
Bangladesh National Adolescent Strategy

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Abbreviations

ACT	Adolescent Country Tracker
CEDAW	UN Convention on the Elimination of All Forms of Discrimination Against Women
GAGE	Gender and Adolescence Global Evidence
ICT	Information Communications Technology
MoWCA	Ministry of Women and Children's Affairs
NAS	National Adolescent Strategy
NSS	National Social Security Strategy
SRHR	Sexual and Reproductive Health and Rights
TVET	Technical Vocational Education and Training

Executive Summary

It is estimated that by 2030 more than 35 million adolescents will live in Bangladesh. This period in a young person's life is acknowledged as one of the critical transitions in the lifespan, and as a period characterised by tremendous growth and changes that is second only to that of infancy. It is therefore imperative that we work together to ensure that all adolescents reach their potential, to ensure their rights are respected and their voices are heard, while protecting and supporting them as they move from childhood to adulthood.

Recognising that investment in adolescents now is an investment in Bangladesh's future, this National Adolescent Strategy (NAS) sets out the Government's agenda and priorities in relation to all adolescents 10-19 years old. It acknowledges that improving outcomes for young people is everyone's business and is thus situated in the comprehensive policy and legislative landscape for overall adolescent wellbeing which takes a cross-sectoral, whole-of-society approach to supporting adolescents in their everyday lives.

It has been developed through an extensive consultative process, including with adolescents and their families, with local government and community leaders and with national government, development partners and civil society organisations. The NAS aligns with current policies and provides for the development and implementation of these policies and services. It intends to offer adolescents a sense of autonomy in developing their self-worth and creating an avenue to participate in the developmental process of the country in the way they want.

The NAS embraces a right-based approach to equity and inclusion. It is for all adolescents without discrimination or bias. It requires everyone to consider the specific needs of adolescent girls and boys, and those with a non-binary identity, of adolescents with disabilities, and other marginalised adolescent populations, so they can feel welcomed, respected, supported, and valued to fully participate. The five Strategic Directions are founded in global frameworks, tailored to Bangladesh's context – health, nutrition and wellbeing, learning and skills development, safety and protection, transition to work, and participation and civic engagement – and equity and inclusion are considered implicit in all outcomes, objectives and priority actions.

This NAS is a high-level macro strategy. As with the National Adolescent Health Strategy, the details of implementation and costing will be developed and described later, in a second phase.

The collective dedication and commitment of government, communities and families to uphold the rights of adolescents in the face of significant challenges, will ensure that the significant investments already made by the Government of Bangladesh will continue to create equal opportunities for adolescents with disabilities, for girls and young women and for all Bangladesh's children throughout their life course, and especially during adolescence.

By working together to make this strategy a reality for adolescents we are letting them know that they matter, that they are important to us now and for our future.

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1 Background

1.1 Investing in the Future – Rationale for the National Adolescent Strategy

Investing in adolescents is the right thing to do because it can protect them now against the effects of poverty, inequity and discrimination, it can prepare them for more productive trajectories in adulthood and can have a positive impact on improved outcomes for their children – the next generation.¹ There is strong evidence to suggest that adolescence provides a second window of opportunity to influence development (including growth and cognitive development) and make up for some poor childhood experiences.² Investing now will support progress towards achievement of Agenda 2030 and the Sustainable Development Goals.

In the context of growing global interest in the second decade of life, the Government of Bangladesh's specific commitment to adolescent development is increasingly evident in its policy and legislative framework, for example the National Strategy for Adolescent Health 2017-2030. This National Adolescent Strategy (NAS) looks beyond health to consider outcomes across a wider range of domains in line with the country's "Vision 2041", which seeks to eliminate extreme poverty.

1.2 Defining Adolescence

The definition of adolescence applied in the NAS conforms to international standards and to the [Bangladesh National Strategy for Adolescent Health 2017-2030](#).³

Adolescence, a near universal life stage of the socialisation process, is defined as a period of human growth and development that occurs after childhood and before adulthood and includes those persons between 10 and 19 years of age⁴.⁵ Adolescence is a time of transition involving multi-dimensional changes: biological, psychological, mental and social.⁶ Biologically, adolescents experience pubertal changes and changes in brain structure. Psychologically and mentally, adolescents' cognitive capacities mature, and they develop critical thinking skills. Adolescents also experience social change as a result of the multiple roles they are expected to play in the family, community and at educational institutes. These changes occur simultaneously but at a different pace for each adolescent depending on their gender,

¹ GAGE Consortium (2017) *Gender and Adolescence: why understanding adolescent capabilities, change strategies and contexts matters*. GAGE conceptual framework. London: Gender and Adolescence: Global Evidence. <https://www.gage.odi.org/publication/gage-conceptual-framework/>

² The Lancet, Our future: a Lancet commission on adolescent health and wellbeing (2016); Ronald E. Dahl, et al., "Importance of investing in adolescence from a developmental science perspective," *Nature* 554 (2018): 441- 450. Cited in UNICEF (2018) Programme guidance for the second decade: Programming with and for adolescents. UNICEF: New York <https://www.unicef.org/media/57336/file>

³ <https://www.unicef.org/bangladesh/sites/unicef.org.bangladesh/files/2018-10/National-Strategy-for-Adolescent-Health-2017-2030.pdf>

⁴ This strategy will not be in conflict with the existing laws as all legal measures necessary under this strategy will be applied as per laws and regulatory directives of the Government of Bangladesh.

⁵ WHO (2014) *Health for the World's Adolescents, A second chance in the second decade* <https://apps.who.int/adolescent/second-decade/>

⁶ UNICEF (2011) *The State of the World's Children. Adolescence, An Age of Opportunity*. UNICEF: New York https://www.unicef.org/sowc2011/pdfs/SOWC-2011-Main-Report_EN_02092011.pdf

socio- economic background, education and exposure to various other structural and environmental factors.⁷ As a developmental phase in human life, adolescence is further divided into early adolescence (10-14years) and late adolescence (15-19 years). Consideration of adolescents' gendered experiences and the ways in which gender norms and practices interact is also essential in developing appropriate strategies for improved outcomes.

An understanding of these complexities during adolescence is important from the perspective of policy planning as well as designing and implementing adolescent related programmes.

The term adolescent as used in the NAS is considered to be inclusive of girls and boys, children with disabilities and other marginalised 10-19-year olds. Where action to support specific needs of a sub-population of adolescents, for example support for girls to stay in the educational institutions, this is made explicit.

