



Bangladesh Adolescent Health and Wellbeing Survey 2019–20

Final Report





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Final Report

National Institute of Population Research and Training
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare

International Centre for Diarrhoeal Disease Research, Bangladesh
Data for Impact

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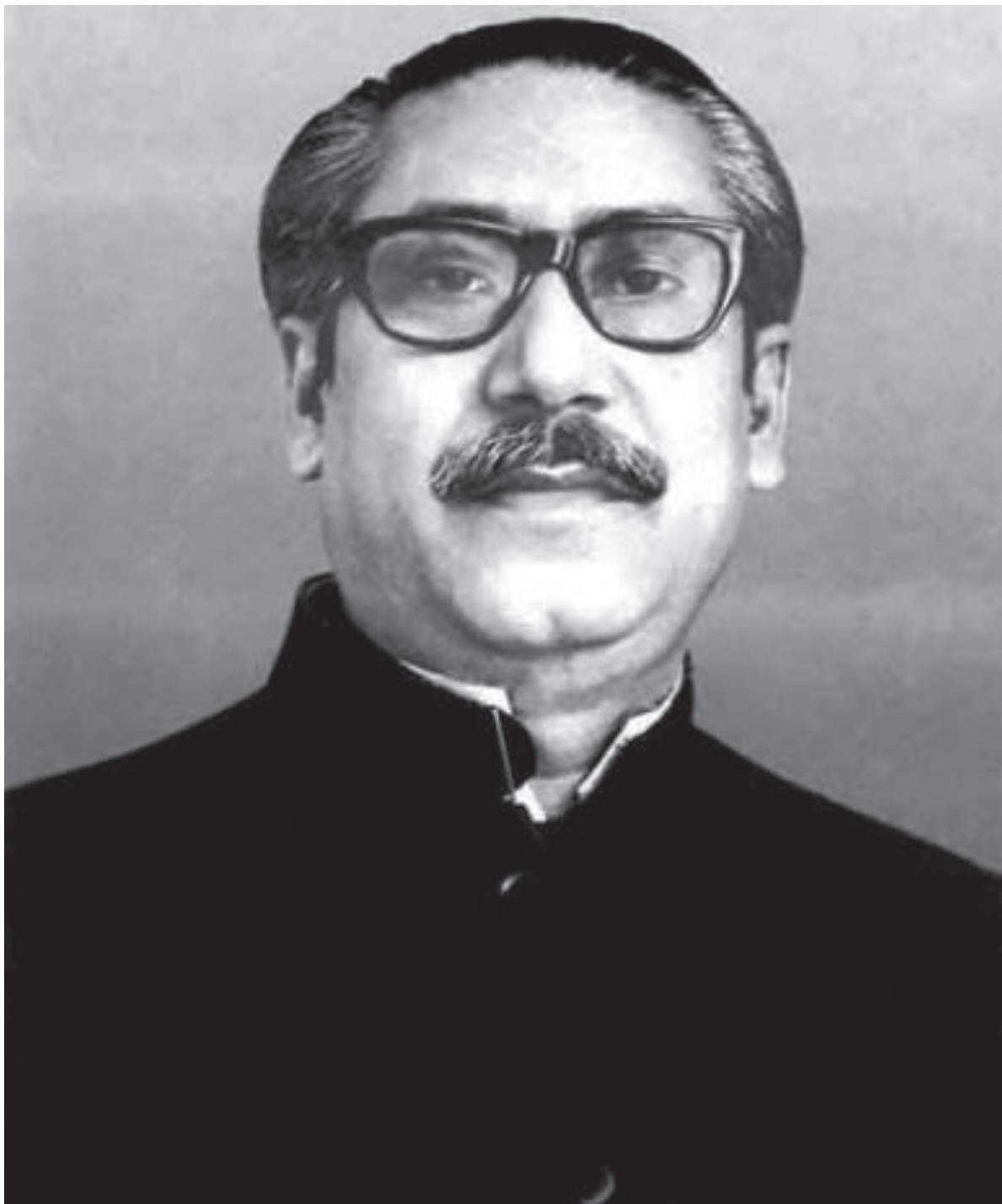
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**Dedicated to
Father of the Nation Bangabandhu Sheikh Mujibur Rahman
on his 100th Birth Anniversary**



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MESSAGE FROM THE MINISTER



Zahid Maleque, MP
Minister

Ministry of Health & Family Welfare
Govt. of the People's Republic of Bangladesh

Message

Adolescents are tomorrow's adult population, and their health and well-being are important. It is a transitional stage of human development and unique time for laying the foundations of good health. It is my great pleasure to see that NIPORT conducted a national representative survey on 'Bangladesh Adolescent Health and Well-being Survey (BAHWS) 2019-20' that tried to understand the state of health and well-being of adolescents.

We live in an era of unparalleled advancements in the lives of women and children. Bangladesh has made tremendous progress in the health, population and nutrition sector under the present government, led by the Honorable Prime Minister Sheikh Hasina. Despite the notable achievements, we still have to address the challenges in making available quality adolescent friendly health information and services for the overall development. The Ministry of Health and Family Welfare is working relentlessly to improve the health status of adolescents in the country along with other ministries. We are prevailing at the reaping of demographic dividend through investing in and providing proper support to our adolescents to become competent citizens of our country. I hope the findings of the BAHWS 2019-20 will be useful to formulate the policy regarding the adolescents as well as for policymakers, researchers and service providers of the country.

I take this opportunity to congratulate Secretary, Medical Education and Family Welfare Division; Director General, NIPORT and his team, International Centre for Diarrhoeal Disease Research, Bangladesh (icddr,b), MEASURE Evaluation/ D4I, University of North Carolina at Chapel Hill, USA, Development Partner the United States Agency for International Development (USAID) and the Foreign, Commonwealth and Development Office (FCDO) and Human Development and Research Centre (HDRC) involved in the survey for their hard work for bringing out this valuable report. My sincere thanks to all of them.

Thanks are also due to the members of the Stakeholder Advisory Committee and Technical Working Group of the survey for providing technical and administrative support.

Joy Bangla, Joy Bangabandhu
Long live Bangladesh.

Zahid Maleque, MP

FOREWORD



Md. Ali Noor
Secretary
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare
Government of the People's Republic of Bangladesh

I am very glad to know that National Institute of Population Research and Training (NIPORT) has published the Bangladesh Adolescent Health and Well-being Survey (BAHWS) 2019-20 with technical assistance from International Centre for Diarrhoeal Disease Research, Bangladesh (icddr,b), MEASURE Evaluation/D4I, USA and United States Agency for International Development (USAID)/Bangladesh.

Bangladesh has made significant improvements in the health, nutrition and family planning sector in the last decades. The government of Bangladesh is committed to ensuring the health of adolescents-large and growing segment of population. Government has formulated 'National Adolescent Health Strategy 2017-2030' and taken specific activities in the 4th Health, Population and Nutrition Sector Program (HPNSP) to meet the health needs of adolescent.

The survey illustrates that school attendance, access to mobile phone is almost universal in Bangladesh. The survey identified major challenges related to reproductive health, nutrition, dietary diversity, violence and harassment, mental health and utilization of health services that require immediate action if services are to be improved. It takes us closer than ever to Bangladesh where evidence is available on the health status of adolescents married and unmarried. It is now time to use that evidence.

Nevertheless, the need for further detailed analyses and dissemination of the BAHWS data remains. I believe this publication will be very helpful for policy maker, practitioners, researchers and different stakeholders.

I would like to extend my heartfelt thanks to all who contributed to the survey. I also like to thank NIPORT and Human Development and Research Centre (HDRC) for their efforts in conducting BAHWS 2019-20. I deeply appreciate icddr'b, MEASURE Evaluation/D4I, USAID Bangladesh and FCDO for technical & financial assistance that helped ensure the ultimate success of this important survey.

(Md. Ali Noor)

PREFACE



Susanta Kumar Saha

Director General

National Institute of Population Research and Training (NIPORT)

Medical Education and Family Welfare Division

Ministry of Health and Family Welfare

Government of the People's Republic of Bangladesh

I am overtly pleased to present 'Bangladesh Adolescent Health and Well-being Survey (BAHWS) 2019-20' to our distinguished policymakers and researchers. The report published by the National Institute of Population Research and Training (NIPORT), Health Education and Family Welfare Division of the Ministry of Health and Family Welfare (MOHFW) under Training, Research and Development (TRD) operational plan of 4th Health, Population and Nutrition Sector Program (4th HPNSP), with technical assistance from International Centre for Diarrhoeal Disease Research, Bangladesh (icddr,b), MEASURE Evaluation/ D4I, University of North Carolina at Chapel Hill, USA, and United States Agency for International Development (USAID)/Bangladesh. Human Development and Research Centre (HDRC), a private research agency was responsible for data collection, data entry, and data processing. The survey was conducted successfully in a nationally representative sample of 67,093 households and among them, a total of 4,926 ever married female adolescents, 7,800 unmarried female adolescents, and 5,523 unmarried male adolescents were successfully interviewed. Data collection occurred in five phases, each about four weeks in duration. Data collection started on July 25, 2019 and was completed on January 10, 2020.

BAHWS 2019-20 presented findings to understand the state of health and well-being of male and female adolescents aged 15-19 years. It documented adolescents' exposure to print, electronic and social media, different forms of violence, bullying and sexual harassments against adolescents. It assessed adolescents' knowledge, attitude and practice regarding menstruation, marriage, and contraception, nutritional status of adolescents, use of health information and services, attitude towards gender norms, mental health status and connectedness to family and friends.

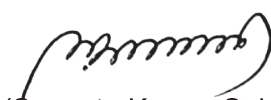
BAHWS 2019-20 illustrates that almost universal school attendance in Bangladesh. Access to mobile phone is also found almost universal among adolescents. Most commonly used mass-media is television followed by internet. One third of the female adolescents are stunted (short for age) and only 3% of ever married adolescent women and 8% of unmarried girls are underweight. However, the survey shows challenges to ensure necessary health services, information, skills and opportunities for adolescents to develop their full potential to become productive, health and peace-loving adults. I hope through this initiative we will be able to ensure the health of adolescents as detailed in the Sustainable Development Goals and National Adolescent Health Strategy 2017-2030 of Bangladesh.

The report is an outcome of the contributions of professionals of a number of organizations and individuals. It was guided by the members of the Stakeholder Advisory Committee (SAC), which consisted of experts from government, nongovernmental, academia and international organizations as well as researchers and professionals working in the health, nutrition, and population sectors in Bangladesh. A Technical Working Group (TWG) with representatives from NIPORT; the MOHFW; the Program Management and Monitoring Unit (PMMU); the University of Dhaka; the International Center for Diarrhoeal Disease Research, Bangladesh (icddr,b); USAID/Bangladesh; and MEASURE Evaluation/D4I was formed to assist in designing the survey instruments and implementing the survey. I would like to put on record my sincere appreciation to the SAC and TWG members for their effort in all stages of the survey. I would also like to acknowledge the technical support provided by subject matter experts in violence, sexual harassment and mental health during designing the questionnaires.

Special thanks go to the field supervisors and enumerators for their tireless efforts in making the fieldwork successful. I am also grateful to all who willingly cooperated with the survey teams and provided the information that we have analyzed in this report. We are deeply grateful to icddr,b for ensuring the quality of data through extensive field monitoring during field work.

I would like to congratulate the professionals of the NIPORT Research Unit for the successful completion of the survey. My sincere thanks to HDRC for collection and compilation of data. Special thanks to the Chief Advisor of HDRC Professor Abul Barkat for his outstanding leadership to complete the survey data collection within the stipulated time. I also extend my thanks to MEASURE Evaluation/D4I, icddr,b and USAID/Bangladesh for technical assistance and completing the task in a professional manner. Finally, Government of People's Republic of Bangladesh, USAID and FCDO deserve special thanks for providing financial support for the survey.

Last, but not least, I would like to express my special gratitude to the honorable Secretary, Medical Education and Family Welfare Division, Ministry of Health and Family Welfare, Government of Bangladesh, for his valuable guidance and direction at every stage of the survey's implementation.



(Susanta Kumar Saha)

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ABBREVIATIONS



AFHS	adolescent-friendly health services
BAHWS	Bangladesh Adolescent Health and Wellness Survey
BMI	body mass index
C4D	Communication for Development
D4I	Data for Impact
ECD	early childhood development
FCDO	Foreign, Commonwealth & Development Office
FP	family planning
GOB	Government of Bangladesh
HDRC	Human Development and Research Centre
icddr,b	International Centre for Diarrhoeal Disease Research, Bangladesh
ICPD	International Conference on Population and Development
ICT	information and communications technology
LMIC	low- and middle-income countries
MCWC	maternal and child welfare centre
MDD	major depressive disorder
MHM	menstrual hygiene management
MOHFW	Ministry of Health and Family Welfare
NGO	nongovernmental organization
NIPORT	National Institute of Population, Research and Training
TRD	Training, Research and Development
PSU	primary sampling unit
RH	reproductive health
SDG	Sustainable Development Goals
SRH	sexual and reproductive health
SSU	secondary sampling unit
UNICEF	United Nations International Children's Emergency Fund
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
WASH	water, sanitation and hygiene
WHO	World Health Organization

Summary

Primary objective:

- The primary objective of the Bangladesh Adolescent Health and Wellbeing Survey (BAHWS) 2019-20 was to examine and better understand the state of health and wellbeing of male and female adolescents ages 15-19 years in the country.

Stakeholders and technical assistance:

- The survey was conducted under the authority of the National Institute of Population Research and Training (NIPORT), Health Education and Family Welfare Division of the Ministry of Health and Family Welfare (MOHFW) under the Training, Research and Development (TRD) operational plan of the 4th Health, Population and Nutrition Sector Program (4th HPNSP), with technical assistance from the International Centre for Diarrhoeal Disease Research, Bangladesh (icddr,b), MEASURE Evaluation/Data for Impact (D4I), University of North Carolina at Chapel Hill, USA, and the United States Agency for International Development (USAID)/Bangladesh. The Human Development Research Centre (HDRC) was responsible for data collection, data entry, and data processing.

Survey sample:

- The survey was conducted with a nationally representative sample of 72,800 households, and 67,093 households (98%) were successfully interviewed. A total of 4,926 ever-married female (97% response rate), 7,800 unmarried female (94% response rate), and 5,523 unmarried male (85% response rate) adolescents ages 15-19 were successfully interviewed from the selected households using three types of individual questionnaires (ever-married female adolescents, unmarried female adolescents, and unmarried male adolescents) that were piloted before data collection began.

Data collection:

- Data collection occurred in five phases, with each phase taking about four weeks to complete. Data collection started on July 25, 2019 and was completed on January 10, 2020.

icddr,b monitored data collection with 18 independent field monitoring officers and four quality control teams that accompanied the data collection teams, observed household and individual interviews, and reinterviewed selected sections of the individual and household questionnaires along with observations. They also provided feedback as and when necessary and followed individual interview completion status through a mobile app.

Data processing:

- Data processing was accomplished using Census and Survey Processing System (CSPro) software. Data processing began shortly after fieldwork commenced and consisted of manual review and cleaning of completed questionnaires, coding of open-ended questions, double data entry, and editing of inconsistencies in data.

1.1. Introduction

Globally, there are about 1.2 billion adolescents ages 10-19 years and 89% of them live in developing countries (UNICEF, 2019^a). The International Conference on Population and Development (ICPD), held in 1994, first gave prominence to adolescents as a special population, and served as an impetus for increased investments aimed at improving adolescent health and wellbeing. While in the 25 years following the ICPD significant progress has been made to enhance adolescents' health, most of the focus has been on sexual and reproductive health (SRH) (Kabiru, 2019). Recently, a multisectoral, life-course approach to adolescent health has gained attention, as outlined in the World Health Organization's (WHO) Global Strategy for Women's, Children's, and Adolescents' Health 2016-2030 (WHO, 2015) and the Sustainable Development Goals (SDG) (Bhutta, Yount, Bassat, & Arikainen, 2020). Additionally, the 2016 Lancet commission has recognized that investments in adolescent health and wellbeing provide a triple dividend of benefits (Patton, et al., 2016). Despite the increased focus, there remains limited evidence on effective interventions for adolescents, posing a challenge to promoting adolescents' health and human rights (Patton, et al., 2016; UNFPA, 2016; UNICEF, 2011). Access to disaggregated data and analyses of causal pathways to health outcomes are needed to design and implement health and wellness programmes and policies, and to monitor progress of adolescent health and wellness over time.

In Bangladesh, adolescents ages 10-19 years constitute over one-fifth of the total population. The Ministry of Health and Family Welfare (MOHFW) of the Government of Bangladesh recognizes adolescent health as a critical area of focus, and has the primary responsibility for addressing adolescents' health needs. The MOHFW developed the National Strategy for Adolescent Health, 2017-2030 (MOHFW, 2018), with the goal that by 2030 all adolescents in Bangladesh will attain a healthy and productive life in a socially secure and supportive environment. The strategy focuses on four health areas: sexual and reproductive health; violence, nutrition, and mental health; and includes two crosscutting themes—social and behaviour change communication and health systems strengthening. The MOHFW is committed to ensuring the effective implementation of the strategy, which will contribute to the overall wellbeing and health of all adolescents in the country.

To support the national adolescent health strategy, the 4th HPNSP 2017-2022 has two operational plans focusing on adolescent health—the Maternal, Neonatal, Child and Adolescent Health Operational Plan under the Directorate General of Health Services (MOHFW, 2017); and the Maternal, Child, Reproductive and Adolescent Health Operational Plan under the Directorate General of Family Planning (Government of Bangladesh, 2017). A number of other ministries are also positioned to support adolescent health, including the Ministry of Local Government, Rural Development and Cooperatives; Ministry of Education; Ministry of Social Welfare; Ministry of Women and Children Affairs; and Ministry of Youth and Sports. Finally, multilateral and bilateral development partners, including United Nations agencies and donors, have a history of supporting adolescent health work in Bangladesh.

To have a better understanding of the state of adolescent health in Bangladesh, and invest appropriately in each health area, the Government of Bangladesh, development partners, and nongovernmental organizations (NGOs) need access to high quality data regarding the health and wellbeing of adolescents. In Bangladesh, there is an overall paucity of data on adolescent health at the national level. While there have been some small-scale studies to assess the health status of adolescents, most of them have been focused on SRH, and provide limited information on other areas of health and wellbeing of adolescents at the national level.

Within this context, and in line with the strategic focus of the National Strategy for Adolescent Health 2017-2030, we conducted a national survey of female and male adolescents ages 15-19 in Bangladesh to better understand their state of health and wellbeing.

1.2. Objectives of BAHWS 2019-20

The objectives of the BAHWS 2019-20 were to:

- Document exposure to print, electronic, and social media;
- Assess knowledge, attitudes, and practices regarding menstruation, marriage, and contraception;
- Measure nutritional status;
- Understand use of health information and services;
- Assess attitudes towards gender norms;
- Document different forms of violence, bullying, and sexual harassment;
- Assess mental health; and
- Assess connectedness to family and friends.

The survey was administered to ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years. These groups were selected based on the scope of work of the survey. Adolescents younger than 15 years were not included due to the sensitive nature of some of the survey questions and the difficulty often faced in obtaining ethics approval for collecting data from younger youth.

1.3. Implementing Organizations

The BAHWS 2019-20 was conducted under the authority of the National Institute of Population, Research and Training (NIPORT), Health Education and Family Welfare Division of the Ministry of Health and Family Welfare (MOHFW) under the Training, Research and Development (TRD) operational plan of the 4th HPNSP, with technical assistance from the International Center for Diarrhoeal Disease Research, Bangladesh (icddr,b) and MEASURE Evaluation/Data for Impact (D4I). The United States Agency for International Development (USAID)/Bangladesh provided technical assistance in all phases of the survey. Human Development and Research Centre (HDRC), a private research firm located in Dhaka, was responsible for conducting the survey field work, which included translating and pretesting the questionnaires, hiring and training field staff, implementing data collection, and entering and processing the data.

1.4. Funding Source

The BAHWS 2019-20 was funded by the Government of the People's Republic of Bangladesh, USAID, and the Foreign, Commonwealth and Development Office (FCDO).

1.5. Survey Implementation

1.5.1. Sample Design

The sample for BAHWS 2019-20 is nationally representative and includes adolescent ages 15-19 years residing in non-institutional dwelling units. The main sampling goal of the survey was to provide estimates of primary indicators related to adolescent health and wellbeing at the national, urban/rural, and regional levels in Bangladesh.

Indicators were estimated separately for adolescents in three groups: ever-married females, unmarried females, and unmarried males. The urban/rural classification we used follows that of the Bangladesh Population and Housing Census 2011; the three regions were defined and stratified as: Eastern (Chattogram and Sylhet Divisions), Central (Dhaka, Mymensingh, and Barishal Divisions), and Western (Rangpur, Rajshahi, and Khulna Divisions). Sixteen sample strata were formed, from which the sample was selected separately:

- Barishal rural, Barishal urban
- Chattogram rural, Chattogram urban
- Dhaka rural, Dhaka urban
- Khulna rural, Khulna urban
- Mymensingh rural, Mymensingh urban
- Rajshahi rural, Rajshahi urban
- Rangpur rural, Rangpur urban
- Sylhet rural, Sylhet urban

1.5.2. Sampling Process

The survey was based on a two-stage stratified sample of households, which involved sampling of primary sampling units (PSUs), and sampling of households. Once the lists of PSUs were prepared, PSUs, households, and adolescents were selected from each stratum.

1.5.2.1. Selection of PSUs

The first stage of sampling involved selection of PSUs. A predetermined number of PSUs was selected from each stratum by applying the probability proportional to size (PPS) sampling method. Specifically, PSUs were selected with probability proportional to their size measured by the number of households as per the Population and Housing Census 2011 of the People's Republic of Bangladesh.¹

The selected PSUs were then randomly divided into two types—Type I and Type II PSUs. Type I PSUs received the TYPE ONE individual questionnaire, and Type II PSUs received the TYPE TWO individual questionnaire (Section 1.5.3 details the Type I and Type II individual questionnaires). There are an equal number of Type I and Type II PSUs within the combination of regional and rural/urban domains.

1.5.2.2. Selection of Households

The second stage of sampling involved selection of households. Within each selected PSU, a household listing was completed to provide a sampling frame for selection of households, which served as secondary sampling units (SSUs). When a PSU was found to be large based on the listing (e.g., more than 300 households), the PSU was segmented and one segment was randomly selected. In the second stage, a fixed number of 100 households was selected with equal probability within their cluster.² Additionally, a subsample of 70 households from the selected 100 households was randomly selected for male interviews.

1.5.2.3. Selection of Adolescents

An enumerator team visited each of the 100 selected households per sampled cluster and administered the household questionnaire, including the household schedule table. Using this household schedule table, an enumerator screened for and identified adolescents eligible for the individual questionnaire. To be eligible for the individual questionnaire, an adolescent needed to satisfy three criteria: 1) being age 15-19 years; 2) belonging to one of the three groups (ever-married females, unmarried females, and unmarried males); and 3) being a de facto household member on the day of screening.

In all clusters, all de facto eligible ever-married and unmarried female adolescents in the 100 selected households were eligible for the individual questionnaire. However, only de facto unmarried males ages 15-19 from the subsample of 70 households out of the 100 households selected for male interviews were eligible for the individual questionnaire. In Type I clusters, all identified adolescents eligible for the individual questionnaire were eligible to be interviewed for the entire questionnaire (the common and unique modules—Table 1.2 provides details about common and unique modules). In Type II clusters, all identified adolescents eligible for the individual questionnaire were eligible to be interviewed for the common modules and one unique module (mental health).

In households with only one eligible adolescent, the adolescent was interviewed for one additional module that was considered a sensitive topic³—violence, bullying, and sexual harassment. Only unmarried males found in the subsample of households selected for male interviews were eligible to be selected for the sensitive module.

¹ When a PSU is a segment of a moholla/mouza, its size measure is an expected number of households in the segment, and NOT the number of households in the moholla/mouza that the segment belongs to.

² A cluster is either a PSU (when not segmented during listing) or a segment of a PSU (when segmented during listing).

³ This is not considered a part of sampling because all adolescents from households with only one eligible adolescent were automatically eligible and selected. This method was adopted to protect respondents' privacy and confidentiality, as suggested in the WHO guidelines.

Table 1.1. Selection of adolescent groups and eligibility for different questionnaire modules

	Adolescent group		
	Ever-married females	Unmarried females	Unmarried males
TYPE ONE individual questionnaire (common modules)	All cases found during screening (no sampling)	All cases found during screening (no sampling)	All cases found during screening from the subsample of selected households
TYPE ONE individual questionnaire (unique modules)	All cases found during screening (no sampling)	All cases found during screening (no sampling)	All cases found during screening from the subsample of selected households
TYPE TWO individual questionnaire (common modules)	All cases found during screening (no sampling)	All cases found during screening (no sampling)	All cases found during screening from the subsample of selected households
TYPE TWO individual questionnaire (unique module – mental health)	All cases found during screening (no sampling)	All cases found during screening (no sampling)	All cases found during screening from the subsample of selected households
TYPE TWO individual questionnaire (unique module – violence, and bullying and sexual harassment)	One adolescent from households with only one eligible adolescent across the three adolescent groups		

Note: Unmarried males not selected for the common and non-sensitive sections were ineligible to be selected for the special module on violence, bullying, and sexual harassment.

1.5.3. Questionnaires

The survey employed two types of questionnaires: a) household questionnaire, and b) individual questionnaire.

Household questionnaire: One household questionnaire was administered to each household. The main purpose of the household questionnaire was to identify individuals who were 15-19 years old and eligible for the individual questionnaire. This questionnaire was used to list all the usual members and visitors who slept in the selected households the night preceding the interview. Basic information on the age and sex of all household members, and the date of birth of the members whose age was reported to be between 13-21 years was collected. Information was collected on the physical and environmental conditions of the household (household materials, water sources, etc.) and household ownership of assets.

Individual questionnaires: There were two types of individual questionnaires: TYPE ONE and TYPE TWO. Modules for TYPE ONE and TYPE TWO questionnaires were divided into two categories: common modules and unique modules. Seven modules were common to both types; additionally, TYPE ONE had three unique modules and TYPE TWO had two unique modules, as presented in Table 1.2. Individual questionnaires were specific to each group of respondents: a) ever-married female adolescents; b) unmarried female adolescents; and c) unmarried male adolescents (see Appendix C).

Table 1.2. Individual questionnaire types and modules

	TYPE ONE	TYPE TWO
Common modules	Respondent's background Exposure to media Reproductive history, contraception and fertility preference* Time use** Connectedness to family and friends Gender norms Utilization of health services	Respondent's background Exposure to media Reproductive history, contraception, and fertility preference* Time use** Connectedness to family and friends Gender norms Utilization of health services
Unique modules	Menstruation*** Marriage Nutrition	Mental health Violence against adolescents, bullying and sexual harassment****

* For unmarried females and males, this module contains questions on "contraception" only.
** Asked to unmarried females and males only.
*** Asked to ever-married and unmarried females only.
**** Considered sensitive.

Multiple steps were followed in developing the individual questionnaire. First, an extensive search was conducted to collect and review existing data collection tools on the selected topics and subtopics. Tools that were developed and used in Bangladesh or other South Asian countries were prioritized. The social acceptance and cultural sensitivity of the wording in existing questionnaire questions was considered. When available, internationally accepted and validated tools were used. For example, the survey used a modified version of the Patient Health Questionnaire (PHQ)-9, a measure that assesses the severity of depressive disorders and episodes (or clinically significant symptoms of depressive disorders and episodes) (Spitzer, Kroenke, & Williams, 1999). An Indian-Bengali version of PHQ-9, available at the PHQ Screeners website,⁴ along with the PHQ-A, a modified version of PHQ-9 that is specific to adolescents (Spitzer, & Johnson, 1995), were drafted for Bangladeshi adolescents. The newly developed draft screener underwent rigorous pretesting amongst the adolescent population, was reviewed by subject matter experts, and was finalized for use in the survey. For other topics, such as violence and menstruation, expert opinion was also sought about valid and appropriate questions and response categories, as well as the sequencing of questions. The core research team completed a final review of all draft questions before pretesting them in the field.

The survey questionnaires were pretested in the field for clarity and acceptability over six days in May 2019. Ten interviewers were trained for the pretesting. The household questionnaires were pretested in 166 households. Individual questionnaires were pretested with 10 ever-married female adolescents, nine unmarried female adolescents, and nine unmarried male adolescents in one rural cluster and one urban cluster in Savar, Bangladesh. Based on observations in the field and suggestions made by the pretest teams, the questionnaires were revised. The questionnaires were finalized by NIPORT, MEASURE Evaluation/ D4I, and icddr,b jointly.

1.5.4. Training and Field Work

Eight listing teams, consisting of two listers each, were recruited to complete the listing operation in 5.5 months. Training of the household listers took place for three days from June 16-18, 2019. The household listing operation was carried out in all selected clusters from June 20 to December 10, 2019, in five phases. Each phase was about three weeks in duration. In addition, four supervisors from HDRC checked and verified the work of the listing teams.

A total of 126 field staff (90 females and 36 males) were recruited based on having at least a Bachelor's degree, prior survey experience, and the ability to spend 5.5 months in the field conducting data collection. The training of field staff was conducted in two stages: 1) training of trainers (TOT) at HDRC, and 2) training of interviewers, field monitoring officers, and quality control officers. The TOT was conducted

⁴ Available at <https://www.hrsa.gov/behavioral-health/patient-health-questionnaire-phq-screeners>

by a training team composed of members from icddr,b, MEASURE Evaluation/D4I, and NIPORT. The trainers then conducted the training of interviewers, field monitoring officers, and quality control officers with support from icddr,b, MEASURE Evaluation/D4I, and NIPORT (who were present in all the training sessions, both to observe and guide the trainings). All field staff were trained for 21 days from June 18 to July 08, 2019. The training sessions consisted of lectures on research ethics and how to complete the questionnaires, followed by mock interviews conducted between participants. Near the end of the training course, the training participants spent several days carrying out practice interviews in locations close to Dhaka (in both rural and urban areas). Forty data collectors, who had previous experience in anthropometric measurements, received an additional two-day training on anthropometric measurement. Trainees who excelled, as indicated by trainers' observations of trainees' understanding of the material during training sessions, were selected as supervisors and field editors. Additionally, data entry personnel were trained in Dhaka in July 2019.

The survey data collection was completed in five phases over 5.5 months from July 25, 2019 to January 10, 2020. HDRC employed 16 data collection teams at the beginning, and each team was comprised of seven members including five data collectors (four females and one male), one male supervisor, and one female editor. However, after phase three, the number of data collection teams decreased to 13. An additional 35 data collectors were trained from October 21-31, 2020. The number of teams increased in subsequent phases, and there were 18 teams by the end of data collection.

Data collection teams faced two major challenges:

- Most unmarried female and male adolescents were not at home during the usual interviewing hours—from 9 am to 5 pm—since they were in school/college or with private tutors.
- Some parents and guardians were suspicious of the nature of the questions that were asked of their children and wanted to be present during the interview.

To address these challenges, data collection teams made additional efforts to make appointments as per availability of the adolescents and visited them in the early morning, early evening, or during weekends. They also provided an overview of the topics that were covered in the survey to convince parents and guardians to allow their children to take part in the survey.

1.5.5. Monitoring and Quality Control

Several quality control measures were in place, at multiple levels, throughout the survey. HDRC had four quality control officers to ensure the quality of the survey. icddr,b also employed 18 field monitoring officers. One field monitoring officer was attached to each data collection team and accompanied the team during the entire data collection period. The field monitoring officers had two major tasks: 1) accompany the data collection teams to observe household and individual interviews, and assist data collection teams as needed; and 2) report household and individual interview completion status through a mobile app. Additionally, icddr,b had four independent quality control teams, with each consisting of two members, managed by two quality control officers and a coordinator. icddr,b's quality control teams conducted reinterviews using selected sections of individual and household questionnaires and compared reinterview responses to responses from the original interviews. Finally, the icddr,b core research staff, MEASURE Evaluation/D4I, and NIPORT made monitoring visits throughout the survey.

1.5.6. Data Processing

Data processing is a series of operations to retrieve, clean, and enter data into a database or computer program to make the data usable for analysis and interpretation. Data processing was conducted at the HDRC office as each batch of completed questionnaires was returned from the field to the study headquarters in Dhaka. Data processing consisted of manually reviewing the completed questionnaires to identify and resolve inconsistencies and omissions, coding open-ended questions, entering data into the computer data processing program, and resolving any additional inconsistencies found by the data processing program. The Census and Survey Processing System (CSPPro) was used during all stages of data entry and computer processing. Twenty-eight data entry operators (14 in each shift) and two data entry supervisors processed the data. Data processing commenced in August 2019 and was completed in February 2020. To minimize error, a double-data entry procedure was followed. In addition, a core team member from D4I made frequent visits to HDRC to oversee ongoing data entry processes.

1.5.7. Coverage and Response Rates

Table 1.3 shows the coverage and response rates of the survey. A total of 72,800 households were selected for the sample, and out of those, 67,093 households were successfully interviewed (97.7% response rate).

A total of 5,066 ever-married female adolescents ages 15-19 were eligible for the interview, of whom 4,926 were successfully interviewed (97.2% response rate). A total of 8,284 unmarried female adolescents ages 15-19 were eligible for the interview, of whom 7,800 were successfully interviewed (94.2% response rate). A total of 6,538 unmarried male adolescents ages 15-19 were eligible for the interview, of whom 5,523 were successfully interviewed (84.5% response rate).

1.5.8. Gender Integration

The BAHWS 2019-20 was gender-integrated throughout its design, implementation, analysis, and reporting. During the survey design phase, the core research team explicitly considered the types of modules and questions to include for both female and male adolescents, and ensured inclusion of gender-sensitive survey topics such as attitudes towards gender norms and experiences of sexual harassment. The sample size for the survey was calculated to allow for nationally, regionally, and geographically (urban/rural) representative point estimates by sex, and by marital status of female and male adolescents (only unmarried male adolescents were eligible for the survey). During data collection, female field workers interviewed female adolescents and male field workers interviewed male adolescents. Finally, all data analyses and reporting have been disaggregated by ever-married female, unmarried female, and unmarried male adolescents.

Table 1.3. Results of the household and individual interviews

Number of households, number of interviews, and response rates, according to residence, Bangladesh, 2019-20.

Result	Residence		Total
	Urban	Rural	
Household interviews			
Households selected	21,400	51,400	72,800
Households occupied	19,883	48,794	68,677
Households interviewed	18,942	48,151	67,093
Household response rate ¹	95.3	98.7	97.7
Individual Interviews with ever-married females ages 15-19			
Eligible ever-married females	1,122	3,944	5,066
Eligible ever-married females interviewed	1,089	3,837	4,926
Eligible ever-married female response rate ²	97.1	97.3	97.2
Individual Interviews with unmarried females ages 15-19			
Eligible unmarried females	2,483	5,801	8,284
Eligible unmarried females interviewed	2,293	5,507	7,800
Eligible unmarried female response rate ¹	92.3	94.9	94.2
Individual Interviews with unmarried males ages 15-19			
Eligible unmarried males	1,760	4,778	6,538
Eligible unmarried males interviewed	1,452	4,071	5,523
Eligible unmarried male response rate ¹	82.5	85.2	84.5

¹ Households interviewed/households occupied.

² Respondents interviewed/eligible respondents.

Key Findings

Households with adolescents:

- Twenty-six percent of households had at least one adolescent age 15-19 (22% had one adolescent, and 4% had more than one adolescent).

Schooling:

- Over 97% of adolescents ever attended any formal educational institutions—school, college, or madrasah. The majority of them last attended a nonreligious school or college (>80%). Fifteen percent of ever-married females, 10% of unmarried females, and 7% of unmarried males last attended a madrasah.
- Eighty-three percent of ever-married females, 15% of unmarried females, and 27% of unmarried males dropped out of school. While the major reason for dropout for married females was getting married, financial hardship (59% for females and 51% for males), and lack of interest in studying (30% for females and 57% for males) were the most common reasons for dropping out of school among unmarried adolescents.

Working for cash:

- Six percent of ever-married female, 12% of unmarried female, and 31% of unmarried male adolescents ages 15-19 were working for cash at the time of the survey.

Extracurricular activities:

- One-fourth of ever-married females were involved in any extracurricular activities; this proportion was higher for unmarried females (56%) and highest for unmarried males (88%).

Affiliation with social organizations:

- Only 2% of ever-married females, 14% of unmarried females, and 22% of unmarried males were affiliated with any social organizations at the time of the survey.

Living status:

- Half (52%) of all married females were living with both parents-in-law, whereas greater than 80% of unmarried females and males were living with both parents.

Program and Policy Implications

Addressing school dropout: Bangladesh has made remarkable progress in improving girls' enrollment in primary and secondary school in the last four decades (World Bank, 2019). This was made possible by several government incentive programs, including the Female Secondary School Stipend Project (Schurmann, 2009). While the survey shows almost universal school attendance, a large proportion of girls dropped out of school because they got married. The National Plan of Action for Adolescent Health Strategy 2017-2030 outlines several activities at national and local levels to raise awareness on the issue of child marriage and its consequences. The activities may include communication campaigns using social and mass media to advocate against child marriage, information on the harms of child marriage in school textbooks, and building awareness among marriage registrars and religious leaders on the Child Marriage Restraint Act 2017 (Center for Reproductive Rights, 2018).

School absenteeism, poor academic attainment, and grade repetition may be risk factors for the other two top reasons for dropping out of school—financial constraints and lack of interest. Children identified with these risk factors need extra support both in and outside school to encourage them to continue. Support may include help with school work and financial and other incentives to attend regularly. School management committees can play an important role in this regard. In addition, the relationship between teachers and parents is important in reducing the risk of dropout. Meaningful and regular parent-teacher meetings can promote dialogue about the best ways to support students to stay in school.

Use of social clubs: The National Plan of Action for Adolescent Health Strategy 2017-2030 outlines numerous activities through youth clubs; however, the survey did not find high attendance by adolescents at social clubs. Therefore, prior to the design and implementation of activities around social clubs, formative research should be conducted to explore the types and characteristics of social clubs that young people find attractive, and strategies that would increase young people's interest in them.

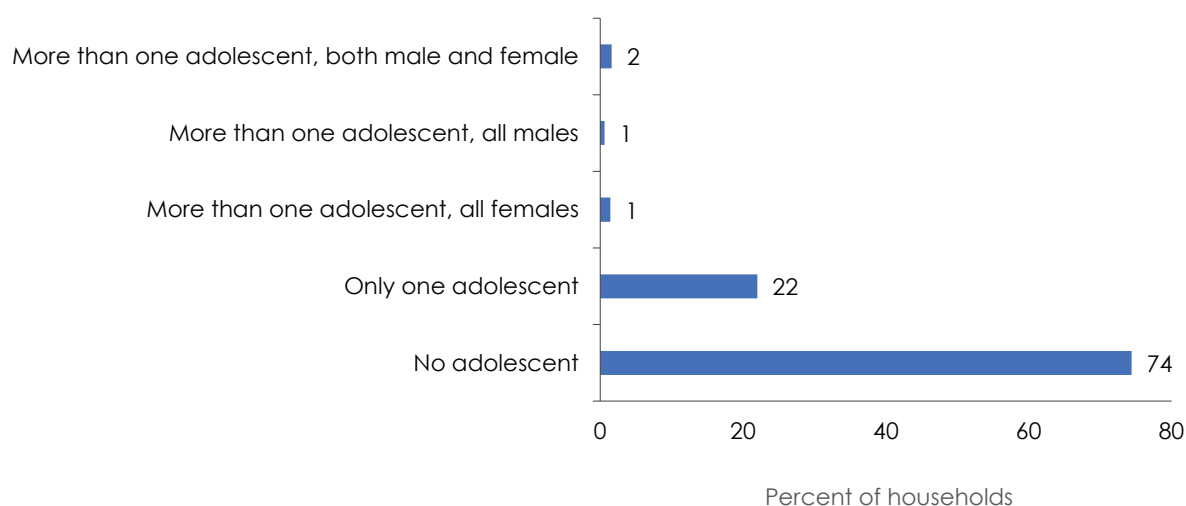
Understanding the sociodemographic characteristics and living arrangements of adolescents helps put into context their knowledge, attitudes, and behaviours regarding health and wellness and the factors that affect their health behaviours.

This chapter presents select background characteristics of the survey respondents (ever-married female, unmarried female, and unmarried male adolescents ages 15-19) including age, education, schooling status, working status, wealth status, and living arrangements. It also presents information on their involvement in extracurricular activities and social organizations.

2.1. Background Characteristics of Survey Respondents

A total of 67,093 households were surveyed in the BAHWS 2019-20, and 26% of surveyed households included one or more adolescents ages 15-19 years. Twenty-two percent of households had only one adolescent (either male or female), and 4% had more than one adolescent (Figure 2.1).

Figure 2.1. Percentage of households by number of adolescents ages 15-19



The survey interviewed 18,249 adolescents ages 15-19. Among them, 4,926 were ever-married female, 7,800 were unmarried female, and 5,523 were unmarried male adolescents. The pattern of background characteristics of the respondents is presented in Table 2.1:

- Over half of the ever-married female adolescents were age 18 or over, compared to 26% and 33% of unmarried female and male adolescents, respectively.
- Over three-fourths of ever-married females resided in the rural areas, whereas the proportion of unmarried female and male adolescents living in rural areas were 68% and 71%, respectively.
- Nearly all adolescents (>98%) had formal education, irrespective of their marital status or sex. Unmarried adolescents were more likely to have completed secondary education or higher (35% for unmarried females and 30% for unmarried males) compared to married female adolescents (25%).

