



Adolescent girl in Chittagong, Bangladesh © Nathalie Bertrams / GAGE 2019



Adolescent psychosocial well-being and voice and agency in Chittagong, Bangladesh

Policy and programming implications from the GAGE baseline findings¹

Authors: Khadija Mitu, Muhammed Ala Uddin, Laura Camfield and Jennifer Muz

Introduction

While there is little research available on psychosocial well-being in Bangladesh, and adolescent psychosocial well-being in particular (Stavropoulou et al., 2017), some studies have shown increases in stress around puberty for girls (Amin, 2015) and in urban areas (Dey et al., 2014). A study of the psychosocial well-being of primary school children in Chittagong town found that 20.3% had pro-social problems, 19.3% had conduct problems and about 1.5% had symptoms of emotional distress (Bairagi et al., 2013). Adolescents of Bengali ethnicity and high-achieving adolescents expressed higher self-acceptance and lower anxiety compared with their peers (Islam et al., 2014).

Assessments of mental health are rarely integrated into surveys of adolescents (Amin, 2015); however, where this has happened, incidence of depression has been found to be higher for girls and in urban areas, owing to factors such as maternal death, experience of harassment and forced marriage. Dey (2018) found that male adolescents experienced loneliness more than female adolescents and this loneliness – thought to be due to a lack of emotional support during puberty – was linked to high rates of aggression. The main ways adolescent girls in Bangladesh cope with poor mental health are being on their own (44%), listening to music (27%) and not talking to others (14%) (Amin, 2015).

This brief draws on evidence from GAGE (Gender and Adolescence: Global Evidence) – a unique longitudinal mixed-methods research and impact evaluation study focused on what works to support the development of adolescents' capabilities during the second decade of life (10–19 years) (GAGE consortium, 2019 forthcoming).

Research methodology

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GAGE employs a mixed-methods research approach in order to explore its research questions. In Chittagong, the quantitative sample focused primarily on in-school adolescents in Grade 6, making the sample almost entirely adolescents aged 10–12. A small sample of out-of-school adolescents and adolescents with disabilities were also surveyed. Overall, 1,769 quantitative interviews were conducted, alongside qualitative interviews with 36 adolescents and their families (parents and older siblings, to capture age-related differences) and communities. Baseline data collection took place in March to June 2018.

Research sites

Quantitative research sites in Chittagong were based on the locations of 39 government schools that were selected for inclusion in the approved World Bank/government of Bangladesh Health Support Project, and covered the districts of Brahmanbaria, Chandpur, Chittagong, Cox’s Bazar and Rangamati.

In Chittagong division, Chittagong, Cox’s Bazar and Rangamati districts were selected for the conduct of surveys at private schools and madrasas nearby the targeted government schools, to enable a comparative study of school types. In addition, three sites were chosen for the qualitative research: one in Cox’s Bazar district (Community A), one in Chittagong district (Community B, in the district capital) and the other in Rangamati Hill district (Community C, also in the district capital). These were chosen to capture different kinds of locations (urban/peri-urban), school types and access to services and NGO programming.

Resilience and emotional efficacy

Adolescents in the quantitative surveys exhibited low levels of psychiatric distress, with average GHQ-12 scores around 1.24 out of 12. The GHQ-12 is an internationally validated measure of mental ill-being. There were no significant gender differences in psychiatric morbidity, self-esteem or levels of trust overall, although boys were twice as likely to be members of groups, even though overall the numbers

were low (13% vs. 6%). Out-of-school adolescents were less likely than in-school adolescents to have friends they trusted, to be members of a group or to talk to parents/guardians on a variety of topics. There were significant differences between the districts, with those living in Chittagong twice as likely to be members of groups as those in Cox’s Bazar and Rangamati, while also reporting significantly higher psychiatric morbidity.

In the qualitative interviews, the most common source of worry was pressure to perform well in school. Adolescent boys and girls have to attend coaching as well as school, and many parents also pay for home tutors. They get homework from all of them and if they fail to do this the teacher or tutor punishes them. The school and coaching schedule means adolescents have little time for recreation or clubs.