1.3 Overall Context

Bangladesh has made notable progress in poverty reduction and social change and has been considered on track to graduate from Least Developed Country status in the next five years.⁸ Much of the progress is attributed to social investment focused on adolescent girls' education and giving women a greater voice.⁹

The country's 2nd Perspective Plan 2021-2041, aims to make Bangladesh a higher-income and developed country by 2041 by "achieving two principal visions (a) Bangladesh will be a developed country by 2041 and (b) Poverty will become a thing of the past."¹⁰ This economic benefit can in part be achieved by utilizing the anticipated demographic dividend through investing in young people, "Harnessing the potential of the young generation...they must be equipped with standard education, skills and employment, good physical and mental health."¹¹

By 2017 UNICEF estimated that there are more than 32 million adolescents living in Bangladesh, comprising 22 per cent of the total population.¹² The UN Department of Social and Economic Affairs Population Division suggests that this number could grow by around 10 percent to more than 35 million by 2030.¹³ The population age structure is also anticipated to change with a declining maternal mortality ratio and a gradually

⁷ Ibid.

⁸ UN Department of Economic and Social Affairs, 13 March 2018, Leaving the LDCs category: Booming Bangladesh prepares to graduate. <https://www.un.org/development/desa/en/news/policy/leaving-the-ldcs-category-booming-bangladesh-prepares-to-graduate.html>

⁹ Kaushik Basu, 23 April 2018, Why Is Bangladesh Booming? <https://www.project-syndicate.org/commentary/bangladesh-sources-of-economic-growth-by-kaushik-basu-2018-04?barrier=accesspaylog>

¹⁰ Making Vision 2041 a Reality, Perspective Plan of Bangladesh 2021-2041, General Economics Division (GED), Bangladesh Planning Commission, Ministry of Planning, Government of the People's Republic of Bangladesh March 2020

<http://oldweb.lged.gov.bd/UploadedDocument/UnitPublication/1/1049/vision%202021-2041.pdf>

¹¹ Dr Shamsul Alam, Member (Senior Secretary), Bangladesh Planning Commission, Keynote Paper, Bangladesh Development Forum 2020

<http://bdf.erd.gov.bd/public/uploads/images/publication/1580632887-50918960.pdf>

¹² UNICEF (2017) Annual Report, Bangladesh.

www.unicef.org/about/annualreport/files/Bangladesh_2017_COAR.pdf

¹³ UN Department of Economic and Social Affairs, 13 March 2018, Leaving the LDCs category: Booming Bangladesh prepares to graduate. <https://www.un.org/development/desa/en/news/policy/leaving-the-ldcs-category-booming-bangladesh-prepares-to-graduate.html>

decreasing proportion of youth. As mortality and fertility decline, countries typically enjoy a period when the ratio of working-age population to both young and old dependents, rises. This one-time demographic window of opportunity will only reap a demographic dividend if the country invests heavily now in health, education, skills development, and employment generation, especially for adolescents and youth.¹⁴ At the same time, making sure this investment promotes gender equality and inclusion will stimulate national economic growth.

At the national level, a number of ministries are directly and indirectly addressing adolescent issues through their respective mandates and bearing fruits in policy development. In December 2016 the Ministry of Health and Family Welfare through the General Directorate for Family Planning and with assistance from UNICEF, UNFPA, WHO and other relevant stakeholders, developed and adopted the National Strategy for Adolescent Health 2017-2030. In addition, the government of Bangladesh is responsible for the implementation of several programmes centred on adolescents' health, such as school health programmes, counselling and raising awareness regarding reproductive health and infections, adolescent friendly health services etc. The execution of these plans is primarily done by both the Ministry of Health and Family Welfare and Ministry of Local Government, Rural Development and Cooperatives at the Municipality level. The Ministry of Education has included adolescent health issues in the school curricula, and Ministry of Social Welfare is providing valuable support to children and adolescents living and working on the street and in contact with the law. In addition to that Ministry of Women and Children Affairs is running several projects and programs aiming at ensuring the welfare of adolescents.

Bangladesh is highly vulnerable to natural disaster and emergencies and hosts one of the world's largest refugee populations.¹⁵ The country has also been significantly affected by the unanticipated COVID-19 global pandemic. Whilst the impact is not yet fully understood there is emerging evidence to suggest that adolescents in Bangladesh are facing significantly heightened vulnerabilities with implications for policy and programming priorities.¹⁶ The pandemic-associated global economic recession may also undermine the success in poverty reduction with implications for health, education and other social spending.¹⁷

Research associated with the [strategy development process](#), conducted pre-pandemic, has also identified specific stakeholder priorities for adolescent development summarised in [Table 2](#).

1.4 Adolescent Policy Environment

Rights, equity and inclusion are at the heart of successful development approaches.¹⁸ Bangladesh has committed to uphold children's rights (including adolescents) through

¹⁴ UNFPA, (n.d.), Demographic Dividend. <https://bangladesh.unfpa.org/en/topics/demographic-dividend-1>

¹⁵ <https://www.unfpa.org/data/emergencies/bangladesh-humanitarian-emergency>

¹⁶ Guglielmi, S., Seager, J., Mitu, K., Baird, S. and Jones, N. (2020) "People won't die due to the disease; they will die due to hunger": Exploring the impacts of Covid-19 on Rohingya and Bangladeshi adolescents in Cox's Bazar.' Policy brief. London: Gender and Adolescence: Global Evidence. <https://www.gage.odi.org/wp-content/uploads/2020/08/Exploring-the-impacts-of-covid-19-on-Rohingya-and-Bangladeshi-adolescents-in-Cox%E2%80%99s-Bazar.pdf>

¹⁷ Raihan, S. Anatomy of the Stimulus Package in Bangladesh. *Ind. J. Labour Econ.* (2020). <https://doi.org/10.1007/s41027-020-00253-2>

¹⁸ Jones, H. 2009, Equity in development. Why it is important and how to achieve it. Working Paper 311. Overseas Development Institute: London

its ratification in 1990 of the UN Convention on the Rights of the Child. Bangladesh also ratified the UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) in 1984 but with reservations on articles 2, 13(a), 16.1(c), and 16.1(f), citing conflict with *Sharia* law based on Holy Quran and Sunna.¹⁹ The country is also signatory to the UN Convention on the Rights of Persons with Disabilities and has introduced domestic legislation in compliance.

Bangladesh's Constitution also importantly incorporates the concepts of rights, equity and inclusion.