Table 2.1. Background characteristics of respondents

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by selected background characteristics, Bangladesh, 2019-20.

Background characteristics	Ever-married females			Unmarried females			Unmarried males		
	Weighted percent	Weighted number	Unweighted number	Weighted percent	Weighted number	Unweighted number	Weighted percent	Weighted number	Unweighted number
Age									
15	7.4	365	358	28	2,186	2,208	21	1,157	1,151
16	14.6	717	708	26.8	2,094	2,067	24.3	1,342	1,327
17	21.9	1,077	1,078	19.6	1,532	1,543	22.2	1,227	1,226
18	29.3	1,445	1,432	15.3	1,192	1,198	19.1	1,054	1,056
19	26.8	1,321	1,350	10.2	796	784	13.5	743	763
Residence									
Urban	23.2	1,142	1,089	32.1	2,504	2,293	28.6	1,578	1,452
Rural	76.8	3,784	3,837	67.9	5,296	5,507	71.4	3,945	4,071
Region									
Western	40.8	2,009	1,981	29.7	2,320	2,257	37.1	2,050	2,092
Central	39.5	1,947	1,718	38.9	3,031	2,588	36.4	2,008	1,765
Eastern	19.7	970	1,227	31.4	2,448	2,955	26.5	1,465	1,666
Education									
No education	1.9	95	96	0.6	43	46	1.7	95	94
Primary incomplete	9.9	485	499	4.1	317	330	11	606	611
Primary complete	8.9	439	444	3.8	296	289	6.2	343	356
Secondary incomplete	54.8	2,699	2,683	56.3	4,390	4,432	51	2,817	2,829
Secondary complete or higher	24.5	1,209	1,204	35.3	2,752	2,703	30.1	1,661	1,633
Wealth quintile									
Lowest	19.3	951	957	13.9	1,087	1,109	17.4	959	1,003
Second	21.7	1,067	1,049	19.2	1,500	1,492	21.2	1,173	1,175
Middle	23.2	1,143	1,160	21.9	1,707	1,740	20.6	1,139	1,150
Fourth	21.1	1,037	1,044	21.2	1,655	1,675	21.6	1,191	1,172
Highest	14.8	727	716	23.7	1,850	1,784	19.2	1,061	1,023
Total	100.0	4,926	4,926	100.0	7,800	7,800	100.0	5,523	5,523

2.2. Schooling

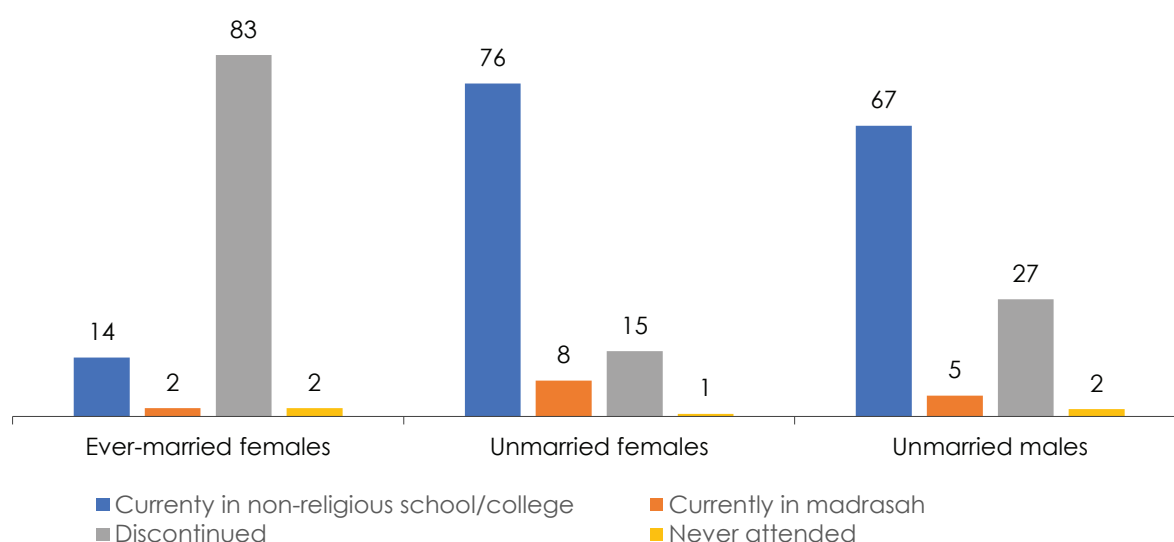
Attending schooling: Attending school, college, or madrasah.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

Nearly all adolescents (over 97%) ever attended school, college, or madrasah (religious educational institutions), and for the majority, the type they last attended was a non-religious school or college (over 90% of unmarried females and males, and over 80% of ever-married females). Married females were more likely to attend a madrasah than the other two groups (15% of ever-married females, 10% of unmarried females, and 7% of unmarried males) (**Table 2.2**).

The majority of ever-married females were not in school at the time of the survey (**Figure 2.2** and **Table 2.2**). Among unmarried adolescents, school discontinuation was higher among male adolescents than their female counterparts (27% vs. 15%, respectively). The primary reasons for not being in school varied by type of adolescent. While most married females dropped out from school because they got married (72%) or their husband opposed their school attendance (24%), the main reasons for unmarried female and male adolescents to discontinue schooling were financial hardship (59% for females and 51% for males) and lack of interest (30% for females and 57% for males) (**Table 2.3**).

Figure 2.2. Percentage of adolescents ages 15-19 currently in school by type of school



Patterns by Background Characteristics

- There was no difference in ever attending school by type of adolescent. However, rural adolescents and adolescents living in the Central and Eastern regions were more likely to attend a madrasah compared to urban adolescents and adolescents living in the Western region. This pattern is true for all groups (**Appendix A: Tables 2.2A, 2.2B, 2.2C**).
- While there was no difference in discontinuation in attending school or madrasah among urban and rural ever-married female adolescents, school discontinuation was slightly higher for urban unmarried adolescents (both females and males) compared to their rural counterparts (**Appendix A: Tables 2.2A, 2.2B, 2.2C**).
- Irrespective of sex and marital status, adolescents living in the Central and Eastern regions were more likely to discontinue schooling compared to adolescents living in the Western region (**Appendix A: Tables 2.2A, 2.2B, 2.2C**).
- Adolescents from the poorest households were most likely to drop out of school compared to those in other economic groups. This pattern was true for ever-married females, unmarried females, and unmarried males (**Appendix A: Tables 2.2A, 2.2B, 2.2C**).

Table 2.2. Schooling

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by type of school last attended and current schooling status, by background characteristics, Bangladesh, 2019-20.

Type of respondents	Type of school last attended				Current schooling status				Number of adolescents	
	Non-religious school or college	Madrrasah	Didn't attend school	Total	Non-religious school or college	Madrrasah	Discontinued schooling	Didn't attend school		Total
Ever-married females	83.0	15.1	1.9	100	13.5	1.9	82.8	1.9	100.0	4,926
Unmarried females	89.5	10.0	0.6	100	76.3	8.2	15.0	0.6	100.0	7,800
Unmarried males	91.3	7.0	1.7	100	66.6	4.8	26.9	1.7	100.0	5,523

Table 2.3. Reasons for dropping out from school

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who discontinued schooling by reasons for drop-out from school, Bangladesh, 2019-20.

Reasons for drop-out from school	Ever-married females		Unmarried females		Unmarried males	
	Percentage	N	Percentage	N	Percentage	N
Got married	72.0		NA		NA	
Husband opposes	24.4		NA		NA	
Have to take care of child	11.7		NA		NA	
Distance to school	1.6		3.3		0.5	
Concern about safety	0.8		1.7		-	
Poor performance in school	0.9		5.1		3.3	
Student's lack of interest	20.2		29.8		56.7	
Parent's lack of interest	4.9		14.1		4.2	
Financial constraints/costs	14.0		59.1		51.4	
Had to care for siblings/others	0.7		2.4		3.6	
Illness: family/respondent	2.6		10.3		4.8	
Household chores/work	16.8		8.3		5.7	
Other (specify)	6.9		6.0		4.0	
Don't know	0.2		1.1		0.3	
N		7,253		1,749		2,058

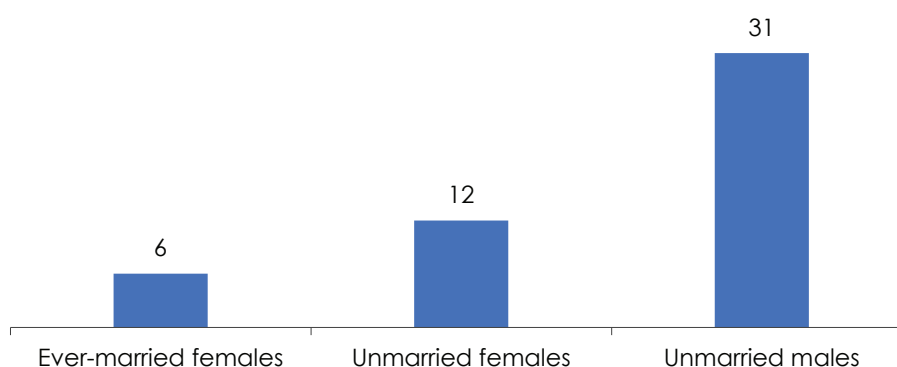
2.3. Working for Cash

Working for cash: Working for cash only or for both cash and kind at the time of the survey.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

Almost one-in-three unmarried male adolescents were working for cash at the time of the survey. The proportions were much lower among unmarried female (1-in-8) and ever-married female adolescents (1-in-17) (**Figure 2.3**).

Figure 2.3. Percentage of adolescents ages 15-19 working for cash at the time of the survey



Patterns by Background Characteristics

- Urban unmarried female adolescents were more likely to work for cash compared to their rural counterparts (16% versus 10%, respectively); however, there was no difference in the proportion of unmarried males or ever-married females working for cash by their place of residence (**Appendix A: Table 2.4**).
- Female adolescents living in the Central region were more likely to work for cash compared to their counterparts living in the other two regions. The pattern was different for unmarried males—36% of male unmarried adolescents living in the Eastern region were working for cash compared to 31% in the other two regions (**Appendix A: Table 2.4**).
- While unmarried males from poorer households were more likely to work for cash compared to unmarried males living in wealthier households, there was no such pattern among ever-married or unmarried female adolescents (**Appendix A: Table 2.4**).

2.4. Involvement in Extracurricular Activities

Involvement in extracurricular activities: Involvement in drawing/painting, singing/dancing/drama, outdoor sports, readings books other than textbooks, or creative writing at the time of survey.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

Overall, adolescents surveyed were involved in extracurricular activities; however, the extent of involvement and the type of activities they were involved in varied by gender and marital status. Involvement in extracurricular activities was highest among unmarried males and lowest among ever-married females.

About one-quarter of ever-married females were involved in any of the mentioned extracurricular activities. Reading books (22%) was stated as the most common activity. More than half of unmarried females (56%) and 88% of unmarried males were involved in any of the mentioned extracurricular activities. For unmarried females, the most common activities were reading books (47%) and drawing/painting (16%).

They were also involved in creative writing (11%), the performing arts (singing/dancing/drama) (11%), and outdoor sports (11%). Over 80% of unmarried males were involved in outdoor sports and almost half stated that they read books (Table 2.4).

Table 2.4. Involvement in creative, cultural, and sports activities

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by involvement in different types of creative, cultural, and outdoor sports activities, Bangladesh, 2019-20.

Type of respondent	Type of activities						Not involved in any of the above activities	Number of respondents
	Drawing/painting	Singing/dancing/drama	Outdoor sports	Reading books other than textbooks	Creative writing	Involvement in any extra-curricular activities		
Ever-married females	3.1	2.3	1.5	22.3	3.8	25.2	74.8	4,926
Unmarried females	15.6	11.2	10.9	46.6	11.1	55.8	44.2	7,800
Unmarried males	8.9	9.0	83.8	41.1	10.4	88.0	12.0	5,523

2.5. Affiliation with Social Organizations and Adolescent Programs

Affiliation with social organizations: Affiliation with any local youth club, boy scouts/girl guides, cultural organization, sports club, reading club/library, and other clubs at the time of survey. This does not include affiliation with any political and/or religious clubs.

Affiliation with adolescent programs: Affiliation with any adolescent program.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

Involvement in social organizations gives adolescents opportunities to expand social networks, gain skills, and be involved in social activities. As shown in Figure 2.4 and Table 2.5, very few adolescents were affiliated with such organizations. Affiliation with any social organization was highest among unmarried males (22%) compared to the other two groups (with unmarried females at 14% and ever-married females at 2%). Male adolescents were involved with reading clubs (9%), sports clubs (8%), and local youth clubs (7%). About 9% of unmarried female adolescents were involved with reading clubs, and about 4% or less were involved with local youth clubs, girls scouts/girl guides, cultural organizations, or sports clubs. Less than 1% of ever-married females were involved with any of these activities..

Affiliation with any kind of adolescent program was also very low. Only 5% of unmarried females, 3% of adolescent males, and 1% of ever-married females were involved with any adolescent program (Figure 2.4).

Figure 2.4. Percentage of adolescents ages 15-19 affiliated with a social organization or adolescent program

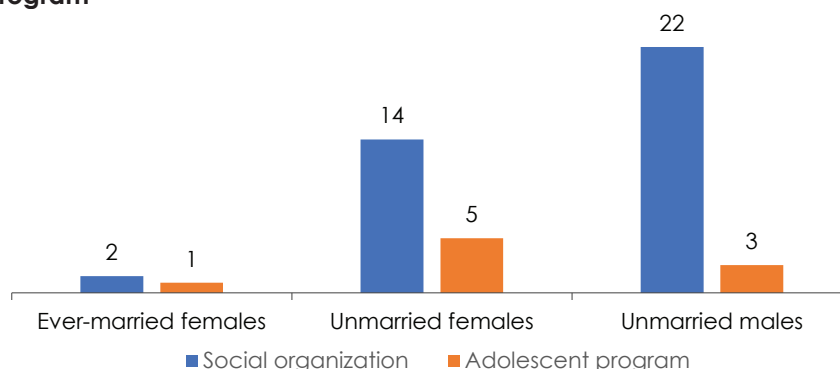


Table 2.5. Affiliation with social clubs/adolescent programs

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by affiliation with a club and involved with an adolescent program, Bangladesh, 2019-20.

Type of respondent	Affiliated clubs							Number	
	Local youth club	Boy scouts/ girl scouts/ girl guides	Cultural organization	Sports club	Reading club/ library	Other	Affiliated with at least one of the above clubs/organizations		Affiliated with adolescent programs
Ever-married females	0.1	0.4	0.3	0.2	0.9	0.0	1.5	0.9	4,926
Unmarried females	0.7	3.7	2.1	1.3	8.6	1.1	13.8	4.9	7,800
Unmarried males	6.7	4.3	2.6	8.4	8.7	0.5	22.1	2.5	5,523

2.6. Living Status

Living status: Living with mother, father, elder brother, and elder sister (and additionally for ever-married females: mother-in-law, father-in-law, and husband) in the same household.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

Although adolescence is a time when young people move out of childhood and begin taking on adult roles and responsibilities, parents and family members continue to play important roles in their lives. In Bangladesh, young people usually live in their parental home until they start to form their own families. However, in cases of temporary absence or death of one or both parents, unmarried adolescents may live with one parent and/or sibling(s). Once married, female adolescents may live with their in-laws in addition to their husbands.

Nearly 70% of ever-married females lived with at least one parent-in-law. Slightly over half lived with both their mother-in-law and father-in-law, while 15% lived with only their mother-in-law and 2% lived with only their father-in-law. Nearly 12% lived with one or both parents, as shown in **Table 2.6**.

Most unmarried adolescents (both male and female) lived with both parents (84% of unmarried males and 80% of unmarried females). Over 10% of them lived in mother-only families and 2% lived in father-only families. Less than 5% of unmarried adolescents lived in households without any parents. There was no notable difference in the living status of the three groups by background characteristics (i.e., residence, region, education, and wealth quintile).

Table 2.6. Living status

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by living situation, Bangladesh, 2019-20.

Type of respondent	Respondent living with:							Total	Number
	Both mother-in-law and father-in-law	Mother-in-law only	Father-in-law only	Neither mother-in-law nor father-in-law	Both mother and father	Mother only	Father only		
Ever-married females	52.1	14.7	1.9	31.3	8.9	2.3	0.6	88.2	4,926
Unmarried females	NA	NA	NA	NA	80.4	13.1	2.0	4.6	7,800
Unmarried males	NA	NA	NA	NA	83.6	11.3	1.6	3.5	5,523

Key Findings

Ownership and access to mobile phone:

- Slightly over half (52%) of ever-married female adolescents ages 15-19 years owned a mobile phone, compared to one-fifth (22%) of unmarried female adolescents. Ownership of a mobile phone was highest among unmarried male adolescents, with 71% owning a mobile phone.
- Among males, 45% had smart phones compared to 26% and 14% of ever-married and unmarried females, respectively.
- Overall, access to mobile phones—either through ownership or having access to a household mobile phone—was over 90% for all three adolescent groups.

Exposure to mass media:

- Of all forms of mass media, all three groups of adolescents (ever-married females, unmarried females, and unmarried males) were most likely to watch TV at least once a week (65%, 74%, and 79%, respectively).
- The second most commonly used form of mass media was the internet, with one-fifth (22%) of ever-married and unmarried female adolescents and almost half (47%) of unmarried male adolescents having used the internet at least once a week.
- Exposure to at least two forms of mass media (TV, radio, internet, and printed materials) on a weekly basis was highest among unmarried males (58%). Twenty-four percent of ever-married females and 34% of unmarried females were exposed to two or more forms of mass media at least once a week.

Exposure to adolescent-related programs/materials through different mass media:

- Fifteen percent of ever-married female, 25% of unmarried female, and 20% of unmarried male adolescents were exposed to any adolescent-related programs/materials through TV, radio, internet, or print media within the three months preceding the survey.

Desire for additional information on health-related topics:

- Seventy-three percent of unmarried females and 66% of unmarried males desired to know about puberty/physical changes. Two-thirds of unmarried females wanted information on menstruation, while over half of the unmarried male adolescents wanted to know about nocturnal emissions. More than half of the unmarried adolescents wanted to know about family planning.
- The internet was the most preferred source of information on all health-related topics among unmarried males. Unmarried females preferred to get information on menstruation and puberty through books and on family planning from health providers and books.

Program and Policy Implications

Health promotion through mobile applications: Access to a mobile phone was almost universal for all three groups of adolescents. This provides an excellent programmatic opportunity. The National Plan of Action for Adolescent Health Strategy 2017-2030 plans to develop mobile applications on adolescent health issues at the national level. These applications should be interactive and engaging to ensure maximum utilization. Apart from educational materials, these applications can include bilingual games, quizzes, mock tests and glossaries of health terminologies.

Using television to influence social norms: Television was the most common form of mass media to which adolescents were exposed. Television was also the most common means of watching adolescent-related programs. The National Plan of Action for Adolescent Health Strategy 2017-2030 plans to develop and broadcast TV commercials on adolescent issues, largely focusing on promoting changes in social norms around discouraging child marriage. The focus can be broadened to include other adolescent health issues such as sexual and reproductive health and rights, gender norms, violence, nutrition, and life-skills training.

Using social media and other platforms to reach adolescents: The second most common form of mass media that adolescents reported being exposed to was the internet. A considerable proportion of adolescents used the internet for messaging platforms like WhatsApp, IMO, Viber, and Messenger. Use of social media platforms like Facebook, YouTube, and search engines like Google were also quite common among adolescents. Program planners may consider using these platforms to reach adolescents.

Providing information about puberty: Most unmarried adolescents need information on the health changes they experience, especially during puberty. A variety of mediums are available to provide this information.

Adolescents gain access to new information through a variety of sources, including print and visual media and, increasingly, mobile phones and the internet (Reid, Radesky, Christakis, Moreno, & Cross, 2016). The BAHWS 2019-20 collected information on adolescents' exposure to various types and channels of mass media such as mobile phone, computer, television, radio, print media, internet, and social media (IMO, Viber, WhatsApp, and Messenger). This important information is useful in determining the media channels that can most widely disseminate health information appropriate for target audiences. Furthermore, recognizing patterns of adolescent media consumption is important to understanding how different media can reach adolescents for health and wellness program purposes.

This chapter presents information on ownership of and access to mobile phones and the various uses of mobile phones. It also discusses exposure to different types of mass media such as internet, radio, television, magazines, and newspapers, as well as exposure to adolescent-related programs and materials.

3.1. Ownership and Access to a Mobile Phone

Ownership of a mobile phone: Owning a functional mobile phone (basic phone and/or smart phone).

Access to a mobile phone: Not owning but having access to a mobile phone in the house.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

The rapid and widespread growth of mobile phones is one of the most significant developments in the field of information and communications technology (ICT) in Bangladesh (Rogers, 2018). Some of the practical benefits of owning or having access to a mobile phone are the flexibility of social interactions with friends and family and accessing information instantly. Ever-married female, unmarried female, and unmarried male adolescents were asked if they owned a functional mobile phone. Those who did not were asked whether they had access to a family member's mobile phone.

Ownership of a mobile phone was highest among unmarried male adolescents. Forty-five percent of unmarried males reported having their own smartphone and an additional 26% reported owning a basic phone, resulting in a total of 71% unmarried male adolescents having their own phones; in contrast, 52% of ever-married females and 22% of unmarried female adolescents owned their own phones. Ever-married female adolescents were 2.4 times more likely, and unmarried males were 3.2 times more likely, to own a mobile phone compared to unmarried female adolescents (**Figure 3.1** and **Table 3.1**).

Access to mobile phones within the household (either through owning a mobile phone and/or having access to a phone in the household) was universal; only 2% of ever-married females, 6% of unmarried females, and 7% of unmarried males had no access to a household mobile phone.

Figure 3.1. Percentage of adolescents ages 15-19 who own a mobile phone (smart and basic)

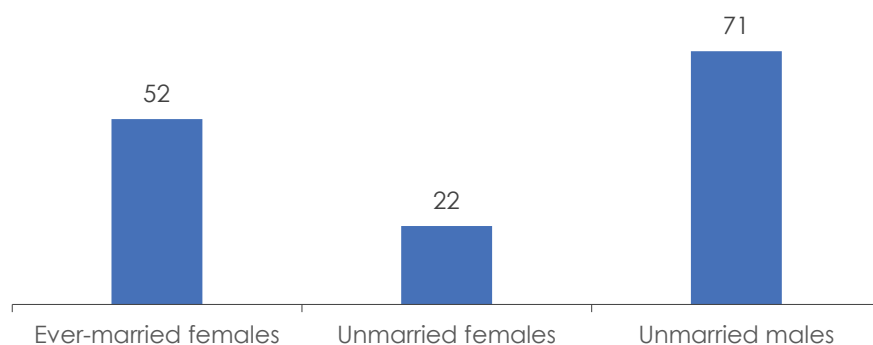


Table 3.1. Ownership and access to a mobile phone

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by ownership of and access to a mobile phone, Bangladesh 2019-20.

Type of respondent	Ownership of mobile phone				Total	Number of adolescents
	Owns smart mobile phone	Owns basic mobile phone	Does not own but has access to household mobile phone	Does not own and has no access to household mobile phone		
Ever-married females	26.2	26.2	45.7	1.9	100.0	4,926
Unmarried females	13.7	8.7	71.3	6.3	100.0	7,800
Unmarried males	45.4	26.0	21.6	7.0	100.0	5,523

Note: Those who own a smart phone may also have access to a basic phone.

Pattern by Background Characteristics

- Ownership of a mobile phone was higher among unmarried females in urban areas compared to those in rural areas. Among ever-married females and unmarried males, ownership of a mobile phone varied little by urban/rural residency (**Figure 3.2; Appendix A: Tables 3.1A, 3.1B, 3.1C**).
- Adolescents living in the lowest wealth quintile were slightly disadvantaged when it came to ownership of mobile phones (**Figure 3.3; Appendix A: Tables 3.1A, 3.1B, 3.1C**).

Figure 3.2. Percentage of adolescents ages 15-19 who owned a mobile phone (smart and basic) by urban/rural residence

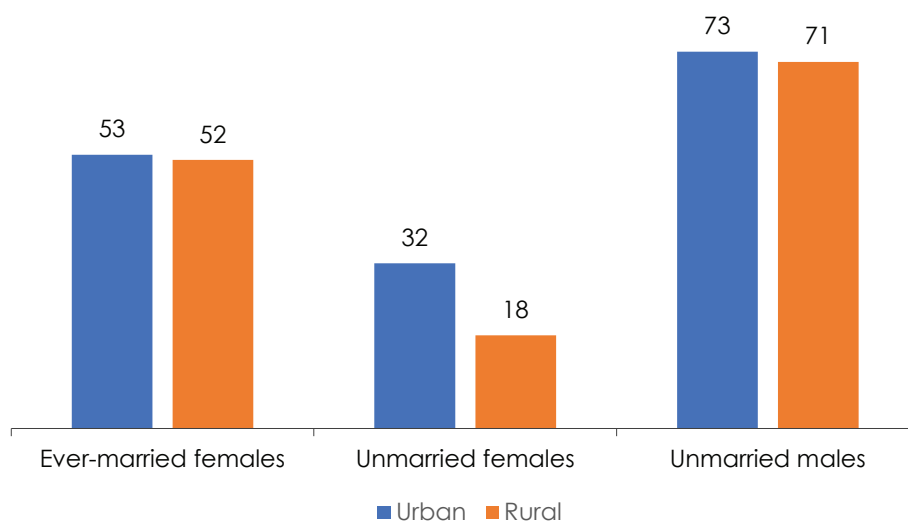
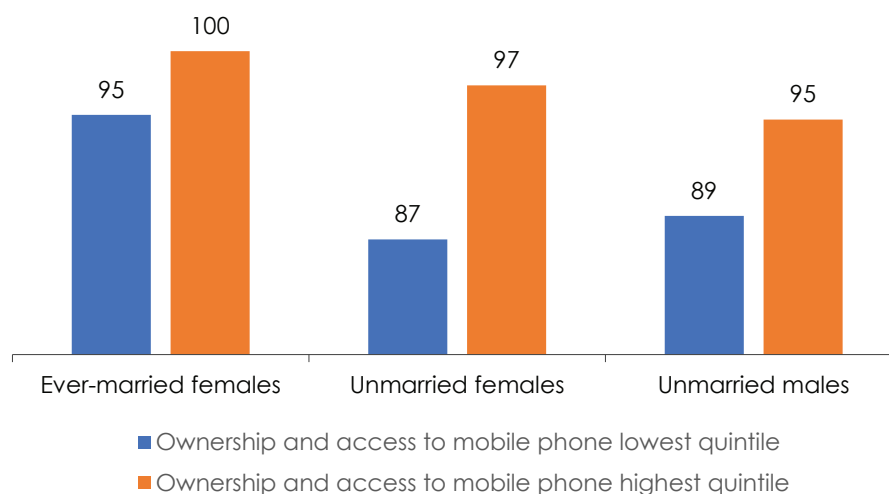


Figure 3.3. Percentage of adolescents ages 15-19 who owned a mobile phone (smart and basic) by wealth quintile



3.2. Use of Mobile Phones

The use of mobile phones in Bangladesh has extended beyond phone calls and text messaging (Rogers, 2018). Adolescents who owned or had access to a mobile phone were asked whether and how often they used it for each modality. The use modalities were predetermined and included making phone calls, text messaging, listening to the radio, accessing the internet (including search engines like Google and platforms like YouTube), reading newspapers/magazines, using Facebook, and using messaging platforms like IMO, Viber, WhatsApp, and Messenger.

The most common use of mobile phones was for making phone calls (97% among ever-married females, 88% for unmarried females, and 96% for unmarried males) followed by text messaging (67% among ever-married females, 65% for unmarried females, and 78% for unmarried males). The least popular use of mobile phones was for reading the newspaper (4% among ever-married females, 7% for unmarried females, and 19% for unmarried males) (Table 3.2).

Unmarried adolescent males were more likely to use various mobile phone applications than ever-married and unmarried adolescent females. Unmarried males were around 3.5 times more likely to access Facebook and around twice as likely to access the internet and messaging apps (IMO/Viber/WhatsApp/Messenger) compared to ever-married and unmarried adolescent females.

Table 3.2. Use of a mobile phone

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who have access to a mobile phone, by use of mobile phones on a weekly basis, Bangladesh 2019-20.

Type of respondent	Uses mobile phone at least once a week for							Number of adolescents with access to mobile phones
	Phone calls	Text messaging	Listening to radio	Internet/ Google/ YouTube access	Reading newspapers/ magazines	FB access	IMO/Viber/ WhatsApp/ Messenger	
Ever-married females	97.0	66.7	10.3	21.8	3.5	13.6	24.3	4,831
Unmarried females	88.3	65.0	15.0	22.0	6.5	15.0	22.8	7,309
Unmarried males	96.4	78.0	28.9	49.2	19.2	51.1	45.8	5,134

3.3. Exposure to Mass Media

Exposure to mass media: Exposure to mass media via internet access through mobile phone or computer; watching television; listening to radio programs through mobile phone or radio; or reading a newspaper through mobile phone or printed copy on a weekly basis.

Exposure to adolescent-related programs/materials: Exposure to adolescent-related programs or materials through specific mass media modalities in the three months preceding the survey.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

In the BAHWS 2019-20, adolescents were asked whether and how frequently they had used the internet by means of a computer or mobile phone; listened to the radio, either by mobile phone or the radio itself; and watched television or read newspapers/magazines via mobile phone or print copy in a week.

Out of all the mass media options mentioned, exposure to television was the highest (65% for ever-married females, 74% for unmarried females, and 79% for unmarried males), followed by internet (22% for ever-married females, 22% for unmarried females, and 47% for unmarried males). Internet and radio were most accessed using mobile phones compared to other devices (computer and radio). However, reading the newspaper via a print copy was more common than via a mobile version (**Table 3.3**).

Table 3.3. Exposure to mass media

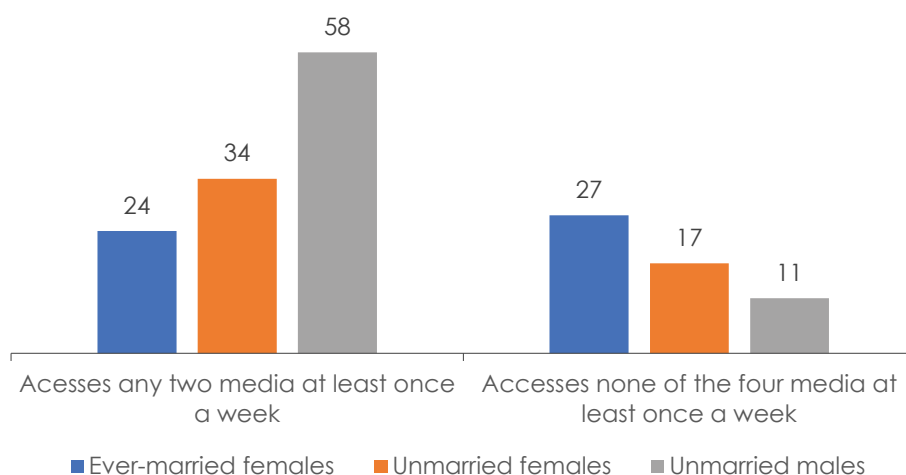
Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who were exposed to specific media on a weekly basis, Bangladesh 2019-20.

Exposure to mass media	Ever-married females	Unmarried females	Unmarried males
	Percent	Percent	Percent
Accesses internet at least once a week using mobile/computers	21.6	21.9	47.2
Mobile phone	21.4	20.6	45.7
Computer	0.8	3.5	6.8
Listens to radio program at least once a week by mobile/radio	10.4	14.4	27.2
Mobile phone	10.1	14.1	26.9
Radio	0.6	0.6	1.0
Watches TV at least once a week	64.6	74.4	78.5
Reads magazines and/or newspapers at least once a week by mobile phone/printed copy	7.0	19.4	34.9
Mobile phone	3.5	6.1	17.9
Printed copy	4.3	16.2	25.7
Accesses at least two media at least once a week	23.5	33.5	57.8
Accesses none of the four media at least once a week	26.5	17.3	10.6
N	4,926	7,800	5,523

Exposure to at least any two forms of media at least once a week varied by sex and marital status, with more males than females and more unmarried females than ever-married females reporting exposure to media—24% of ever-married females, 34% of unmarried females, and 58% of unmarried males were exposed to at least two forms of media once a week or more (Table 3.3 and Figure 3.4).

About one-in-four ever-married females had no exposure to any of the four media at least once a week; a higher percentage than that of unmarried females (17%) and unmarried males (11%) (Figure 3.4).

Figure 3.4. Percentage of adolescents ages 15-19 with exposure to mass media (TV, radio, internet, print) at least once a week



Pattern by Background Characteristics

- Adolescents in urban areas have greater access to the internet when using mobile phones and computers compared to those in the rural areas (Figure 3.5; Appendix A: Tables 3.3A, 3.3B, 3.3C).
- Adolescents in the lowest economic wealth quintile have the least access, while those in the highest quintile have the most access to the internet when using a mobile phone or computer (Figure 3.6; Appendix A: Tables 3.3A, 3.3B, 3.3C).

Figure 3.5. Percentage of adolescents ages 15-19 with access to the internet using a mobile phone/computer at least once a week by urban/rural residence

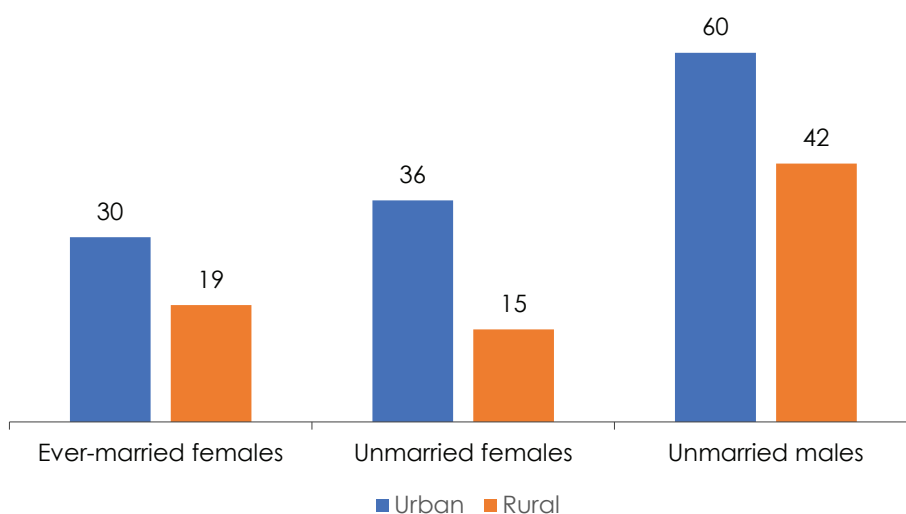
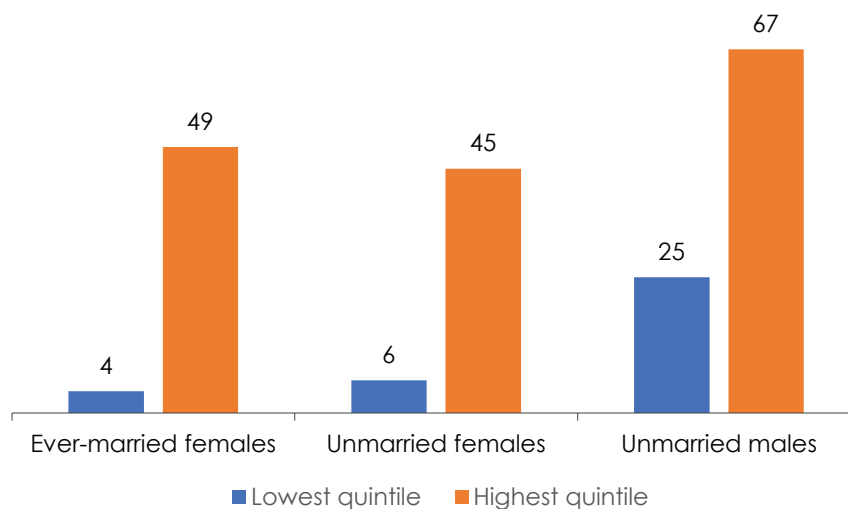


Figure 3.6. Percentage of adolescents ages 15-19 with access to the internet using a mobile phone/computer at least once a week by wealth quintile



3.4. Exposure to Adolescent-Related Programs and Materials Through Different Mass Media Modalities

Television and radio programs, as well as online and newspaper articles, can be developed to reach adolescent audiences to increase knowledge and influence attitudes and behaviors across various topics. Adolescents who had exposure to different forms of mass media were asked if these media were used to access adolescent-focused content (programs or articles) in the three months preceding the survey.

About 15% of ever-married females, 25% of unmarried females, and 20% of unmarried males were exposed to adolescent-related programs or articles through any of the four modalities. Television was the most common means of watching adolescent-related programs (14% among ever-married females, 20% among unmarried females, and 15% among unmarried males) (Figure 3.7 and Table 3.4).

Figure 3.7. Exposure to adolescent-related programs/materials in last three months among adolescents ages 15-19

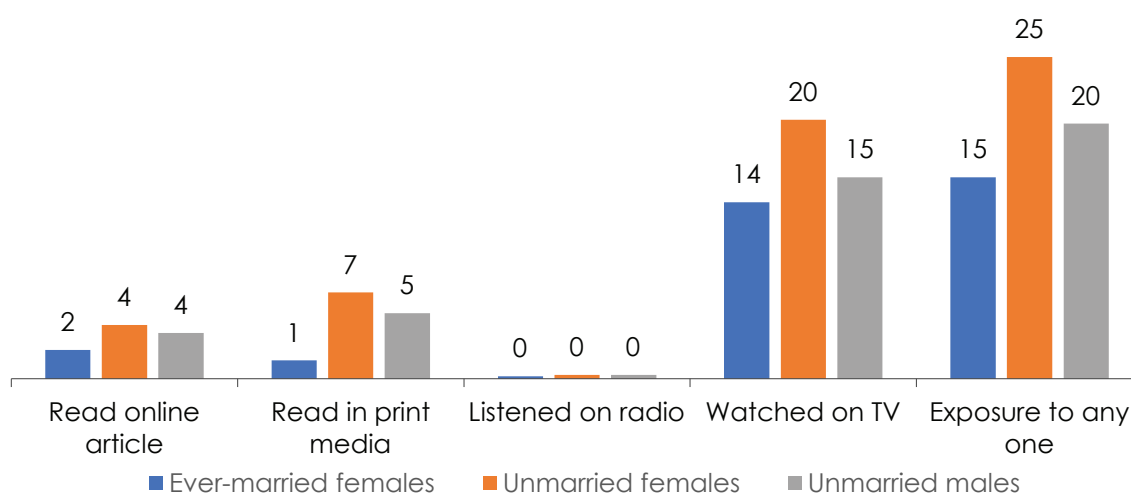


Table 3.4. Exposure to adolescent-related programs/materials

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 exposed to adolescent-related programs/materials in the last three months through specific media, according to background characteristics, Bangladesh, 2019-20.

Type of respondents	In the last three months:					Number of adolescents
	Read online any adolescent-related article	Read in print media any adolescent-related news/articles, newspaper	Listened to any adolescent-related program on the radio	Watched adolescent-related program on TV	Exposure to any adolescent-related programs or articles through any of the four mediums	
Ever-married females	2.2	1.4	0.2	13.5	15.4	4,926
Unmarried females	4.1	6.6	0.3	19.8	24.6	7,800
Unmarried males	3.5	5.0	0.3	15.4	19.5	5,523

Pattern by Background Characteristics

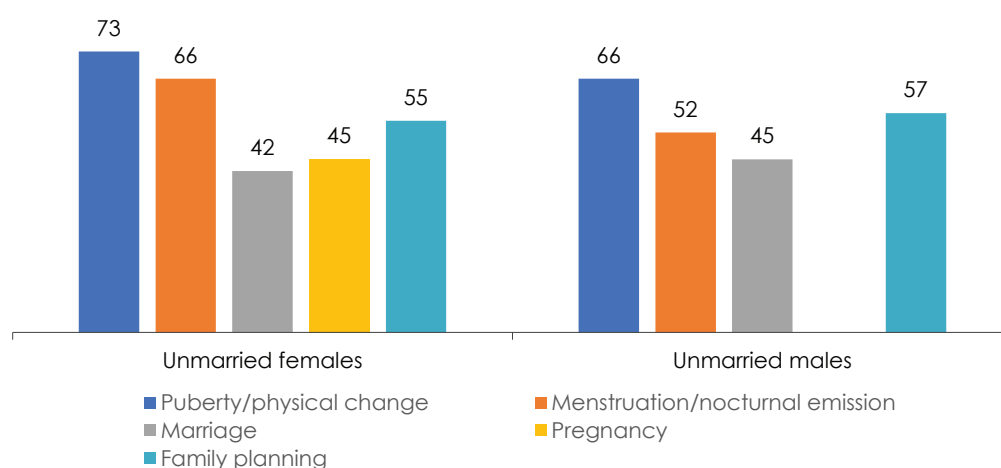
- Female adolescents living in urban areas were more likely to be exposed to adolescent-related programs/materials compared to their counterparts living in rural areas. However, there was no observed difference in exposure to adolescent-related programs/materials through various media between urban and rural unmarried adolescent males (Appendix A: Tables 3.4A, 3.4B, 3.4C).
- Exposure to adolescent-related programs/materials through mass media increased with education level and wealth among all three groups of adolescents (Appendix A: Tables 3.4A, 3.4B, 3.4C).

