

# Promoting and Protecting Youth's SRHR in achieving SDGs



This publication is the youth consultation report in relation to Bangladesh's participation at the High Level Political Forum (HLPF) 2020, and the development of the Voluntary National Review (VNR) report.

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Right Here Right Now (RHRN) initiative in Bangladesh aims to create conducive policy environment through multi-level advocacy drives so that youth and adolescent clusters have improved access to youth friendly services in public health facilities and meaningful participation in SRHR interventions to address the knowledge gaps. Bandhu as the Host and Implementing Organization of this Platform.

Bangladesh RHRN platform advocates for three major areas which include- comprehensive sexuality education, institutionalization for the Gazette notification recognizing *Hijra*/third gender population, youth friendly and adolescent Friendly services for young and adolescents.

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#### **ACKNOWLEDGEMENTS**

We are indebted to our colleagues from different youth-led organizations, RHRN Youth advocates across Bangladesh, Youth Voice-RHRN, rover scout members who have participated during the process and shared their valuable insights.

We are thankful to our colleagues from RHRN Platform Organizations Maksuda Khatun (Naripokkho), Mehnaz Alam Kmkum (BRAC-Education Programme), Nazia Zebin (Oboyob), Maruf Rahman (Oboyob), Najia Nuray Jarin (Bandhu Social Welfare Society) and Dr. Elvina Mustary (RHSTEP) for supporting us during the process.

Special thanks to the RHRN Research Fellows Nazmin Sultana and Sabrina Momtaj Tithi in organizing youth consultations and providing necessary research support for the report.

We wish to express our sincere gratitude to Barrister Nawmi Naz Chowdhury (<u>ARROW</u>), Shamala Chandrasekaran (<u>ARROW</u>), and RHRN Host and implementing organization Bandhu Social Welfare Society for providing necessary support and guidance during the reporting process.

## **List of Acronym**

**AIDS** Acquired Immune Deficiency Syndrome

**AFHC** Adolescent Friendly Health Corner

**AYFS** Adolescent Friendly Services

**CSE** Comprehensive Sexuality Education

**DGFP** Directorate General of Family Planning

**DGHS** Directorate General of Health Services

**FP** Family Planning

**GBV** Gender Based Violence

**HIV** Human Immunodeficiency Virus

**MoFHW** Ministry of Family and Health Welfare

**MoWCA** Ministry of Women and Child Affairs

**NCTB** National Curriculum and Textbook Board

**SRHR** Sexual and Reproductive Health and Rights

**SRH** Sexual and Reproductive Health

**STI** Sexually Transmitted Infection

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### **Executive Summary**

Bangladesh has a large percentage of young people which is approximately 22 percent of the whole population. We have 10 years left to achieve the Sustainable Development Goals (SDG) and Bangladesh is committed to achieve all goals. In achieving these SDGs the significant attention must be placed on this key population of the country whose development may have tremendous impact in fulfilling the 2030 Agenda. It is important to note that investing on these young people means investing on the socio-economic development of the country.

This report is prepared based on a series of youth consultations under Right Here Right Now (RHRN) Bangladesh Platform where a number of young people across country participated in these consultations.

In this report the youths have focused on the most pressing needs around SRHR. The analysis was done after with intersectional and human rights-based approach. A number of youth advocates joined in the series of consultations and shared their experiences and provided policy recommendations in align with existing policies and SDGs.

The focus areas of the report are; comprehensive sexuality education for all adolescents, availability and non-discriminatory access to SRH information and services in government facilities and the gender equality in SRHR as a cross cutting issue.

### **Bangladesh Context**

Bangladesh has a significant amount of youth and adolescent population. Sexual and Reproductive Health and Rights (SRHR) is still a taboo especially in remote and underdeveloped areas. Bangladesh has the highest rate in child and early marriage in South Asia, which means that the rate of child pregnancy is also high. Youths and adolescents have very limited access to the Comprehensive Sexuality Education (CSE) which is barring them to have informed decision in their life. And parents are not aware of their SRH related issues due to the stigmatization of the issues and stereotypical narratives around SRHR. For example,

The content in the physical study book and home-economics book does not contain adequate information on the SHR and does not count in written exams. In addition, teachers are not comfortable teaching about this section due to shyness and the content being the taboo. As a result, Students barely study them at home and they grow up with misconception and deprived from proper knowledge about CSE. Which affect their SRHR in the long run. In addition,

Youths shared during the consultations that, boys who are 'feminite' are often trolled and bullied which hampers their mental health and reproductive health issues. The gender diverse community community also do not have adequate access to the information, they do not have clear idea about STIs, safe sex. Even the text book doesn't cover much about STI and STD (sexually transmitted disease) issues. During adolescent phase, there may appear sexual desire in adolescents, but there is no adequate access to information about how to control it or what to do during this time.