The policy and legislative landscape for overall adolescent wellbeing is comprehensive. Despite the widespread coverage, however full implementation lags behind. The relevant policy instruments for adolescents include but are not limited to:

- Bangladesh Population Policy 2012 incorporates an Adolescents Welfare Programme with policy directives to educate adolescents in health and life skills, and to increase awareness of parents, teachers and service providers for orienting adolescents on health issues.
- Bangladesh Health Policy 2011 aligned with the Constitution and several international declarations which have a direct bearing on promoting adolescent health well-being and ensuring healthy lives.¹⁹
- National Mental Health Policy 2019 aims to increase the number of health professionals trained to recognise and treat mental illness and to address stigma and discrimination.
- The National Strategy for Adolescent Health 2017-2030 which reflects commitments made by Bangladesh under Family Planning 2020. This global community of leaders, experts, advocates, and implementers are working together to address the most challenging barriers to expanding access to contraceptives.
- The National Nutrition Policy 2015 includes specific key objectives for improving the nutritional status of the population in general and children, adolescent girls, pregnant and lactating women in particular; enhancing dietary diversity; scaling up nutrition-specific and nutrition-sensitive activities; and strengthening the multi-sectoral approach and coordination among relevant stakeholders.
- The Persons with Disabilities Rights and Protection Act 2013 includes provisions for a National Coordinating Committee and sub-national committees at District, upazila and city levels and commitments to assure full inclusion.
- The Suppression of Violence against Women and Children Act 2000 is intended to address the need for more effective prosecution of perpetrators of violence against women and children than existed previously and provides redress for victims of various manifestations of violence including trafficking and acid throwing.
- The Domestic Violence (Prevention and Protection) Act 2010 endorses the prevention and protection aspects of physical, psychological, sexual and economic violence impacting on overall public health.
- The Child Marriage Restraint Act 2017 establishes a Child Marriage Prevention Committee and prohibits child marriages for children under the age of 18 years old. Under Article 19, child marriage may still be allowed if it is deemed to be "in the best interests of the child".²⁰

¹⁹ Maliha Khan, 8 March 2019, CEDAW at a dead end in Bangladesh? <https://www.thedailystar.net/star-weekend/news/cedaw-dead-end-bangladesh-1711840>

²⁰ Advocacy to define "special cases" continues in order to ensure that the law is not abused.

- The National Plan of Action (NPA) to End Child Marriage was launched in 2018 with the goal to end the marriage of girls below the age of 15 years and to reduce by one third the rate of marriage for girls aged 18 years in 2021, and to completely eliminate child marriage by 2041
- The 2010 Education Policy extends universal primary education from class 5 to class 8 in general Madrassa, and vocational education streams; proposes reforms to Madrassa education, for restructuring the evaluation and examination system, and for removal of the practice of rote learning. This policy acknowledges education as fundamental for human capital development.
- The Compulsory Primary Education Act 1990 makes primary education free and compulsory for all children in Bangladesh
- The proposed Education Act, 2016, in-line with the National Education Policy 2010, is yet to be approved by parliament.
- The current government Five-year Plan envisages a 35 percent increase in technical and vocational education and training (TVET) coverage and expanded capacities of information communications technology (ICT) in alignment with the 'Digital Bangladesh' initiative across all existing streams of education.
- The National Skills Development Policy 2011 targets youth, women and other marginalised groups, and specifically addresses working adolescents and adolescents with disabilities.
- The National Child Labour Elimination Policy 2010 aiming to make meaningful changes in the lives of the children by withdrawing them from all forms of child labour including the hazardous work and worst forms of child labour.
- The Draft National Youth Policy 2017 places an emphasis on supporting adolescents in making a smooth transition towards work life.
- The National Social Security Strategy (NSSS) is an important roadmap to enhance the governance, institutional capacity and accountability of the social security system to better serve the needs of the poor and vulnerable, along the life cycle.
- National Integrity Strategy (NIS) aiming to enhance the efficiency and effectiveness of the government agencies so that they can be more transparent, follow ethical practices, adopt collaborative approaches while supporting people, and be more responsive and accountable to the needs of all citizens. Cabinet Division is expected to facilitate the implementation of NIS across institutions²¹.
- Right to Information Act 2009 is enacted with the provision for free flow of information in alignment with the constitutional rights of the citizen.

Bangladesh is also a collaborating partner with UNICEF for the Generation Unlimited Global Platform to identify and scale up solutions for young people – to help them get the skills and education they need to succeed in today's world.²²

1.5 The Strategy Development Process

Guided by a multi-sectoral Technical Steering Committee led by the Ministry of Women and Children's Affairs (MoWCA) and supported by UNICEF, the approach to development of the NAS was participative and involved consultations with a wide range of stakeholders across sectors. This included adolescents from different age groups

²¹ <http://parliament.portal.gov.bd/>

²² Generation Unlimited Bangladesh <https://www.generationunlimited.org/topics/bangladesh>

and backgrounds, parents and caregivers, community leaders, teachers, government officials at national and sub-national levels civil society organisations, UN agencies and other stakeholders.

Specific research was commissioned on the situation of adolescents, and data was collected between July and December 2019. The outcomes of a parent's survey, key informant interviews and focus group discussions with adult stakeholders, focus group discussions with adolescents in 11 zilas/districts and an adolescent survey poll using the U-Report digital platform,²³ informed the situation analysis and contributed to development of the NAS Framework.²⁴

Supplementary desk review has identified additional risks for adolescents associated with Covid-19, for example:

- Globally, girls are at heightened risk of abuse and exploitation including surges in child marriage with 2020 deemed a “year of irreversible setbacks and lost progress” for girls.²⁵
- In Bangladesh children and adolescents are “at higher risk of adverse health outcomes...increased risk of child abuse...undernutrition...and unemployment”.²⁶
- Key priorities for adolescents in this context include addressing the learning gap, especially for girls; facilitating improved access to safe digital technologies and to support for mental health, scaled-up protection, social protection benefits and adequate health services for younger and older adolescents.²⁷

²³ U-Report is a messaging tool that empowers young people around the world to engage with and speak out on issues that matter to them. For more information see <https://ureport.org.bd/> and <https://www.unicef.org/innovation/U-Report>

²⁴ The full Analytical Report is available on application to UNICEF Bangladesh.