3.5. Preferred Source of Information

All unmarried adolescents were asked about whether they wanted to have information on specific topics like puberty/physical changes, marriage, and family planning. Unmarried female adolescents were also asked about menstruation and pregnancy, while males were asked about nocturnal emission.

Adolescents' desire to have information on health-related matters was quite high. Almost three-fourths of unmarried females wanted information on puberty/physical changes and two-thirds wanted to know about menstruation. Over half (55%) of the unmarried female adolescents wanted information on family planning; less than half of the females wanted information on marriage or pregnancy. Among unmarried males, 66% wanted to know about puberty/physical changes, 57% wanted information about family planning, and 52% wanted to know about nocturnal emission. Less than half of the male respondents wanted to know about marriage (Figure 3.8).

Figure 3.8. Percentage of adolescents ages 15-19 who wanted information on specific health-related topics*



*Male adolescents were not asked about desire for information on pregnancy.

Respondents were also asked about their most preferred source of information among a specified list that included teachers, books, television, radio, internet/mobile, newspapers/magazines, hotline, and health providers. Among unmarried male adolescents, internet/mobile was the most preferred source of information on all health-related topics, and books were the second most preferred source of information. Among unmarried females, the largest proportion stated books as the most preferred source of information on puberty/physical changes and menstruation. On topics like pregnancy and family planning, health providers were the most preferred source of information; books were preferred almost as much as health providers (**Table 3.5**).

Table 3.5. Most preferred source of information

Percent distribution of unmarried female and male adolescents ages 15-19 by most preferred source of information on health by topics, Bangladesh, 2019-20.

Unmarried females (N=7,800)										
Topics	Teacher	Books	TV	Radio	Internet/ mobile	News- paper/ magazine	Hotline	Health provider	Does not want to know	Total
Puberty/ physical change	14.0	25.6	5.6	1.0	13.0	1.6	1.1	10.8	27.3	100.0
Menstruation	8.3	21.8	7.9	1.3	11.3	2.1	1.2	12.0	34.1	100.0
Marriage	6.7	9.6	6.7	1.0	9.7	1.8	1.3	4.9	58.4	100.0
Pregnancy	4.3	10.9	5.7	1.1	8.1	1.2	1.3	12.4	55.1	100.0
Family planning	6.9	11.9	8.2	1.6	10.2	2.1	1.8	12.0	45.2	100.0

Unmarried males (N=5,523)										
Topics	Teacher	Books	TV	Radio	Internet/ mobile	News- paper/ magazine	Hotline	Health provider	Does not want to know	Total
Puberty/ physical change	8.4	17.3	8.3	0.9	23.0	1.3	1.3	5.5	34.1	100.0
Nocturnal emission	4.2	12.0	6.6	1.2	20.2	1.2	1.3	5.3	48.0	100.0
Marriage	4.5	10.1	7.8	0.9	15.2	1.6	1.1	3.6	55.3	100.0
Family planning	6.0	11.6	8.9	1.0	18.2	1.6	1.7	7.8	43.2	100.0

Key Findings

Age at menarche:

- The mean age for menarche is 12.8 years for ever-married female adolescents and 12.9 years for unmarried female adolescents.

Knowledge on menstruation:

- Most female adolescents had no knowledge about menstruation prior to menarche. Only 23% of ever-married and 30% of unmarried adolescents reported having prior knowledge.

Source of information:

- Textbooks and other books are the most common mass media sources of information on menstruation for ever-married females (65%) and unmarried females (81%).

Menstrual hygiene:

- Almost all of ever-married and unmarried adolescents (98%) reported using either disposable products or reusable materials cleaned with water and soap/detergent during menstruation. However, based on a composite indicator the hygienic menstrual practices were very low among both ever-married (9%) and unmarried (12%) adolescents.

School attendance during last menstruation:

- One-in-four ever-married and unmarried in-school adolescents missed at least one day of school during their last menstruation.

Program and Policy Implications

Increase female adolescents' knowledge of menstruation: Relatively few female adolescents surveyed had knowledge of menstruation before the onset of menstruation. This calls for creating a learning environment for adolescents that includes the topic of menstruation, supported by a culturally appropriate communication plan. School teachers, community health workers, and digital media can be used to provide information on basic biological knowledge of menstruation and hygienic menstrual practices.

Reduce the shame and stigma around menstruation: In Bangladesh, cultural norms stigmatize menstruation and act as a barrier to discussing menstruation and menstrual hygiene. Promoting normative change to alter attitudes and beliefs can help adolescents understand that menstruation is a natural, biological process. Influencing social norms to minimize shame around talking about menstruation can also help foster open discussions and challenge widely held misconceptions. Involving men and boys (especially fathers and brothers) and senior members of the family can create a supportive environment to eliminate stigma around menstruation.

Equip schools with water, sanitation, and hygiene facilities: The lack of appropriate facilities and products at schools can hinder adolescent girls from attending school during days when they are menstruating. Policies that equip educational institutions with gender-responsive water, sanitation, and hygiene facilities and sanitary products can help adolescent girls continue to attend school and support them from falling academically behind their male counterparts.

Encourage production and supply of hygienic menstrual products: Hygienic menstrual products are often not available or accessible to adolescent girls, whether in school or outside school. To encourage their use, policies should be implemented to support entrepreneurs to produce and deliver hygienic menstrual products at a subsidized price. Efforts should be focused on supplying hygienic menstrual products in schools, health care facilities, public toilets, and disaster shelters.

Menstruation is a natural physiological process for women and girls of reproductive age (Chandra-Mouli, & Patel, 2017). Menarche, or the onset of menstruation, coincides with new opportunities and challenges, including challenges in proper menstrual hygiene, that arise during adolescence (UNICEF, 2019). Lack of proper menstrual hygiene can lead to infections and negatively affect women’s sexual and reproductive health (Das, et al., 2015).

Understanding knowledge and practices around menstruation is imperative for policymakers and program managers to help formulate culturally appropriate guidance and interventions for ensuring proper menstrual hygiene. This will help to improve the health of all women in Bangladesh.

This chapter presents information on age at menarche, knowledge of menstruation—including myths and misperceptions—and practices of menstrual hygiene among female adolescents. It also examines patterns of school attendance during menstruation.

4.1. Age at Menarche

Mean age at menarche: The mean age of first menstruation among ever-married and unmarried female adolescents.

Sample: Ever-married and unmarried female adolescents ages 15-19 years who have experienced menstruation.

Age at first menstruation signals the beginning of the reproductive phase of a woman’s life and has important health implications (UNICEF, 2019).

The mean age of menarche in Bangladesh is 12.8 years for ever-married female adolescents and 12.9 years for unmarried female adolescents. Almost half (47%) of the ever-married female adolescents and 41% of unmarried female adolescents experienced menarche at the age of 13 years. Around 81% of ever-married and 74% of unmarried female adolescents had experienced menarche before they reached the age of 14 years (**Table 4.1**).

Table 4.1. Age at menarche

Percent distribution of ever-married and unmarried female adolescents ages 15-19 by age at first menstruation, by mean age at menstruation, Bangladesh 2019-20.

Age at first menstruation	Ever-married female adolescents	Unmarried female adolescents
11 years or younger	6.1	6.5
12 years	28.5	26.0
13 years	46.7	41.1
14 years	12.6	19.6
15 years	4.9	5.4
16 or older	1.2	1.2
Has not experienced menstruation yet	0.0	0.2
Total	100.0	100.0
Mean age at first menstruation among those who experienced menstruation	12.8	12.9
Number of respondents	2,439	3,943

4.2. Knowledge of Menstruation

Although menarche is widely considered an important landmark in sexual maturity, and menstruation a natural process, studies have shown that it is not well understood by married or unmarried adolescent girls (Chandra-Mouli, & Patel, 2017).

Knowledge of menstruation before menarche: Knowledge of menstruation, before having had first menstrual period.

Sample: Ever-married and unmarried female adolescents ages 15-19 years who had experienced menarche.

Exposure to information on menstruation through specific mass media: Exposure to information on menstruation through specific mass media sources like radio, TV, textbooks or other books, internet.

Sample: Ever-married and unmarried female adolescents ages 15-19 years.

Knowledge about menstruation prior to menarche was low among female adolescents. Fewer than one-in-four (23%) of ever-married adolescents reported having knowledge of menstruation prior to the onset of menstruation. Among unmarried female adolescents this proportion was 30% (Table 4.2).

Around four-out-of-ten married and unmarried adolescents who had prior knowledge of menstruation perceived their knowledge as adequate (Table 4.2).

Table 4.2. Knowledge of menstruation before menarche

Percentage of ever-married and unmarried female adolescents ages 15-19 by their knowledge of menstruation before menarche, Bangladesh 2019-20.

Type of respondent	Had knowledge of menstruation before onset of menstruation	Number of female adolescents who experienced menstruation	Perceived knowledge was adequate among those who had knowledge	Number of female adolescents who had prior knowledge on menstruation
Ever-married females	23.4	2,439	40.6	572
Unmarried females	29.8	3,935	36.6	1,173

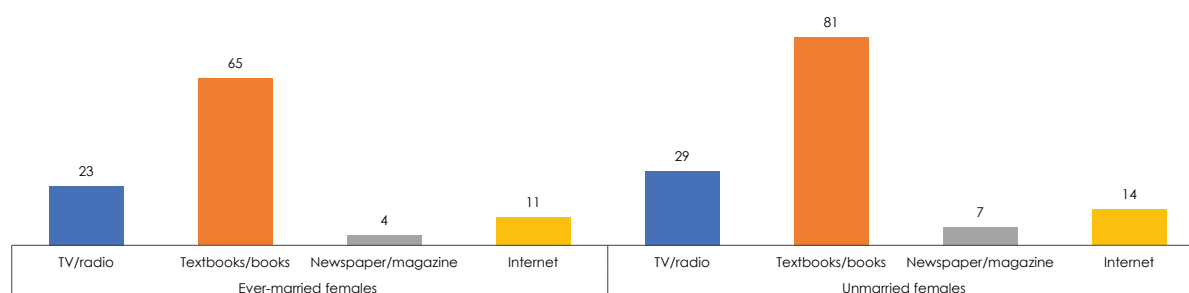
Although female adolescents received information on menstruation from various sources, textbooks and other books were the major sources for both ever-married females and unmarried females (65% and 81%, respectively). The next most common sources of information were TV/radio (23% and 29%) and internet (11% and 14%) for ever-married and unmarried female adolescents, respectively. Exposure to information on menstruation from any of the above-mentioned mass media sources was higher for unmarried compared to married female adolescents (Table 4.3 and Figure 4.1).

Table 4.3. Knowledge on menstruation through mass media

Percentage of ever-married and unmarried female adolescents ages 15-19 by knowledge on menstruation through mass media, according to background characteristics, Bangladesh 2019-20.

Type of respondent	Knowledge on menstruation through mass media				Number
	TV/radio	Textbooks/books	Newspapers/magazines	Internet	
Ever-married female adolescents	22.9	65.0	4.1	11.3	2,439
Unmarried female adolescents	29.3	81.4	6.7	13.9	3,943

Figure 4.1. Percentage of female adolescents ages 15-19 exposed to information on menstruation through mass media, Bangladesh 2019-20



Patterns by Background Characteristics

- Adolescents who had completed secondary education demonstrated higher knowledge of menarche prior to onset, compared to those who had not completed primary education or secondary education (**Appendix A: Tables 4.2A, 4.2B**).
- While textbooks were the main source of knowledge on menstruation (81%), knowledge gained via the internet was substantially higher among unmarried adolescents who completed secondary education (2% vs. 27%) and those who were in the highest wealth quintile (4% vs. 30%) (**Appendix A: Tables 4.3A, 4.3B**).

4.3. Misconceptions about Menstruation

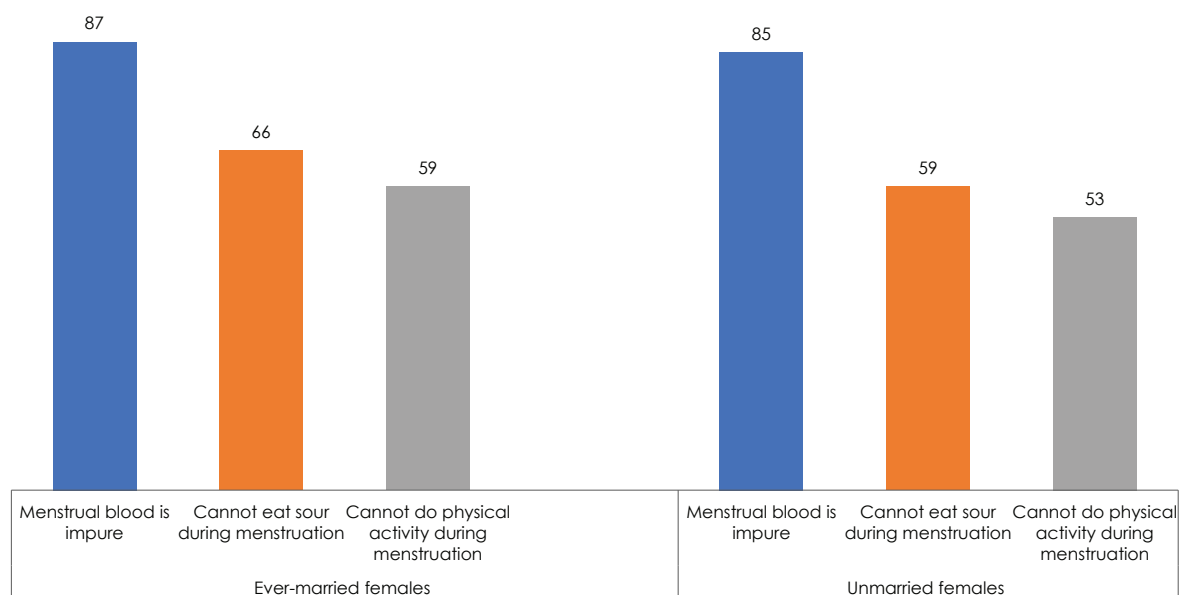
Around the world, menstruation has been surrounded by taboos and myths that eliminate women from many aspects of sociocultural life (Chandra-Mouli, & Patel, 2017). Despite widespread access to information, various misconceptions about menstruation are present among both ever-married and unmarried female adolescents. About 87% of ever married female adolescents, and 85% of unmarried female adolescents, agreed with the statement “*Menstrual blood is impure.*” About 66% and 59% of ever-married and unmarried female adolescents, respectively, agreed with the statement “*One cannot eat anything sour during menstruation.*” Over half of ever-married (59%) and unmarried (53%) female adolescents agreed with the statement “*One cannot do physical activity during menstruation*” (**Table 4.4 and Figure 4.2**).

Table 4.4. Misconceptions about menstruation

Percentage of ever-married female adolescents ages 15-19 who agreed with various statements on misconceptions about menstruation, Bangladesh 2019-20.

Type of adolescent respondents	Percentage of ever-married female adolescents who agreed that:			Number of female adolescents
	Menstrual blood is impure	One cannot eat anything sour during menstruation	During menstruation one cannot do physical activity	
Ever-married females	86.5	65.8	58.6	2,439
Unmarried females	84.9	59.1	52.5	3,943

Figure 4.2. Percentage of female adolescents ages 15-19 who had misconceptions about menstruation, Bangladesh, 2019-20



Patterns by Background Characteristics

- Both ever-married and unmarried female adolescents living in rural areas were more likely to have misconceptions than their urban counterparts (**Appendix A: Tables 4.6A, 4.6B**).

4.4. Menstrual Hygiene

Menstrual hygiene management (MHM) is important to ensure optimum health of girls and women.

Hygienic menstrual practices: The mean age of first menstruation among ever-married and unmarried female adolescents.

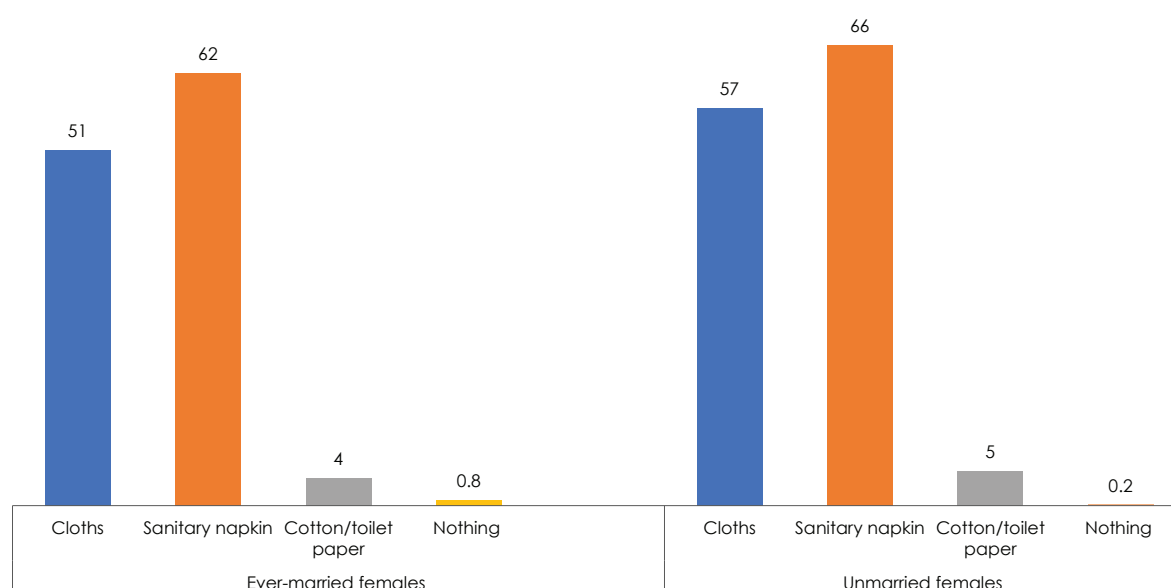
This is a composite measure comprised of the following:

- Use of sanitary products that are disposable;
- AND/OR**
- Use of reusable materials cleaned with water **and** soap or detergent;
- AND**
- Products/materials changed at least four times a day.

Sample: Ever-married and unmarried female adolescents ages 15-19 years who have experienced menstruation.

Overall, 98% of both married and unmarried adolescents reported using disposable products or reusable materials cleaned with water and soap or detergent. For both ever-married and unmarried adolescents, sanitary napkins (62% and 66%, respectively) were the most commonly used products during menstruation, and cloth materials were the second most commonly used (51% by married and 57% by unmarried adolescents) (**Figure 4.3**).

Figure 4.3. Percentage of female adolescents ages 15-19 who had experienced menarche by type of products or material used for management of menstruation, Bangladesh, 2019-20



International guidelines suggest changing used menstrual products or materials at least four times a day to prevent toxic shock syndrome during menstruation (UNICEF, 2019^b; House, Mahon, & Cavill, 2012). Based on the guidelines, the composite indicator “hygienic menstrual practices” was developed. Though the use of disposable products, or clean reusable materials, was very high among the respondents, only 9% of ever-married and 12% of unmarried adolescent females practiced proper menstrual hygiene (Table 4.5).

Table 4.5. Hygienic menstrual practices

Percentage of ever-married and unmarried female adolescents ages 15-19 by use of sanitary materials, appropriate cleansing of reusable products, frequency of changing sanitary materials, and hygienic practices, Bangladesh 2019-20.

Type of respondent	Use of sanitary pad or any disposable product	Use of cloths/ reusable products and washing with water and soap/ detergent/soda/ any antiseptic solutions	Change of sanitary material/ disposable product at least 4 times a day	Hygienic menstrual practices	Number of female adolescents who experienced menstruation
Ever-married females	63.8	33.7	9.4	9.3	2,439
Unmarried females	67.0	30.8	11.9	11.7	3,935

* Includes no education.

Patterns by Background Characteristics

- Among unmarried female adolescents, the proportion having hygienic menstrual practices was higher among adolescents living in urban areas (13%), adolescents who had completed secondary or higher education (14%), and adolescents from the highest wealth quintile (16%) (Appendix A: Table 4.4B).

4.5. School Attendance during Menstruation

Menstruation poses a set of physical, sociocultural, and economic challenges to adolescent girls that may interfere with their ability to attend school or to participate fully in the classroom. Evidence suggests that MHM at school is constrained by poor access to water and sanitation, lack of privacy and limited education about menstrual hygiene, as well as social stigma and cultural restrictions on activities (House, Mahon, & Cavill, 2012).

School non-attendance during menstruation: Percentage of in-school ever-married and unmarried female adolescents who reported not attending school at least one day during their last menstrual cycle.

Sample: Ever-married and unmarried in-school female adolescents ages 15-19 years whose schools were open during their last menstrual cycle.

Understanding the importance of having MHM at schools, the Government of Bangladesh officially supports the provision of gender-responsive water, sanitation, and hygiene facilities in both primary and secondary schools; MHM guidance for students and teachers; and facilities for the supply and disposal of MHM materials (WaterAid, 2018). Despite this support, one-in-four ever-married and unmarried in-school female adolescents reported missing at least one day of school during their last menstrual cycle. Ten percent of ever-married females missed four or more days of school during their last menstrual cycle, while among unmarried adolescents this proportion was 5% (Table 4.6).

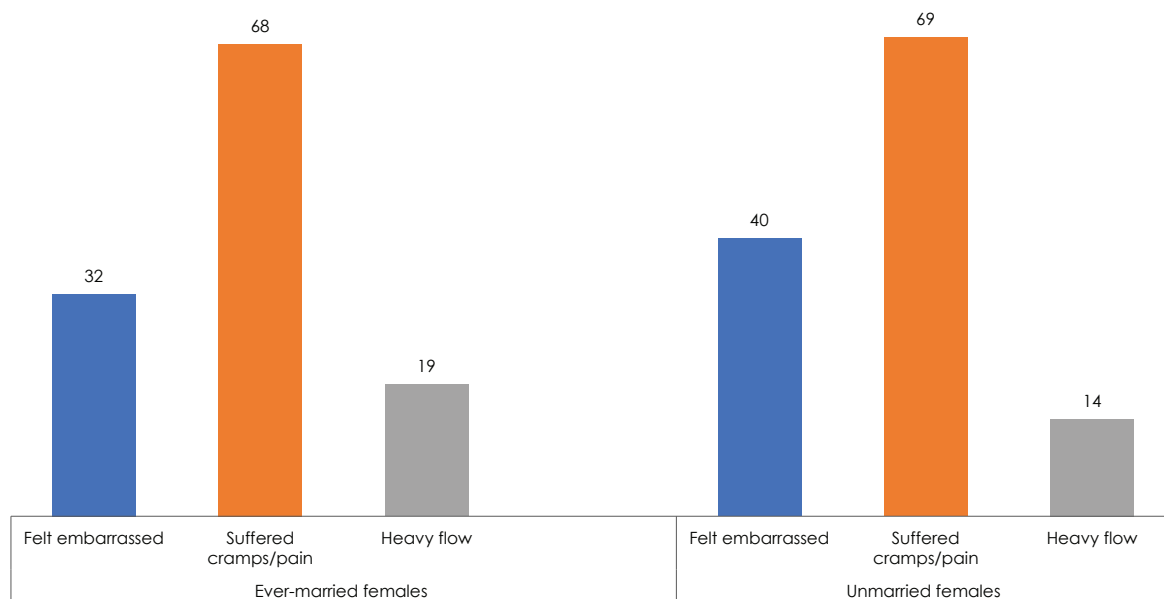
Table 4.6. School attendance during menstruation

Percent distribution of in-school ever-married and unmarried female adolescents ages 15-19 whose schools were open during their last menstruation, by their school attendance, Bangladesh 2019-20.

Type of respondent	Number of days school missed					Mean number of days of school missed	Percentage who missed any days of school during last menstruation	Number of in-school female adolescents whose schools were open during their last menstruation
	0 days	1 day	2-3 days	4 or more days	Total			
Ever-married females	74.5	7.6	7.8	10.1	100.0	0.8	25.5	222
Unmarried females	75.9	6.8	12.4	5.0	100.0	0.6	24.1	2,313

The most common reason cited for not attending school during menstruation was having menstrual cramps/pains (68% for ever-married and 69% for unmarried adolescents). The second most common reason for school non-attendance was embarrassment (reported by 32% and 40% of ever-married and unmarried adolescents, respectively) (Figure 4.4).

Figure 4.4. Percentage of female adolescents ages 15-19 who did not attend school during last menstruation by reason for missing school, Bangladesh, 2019-20



Patterns by Background Characteristics

- Among ever-married, in-school female adolescents, the proportion missing at least one day of school during the last menstruation was highest among adolescents living in urban areas (30%), adolescents from the Eastern region (35%), adolescents who completed secondary school and higher education (28%), and adolescents from the lowest wealth quintile (40%) (**Appendix A: Table 4.5A**).
- Among unmarried female adolescents, the proportion missing at least one day of school during the last menstruation was highest among adolescents from the Eastern region (27%) and adolescents with primary complete education (39%) (**Appendix A: Table 4.5B**).

Key Findings

Marital status and duration:

- Ninety-seven percent of ever-married female adolescents were currently married, and about half of them had been married for one year or less.

Spousal age difference:

- Half of the currently married women had a 5-9 year age difference, and 30% had an age difference of 10 or more years with their husbands. Spousal age difference varied by region and wealth. The highest proportion of female adolescents with a spousal age difference of 10 or more years was among the highest wealth quintile (45%); in the lowest wealth quintile, 20% of females had such age differences with husbands. Spousal age difference of 10 or more years was higher in the Eastern region (35%), compared to the Central (32%) and Western (27%) regions of Bangladesh.

Spousal separation:

- One-in-five married adolescents lived separately from their husbands. Among those who lived separately, half of the husbands lived in Bangladesh and the other half outside of Bangladesh. Married adolescents from the Eastern region were most likely to have husbands living separately and overseas compared those from the Central or Western regions.

Preferred age of marriage:

- Two-thirds of married female adolescents preferred to be married later than they were. Around one-quarter of unmarried females preferred to marry after age 21, and 55% of unmarried males preferred to marry at age 24 or later.

Delaying marriage:

- Seventy-percent of unmarried females and 81% of unmarried males reported it was likely or extremely likely that they could convince their parents to allow them to delay marriage. About one-quarter of unmarried adolescents said their siblings could help them convince their parents.

Program and Policy Implications

Implement social and structural interventions to reduce child marriage: The legal age of marriage in Bangladesh is 18 years for females and 21 years for males. The vast majority of married females who married before the legal age preferred to marry later, signifying that with social and structural support they would delay marriage. Legal monitoring and accountability, and strategies including mass media campaigns and community-based dialogue and trainings that promote normative change, are necessary to delay adolescent marriage until it is both legal and wanted by the marrying individual.

Engage family members to give a voice to adolescents on their timing of marriage: A large proportion of both female and male adolescents reported that it is likely or extremely likely that they could convince their parents to allow them to delay marriage. Siblings, aunts and uncles, and brothers- and sisters-in-law were listed as those who could help convince adolescents' parents to delay marriage. Programs focused on improving maternal, child, and reproductive health and reducing child marriage should include intervention components that reach these family members with information, dialogue, and behavior change strategies.

Marriage helps to determine the extent to which adolescent girls are exposed to the risk of pregnancy. Marriage at young ages is associated with adverse reproductive health outcomes, including stillbirths and miscarriages, and is a risk factor for intimate partner violence and infant mortality and morbidity (Prakashm Singh, Pathak, & Parasuraman, 2011; Delprato, & Akyeampong, 2017; Yount, et al., 2016). The timing and circumstances of marriage have profound consequences for adolescent girls and boys.

This chapter presents information on marital status, duration of marriage, spousal age difference, spousal separation, and preferred timing of marriage for married female adolescents. For the unmarried adolescents, information is presented about their ideal and preferred age of marriage, perceptions about their parents' preferred age of marriage for them, and how to convince their parents to delay age of marriage.

5.1. Marital Status and Duration

Currently married: Adolescents who report being married at the time of the survey.

Sample: Female adolescents ages 15-19 years.

In Bangladesh, 97% of ever-married female adolescents ages 15-19 were currently married, and 3% were divorced, separated, or widowed. These figures remained constant across ages. Almost half of currently married female adolescents had been married for one year or less, about one-third had been married for two to three years, and 17% had been married for four years or more (data not shown).

5.2. Spousal Age Difference

Spousal age difference: Number of years that husband is older or younger than female respondent.

Sample: Currently married female adolescents ages 15-19 years.

About half of currently married female adolescents had a 5-9 year age difference with their husbands. Thirty percent had an age difference of 10 or more years, and 19% of 0-4 years (Figure 5.1 and Table 5.1).

Figure 5.1. Percentage of currently married female adolescents ages 15-19 years by spousal age difference

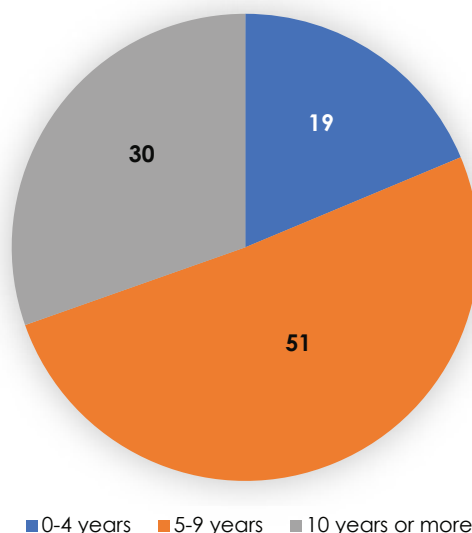


Table 5.1. Spousal age difference among currently married female adolescents

Percent distribution of currently married female adolescents ages 15-19 years by their age differences with their husbands, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Spousal age difference				Total	Number of currently married female adolescents
	0-4 years	5-9 years	10 years or more	Missing		
Residence						
Urban	20.9	47.0	32.1	0.0	100.0	1,111
Rural	18.0	52.1	29.9	0.1	100.0	3,688
Region						
Western	20.3	53.0	26.6	0.1	100.0	1,959
Central	18.2	49.8	32.0	0.1	100.0	1,889
Eastern	16.3	48.7	35.0	0.0	100.0	950
Education						
Primary incomplete ¹	27.7	49.5	22.8	0.0	100.0	557
Primary complete	22.0	53.3	24.8	0.0	100.0	423
Secondary incomplete	17.3	50.7	32.0	0.0	100.0	2,629
Secondary complete	16.3	51.2	32.5	0.1	100.0	1,190
Wealth quintile						
Lowest	22.6	57.1	20.2	0.0	100.0	917
Second	21.4	52.6	26.0	0.0	100.0	1,040
Middle	18.9	51.9	29.2	0.0	100.0	1,106
Fourth	15.1	49.3	35.4	0.2	100.0	1,019
Highest	14.4	41.0	44.6	0.0	100.0	715
Total	18.7	50.9	30.4	0.0	100.0	4,799

¹ Includes a few cases with no education.

Spousal age difference varied by region and wealth. The highest wealth quintile had the largest percentage of female adolescents with a spousal age difference of 10 or more years (45%); comparatively, among the lowest wealth quintile, 20% of female adolescents had a 10 or more year age difference with their husbands. Married female adolescents in the Eastern region were more likely to have 10 or more years of spousal age difference compared to those who lived in the Western region (35% versus 27%, respectively) (Table 5.1, Figure 5.2, Figure 5.3).

Figure 5.2. Percentage of currently married female adolescents ages 15-19 years by spousal age difference and region

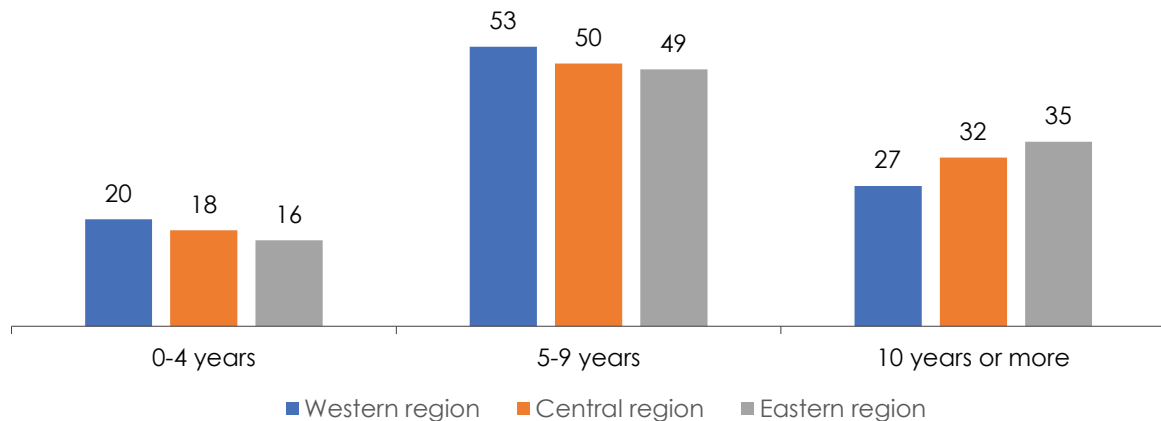
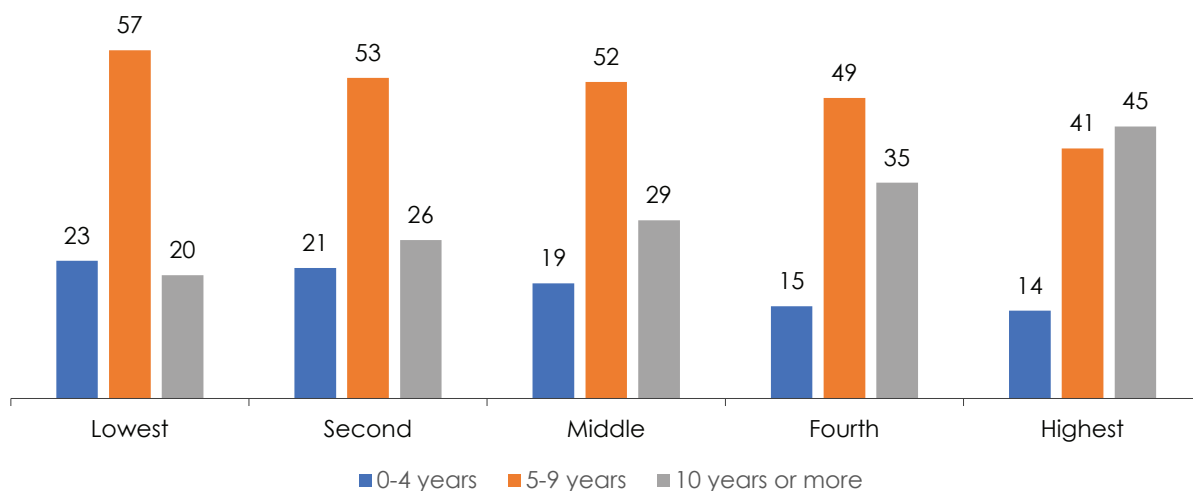


Figure 5.3. Percentage of currently married female adolescents ages 15-19 years by spousal age difference and wealth quintile



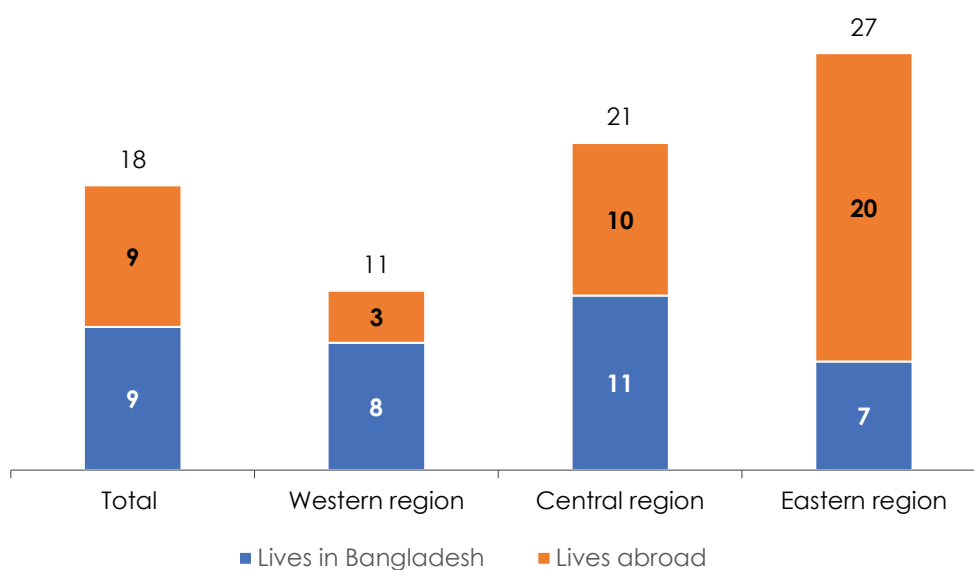
5.3. Spousal Separation

Spousal separation: Adolescents who reported that their husbands lived elsewhere.

Sample: Currently married female adolescents ages 15-19 years.

In total, 18% of married adolescents lived apart from their husbands; 9% of the spouses lived within Bangladesh and the other 9% lived abroad. Married adolescents in the Eastern region were more likely to be living separately (27%) than in those in the Western (11%) or Central (21%) regions. Also, adolescents in the Eastern region were more likely to have spouses living abroad than the other two regions (**Figure 5.4, Table 5.2**).

Figure 5.4 Percentage of currently married female adolescents ages 15-19 years whose husbands lived elsewhere by region



Married female adolescents in higher wealth quintiles and with higher levels of education were more likely to be living separately from their husbands. Two-out-of-five adolescents who lived separately from their husband did not have a single visit from their husband in the 12 months preceding the survey (**Table 5.2**).

Table 5.2. Spousal separation among currently married female adolescents

Percentage of currently married female adolescents ages 15-19 years whose husbands lived elsewhere; and among those whose husbands lived elsewhere, the percent distribution of frequency of spousal visits in the last 12 months by background characteristics, Bangladesh, 2019-20.

Background characteristics	Percentage whose husbands lived elsewhere	Number of currently married adolescents	Among those whose husband lived elsewhere, frequency of husband's visits in the past 12 months				Total	Number of currently married adolescents whose husbands lived elsewhere
			0	1-5	6-11	12 +		
Duration of marriage								
Less than 1 year	20.2	1,029	26.9	53.0	9.1	11.1	100.0	208
1-2 years	18.1	2,272	37.1	33.6	15.2	14.1	100.0	410
More than 2 years	16.7	1,498	43.1	36.6	9.2	11.1	100.0	250
Residence								
Urban	15.3	1,111	40.8	30.8	10.4	18.0	100.0	170
Rural	18.9	3,688	35.3	41.1	12.4	11.2	100.0	699
Region								
Western	20.8	1,889	33.9	39.6	12.0	14.5	100.0	393
Central	11.4	1,959	24.2	45.4	16.4	14.1	100.0	224
Eastern	26.5	950	51.2	32.6	8.2	8.0	100.0	252
Education								
Primary incomplete ¹	9.4	557	22.9	41.1	17.5	18.6	100.0	53
Primary complete	12.8	423	37.1	27.5	16.0	19.4	100.0	54
Secondary incomplete	17.4	2,629	40.4	39.7	10.6	9.3	100.0	457
Secondary complete or higher	25.6	1,190	32.7	39.8	12.5	15.0	100.0	305
Wealth quintile								
Lowest	10.3	917	21.1	41.7	19.7	17.5	100.0	94
Second	14.9	1,040	32.0	42.0	15.5	10.5	100.0	155
Middle	19.4	1,106	37.4	38.4	13.6	10.6	100.0	215
Fourth	21.7	1,019	38.4	37.9	7.9	15.8	100.0	221
Highest	25.7	715	44.4	37.5	8.3	9.8	100.0	184
Total	18.1	4,799	36.4	39.1	12.0	12.5	100.0	869

¹ Includes a few cases with no education.

5.4. Preferred Timing of Marriage among Currently Married Female Adolescents

Preferred timing of marriage: Adolescents who reported that they preferred to marry earlier than the age at which they were married, believed they married at the right time, or preferred to marry later.

Sample: Currently married female adolescents ages 15-19 years.

Overall, 31% of married female adolescents thought that they were married at the right time; about 65% preferred to be married later than they were, while 4% preferred to be married earlier (Table 5.3, Figure 5.5). About 53% of female adolescents who were married at ages 17-19 reported that they were married at the right time. One-quarter of female adolescents who were married at ages 15-16, and 16% who were married earlier than age 15, reported that they were married at the right time (Figure 5.6).

Table 5.3. Preferred timing of marriage among currently married female adolescents

Percent distribution of currently married female adolescents ages 15-19 years by their preferred age at marriage, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Married at right time	Preferred to marry earlier	Preferred to marry later	Total	Number of currently married female adolescents
Age at marriage					
<15	15.8	4.7	79.5	100.0	1,180
15-16	25.0	5.4	69.6	100.0	2,136
17-19	52.9	2.1	45.1	100.0	1,483
Residence					
Urban	35.8	5.6	58.6	100.0	1,111
Rural	30.0	3.8	66.3	100.0	3,688
Region					
Western	24.5	5.3	70.2	100.0	1,959
Central	34.3	2.1	63.6	100.0	1,889
Eastern	39.5	6.2	54.3	100.0	950
Education					
Primary incomplete ¹	40.3	3.9	55.8	100.0	557
Primary complete	30.3	4.0	65.7	100.0	423
Secondary incomplete	26.6	4.3	69.0	100.0	2,629
Secondary complete or higher	37.8	4.1	58.0	100.0	1,190
Wealth quintile					
Lowest	30.5	2.5	67.0	100.0	917
Second	31.3	4.4	64.3	100.0	1,040
Middle	30.6	4.7	64.6	100.0	1,106
Fourth	30.6	4.8	64.6	100.0	1,019
Highest	34.6	4.3	61.1	100.0	715
Total	31.3	4.2	64.5	100.0	4,799

¹ Includes no education.

