PWID



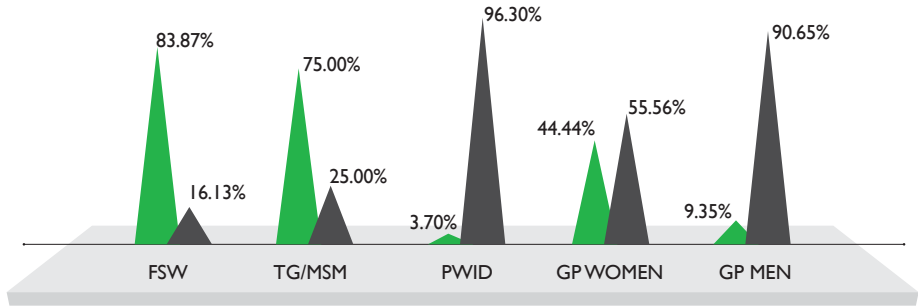
	Involved in commercial sex	Have multiple sex partners	Injecting drug user	I'm not at the risk of HIV	My partner/spouse at the risk of HIV	I'm not sure of my HIV risk	History of unsafe blood transfusion
■ GP Men	3.07%	8.09%	1.62%	61.49%	1.46%	43.53%	3.24%
■ GP Women	0.93%	0.93%	0.93%	75.70%	1.87%	26.17%	2.80%
■ FSW	90.32%	33.87%	1.61%	8.06%	4.84%	1.61%	0.00%
■ TG/MSM	11.11%	83.33%	0.00%	13.89%	13.89%	0.00%	0.00%
■ PWID	0.00%	14.81%	88.89%	0.00%	0.00%	3.70%	3.70%



ONLINE VIOLENCE FACED BY POPULATION GROUPS

N=998 (Men:732; Women:137; FSW:62; TG/MSM:36; PWID:28)

Yes No



About 84.14% of victims did not report the abuse to any authority.

COMMON TYPES OF ONLINE VIOLENCE

Unsolicited nudity or sexual contents in inboxes

65.22%

Women in the general population

59.62%

Female Sex Workers

48.15%

Transgender/Gender Diverse People/ Men who have sex with men

41.30%

Women received sexist or misogynistic comments.

THREATS OF PHYSICAL ABUSE OR MURDER



Transgender/Gender Diverse People/Men who have Sex with Men (51.85%) and Female Sex Workers (42.31%), but lower among women in the general population (10.87%).



GENDER DISCRIMINATION

62.96%

of Transgender/Gender Diverse People/Men who have Sex with Men faced this issue.



ATTACKS FOR SUPPORTING LGBTQ+

55.56%

of Transgender/Gender Diverse People/Men who have Sex with Men experienced this.



IDENTITY THEFT

30.43%

of women and 29.63% of Transgender/Gender Diverse People/Men who have Sex with Men were victims.



OTHER FORMS OF VIOLENCE

Exposure of intimate photos, doxing, cyberstalking, mobile banking theft, sextortion, morphing, and sexual harassment through showbiz offers were also reported.



THE IMPACT OF ONLINE VIOLENCE

Online violence takes a toll on victims' mental and physical well-being:

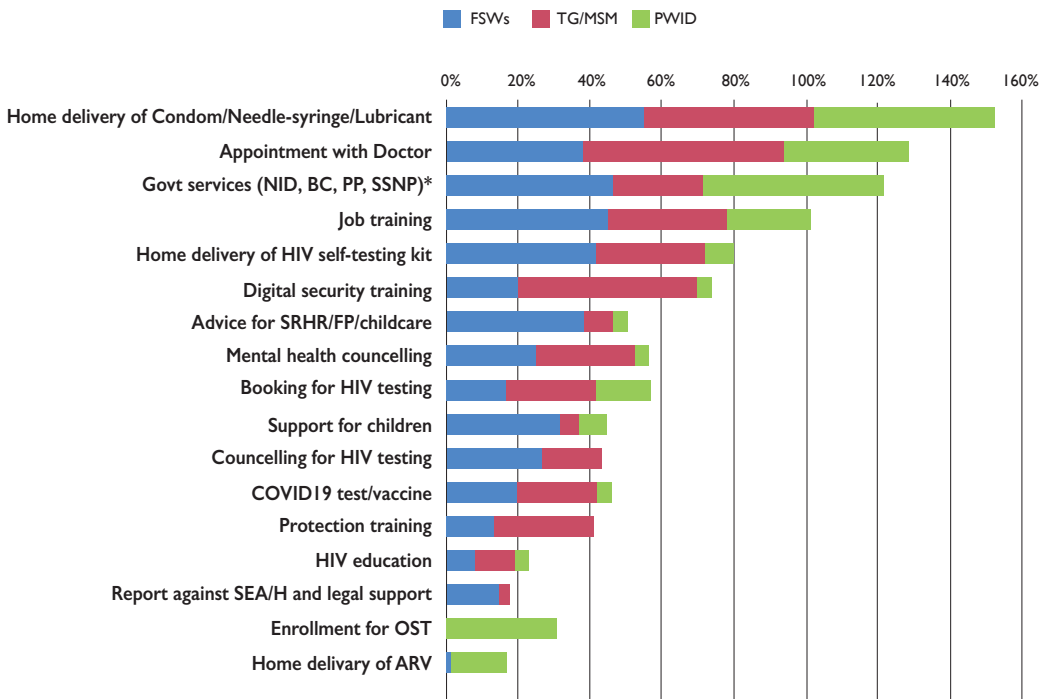
Mental illnesses were reported by 66.67% of Transgender/Gender Diverse People/ Men who have Sex with Men, 65.22% of women in the general population, and 59.62% of Female Sex Workers.

Loss of safety and security was felt by 66.67% of Transgender/Gender Diverse people/ Men who have Sex with Men, 46.15% of Female Sex Workers, and 36.96% of women in the general population.

Physical problems such as gastrointestinal issues, central nervous system disorders, chronic pain, and insomnia affected 36.96% of women.

13.46% of Female Sex Workers turned to substance use, and 11.54% attempted suicide due to online harassment.

TYPES OF E-HEALTHCARE AND E-SERVICES MENTIONED BY THE KEY POPULATIONS (N=122)



*NID: National identification, BC: Birth certificate, PP: Passport, SSNP: Social safetyNet program



RECOMMENDATIONS

Develop a web-based platform (website+apps+social media like Facebook and Messenger) for e-services within the HIV program. This platform should enable online appointment booking, virtual case management, and responses to gender-based violence for both key populations (KPs) and the general population (GPs), linking to the existing HIV program service delivery system and updating the modality for GPs.

Coordinate strategies with existing reporting options, provide training for responding to online violence, and collaborate with law enforcement and ministries.

Risk behaviors exist among the general population (those who have not engaged with the HIV program). Introduce online HIV services tailored for GPs.

Implement specific virtual case management for each KP group, managed by their respective Drop-In Centers (DICs), service providers, and communities.

Develop differentiated awareness campaigns and digital literacy training, tailoring content to adolescents and key populations for better engagement.

Address the challenge of 'digital safety and security' for key populations by mitigating online social stigma, bullying, and harassment through proactive measures.

Navigate the legal complexities, particularly regarding the criminal offense perception according to some laws. This involves cautious consideration when seeking and providing online services.

Promote empowerment through technology by bridging the science, technology, engineering and mathematics (STEM) gender gap for FSWs, developing female-centric technology (femtech), and encouraging greater female participation in STEM fields.

Invest in research to identify effective practices used in other regions for addressing online violence, adapting them to the specific socio-cultural context of Bangladesh.