Younger adolescents are more worried than their older counterparts about their performance. The older cohort mostly reported anxieties and worries about fights and quarrels in classrooms, at home and in the community (there were no variations in this across communities and school types). In addition to the age difference, there were gender differences in how adolescents expressed anxiety and worry. Older adolescent girls reported their worries about social and moral restrictions regarding mixing with boys and going alone to different places. While girls and their parents expressed many anxieties regarding girls’ safety and security in relation to sexual abuse, boys and their parents talked about the risks of substance abuse and road accidents.

A 12-year-old Chakma boy in Community C expressed his worries about the rainy season. Geographically, Community C is hilly, and there are risks of landslides there during the rainy season. The boy reported that in the previous year,¹ a massive had landslide destroyed their home and he was worried that this could happen again. Specific to Community C, adolescents expressed some stress regarding communal tensions. A 16-year-old

¹ In June 2017, more than 100 people died and thousands lost their home as a result of huge landslides in Community C.

Table 1: Research sites

Name	Location	Households	Social and physical infrastructure	Access to services
Community A	Cox’s Bazar, peri-urban	88,391	48 km from division capital, vulnerable to cyclones and tidal bores, some migrants	Reasonable access to educational and health institutions, NGO services
Community B	Chittagong urban centre	65,671	District capital	Excellent access to educational and health institutions, NGO services
Community C	Rangamati, peri-urban	26,872	District headquarters, mixed Bengali settlers and indigenous people (Chakma, Marma, Tripura, Tanchangya, Pangkhao, Lushai)	Good access to educational and health institutions, NGO services

Chakma boy talked about witnessing a clash between the local people and the police where the police opened fire on the people, which he had found terrifying. A 12-year-old Chakma boy told us that the Bengali students in his class blamed him for doing things he had not done and that he was afraid of the head teacher, who dismisses students from schools if they break rules:

He [the head of the school] gives a TC [transfer certificate] to the students who do indecent things. There are some Bengali classmates who blame me for their misdeeds when I didn't do anything.

There is informal segregation between the Bengalis and the other ethnic communities living in Community C. In a community mapping exercise, a group of Bengali adolescent girls marked the Chakma-para (Chakma neighbourhood) as a place to avoid. They said they did not go there and, *'If anyone sees a [Bengali] girl there then he/she would think that she is a bad girl.'* They also said that the boys from Chakma-para were bad. Adults from Bengali and other ethnic communities expressed grudges against one another. Bengali adults blamed the 'open culture' of the Chakma² people (in comparison with that of Bengalis), whereas people of other ethnic backgrounds felt threatened by Bengalis. Some Chakma adults expressed their worries about communal violence as well as the military aggression in the area.

In terms of sources of support, 95% of adolescents reported having a friend they trusted; this is consistent across genders, locations and school types. Reflecting this, in qualitative interviews, adolescents said they sometimes shared things with their peers that they did not even share with their parents. For example, an adolescent girl from Community B said, *'Mom doesn't know many secrets, but Saba and Keya know most of those.'* Adolescents also reported fairly high levels of communication with their parents, on average discussing 1.8 topics out of 3 (education, bullying, religion) with their fathers and 2.2 out of 3 with their mothers. In general, the quantitative data shows that both boys and girls are more likely to talk to their mothers than their fathers, across all topics. There is no gender difference in terms of adolescents speaking with their mothers, but girls talk to their fathers about 11% fewer topics than boys do.

This is confirmed by the qualitative interviews, where adolescents described spending more time sharing their secrets, feelings, fears and anxieties with their mothers and siblings than with their fathers, because fathers spend most

► If anyone sees a [Bengali] girl there then he/she would think that she is a bad girl.

(Bengali adolescent girls talking about being seen in Chakma-para)

of their time outside the house working. Adolescent girls reported sharing their problems and anxieties with their mothers and elder sisters, especially around the time of their first menstruation. Adolescent boys shared their problems with their fathers as well. A father of an adolescent girl in Community B said he talked to his children while watching TV with them and inspired them to study hard to get into good schools. Children with disabilities are particularly dependent on family support to look after themselves, to go to school and to stay safe and secure. For example, a girl with impaired mobility in Community C said she depended on her mother to assist her in daily activities.