²⁵ Cousins, S. (2020) 2.5 million more child marriages due to COVID-19 pandemic. The Lancet World Report Vol396 October 10 2020 [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)32112-7/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)32112-7/fulltext)

²⁶ Rahman Md Sazedur, Lassi Zohra S, Shariful Islam Sheikh Mohammad. Risks to Bangladeshi children and young people during Covid-19 outbreak BMJ 2020; 369 :m2299

²⁷ Farheen Ria, A., Ahmed Raha, S., Rana, S., Roy, P., Aktar, T., Al Mamun, S., Hasan Anik, M. and Alam, F. (2020) ‘Listening to young people’s voices under covid-19. Exploring the impact of covid-19 on adolescents in urban slums and low-income settlements in Dhaka, Bangladesh.’ Policy brief. London: Gender and Adolescence: Global Evidence. <https://assets.publishing.service.gov.uk/media/5f314f39e90e0732debd30d0/Exploring-the-impact-of-covid-19-on-adolescents-in-urban-slums-in-Dhaka-Bangladesh.pdf>

2 Framework of the NAS

This framework sets out the Government's agenda and priorities in relation to all adolescents 10-19 years old and provides for the development and implementation of policies and services. Derived from global thematic paradigms, and system level analysis grounded in the socio-ecological framework, the framework adopts a capability approach as its broad normative framework. Incorporating a capabilities approach means the NAS focuses not only on improving specific components of adolescent development but also explores how investment in these specific components enhances skills, knowledge and voice, offering adolescents a sense of autonomy in developing their self-worth and creating an avenue to participate in the developmental process of the country in the way they want.

2.1 Principles

The NAS framework is embedded in three fundamental principles:

1. It embraces a rights-based approach to **equity and inclusion** to make sure that no-one is left behind. This means including special measures for girls to address the deep-rooted gender-based discrimination they face, for adolescents with disabilities, and for minority adolescent populations.
2. It also recognises the dynamic and individual characteristics of growth in the second decade of life and the **evolving capacities** of adolescent girls, boys and third gender adolescents in early and late adolescence and considers the life-course²⁸ transitions from one developmental phase to another. This means that both adolescent girls and boys are valued in their own right and acknowledged as individuals at all levels, that is family, community, institution and state with a contribution to make to society as a whole.
3. Finally, it is informed by the view that **effective systems** can deliver more for specific populations than isolated actions, and thus is situated in the socio-ecological model. This means that policies and legislation and the institutions responsible for implementing them should work collaboratively with communities, families and adolescents to achieve more effective services and non-formal community supports (for example, community groups for girls and women's economic empowerment).

2.2 Vision/ Impact

The vision for the Bangladesh NAS is to **empower all Bangladesh's adolescents – irrespective of gender, age, class, ethnicity, disability and sexual identity – so that they can participate in the developmental process of the country as active agents of change.**

²⁸ "The notion of the family life cycle suggests that the ways in which families change over time are characterized by a cyclical pattern, while the concept of the *life course* pays particular attention to the individual life trajectory as a person moves through different roles and experiences." Ribbens McCarthy, J. and Edwards, R. (2011) *Family Life Cycle and Life Course*, in *Key Concepts in Family Studies*. Sage Publications Inc: New York

Furthermore, the NAS will take every step to uphold the values and spirits of the liberation war of 1971 and will encourage different platforms (for example, Adolescent Clubs, School Cabinets) to promote and teach these values to the adolescents.

2.3 Strategic Directions Overview

Positive impact can be achieved by demonstrating improved outcomes for adolescents in five interconnected and mutually reinforcing strategic directions derived from global approaches summarised in [Table 1](#).

Table 1. NAS strategic directions derived from global frameworks

	Strategic Direction	Youth 2030 the UN Strategy “Youth 2030: Working with and For Young People,” ^[1] and the Generation Unlimited ^[2] global partnership initiative to prioritise health, education, transformative work and participation for young people	ACT UNICEF Adolescent and Youth Engagement Strategic Framework, ^[3] and the UNICEF Adolescent Country Tracker (ACT) ^[4] which provides a common platform to advocate for greater attention and investments in adolescents and to measure progress towards achievement of the SDGs	GAGE GAGE 3Cs Conceptual Framework ^[5] of a nine-year longitudinal research programme generating and communicating knowledge on good practice initiatives and policies that support adolescent girls in diverse contexts	
Socio-ecological framework for human development	Health, nutrition and wellbeing	Support young people’s greater access to quality education and health services	Adolescents attain their highest physical health and mental wellbeing	Sexual and reproductive health and nutrition Adolescent knowledge and awareness about their bodies and how to keep healthy; Psychosocial wellbeing Adolescents’ sense of self and ability to set their own goals and demonstrate resilience in the face of setbacks.	Life-course and evolving capacities age 10-19
	Learning and skills development	Support young people’s greater access to quality education and health services	Adolescents are actively engaged in learning through formal or non-formal education initiatives	The services and support adolescents have to acquire the cognitive skills and knowledge they need in order to engage with and make good decisions in a rapidly changing world.	
	Safety and Protection	Support young people as catalysts for Peace and Security & Humanitarian Action	Adolescents feel safe and supported in their families, among their peers, and in their schools and social/ virtual environments	Adolescent girls’ freedom and protection from gender-based violence including child marriage, harmful traditional practices, and other forms of coercion.	
	Transition to work	Support young people’s greater access to decent work and productive employment	Adolescents participate in non-exploitative and sustainable livelihoods and/or entrepreneurship	Focuses on whether adolescents are able to choose decent employment and access and maintain, in an age-appropriate manner, credit and control over their own income.	
	Participation and engagement	Amplify youth voices for the promotion of a peaceful, just and sustainable world AND Protect and promote the rights of young people and support their civic and political engagement	Adolescent girls and boys engage with opportunities to form and express their views and influence matters that concern them	The ability of adolescent girls to meaningfully participate in household, school and community life—which are key to them developing the skills required for political participation in adulthood.	
Equity and inclusion					

^[1] https://www.un.org/sustainabledevelopment/wp-content/uploads/2018/09/18-00080_UN-Youth-Strategy_Web.pdf

