Despite accepting gender based violence as public health issue, no serious attempt has been made to develop and test comprehensive models for providing care and support to rape survivors (RSs). Services like provision of emergency contraceptive pills (ECP) and post exposure prophylaxis (PEP) need to be provided within 72 h after crime. This paper provides findings of a situation analysis of police stations and hospitals with respect to provision of reproductive health (RH) services and collection of forensic evidences which are critical in getting justice to victims. The study covered three cities of India and four cities of Bangladesh. In both countries though printed guidelines for managing RSs exits, it was not available at any police stations and few were even aware of the guidelines. They were neither aware nor providing any RH services or information to RSs. In both countries few police personnel were trained in managing rape cases or counselling the survivors. Generally RSs had to wait at police station before case is registered and RSs sent to hospital. No uniform protocol for managing RSs at hospitals exists. At most hospitals, sexually transmitted infection (STI) management for rape survivors was not available. In few hospitals, advice on STI prevention, referral to voluntary counselling and testing centre and prescription for PEP
was given, but neither PEP/ECP was stocked. Blaming victims and stereotypical negative attitude towards RSs was observed among both doctors and police.