Voice and decision-making

Within GAGE, voice and agency comprises mobility, access to information and being able to participate in decision-making and in civic activities. Adolescents' ability to exercise voice and agency relates to their capabilities, but also to their socio-cultural context, their economic participation and their families' social status and political connections. Girls' lack of agency is most evident in marriage decisions. In Chittagong, 59.6% of 15–17-year-old married girls would have preferred to marry at an older age (NIPORT et al., 2016). Access to technology can amplify adolescents' voice, although nationally 47% of women aged 15–49 have no exposure to any mass media on a weekly basis (43.6% in Chittagong) (ibid.). One study demonstrated the importance of access to media for voice and agency: those who had married before or at 20 years old were 62.4% more likely to have no access to mass media (Mahmud and Amin, 2006).

The government, women's organisations, donors and development partners have all played a key role in the introduction of empowerment initiatives (Stavropoulou et al., 2017). In recent years, these have paid greater attention to adolescents (Sultan and Nazneen, 2018). Nonetheless, practices such as patrilineal inheritance and patrilocal residence after marriage in Bangladesh create systemic prejudice against girls, reflected in the extent to which female infants are seen as a 'burden' rather than a 'blessing' (UNESCAP, 2012). However, son preference appears to be decreasing, thanks to greater access to education and economic opportunities and increased exposure to the media (Priyadarshani and Rahim, 2010; Kabeer, 2012;

² Bengalis usually use the general term 'Chakma' for all ethnic communities, since Chakmas are the majority among them.

▮ If I say something to my son, he will say, “I don’t have to listen to you, you can’t understand my situation.”

(A father in Community B)

Yarrow et al., 2015), as discussed in the accompanying briefs.

In relation to decision-making, previous research has shown that girls are less able than boys to make a range of important decisions, for example choosing their own partner for marriage (Yarrow et al., 2015). Fifty-seven percent of boys and 36% of girls agreed that household decision-making should be done mostly by the men of the family (ibid.). This echoes Bangladesh Demographic and Health Survey (BDHS) data suggesting that a third of married adolescent girls have no say in household decision-making (compared with a sixth of older wives) (NIPORT et al., 2016). The majority of girls and boys surveyed in Amin’s (2015) study agreed that women should always obey their husbands, and similar views were expressed in the 2014 BDHS: 29.2% of women said they were unable to make decisions about their own health care and 32% were not able to go to alone (or with children) to a health care facility (NIPORT et al., 2016). The lesser agency of adolescent girls is also reflected in the higher rates of domestic violence they face (BBS, 2017).

In the survey data, adolescents reported having a say in half of the decisions commonly made in relation to adolescents (e.g. how much education to attain, when to marry, what to do during free time). The number of decisions adolescents felt they had a say in did not vary by gender in the quantitative data, although adolescents who were out of school reported making 24% fewer decisions.

However, the qualitative interviews provide additional insight into adolescent decision-making and suggest there may be some gender differences. In all study sites, girls were less likely than boys to make a range of important decisions, particularly in family matters. For example, most girls do not choose their own partners for marriage. While we have no data on love affairs, there are some families that are connected through family or friendship ties, and, in those cases, the prospective spouses will know each other. In general, girls have almost no say in household decision-making.

Many adolescents can make decisions that concern them directly on their own, but, generally, these are minor decisions. Young boys in Community A and Community C said they could choose their clothes, buy fruit and select places to visit but this was not true for boys in Community

B, owing to greater fears about their safety. This is borne out in the quantitative surveys: adolescents in Cox’s Bazar district reported making the most decisions on average and those in Chittagong the fewest. Additionally, in general, adolescents in rural areas reported more involvement in decision-making than adolescents in urban areas did.

Irrespective of sex, older adolescents reported having a say in more decisions on average than younger adolescents. The head teacher of a Community C government boys’ high school said that some adolescent boys made their own decisions after the Senior School Certificate (SSC) examinations and even married without their parents’ permission. In a group discussion with men in Community B, one respondent said, *‘If I say something to my son, he will say, “I don’t have to listen to you, you can’t understand my situation.”’* Parents are also more respectful of their children’s views as they believe they know more than they did. The upazila academic supervisor in Community A said that, in his time, they listened to their parents, and did what their parents advised them: *‘When I got admitted to Dhaka University, I had to change subject as per my uncle’s decision. But now, this is not possible. Now adolescents just do what they feel is good for them.’*

Survey data indicates that adolescents are generally comfortable expressing their opinions both to those older than they are and, especially, to friends. Overall, 70% of adolescents reported feeling comfortable expressing opinions to people older than them, and 90% said they were comfortable expressing opinions to friends. Gender does not affect confidence in expressing opinions, but rural adolescents are more likely to feel comfortable expressing their opinions to a friend.