^[2] <https://www.generationunlimited.org/>

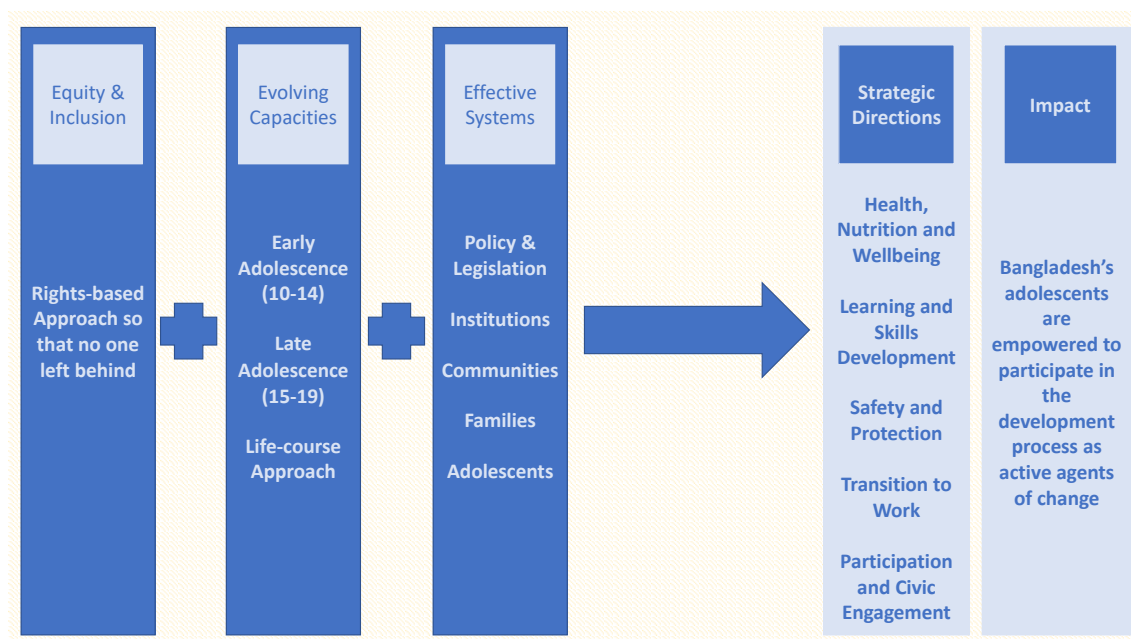
^[3] <http://www.unicefemergencies.com/downloads/eresource/docs/Adolescents/63792683.pdf>

^[4] <https://data.unicef.org/resources/adolescent-country-tracker/>

^[5] <https://www.gage.odi.org/publication/gage-conceptual-framework/>

Although the focus is on making improvements across individual Strategic Direction areas, the NAS Framework highlights the inter-connectedness of these components and supports a coherent and coordinated implementation approach that maintains this integration. The NAS Framework emerges from and is embedded in the three key principles, is shaped by global frameworks for adolescent development and is in alignment with the goals of the government’s Vision 2041 ([Figure 1](#)).

Figure 1. The Framework for the National Adolescent Strategy (NAS)



The priorities arising from the consultation process to inform the development of the NAS, are summarised in [Table 2](#). These stakeholder priorities under each of the five Strategic Direction areas contributed to the formulation of outcomes, objectives and priority actions described in [Chapter 3](#).

Table 2. Stakeholder Priorities

Strategic Direction	Priorities identified by adolescents and other stakeholders
Health, nutrition and wellbeing	Support adolescent awareness and knowledge around general healthcare, healthy behaviors and SRHR, especially amongst younger adolescents age 10-14
	Support mothers and fathers and other primary caregivers to encourage more open discussion and sharing of accurate information on SRHR and other adolescent specific issues
Learning and skills development	Improve quality of teaching to enable students to reach their potential
	Review and up-date the curriculum for social issues especially SRHR, sexual and gender-based violence, online safety and safety during emergencies
	Improve infrastructure for hygiene (and for menstrual hygiene in particular) to help girls and children with disabilities access and stay in school
	Put in place measures to increase access to inclusive learning and skills development opportunities for children with disabilities
	Put in place measures to eradicate corporal punishment
Safety and Protection	Put in place measures to eradicate peer-to-peer bullying
	Addressing societal and community norms which discriminate against and exclude girls and children with disabilities
	Addressing societal and community norms which advocate for and tolerate gender-based violence including sexual abuse of children, especially of girls, children with disabilities and other marginalised population groups
Transition to work	Support adolescent safety and protection through integrated social protection measures which combine transfer-based provision with social welfare support and services
	Approve and implement the National Youth Policy with a focus on TVET
	Increase opportunities for skills training in schools, especially on ICT with a focus on girls, children with disabilities and other marginalised adolescent populations
Participation and engagement	Increase access to income-generating opportunities for adolescent girls
	Increase opportunities for participation and civic engagement at local level for both younger and older adolescents to contribute to local planning processes

3 Strategic Directions, Outcomes, Objectives and Priority Actions

To achieve the intended impact, the five outcome areas have been defined together with specific objectives in relation to each of the five national strategic directions.

Strategic Direction 1. Adolescent health, nutrition and wellbeing

Outcome 1. Adolescents are supported to access quality gender-responsive health services to achieve and sustain attain their highest physical health, adequate nutrition and mental wellbeing

Strategic Objective 1.1 Adolescents, and especially those aged 10-14, enjoy a healthy lifestyle with regard to their physical and mental health, sexual and reproductive health and rights (SRHR), and overall well-being

Strategic Objective 1.2 Adolescents benefit from a supportive environment in which caregivers encourage more open discussion and sharing of accurate information on SRHR and other adolescent specific issues

Strategic Objective 1.3 Adolescents access to health care during emergencies (for example, natural disaster, COVID-19) is maintained and where necessary supplemented

Context

Although health facilities and parents (families) should be key resources for adolescents to access health and wellbeing information and services, including about their SRHR, current investments at community level for adolescent health and wellbeing do not appear to be having the intended impact. This may be because the institutional mechanisms for service delivery in communities are complex and, in some cases, inadequate; or because targeting health and wellbeing messaging through primarily schools tends to exclude large sections of the adolescent population because of drop-out rates; and because social norms do not allow for more open discussion between families and adolescents. Adolescents are at risk of missing out on important health and wellbeing messaging if only educational institutes are targeted as the priority focus of health education. Gaps are identified in adolescent awareness and knowledge around general healthcare, healthy behaviours and SRHR, especially amongst younger adolescents. Girls are particularly disadvantaged if they miss targeted health messaging because they are out of school. Older adolescent girls rely on female family members to learn about SRHR and menstrual hygiene and messaging can sometimes be negatively affected by discriminatory norms and practices.

Priority Actions

1.1.1 Fully implement and monitor the National Adolescent Health Strategy (2017-2030) and the National Nutrition Policy 2015

1.1.2 Introduce a multi-sectoral gender and age-specific national Adolescent Health Service Package, which is inclusive of adolescents with disabilities, and other vulnerable groups highlighting knowledge and awareness on hygiene, general health care, mental health, physical recreation and SRHR especially amongst the youngest adolescents aged 10-14

1.1.3 Create formal links between the primary health care system (Community Clinics) school health programmes, community based Adolescent Clubs and adolescent friendly health facilities to deliver the Adolescent Health Service Package for married, unmarried and other vulnerable adolescents.

1.2.1 Provide training to the multi-sectoral Health Service Package providers to equip them with the knowledge, attitudes and skills to consistently deliver SRHR counselling and services which promote gender equity, and which are accessible to adolescents with disabilities and other vulnerable groups.