Given the context, when these young people become parent they also repeat the same cycle of stigmatization and negative narratives on SRH. In realizing the 2030 Agenda and commitment, this cycle needs to be broken by increasing awareness, mobilizing support in the community level and creating positive narratives on SRHR.

Presently, Bangladesh is aspiring to achieve the sustainable development goals and the government has been taking various impressive initiatives like establishing Adolescent Friendly health corners to provide SRHR information and services to all adolescent irrespective of their status, included gender lenses in it's programmes, etc.

There is no comprehensive data available that shows the knowledge level of youths and adolescent on SRHR. The low level of knowledge on the issues making the young population vulnerable to various health risks including maternal mortality, STD/STIs, HIV/AIDS. The low level of SRH knowledge is closely linked with the increasing number of gender-based violence against child brides, women and girls and affect negatively in the socio-economic development of the country.

"We grew up in a society where menstruation is a taboo and girls cannot share their basic need regarding menstruation even with their brother, father, or any male member of their family. Many problems like child marriage, early pregnancy due to child marriage would have been solved if we can discuss such issues with our family."

-Youth Advocate, Youth's Voice, Naripokkho-RHRN. (Reference: RHRN Research study finding)

Youths and adolescents are the in the heart of SDGs, and without involving them in the process, it is not possible to achieve 2030 Agenda. In Bangladesh, there is trend of youth mobilization for support for SRHR that started not too long ago. Now days young people are mobilization public support starting right from their own families and educational institutions. They are creating small waves for change in their communities in creating counter narratives against negative social norms and stereotypes, and not afraid to voice their needs and demands relating to their Sexual and Reproductive Health and Rights.

And, it is important to mention that, the government is committed to end the child marriage of girls under 15 years and to reduce child marriage rate (by one third) for girls between in the age 15-18 years by 2021 and to entirely eliminate child marriage by 2041<sup>1</sup>. In order to achieve

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<sup>&</sup>lt;sup>1</sup> National Action plan to End Child Marriage 2018-2030

the goal government has been conducting campaign, grassroot level awareness raising and endorsing youths in the community level to play role in combatting child marriage.

Gender equality is another crucial issue related to young people's SRHR and SDGs. In order to ensure healthy and dignified life, it imperative to ensure equal and non-discriminatory access to education, information and healthcare services for women and girls in align with SDG 3,4 and most notably SDG 5. Gender diverse population including *Hijra* population are one of the most marginalized vulnerable population. Often these population face stigma, discrimination and social exclusion in accessing their rights including SRHR information and services. Ministry of Social Welfare, published an official Gazette notification in 2014, recognizing the "*Hijra Community*" as a separate gender identity. This Gazette notification is a landmark step to recognize the gender diverse community. This step has contributed this historically excluded community to be included in different official forms and formats (i.e. passport, voter id).

Through the progress has been made in ensuring legal protection and gender equality for gender diverse community(GDP), but still the definition of GDP needs to be clear in laws and policies, and the issues of their sexual health rights needs to be ensured through different health care and service facilities as these are two most important factors in living a dignified live.

#### **Covid-19 context**

Current Covid-19 situation has contributed to intensify the situation and impacting directly on the SRHR of young people. It is reported from numerous news reports that, the rate of child marriage is going up due to parents' inability to support their daughter especially in rural areas of the country. It is also concerning that, the gender-based violence most particularly domestic violence and sexual abuse is also increasing in an alarming rate and most of the cases are not being reported. Here, the terms "gender-based violence not limited to only domestic violence and rape but also include sexual abuse child an early marriage, forced marriage.

During COVID 19, the helplines barely works or the caller dosent have such access. If someone from remote area calls for help from police regarding domestic violence, barely they get any response.