Mobility and access to peer networks and safe spaces

Our data and data from national surveys suggest girls and women experience reduced mobility and few places are safe for them. The 2014 BDHS asked married women of reproductive age whether they could go to a health centre or hospital alone or accompanied by their children. Seventy percent of all respondents said they could but only 43% of married adolescent girls aged 15–19 were able to (NIPORT et al., 2016). Our Dhaka urban survey data supports this finding: 95% of girls need permission to go to at least one place, compared with only two-thirds of boys. One reason for this is a common perception that girls are more at risk of sexual harassment in public spaces. In the Chittagong data, both boys and girls reported high rates of needing permission to go places (96% need permission overall), but girls are still 6% more likely to report needing permission to go to at least one place than boys. The disparity in mobility

Case study: Amena's story

Amena is an 11-year-old girl living in Community C. She has not been able to walk since her birth as she cannot move one of her legs. She went to a special school for disabled children in Community C. She received a wheelchair from that school. However, she stopped going to the school as her wheelchair broke. Not having a wheelchair has meant that she needs to be carried around on her mother's lap and her mother assists her in all her daily activities.

Her mother wants to send her to a residential facility for disabled children as she is worried that it will be difficult for her to take care of Amena when she grows up.

Amena expressed her frustration about her relationship with her family members. She said that her mother, her elder sister and even her cousin beat her. She reported that when she is hungry and asks for food, her sister does not give it to her. This makes her very angry and she cries out loud. She said she gets furious if she asks for food and her mother doesn't give it to her right away. She also said her mother beats her sometimes. She feels very angry and also hits her mother.

between boys and girls is clear when looking at behaviours related to mobility rather than the need to ask permission. While 43% of boys leave their communities at least once a week, this is true for only 28.5% of girls. Moreover, girls have 2.5 times more restrictions on their dress than boys do.

Qualitative respondents said that boys did not always obtain permission from their parents, as fewer social norms exist around boys' mobility and activities (roaming around, playing, etc.). Some parents say they did not have any control over their sons' movements, as the latter did not listen to them. However, in all sites, girls do not move without permission from their parents, particularly mothers. An older adolescent girl in Community B was a science student at SSC level and wanted to continue to Higher Secondary Certificate (HSC) level, but this required extra coaching or tuition. This would have meant going fairly far from her home, so her father advised her to choose arts instead.

We found wide variation in mobility across location. Rural adolescents have less mobility than urban adolescents, as they are 71% less likely to leave the village at least once a week and have 32% more restrictions on their dress when they travel. There are also differences across the districts in Chittagong. Overall, 55% of adolescents leave their community at least once a week but only 11% of those in Cox's Bazar and 15% in Rangamati districts do. There are similar differences in mobility in the qualitative research sites. Adolescents in Communities A and B are less likely to leave their families than those in Community C, who need to move from the more remote hilly areas to attend school. These adolescents are predominantly indigenous; Bengali settlers are mostly in the district or *upazila* headquarters, where most schools are located. To attend schools, non-Bengali students stay near the school with relatives (e.g. uncle, aunts or friends). However, this is not true for madrasa students, who are exclusively Bengali Muslims. In Communities A and B there was a greater range of services

and employment opportunities, which meant that they did not need to travel.

The qualitative interviews with older siblings also revealed age differences in terms of mobility. While older adolescent girls in urban areas said that they went to different places, such as the library, bookstores or restaurants with their friends, younger adolescent girls said they were not allowed to go outside without an adult family member. They may visit neighbours' or friends' houses nearby but may not go further than that. Older Bengali adolescent boys and girls reported that they maintained a distance from the opposite sex, as approaching them is seen immoral in their communities. In Chittagong, adolescents with disabilities are 37% less likely to leave their community at least once a week but have half as many restrictions on their dress when they move around, possibly reflecting a belief that their disabilities make them less likely to be sexually harassed.