1.2.2 Raise awareness and understanding so that care givers (parents, teachers, community leaders including religious leaders) can communicate more effectively with adolescent girls and boys about their physical and mental health and SRHR

1.3.1 Ensure the Adolescent Health Service package is inclusive of approaches to ensure continuity of access and supplementary services during emergencies for all adolescents including those in educational institutes and out of school, in work and from marginalized and vulnerable backgrounds²⁹.

1.3.2 Scale-up proven models for access to healthcare in emergencies (developed by NGOs and others)

²⁹ For example, child and adolescent sex workers, children and adolescents living in Child Development Centres, children and adolescents living and working on the street, children and adolescents with disabilities, married adolescent girls etc.

Strategic Direction 2. Adolescent learning and skills development

Outcome 2. Adolescents girls and boys including the marginalized and those with disabilities are actively engaged in learning through formal or non-formal education initiatives and acquire the cognitive skills and knowledge they need in order to engage with and make good decisions in a rapidly changing world

Strategic Objective 2.1 Adolescent's core skills, competencies and attributes are enhanced and promoted through accessible, responsive, formal and non-formal education and learning opportunities.

Strategic Objective 2.2 Adolescents benefit from strengthened transition supports at all levels as they move through the education system.

Strategic Objective 2.3 Adolescent girls' and boy's complete schools, madrassas and other educational institutes with adequate learning outcomes.

Context

The Bangladeshi education system is one of the largest in the world but the proportion of children in secondary schools is the lowest in South Asia – barely 46 per cent of the 95 per cent who pass the primary school level.³⁰ Education is one of the most important prerequisites for ensuring sustainable development. Despite robust progress on education, adolescent students are concerned about quality of teaching methods and curriculum content; school infrastructure does not support playground, sports, good hygiene practice which contributes to exclusion of adolescent girls; and corporal punishment is still a widely accepted practice. Adolescents with disabilities are almost invisible in the education system. About 42 percent of adolescent girls and 33 percent of adolescent boys who take admission in grade-VI drop out before completing the secondary level education. Chronic poverty, parent's unwillingness, financial problem, school's poor infrastructure, biased social practice towards girls, lack of quality education, geographic isolation and unequal access to education, and security problems for girls and parents' preference for the practice of child marriage of girls are major causes of school dropout in Bangladesh. The share of women teachers is below half of the workforce which may impact on gender sensitive learning opportunities.

Priority Actions

2.1.1 Approve and operationalise the 2016 Education Act ensuring it is inclusive of children and adolescents with disabilities; and monitor the full operationalisation of the Gender and Inclusive Education Action Plan (GIEAP) under PEDP-IV (Fourth Primary Education Development Programme) and its upcoming phases.

2.1.2 Review and update the curriculum for social issues especially SRHR (in line with 1.1.2), sexual and gender-based violence, online safety and safety during emergencies; and to be inclusive of children with disabilities and other vulnerabilities.

³⁰ <https://www.unicef.org/bangladesh/en/more-opportunities-early-learning/education-adolescents>

2.1.3 Develop and implement an action plan to improve educational institutes' infrastructure for hygiene (and for menstrual hygiene in particular) to help adolescent girls, boys and adolescents with disabilities to access and stay in school.

2.1.4 Develop and implement an action plan to operationalise the legislation outlawing corporal punishment and to reduce peer-to-peer bullying in primary and secondary schools and TVET institutes.

2.1.5 Develop and implement an action plan for preventing sexual harassment against adolescent girls in educational institutions in line with the High Court Writ Petition No. 5916/2008.³¹

2.1.6 Ensure planned investment on capacity enhancement of teachers to apply creative teaching methods to engage students, to apply positive discipline methods and to deliver the education institutes-based component of the Adolescent Health Service Package with confidence

2.2.1 Ensure implementation of the 7th Five Year Plan, 2016-2020 that envisaged a 35 per cent increase in technical and vocational education and training (TVET) coverage, equitable access and expanded capacities for ICT across all existing streams of education.

2.2.2 Ensure that specific measures for immediate and inclusive access to education in times of emergency are included in the National Plan for Disaster Management

2.2.3 Introduce equitable learning opportunities for skills for work development, including for ICT, in the general stream of education (see also Priority Action 4.1.1).

2.2.4 Develop an ICT Skills Action Plan in collaboration with government and industry focusing on increasing safe access to ICT and developing the skills of adolescents, especially girls.

2.2.5 Strengthen the roles and functions of the Adolescent Clubs so that they can inform the adolescents in general, and late adolescents in particular, about the training and skill development opportunities available within the community.

³¹ See the National Action Plan to Prevent Violence Against Women and Children 2013-2025, page 29

Strategic Direction 3. Adolescent safety and protection

Outcome 3. Adolescents feel safe and supported in their families and communities, among their peers, at educational institutes and in social and on-line environments.

Strategic Objective 3.1 Adolescents, particularly girls, adolescents with disabilities and other marginalized populations, are supported to feel safe at home, in their communities, and online and are empowered to speak out when feeling unsafe or vulnerable.

Strategic Objective 3.2 Adolescents exposed to violence, abuse and neglect can access appropriate support when they need it from the police, courts and allied health and social services.

Context

Despite the wealth of protective legislation in Bangladesh stakeholder awareness of protection rights and institutions capacities to address violations is extremely limited. Sexual and gender-based violence emerges as an area of significant concern, primarily affecting girls and gender diverse and non-binary adolescents. Despite efforts to eliminate the practice of child marriage 59 per cent of girls in Bangladesh are married before their 18th birthday and 22 per cent are married before the age of 15. The Child Marriage Restraint Act 2017 continues to allow children to marry in some circumstances. Embedded social norms can obstruct full implementation of the protective policy and legislative framework. A focus on community mechanisms, building of capacities and coordination of multi-disciplinary service providers and counsellors in line with existing strategies, and support improve access to services for SRHR and to keep girls in the educational institutions will contribute to a more protective environment. Global access to the internet opens the door to amazing opportunities for today's children and young people. However, the rapid expansion of digital access has not always been accompanied by adequate protections for their safety and security.

Priority Actions

3.1.1 Fully implement and monitor the National Action Plan to Eliminate Child Marriage 2015-2021; review the Child Marriage Restraint Act 2017 to remove the loophole where a court can allow child marriage in "special cases".

3.1.2 Develop and invest in a long-term national initiative to change gendered social norms by strengthening women and girls' agency and through engagement with parents, families, youth groups and community leaders.

3.1.3 Review and up-date the national cyber-security strategy to explicitly include measures which protect children and adolescents from online child sexual exploitation and abuse; and undertake initiatives to raise awareness of online child sexual exploitation and abuse at industry level and amongst parents and adolescents.