Figure 5.5. Percentage of currently married female adolescents ages 15-19 years by preferred timing of marriage

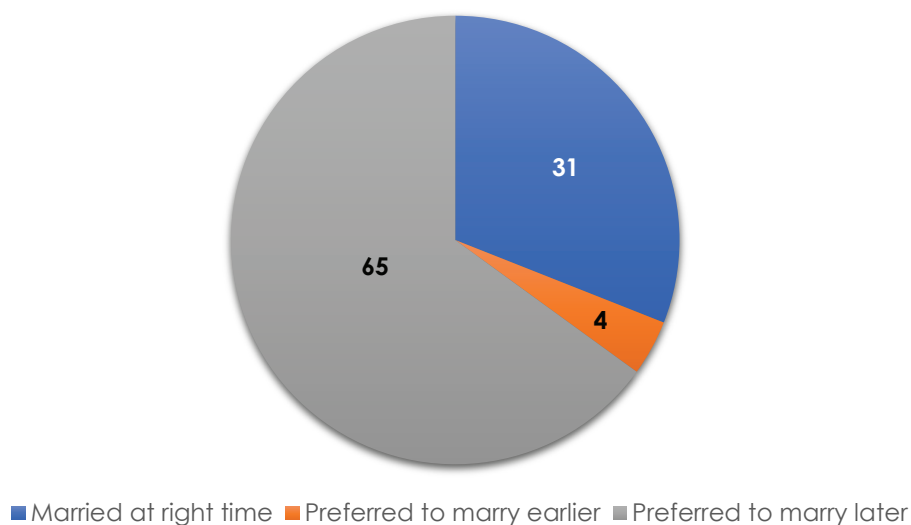
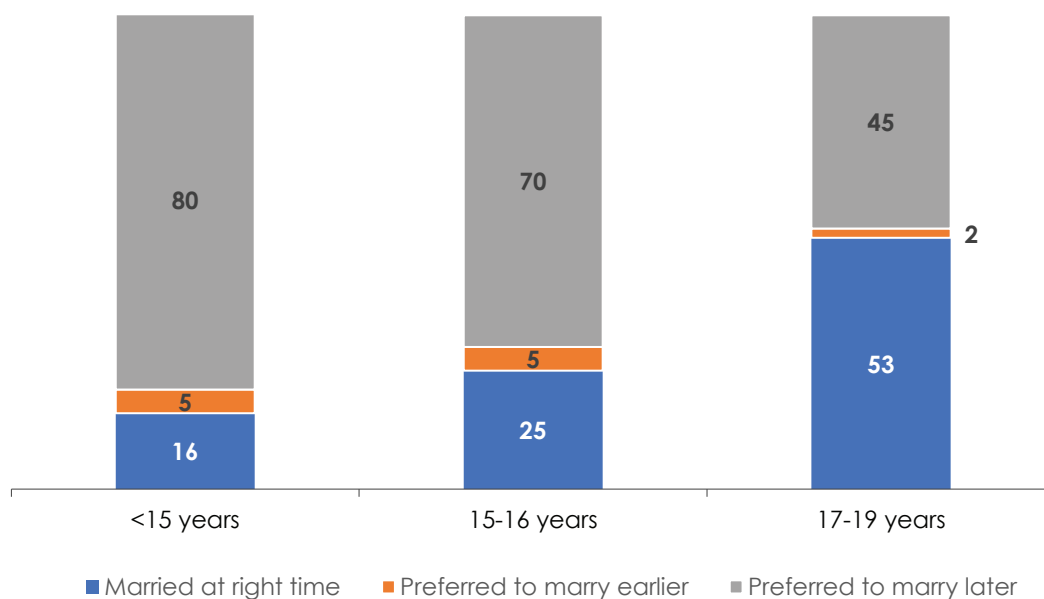


Figure 5.6. Percentage of currently married female adolescents ages 15-19 years by preferred timing of marriage, by current age



5.5. Ideal and Preferred Age at Marriage: Unmarried Adolescents

Ideal age at marriage: Adolescents who reported the ideal age at which females and males should get married.

Sample: Unmarried female and male adolescents ages 15-19 years.

About 42% of unmarried adolescent females and 54% of unmarried adolescent males said the ideal age at marriage for girls was 18-19 years; while about 38% of unmarried adolescent females and males said the ideal age at marriage was 21-23 years for boys (Table 5.4).

Table 5.4 Opinion on ideal age at marriage among unmarried females and male adolescents

Percent distribution of unmarried female and male adolescents ages 15-19 years by their opinion on ideal age at marriage, according to residence, Bangladesh, 2019-20.

Perceptions	Unmarried females			Unmarried males		
	Residence			Residence		
	Urban	Rural	Total	Urban	Rural	Total
Opinion on ideal age at marriage for girls						
<18	0.3	0.7	0.6	2.3	5.0	4.3
18-19	29.7	47.4	41.8	46.8	57.3	54.4
20-21	30.5	31.4	31.2	28.2	26.6	27.0
22-23	18.5	10.0	12.7	11.7	7.2	8.4
24+	20.9	10.4	13.7	11.0	3.9	5.8
Total	100.0	100.0	100.0	100.0	100.0	100.0
Opinion on ideal age at marriage for boys						
<21	3.6	5.2	4.7	5.1	7.4	6.7
21-23	26.9	42.6	37.6	30.9	40.4	37.8
24-25	24.9	26.7	26.1	31.0	34.4	33.4
26+	44.7	25.5	31.6	33.0	17.9	22.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of adolescents (N)	1,246	2,696	3,943	745	1,993	2,738

Preferred age at marriage: Adolescents who reported the age at which they preferred to get married.

Sample: Unmarried female and male adolescents ages 15-19 years.

In addition to their opinions on the ideal age at marriage in general, unmarried female and male adolescents were also asked their preferred age at marriage for themselves. Forty-two percent of unmarried female adolescents preferred to get married at 18-19 years, and less than 1% preferred to get married before Bangladesh's legal age of marriage (18 years). Over one-quarter preferred to get married after age 21, and 14% at 24 years of age or later. In contrast, 55% of unmarried male adolescents preferred to get married at age 24 or later (**Table 5.5, Figures 5.7 and 5.8**).

Adolescents in rural areas preferred to marry earlier than those in urban areas. Twenty percent of adolescent females in rural areas preferred to marry after 21 years of age, compared to 39% of those in urban areas. Among adolescent males, the proportion who preferred to marry at age 24 or later was lower in rural areas (52%) than in urban areas (64%) (**Table 5.5**).

Table 5.5 Preferred age at marriage among unmarried female and male adolescents

Percent distribution of unmarried female and male adolescents ages 15-19 years by their preferred age at marriage, according to residence, Bangladesh, 2019-20.

Preferred age at marriage (years)	Unmarried females		
	Residence		
	Urban	Rural	Total
<18	0.3	0.7	0.6
18-19	29.7	47.4	41.8
20-21	30.5	31.4	31.2
22-23	18.5	10.0	12.7
24+	20.9	10.4	13.7
Total	100.0	100.0	100.0
Number of unmarried female adolescents	1,246	2,696	3,943

Preferred age at marriage (years)	Unmarried males		
	Residence		
	Urban	Rural	Total
<21	5.1	7.4	6.7
21-23	30.9	40.4	37.8
24-25	31.0	34.4	33.4
26+	33.0	17.9	22.0
Total	100.0	100.0	100.0
Number of unmarried male adolescents	745	1,993	2,738

Figure 5.7. Percentage of unmarried female adolescents ages 15-19 years, by preferred age at marriage

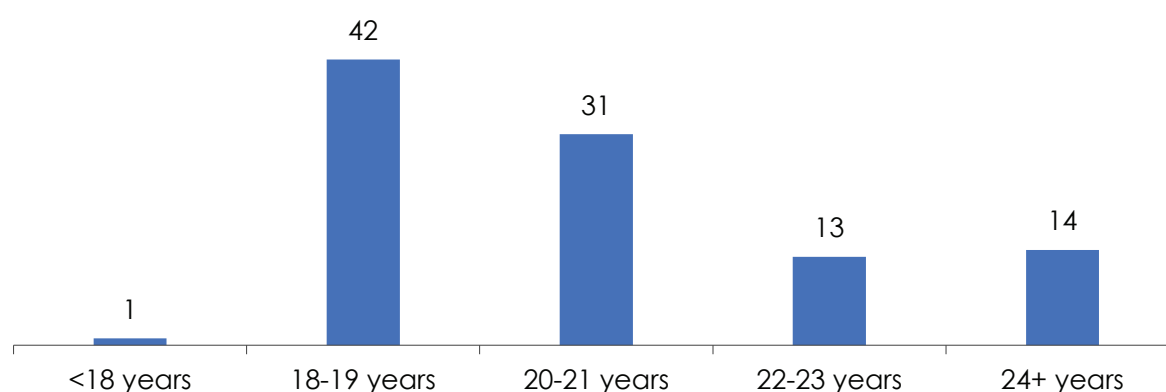
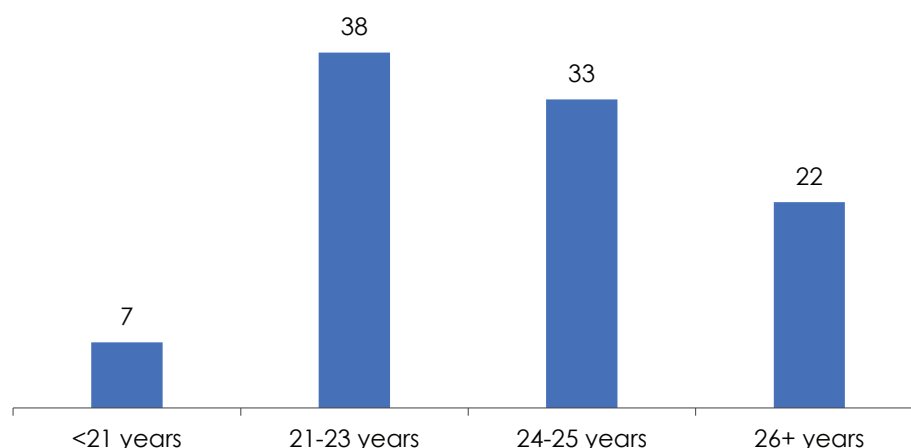


Figure 5.8. Percentage of unmarried male adolescents ages 15-19 years, by preferred age at marriage



5.6. Perception about Parent's Preferred Age at Marriage and Ability to Convince Parents about When to Marry

Thirty-two percent of unmarried females said their parents would prefer them to get married before 20 years of age, while only 0.1% of unmarried males said the same. Half of unmarried adolescent males said their parents would want them to marry at age 24 or older, compared to 16% of unmarried adolescent females (Table 5.6).

Table 5.6. Perception of unmarried adolescents of their parents' preferred age at marriage

Percent distribution of unmarried female and male adolescents ages 15-19 years by their perception of the age when their parents would prefer them to get married, according to residence, Bangladesh, 2019-20.

Adolescents' perception of the age when their parents would prefer them to get married (years)	Unmarried females			Unmarried males		
	Residence			Residence		
	Urban	Rural	Total	Urban	Rural	Total
<18	5.5	9.3	8.1		0.1	0.0
18-19	18.3	26.2	23.7	0.1	0.2	0.1
20-21	16.3	18.2	17.6	1.9	2.9	2.7
22-23	10.6	9.2	9.7	4.0	5.6	5.2
24+	24.1	12.6	16.3	50.4	49.9	50.0
Don't know	24.1	23.7	23.9	43.5	41.0	41.7
Doesn't want to marry	1.0	0.8	0.9	0.2	0.3	0.3
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of adolescents (N)	1,246	2,696	3,943	745	1,993	2,738

Among two-thirds of unmarried females and four-fifths of unmarried males, there was no difference in adolescents' reports of their and their parents preferred age at marriage. Thirty-seven percent of adolescent females said it was quite likely, and 50% of adolescent males said it was extremely likely, they could convince their parents to allow them to delay marriage. Among both unmarried adolescent females and males, about one-quarter reported that a sibling could assist to convince their parents to delay the adolescent's age at marriage. Uncles and aunts were reported next most frequently, at 17% and 18% among females and males, respectively; and brothers- and sisters-in-law were reported by 11% and 14% of adolescent females and males, respectively, as being able to convince parents to delay adolescents' marriages (Table 5.7).

Table 5.7. Perceptions towards preferred age at marriage and assistance to delay marriage among unmarried females and male adolescents

Percent distribution of unmarried female and male adolescents ages 15-19 years by their preferred age at marriage in relation to parents' preference, likelihood to delay age of marriage, and assistance to delay marriage, according to residence, Bangladesh, 2019-20.

Perceptions	Unmarried females			Unmarried males		
	Residence			Residence		
	Urban	Rural	Total	Urban	Rural	Total
Adolescents' preferred age in relation to parents' preferred age of marriage						
No difference in adolescents' and their parents' preferred age of marriage	68.6	61.2	63.5	78.6	82.2	81.3
Adolescents' preferred age was less their parents' preferred age of marriage	1.9	2.6	2.4	11.1	12.8	12.3
Adolescents' preferred age was more their parents' preferred age of marriage	29.5	36.2	34.1	10.3	5.0	6.4
Total	100.0	100.0	100.0	100.0	100.0	100.0
N	933	2,035	2,968	419	1,170	1,589
Likelihood of convincing parents to delay marriage among adolescents who want to marry later than their parents preferred age of marriage						
Extremely likely	36.1	31.4	32.7	52.2	47.9	49.6
Quite likely	36.1	37.6	37.2	35.6	27.8	31.0
Unlikely	12.1	16.3	15.1	4.5	12.1	9.0
Extremely unlikely	10.5	11.9	11.5	1.1		0.5
Don't know	5.2	2.8	3.5	6.5	12.2	9.9
Total	100.0	100.0	100.0	100.0	100.0	100.0
N	288	757	1045	45	65	109
Person who can assist to convince parents/guardian to delay the age of marriage						
Father	0.4	1.3	1.1	0.0	0.0	0.0
Mother	2.2	4.1	3.6	0.0	0.0	0.0
Grandmother/grandfather	6.2	6.0	6.0	5.9	2.5	3.8
Brother/sister	18.2	28.5	25.8	24.1	23.9	24.0
Uncle/aunty	20.3	15.6	16.8	26.7	12.4	18.0
Brother-in-law/sister-in-law	7.9	11.8	10.8	8.3	18.0	14.2
Other relatives	3.4	6.0	5.4	21.1	10.7	14.8
Neighbors/friends	3.5	1.7	2.2	0.0	10.0	6.1
Teacher	3.8	1.7	2.2	0.0	0.0	0.0
Others	0.8	0.6	0.6	0.0	2.4	1.5
No one	39.2	42.1	41.4	27.8	29.5	28.8
Don't know/not sure	5.2	2.8	3.4	10.6	20.0	16.3
N	184	519	703	21	34	55

Key Findings

- **Contraceptive use:** The contraceptive prevalence rate among currently married female adolescents ages 15-19 years was 56%. Modern method use was 51%, and traditional method use was 5%. The pill was by far the most widely used method (33%), followed by condoms (9%) and injectables (7%).
- **Contraceptive use differentials:** Modern method use was highest in the Western region (58%), followed by the Central region (52%), and lowest in the Eastern region (34%). The variation of overall method use by education and wealth quintile was not pronounced.
- **Sources of modern method:** The private medical sector was the source of contraceptive supply for 64% of married female adolescents who used contraception—the majority (61%) relied on pharmacies. Another 14% reported getting their method from spouse/friends/relatives and other private sources. One-in-five married female adolescent users obtained their method from a public sector source.
- **Reasons for not using contraception:** Among contraceptive method non-users, 38% said that they want to have children, while 26% said that their husband stays elsewhere or abroad, and they thus have no need for a contraceptive method.
- **Knowledge of contraceptive methods among unmarried adolescents:** Overall, more unmarried male adolescents (84%) and unmarried female adolescents (75%) knew of at least one of the three common contraceptive methods (oral pill, condom, and emergency contraceptive pill).

Knowledge of the pill was higher among females (72%) than males (61%), but the opposite was true for knowledge of condoms and ECP (only 40% of females knew about condoms compared to 82% of males; ECP was known by 9% of females, compared to 19% of males).

Program and Policy Implications

Adolescents must be empowered with the information and self-efficacy to make and act on their decisions on family planning (FP): Most married female adolescents who use a contraceptive method obtain it from a pharmacy. Obtaining methods from pharmacies or from friends and relatives limits the range and quality of FP information and counseling that can be provided, and potentially limits method choice. Ensuring access to adolescent-friendly services and comprehensive information on FP options will enable adolescents to make fully informed choices to meet their fertility preferences in ways tailored to their life stage and circumstances.

Communication programs for unmarried adolescents should be strengthened:

The National Plan of Action for Adolescent Health Strategy 2017-2030 aims to promote age-appropriate comprehensive sexuality education. This should include comprehensive education on contraceptive methods and where to obtain them in order to address current knowledge gaps. Chapter 3 provides further recommendations for platforms to reach adolescents, both married and unmarried, with information on FP.

Family planning (FP) helps women avoid unintended and unplanned pregnancies and reduces the risk of unsafe abortions. FP, including the use of contraceptives, also helps women space the births of their children, which directly benefits the health of the mother and infants (Tsui, McDonald-Mosley, & Burke, 2010). Adolescents' FP and reproductive health (RH) risk profiles differ from those of adults. According to a review of maternal mortality ratios from 144 countries, females younger than 18 years of age are up to 50% more likely to die in childbirth than are women in their twenties (Nove, Matthews, Neal, & Camacho, 2014). Early pregnancy also typically denotes the end of formal education, restricts opportunities for employment, heightens poverty, and may limit growth in undernourished girls (Patton, et al., 2016). Finally, early childbearing often extends women's reproductive years and increases the total number of children they have. In Bangladesh, adolescent fertility contributes about 25% to the country's total fertility rate, meaning approximately 750,000 adolescents give birth annually (UNFPA, 2020).

The Government of Bangladesh (GOB) is committed to ensuring adolescent-friendly FP and RH services and supporting adolescents to engage in healthy behaviors from a very young age. The GOB has developed the National Strategy for Adolescent Health 2017-2030, to meet the health needs of this critical population. (Ministry of Health and Family Welfare, 2018). The 4th HPNSP has recognized the importance of addressing adolescents in order to improve their health and also to achieve a demographic dividend, in line with the country's commitment to meet the SDGs by 2030.

This chapter presents information on use and sources of contraceptive methods among currently married female adolescents, as well as their reasons for not using contraceptives. It also examines unmarried adolescents' knowledge of modern contraceptive methods and sources for obtaining modern contraceptives.

6.1. Contraceptive Use

Contraceptive prevalence rate: Percentage of currently married female adolescents who use any contraceptive method.

Sample: Currently married female adolescents ages 15-19 years.

Modern methods: Includes female and male sterilization, implants, intrauterine devices (IUDs), injectables, oral contraceptive pills, and male condoms.

The contraceptive prevalence rate among currently married female adolescents ages 15-19 was 56%. Modern method use was 51%, and traditional method use was 5% (**Figure 6.1** and **Table 6.1**).

Figure 6.1. Percentage of currently married female adolescents ages 15-19 currently using a contraceptive method

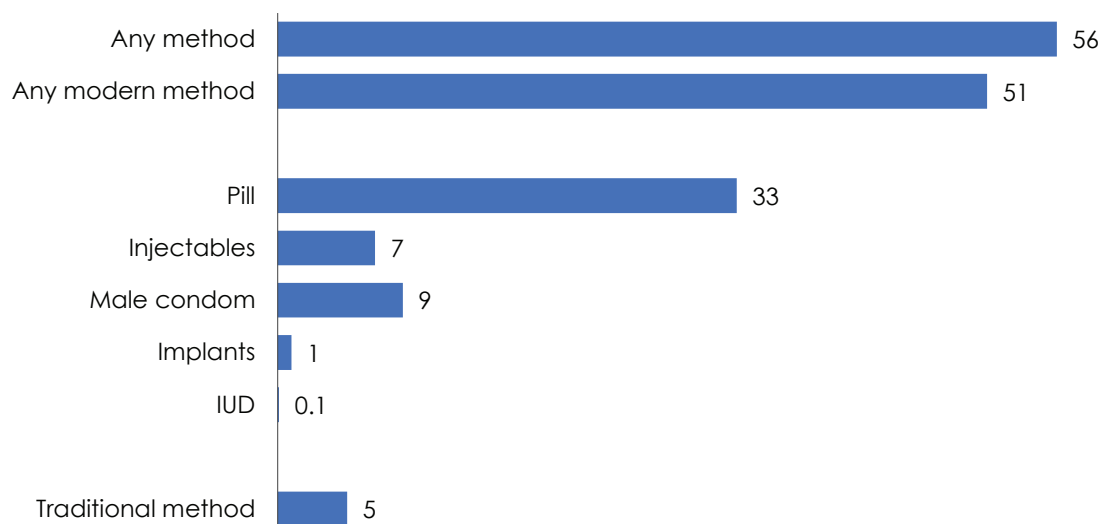


Table 6.1. Current use of contraception among currently married female adolescents

Percent distribution of currently married female adolescents ages 15-19 by contraceptive method currently used, according to background characteristics, Bangladesh 2019-20.

Background characteristics	Any modern method				Modern method				Traditional method				Number of adolescents	
	Any method	Any modern method	Pill	Injectables	Condom	IUD	Implants	Other modern	Any traditional	Periodic abstinence	Withdrawal	Not currently using		Total
Age														
15-17	56.4	51.1	32.1	7.5	9.0	0.1	1.8	0.5	5.3	1.8	3.4	43.6	100.0	2,692
18-19	56.8	51.0	29.9	7.2	11.8	0.1	1.3	0.7	5.8	2.6	3.2	43.2	100.0	1,111
Residence														
Urban	55.8	50.6	34.0	6.5	8.1	0.1	1.5	0.5	5.2	1.8	3.4	44.2	100.0	3,688
Rural	63.6	57.9	37.3	7.8	10.5	0.1	1.9	0.3	5.6	2.1	3.5	36.4	100.0	1,959
Region														
Western	57.1	51.7	34.5	6.0	9.4	0.1	1.1	0.7	5.3	1.7	3.7	42.9	100.0	1,889
Central	38.4	33.7	21.5	5.7	4.9		1.1	0.5	4.8	2.5	2.3	61.6	100.0	950
Eastern														
Educational attainment														
Primary incomplete ¹	56.8	51.4	32.2	11.7	3.7	0.2	3.3	0.3	5.4	2.9	2.5	43.2	100.0	557
Primary complete	53.4	50.2	31.4	11.4	4.9		2.0	0.4	3.3	1.5	1.8	46.6	100.0	423
Secondary incomplete	57.1	51.9	34.0	7.1	8.8	0.1	1.4	0.6	5.2	2.1	3.1	42.9	100.0	2,629
Secondary complete or higher	54.2	47.8	31.9	1.6	13.3	0.0	0.6	0.5	6.4	1.7	4.7	45.8	100.0	1,190
Wealth quintile														
Lowest	56.5	50.9	33.9	10.1	4.1	0.1	2.3	0.4	5.6	2.1	3.5	43.5	100.0	917
Second	57.3	53.2	38.5	7.4	5.7	0.0	1.2	0.4	4.1	1.8	2.3	42.7	100.0	1,040
Middle	56.5	49.8	32.0	7.1	9.2	0.2	1.1	0.2	6.6	3.1	3.5	43.5	100.0	1,106
Fourth	55.2	50.4	32.7	5.0	10.5	0.0	1.6	0.7	4.7	1.3	3.4	44.8	100.0	1,019
Highest	54.1	48.4	26.0	3.1	17.2	0.0	1.0	1.0	5.8	1.5	4.3	45.9	100.0	715
Total	56.0	50.7	33.0	6.7	9.0	0.1	1.4	0.5	5.4	2.0	3.3	44.0	100.0	4,799

Note: If more than one method is used, only the most effective method is considered in this tabulation.

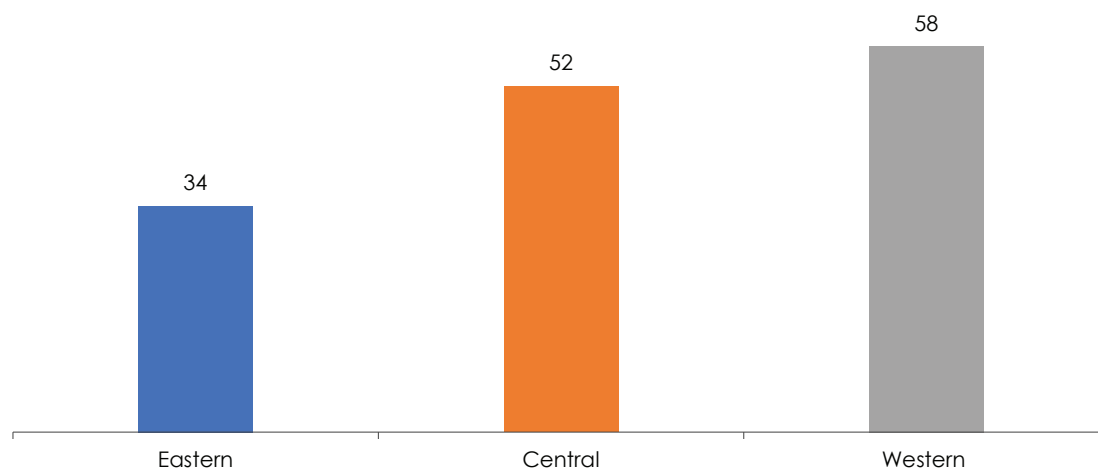
¹ Includes a few cases with no education.

The pill was by far the most widely used contraceptive method (33%), followed by male condom (9%) and injectables (7%). Implants were used by 1%, while IUDs were used by a negligible proportion (0.1%). Traditional methods were used by 5% of the adolescents; and of the traditional methods, 3% used the withdrawal method (Figure 6.1 and Table 6.1).

Patterns by Background Characteristics

- Overall, contraceptive use (any and modern methods) was similar for urban and rural areas, but rural adolescents were more likely to use the pill than their urban counterparts (34% versus 30%, respectively). In contrast, the use of male condoms was lower in rural (8%) than urban (12%) areas (Table 6.1).
- Any method use and modern method use were highest in the Western region, followed by the Central region, and were lowest in the Eastern region (Figure 6.2). Use of each individual method also followed the same pattern of regional variation (i.e., highest in the Western region and lowest in the Eastern region) as overall (any and modern methods) use.
- There was no clear association of overall contraceptive use (any or modern methods) with education, but injectables and male condom use were associated with education. For example, injectables use sharply declined with education and, in contrast, male condom use sharply increased with education.
- In general, modern method use among currently married adolescents had a weak association with wealth quintile—51-53% of adolescents in the lowest two wealth quintiles used a modern method, compared with 48% in the highest quintile. However, there are two noteworthy patterns by wealth and use of a specific method: 1) there was a strong negative association of injectables use with wealth quintile, and 2) there was a strong positive association of male condom use with wealth quintile (Table 6.1).

Figure 6.2. Percentage of currently married female adolescents ages 15-19 using modern contraceptive methods by region



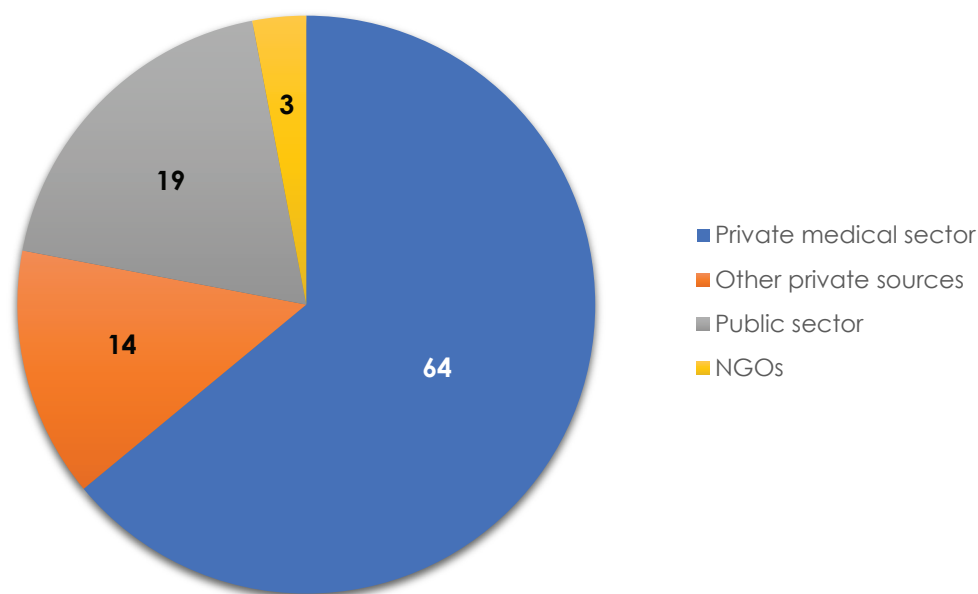
6.2. Source of Modern Contraceptive Methods

Source of modern contraceptives: The place from where the modern method currently being used was obtained the last time it was acquired.

Sample: Currently married female adolescents ages 15-19 years currently using a modern contraceptive method.

Nearly two-in-three contraceptive users (64%) obtained their methods from the private medical sector, mostly from a pharmacy or drug store (**Figure 6.3**). About one-in-ten users (9%) received their methods from their husband, and one-in-twenty received methods from other sources (a shop or friends/relatives). Nearly one-in-five users (19%) obtained their methods from the public sector, and only 3% of users obtained their methods from nongovernmental organizations (NGOs) (**Figure 6.3** and **Table 6.2**).

Figure 6.3. Percent of currently married female adolescents ages 15-19 currently using a modern method of contraception by most recent source of method



The source of modern contraceptive methods varied to a great extent by the specific method. Long-acting methods, such as implants, were mostly obtained from a public sector facility (77%), while 20% of users obtained implants from the private medical sector. Nearly 40% of injectables users obtained the method from a pharmacy/drug store and 38% obtained it from the public sector. In contrast, 68% of pill users and 64% of male condom users obtained their method from a pharmacy or drug store (**Table 6.2**).

Table 6.2. Source of modern contraception methods among currently married female adolescents

Percent distribution of currently married female adolescents ages 15-19 who use modern methods by most recent source of method, according to method, Bangladesh 2019-20.

Source	Pill	Injectables	Male condom	Implants	All modern methods
Public sector	16.0	37.5	7.1	77.2	19.2
Medical college hospital/district hospital	0.0	0.6	0.0	6.4	0.3
MCWC	0.0	1.1	0.3	14.4	0.6
Upazila health complex	1.5	5.1	0.5	47.7	3.1
UH & family welfare center	1.6	0.7	0.9	8.7	1.6
Satellite clinic/epi outreach	1.1	9.8	0.0	0.0	2.0
Community clinic	3.9	9.8	0.8	0.0	4.0
Government field worker (FWA)	8.0	10.4	4.6	0.0	7.5
Private medical sector	68.6	50.3	64.1	20.1	63.9
Private medical college hospital/clinic	0.1	1.4	0.3	10.6	0.6
Qualified doctor's chamber	0.4	3.7	0.0	3.1	0.9
Non-qualified doctor's chamber	0.5	5.9	0.0	0.0	1.1
Pharmacy/drug store	67.6	39.4	63.9	6.3	61.3
NGO sector	1.5	11.3	1.7	2.7	2.9
NGO static clinic	0.3	2.9	0.2	1.6	0.6
NGO satellite clinic	0.2	2.6	0.7	1.1	0.6
NGO depot holder	0.1	1.1	0.0	0.0	0.2
NGO field worker	0.9	4.8	0.7	0.0	1.4
Other private	13.9	0.9	27.1	0.0	14.1
Shop	1.7	0.0	3.9	0.0	1.8
Friend/relative	2.0	0.3	0.4	0.0	1.4
Husband	9.6	0.0	16.7	0.0	9.3
Other	0.6	0.5	6.1	0.0	1.6
Total	100.0	100.0	100.0	100.0	100.0
Number of adolescents	1,585	321	430	69	2,407

6.3. Reasons for Not Using Contraception

Thirty-eight percent of currently married female adolescents who were not using any family planning methods reported that they wanted to have children at the time of the survey. Over one-in-four reported that their husbands stayed elsewhere or were abroad, so they did not need to use a method. More than one-in-five did not use any contraceptive method due to other reasons. Only 6% stated that their husband or others were opposed to them using a method, and an additional 6% stated that they thought that contraceptive use interfered with normal physiological processes (Table 6.3).

Table 6.3. Reasons for not using contraception among currently married female adolescents

Percentage of currently married female adolescents ages 15-19 who are not using any contraceptive methods, by reason stated, Bangladesh 2019-20.

Reason	Percentage
General health concern/side effects	1.5
Difficulty in having sex	0.6
Interfered with normal physiological process/do not like using methods	6.2
Husband/others opposed	5.9
Social stigma/religious prohibition	0.4
Want children now	38.0
Husband stays elsewhere/abroad	26.0
Other reasons	21.4
Number of adolescents	2,110

6.4. Knowledge of Contraceptive Methods: Unmarried Male and Female Adolescents

Knowledge of contraceptive methods:

- **Spontaneous knowledge:** Spontaneously mentioned by the respondent that she/he has heard of the oral pill, condom, or emergency contraceptive pills (ECP).
- **Prompted knowledge:** If the respondent reports she/he has heard of the oral pill, condom, or ECP after the method is described to them.

Sample: Unmarried female and unmarried male adolescents ages 15-19 years.

Seventy-two percent of unmarried female adolescents were aware of the pill; 35% responded spontaneously and 37% mentioned this method after prompting. In contrast, 40% of females had heard of condoms as a family planning method—28% responded after prompting, versus 12% who mentioned the method spontaneously. A small proportion of unmarried female adolescents had heard of ECP (9%) (Table 6.4).

A large majority of unmarried male adolescents (82%) knew of condoms as a family planning method, followed by the oral pill (61%). Unmarried male adolescents were more knowledgeable about ECP (19%) compared to females of the same age group.

Describing the family planning method was important to ascertaining knowledge of the method among unmarried adolescents. In all cases, more adolescents reported knowing of the method when it was described than those who reported knowing it spontaneously.

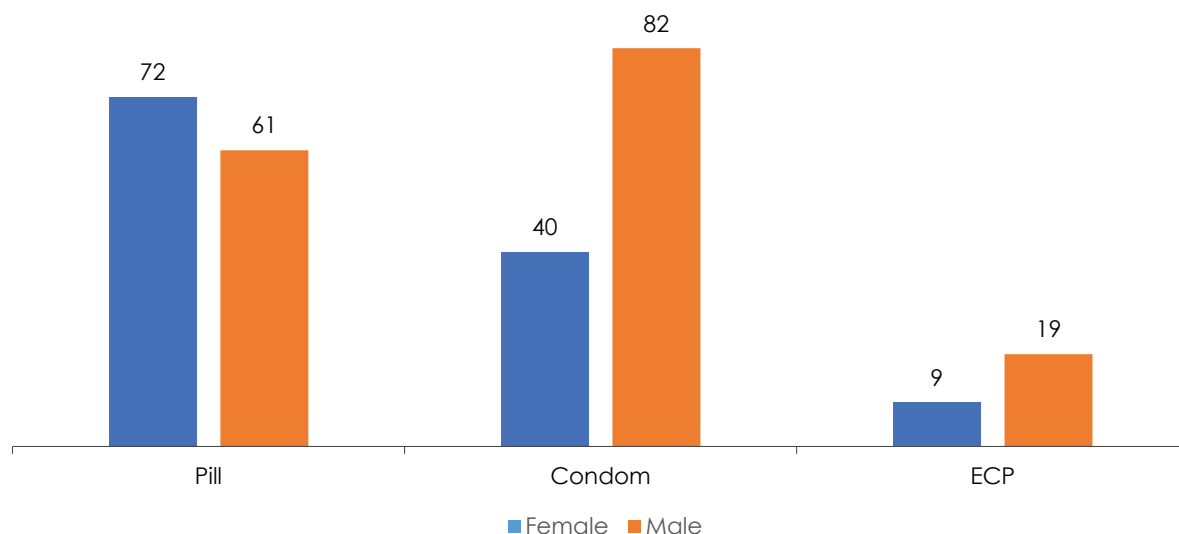
Table 6.4. Awareness of family planning methods among unmarried female and male adolescents
Percentage of unmarried female and male adolescents ages 15-19 who have heard of specific contraceptive methods, Bangladesh 2019-20.

Background characteristics	Spontaneous/ prompted	Heard of:			At least one of the three methods	Number of adolescents
		Pill	Condom	ECP		
Unmarried females	Overall	71.8	39.7	9.3		
	Spontaneous	35.0	11.8	1.3	74.5	7,800
	Prompted	36.8	28.0	8.0		
Unmarried males	Overall	60.6	82.1	19.4		
	Spontaneous	23.6	31.6	3.5	84.1	5,523
	Prompted	37.0	50.5	16.0		

Patterns by Background Characteristics

- Knowledge about the pill was higher among unmarried female adolescents (72%) than unmarried male adolescents (61%), but the opposite was true for knowledge about condoms and ECP (Figure 6.4). Only 40% of unmarried female adolescents knew about condoms, compared to 82% of unmarried male adolescents.
- Overall, knowledge about any of the three methods—pill, condom, and ECP—increased with age and education (Appendix A: Tables 6.4A, 6.4B). The variation by urban-rural area and wealth quintile was not pronounced. Knowledge was highest in the Western region, followed by the Central region, and lowest in the Eastern region. These patterns were true for both males and females.
- Among both unmarried female and male adolescents, those in older age groups (18-19 years) were more knowledgeable than those younger in age (15-17 years) for each of the three methods (Appendix A: Tables 6.4A, 6.4B).
- Unmarried female adolescents in the Eastern region were less knowledgeable about the oral pill (65%), condoms (29%), and ECP (8%) compared to their counterparts in the Western region (pill – 80%, condoms – 49%, and ECP – 11%) and the Central region (pill – 71%, condoms – 42%, and ECP – 10%). The knowledge of male adolescents followed a similar pattern by region to that of their female counterparts.
- Awareness of each family planning method (oral pill, condoms, and ECP) increased with unmarried adolescent’s education. For example, 55% of unmarried female adolescents with primary incomplete education were aware of oral pills compared to 83% of those with secondary complete or higher education. Similarly, the percentage of unmarried female adolescents who had heard of condoms ranged from 18% among those with primary incomplete education to 58% among those with secondary complete or higher education; and for ECP the percentage who had heard of the method ranged from 4% among those with incomplete primary education to 15% among those with secondary or higher education (Appendix A: Tables 6.4A, 6.4B).

Figure 6.4. Percentage of unmarried adolescents ages 15-19 who had heard of oral pill, condom, or emergency contraception pill

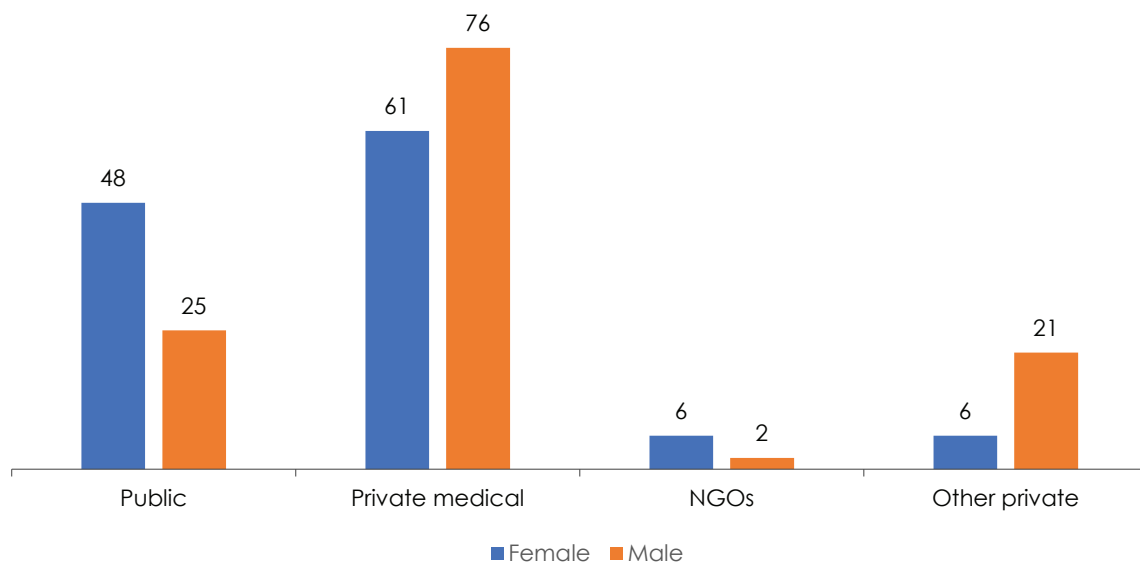


6.5. Knowledge about Source of Modern Contraceptive Methods

Figure 6.5 provides information on the knowledge of sources of family planning among unmarried adolescents who were aware of contraceptive methods. The most widely reported source of contraceptive methods by unmarried adolescents ages 15-19 was the private medical sector, followed by the public sector. The NGO sector was the least-widely reported source.