One factor that may limit adolescent mobility is the limited space for recreation, especially in Community B; across the sites, adolescents reported that they did not have clubs at school. While in a couple of sites there are BRAC-run Kishori clubs, these are not free to access and, even though the parental contribution of 3,000 BDT is small relative to the 18,000 BDT it costs to run the club, this is enough to deter parents. Boys are more likely to get parental support for club activities. One boy from Community B said, *'My father said that I will get admitted this year into Rising Star Club, a sports club for boys.'* However, they also come under increasing pressure to prioritise their schoolwork instead. During a discussion in a government school in Community B, one boy said *'Now we don't get time. Every morning we have to go to school.'* Another had left the professional cricket club because of study pressure.

In general, adolescents felt safe, with 89% of adolescents feeling secure walking in their communities during the day and 96% feeling safe at school. Feelings of safety walking in the community at night are lower, with



13-year-old boy in Chittagong, Bangladesh © Nathalie Bertrams / GAGE 2019

only 33% of adolescents reporting this. There are some gender disparities: girls are 7% less likely to report feeling safe walking around their community during the day, and this difference grows to 21% less likely among *madrassa* students. While there are no gender differences in feeling safe in the community at night overall, girls in rural areas are 25% less likely to feel safe than boys. Reflecting this, adolescent girls across the sites reported that their parents restricted their mobility, and parents and teachers confirmed this. Since girls may face sexual abuse when they go outside, teachers and parents teach them not to go outside alone and to dress and behave 'properly' to avoid boys' attention. Meanwhile, older adolescent boys go to the playground, market place, restaurants and places where the community gathers and younger adolescent boys reported going to the playground to play with their friends. A group of older adolescents girls from Community C said, 'All places are safe for boys,' while marking many places as dangerous and unsafe for girls.

As with differences in mobility, there are differences across sites in feelings of safety. Rural adolescents are 15% more likely to feel safe in the community during the day, 5% more likely to feel safe at school and 7% more likely to feel safe travelling to school. While there are no differences

📌 All places are safe for boys.

(Adolescent girls in Community C)

across districts as to feeling safe walking around at night (33%) or at school (96%), adolescents in Chittagong are least likely to feel safe walking in their community during the day and travelling to school. Qualitative interviews confirmed this variation. In Community B in Chittagong, boys must return back home before the sun sets, whereas girls must not go outside after they come back from school. Boys in Community C enjoy relatively more freedom than boys in Community B. Unlike in the villages, in the city neighbours are not relatives or well known. Moreover, parents are worried about potential risks (e.g. drugs, trafficking, political involvement) for their adolescent boys, as discussed in the briefs on health and bodily integrity.

Although not highlighted in the quantitative data, adolescents in Community C are significantly less likely to feel safe in a range of different socio-cultural contexts, due to their fear of Bengali men and security forces. Mothers participating in a focus group in Community C said that their children, boys and girls, always tried to avoid Bengali-populated locations as well as security checkpoints. The teacher in the government high school for boys confirmed this, saying that adolescents did not fear indigenous people but felt unsafe around Bengalis and security forces.

One strategy that adolescents used to increase their safety was to leverage their social networks. Adolescents' social networks comprise classmates, neighbours, friends and teachers. Friends from school or the *madrassa*, coaching centres and the neighbourhood provide advice,

My access to outside is rare. Most of the time, I have to spend my time with my laptop.

(A boy attending the government high school in Community B)

protection from physical abuse and emotional support. Other than studying with them, adolescents pass their time with friends talking and roaming outside. As discussed, older adolescents experience more mobility within the community than their younger counterparts, with the latter generally accompanied by a family member when going outside. Parents of adolescent boys commonly expressed concerns that their children might be influenced by bad company, take drugs or do bad things. Parents of girls tended instead to rely on their girls' friends to ensure their safety and security.

The scope for participation in decision-making at the community level is limited, unless adolescents are part of influential families or political networks or clubs, although some young men have been elected as local councillors. Older girls were less likely than boys to have talked with people in the community and male students were also more likely to have participated in workshops and seminars organised by the government and NGOs to learn about civic rules and discipline. The students' cabinet³ is a new way to introduce students to democracy. Students vote for representatives who organise activities in school, such as cleaning. One school in Community A had seven students in the cabinet with different responsibilities. Elected students are not necessarily wealthy, but they are usually natural leaders, whose families are well known and who have friendly relationships with other students in the cabinet. Male adolescents also engage in politics outside the school. According to the head of the madrasa in Community B, this generation does not listen to their parents but obeys their boro bhai (political 'big brothers'). A madrasa teacher in Community B described how students were prompted by political leaders to meet with the head to change the class time from 10am to 9am. He said, *'I wanted to convince them but failed. Then I had to change the time.'*