3.2.1 Build capacities of various service providers including law enforcement agencies so that they can provide service effectively and equitably while reaching to

the adolescents irrespective of their gender, age, class, disability, ethnicity, culture, faith, sexual orientation, occupation, place and type of residence/refuge.

3.2.2 Introduce a national parenting programme focused enhancing parenting practices and behaviours, relative to age specific development

3.2.3 Include a national peer education for online safety programme in the Adolescent Clubs' curriculum. (See also Priority Action 5.1.1).

3.2.4 Enhance the number of safe spaces for all adolescents to meet by providing access to educational institutions and community facilities during out-of-school time.

Strategic Direction 4. . Adolescent transition to work

Outcome 4. Adolescents, especially girls, transition through the education system and from education into work

Strategic Objective 4.1 Adolescents are better able to participate in the labour market through enhanced employability skills that complement formal learning and training qualifications and entrepreneurship opportunities.

Strategic Objective 4.2 Adolescents are a particular focus in policies that address social inclusion and poverty.

Context

A renewed focus on TVET and vocational skills training (short & long-term) is being observed and NGOs have embarked upon delivering marketable skills alongside the government. However, this change is not yet felt at community and household level. Most parents express a preference for conventional education systems, although there is an acknowledgement that general education curriculums should be reviewed to incorporate technical and vocational education. The biggest demand amongst adolescents is for up-to-date ICT skills training. Students, teachers and government officials all note that vocational training and education does not receive the necessary attention in educational institutions, with investments in ICT opportunities seen as most important for both boys and girls. Almost all TVET institutes have a disability inclusion action plan although this does not necessarily equate to an inclusive approach since persons with disabilities access these facilities in relatively small numbers.

Priority Actions

4.1.1 Introduce changes in the general education curriculum in line with the National Skill Development Policy/Skills Framework. Ensure that adolescents access opportunities for skill development including IT skills in the general education system.

4.1.2 Introduce special low-cost skill development training centres for out of school and working children allowing them to participate as per their convenience. Support poor and marginalized students by providing educational materials and training attendance allowances.

4.1.3 Enhance the capacity of the teachers through providing necessary skill-based training so that they can play a pivotal role in linking the students with market opportunities.

4.1.4 Introduce graduated training programmes linked to employment opportunities at the community level, targeting marginalized and vulnerable adolescents, including adolescent girls and boys with disabilities and third gender adolescents.

4.1.5 Integrate soft skills education, including knowledge on the rights of employees in all transition to work programmes. .

4.2.1 Review social protection programmes through an adolescent lens, and particularly consider how social protection can contribute to gender equality and protect adolescent girls.

4.2.2 Implement an awareness raising programme targeting community and religious leaders to sensitise families, educators and employers on gender equality in education and employment.

Strategic Direction 5. Adolescent participation and civic engagement

Outcome 5. Adolescents can form and express their views and influence matters that concern them, develop skills and competencies for participation, leadership, civic engagement.

Strategic Objective 5.1 Adolescents in all their diversity are included in decision making processes across political, social, and civic realms

Strategic Objective 5.2 Adolescent's autonomy is supported by families and communities, their active citizenship fostered, and their voice strengthened through political, social and civic engagement

Context

National policies and political commitment support adolescents right to participate. However, attitudes and perceptions at community and household level do not always support young people's involvement in decisions about things that affect them. More opportunities for participation are becoming available including through Adolescent Clubs and School Cabinets, and where adolescents have access to digital technology, social media outlets can support increased participation if adequate protections are in place.

Priority Actions

5.1.1 Make the Adolescent Club a functional standard feature in every community and ensure the participation of all adolescents including the most vulnerable and marginalized; establish and initiate a monitoring mechanism to periodically review the activities and actions of the clubs.

5.1.2 Activate School Cabinets³² in the Primary and Secondary Schools, Madrassas and other educational institutes, and link them with the Adolescent Clubs so that adolescents can participate in the democratic development process.

5.2.1 Implement an awareness raising programme targeting parents, community and religious leaders about the benefits of Adolescent Clubs and School Cabinets to encourage adolescent participation.

5.2.2 Integrate education on tolerance and non-discrimination into Adolescent Clubs curriculum. so that they can jointly participate in local development activities.

5.2.3 Require that Union Parishad Standing Committee Meetings create a space and mechanism so that adolescents can participate freely and confidently to share their views in the community development process.

³² The 'student cabinet' initiative is introduced in secondary schools and madrasas in 2015. The cabinet will be formed for one year in each educational institution. The objective is to orient students on democratic values and practices by electing eight member representatives who will be elected by the direct votes of the students. The students' cabinet will hold eight portfolios. These are: environment conservation; books and learning materials; health; sports, culture and co-curriculum activities; water resources, tree plantation and gardening; observance of national/international days, reception and entertainment; and ICT.

5.2.4 Require that local level planning and local economic development processes include adolescents by incorporating them with the local government bodies (Union Parishad, Upazila Parishad, Zila Parishad, Pouroshabha etc.) so that they can share their inputs with the elected representatives and appointed officials.

5.2.5 Facilitate an adolescent volunteering programme building on existing initiatives³³ and expand nationally.

³³ For example, Volunteer for Bangladesh <https://vbd.com.bd/> and Youth Bangla Foundation <http://www.youthbangla.org/volunteering/>

4 Enabling and Supporting Implementation

The NAS is multi-sectoral and inter-sectoral. It recognises that achieving adolescent's rights depends on whole of government action in which policies across all sectors contribute systematically to improving development. Intersectoral government structures, with political and financial support, can facilitate coordination, identify common goals, monitor joint actions, and build effective collaboration. The current Strategy includes high level activities which will be implemented by a broad range of Ministries. The NAS forms part of the normative framework. It describes the macro-level activities which responsible Ministries will undertake to achieve the commitments of the Outcomes under each strategic direction.

4.1 Cross-cutting Enablers

Enabling actions across the five Strategic Direction areas of the NAS will maximise support for the Strategy through the implementation structures, while optimising planning and delivery at local level, and strengthening arrangements for measuring progress.

1. Ensuring quality services

- Support the workforce to develop the appropriate expertise and skills
- Collect and analyse quantitative and qualitative data disaggregated by age, sex and disability at local, regional and national level to inform service planning, delivery, assessment and continuous improvement
- Develop, apply and monitor a national quality standards framework for services for adolescents

2. Focus on development through early intervention

- Strengthen and grow parenting and family support as an effective prevention and early intervention measure
- Put in place specific measures to improve access to learning and skills development for girls, children with disabilities and other marginalised populations, especially at key transition points – transfer from primary to secondary education, from early to late adolescence

3. Improve coordination and collaboration

- Coordinate and integrate measures across different policy sectors making sure that both horizontal coordination between different organisations and vertical coordination through different levels of Government are equally active

4. Disseminate quality information

- Facilitate access to quality information through various media for young people, parents and families and other stakeholders
- Make sure information is provided in accessible formats including in different languages, easy-to-read etc.