Less than half (48%) of unmarried females and one-quarter (25%) of unmarried males mentioned the public sector as sources of contraceptive methods. In contrast, 61% of unmarried females and more than three-quarters (76%) of unmarried males mentioned the private medical sector as a source of contraceptive methods. Pharmacy or drug store, which is part of the private medical sector was mentioned by the majority of female (53%) and male (66%) adolescents (data not shown).

Figure 6.5. Percentage of unmarried adolescents' knowledge of sources of modern contraceptive methods among those who have heard of contraceptive methods



Key Findings

Nutritional status:

- **Stunting:** Female adolescents were more likely to be stunted than males. One-third of the female adolescents (36% of ever-married and 32% of unmarried) were stunted, compared to one-fifth (22%) of unmarried males.
- **Underweight:** Only 4% of ever-married adolescent females were underweight. However, the proportion was higher among unmarried adolescent females (8%) and unmarried adolescent males (11%).
- **Overweight:** Around 16% of ever-married adolescent females were overweight. The proportion was lower among unmarried adolescent females (10%) and unmarried adolescent males (9%).

Dietary diversity

- **Adequate diversity (≥ 4 food groups):** More than two-thirds of adolescent females (76% of ever-married and 78% of unmarried females) had adequate dietary diversity. The proportion was higher (85%) among adolescent males.
- **Vitamin A-enriched food:** Twenty-two percent of ever-married adolescent females consumed vitamin A-enriched food. The proportion was slightly higher for unmarried adolescents (with females at 24% and males at 29%).
- **Iron-enriched food:** More than two-thirds of adolescents (70% of ever-married females, 73% of unmarried females, and 78% of unmarried males) consumed iron-enriched food.

Iron-folic acid supplementation:

- Twelve percent of ever-married adolescent females had received iron-folic acid supplementation in the seven days prior to the survey. However, the proportion was very low for unmarried adolescents (3% for females and 1% for males).

Program and Policy Implications

Address both sides of malnutrition: The National Plan of Action for Adolescent Health Strategy 2017-2030 includes adolescent nutrition as one of its four areas of strategic focus. The policy outlines undernutrition and associated deficiencies as the main issue. However, this survey estimates that being overweight is also an issue for this age group. Therefore, it is important to address both overnutrition and undernutrition among adolescents.

Better coverage of iron-folic acid supplements: The survey shows that the proportion of adolescents taking iron-folic acid supplements was quite low. Considering how important iron and folic acid are to adolescents' diets, greater attention is required to increase adolescents' intake of this supplement. While it is generally recognized that female adolescents should take this supplement to achieve optimal reproductive health outcomes, folic acid benefits males' reproductive health as well. Subsidized distribution of these supplements can be implemented in schools, religious institutes, community-based organizations, and health facilities.

Use a multisectoral approach to address nutrition: Nutrition strategies and programs should take a life-course approach to promote good nutrition among adolescents. Coordination of efforts across sectors can help address factors that influence adolescents' dietary diversity and malnutrition. Exploring opportunities to share nutritional messages and services through the agriculture sector, and in particular through agricultural extension, and engaging adolescents in this sector is one way to use a multisectoral approach for improved nutrition.

A diverse diet and optimum nutrition help adolescents maintain a healthy weight, continue developing physically, mentally, and socially, and optimize growth, thus positively influencing their overall health (Salam, & Bhutta, 2015). The World Health Organization (WHO) guidance on improving adolescent nutrition (2018) encourages adolescents to consume a diverse diet that includes eating fruits, vegetables, and dietary fibre, and vitamins and mineral supplementation; and to avoid foods that are high in calories, salt, sugar, and additives.

Understanding the nutritional status and dietary diversity of adolescents is vital for policymakers and program managers to design and implement interventions to help ensure optimum nutrition in this population. This is particularly important because a well-nourished adolescent population leads to a healthy population of adults and future generations.

This chapter presents information on nutritional status, dietary diversity, and consumption of vitamin A and iron-folic supplements among female and male adolescents.

7.1. Nutritional Status

WHO's growth curve reference for school-aged children and adolescents is one tool available to assess the nutritional status of adolescents ages 15-19 years (de Onis, et al., 2007). Using this tool, a well-nourished group of adolescents would follow the same growth curve as the reference population, while a poorly nourished group of adolescents would differ from the reference values. For this chapter, two indices are used: height-for-age to assess stunting, and body mass index (BMI) for age to assess underweight and overweight. The estimates are interpreted in comparison to a reference growth pattern.

Stunting or short stature among adolescents (10-19 years of age) is defined as height-for-age less than -2 Z-scores of a reference (WHO, 1995). Stunting in adolescence is the result of the cumulative effects of poor nutritional status, largely during the first two years of life (Shrimpton, et al., 2001).

Underweight/thinness among adolescents (ages 10-19 years) is defined as a BMI-for age below -2 Z-scores of the WHO reference population ages 5-19 years (de Onis, et al., 2007). In adolescents, being underweight is generally used as an indicator of current nutritional status and may reflect low levels of fat and muscle mass. Since being underweight can be the result of both low weight and low height, BMI is useful to assess the individual's weight deficit relative to their height (Chaparro, & Lutter, 2011).

Overweight among adolescents (ages 10-19 years) is defined as a BMI-for-age greater than +1 Z-score of a reference (de Onis, et al., 2007).

Stunting (assessed by height-for-age): Height-for-age is a measure of linear growth retardation and cumulative growth deficits. Adolescents whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted). Adolescents who are below minus three standard deviations (-3 SD) are considered severely stunted.

Underweight/thin (assessed by BMI): Adolescents whose BMI for age (where BMI is calculated as weight/height²) Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are classified as thin.

Overweight (assessed by BMI): Adolescents whose age-specific BMI (where BMI is calculated as weight/height²) Z-score is more than one standard deviation (+1 SD) above the median of the reference population are considered overweight.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

The BAHWS 2019-20 estimated that 36% of ever-married female adolescents were short for their age or stunted. The proportion was slightly lower for unmarried female adolescents (32%). Stunting was lowest (22%) among the unmarried male adolescents (**Table 7.1**).

Table 7.1. Stunting (height-for-age)

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19, classified as stunted and not stunted, measured by height-for-age, Bangladesh, 2019-20.

Types of adolescents	Stunted (height-for-age)		Not stunted	Number of adolescents
	Percentage below -3 SD ¹	Percentage below -2 SD ²	Percentage above or equal to -2 SD ³	
Ever-married females	6.1	35.7	64.3	2,388
Unmarried females	4.5	31.5	68.5	3,879
Unmarried males	3.9	22.3	77.7	2,702

Note: The table is based on cases with a valid measure of height.

¹ Includes adolescents who are below -3 standard deviations from the WHO standard population median.

² Includes adolescents who are below -2 standard deviations from the WHO standard population median.

³ Includes adolescents who are above/equal to -2 standard deviations from the WHO standard population median.

Four percent of ever-married female adolescents were considered “underweight/thin.” For unmarried female adolescents, the proportion was higher (8%), and for unmarried male adolescents it was the highest (11%). Overweight was highest among the ever-married female adolescents (16%), followed by unmarried female and male adolescents—10% and 9%, respectively (**Table 7.2** and **Figure 7.1**).

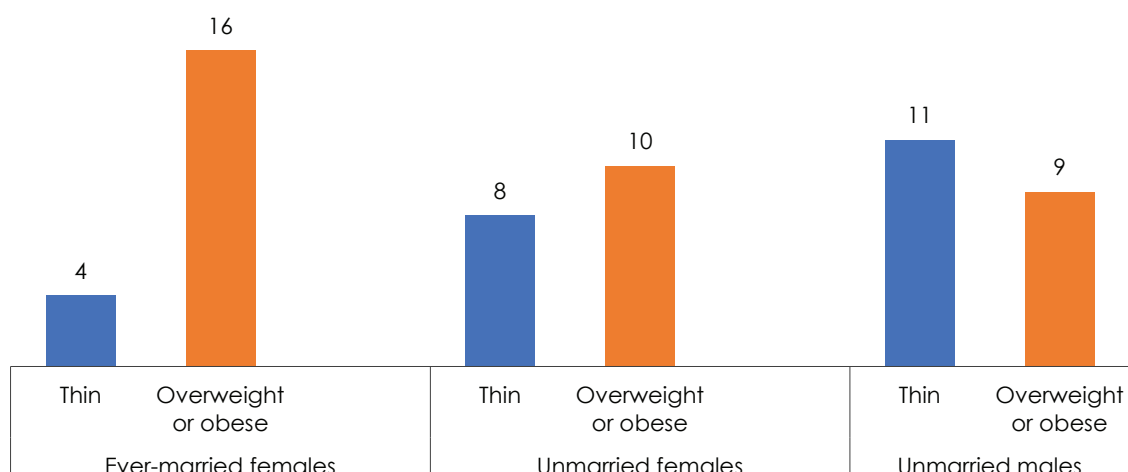
Table 7.2. Body mass index

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19, classified as underweight, normal, and overweight, Bangladesh, 2019-20.

Types of adolescents	Body mass index			Total	Number of adolescents
	Underweight	Normal	Overweight		
	Percentage below -2 SD	Percentage equal to/greater than -2 SD and less than/equal to +1 SD	Percentage above +1 SD		
Ever-married females	3.6	80.5	15.9	100.0	2,018
Unmarried females	7.6	82.3	10.1	100.0	3,880
Unmarried males	11.4	79.7	8.9	100.0	2,701

Note: Excludes pregnant women.

Figure 7.1. Percentage of adolescents ages 15-19 who are underweight or overweight



Patterns by Background Characteristics

- Proportion of stunting increased with age for all three groups of adolescents (**Figure 7.2; Appendix A: Tables 7.1A, 7.1B, 7.1C**).
- Adolescents from the lowest wealth quintile were more likely to be stunted than their counterparts from the highest wealth quintile (42% vs. 24% for ever-married females; 39% vs. 23% for unmarried females; and 31% vs. 14% for unmarried males) (**Appendix A: Tables 7.1A, 7.1B, 7.1C**).
- Adolescents from the lowest wealth quintile were more likely to be underweight than their counterparts from the highest wealth quintile (4% vs. 3% for ever-married females; 10% vs. 6% for unmarried females; and 14% vs. 10% for unmarried males) (**Appendix A: Tables 7.2A, 7.2B, 7.2C**).
- Adolescents from urban areas were more likely to be overweight than their rural counterparts (22% vs. 14% for ever-married females; 14% vs. 9% for unmarried females; and 14% vs. 7% for unmarried males) (**Figure 7.3; Appendix A: Tables 7.2A, 7.2B, 7.2C**).
- Adolescents from the highest wealth quintile were more likely to be overweight than those from the lowest wealth quintile (28% vs. 9% for ever-married females; 17% vs. 6% for unmarried females; and 18% vs. 4% for unmarried males) (**Appendix A: Tables 7.2A, 7.2B, 7.2C**).

Figure 7.2. Percentage of adolescents ages 15-19 who are stunted, by age

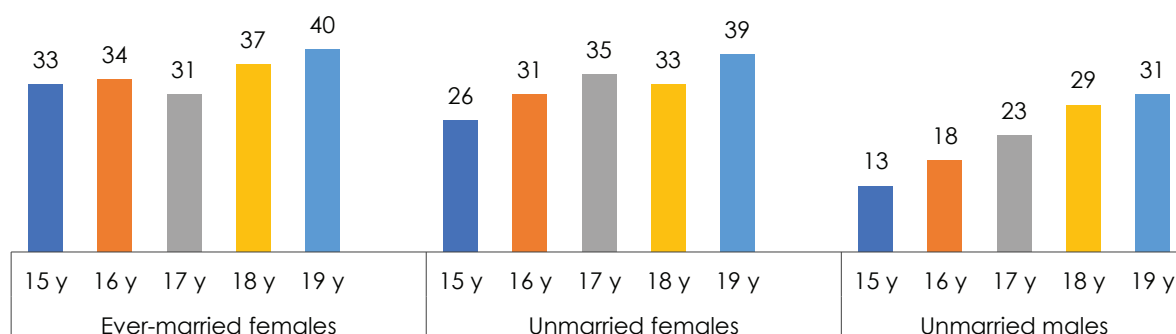
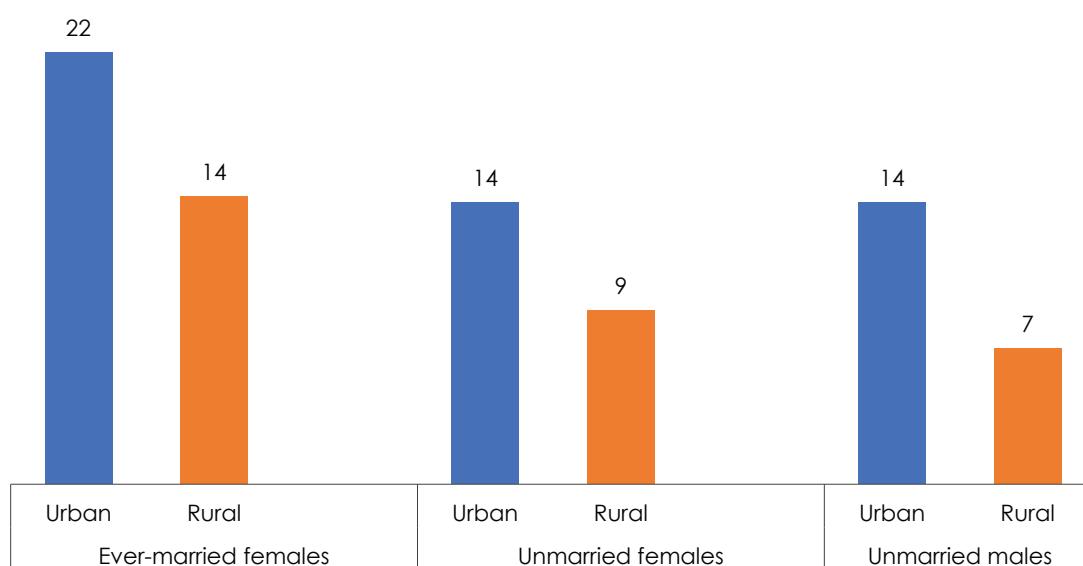


Figure 7.3. Percentage of adolescents ages 15-19 who are overweight or obese, by residence



7.2. Dietary Diversity

The information collected on food consumption is useful in assessing the extent to which adolescents are consuming a diverse diet, including food groups rich in two key micronutrients—iron and vitamin A. Iron plays an important role in numerous biological systems and iron deficiency is one of the primary causes of anemia, which can lead to impaired immune system and endocrine function. Vitamin A also supports the immune system and cell differentiation, and vitamin A deficiency is the leading cause of blindness worldwide (Bailey, West, & Black, 2015).

Adequate dietary diversity:¹ In the last 24 hours, consumed foods from at least four food groups: a) milk, cheese or yogurt, or other milk products; b) foods made from grains, roots, and tubers; c) vitamin A-rich fruits and vegetables; d) other fruits and vegetables; e) eggs; f) meat, poultry, fish, and shellfish (and organ meats); g) legumes and nuts; and h) green leafy vegetables.

Vitamin A-enriched food:² In the last 24 hours, consumed vitamin A-rich dark green leafy vegetables, vitamin A-rich yellow/orange/red vegetables, and milk/yogurt.

Iron-enriched food: In the last 24 hours, consumed grains, nuts/seeds, and vitamin C-rich vegetables.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

¹ Guidelines for Measuring Household and Individual Dietary Diversity. Prepared by Gina Kennedy, Terri Ballard, and Marie Claude Dop. Nutrition and Consumer Protection Division, Food and Agriculture Organization of the United Nations. FAO 2010. Available at: <http://www.fao.org/3/a-i1983e.pdf>

² Dietary Diversity as a Measure of the Micronutrient Adequacy of Women's Diets. FANTA Project. Available at: https://www.fantaproject.org/sites/default/files/resources/WDDP_Mali_Dec09.pdf

Table 7.3 shows that more than two-thirds of female adolescents (76% of unmarried and 78% of married females) had adequate dietary diversity. The proportion was much higher for unmarried adolescent males (85%).

Twenty-two percent of ever-married and 24% of unmarried females had consumed vitamin A-rich foods in the 24 hours preceding the survey. The proportion was slightly higher (29%) among the unmarried males.

Seventy percent of ever-married female adolescents, and 73% of unmarried female adolescents, had consumed iron-rich food in the 24 hours preceding the survey. The proportion was higher (78%) among unmarried male adolescents (Table 7.3).

Table 7.3. Dietary diversity among adolescents

Percentage of ever-married female, unmarried female, and unmarried male adolescents, ages 15-19, by consumption of food that is adequately diverse, iron-rich, and vitamin A-rich, Bangladesh, 2019-20.

Adolescents	Poor dietary diversity < 4 food groups	Adequate dietary diversity ≥ 4 food groups	Vitamin A-rich food	Iron-rich food	Number of adolescents
Ever-married females	24.0	76.0	22.0	70.1	2,439
Unmarried females	22.0	78.0	24.1	72.7	3,943
Unmarried males	15.4	84.6	29.2	77.9	2,738

Note: Food groups are: a) milk, cheese or yogurt, or other milk products; b) foods made from grains, roots, and tubers; c) vitamin A-rich fruits and vegetables; d) other fruits and vegetables; e) eggs; f) meat, poultry, fish, and shellfish (and organ meats); g) legumes and nuts; and h) green leafy vegetables.

Patterns by Background Characteristics

- Adolescents from the highest wealth quintile were more likely to have dietary diversity, and to have consumed more vitamin A- and iron-rich foods, compared to their counterparts from the lowest wealth quintile (Appendix A: Tables 7.3A, 7.3B, 7.3C).

7.3. Consumption of Iron-Folic Supplementation

Twelve percent of ever-married female adolescents had received folic acid supplementation in the seven days preceding the survey. The proportion was quite low among unmarried adolescents (3% for females and 1% for males) (Table 7.4).

Table 7.4. Folic acid supplementation

Percentage of ever-married female, unmarried female, and unmarried male adolescents, ages 15-19, who received folic acid supplementation in the last seven days, Bangladesh, 2019-20.

Adolescents	Received iron folic acid in the last 7 days	Number of adolescents
Ever-married females	11.7	2,439
Unmarried females	3.3	3,943
Unmarried males	0.6	2,738

Key Findings

- **Health care utilization:** Sixty-two percent of ever-married female, one-half (50%) of unmarried female, and 57% of unmarried male adolescents sought care from health facilities, pharmacies, or other providers within the six months preceding the survey.
- **Source of health care:** Private providers were the most widely used health care providers by adolescents. Over two-thirds of females who sought health care went to a private health provider. This proportion was higher for males—three-fourths received health care from a private facility, pharmacy, and/or other private provider for their last visit. Unmarried males and females who sought health care were most likely to use pharmacies (46% and 21%, respectively).

In contrast, 29% of ever-married females, 32% of unmarried females, and 21% of unmarried males visited government health facilities for their last visit. Upazila health complex was the most used government facility by adolescents (used by 11% of ever-married females, 9% of unmarried females, and 8% of unmarried males).

- **Type of health services received:** Adolescents most often received services for general illnesses during the most recent time they sought health care services (41% of ever-married female, 57% of unmarried female, and 71% of unmarried male adolescents). Additionally, during their most recent health care visit, one-quarter of ever-married females received maternal health services, 11% of unmarried females received services for tetanus or other vaccinations, and 7% of unmarried males received services for an injury or accident.

Program and Policy Implications

The Government of Bangladesh has identified adolescents as a priority target group in its current Strategic Plan for Health, Population and Nutrition Sector Development Program 2017-2022. The Ministry of Health and Family Welfare has developed the National Strategy for Adolescent Health 2017-2030 and a multisectoral national, costed plan of action focusing on four strategic directions with two crosscutting issues (health system strengthening and social and behavior change communication), along with a costed action plan. The Directorate General of Family Planning and Directorate General of Health Services are providing health care services to adolescents through establishing adolescent-friendly health services (AFHSs) at some existing public health facilities, namely district hospitals, maternal and child welfare centres (MCWCs), upazila health complexes, and upazila health and family welfare centres. According to the national action plan, AFHSs will be established in each MCWC and upazila (with at least two centers in each upazila).

In addition to these current efforts, adolescents' use of health services should be further supported and increased through:

- Identifying the reasons for adolescents' low use of government health facilities and creating a mechanism through which adolescents can provide feedback on service provision.
- Conducting large-scale, context-specific implementation research to identify ways to improve the use of health services by adolescents, including mHealth approaches.
- Prioritizing key actions from the national plan of action and implementing them to strengthen health services to meet the special health needs of adolescents.
- Renovating old, and establishing new, school health clinics and connecting them with referral facilities.

While adolescence is considered a generally healthy period in the life-course, female and male adolescents still have health care needs. These include information and services related to sexual and reproductive health, food and nutrition, immunization, mental health, accidental and self-inflicted injuries, and general health problems.

In this chapter, information is presented on the patterns of utilization of health services by three adolescent groups—ever married female, unmarried female, and unmarried male adolescents. Specifically, information is presented on adolescents’ use of services in the six months prior to the survey, the type of health facilities they last visited, and the type of services they received.

8.1. Health Care-Seeking Behavior in the Last Six Months

Health care-seeking behavior: Seeking health care in the form of services and/or information from health facilities, pharmacies, or providers in other settings in the six months preceding the survey.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

About 62% of ever-married female adolescents sought care from health facilities, pharmacies, and/or providers in the six months preceding the survey. Health care-seeking was slightly lower among unmarried males (57%), and was the lowest among unmarried female adolescents (50%) (**Figure 8.1**). Almost all adolescents who sought health care went to health providers for services; a negligible proportion (0.5% - 2%) went for information only (**Figure 8.2**).

Figure 8.1. Percentage of adolescents ages 15-19 seeking health care in the six months preceding the survey

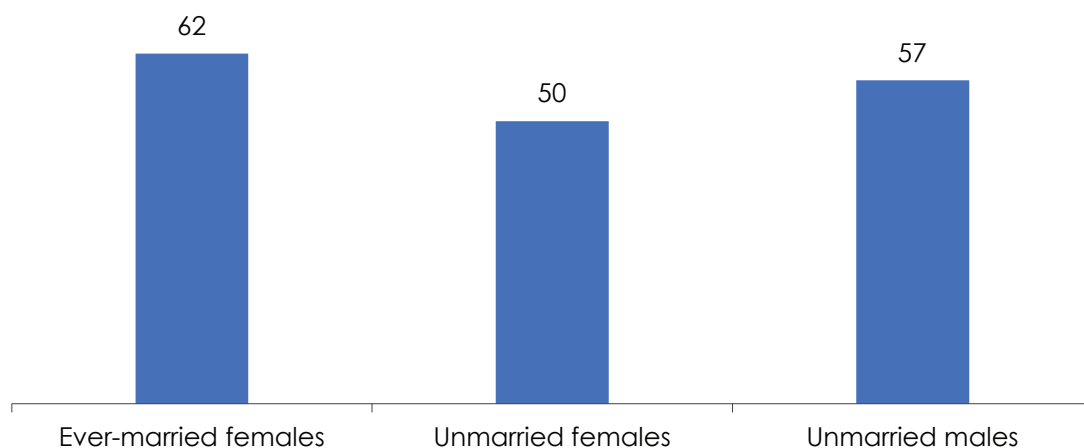
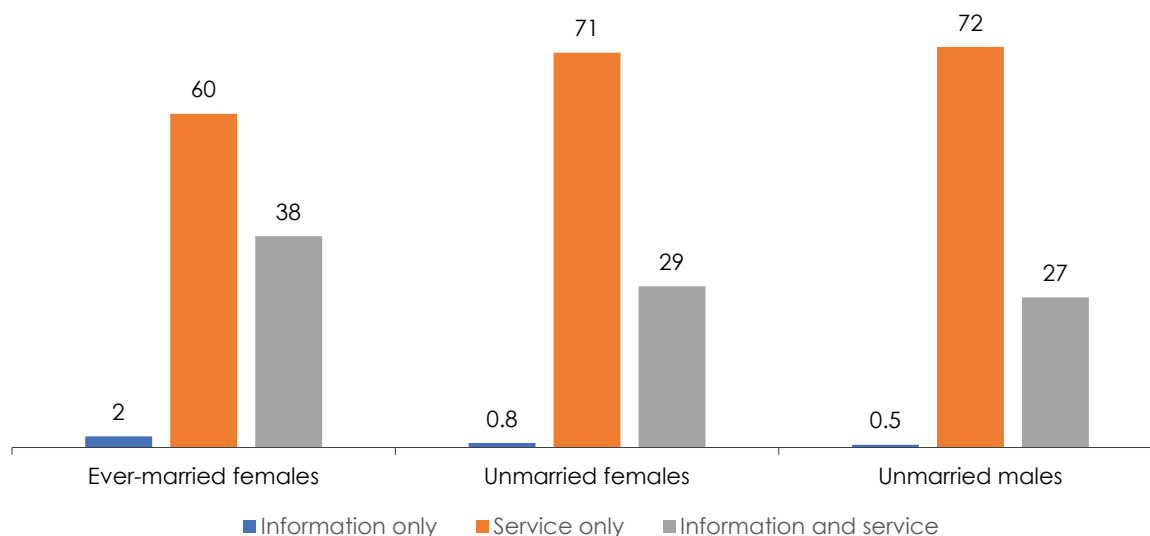


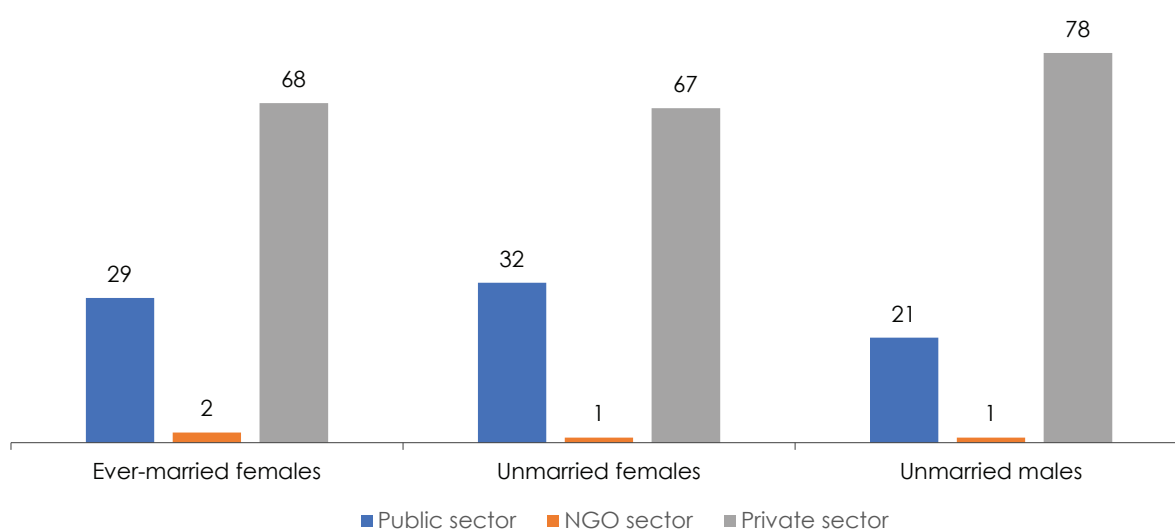
Figure 8.2. Percentage of adolescents ages 15-19 seeking health care in the six months preceding the survey, by type of care



8.2. Sources of Health Care

Adolescents sought care from a range of facilities and providers, including government health facilities, NGO facilities, and private health facilities such as pharmacies and formal and informal providers. For all adolescent types, the private sector was the most widely used source of health care. As shown in Figure 8.3, 68% of ever-married females, 67% of unmarried females, and 78% of unmarried males visited a private sector provider during their last visit in the six months preceding the survey. In contrast, 29% of ever-married females, 32% of unmarried females, and 21% of unmarried males visited a public sector facility for their last visit. Use of NGO facilities was negligible (1-2%).

Figure 8.3. Percentage of adolescents ages 15-19 seeking health services in the six months preceding the survey, by sources of health care



Within the private sector, private clinics, hospitals and/or medical colleges, qualified doctor's chambers, and pharmacies were the primary places where adolescents visited; however, there were variations in the types of places visited by three groups of adolescents. About one-quarter (23%) of the ever-married females visited a private clinic, hospital and/or medical college, followed by pharmacy (18%). Private doctor's chamber was visited by 15% of ever-married females. For the unmarried adolescents—both females and males—pharmacy was the primary place they visited for health care (21% by female and 46% by male adolescents), followed by qualified doctor's chamber (15% for females and 11% for males) and private hospital/clinic/medical college (14% for females and 9% for males). About eight to ten percent of adolescents (from all three groups) visited unqualified providers (**Table 8.1**).

Table 8.1. Source of health care

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who sought health care in the six months preceding the survey by the most recent source of health care, Bangladesh 2019-20.

Type of health care visited for last visit	Ever-married females	Unmarried females	Unmarried males
Government sector	29.4	32.0	21.2
Public medical college/specialized hospital	2.2	4.6	3.4
District hospital	4.1	4.8	6.0
Maternal and child welfare center (MCWC)	1.3	0.4	0.1
Upazila health complex (UHC)	10.9	8.8	8.0
Union Health & Family Welfare Centre/ Rural dispensary/union sub-centre	3.1	2.3	1.0
School health clinic	0.0	0.1	0.0
Satellite clinic/EPI outreach site	2.5	4.9	0.1
Other government facility	5.3	6.1	2.6
NGO sector	2.4	1.3	0.6
Static clinic	1.8	0.9	0.6
Satellite clinic	0.4	0.3	-
Depot holder	0.1	0.0	-
Other	0.1	0.1	0.0
Private sector	68.1	66.7	78.2
Private hospital/clinic/medical college	22.8	14.3	9.1
Qualified doctor's chamber	15.3	15.0	11.2
Non-qualified doctor's chamber	8.2	9.7	8.4
Pharmacy/drugstore	17.6	21.1	46.2
Homeopath/Herbal/Unani	3.7	6.0	3.0
Other	0.5	0.6	0.3
Total	100.0	100.0	100.0
Number who sought care	3,035	3,878	3,144

8.3. Types of Health Services Received

Adolescents were asked about the types of services they had received during their last visit in the six months preceding the survey. The types of services received varied by sex and marital status (**Table 8.2**). Ever-married female adolescents received services for general illnesses (41%), maternal health services (25%), weakness (10%), and menstrual problems (7%). Unmarried females received services for general health problems (57%), tetanus and other vaccinations (11%), allergy/rash/itching (9%), weakness (8%), and menstrual problems (7%). Most male adolescents received services for general illnesses (71%), followed by injury/accident (7%), and allergy/rash/itching (7%).

Table 8.2. Types of health care received

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who sought health care (service and/or information) in the six months preceding the survey by type of health care received at the last visit, Bangladesh 2019-20.

Health care (service and/or information) received for:	Ever-married females	Unmarried females	Unmarried males
Menstrual problem	7.2	7.4	-
Anemia	1.5	0.9	0.1
White vaginal discharge	1.8	2.5	-
Nutrition/undernutrition	1.0	1.0	0.7
Burning sensation during urination	2.6	0.8	0.5
General illness	41.2	57.3	70.9
Weakness	9.7	8.1	5.0
Allergy/rash/itching	3.3	9.1	7.2
Injury/accident	0.7	1.0	7.4
Tetanus or other vaccination	3.7	11.1	0.3
Diarrheal disease	0.3	0.5	0.9
Peptic ulcer disease	2.4	3.0	3.4
Family planning	5.8	0.0	0.0
Antenatal/postnatal care	24.8	-	-
Other	12.2	15.7	13.6
Number of adolescents who sought care	3,035	3,878	3,144

Key Findings

Adolescents' perceptions about gender norms were as follows:

- **Family composition:** Half of ever-married females (47%) and unmarried males (52%) believed that a family is not complete until it has at least one son. Among unmarried females the proportion was lower (29%).
- **Higher education for girls:** More than one-third (39%) of ever-married females and 23% of unmarried females thought it important that sons have more education than daughters. For unmarried males, the proportion was higher (65%).
- **Women working outside of the home:** One-third of ever-married females and one-fifth of unmarried females believed that women should not be allowed to work outside of the home. For unmarried males, half agreed with the statement.
- **Outdoor games for girls:** Around 29% of ever-married females and 16% of unmarried females thought outdoor games are only for boys and not for girls. For unmarried males, the proportion was much higher (45%).
- **Household chores:** More than 40% of ever-married females and 25% of unmarried females believed household chores are for women only, not for men, even if the woman works outside the house; 35% of unmarried males agreed with this statement.
- **Taking care of households and kids:** Twenty-four percent of ever-married females and 13% of unmarried females perceived that looking after the household and kids is the responsibility of women only. For unmarried males, the proportion the proportion was 18%.
- **Listening to husbands:** Almost two-thirds of ever-married females and unmarried males believed that a woman should always listen to her husband even if she disagrees. For unmarried females, the proportion was lower (47%).
- **Husband's right to beat:** Over one-third (34%) of ever-married females and one-fifth (18%) of unmarried females perceived that the husband has the right to beat his wife when she does not listen to him. Almost one-fourth (24%) of unmarried males agreed with this statement.

Program and Policy Implications

Addressing perceptions on gender norms: The survey revealed the widespread perception of adolescents in Bangladesh that directly oppose having a gender-equitable society. The first step toward a gender-equitable nation is to develop evidence-based practical programs and strategies to address gender norms in a systematic manner. Interventions on gender-integrated early childhood development and positive parenting might be beneficial to help break the intergenerational transmission of negative gender norms. Introduction of a gender-responsive education curriculum would also be useful.

Empowering women and girls: Female empowerment can be achieved through supporting higher education for girls and creating job opportunities for them. Safe workplaces with equal payment and better work-life balance will also empower women and girls.

Engaging men and boys: Promotion of mutually empowering relationships between girls and boys in all areas of life is the cornerstone of achieving a gender-equitable society. Policies and programs such as joint parenting in early childhood development and positive gender socialization, including positive engagement of men and boys, should be taken into consideration.

Mobilizing communities for change: Social mobilization can be a very powerful instrument to accelerate gender equality. This is particularly relevant when addressing gender norms and barriers among grass roots groups, including community-based organizations. The UNICEF Bangladesh Communication for Development (C4D) approach, including social campaigns that address gender norms and barriers, could be an effective way to develop a gender-sensitive society.

Addressing gender issues at the structural level: Gender issues must be integrated at the structural levels, including the political, legal, and policy levels. It is important to invest in developing gender-responsive sectoral frameworks in line with global normative standards and documented best practices, as well as generating advocacy materials, including policy briefs, to support these efforts.

Gender norms are a subcategory of social norms that specifically describe various aspects of gender differences (United Nations Children’s Fund, 2020) and define roles and actions considered acceptable and appropriate for women and men in a particular society (Cislaghi, & Heisi, 2020). Usually, these norms are subconscious but widely held beliefs that are deeply rooted within the family and society at large. Often, these norms define the power relations, social standards, and expectations that govern human practices in a particular social context (United Nations Women Training Centre, n.d.).

In many societies and cultures, gender norms enforce a power dynamic that typically favors masculinity over femininity. This often reinforces a systemic disparity that undermines women’s rights and limits opportunities for women and gender minorities to express their authentic selves (Heisi, et al., 2019). Like all social customs, sustained efforts are needed to alter harmful gender norms, as they are largely invisible and often reflected as “normal” and embedded within the culture and beliefs (Muñoz Boudet, Petesch, and Turk, & Thumala, 2013).

Understanding gender norms is imperative so policymakers and program managers can formulate appropriate interventions and assess the impact of current strategies to ensure gender equity.

In the BAHWS 2019-20, eight statements were included to assess perceptions of ever-married female, unmarried female, and unmarried male adolescents about different aspects of gender norms. These statements were read aloud to the respondents and they were asked whether they “agree” or “do not agree.” An option to code the response “do not know” was also available. The statements were written in such a way that answering “agree” indicated agreement with gender-inequitable norms, while an answer of “do not agree” reflected disagreement with gender inequitable norms.

These statements are grouped under four main categories—each with two statements. The first category is male preference, which addresses two statements that indicate preference of males over females. The second group is mobility. It includes two statements that support gender-based mobility restrictions. The third group is household responsibilities. The two statements under this category indicate the stereotyping of roles and responsibilities based on gender. The last two statements concern spousal power dynamics. The statements associated with this category reflect a husband’s authority over his wife.

Statements about views on gender norms:

Male preference

“A family is not complete unless they have at least one son.”
“It is important that sons have more education than daughters.”

Mobility

“Outdoor sports are only for boys not for girls.”
“Women should not be allowed to work outside of home.”

Household responsibilities

“Household chores are for women only, not for men, even if the woman works outside the house.”
“Looking after the household and kids is the responsibility of women only.”

Spousal power dynamics

“A woman should always listen to her husband even if she disagrees.”
“A husband has the right to physically assault or beat his wife if she does not listen to him.”

9.1. Preference for Males: Perceptions about Importance of Having a Son in the Family and Higher Education for Boys Over Girls

Like many societies, in Bangladesh having a male child is preferred over a female child because of the norm that boys carry the bloodline forward and take care of parents in their old age. In the survey, almost half of the ever-married females (47%) expressed the conservative, less gender-equitable view that “*a family is not complete until they have at least one son.*” A similar conservative view was expressed by unmarried males, as over half (52%) agreed with the statement. The same view was less prevalent among unmarried females (29%), where the majority did not agree with the statement; suggesting they held liberal, more gender-equitable views (**Table 9.1**).

Access to education is an important indicator to ensure gender equality. Although Bangladesh has made remarkable progress in achieving gender parity in primary and secondary education, enrollment of girls in post-secondary education is very low. This may be partly explained by the notion that Bangladeshi society still values higher education for boys more than girls, as reflected by the responses given by unmarried males—65% of them agreed with the statement “*It is important that sons have more education than daughters.*” However, most of the girls—whether married or not—opposed the view; 39% of ever-married and 23% of unmarried female adolescents agreed with the statement.

Table 9.1. Perception about gender norms

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who agreed on the following gender norms statements, Bangladesh 2019-20.

	A family is not complete until they have at least one son	It is important that sons have more education than daughters	Women should not be allowed to work outside of home	Outdoor games are only for boys not for girls	Household chores are for women only, not for men, even if the woman works outside the house	Looking after the household and kids is the responsibility of women only	A woman should always listen to her husband even if she disagrees	Husband has the right to beat his wife when she does not obey him	Number of adolescents
Ever-married females	46.8	38.6	33.3	29.1	41.2	23.9	63.0	33.9	4,926
Unmarried females	29.3	22.8	18.6	15.8	25.1	12.9	46.6	18.4	7,800
Unmarried males	52.1	64.7	51.3	45.1	34.7	18.2	64.4	24.2	5,523

9.2. Mobility: Perceptions about Girls Playing Outdoor Games and Women Going Outside the Home for Work

Bangladeshi society is patriarchal, and women's roles are heavily defined by social, cultural, and religious norms. Society in the country is conservative and women are expected to cover their bodies in public. Because of stereotypical attitudes and values, participation in sports—especially outdoor sports—is mostly limited to boys. The survey results revealed the societally conservative, less gender-equitable attitudes towards girls' participation in outdoor sports. Even the younger generation, especially male adolescents, expressed less gender-equitable attitudes. Forty-five percent of unmarried male adolescents and 29% of ever-married female adolescents agreed with the statement “*Outdoor games are only for boys not for girls.*” In contrast, only 16% of unmarried female adolescents agreed with the statement, indicating their more liberal views about girls playing outdoor games.

In Bangladesh, traditionally women's mobility is somewhat restricted. However, over the last two decades there has been remarkable social change; women's mobility has increased outside the home and their contribution to the economic sector has increased. Yet, the survey found adolescent males had less gender-equitable views about women working outside of home, as half of unmarried males agreed with the statement “*Women should not be allowed to work outside of home.*” One-third of ever-married female adolescents (33%) also agreed with the statement. On the contrary, only 19% of unmarried female adolescents agreed with the statement and the majority held a supporting view of women working outside of their homes (Table 9.1).

9.3. Household Responsibilities: Perceptions about Women's Role in Household Chores, and Taking Care of Households and Children

In Bangladeshi society, men are the bread earners and women are responsible for doing household chores and taking care of the family and children, even if they work outside the home. Considering this, there was an interesting pattern in responses to the statement “*Household chores are for women only, not for men, even if the woman works outside the house.*” Unmarried adolescent males seemed to have supportive attitudes towards helping women in household chores, as only 35% agreed with the statement. Forty-one percent of ever-married female and 25% of unmarried female adolescents agreed with the statement. There was a similarly liberal, or gender-equitable, view in response to the statement “*Looking after the household and kids is the responsibility of women only.*” Only 24% of ever-married female, 13% of unmarried female, and 18% of unmarried male adolescents agreed with the statement (Table 9.1).