Access to information and digital technology

Our survey and qualitative data confirms national data showing that female adolescents have less access to phones. For example, according to 2014 BHDS data, 3% of

girls aged 13–14 owned a mobile phone compared with 15% of boys. These differentials persist into late adolescence: 31% of girls aged 15–19 owned a mobile phone compared with 63% of boys (NIPORT et al., 2016). While only 3% of girls or boys had their own phone, boys were twice as likely to have ever used the internet as girls (this still numbers less than a third of boys). In the Multiple Indicator Cluster Survey (MICS) 2012–2013, only 3% of adolescent girls aged 15–19 had used the internet in the previous 12 months (BBS and UNICEF, 2015). Adolescents with disabilities in Chittagong were 96% less likely to have access to a mobile phone for personal use than those without, possibly because of the greater poverty identified in those households.

Most adolescents were able to use their parents' phones to access the internet. Rates of internet use in Chittagong were more than double those in the other districts (29% of adolescents in Chittagong district have used the internet; only 14% and 11% in Cox's Bazar and Rangamati have). Adolescents in Chittagong were also more than twice as likely to have a mobile phone for personal use. In Chittagong, government schools are more likely to have access to the internet than other school types, reflecting their greater resources. Rural adolescents were 81% less likely to have a mobile phone for personal use and 65% less likely to have gone online or used the internet.

The qualitative findings show that access to information technology is common for adolescents in all the three study sites. They used either their parents' or their own mobile phone to play games, browse the internet or connect with their friends through social media. One of the reasons for extended use is parents' perception that the environment is unsafe: a boy attending the government high school in Community B said, *'My access to outside is rare. Most of the time, I have to spend my time with my laptop.'*

For adolescents, mobiles were the main medium for internet use. Students across the sites may have access to computers in government schools; however, lack of training means these are rarely used. A few of the wealthier and more educated families had computers at home that children could use.

Parents in the focus group in Community B felt that boys were heavier users of information technology and mobile phones than girls, and we also found that older adolescent boys were more likely to have a mobile phone than girls. However, even those who did not have their own phone were able to use their parents' phones to access the internet.

The way phones are used differs by age. Younger users mostly played games whereas older users watched dramas and films or listened to music. Some adolescents in Communities A and B visited porn sites and watched porn

³ The Bangladesh Bureau of Educational Information and Statistics under the Ministry of Education has published a manual on student cabinets. Elections must follow the formal rules in this and be held on a particular day nationwide, announced formally on the Bureau's website.

movies. Rates of internet use in Community B were higher than in Community A and Community C.

Parents, teachers and community members often reported that adolescents spent most of their time using mobile phones, and said that this had affected their studies and their morality negatively. They talked of the bad impacts of digital technology, including porn and other harmful adult content, such as games. A madrasa teacher in Community A found the younger generation self-centred: *'They sit with their mobile phones, escape and marry as their own choice, and dishonour their parent.'*

The mother of an older male student attending a private school in Community C said:

He always plays game on mobile. But outside of home, what does he do, we don't know. He may be in trap of a bad girl or bad friends. He may be bad by using internet which I heard from people. So, I have to always be worried for these reasons.

During a group discussion with women on community norms in Community C, one woman said:

The adolescents may become addicted to it. They are always busy with mobile and game and do not want to any other task or work, even if their mother call them they will say let me finish the game first, and they will shout for it too. They will take more time and this will hamper their study hour and school hour.

Echoing this, in a focus group discussion with women in Community B, respondents said:

Nowadays, children are introverts. They want to stay at home, when we played in the playground in that age. They don't want to go outside, even if you want to take them to visit somewhere. They want to stay at computer. They want to stay with Tab, internet etc. I mean the usage of these gadgets they know better than us.

Interviews with parents revealed how adolescents used technology for recreation. The father of a male madrasa student in Community B said:

At present generation spends their time with mobile phone and cricket. Younger children are busy with cricket. Older children are all time busy with mobile phone, and the girls also busy with mobile phone. Especially most of the time, our young girls are busy with mobile phone.