4.2 Governance

The NAS cuts across and assigns responsibilities to a wide range of government entities, for example, Ministry of Health and Family Welfare, Ministry of Education, Ministry of Primary and Mass Education, Ministry of Finance, Ministry of Labour and Employment, and other institutions such as the Digital Security Agency.

Numerous development partners and civil society organisations are also supporting efforts to increase protection and support for adolescents in Bangladesh. UN agencies including UNICEF, UNFPA, WHO, ILO, UNHCR and UNAIDS and other international government development partners notably USAID, FCDO (formerly DFID), DFAT, the EU, provide both financial and technical support to the Government and civil society.

A large number of NGOs, local, national and international have played a key role in advocating with and supporting the government for designing and implementation of interventions for addressing child rights issues in Bangladesh. Save the Children has helped formation of Child Rights Advocacy Coalition in Bangladesh which consists of six INGOs, three networks and an NGO working for children. Bangladesh Shishu Adhikar Forum (BSAF) is a network 269 child rights-based organisations of Bangladesh which collects relevant information on child rights situations in Bangladesh and monitors the state of child rights in Bangladesh.

In view of the many priorities for which each of these bodies is responsible, effective mechanisms for co-ordination and collaboration should be in place to keep the NAS on-track. As described below, this type of governance mechanism comprises a national multisectoral coordinating group (High-level Interagency Working Group), with a supporting technical working groups (Subsidiary Technical Working Group) and a dedicated Secretariat.

Leadership

Leadership of the NAS lies with MoWCA who are responsible for convening the stakeholders, developing and monitoring implementation of the NAS Action Plan. However, lead responsibility for each Strategic Direction area can lie with an allied Ministry, summarised in [Table 3](#).

Table 3. Lead

Strategic Direction	Lead Government Stakeholder	Co-lead Institution
Overall Lead	Ministry of Women and Children's Affairs	TBC
Health, nutrition and well-being	Ministry of Health and Family Welfare	TBC
Learning and skills development	Ministry of Education	Ministry of Primary and Mass Education and/or Ministry of Social Welfare
Safety and protection	Ministry of Women and Children's Affairs	Ministry of Education
Transition to work	Ministry of Labour and Employment	Ministry of Education
Participation and civic engagement	Ministry of Local Government, Rural Development and Cooperatives	Ministry of Education

Mechanisms for Effective Collaboration

The NAS will rely on a *High-level Interagency Working Group* for efficient introduction and monitoring of implementation (hereinafter “the High-level Group”). This is in effect a steering committee to provide strategic direction and support the technical front-line

implementing personnel. With political support and authority to act this national governance mechanism will be accountable for effectiveness and efficiency and will require dedicated funds and an adequate Secretariat to operate.

The High-level Group will usually need to make decisions at key governance points during the NAS lifetime and high-level representatives, (for example, Minister/Deputy Minister, UNICEF Representative) will have the the ability and authority to make strategic decisions.

The representatives come together because they share a common purpose (implementation of the approved NAS) but at the same time opinions and agendas may not always be aligned. Thus, the Chairperson of the High-level Group should have the actual authority and empowerment to make such decisions as may be necessary to achieve the intended outcomes of the Action Plan.

The High-level Group should meet at least six-monthly to establish and evaluate the reports and outputs of the monitoring and evaluation plan and will be empowered to make adjustments, for example to accelerate action, change direction, add unforeseen activities, advocate for increased financing etc. The High-level Group will also have the authority to co-opt specific expertise to the Membership, should circumstances require it.

The High-level Interagency Working Group should be established with a formal and agreed Terms of Reference.

The business of delivering on the commitments at a practice level will lie with the Subsidiary Technical Working Group (hereinafter the Subsidiary Group). These are the technical professionals who come together to work on the specific activities. Individuals participating in these groups are expected to have the time, interest, and commitment to participate in the production of assigned deliverables. They will represent the Ministries and other entities and will be responsible for specific tasks as per the NAS. The Terms of Reference of the Subsidiary Group shall be established by the Secretariat, providing task-specific scope, role and responsibilities, and approved by the High-level Group.

Provision of administrative and support functions through a Secretariat will successfully enable the finalisation of the approved NAS Action plan and its inclusion in the normative framework. The Secretariat (hosted by UNICEF) would organise quarterly meetings, to maintain cross-sectoral collaboration through open and regular communications, to maintain the monitoring and evaluation plan and to prepare for and support the High-level Working Group and Subsidiary Technical Working Group meetings (see below). The Secretariat membership, roles and functions are defined formally through an agreed Terms of Reference and will facilitate and promote implementation of co-operative activities.

4.3 Measuring Progress

The inclusion of a monitoring and evaluation framework in combination with a robust governance mechanism increases the potential for agility in an increasingly dynamic context. Local and global conditions can change over time and more quickly than ever impacting the political economy and potential for achievement of results. As COVID-19 has shown the capacity to quickly evaluate and reposition is invaluable. At the same time innovations programming appear regularly, new research, new developments in

training and dissemination, new technologies all of which can have an impact on the way the strategy is implemented. MoWCA will play a role in collecting, thoroughly analysing and using data to effectively manage periodic reviews and evaluations, making sure that appropriate recommendations for adjustments reach the High Level Group for approval.

MoWCA commits to the development of an indicator set to track progress across the five outcomes. The development of this indicator set, involves a two-stage process. Firstly, a data preparation stage, including a review of the child outcome indicator set and the development of an indicator inventory. Secondly, the development of a selection process which will utilise the implementation structure of similar action plans. While changes in population-level indicators are not easily attributable to a particular policy, programme or initiative, and do not always answer questions about why particular results were or were not achieved, a set of key indicators will support the tracking of change over time. Key indicators, as relevant to the adolescent cohort, will be utilised to track progress in young people's lives over the lifespan of the NAS.

For better coordination and resource utilization, the National Advisory Committee recommend that relevant ministries should revisit their respective mandates on adolescent issues and to align these jointly with the SDG targets.³⁴

4.4 Review

A mid-term review of NAS to assess progress, examine the process and review the continuing relevance of its objectives and priorities will be planned. The pathway for further progression will then be agreed.

³⁴ Advisory Committee meeting at Shishu Academy on November 8, 2020