## Best Perform of Rights and Justice in the Brothel Based Female Sex Worker's Community

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Abstract: Background: The purpose of this interventions was to describe the source and extent to increase health seeking rights and uptake of quality integrated maternal health, family planning and HIV information, clinical-non clinical services, and commodities amongst young people age 10-24 among brothel based Female Sex Worker's in Bangladesh. Such Knowledge will equip with information to develop more appropriate and effective interventions that address the problem of HIV/AIDS and SRHR within the brothel based female sex worker's community. Methods: Before start the intervention we observed situation in brothel and identify lack of knowledge about health issues, modern health facility, sexual harassment and violence & health rights. To enable access to the intervention obtained permission from a series of stakeholders within the brothel system. This intervention to the most vulnerable young key people during January 2014 to December, 2015, it designed an intervention that focuses on using peer education and sensitization meeting with self help group leader's, pimbs, swardarni, house owner, local leaders, law enforcement agencies and target young key people (YKPs) through peer educator's distributed BCC materials and conducted one to one and group session issues of HIV/AIDS, life skill education, maternal health, sexual reproductive health & rights, gender based violence, STD/STI and drug users in the community. Set up community based satellite clinic to provided clinical-non clinical services and commodities for SRH, FP and HIV including general health among brothel based FSWs. Peer educator frequently move and informed target beneficiaries' age 10-24 YKPs about satellite clinic as well as time & date in the community. Results: This intervention highly promotes of brothel based FSW utilization of local facility based health providers private and public health facilities. 2400 FSWs age 10-24 received information on SRHR, FP and HIV as well as existing health facilities, most of FSWs to received service from traditional healer before intervention. More than 1080 FSWs received clinicalnon clinical services and commodities from satellite clinic including 12 ANC, 12 PNC and 25 MR. Most of young FSW age 10-24 are treated bonded girls under swardarni, house owner and pimbs, they have no rights to free movement as per need. As a result, they have no rights for free movement. However the brothel self help group (SHG) has become sensitized flowing this intervention. Conclusions: The majority of female sex workers well being regarding information on SRHR, FP and HIV as well as local health facilities now they feel free to go outside facilities for better health service. not only increased FSWs' vulnerability to HIV infection and sexual reproductive health rights but also had huge implications for their human rights. This means that even when some clients impinged FSW's rights (for example avoiding payment for services under the pretext of dissatisfaction), they might not be able to seek redress for fear of being ejected from the brothel. They raise voice national & local level different forum.

**Keywords:** ANC, HIV, PNC, SRHR

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