Another woman in the group discussion in Community C talked about usage of social media such as Facebook at an inappropriate age. She told us that people were

I don't say bad for all [digital technology] sector. I see that if my child can't understand something he can take help from internet. It's a good side.

(A mother in Community B)

not permitted to use Facebook until they reached 18, but adolescents were opening accounts hiding their ages. Some parents, teachers and community members in Communities A and B also blamed Facebook and the internet for illegal and extra-marital relationships and unwanted pregnancies.

Using mobile phones is not allowed in most schools. One government high school teacher in Community A told us that, when she finds students using mobile phones at school, she seizes the phones and contacts the guardians.

A significant difference by sex was noted in the nature of parents' worries about adolescents. The mother of a girl in Community C said it was widely reported that boys watched porn and adult content that were harmful to their studies and their character. For girls, concerns are mostly about protecting them from cyber-bullying and abusive romantic relationships. Parents and teachers in Community B, where internet use is higher, reported that girls chatted with random people on the internet and they got involved in romantic relationships that could be dangerous for them.

Alongside the negative impacts of digital technology, informants talked of the positive impacts on the lives of adolescents, especially in education. Teachers in Communities A and B said that multimedia classrooms, access to vast stores of information via Google, connectivity to the outside world, etc. were adding positive value to quality education.

One mother in the group said, *'I don't say bad for all sector. I see that if my child can't understand something he can take help from internet. It's a good side.'* In a community norms focus group in Community C, one woman said, *'Playing excessive games can be harmful but if they play by using their brain and intelligence that's good for them.'*

Others felt phones could be good for family life:

Now they live in family and communicate with relatives through social media. Otherwise, if they would go outside, we would have to be more worried. Now we have to check them at home, we have to talk to them, gossip with them. We have to change our mentality as well as mechanism to check them.

Almost all parents, teachers and community members pointed to the need to control adolescents' usage of and dependency on the internet and mobile phones. The father of an older male attending a vocational training centre in Community C said he gave his children access to mobile phones but supervised how they used it by seeing which sites they had visited.

A mobile phone is a common request from parents, and in some cases parents are willing to give a smartphone if the adolescent gets good results/can contribute to the costs, through either wages or savings. Some older adolescent boys buy phones with their own money, saved from their income.

Community A and Community B fathers who work overseas, mostly in the Middle East, often send home smartphones for their children, particularly for boys, who regularly talk with their fathers on family matters, including education, and exchange pictures. These fathers usually work in construction, gardening or hospital work, staying away between three and 10 years on average. Although they send remittances, their income does not have a lasting impact on their family. The absence of fathers also has negative impacts on children's lives (e.g. related to studies and socialisation).

Key actions to accelerate progress

1. Increase awareness of sexual harassment and its effects, and ways to prevent it.

Although there are High Court Guidelines in place (which have the force of law) to ensure the safety and security of adolescent girls in health and education institutions (along with workplaces), these are not widely known or implemented, and sexual harassment and violence, or the threat of these, makes girls hesitant to go to these facilities on their own and families hesitant to allow them. Threats to safety and security in public spaces constrain girls' access to civic and public life. Law enforcement authorities are not particularly active in preventing harassment or taking punitive measures, and community mediation or redress measures are often biased against girls.

The National Strategy for Adolescent Health is designed to empower adolescents, by building and developing life skills and enabling girls to be aware of their rights, including the right to choose and give consent to marriage according to their own free will.

The High Court Guidelines against sexual harassment in the workplace and educational institutions of 2009 were expanded to include public spaces and stalking



Boys cooling off in a pond close to a railway station in Chittagong, Bangladesh © Math lie Bertrams / GAGE 2019

in 2011. Although it was recommended that widespread awareness-raising be carried out on the issue of sexual harassment and the High Court Guidelines be turned into a law (these also currently have the force of law), this has not yet been done.

2. Educate and build awareness around internet safety for adolescents and their .

Education is necessary on both the positive and the negative effects of social media and information and communication technology (ICT) in general. Neither parental nor state control of internet use will be effective unless ICT users, including adolescents, become more responsible. This needs to be taught and promoted through schools and institutions such as adolescent clubs, run by the government and NGOs.

While the newly revised Digital Security Act entails punishment for giving false information and defamation of the government on social media, it does not seem to have provisions for the safety and security of users, including education on its use. The Act should emphasise constructive use of the internet and not unnecessarily curtail how freely it can be used.