9.4. Spousal Power Dynamics: Perceptions about Women Listening to Their Husbands and Husbands' Rights

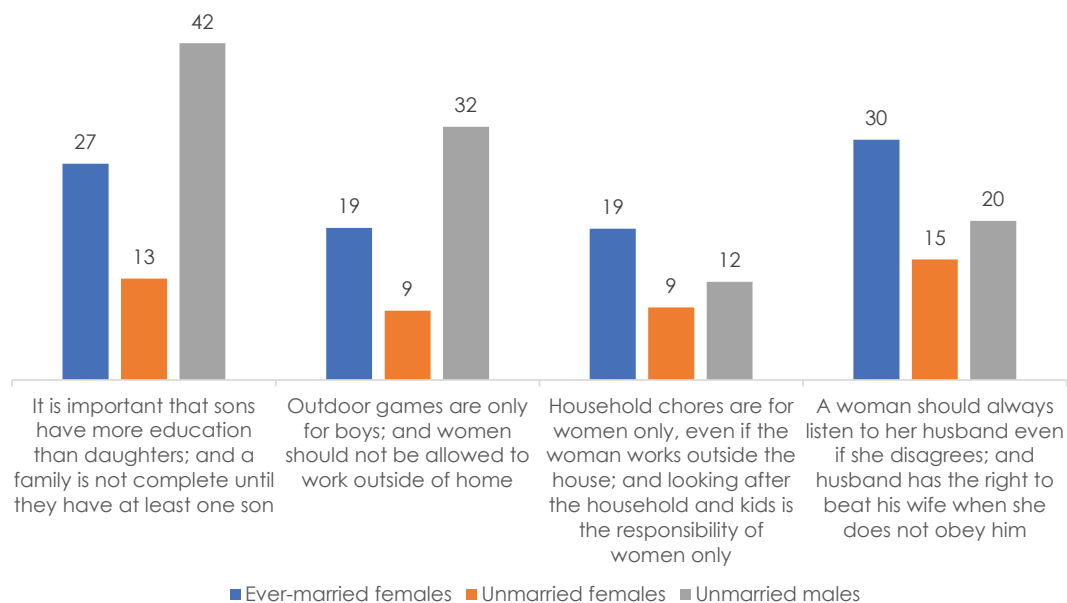
Because of social norms and cultural practices, Bangladeshi women are often in a subordinate position from the day they are born. Persistent gender norms favoring males further result in submissiveness of females. In the survey, there were two statements to explore adolescents' views about existing cultural norms of the “superiority” of men over women and their “authority” over women in cases where women deny their authority. Over 60% of ever-married female and unmarried male adolescents agreed with the statement “*A woman should listen to her husband even if she disagrees.*” Nearly half of the unmarried female adolescents (47%) also agreed to the statement. However, adolescents were less supportive of the statement about husbands' authority to physically hurt their wives. One-third (34%) of ever-married female adolescents supported the statement, “*Husband has the right to beat his wife when she does not obey him,*” while only 18% of unmarried female adolescents agreed to this statement. One-fourth (24%) of unmarried male adolescents agreed with the statement (Table 9.1).

9.5. Composite Index on Gender Norms

When perceptions about various gender norms were further analyzed, some interesting patterns emerged. Among the three groups of adolescents, unmarried males were most likely to agree with the two statements that supported preference for having and educating male children. Similarly, male adolescents were also most likely to support limiting women's mobility outside the home. Unmarried female adolescents held the most gender-equitable views among the three groups (Figure 9.1).

On the other hand, married female adolescents were most likely to agree with the statements that doing household chores and taking care of the family and children are women’s responsibilities. Similarly, the statements supporting women’s submissive status to men were agreed to by higher percentages of married female adolescents compared to the other two groups. Again, unmarried female adolescent expressed the most gender-equitable views among the three groups.

Figure 9.1. Percent of adolescents ages 15-19 who agreed with statements about gender-inequitable gender roles, Bangladesh, 2019-20



Patterns by Background Characteristics

- Adolescents who lived in rural areas, had less education, and were of lower socioeconomic status had more conservative, less gender-equitable, views compared to adolescents who lived in urban areas, had more education, and came from higher socioeconomic conditions. These patterns were similar for all the statements and for all three groups—ever-married female adolescents, unmarried female adolescents, and unmarried male adolescents (**Appendix A: Tables 9.1A, 9.1B, 9.1C**).

Key Findings

Connected with husband:

- Two-thirds of the married females were connected with their husbands by the measure that they enjoy spending time with their husbands always or most of the time. However, a lesser proportion (57%) said they discuss very personal matters with their husbands.

Connected with mother-in-law:

- Almost three-fourths of ever-married female adolescents who live with their mothers-in-law reported feeling pretty close to and/or enjoying spending time with them. A much lesser proportion—about one-third—discussed very personal matters with their mother-in-law.

Connected with mother/father:

- A very high proportion—87%—of unmarried females stated that they enjoy spending time with their mothers always/most of the time; among males this proportion was 65%. Over half of the females discussed very personal matters with their mothers, but only one-fourth of the males did so. Overall, unmarried females appear to be more connected with their mothers than unmarried males.
- Around half of the unmarried adolescents said they enjoy spending time with their fathers. Only a small proportion of unmarried adolescents discussed personal matters with their fathers (13-14%). Overall, the percentage of adolescents who feel connected with their fathers was almost the same for females and males.
- Unmarried adolescents, both males and females, appear to be more connected with their mothers than with their fathers.

Connected with friends:

- Unmarried adolescents were more likely to have trusted friends and discuss personal matters with friends than married females of the same age.

Program and Policy Implications

Identify types of providers with whom adolescents can discuss very private matters:

While most unmarried adolescents felt close to their parents, discussion of very private matters with them was limited. Similarly, while most ever-married female adolescents felt close to their husbands and mothers-in-law, a lower percentage discussed very personal matters with them. Social and cultural contexts may prohibit adolescents from discussing very private matters with parents, husbands, and other close family members. Thus, adolescent-focused health programs should identify types of providers with whom adolescents could develop a relationship with and share very private matters needing attention for improving their health and wellbeing.

Address inequitable gender roles in parenting: Unmarried female and male adolescents felt more connected to their mothers than fathers. Given gender norms and roles in Bangladesh, mothers are likely to provide childcare at home, while fathers are likely to work outside the house. Less time spent with fathers may, in part, explain why a lower proportion of unmarried adolescents felt connected to fathers compared to mothers. Gender norms may also influence how fathers interact with their children when they are home. Interventions on gender-integrated positive parenting for fathers can help influence restrictive gender norms that are barriers to close father-child connectedness.

Establish community-based youth groups for married adolescents: Compared to unmarried adolescents, a substantially lower proportion of married females reported being connected to friends. Given the unique challenges married female adolescents in Bangladesh face, and the fact that social connections promote health and wellbeing, community-based youth groups or clubs for this specific demographic is one way to increase married female adolescents' connections with peers. These groups or clubs can be sources of information and emotional support and provide short periods of respite from household responsibilities.

Social connectedness among adolescents is the emotional attachment and commitment they have in their relationships with family and friends, as well as to broader peer groups, schools, and communities (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2002). Positive social relationships and connectedness promote health and wellbeing and are necessary for the healthy development of adolescents into adulthood (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2002; Lamblin, Murawski, Whittle, & Fornito, 2017). Adolescents' connectedness to parents and family is protective against substance use, early sexual debut, violence, emotional distress, and suicidal behavior (Resnick, et al., 1997). Adolescents' connectedness to peers is associated with positive attitudes towards school, and is protective against problem behaviors (e.g., substance use, violence, and delinquent behaviors); negative peer influences around substance use, aggression, and antisocial behaviors; and risky sexual behaviors (Miller, Notario, & Zimmerman, 2002).

In the BAHWS 2019-20, all adolescent respondents were eligible for the questions on connectedness with family and friends. In this survey, connectedness with mothers and fathers (among unmarried female and male adolescents), and husbands and mothers-in-law (among currently married and ever-married females, respectively) was measured using questions asking whether adolescents enjoyed spending time with the person, talked about very personal things with the person, and/or felt close to the person. All questions were asked on a Likert scale (never, sometimes, most of the time, or always). In this report, respondents who replied "most of the time" or "always" are considered connected with the family member they were asked about.

Connectedness with friends was measured by asking whether adolescents perceived that they have close and trusted friends, think spending time with friends is important, and talk openly with friends about very personal things. All questions were asked on a Likert scale (never, sometimes, most of the time, or always). In this report, respondents who replied "most of the time" or "always" are considered connected with their friends.

Connected with mother/father: Adolescents who reported enjoying spending time with mother/father, talking with mother/father about very personal things, and/or feeling close to mother/father always or most of the time.

Sample: Unmarried female and unmarried male adolescents ages 15-19 years.

Connected with husband: Adolescents who reported enjoying spending time with husband, talking with husband about very personal things, and/or feeling close to husband always or most of the time.

Sample: Currently married female adolescents ages 15-19 years.

Connected with mother-in-law: Adolescents reported enjoying spending time with mother-in-law, talking with mother-in-law about very personal things, and/or feeling close to mother-in-law always or most of the time.

Sample: Ever-married female adolescents ages 15-19 years who live with mother-in-law in the same household.

Connected with friends: Adolescents who reported having close and trusted friends, talking openly with friends about very personal things, and/or thinking spending time with friends is important always or most of the time.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

10.1. Connectedness with Husband and Mother-In-Law: Married Female Adolescents

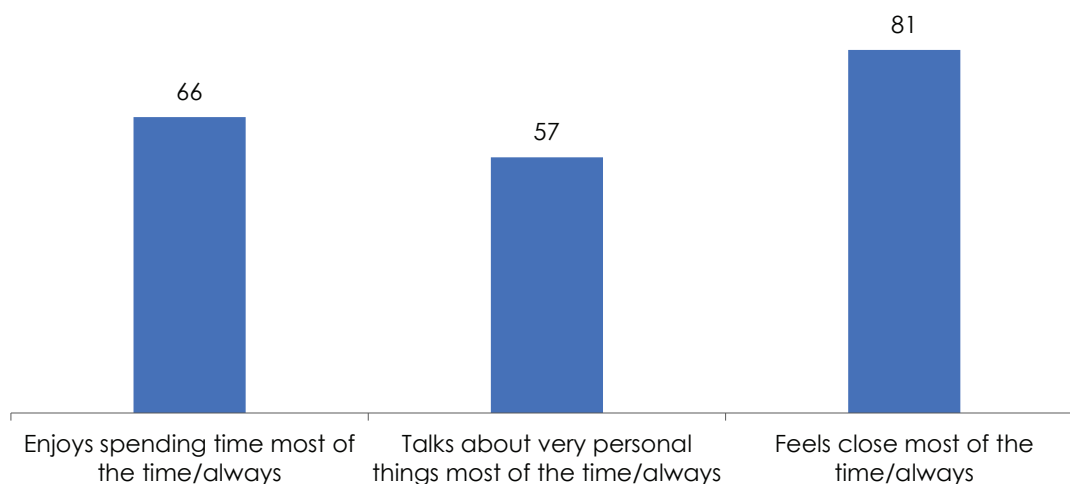
Most currently married females (81%) reported feeling close to their husbands always or most of the time. Two-thirds enjoyed spending time with their husbands, and a little over half discussed very personal matters with their husbands (Table 10.1 and Figure 10.1).

Table 10.1. Connectedness with husband among currently married female adolescents

Percent distribution of currently married female adolescents ages 15-19 by their reported level of connectedness with their husband on selected issues, Bangladesh, 2019-20.

Selected issues	Level of connectedness				Total	Number of currently married female adolescents
	Never	Sometimes	Most of the time	Always		
	Not connected		Connected			
Enjoys spending time with husband	0.3	33.3	15.1	51.2	100.0	4,799
Feels close to husband	0.2	19.2	15.8	64.8	100.0	4,799
Talks with husband about very personal things	3.0	40.1	14.1	42.8	100.0	4,799

Figure 10.1. Percentage of currently married female adolescents ages 15-19 connected with husbands



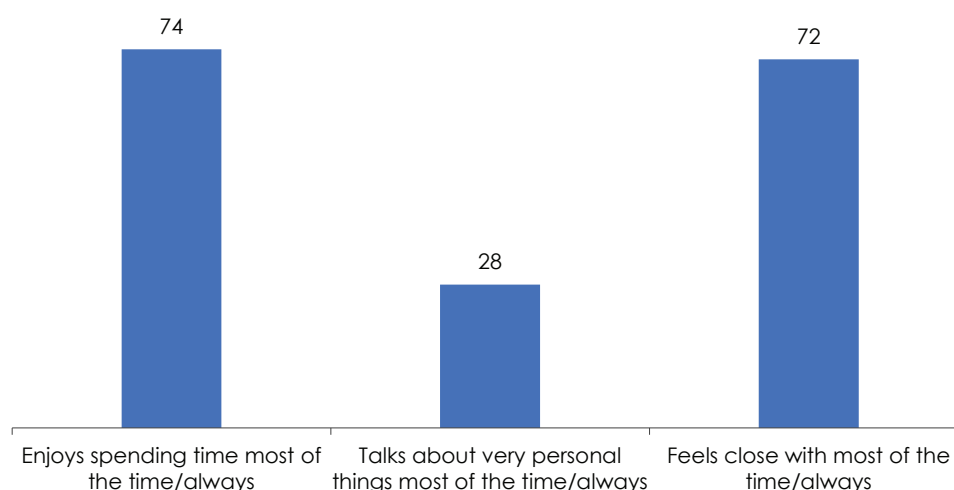
Almost three-fourths of ever-married female adolescents who lived with their mothers-in-law reported enjoying spending time with and/or feeling close to them. One-in-five adolescents stated that they never talked about very personal matters with their mothers-in-law. About three-out-of-ten ever-married adolescents reported discussing very personal matters with their mothers-in-law most of the time or always (Table 10.2 and Figure 10.2).

Table 10.2. Connectedness with mothers-in-law among ever-married female adolescents

Percent distribution of ever-married female adolescents ages 15-19 who live with their mother-in-law (MIL) by their reported level of connectedness with MIL on selected issues, Bangladesh, 2019-20.

Selected issues	Level of connectedness				Total	Number of adolescents living with mother-in-law
	Never	Sometimes	Most of the time	Always		
	Not connected	Connected				
Enjoys spending time with mother-in-law	0.9	25.7	16.4	57.1	100.0	3,291
Talks with mother-in-law about personal things	20.8	51.3	6.4	21.5	100.0	3,291
Feels close to mother-in-law	1.5	26.3	15.9	56.3	100.0	3,291

Figure 10.2. Percentage of ever-married female adolescents ages 15-19 living with their mothers-in-law and connected with them



10.2. Connectedness with Parents among Unmarried Adolescents

A large proportion of unmarried adolescents reported feeling connected to their mothers, with more unmarried females than males reporting feeling connected. About 93% of unmarried females and 80% of unmarried males felt close to their mothers. Eighty-seven percent of unmarried females enjoyed spending time with their mothers, and over half of them talked about very personal matters with their mothers. Comparatively fewer unmarried males (21%) talked about very personal matters with their mothers (Table 10.3 and Figure 10.3).

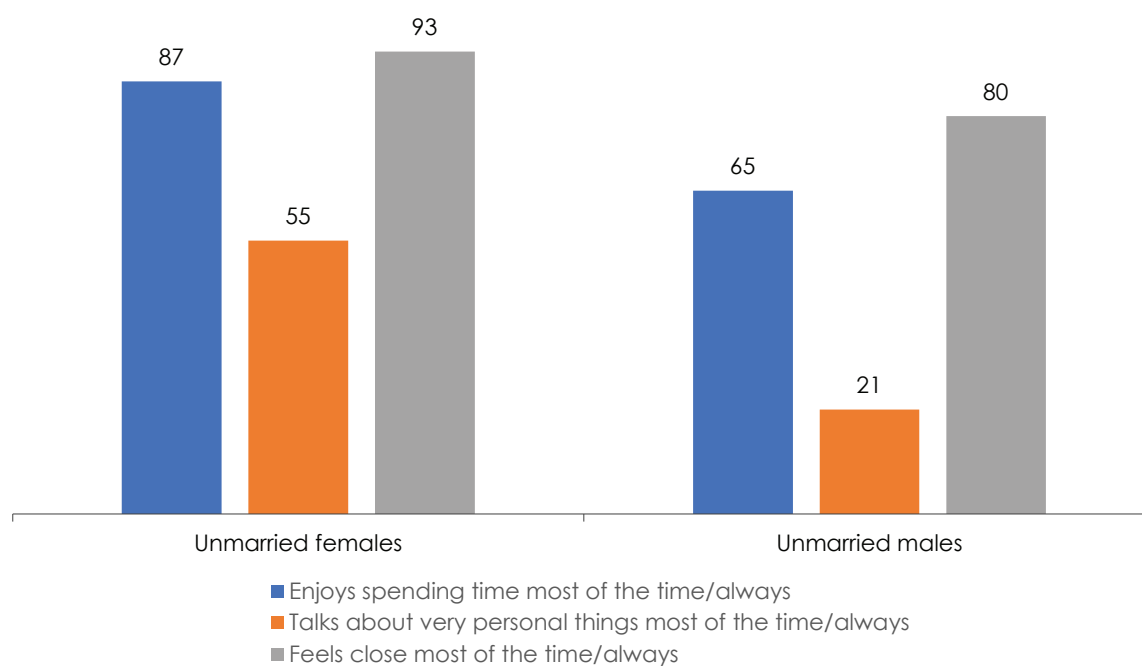
Table 10.3. Connectedness with mother among unmarried adolescents

Percent distribution of unmarried female and male adolescents ages 15-19 by their reported level of connectedness with their mother on selected issues, Bangladesh, 2019-20.

Selected issues	Level of connectedness					Missing	Total	Number of adolescents
	Unmarried females							
	Never	Sometimes	Most of the time	Always				
	Not connected		Connected					
Enjoys spending time with mother	0.3	13.1	14.0	72.5	0.2	100.0	7,630	
Feels close to mother	0.2	6.9	13.2	79.4	0.3	100.0	7,630	
Talks with mother about very personal things	6.4	38.5	10.7	44.1	0.3	100.0	7,630	

Selected issues	Level of connectedness					Missing	Total	Number of adolescents
	Unmarried males							
	Never	Sometimes	Most of the time	Always				
	Not connected		Connected					
Enjoys spending time with mother	0.7	34.4	17.7	46.8	0.3	100.0	5,436	
Feels close to mother	0.7	19.0	19.3	60.6	0.4	100.0	5,436	
Talks with mother about very personal things	34.6	44.5	7.1	13.4	0.4	100.0	5,436	

Figure 10.3. Percentage of unmarried female and male adolescents ages 15-19 connected with their mothers



Unmarried adolescents reported feeling connected to their fathers at moderate levels, with 69% of unmarried females and 64% of unmarried males reporting that they felt close to their fathers. Around half of the unmarried adolescents (51%-55%) reported enjoying spending time with their fathers, and a small proportion (13%-14%) of the adolescents talked about very personal matters with their fathers (**Table 10.4** and **Figure 10.4**).

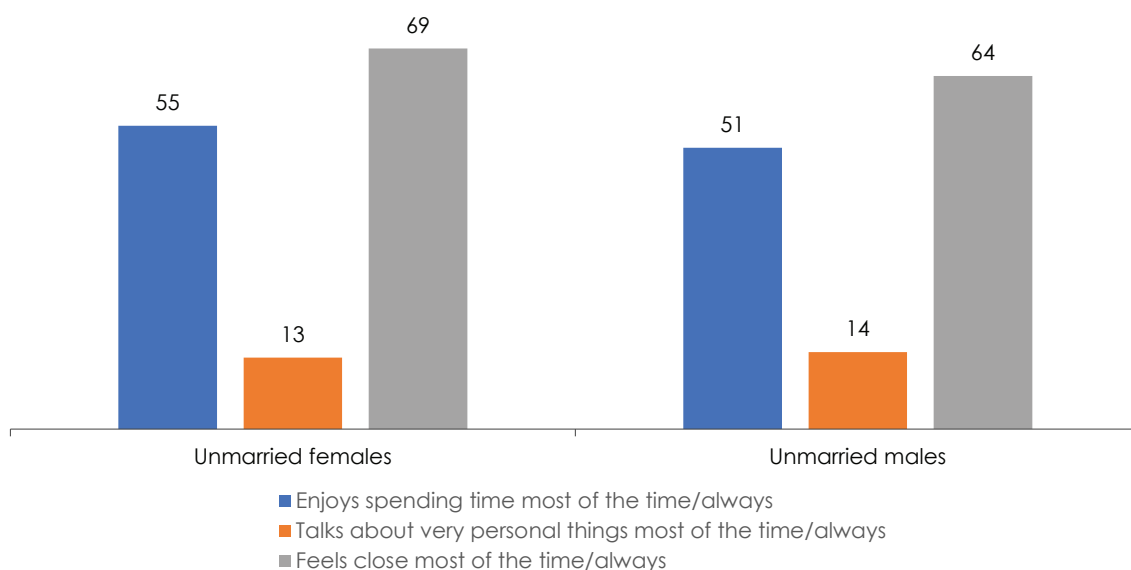
Table 10.4. Connectedness with father among unmarried adolescents

Percentage of unmarried female and male adolescents ages 15-19 by their reported level of connectedness with their father on selected issues, Bangladesh, 2019-20.

Selected issues	Level of connectedness					Total	Number of adolescents
	Unmarried females						
	Never	Sometimes	Most of the time	Always	No communication/missing		
	Not connected		Connected				
Enjoys spending time with father	2.1	41.6	14.8	40.3	1.2	100.0	7,216
Feels close to father	1.6	28.0	15.5	53.8	1.2	100.0	7,216
Talks with father about very personal things	45.5	40.6	4.2	8.6	1.2	100.0	7,216

Selected issues	Level of connectedness					Total	Number of adolescents
	Unmarried males						
	Never	Sometimes	Most of the time	Always	No communication/missing		
	Not connected		Connected				
Enjoys spending time with father	2.6	45.9	17.6	33.1	0.8	100.0	5,160
Feels close to father	2.0	33.7	16.5	47.0	0.8	100.0	5,160
Talks with father about very personal things	47.7	37.4	4.5	9.6	0.8	100.0	5,160

Figure 10.4. Percentage of unmarried female and male adolescents ages 15-19 connected with their fathers



10.3. Connectedness with Friends

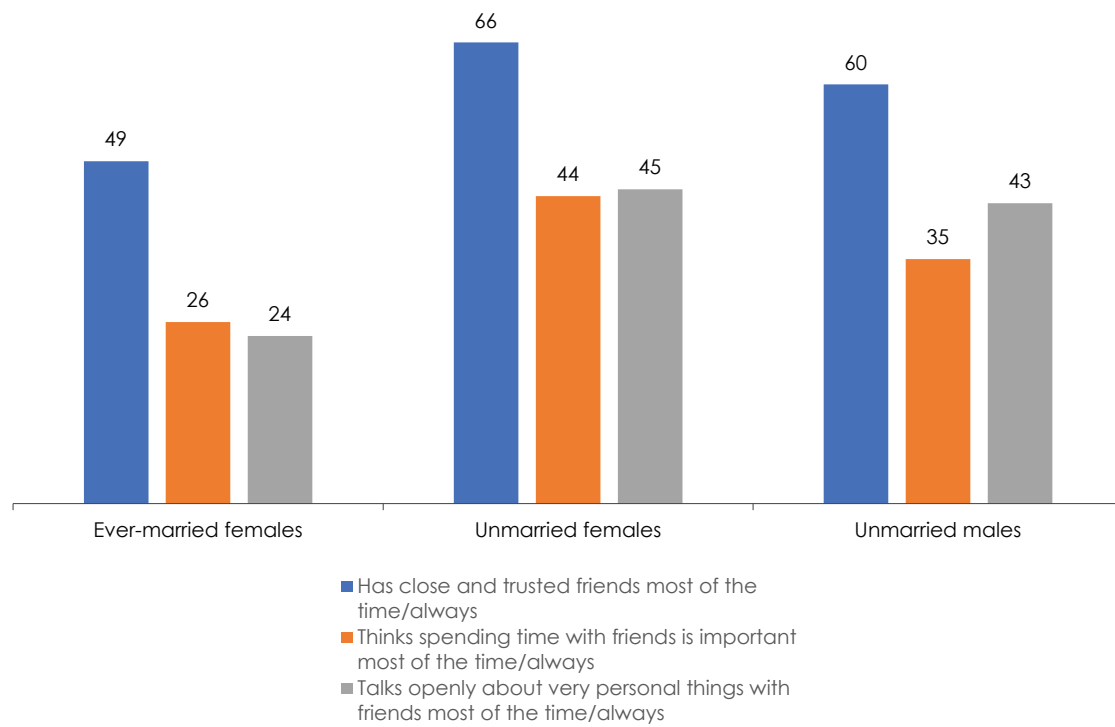
Unmarried adolescents also reported feeling moderately connected to their friends, with 66% of unmarried females and 60% of unmarried males reporting that they had close and trusted friends, and 45% and 43% of unmarried females and males, respectively, reporting that they talked openly with their friends about very personal matters. In contrast, among ever-married females, 49% said they had close and trusted friends and 24% talked with their friends openly about very personal matters (Table 10.5 and Figure 10.5).

Table 10.5. Connectedness with friends

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by their reported level of connectedness with friends on selected issues, Bangladesh, 2019-20.

Selected issues	Level of connectedness					Total	Number of adolescents
	Ever-married females						
	Never Not connected	Sometimes	Most of the time Connected	Always	No friends/ missing		
Has close and trusted friends	4.2	37.3	11.0	37.6	9.8	100.0	4,926
Thinks spending time with friends is important	6.0	58.7	9.0	16.5	9.8	100.0	4,926
Talks openly with friends about very personal things	9.2	56.9	7.3	16.7	9.9	100.0	4,926
Selected issues	Level of connectedness					Total	Number of adolescents
	Unmarried females						
	Never Not connected	Sometimes	Most of the time Connected	Always	No friends/ missing		
Has close and trusted friends	3.5	28.4	15.6	50.3	2.2	100.0	7,800
Thinks spending time with friends is important	3.2	50.4	16.3	27.9	2.2	100.0	7,800
Talks openly with friends about very personal things	7.2	45.3	13.2	32.0	2.3	100.0	7,800
Selected issues	Level of connectedness					Total	Number of adolescents
	Unmarried males						
	Never Not connected	Sometimes	Most of the time Connected	Always	No friends/ missing		
Has close and trusted friends	4.6	34.5	16.1	43.8	0.9	100.0	5,523
Thinks spending time with friends is important	8.6	55.5	16.4	18.5	0.9	100.0	5,523
Talks openly with friends about very personal things	9.5	47.0	14.3	28.2	1.0	100.0	5,523

Figure 10.5. Percentage of adolescents ages 15-19 connected with friends



Key Findings

Physical violence:

- About one-fifth of ever-married and unmarried female adolescents and one-quarter of unmarried male adolescents reported experiencing physical violence at least once in the last 12 months.
- Around 4-6% of adolescents reported experiencing any act of physical violence five or more times in the last 12 months.
- The most common act of physical violence reported by all three groups of adolescents was pushing/slapping/hair pulling.
- Ever-married females reported husbands as the main perpetrator (77%), followed by other family members (9%) and in-laws (8%). Unmarried females reported mothers as the main perpetrator (38%), followed by friends/classmates (29%) and siblings (24%). More than half of unmarried males reported friends/classmates as the perpetrator, followed by neighbors (19%) and mothers (16%).

Verbal or social bullying:

- Around one-in-three adolescents reported experiencing verbal or social bullying at least once in the 12 months preceding the survey. Unmarried males were more likely to have experienced verbal or social bullying than female adolescents (35% versus 30%, respectively).
- Around 10%-14% of adolescents reported facing verbal or social bullying five times or more in the 12 months preceding the survey.
- The most common form of verbal bullying was cursing/passing mean comments/calling names.
- Ever-married females reported husbands as the main perpetrator for verbal or social bullying (47%), followed by in-laws (37%) and other family members (26%). Unmarried females and unmarried males reported being verbally/socially bullied by friends/classmates (39% and 63%, respectively), their mothers (33% and 18%, respectively), and neighbors (26% and 36%, respectively).

Cyberbullying:

- Seven percent of ever-married females, 9% percent of unmarried females, and 3% of unmarried males reported facing cyberbullying at least once in the last 12 months.
- One-to-three percent of adolescents reported experiencing cyberbullying five or more times in the past 12 months.
- All adolescent groups reported that unknown persons were the main perpetrators for cyberbullying (77%, 80%, and 55% for ever-married females, unmarried females, and unmarried males, respectively).

Sexual harassment:

- Sexual harassment was commonly experienced among female adolescents, with 17% of married and 34% of unmarried female adolescents having reported being sexually harassed at least once in the last 12 months. Sexual harassment was most often experienced on the road.

Program and Policy Implications

Use a multipronged strategy to address violence against adolescents: Violence against both female and male adolescents is a major health and social issue in Bangladesh, and can affect other health and wellness outcomes of adolescents. The National Plan of Action for Adolescent Health Strategy 2017-2030 outlines several activities to address violence against adolescents, including organizing national campaigns and advocacy activities to raise awareness of the issue, and training health care providers on protocols for management of violence survivors. Additional strategies to address violence against adolescents include developing and implementing interactive anti-violence and anti-bullying curricula for use in schools and youth clubs, and trainings for teachers and other adult mentors of adolescents on how to address and minimize adolescent violence.

Address verbal and social bullying towards adolescents: While public health and social programs have, to date, mostly focused on efforts to address physical and sexual violence, the survey shows that verbal and social bullying is the most common form of violence experienced by adolescents. Verbal and social bullying is reported to be perpetrated mostly by friends and classmates, neighbors, and mothers. This suggests that violence prevention programs, including those that promote positive social norms, conflict management, and healthy relationships, must include components that address verbal and psychological aggression in multiple settings—including the home, school, and community—in order to comprehensively address and mitigate violence.

Address sexual harassment, especially towards female adolescents: Similarly, while most programs and policies address the most severe forms of gender-based violence, such as sexual assault, they generally do not address sexual harassment. Given how commonly this is experienced by female adolescents in Bangladesh, sexual harassment must be included as a component of adolescent violence prevention programs. In addition to integrating it into female-targeted response projects, greater focus is needed on engaging male adolescents through communication and social norms programs, to help change their behavior in regards to harassment. Given the prevalence of females experiencing sexual harassment on the road, in neighborhoods, and at school, communication and media campaigns should target these locations with appropriate messages for males.

Violence experienced by adolescents is a major public health problem and is associated with adverse health consequences including injury and disability, psychological and social dysfunction, unplanned pregnancies, sexually transmitted infections, and chronic diseases (WHO, n.d.; WHO, 2020^a). Adolescents who experience violence are more likely to later perpetrate violence against their peers, family members, romantic partners, and children (Kidman, & Kohler, 2020; Hillis, Mercy, & Saul, 2017). Additionally, adolescent girls who experience violence during pregnancy are more likely to have miscarriages and stillbirths and have other pregnancy, labor, and delivery complications (Dhar, et al., 2018). They are also more likely to give birth to low birth weight babies (Ferdos, & Rahman, 2017).

The BAHWS 2019-20 asked adolescents about three forms of violence—physical violence, verbal and social bullying, and cyberbullying. The survey also asked about sexual harassment. These forms of violence were measured by asking adolescents a series of questions on whether they had experienced specific acts of violence in the past 12 months. While the survey asked all three groups of adolescents questions on physical violence and bullying, it asked only ever-married females and unmarried females questions on sexual harassment.

Based on WHO's ethical and safety recommendations for research on domestic violence (WHO, 2001), several measures were taken in the BAHWS 2019-20 to protect the respondents from any harm arising from participating in the survey, including maintaining confidentiality of the respondents. These included the following measures:

- The violence, bullying, and sexual harassment module was administered to the households which had only one eligible adolescent from any of the three adolescent groups—ever-married females, unmarried females, and unmarried males. Selecting only one adolescent to receive the violence, bullying, and sexual harassment questions protected the privacy of that adolescent and helped to ensure that other eligible adolescents in the household were not aware of the types of questions that the selected adolescent was asked. Maintaining privacy was important because the discovery by any member of the household about reporting of the event to an interviewer could put the adolescent at risk for further violence.
- In addition to the informed consent that was obtained from the survey respondents at the beginning of the interview, before administering the violence, bullying, and sexual harassment module, the interviewer read aloud an additional statement informing the respondent that the questions to follow could be sensitive and reassuring her/him of the confidentiality of her/his responses.
- This module was placed at the end of the questionnaire so that the interviewer could spend more time making the respondents feel comfortable before asking about personal experiences—like violence—in a sensitive manner, and minimizing emotional harms that may be caused by asking about their past harmful experiences.

This chapter presents information on ever-married female, unmarried female, and unmarried male adolescents' experience of different forms of violence (physical violence, verbal or social bullying, and cyberbullying) and reported perpetrators of violence for each of the different forms. It also includes data on experience of sexual harassment and locations where sexual harassment was experienced among the female adolescents.

11.1. Physical Violence

On physical violence, eligible respondents were asked, in the 12 months preceding the survey, has anyone:

- Slapped you, pushed you, or pulled your hair?
- Punched, thrown something at you, or hit you with a stick or something heavy?
- Kicked you, dragged you, or beat you up?
- Tried to choke you or burn you on purpose with something hot (fire, object, acid)
- Threatened or attacked you with a knife, gun, or any other weapon?

When a respondent replied “yes” to any question about experiencing an act of physical violence, the adolescent was then asked how many times it happened: once, two-to-four times, or five or more times.

Any experience of physical violence in the last 12 months: Adolescents who reported having experienced at least one act of physical violence in the 12 months preceding the survey.

Frequency of physical violence: Number of times adolescents experienced any act of physical violence in the 12 months preceding the survey.

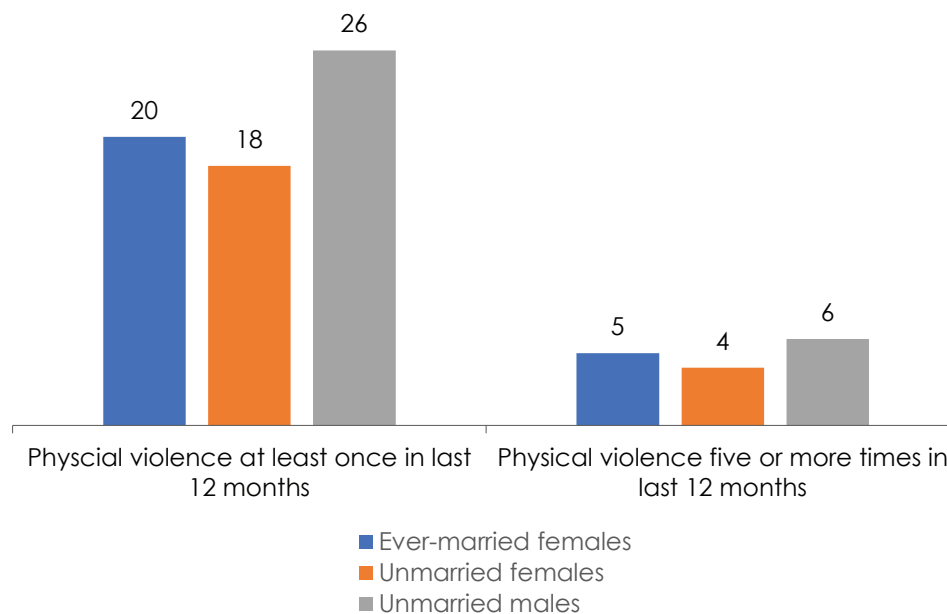
Sample: Ever-married females, unmarried females, and unmarried males ages 15-19 years.

Perpetrators of physical violence: Persons who were reported by adolescents as having perpetrated one or more acts of physical violence in the 12 months preceding the survey.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years who experienced one or more acts of physical violence in 12 months preceding the survey.

In Bangladesh, 18-26% of adolescents had experienced any physical violence at least once in the 12 months preceding the survey (**Figure 11.1**). Unmarried male adolescents were most likely and unmarried female adolescents were least likely to report having experienced physical violence. The most common act of physical violence reported by all the three groups of adolescents was pushing/slapping/hair pulling (**Table 11.1**).

Figure 11.1. Percentage of adolescents ages 15-19 reporting experiencing physical violence in the last 12 months



Adolescents who experience frequent violence suffer a greater number of, and more intense, negative physical and mental health outcomes. Greater frequency violence is also associated with a higher risk of being violent, and more intensely violent, towards others (Taquette, & Leite Maia Monteiro, 2019). Around 4-6% of adolescents reported experiencing any act of physical violence five or more times in the past one year (**Figure 11.1** and **Table 11.1**).

Table 11.1. Exposure to any form of physical violence

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by their exposure to different forms of physical violence in the 12 months preceding the survey, Bangladesh, 2019-20.

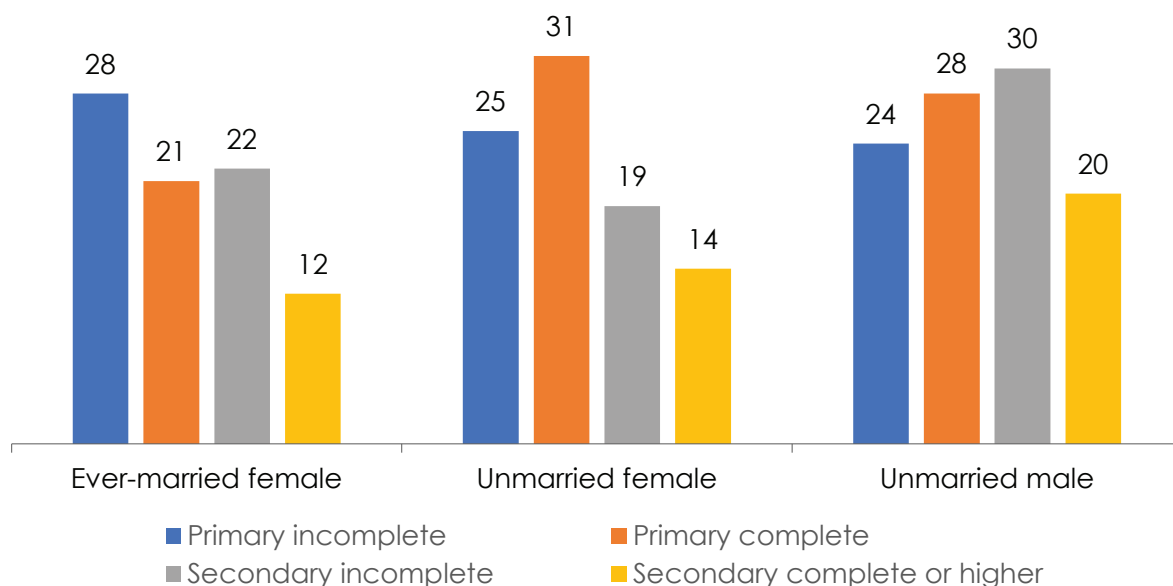
Ever-married females (N=2,022)					
Type of physical violence	Frequency of physical violence in the past 12 months				Total
	Never	Once	2-4 times	5 + times	
Pushed, slapped, or pulled hair	81.5	5.3	8.6	4.7	100.0
Punched, thrown something, hit with a stick or something heavy	94.9	1.1	2.5	1.5	100.0
Kicked, dragged, or beat-up	93.8	2.0	3.0	1.2	100.0
Choked or burned on purpose with something hot	98.5	0.7	0.8	0.0	100.0
Threatened or attacked with a knife, gun, or any other weapon	99.6	0.3	0.1	0.0	100.0
At least one of the above	79.9	5.4	9.5	5.2	100.0
Unmarried females (N=2,962)					
Pushed, slapped, or pulled hair	84.5	5.0	7.2	3.3	100.0
Punched, thrown something, hit with a stick or something heavy	94.8	2.0	1.9	1.2	100.0
Kicked, dragged, or beat-up	97.9	0.8	1.0	0.3	100.0
Choked or burned on purpose with something hot	99.7	0.2	0.0	0.0	100.0
Threatened or attacked with a knife, gun, or any other weapon	99.6	0.4	0.0	0.0	100.0
At least one of the above	82.1	5.7	8.1	4.1	100.0
Unmarried males (N=1,997)					
Pushed, slapped, or pulled hair	77.5	7.2	10.5	4.8	100.0
Punched, thrown something, hit with a stick or something heavy	91.9	3.3	3.1	1.8	100.0
Kicked, dragged, or beat-up	96.9	1.6	1.0	0.5	100.0
Choked or burned on purpose with something hot	98.7	0.7	0.5	0.1	100.0
Threatened or attacked with a knife, gun, or any other weapon	99.1	0.5	0.3	0.1	100.0
At least one of the above	74.3	8.2	11.8	5.7	100.0

Patterns by Background Characteristics

Among ever-married females, those who had not completed primary education were most likely to have ever experienced any physical violence in the past 12 months, at 28%. In contrast, among unmarried females, those who completed primary school were most likely to have experienced physical violence (31%); and among unmarried males, those who completed primary school but did not complete secondary school were most likely to have experienced physical violence (30%). Across all three adolescent groups, those who completed secondary school or higher were least likely to have experienced physical violence (from 12% to 20%). (Figure 11.2; Appendix A: Tables 11.1A, 11.1B, 11.1C).

Among ever-married adolescents, those from the lowest wealth quintile were most likely to experience physical violence (27%); while unmarried males in the highest wealth quintile were more likely to report experiencing physical violence (30%) (Appendix A: Tables 11.1A, 11.1C).

Figure 11.2. Percentage of adolescents ages 15-19 reporting experiencing physical violence in the last 12 months, by education



11.1.1. Perpetrators of Physical Violence

Understanding who perpetrates violence is important for designing policies and programs that prevent violence and mitigate its harmful impact on adolescents. Such programs can then be targeted in homes, schools, neighborhoods, or other community settings.

The perpetrators of physical violence varied for the three groups of adolescents. Among ever-married females who experienced physical violence, husbands were most often reported as the perpetrators (77%), followed by other family members and in-laws (9% and 8%, respectively). In contrast, unmarried females who experienced any violence in the 12 months preceding the survey most often reported that mothers perpetrated physical violence, at 38%; 29% reported physical violence by friends/classmates, and about one-quarter reported that siblings perpetrated physical violence. More than half of unmarried males who experienced physical violence in the past 12 months reported that it was perpetrated by friends/classmates; and about one-fifth and one-sixth, respectively, reported that it was perpetrated by a neighbor or their mother (Table 11.2).