During the consultations, youth advocates shared that, during the covid-19 situation, the issues around SRHR has taken the back seat especially the SRHR related services. In this context,

the young people from different intersections of the society are facing difficulties in realizing their SRH needs and demands. It is to note that the vulnerable and marginalized communities are the ones who hit hard in this situation including people with disability, gender diverse population, ethnic groups.

Youths appreciate Bangladesh Government's approach in combatting Covid-19 and adopting a comprehensive plan. The government has announced the Covid-19 recovery plan which is about "US\$ 11.6 billion (3.3% of GDP) to be implemented in three phases- immediate, short and medium<sup>2</sup>" and the plan includes health and socio-economic recovery measures.

#### **Policy Framework**

Bangladesh is the signatory of a number of international conventions and committed to ensure young people's health rights including SRHR. Bangladesh is the signatory of Child Right Convention (CRC), International Conference on Population and Development (ICPD), the Beijing Platform for Action. And all these Conventions promotes for healthy and dignified lives of young people.

Bangladesh Constitution guarantees health rights in its' provisions and this is reflected in different laws and policies. **Bangladesh Population Policy**, **2012** deals with reproductive health, family planning and prioritized adolescents in major strategies for implementation. **Section 5.1** (d) provides that-"Bring newly-weds, adolescents and parents of one or two children under the coverage of family planning services on a priority basis". Under the said Policy the State has the responsibility to increase awareness on maternal and child health, reproductive health and family planning issues among adolescents, and parents.

On the other hand, **Education Policy**, **2010**, provides for ensuring quality education for all. This provision can be translated as a responsibility on the State to implement in such a way that the education includes the basic life skill-based information like CSE and SRHR in the text book.

It is important to note that, the current **National Strategy Adolescent Health, 2017-2030**, is developed based on the human rights principle and having the youths wellbeing in its priority

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<sup>&</sup>lt;sup>2</sup>See more at https://sustainabledevelopment.un.org/memberstates/bangladesh

agenda. The Goal of the strategy stated as follows: "By 2030 all adolescents lead a healthy and productive life in a socially secure and supportive environment where they have access to quality education and comprehensive information, education and services<sup>3</sup>".

It is important to note that, the issues relating to health of the gender diverse community including *Hijra* community, is missing, therefore leaving the scope for discriminatory practices against this marginalized groups.

#### **Relevant Ministries:**

**Ministry of Health and Family Welfare (MoFHW)** is primarily responsible for ensuring health issues of young people including adolescents. Under this Ministry, the Directorate General of Health Services (DGHS) and Directorate General of Family Planning (DGFP) are implementing programme addressing young people's health which includes SRHR.

Youths appreciate the initiatives taken under the purview of MoFHW-'Adolescent Friendly Health Services (AFHS)', Awareness raising programmes on reproductive health, counselling porgrammes, creating referral system with school health clinics with healthcare facilities etc..

Despite these efforts and programmes, there are still unmet needs of youths and adolescents regarding SRHR that require immediate attention (i.e. Disable friendly and gender responsive AFHS, digital access to SRHR information etc.) in order to comply with SDGs 3 and 5.

In ensuring gender equality and achieving SDG 5, the Ministry of Women and Children Affairs (MoWCA), has taken a number of initiatives in preventing child marriage which is one of the major challenges in ensuring SRHR for young women and girls. However, the covid-19 situation has again has changed the scenario, that now the rate of child and early marriages are on rise. The attention on this issue must be placed very carefully and call for immediate action by the government.

The **Ministry of Youth and Sports** is playing role in enhancing the capacity of young people and prioritises SDGs. In it's Draft National Youth Policy 2017 <sup>4</sup>, it clearly mentioned about

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<sup>&</sup>lt;sup>3</sup> 3.2. Goal, Framework, National Strategy Adolescent Health, 2017-2030

<sup>&</sup>lt;sup>4</sup> See more at

https://moysports.portal.gov.bd/sites/default/files/files/moysports.portal.gov.bd/page/c424494d\_4301\_4619 acf9\_d16777c0b044/Draft%20English%20Version%20of%20National%20Youth%20Policy%202017.pdf

bringing young people in the decision-making process thorough participating in civic and social spaces. The policy also suggests to create enabling environment for young people including transgender as youths are the key population to realize 2030 Agenda.