3. Increase awareness of the importance of adolescents' perspectives.

The media, government agencies responsible for child rights and NGOs working in the sector need to increase awareness in the family and the community of the importance of taking into account adolescents' perspectives and priorities. Educational institutions, vocational training centres and adolescent clubs should enable adolescents to develop life skills, including negotiation and decision-making, so they can advocate for their priorities.

While the Convention on the Rights of the Child emphasises the importance of children being consulted and heard, this is not translated into practical measures in Bangladesh.

4. Provide training and livelihood opportunities and forums to increase adolescents' civic engagement.

Providing skills training and livelihood opportunities for young females living in urban slum settlements may enable greater voice and agency. Adolescent clubs and youth associations set up by NGOs and government agencies could provide scope for the articulation of collective adolescent views and demands to be passed on to the community and authorities. The Department of Youth and Sports allows the registration of youth clubs, which have traditionally been male. However, clubs at schools are likely to be better for girls' participation as parents

will allow them to stay on after school to continue their activities. Club curricula need to also consider activities or programmes that would enhance confidence and self-esteem in young girls.

In a context of power relations between different groups, adolescents, because of their age and sometimes sex, are seen as relatively weaker. It is difficult for them to protest against more influential actors unless they are able to show greater numbers or make alliances with other influential actors, such as local government authorities or representatives.

The government has strong policies against drug abuse and early marriage (although the recent revisions to the Child Marriage Restraint Act have weakened this law), but these are hard to implement because of strong vested interests and opposition from economic interest groups (in terms of drugs) and social norms that deem that a girl's sexuality is safer within a marriage.

5. Target media messaging towards parents to help them to be role models.

Parents and other close relatives are important role models, as are teachers. Parents and relatives must be made aware of the position they can have as role models through media messaging.

6. Take greater account of the psychosocial well-being of girls and boys.

Girls reported a significantly higher level of psychiatric morbidity than boys, and this disparity increases as girls age. Psychosocial well-being is included in the Strategic Directions of the 2017–2030 National Adolescent Health Strategy and needs to be taken into account by families, communities and state services.

7. Consider ways to combat excessive pressure to perform well at school.

While adolescents appreciate parental support for their education, excessive pressure is a cause of stress and poor academic performance may sometimes even lead adolescents to commit suicide (as reported in the media). The negative aspects of parental pressure on children to perform well in school are neglected at the policy level.

8. Improve formal emotional support services for adolescents.

Immediate and extended families provide emotional and practical support, acting as an informal safety net where government services are limited. Government policy-makers recognise the limitations of formal services and have been emphasising the importance of family support

and connectedness, for example, to prevent adolescents and youth from being lured into terrorist or fundamentalist activities.

9. Focus more on the positive uses of mobile phones for adolescents.

Mobile phones with access to the internet are very important for out-of-school adolescents in particular to maintain relationships and access information. The positive aspects of mobile phones in widening adolescents' horizons and connecting them with friends and family members are not currently recognised. Various policies, such as the recently formulated Digital Security Act 2018, are seeking to control and limit individuals' use of ICT. The ICT Policy of 2012 and the government's 2020 Agenda, which includes a vision of 'digital Bangladesh', promote the use of ICT for education and increased access through union digital centres. However, the individual-level use of mobile phones does not seem to be of interest to policy-makers except as a source of revenue and taxes.

10. Reduce the gender gap in secondary and tertiary education through policy and programming.

Parents focus their attention in terms of education on sons as opposed to daughters, as they believe daughters will be

married off someday but sons are here to stay. However, this thinking is not as prevalent as it once was, and parents are also supportive of their daughters continuing education. In addition, boys are also dropping out of secondary school for work or because of lack of interest in formal schooling.

Nevertheless, discriminatory attitudes towards girls' education persist. This should be addressed through policy, programmes and communication campaigns to reduce the gender gap in secondary and tertiary education retention and completion.

Policies such as the National Education Policy 2010 seek to encourage gender parity in enrolment, retention and completion at secondary and tertiary levels. However, the factors working against this need a greater policy focus. These include early marriage, lack of attractive labour market options for adolescent girls and the perceived lack of security, which mean that continuing education is not always a feasible option for families.



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