Table 11.2. Reported perpetrator of physical violence

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who experienced any type of physical violence in the 12 months preceding the survey, by type of perpetrator, Bangladesh, 2019-20.

Perpetrator	Ever-married females	Unmarried females	Unmarried males
Father	1.8	9.4	10.5
Mother	6.6	37.7	15.9
Stepfather/stepmother	0.2	0.9	0.2
Husband	76.8	na	na
In-laws	8.1	na	na
Siblings	6.8	24.3	7.9
Other family members	8.5	9.8	5.8
Teachers	0.6	6.3	8.4
Friends/classmates	3.5	28.9	55.5
Law enforcement	0.0	0.0	0.2
Neighbor	1.9	5.7	18.5
Unknown person	1.9	3.3	7.8
Others	1.3	1.9	1.2
Number of adolescents	406	531	514

Note: Multiple responses were possible.

11.2. Verbal or Social Bullying

Adolescents were asked whether they had faced any form of verbal or social bullying in the 12 months preceding the survey, through the following questions:

In the last 12 months has anyone:

- Cursed you or passed mean comments or called you names?
- Blamed you to be a liar or had lies told about you?
- Given you a written or verbal threat?
- Excluded you socially like did not include you while playing, did not let you sit with them or did not include you in idle chats?

When a respondent replied “yes” to any question about experiencing an act of verbal or social bullying, the adolescent was then asked how many times it happened: once, two-to-four times, or five or more times.

Any experience of any verbal or social bullying in the last 12 months:

Adolescents who reported having experienced at least one act of verbal or social bullying in the 12 months preceding the survey.

Frequency of verbal or social bullying: Number of times adolescents experienced any form of verbal or social bullying in the 12 months preceding the survey.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

Perpetrators of verbal or social bullying: Person who was reported by adolescent as having perpetrated one or more acts of verbal or social bullying in the 12 months preceding the survey.

Sample: Ever-married females, unmarried females, and unmarried males ages 15-19 years who experienced one or more forms of verbal or social bullying in the 12 months preceding the survey.

Around one-in-three adolescents reported experiencing verbal or social bullying in the 12 months preceding the survey. Unmarried males were more likely than female adolescents to have faced verbal or social bullying at least once in the prior 12 months (35% versus 30%, respectively). The most common form of verbal bullying was cursing/passing mean comments/calling names. Around 10%-14% of adolescents experienced verbal or social bullying five times or more in the 12 months preceding the survey (Figure 11.3 and Table 11.3).

Figure 11.3. Percentage of adolescents ages 15-19 reporting experiencing verbal or social bullying in the last 12 months

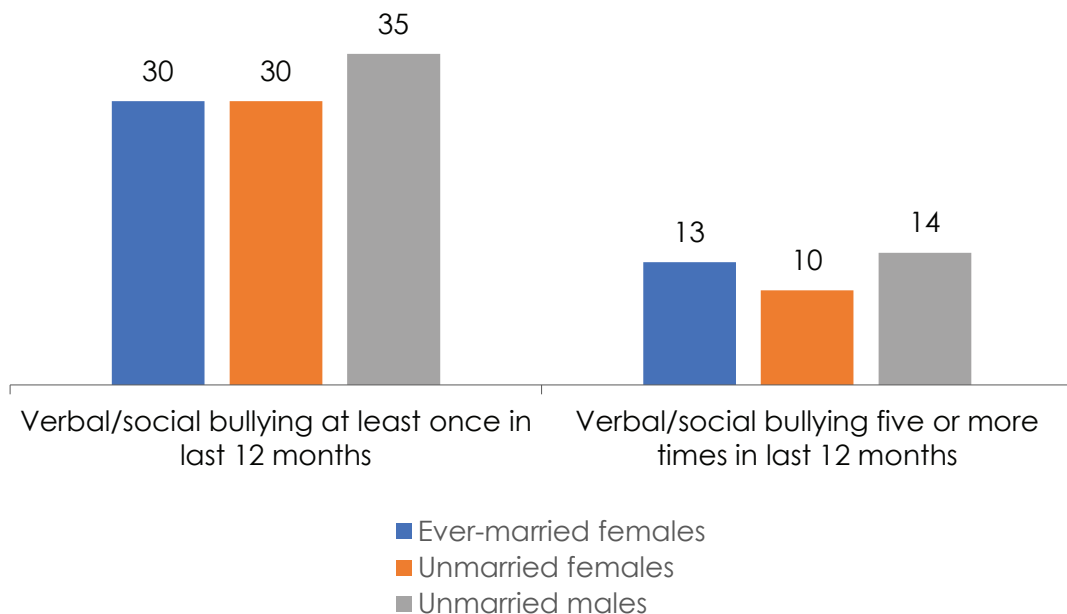


Table 11.3. Exposure to any form of verbal or social bullying

Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by their exposure to different forms of verbal or social bullying in the 12 months preceding the survey, Bangladesh, 2019-20.

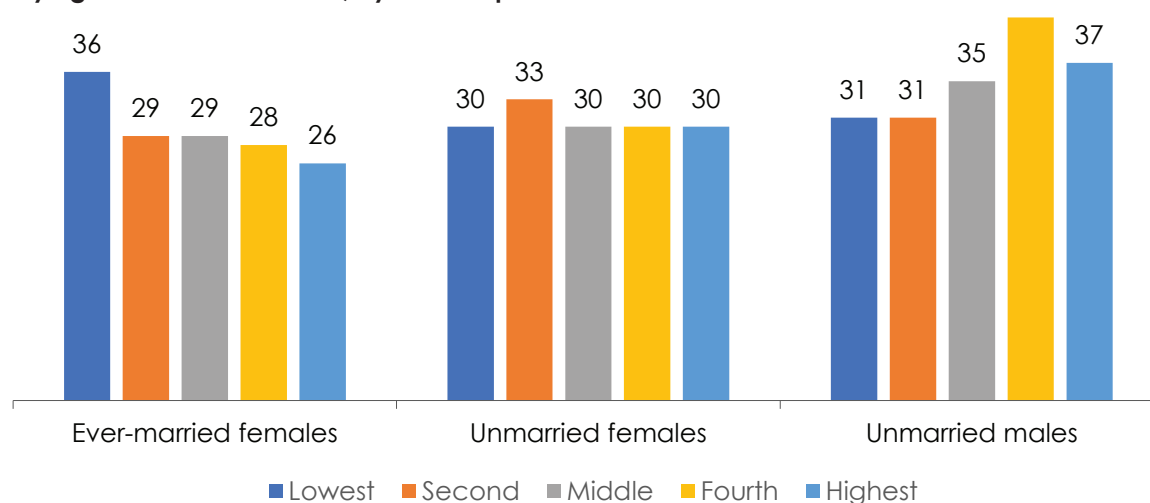
Type of verbal or social bullying	Frequency of verbal or social bullying in the 12 months preceding the survey				Total
	Never	Once	2-4 times	5+ times	
Ever-married females (N=2,022)					
Cursed, passed mean comments, or called names	75.2	3.0	10.2	11.6	100.0
Blamed to be a liar or had lies told about	83.7	4.4	7.5	4.5	100.0
Given a written or verbal threat	97.5	0.8	1.2	0.5	100.0
Excluded socially	98.7	0.4	0.4	0.4	100.0
At least one of the above	70.2	4.5	12.1	13.2	100.0
Unmarried females (N=2,962)					
Cursed, passed mean comments, or called names	76.8	4.1	10.8	8.3	100.0
Blamed to be a liar or had lies told about	85.6	6.0	5.8	2.6	100.0
Given a written or verbal threat	97.2	0.9	1.5	0.4	100.0
Excluded socially	95.9	1.4	2.0	0.6	100.0
At least one of the above	69.6	6.8	13.7	9.9	100.0
Unmarried males (N=1,997)					
Cursed, passed mean comments, or called names	71.9	3.0	13.2	11.9	100.0
Blamed to be a liar or had lies told about	81.9	6.5	8.6	3.1	100.0
Given a written or verbal threat	97.8	0.9	0.9	0.4	100.0
Excluded socially	94.3	1.7	3.0	1.0	100.0
At least one of the above	64.7	5.1	16.7	13.5	100.0

Patterns by Background Characteristics

The relationship between experiences of verbal or social bullying and wealth quintile differed by type of adolescent. Among ever-married females, the experience of verbal or social bullying decreased as wealth increased, while among unmarried males, verbal or social bullying increased as wealth increased up to the fourth quintile (42% of unmarried males in the fourth wealth quintile experienced bullying in the past 12 months), and then decreased (to 37%) in the fifth quintile (**Figure 11.4; Appendix A: Tables 11.1A, 11.1B, 11.1C**).

Among ever-married female adolescents, those with secondary school completed or higher education were less likely to experience verbal or social bullying than those with less education (**Appendix A: Table 11.1A**).

Figure 11.4. Percentage of adolescents ages 15-19 who reported experiencing verbal or social bullying in the last 12 months, by wealth quintile



11.2.1. Perpetrators of Verbal or Social Bullying

Among ever-married female adolescents who faced verbal or social bullying, most (47%) reported that their husbands were the perpetrators of such bullying. In-laws and other family members were the other prominent perpetrators (37% and 26%, respectively) (Table 11.4).

Unmarried female and male adolescents also most often reported that they experienced verbal or social bullying from friends/classmates (39% and 63%, respectively), their mother (33% and 18%, respectively), and a neighbor (26% and 36%, respectively).

Table 11.4. Reported perpetrator of verbal or social bullying

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who experienced any type of verbal or social bullying in the 12 months preceding the survey, by type of perpetrator, Bangladesh, 2019-20.

Perpetrator	Ever-married females	Unmarried females	Unmarried males
Father	2.8	7.3	10.9
Mother	8.7	32.8	17.5
Stepfather/stepmother	2.8	12.0	14.2
Husband	47.0	NA	NA
In-laws	37.3	NA	NA
Siblings	3.1	12.5	4.3
Other family members	26.1	12.7	7.7
Teachers	0.2	1.1	1.7
Friends/classmates	7.1	38.7	62.6
Law enforcement	0.4	0.1	0.3
Neighbor	20.5	25.5	36.3
Unknown person	3.0	11.7	8.4
Others	1.9	2.3	2.8
Number of adolescents	603	901	705

Note: Multiple responses were possible.

11.3. Cyberbullying

Adolescents were asked whether in the 12 months preceding the survey anyone had used a mobile phone or the internet to harass or bother, spread mean words about, or share pictures of them. When respondents replied “yes” to any one of these, they were then asked how many times it had happened: once, two-to-four times, or five or more times.

Any experience of cyberbullying in the last 12 months: Adolescents who reported having been bothered or harassed through the mobile phone or internet in the 12 months preceding the survey.

Frequency of cyberbullying: Number of times adolescents experienced any cyberbullying in the 12 months preceding the survey.

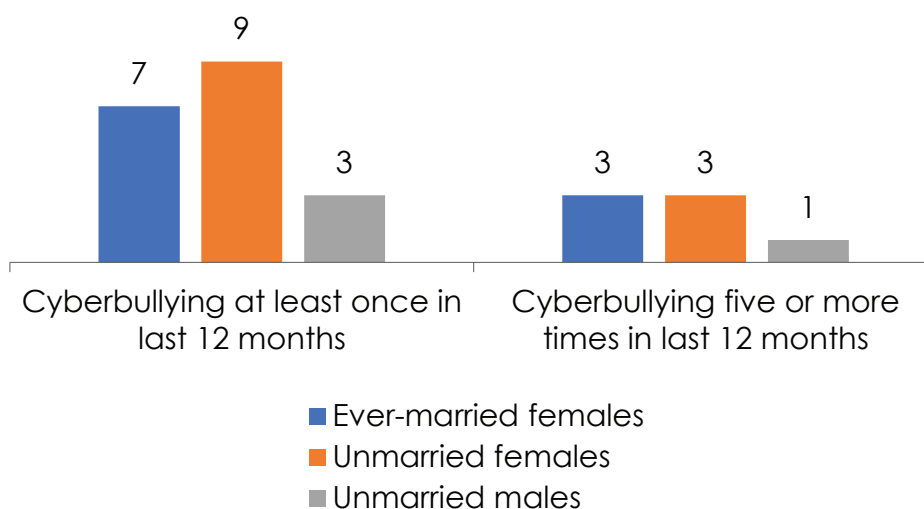
Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

Perpetrators of cyberbullying: Persons who were reported by adolescents as having perpetrated cyberbullying in the 12 months preceding the survey.

Sample: Ever-married females, unmarried females, and unmarried males ages 15-19 years who experienced cyberbullying in the 12 months preceding the survey.

Cyberbullying was reported less commonly than physical violence, or verbal or social bullying. Female adolescents were more likely to face cyberbullying (reported by 7% of ever-married and 9% of unmarried females) than unmarried male adolescents (3%), even though female adolescents were less likely to own mobile phones or be exposed to the internet. One-to-three percent of adolescents reported experiencing cyberbullying five or more times in the past 12 months (**Figure 11.5**).

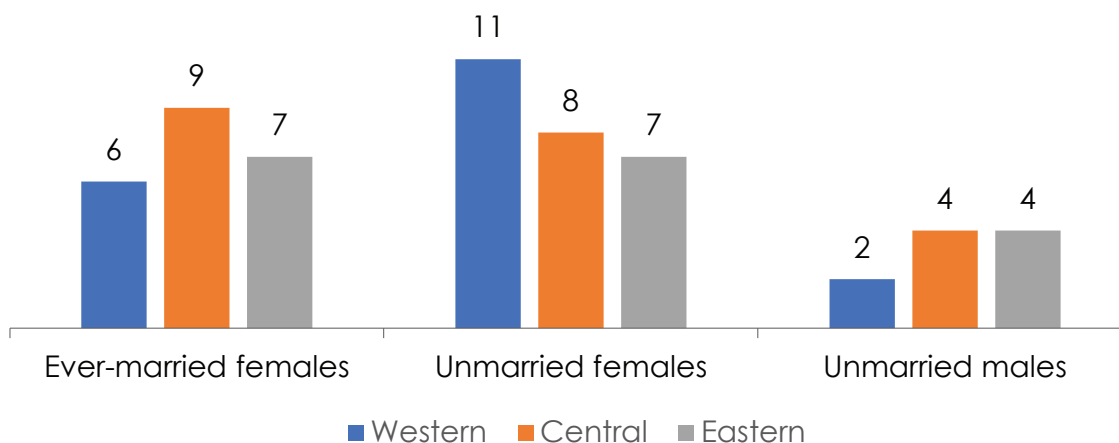
Figure 11.5. Percentage of adolescents ages 15-19 who reported experiencing cyberbullying in the last 12 months



Patterns by Background Characteristics

The percent of adolescents who experienced cyberbullying varied by region. Among ever-married females, those in the Central region experienced the most cyberbullying, at 9%; while among unmarried females, those in the Western region experienced the most cyberbullying, at 11%. Four percent of unmarried males in the Central and Eastern regions experienced cyberbullying, compared to only 2% in the Western region (Figure 11.6).

Figure 11.6. Percentage of adolescents ages 15-19 who reported experiencing cyberbullying in the last 12 months, by region



11.3.1. Perpetrators of Cyberbullying

Most ever-married women who experienced cyberbullying reported that an unknown person perpetrated the cyberbullying (77%); 8% reported that they experienced cyberbullying by their neighbor (Figure 11.7 and Table 11.5).

Unmarried adolescents most reported unknown persons and friends/classmates for perpetrating cyberbullying (80% and 14%, respectively, among unmarried females; and 55% and 49%, respectively, reported by unmarried males).

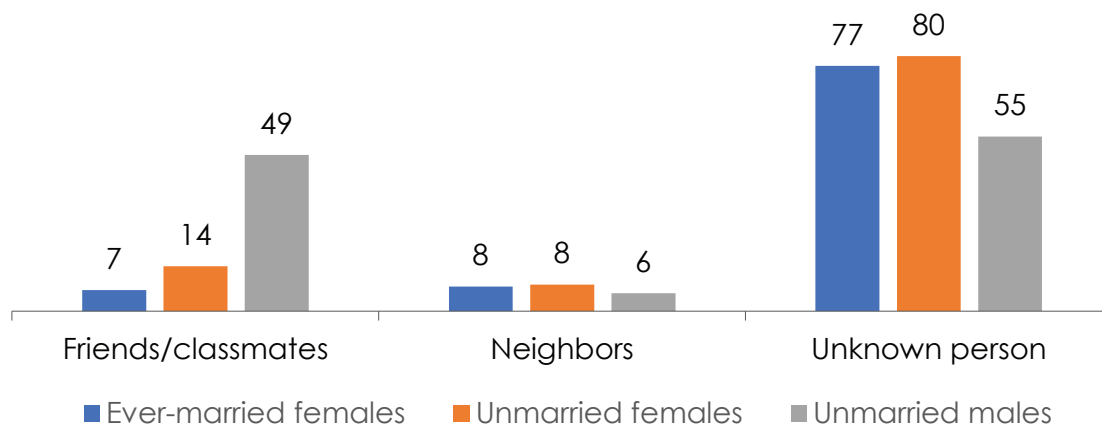
Table 11.5. Reported perpetrator of cyberbullying

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 who experienced any type of cyberbullying in the 12 months preceding the survey, by type of perpetrator, Bangladesh, 2019-20.

Perpetrator	Ever-married females	Unmarried females	Unmarried males
Husband	5.9	NA	NA
In-laws	0.7	NA	NA
Siblings	0.0	0.0	1.7
Other family members	4.7	3.0	0.0
Teachers	0.8	0.2	0.0
Friends/classmates	6.6	14.1	49.0
Neighbor	7.7	8.4	5.6
Unknown person	77.0	80.0	54.8
Others	2.2	1.1	2.1
Number of adolescents	147	253	61

Note: Multiple responses were possible.

Figure 11.7. Percentage of adolescents ages 15-19 who experienced cyberbullying, by reported perpetrator



11.4. Sexual Harassment

Sexual harassment is a behavior characterized by the making of unwelcome and inappropriate sexual remarks or physical advances. The questions asked on sexual harassment were:

In the last 12 months:

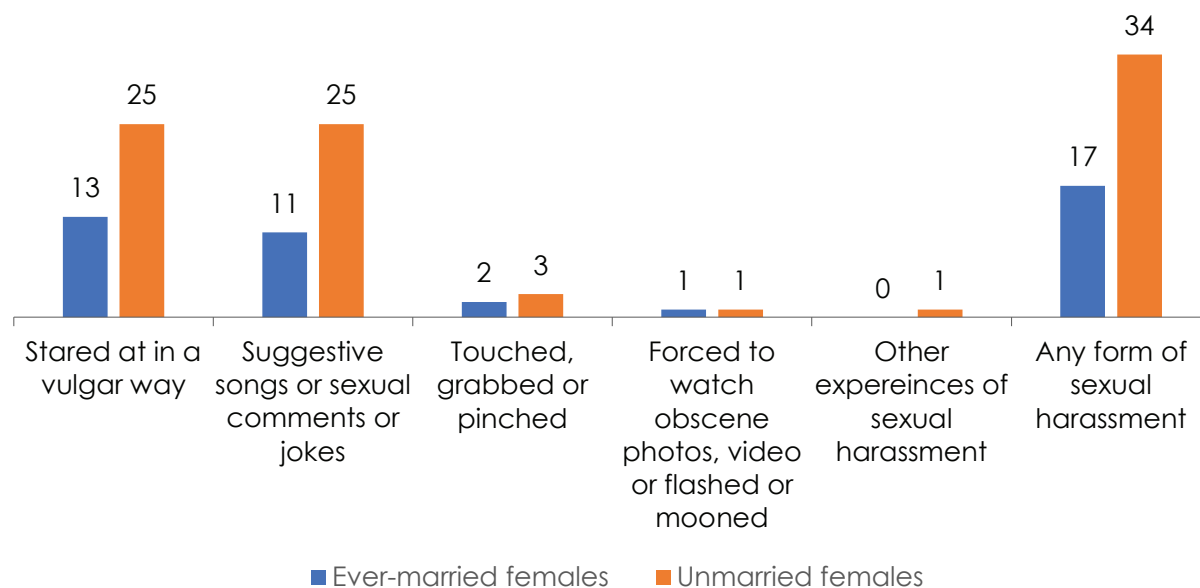
- Has someone stared at you in a vulgar way that made you uncomfortable?
- Have you encountered sly whistle/humming of suggestive songs or passing of sexual comments or jokes from someone?
- Has someone touched or grabbed you, or pinched you in a way that made you uncomfortable?
- Has someone forced you to watch obscene photos, videos or flashed or mooned you?
- Did you face other similar experiences of sexual harassment?

Any sexual harassment: Adolescents who reported having experienced at least one act of sexual violence in the 12 months preceding the survey.

Sample: Ever-married and unmarried female adolescents ages 15-19 years.

Unmarried female adolescents were about as twice as likely to have experienced any form of sexual harassment in the 12 months preceding the survey compared to ever-married female adolescents (34% vs. 17%, respectively). Of all forms of sexual harassment, unmarried female adolescents were most likely to experience having been stared at in a vulgar way (25%) or being told suggestive songs or sexual comments or jokes (25%). Ever-married female adolescents were most likely to have been stared at in a vulgar way (13%) (**Figure 11.8**).

Figure 11.8. Percentage of female adolescents ages 15-19 who reported experiencing sexual harassment in the last 12 months, by type of harassment



Patterns by Background Characteristics

For both ever-married and unmarried female adolescents, experiences of sexual harassment were highest among those in the highest wealth quintile (20% for ever-married females and 38% for unmarried females) (Table 11.6).

Experience of any sexual harassment increased as education level increased, for both ever-married and unmarried female adolescents (Table 11.6).

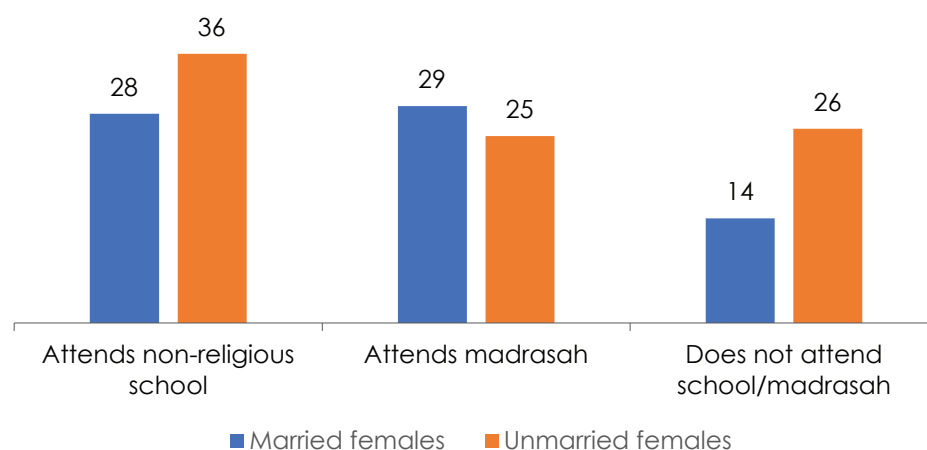
Among unmarried female adolescents, a higher proportion of those who went to non-religious schools experienced sexual harassment (36%) compared to those who attended madrasahs (25%); or compared to those who did not attend either a non-religious school or madrasah (26%) (Table 11.6 and Figure 11.9).

11.6. Sexual harassment

Percentage of ever-married and unmarried female adolescents ages 15-19 who have experienced any type of sexual harassment in the 12 months preceding the survey, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Ever-married females		Unmarried females	
	%	N	%	N
Age group				
15	19.4	161	32.8	853
16	18.5	288	34.1	816
17	21.4	424	31.3	609
18	14.6	618	37.5	423
19	12.7	530	33.6	262
Residence				
Urban	17.8	483	36.7	989
Rural	16.1	1,539	32.0	1,973
Region				
Western	17.8	819	36.8	962
Central	14.8	799	32.5	1,140
Eastern	17.0	404	31.4	860
Current schooling status				
Goes to school	28.2	272	35.7	2,311
Goes to madrasah	28.9	35	25.3	234
Does not go to school/madrasah	14.3	1,714	26.4	417
Educational attainment				
Primary incomplete	12.0	254	23.8	142
Primary complete	13.2	202	24.0	110
Secondary incomplete	16.5	1,068	33.4	1,630
Secondary complete or higher	19.9	497	36.1	1,080
Wealth quintile				
Lowest	13.3	422	30.6	415
Second	16.1	440	30.3	534
Middle	16.8	446	31.8	642
Fourth	17.1	411	34.5	638
Highest	20.0	303	38.4	733
Total	16.5	2,022	33.6	2,962

Figure 11.9. Percentage of female adolescents ages 15-19 who reported experiencing sexual harassment in the last 12 months, by school status



11.4.1. Location of Sexual Harassment

The locations where female adolescents experienced sexual harassment varied, with the road being the most common place of harassment (74% and 88% for ever-married and unmarried females, respectively). Other common places of harassment were school, college, or madrasah (11% and 19% for ever-married and unmarried females, respectively); and at home (12%) and the neighborhood (12%) for ever-married adolescent females (**Table 11.7**).

Table 11.7. Location of sexual harassment

Percentage of ever-married and unmarried female adolescents ages 15-19 who experienced any type of sexual harassment in the 12 months preceding the survey, by location of harassment, Bangladesh, 2019-20.

Location of harassment	Ever-married female adolescents	Unmarried female adolescents
At home	12.2	4.1
School/college/madrasah	10.8	18.8
Road	74.3	87.6
Public transport	2.9	2.3
Marketplace	8.3	5.3
Neighborhood	11.6	3.7
Friend's house	0.5	0.3
Relatives house	4.1	2.6
Coaching centre	0.3	2.0
Workplace	1.4	1.3
Park or other recreational place	1.3	0.4
Health facility	0.0	0.0
Other	2.3	1.7
Number of adolescents	333	994

Key Findings

- **Prevalence of major depressive disorder:** Females were more likely to have major depressive disorder than males; 15% of ever-married females, 11% of unmarried females, and 5% of unmarried males had major depressive disorder.
- **Major depressive disorder varied by background characteristics:** For all three adolescent groups—ever-married females, unmarried females, and unmarried males—the likelihood of having major depressive disorder decreased with increased educational attainment. Adolescents in the Western region were less likely to have major depressive disorder compared to those in Central or Eastern regions.
- **Major depressive disorder varied by adolescents' connectedness with family:** Married adolescents who had higher connectedness with their husbands were less likely to have major depressive disorder compared to those who were less connected.

For unmarried female adolescents, those who had higher levels of connectedness with their mothers had lower proportions of major depressive disorder, compared to those who felt less connected with their mothers. For unmarried males this pattern does not hold.

The prevalence of major depressive disorder did not vary by the level of unmarried adolescents' connectedness with their fathers.

- **Major depressive disorder varied by adolescents' connectedness with friends:** The proportions of ever-married females, unmarried females, and unmarried males reporting major depressive disorder were higher among those with higher levels of connectedness with friends. This pattern was particularly notable among ever-married adolescents.

Program and Policy Implications

Develop programs to foster positive social and emotional competence and life skills: A considerable portion of adolescents in Bangladesh experience depressive symptoms. Programs designed to promote social and emotional competence can help adolescents gain the skills necessary to navigate life's challenges and build resiliency. Life-skills education in school or social clubs may be one avenue to offer these programs.

Address depression among married female adolescents: There are substantial differences by sex in major depressive disorder among adolescents, with married females experiencing depression at higher rates than their unmarried counterparts. Interventions for this population should consider the unique challenges married female adolescents face in Bangladesh, including those exacerbated by rigid gender norms and roles. Increased connection to married peers through community-based youth groups can provide a venue for social and emotional support that may help married female adolescents manage their depression, as well as learn where to access services.

Implement school-based counseling programs: Since most adolescents have some level of education, policies aimed at developing and implementing school-based counseling programs that include components of cognitive behavioral therapy may ameliorate the potential harmful consequences of depression. Such programs can also develop a referral system and link to nearby clinics or providers that address depression and other mental health issues.

Worldwide, 10-20% of children and adolescents experience mental health problems, yet these issues are often undetected and untreated (Kessler, et al., 2007). In low- and middle-income countries (LMIC), mental health is the most overlooked area in health programs, especially among young people. Poor mental health in adolescence is associated with a high prevalence of adult emotional, behavioral, and severe psychiatric problems (Patel, et al., 2007).

Major depressive disorder (MDD), also known as depression, is among the top-five leading causes of illness and disability among older adolescents (15-19 years) (WHO, 2020). At its worst, depression can lead to suicide, which is the third leading cause of death among older adolescents (WHO, 2020). Nearly 90% of the world's adolescents live in LMIC, and more than 90% of adolescent suicides are among adolescents living in these countries (WHO, 2020^b). MDD is typically treated by counseling and antidepressant medications, but lack of access to screening and counseling for depression in many LMIC, including in Bangladesh, leads to unresolved depression, and its associated consequences, among many adolescents.

The dearth of information on the prevalence of mental health problems among adolescents in Bangladesh is a major challenge for developing interventions to support mental health problems in this population. A small-scale study on the prevalence of depressive symptoms concluded that depressive symptoms are common among adolescents in Bangladesh, with predominance among female adolescents and those living in urban slums (Nasreen, et al., 2013). Obtaining valid epidemiological data is the first step for developing interventions to support mental health problems among adolescents.

The BAHWS 2019-20 collected information on the status of mental health of all three groups of adolescents—ever-married females, unmarried females, and unmarried males. The survey used the Patient Health Questionnaire (PHQ)-9 (Spitzer, Kroenke, Williams, & PHQ Primary Care Study Group, 1999) modified for adolescents, known as PHQ-A (Spitzer, & Johnson, 1995). The PHQ-9 is a shorter version of PHQ,¹ which is a criteria-based diagnostic tool for depression and other mental disorders. An Indian-Bengali version of PHQ-9, available at the PHQ Screeners website,² was adapted in the Bangladeshi context. After rigorous pretesting amongst the adolescent population, and review by subject matter experts, the language was further modified and finalized to use in the survey.

In the survey, adolescents were asked how often they experienced, in the last two weeks, each of the nine core major depression symptoms, as follows:

1. Feeling down, depressed or hopeless?
2. Little interest or pleasure in doing things?
3. Had trouble falling asleep, staying asleep, or sleeping too much?
4. Had poor appetite, weight loss, or overeating?
5. Felt tired, or had little energy?
6. Felt bad about yourself – or felt that you are a failure?
7. Trouble concentrating on usual activities?
8. Felt as if you have become more silent or restless?
9. Thoughts that you would be better off dead, or have hurt yourself in some way?

¹ The PHQ is derived from the Primary Care Evaluation of Mental Disorders (PRIME-MD), which was originally developed to identify five mental disorders: depression, anxiety, alcohol abuse, somatoform disorder, and eating disorder. The PHQ-9 is the 9-item depression module developed from the full PHQ. A systematic review of 16 studies that were carried out to identify depression (Williams Jr., et al., 2002) concluded that although there are many valid tools, the PHQ-9 is equal or superior to other instruments to identify depression. The PHQ-9 consists of nine items on a four-point Likert-type scale (Spitzer, et al., 1999). These items closely follow the nine criteria specified in the Diagnostic and Statistical Manual of Mental Disorders (DSM)-IV diagnostic manual. Thus, the PHQ-9 can establish provisional depressive disorder diagnoses as well as grade depressive symptom severity. Patients use Likert scales to rate the presence of symptoms in the prior two weeks. Depending on frequency (“not at all,” “several days,” “more than half of the days,” and “almost every day”), the nine items are scored from 0 to 3 points (total severity scores range from 0 to 27 points). The severity of depression is then categorized into four groups, with cut-off points of 5, 10, 15, and 20, that represent the thresholds for mild, moderate, moderately severe, and severe depression, respectively (Kroenke, Spitzer, & Williams, 2001). The PHQ-9 is also a sensitive screening instrument for MDD, when clinical intervention is needed to address depression. When a cut-off point of ≥ 10 is used, sensitivity for identification of major depression by PHQ-9 is 88%, with specificity of 88%, and a positive likelihood ratio of 7.1; meaning primary care patients with major depression are seven times more likely to have a PHQ-9 score of 10 or greater than patients without major depression. Some other studies also found cut-off points ≥ 10 as a sensitive measure to identify MDD (Williams Jr., et al. 2002; Muñoz-Navarro, et al., 2016).

² Accessible at <https://www.hrsa.gov/behavioral-health/patient-health-questionnaire-phq-screeners>

Scoring for response categories for each of the nine symptoms are: “Not at all” = 0, “Some days” = 1, “Majority of the days” = 2, and “Nearly every day” = 3. Therefore, based on the response given for each of the nine symptoms, the total scores for a respondent ranged from 0 to 27. Severity of depressive symptoms was then categorized into four groups, with cut-off points of 5, 10, 15, and 20, that represent the thresholds for mild, moderate, moderately severe, and severe depressive symptoms, respectively.

PHQ score	Severity of depressive symptoms	Depressive disorder
0-4	No	-
5-9	Mild	Minor depressive disorder
10-14	Moderate	
15-19	Moderately severe	Major depressive disorder
20-27	Severe	

The total scores were also used to classify major depressive disorder. Adolescents who scored ≥ 10 (moderate to severe depressive symptoms) were classified as having major depressive disorder needing clinical intervention for management.

During the survey, special precaution was taken for adolescents who endorsed item 9 (“thoughts that you would be better off dead or have hurt yourself in some way”). They were asked if they had discussed the matter with anyone. If they answered “Yes,” then they were advised to continue the discussion with that person. However, if they answered “No,” then the respondent was advised to discuss the matter with someone they liked and trusted, and they were given the contact number of an emotional support and suicide prevention helpline to seek additional help.

12.1. Prevalence of Depressive Disorder

Depressive symptoms by severity: Classified as having no depressive symptoms (score of 0-4), mild depressive symptoms (score of 5-9), moderate depressive symptoms (score of 10-14), moderately severe depressive symptoms (score of 15-19), and severe depressive symptoms (score of 20-27).³

Major depressive disorder: Score of ≥ 10 in the PHQ-A screener; that is, those who have moderate to severe depressive symptoms.

Sample: Ever-married female, unmarried female, and unmarried male adolescents ages 15-19 years.

Around 40% of ever-married and unmarried females had mild depressive symptoms (a score of 5-9), as did 27% of unmarried males. Around 5% of unmarried males displayed moderate depressive symptoms (a score of 10-14). This figure doubled for ever-married female (12%) and unmarried female (9%) adolescents. Around 1%-3% of adolescents displayed moderately severe depressive symptoms (a score of 15-19), and less than 1% (0.7% of ever-married females, 0.3% of unmarried females, and 0.1% of unmarried males) displayed severe depressive symptoms (a score of 20-27). Adolescent females scored higher than their male counterparts, indicating the poorer mental health conditions of females compared to males (**Table 12.1**).

³ Frequency distributions of each of the nine core major depression symptoms for ever-married female, unmarried female, and unmarried male adolescents are presented in **Appendix A: Table 12.2**.

Table 12.1. Severity of depressive symptoms

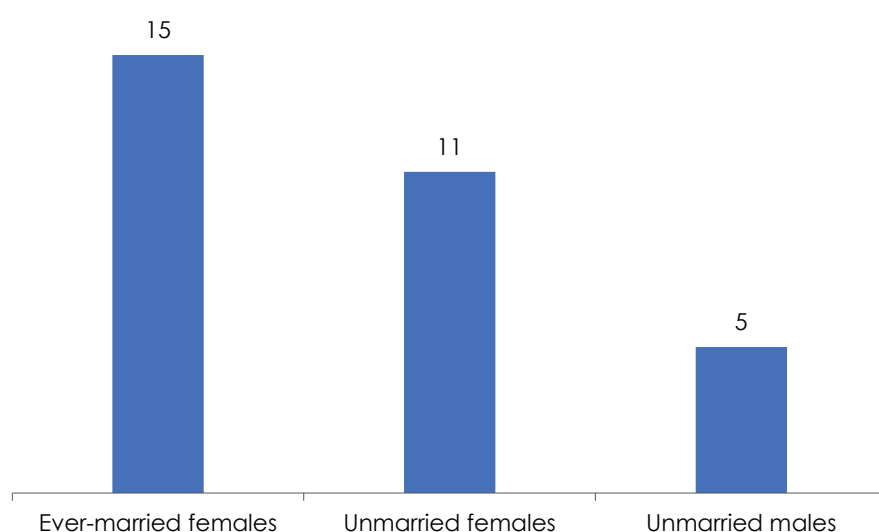
Percent distribution of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by their severity of depressive symptoms in the last two weeks, Bangladesh, 2019-20.

Type of respondent	Severity of depressive symptoms ²					Total	Major depressive disorder ³	Number of adolescents
	No symptom	Mild symptoms	Moderate symptoms	Moderately severe symptoms	Severe symptoms			
Ever-married females	44.8	40.1	11.8	2.7	0.7	100.0	15.2	2,487
Unmarried females	50.7	38.1	9.4	1.5	0.3	100.0	11.2	3,857
Unmarried males	67.8	26.9	4.5	0.7	0.1	100.0	5.3	2,785

² Score: 0- 4 "none;" 5-9 "mild;" 10-14 "moderate;" 15-19 "moderately severe;" 20-27 "severe."

³ Score: ≥ 10 .

The prevalence of MDD was 15% among ever-married females, 11% among unmarried females, and 5% among unmarried males. A sex-based difference in prevalence of MDD was seen among adolescents—ever-married females were three times more likely, and unmarried females were twice as likely, to have MDD compared to unmarried males (**Figure 12.1** and **Table 12.1**).

Figure 12.1. Percentage of adolescents ages 15-19 with major depressive disorder

Pattern by Background Characteristics

- Regional differences were evident, with the Western region having the lowest prevalence of MDD for all three groups of adolescents (**Figure 12.2; Appendix A: Table 12.1**).
- MDD decreased as educational attainment increased among all three groups of adolescents (**Figure 12.3; Appendix A: Table 12.1**).
- For ever-married females, the prevalence of MDD decreased with an increase in wealth quintile. For unmarried females, MDD was highest among those in the lowest and the highest wealth quintiles (14%) (**Appendix A: Table 12.1**).
- Unmarried females in urban areas (13%) were more likely to have MDD than their rural counterparts (10%) (**Appendix A: Table 12.1**).

Figure 12.2. Percent of adolescents ages 15-19 with major depressive disorder, by region

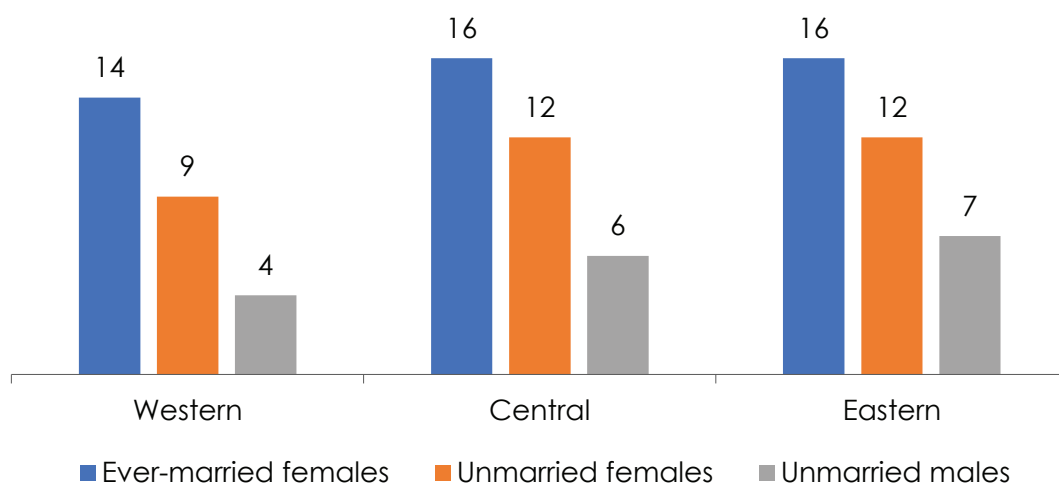
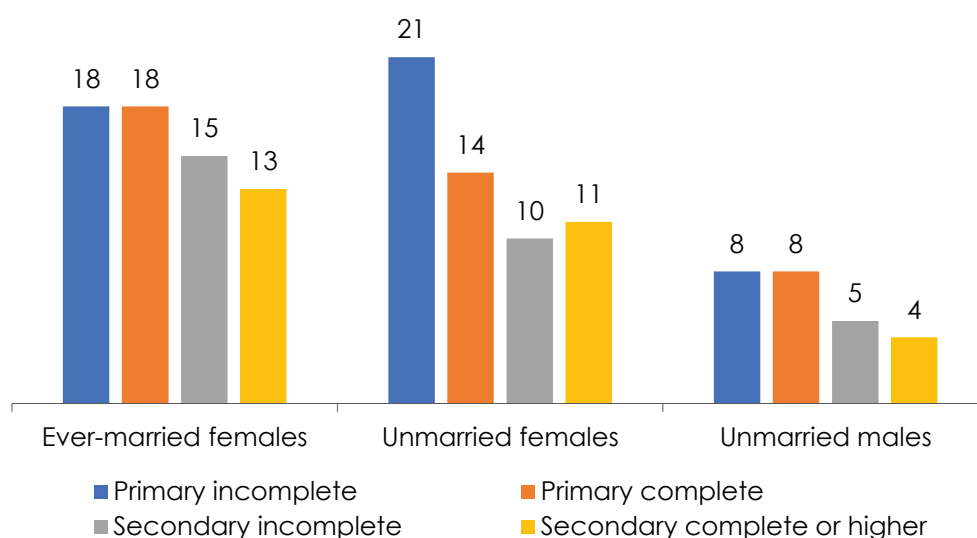


Figure 12.3. Percentage of adolescents ages 15-19 with major depressive disorder, by educational attainment

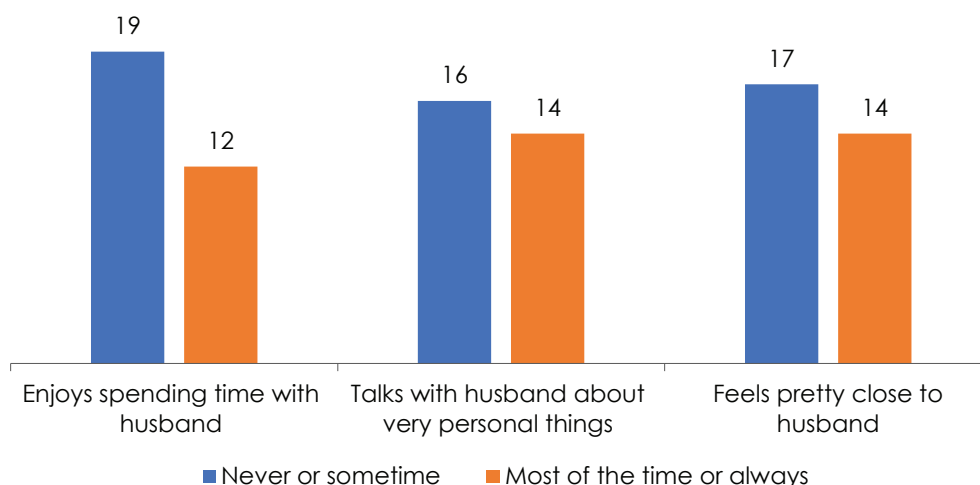


12.2. Variation in Major Depressive Disorder By Adolescents' Connectedness with Family and Friends

Numerous factors contribute to the mental health of adolescents. Connectedness with family/friends holds the potential to protect adolescents against depression by providing a sense of belonging, along with emotional support during times of stress. This section examines variations in MDD by level of connectedness with family members and friends. Refer to chapter 10 for more information on the description of connectedness with family and friends used in this survey.