The **Ministry of Education** has included health issue in the school curricula as an expression of their commitment to ensure quality and skill-based education. But the need for a comprehensive Sexuality Education in the formal school curriculum remains unmet.

There are other ministries who are also addressing on adolescent health issues thorugh different programmes and projects; Ministry of Local Government, Rural Development and Cooperatives; Social Welfare Ministry.

# outh Recommendations:

During a series of youth consultations, around 400 youths shared their ideas and visions how they envisioning post 2030.. They shared their real life challenges and provided policy recommendations to the government in achieving the sustainable development goals.

#### SDG 3 Ensure healthy lives and promote wellbeing for all at all ages



- **3.1:** By 2030, reduce the global maternal mortality ratio
- **3.7:** By 2030, ensure universal access to sexual and reproductive health-care services, including family planning, information and education, and the integration of reproductive health into national strategies and programmes
- **3.3**: By 2030, end the epidemics of AIDS, and neglected tropical diseases. And other communicable diseases.
- **3.8:** Achieve universal health coverage, including financial risk protection, access to quality essential services and access to safe, effective, quality and affordable essential medicine and vaccine for all.
- 1. Despite the progress made in ensuring services through the AFHS AYFS the improvements needed in the following areas:
  - a. Employ adolescent friendly counsellor who has specialized knowledge to deal with young people and will provide services thorough the adolescent corners.
  - **b.** Awareness campaigns on encouraging young girls, boys and transpeople to seek support from these centers.
  - **c.** Increase annual budget to fully equipped these centers.
  - **d.** Provision to run menstruation hygiene campaign and awareness through these centers involving young girls and their parents.

- **e.** Review the opening and closing time of these centers so that all adolescent can seek this service.
- **f.** Ensure the privacy and safety of the adolescents seeking services from these corners.
- 2. Employ more service providers in the health are service centers so that they can provide support to the adolescents without any delay.
- 3. The government also need to place their focus on adolescent and young boy's SRH and mental health and the services. As the main focus is on girls so they are mostly neglected.
  - Maintaining counselling online and offline also making the services online for post COVID scenario.
- **4.** Strengthen the monitoring system on Adolescent and youths related health services programs and services i.e. AFHS.
- 5. Strengthen adolescent and youth friendly SRH services in urban settings.
- 6. Provide necessary support in including activities targeting disabled girls to aware and support them during their adolescent period on their SRH (i.e. menstrual hygiene)



SDG 4 relevance and recommendations: "Ensure inclusive and Equitable quality education and promote lifelong learning opportunities for all"

To ensure life-skill based, equitable and quality education the youths have provided following recommendations to the government in line with SDG 4:

1. Provide teachers with specialized training on gender and comprehensive sexuality education (CSE) teachers in their training to ensure that they are

teaching about CSE to their students. The content in the physical study book and home economics book is not enough nor comprehensive and it is till class 8. It doesn't appear in the exam. Teachers are not comfortable teaching about it and ask students to read them at home. Students barely study them at home and they grow up with misconception and deprived from proper knowledge about CSE.

- 2. Increase teachers' and family's participation to implement Comprehensive Sexuality Education for all children.
- **3.** Include youth changemakers and advocates CSE in taking informal CSE sessions in schools in order to bring adolescents into the discussion around CSE.
- **4.** Review the existing curricula on CSE and include age appropriate, need based and inclusive sexuality education.
- **5.** Create network among the teachers, parents, adolescent girls and boys and community people in promoting CSE.



SDG 5. Achieve Gender Equality and Empower All Women and Girls relevance and recommendations

- **5.2** Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation
- **5.3**: Eliminate all kind of harmful practices , such as child, early and forced marriages., and female genital mutilation
- **5.6** Ensure universal access to Sexual and reproductive health and rights as agreed in International Programme of Action of ICPD and Beijing Platform for Action
- **5.C** Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels.

- 1. Ensure the strict implementation of the Child Marriage Act, 2017, and most importantly ensure the proper follow up and monitoring of the National Action Plan for Child Marriage Prevention, 2018-2030 which is in line with SDG 5.
- 2. Implement the commitments made on the SRHR issue during the ICPD Programme of Action and Beijng Platform for Action, to ensure SRHR for all women and girls.
- **3.** Mobilize youth activism in the community level in combatting child, early and forced marriages and violence against child brides.
- **4.** Enact the law on Victim and witness Protection in order to ensure the safety of the victims of violence.
- 5. Include men and boys in campaign against gender-based violence.
- **6.** Setting up informal group in bringing the parents in to discussion regarding the negative impact of harmful traditional practices like child marriage.
- **7.** Enact laws and policies that allows digital representation of victims of violence and permits for submitting digital evidence in the virtual court.
- **8.** Raise awareness on the issues faced by trans-women/girls so that they are not socially excluded.
- **9.** Create enabling environment and infrastructure for disable women and girls (i.e. disability friendly female wash rooms)
- **10.** Address the need of Adolescent unmarried girls and boys who have very limited access to not have access to SRH information regarding family planning or issues related to STIs. Need to ensure that.



SDG 10: Reduce inequality within and among countries: relevance and recommendations

**10.3:** Ensure equal opportunity and reduce inequalities of outcome, including by eliminating **discriminatory laws**, policies and practices, and promoting appropriate legislation, policies and action in this regard

- **1.** Ensure the implementation of the official Gazette notification in all formal and formats of official documents for gender diverse population including *Hijra*.
- **2.** Enact and implement the Anti-Discrimination Bill in ensuring and protecting equality for everyone as man.
- **3.** Youths urge the government to draft and enact a new policy or law that ensure equal employment opportunity for everyone.
- **4.** Develop a draft of Transgender Protection Bill. And include the young transgender population during the process.

#### General Recommendations in line with SDG 3, 4, 5, 8, 16

- 1. Government can arrange online skill development courses such as software, hardware course for young people to prepare them as skilled manpower.
- 2. Government needs to strengthen the education system as Bangladesh is an agriculture-based country where the farmers are not educated especially, vocational education is very important,
- 3. Undertake necessary steps in order to mitigate the existing information gap among health care service provider on gender diverse people's SRH needs and demands.
- 4. Develop a guideline for the health care service providers gender responsiveness of the Healthcare service centers.
- 5. Our family and society should teach us about them so that we do not discriminate them (half of the information was missing

#### Covid-19 related recommendations in line with SDG

- 1. Due to this pandemic, the SRH services become minimum. The young changemakers suggests to introduce toll free number for providing SRH services (mostly advice).
- 2. Include SRHR in the Covid-19 recovery plan with an intersectional approach.
- **3.** Provide support in creating social media content about SRHR and CSE to reach the larger number of the and adolescent and youth.
- **4.** Ensure meaningful youth participation in decisions making and community activism in order to fulfill 2030 agenda.

- create network with the grass root level youth networks, groups and channels.
- Ensure youths participation in parliament.
- National youth policy should be updated and include youths from different intersections (i.e. ethnicity, disability, gender etc.)
- Ensuring right based information for youth through online mediums.
- Government need to undertake initiatives for meaningful youth participation in the civil and political spaces, they should follow the following five principles; Rights-based, Transparent and informative, Voluntary and free from coercion, Respectful of young people's views, backgrounds, and identities; and safety security.
- **5.** Government needs to include innovative approaches for vocational education and skill development courses for young people.
- **6.** Strengthen the gender-based violence response system during the social distancing situation by involving technology to raise awareness against violence and providing support to the victims.
- **7.** Include more young people in the peace building work inn their respective communities.

#### Appendix: List of youth-led and Organizations participated in the youth consultations

- **1.** Kotha Foundation
- 2. Wreetu
- **3.** Youth-net
- **4.** Inclusive Bangladesh
- **5.** SheDecides Bangladesh
- **6.** Justicia Feminist Network
- **7.** Youth Focal Point F02020
- **8.** RHRN Youth Advocates from BRAC-Education Programme
- 9. Youth Voice, RHRN and Naripokkho
- 10. Bangladesh Society of Criminology and Victimology
- 11. Commonwealth Youth Peace Ambassadors Network (CYPAN)
- 12. Participants from Bangladesh Rover Scout
- **13.** Y-Coalition

## **Together for Change**



