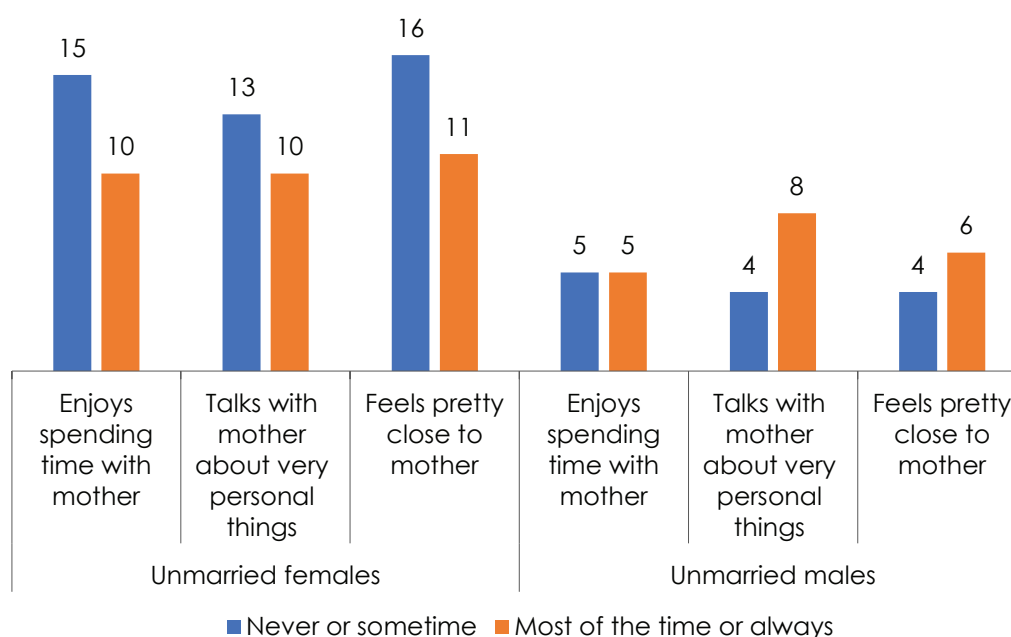
Figure 12.4 shows the prevalence of major depressive disorders among currently married adolescents by level of connectedness with their husbands on selected issues. The findings show that, based on the three measures of connectedness, married adolescents who feel more connected to their husbands are less likely to have MDD. The largest difference in mental health condition appears to be among those who enjoy spending time with husbands most often versus those who do not. Nineteen percent of married adolescents who never or only sometimes reported enjoying spending time with husbands had MDD, compared to 12% of those who reported enjoying time with husbands most of the time or always.

Figure 12.4. Percentage of currently married female adolescents ages 15-19 with major depressive disorder by their level of connectedness with husbands



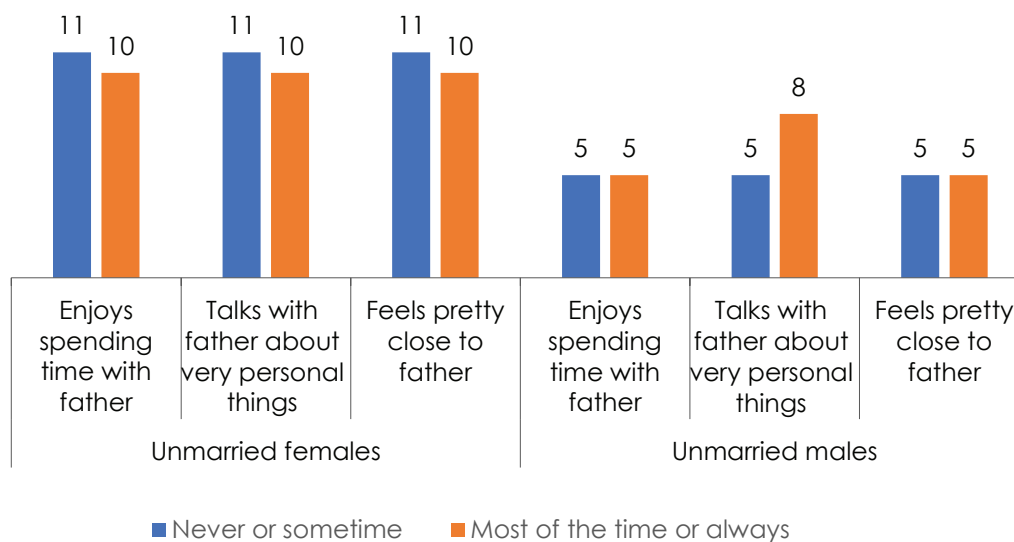
Figures 12.5 and 12.6 show patterns in prevalence of MDD among both unmarried female and male adolescents by the level of adolescents' connectedness with their mothers and fathers. Unmarried females with high levels of connectedness with their mothers were less likely to experience MDD for each of the three measures of connectedness. Unmarried females who reported enjoying spending time with their mothers most of the time or always were less likely to have MDD, compared to those who reported never or sometimes enjoying spending time with their mothers (10% versus 15%, respectively) (Figure 12.5). A similar difference in prevalence of MDD was observed among unmarried females who reported feeling close to their mothers most of the time or always compared to those who reported feeling close never or sometimes (11% versus 16%, respectively). For unmarried males, similar patterns do not hold. There was no difference in prevalence of symptoms of MDD among males who were more connected to their mothers measured by how often they reported enjoying spending time with their mothers. Unmarried males who more often reported feeling close to their mothers, or who more often reported talking with their mothers about very personal matters, showed slightly higher likelihoods of having MDD compared to those who were less connected in these matters.

Figure 12.5. Prevalence of major depressive disorder among unmarried adolescents by their level of connectedness with mother



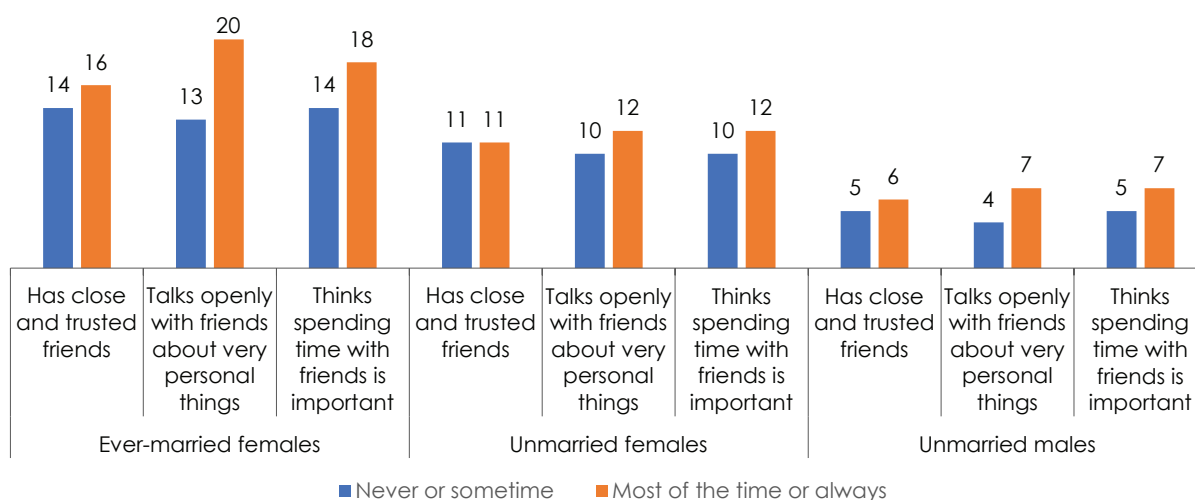
The likelihood of having MDD among unmarried female and male adolescents varied little by their degree of connectedness with their fathers (Figure 12.6).

Figure 12.6. Percentage of unmarried adolescents ages 15-19 with major depressive disorder by their level of connectedness with father



Among ever-married female adolescents, the proportion having MDD was higher for those who were more connected with friends. Similar patterns hold for unmarried adolescents (both females and males), although the differences in proportions of MDD were much smaller among unmarried adolescents who were more connected with friends compared to those who were less connected (Figure 12.7).

Figure 12.7. Percentage of adolescents ages 15-19 with major depressive disorder by their level of connectedness with friends



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2. Background Characteristics

Table 2.2A. Schooling: Ever-married female adolescents

Percent distribution of ever-married female adolescents ages 15-19 by type of school last attended and status of continuation, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Type of school last attended			Current schooling status				Number of adolescents		
	Regular school/college	Madrasah	Didn't attend school	Total	In regular school/college	In madrasah	Discontinued schooling		Didn't attend school	
Residence										
Urban	84.4	12.6	3.0	100.0	14.0	1.2	81.8	3.0	100.0	1,142
Rural	82.6	15.8	1.6	100.0	13.3	2.0	83.1	1.6	100.0	3,784
Region										
Western	85.2	13.4	1.4	100.0	15.6	2.2	80.8	1.4	100.0	2,009
Central	81.8	16.1	2.1	100.0	13.5	1.6	82.8	2.1	100.0	1,947
Eastern	80.9	16.5	2.6	100.0	9.0	1.6	86.8	2.6	100.0	970
Wealth quintile										
Lowest	79.9	17.1	2.9	100.0	5.4	1.3	90.4	2.9	100.0	951
Second	82.0	16.2	1.8	100.0	9.6	1.6	87.0	1.8	100.0	1,067
Middle	83.4	14.3	2.3	100.0	12.3	3.2	82.3	2.3	100.0	1,143
Fourth	85.4	13.1	1.5	100.0	16.3	1.5	80.6	1.5	100.0	1,037
Highest	84.5	14.6	0.9	100.0	27.5	1.4	70.3	0.9	100.0	727
Total	83.0	15.1	1.9	100.0	13.5	1.9	82.8	1.9	100.0	4,926

Table 2.2B. Schooling: Unmarried female adolescents

Percent distribution of unmarried female adolescents ages 15-19 by type of school last attended and status of continuation, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Type of school last attended				Current schooling status				Number of adolescents	
	Regular school/college	Madrasah	Didn't attend school	Total	In regular school/college	In madrasah	Discontinued schooling	Didn't attend school		Total
Residence										
Urban	92.3	6.7	0.9	100.0	77.5	4.5	17.1	0.9	100.0	2,504
Rural	88.1	11.5	0.4	100.0	75.7	9.9	14.0	0.4	100.0	5,296
Region										
Western	93.2	6.6	0.2	100.0	87.7	5.8	6.3	0.2	100.0	2,320
Central	87.7	11.5	0.8	100.0	73.8	9.6	15.8	0.8	100.0	3,031
Eastern	88.1	11.3	0.6	100.0	68.4	8.6	22.3	0.6	100.0	2,448
Wealth quintile										
Lowest	86.5	12.7	0.8	100.0	63.2	9.7	26.4	0.8	100.0	1,087
Second	85.5	13.8	0.7	100.0	71.0	10.8	17.5	0.7	100.0	1,500
Middle	88.9	10.6	0.5	100.0	75.8	9.7	14.1	0.5	100.0	1,707
Fourth	89.5	9.8	0.7	100.0	78.0	7.8	13.5	0.7	100.0	1,655
Highest	94.9	4.8	0.3	100.0	87.2	4.0	8.5	0.3	100.0	1,850
Total	89.5	10.0	0.6	100.0	76.3	8.2	15.0	0.6	100.0	7,800

Table 2.2C. Schooling: Unmarried male adolescents

Percent distribution of unmarried male adolescents ages 15-19 by type of school last attended and status of continuation, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Type of school last attended				Current schooling status				Number of adolescents	
	Regular school/college	Madrasah	Didn't attend school	Total	In regular school/college	In madrasah	Discontinued schooling	Didn't attend school		
Residence										
Urban	92.2	5.8	2.1	100.0	66.5	3.1	28.3	2.1	100.0	1,578
Rural	91.0	7.4	1.6	100.0	66.6	5.5	26.3	1.6	100.0	3,945
Region										
Western	93.2	5.2	1.6	100.0	74.6	3.8	20.0	1.6	100.0	2,050
Central	91.2	7.3	1.5	100.0	65.2	5.4	28.0	1.5	100.0	2,008
Eastern	88.9	8.9	2.2	100.0	57.2	5.4	35.1	2.2	100.0	1,465
Wealth quintile										
Lowest	89.5	7.6	3.0	100.0	56.5	5.0	35.5	3.0	100.0	959
Second	88.8	8.4	2.7	100.0	60.6	5.7	31.0	2.7	100.0	1,173
Middle	92.6	5.7	1.7	100.0	64.7	3.6	30.0	1.7	100.0	1,139
Fourth	91.0	8.2	0.8	100.0	68.5	5.7	25.0	0.8	100.0	1,191
Highest	94.7	4.8	0.5	100.0	82.2	3.9	13.3	0.5	100.0	1,061
Total	91.3	7.0	1.7	100.0	66.6	4.8	26.9	1.7	100.0	5,523

Table 2.4. Working for cash: Ever-married female, unmarried female, and male adolescents

Percentage of ever-married female, unmarried female, and male adolescents ages 15-19 by currently working for cash, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Ever-married females		Unmarried females		Unmarried males	
	Currently working for cash	N	Currently working for cash	N	Currently working for cash	N
Residence						
Urban	7.7	1,142	16.2	2,504	31.5	1,578
Rural	5.7	3,784	10.2	5,296	31.0	3,945
Region						
Western	5.7	2,009	8.9	2,320	29.3	2,050
Central	7.6	1,947	14.9	3,031	29.4	2,008
Eastern	4.1	970	11.7	2,448	36.1	1,465
Wealth quintile						
Lowest	4.5	951	10.4	1,087	42.2	959
Second	5.8	1,067	10.3	1,500	37.5	1,173
Middle	7.4	1,143	12.2	1,707	35.5	1,139
Fourth	7.1	1,037	15.5	1,655	26.5	1,191
Highest	5.4	727	11.5	1,850	14.7	1,061
Total	6.1	4,926	12.1	7,800	31.1	5,523

3. Exposure to Mass Media

Table 3.1A. Ownership of mobile phone: Ever-married female adolescents

Percent distribution of ever-married female adolescents ages 15-19 by ownership of mobile phone according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Ownership of mobile phone				Total	Number of ever-married female adolescents
	Owns smart mobile phone	Owns basic mobile phone	Does not own but has access to household mobile phone	Does not own and has no access to household mobile phone		
Age						
15-17	22.2	23.3	52.5	2.0	100.0	2,159
18-19	29.2	28.5	40.5	1.9	100.0	2,767
Residence						
Urban	30.2	22.5	45.0	2.3	100.0	1,142
Rural	24.9	27.3	46.0	1.8	100.0	3,784
Region						
Western	18.2	29.1	50.5	2.2	100.0	2,009
Central	30.4	26.8	41.1	1.6	100.0	1,947
Eastern	34.1	18.9	45.1	1.9	100.0	970
Wealth quintile						
Lowest	9.9	29.2	56.3	4.6	100.0	951
Second	17.7	29.2	51.5	1.6	100.0	1,067
Middle	24.7	27.3	46.2	1.8	100.0	1,143
Fourth	36.0	24.9	38.3	0.9	100.0	1,037
Highest	48.1	18.1	33.3	0.5	100.0	727
Total	26.2	26.2	45.7	1.9	100.0	4,926

Note: Those who own a smart phone may also have a basic phone.

Table 3.1B. Ownership and access of mobile phone: Unmarried female adolescents

Percent distribution of unmarried female adolescents ages 15-19 by ownership of mobile phone according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Ownership of mobile phone				Total	Number of unmarried female adolescents
	Owns smart mobile phone	Owns basic mobile phone	Does not own but has access to household mobile phone	Does not own and has no access to household mobile phone		
Age						
15-17	8.5	6.5	77.8	7.2	100.0	5,812
18-19	28.9	14.9	52.4	3.7	100.0	1,988
Residence						
Urban	22.7	9.5	62.6	5.2	100.0	2,504
Rural	9.5	8.3	75.4	6.8	100.0	5,296
Region						
Western	10.6	11.8	71.9	5.7	100.0	2,320
Central	17.3	9.0	67.7	6.1	100.0	3,031
Eastern	12.3	5.3	75.2	7.2	100.0	2,448
Wealth quintile						
Lowest	4.0	10.8	72.7	12.6	100.0	1,087
Second	6.2	7.9	77.5	8.4	100.0	1,500
Middle	9.8	7.5	76.9	5.8	100.0	1,707
Fourth	17.8	8.4	69.1	4.8	100.0	1,655
Highest	25.6	9.4	62.3	2.7	100.0	1,850
Total	13.7	8.7	71.3	6.3	100.0	7,800

Note: Those who own a smart phone may also have a basic phone.

Table 3.1C. Ownership of mobile phone: Unmarried male adolescents

Percent distribution of unmarried male adolescents ages 15-19 by ownership of mobile phones according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Ownership of mobile phone				Total	Number of unmarried male adolescents
	Owns smart mobile phone	Owns basic mobile phone	Does not own but has access to household mobile phone	Does not own and has no access to household mobile phone		
Age						
15-17	37.9	25.3	27.7	9.2	100.0	3,726
18-19	61.1	27.4	8.8	2.7	100.0	1,797
Residence						
Urban	55.3	17.8	21.1	5.7	100.0	1,578
Rural	41.5	29.2	21.7	7.6	100.0	3,945
Region						
Western	39.1	34.2	19.3	7.4	100.0	2,050
Central	48.9	23.3	21.3	6.5	100.0	2,008
Eastern	49.5	18.1	25.1	7.3	100.0	1,465
Wealth quintile						
Lowest	28.9	36.5	23.5	11.1	100.0	959
Second	39.8	31.9	20.7	7.6	100.0	1,173
Middle	45.2	26.0	22.2	6.5	100.0	1,139
Fourth	54.8	18.7	20.9	5.6	100.0	1,191
Highest	56.3	17.9	20.8	4.9	100.0	1,061
Total	45.4	26.0	21.6	7.0	100.0	5,523

Note: Those who own a smart phone may also have a basic phone.

Table 3.2A. Use of mobile phone: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 who have access to mobile phone by use of mobile phones on a weekly basis, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Uses mobile phone at least once a week for:							Number of ever-married female adolescents with access to mobile phone
	Phone calls	Messaging	Listening to radio	Internet/Google/YouTube access	Reading newspapers/magazines	FB access	IMO/Viber/WhatsApp/Messenger	
Age								
15-17	96.8	65.4	10.9	18.7	2.9	11.6	20.4	2,116
18-19	97.2	67.8	9.9	24.2	4.0	15.2	27.3	2,715
Residence								
Urban	97.5	65.4	12.5	30.7	3.5	18.5	30.5	1,116
Rural	96.8	67.1	9.7	19.1	3.5	12.1	22.4	3,715
Region								
Western	97.7	72.2	10.9	24.9	4.7	14.9	27.8	1,916
Central	96.0	63.9	11.9	13.8	3.0	11.4	13.5	1,964
Eastern	97.6	61.5	6.0	32.0	2.3	15.6	39.6	951
Education								
Primary incomplete	94.0	43.9	7.2	4.7	0.3	3.4	7.0	547
Primary complete	95.8	54.5	8.7	10.8	0.3	7.1	11.6	425
Secondary incomplete	97.2	67.1	10.6	19.8	2.3	11.5	22.9	2,657
Secondary complete or higher	98.3	80.5	11.8	37.8	8.9	25.2	39.9	1,202
Wealth quintile								
Lowest	94.0	58.7	9.1	4.6	0.8	4.3	6.5	908
Second	97.2	62.2	9.0	12.0	1.5	8.0	13.5	1,049
Middle	96.8	65.0	9.6	20.9	2.9	12.2	23.7	1,123
Fourth	98.3	72.0	11.5	29.3	5.4	18.1	32.7	1,028
Highest	98.9	78.3	13.2	48.3	8.2	29.3	51.1	724
Access to mobile phone								
Owns smart phone	99.6	85.3	10.8	56.3	9.6	31.6	64.8	1,288
Owns basic phone	98.7	79.4	12.8	8.1	1.5	6.6	8.8	1,291
Has access to family phone	94.5	48.8	8.6	9.9	1.2	7.3	10.1	2,253
Total	97.0	66.7	10.3	21.8	3.5	13.6	24.3	4,831

Table 3.2B. Use of mobile phone: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 who have access to mobile phone by use of mobile phones on a weekly basis, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Uses mobile phone at least once a week for:							Number of unmarried female adolescents with access to mobile phone
	Phone call	Messaging	Listening to radio	Internet/Google/YouTube access	Reading newspapers/magazines	FB access	IMO/Viber/WhatsApp/Messenger	
Age								
15-17	86.7	61.4	14.2	18.2	4.3	10.7	18.8	5,395
18-19	93.0	75.0	17.1	32.6	12.7	27.3	34.1	1,914
Residence								
Urban	91.4	68.9	18.1	35.6	11.8	24.7	33.3	2,373
Rural	86.9	63.1	13.5	15.4	4.0	10.4	17.7	4,935
Region								
Western	88.7	67.7	16.7	26.3	7.7	18.5	25.5	2,847
Central	86.4	66.1	16.6	13.3	4.9	12.4	12.1	2,189
Eastern	89.8	60.5	11.3	24.8	6.7	13.2	29.7	2,273
Education								
Primary incomplete	86.6	44.9	12.2	6.7	0.3	4.7	10.0	288
Primary complete	86.6	39.3	12.0	8.2	0.0	4.9	9.5	252
Secondary incomplete	85.7	59.1	13.4	14.7	2.6	6.9	15.8	4,065
Secondary complete or higher	92.6	78.5	17.9	35.8	13.7	29.3	35.8	2,704
Wealth quintile								
Lowest	84.1	57.2	12.3	6.2	1.6	4.9	7.7	951
Second	84.4	58.0	12.2	9.6	1.8	6.6	9.9	1,374
Middle	86.8	63.3	12.5	14.9	3.6	10.4	18.9	1,608
Fourth	90.4	68.5	16.1	24.6	6.2	16.7	26.1	1,576
Highest	93.2	73.0	19.8	43.7	15.6	29.4	41.0	1,800
Access to mobile phone								
Has smart phone	98.4	92.8	21.4	71.5	27.6	61.6	73.6	1,071
Has basic phone	98.2	91.4	25.8	18.0	5.8	18.8	15.7	676
Has access to family phone	85.2	56.4	12.5	12.9	2.6	5.6	13.9	5,561
Total	88.3	65.0	15.0	22.0	6.5	15.0	22.8	7,309

Table 3.2C. Use of mobile phone: Unmarried male adolescents

Percentage of unmarried male adolescents ages 15-19 who have access to mobile phone by use of mobile phones on a weekly basis, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Uses mobile phone at least once a week for:							Number of unmarried male adolescents with access to mobile phone
	Phone calls	Messaging	Listening to radio	Internet/Google/YouTube access	Reading newspapers/magazines	FB access	IMO/Viber/WhatsApp/Messenger	
Age								
15-17	95.4	74.8	27.4	43.1	14.9	44.3	39.8	3,385
18-19	98.4	84.1	31.9	60.9	27.6	64.0	57.4	1,749
Residence								
Urban	96.6	78.6	26.4	61.1	21.3	61.9	55.2	1,487
Rural	96.3	77.8	30.0	44.3	18.4	46.6	41.9	3,647
Region								
Western	96.2	78.2	31.0	53.4	19.9	54.1	48.2	1,878
Central	96.7	80.3	32.5	42.6	20.4	47.0	38.6	1,898
Eastern	96.2	74.6	21.0	52.6	16.6	52.5	52.4	1,358
Education								
Primary incomplete	96.0	63.4	20.9	36.6	4.4	35.1	32.0	614
Primary complete	95.6	67.6	18.6	37.5	8.0	38.2	37.3	311
Secondary incomplete	95.5	76.1	26.3	42.7	12.9	44.0	39.6	2,568
Secondary complete or higher	98.2	88.4	38.0	66.3	36.8	70.5	62.1	1,641
Wealth quintile								
Lowest	95.7	75.7	27.1	26.9	9.7	30.0	23.7	853
Second	95.8	75.4	27.9	39.9	16.1	41.2	36.7	1,084
Middle	97.1	77.0	27.4	48.5	19.0	52.8	47.6	1,065
Fourth	96.6	82.1	32.6	59.9	22.5	60.1	55.4	1,124
Highest	96.6	79.3	29.0	66.8	27.3	67.4	61.6	1,009
Access to mobile phone								
Owens smart phone	98.9	87.2	34.1	82.6	32.6	84.0	79.7	2,509
Owens basic phone	98.3	81.1	31.2	18.0	7.6	23.8	13.1	1,434
Has access to family phone	88.8	54.8	15.4	16.4	5.1	14.5	13.6	1,190
Total	96.4	78.0	28.9	49.2	19.2	51.1	45.8	5,134

Table 3.3A. Exposure to media: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 with exposure to specific media on a weekly basis, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Exposure to media						Number of ever-married female adolescents
	Accesses internet at least once a week using mobile/computers	Listens to radio program at least once a week by mobile/radio	Watch TV at least once a week	Reads magazines and/or newspapers at least once a week by mobile phone/printed copy	Accesses any two media at least once a week	Access to none of the four media at least once a week	
Age							
15-17	18.4	11.0	64.7	6.5	22.1	27.3	2,159
18-19	24.1	10.0	64.5	7.3	24.5	25.8	2,767
Residence							
Urban	30.2	12.5	74.7	7.1	31.8	15.7	1,142
Rural	19.0	9.8	61.5	6.9	20.9	29.7	3,784
Region							
Western	13.8	11.9	65.6	6.5	20.0	28.0	1,947
Central	24.7	11.1	64.8	8.1	25.7	25.7	2,009
Eastern	31.5	6.2	62.1	5.7	26.0	24.9	970
Education							
Primary incomplete	4.4	7.0	60.3	1.3	8.1	36.7	580
Primary complete	10.5	8.4	57.4	2.1	12.9	35.3	439
Secondary incomplete	19.7	10.7	65.2	5.3	21.9	25.7	2,699
Secondary complete or higher	38.1	12.3	67.8	15.1	38.2	20.0	1,209
Wealth quintile							
Lowest	4.4	9.0	39.2	2.6	7.0	52.5	951
Second	11.8	9.1	58.9	3.9	14.1	33.2	1,067
Middle	20.8	9.8	68.6	6.1	21.9	22.5	1,143
Fourth	29.3	11.6	77.4	9.7	31.3	12.9	1,037
Highest	48.7	13.6	81.5	14.5	50.0	8.1	727
Total	21.6	10.4	64.6	7.0	23.5	26.5	4,926

Table 3.3B. Exposure to media: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 with exposure to specific media on a weekly basis, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Exposure to media						Number of unmarried female adolescents
	Accesses internet at least once a week using mobile/ computers	Listens to radio program at least once a week by mobile/ radio	Watches TV at least once a week	Reads magazines and/or newspapers at least once a week by mobile phone/ printed copy	Accesses any two media at least once a week	Accesses none of the four media at least once a week	
Age							
15-17	18.3	13.6	74.2	17.1	30.3	18.4	5,812
18-19	32.6	16.8	74.7	25.9	42.8	13.9	1,988
Residence							
Urban	35.7	17.3	82.4	27.0	47.3	8.5	2,504
Rural	15.4	13.0	70.5	15.8	27.0	21.4	5,296
Region							
Western	13.7	16.1	78.6	19.4	31.2	14.8	3,031
Central	26.0	16.0	73.6	19.9	36.1	17.0	2,320
Eastern	24.7	10.8	71.3	18.7	32.4	19.9	2,448
Education							
Primary incomplete	5.3	10.2	67.4	1.8	10.7	27.0	361
Primary complete	7.3	11.2	65.4	2.2	13.5	29.8	296
Secondary incomplete	14.7	12.7	73.6	14.4	26.9	19.6	4,390
Secondary complete or higher	37.2	17.9	77.4	31.5	49.2	10.9	2,752
Wealth quintile							
Lowest	6.2	11.3	51.1	10.8	15.2	39.9	1,087
Second	9.5	11.5	66.6	10.4	18.8	24.6	1,500
Middle	15.1	12.1	75.4	16.2	26.7	16.1	1,707
Fourth	24.4	15.8	81.5	19.1	37.8	10.9	1,655
Highest	45.4	19.4	86.9	34.9	58.5	4.8	1,850
Total	21.9	14.4	74.4	19.4	33.5	17.3	7,800

Table 3.3C. Exposure to media: Unmarried male adolescents

Percentage of unmarried male adolescents ages 15-19 with exposure to specific media on a weekly basis, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Exposure to media						Number of unmarried male adolescents
	Accesses internet at least once a week using mobile/computers	Listens to radio program at least once a week by mobile/radio	Watches TV at least once a week	Reads magazines and/or newspapers at least once a week by mobile phone/printed copy	Accesses any two media at least once a week	Access to none of the four media at least once a week	
Age							
15-17	40.7	25.2	77.9	30.2	52.9	12.2	3,726
18-19	60.8	31.2	79.7	44.6	68.1	7.2	1,797
Residence							
Urban	60.0	25.1	82.5	38.1	65.0	6.4	1,578
Rural	42.2	28.0	76.9	33.6	55.0	12.3	3,945
Region							
Western	41.5	30.3	80.1	39.6	58.5	10.0	2,008
Central	51.0	29.3	78.4	34.7	59.8	10.3	2,050
Eastern	50.1	19.7	76.2	28.7	54.3	11.8	1,465
Education							
Primary incomplete	32.4	18.4	72.8	6.2	37.2	19.8	701
Primary complete	34.5	16.9	74.5	14.4	37.2	14.3	343
Secondary incomplete	40.3	24.3	79.5	30.1	53.4	11.1	2,817
Secondary complete or higher	68.0	37.8	80.0	59.5	78.3	5.2	1,661
Wealth quintile							
Lowest	24.8	24.6	65.0	24.9	39.3	21.2	959
Second	38.2	25.8	75.4	28.8	49.8	13.7	1,173
Middle	46.4	25.9	82.6	36.0	58.0	8.8	1,139
Fourth	57.7	31.0	83.7	40.1	68.1	6.1	1,191
Highest	66.7	28.0	83.7	43.8	71.8	4.6	1,061
Total	47.2	27.2	78.5	34.9	57.8	10.6	5,523

Table 3.4A. Exposure to adolescent related programs/materials: Ever married female adolescents

Percentage of ever-married female adolescents ages 15-19 exposed to adolescent-related programs/materials in the last three months through specific media, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	In the last three months:					Number of ever-married female adolescents
	Read online any adolescent-related article	Read in print media any adolescent-related news/articles, newspaper	Listened to any adolescent-related program on the radio	Watched adolescent-related program on TV	Exposure to any adolescent-related programs or articles through any of the four mediums	
Age						
15-17	2.0	1.4	0.1	13.3	15.4	2,159
18-19	2.3	1.4	0.2	13.7	24.5	2,767
Residence						
Urban	3.0	2.2	0.1	17.4	19.8	1,142
Rural	1.9	1.2	0.2	12.3	14.1	3,784
Region						
Western	2.1	1.1	0.1	11.4	13.3	1,947
Central	2.2	1.5	0.3	15.5	17.5	2,009
Eastern	2.2	2.1	0.1	13.6	15.5	970
Education						
Primary incomplete	0.8	0.2	0.1	8.8	9.4	580
Primary complete	0.8	0.0	0.2	9.4	10.3	439
Secondary incomplete	1.5	1.2	0.2	13	14.6	2,699
Secondary complete or higher	5.0	3.2	0.2	18.3	22.1	1,209
Wealth quintile						
Lowest	0.3	0.2	0.3	5.5	6.1	951
Second	1.9	1.0	0.1	11.3	13.3	1,067
Middle	1.4	1.3	0.1	14.2	15.5	1,143
Fourth	3.5	1.9	0.3	17.7	20.4	1,037
Highest	4.4	3.3	0.0	19.9	23.5	727
Total	2.2	1.4	0.2	13.5	15.4	4,926

Table 3.4B. Exposure to adolescent-related programs/materials: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 exposed to adolescent-related programs/materials in the last three months through specific media, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	In the last three months:					Number of unmarried female adolescents
	Read online any adolescent-related article	Read in print media any adolescent-related news/articles, newspaper	Listened to any adolescent-related program on the radio	Watched an adolescent-related program on TV	Exposure to any adolescent-related programs or articles through any of the four mediums	
Age						
15-17	3.3	6.1	0.3	19.5	23.6	5,812
18-19	6.6	7.8	0.2	21.0	27.5	1,988
Residence						
Urban	7.2	9.9	0.2	23.1	30.2	2,504
Rural	2.7	5.0	0.3	18.3	21.9	5,296
Region						
Western	3.3	6.0	0.2	16.9	21.8	3,031
Central	3.7	6.8	0.5	22.8	27.3	2,320
Eastern	5.7	7.0	0.1	20.7	25.4	2,448
Education						
Primary incomplete	0.4	0.0	0.3	9.8	20.6	361
Primary complete	0.0	1.6	0.0	12.7	13.9	296
Secondary incomplete	2.5	5.0	0.2	18.3	21.8	4,390
Secondary complete or higher	7.7	10.4	0.3	24.4	32.0	2,752
Wealth quintile						
Lowest	1.0	3.6	0.3	9.8	12.5	1,087
Second	1.9	2.8	0.2	13.9	16.6	1,500
Middle	3.2	5.5	0.2	19.0	22.9	1,707
Fourth	4.2	5.8	0.3	25.3	29.0	1,655
Highest	8.6	13.0	0.2	26.5	35.6	1,850
Total	4.1	6.6	0.3	19.8	24.6	7,800

Table 3.4C. Exposure to adolescent-related programs/materials: Unmarried male adolescents

Percentage of unmarried male adolescents ages 15-19 exposed to adolescent-related programs/materials in the last three months through specific media, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	In the last three months:					Number of unmarried male adolescents
	Read online any adolescent-related article	Read in print media any adolescent-related news/articles	Listened to any adolescent-related program on the radio	Watched any adolescent-related program on TV	Exposure to any adolescent-related programs or articles through any of the four mediums	
Age						
15-17	3.3	4.2	0.3	15.6	19.2	3,726
18-19	3.9	6.6	0.2	14.9	20.1	1,797
Residence						
Urban	4.0	5.8	0.1	14.4	18.8	1,578
Rural	3.3	4.7	0.4	15.8	19.7	3,945
Region						
Western	4.0	4.5	0.4	15.0	19.4	2,008
Central	3.8	6.8	0.3	19.3	23.9	2,050
Eastern	2.4	3.2	0.1	10.6	13.4	1,465
Education						
Primary incomplete	0.5	0.4	0.0	8.9	9.1	701
Primary complete	1.0	2.1	0.3	11.2	13.8	343
Secondary incomplete	2.8	4.1	0.3	15.6	19.1	2,817
Secondary complete or higher	6.4	9.1	0.4	18.7	25.6	1,661
Wealth quintile						
Lowest	1.4	3.8	0.4	10.4	13.8	959
Second	2.3	2.9	0.2	12.8	15.6	1,173
Middle	2.8	5.5	0.4	16.5	20.2	1,139
Fourth	4.1	4.8	0.5	18.3	22.8	1,191
Highest	6.7	8.1	0.2	18.3	24.5	1,061
Total	3.5	5.0	0.3	15.4	19.5	5,523

4. Menstruation

Table 4.2A. Knowledge of menstruation: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 by their knowledge of menstruation, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Had knowledge of menstruation before onset of menstruation	Number of ever-married female adolescents who experienced menstruation	Thinks knowledge was adequate among those who had knowledge	Number of ever-married female adolescents who had prior knowledge on menstruation
Age				
15-17	24.3	1,090	41.5	265
18-19	22.7	1,349	39.7	307
Age at first menstruation				
<13	18.0	844	44.7	152
13	21.4	1,139	40.6	243
>=14	38.7	456	36.9	177
Residence				
Urban	20.7	553	42.6	114
Rural	24.3	1,886	40.1	458
Region				
Western	27.2	1,019	39.1	277
Central	21.2	966	43.3	205
Eastern	19.7	454	38.8	90
Educational attainment				
Primary incomplete ¹	15.7	278	39.6	44
Primary complete	21.5	205	41.2	44
Secondary incomplete	21.8	1,343	41.9	292
Secondary complete or higher	31.3	612	38.6	191
Wealth quintile				
Lowest	22.7	454	41.5	103
Second	21.5	534	37.6	115
Middle	22.7	570	40.2	129
Fourth	26.5	528	40.9	140
Highest	24.0	352	43.6	84
Total	23.4	2,439	40.6	572

¹ Includes no education.

Table 4.2B. Knowledge of menstruation: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 by their knowledge of menstruation, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Had knowledge of menstruation before onset of menstruation	Number of unmarried female adolescents who experienced menstruation	Thinks knowledge was adequate among those who had knowledge	Number of unmarried female adolescents who had prior knowledge on menstruation
Age				
15-17	29.3	2,900	36.8	849
18-19	31.3	1,034	36.3	323
Age at first menstruation				
<13	23.3	1,280	35.2	299
13	29.7	1,620	34.1	481
>=14	38.0	1,034	40.8	393
Residence				
Urban	32.1	1,246	40.4	400
Rural	28.7	2,689	34.7	773
Region				
Western	35.9	1,125	32.7	404
Central	29.2	1,557	38.6	455
Eastern	25.0	1,252	38.8	313
Educational attainment				
Primary incomplete ¹	19.5	164	27.6	32
Primary complete	13.4	140	57.7	19
Secondary incomplete	27.4	2,264	37.5	620
Secondary complete or higher	36.7	1,367	35.3	502
Wealth quintile				
Lowest	29.4	528	38.0	155
Second	27.6	791	31.1	218
Middle	26.6	856	34.3	228
Fourth	28.5	826	34.9	236
Highest	36.0	934	42.5	336
Total	29.8	3,935	36.6	1,173

¹ Includes no education.

Table 4.3A. Knowledge on menstruation through mass media: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 by knowledge on menstruation through mass media, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Knowledge on menstruation through mass media				Number of ever-married female adolescents
	TV/ radio	Textbooks/ books	Newspaper/ magazine	Internet	
Age					
15-17	20.3	66.3	4.4	10.7	1,090
18-19	25.0	64.0	3.8	11.7	1,349
Residence					
Urban	27.8	61.6	4.9	14.6	553
Rural	21.4	66.0	3.8	10.3	1,886
Region					
Western	23.6	68.5	4.5	10.4	1,019
Central	21.6	63.8	3.9	11.4	966
Eastern	23.9	59.7	3.5	12.9	454
Educational attainment					
Primary incomplete ¹	11.0	9.3	0.4	1.3	278
Primary complete	16.2	31.9	1.2	3.8	205
Secondary incomplete	20.8	70.0	3.7	8.2	1,343
Secondary complete or higher	35.0	90.4	7.5	24.9	612
Wealth quintile					
Lowest	13.7	52.9	2.1	4.0	454
Second	17.9	56.5	4.6	5.7	534
Middle	23.7	69.0	3.7	11.4	570
Fourth	27.8	71.6	2.9	14.5	528
Highest	33.6	77.1	8.2	24.0	352
Total	22.9	65.0	4.1	11.3	2,439

¹ Includes no education.

Table 4.3B. Knowledge on menstruation through mass media: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 by knowledge on menstruation through mass media, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Knowledge on menstruation through mass media				Number of unmarried female adolescents
	TV/ radio	Textbooks/ books	Newspaper/ magazine	Internet	
Age					
15-17	25.3	80.5	5.4	9.8	2,907
18-19	40.7	83.9	10.5	25.2	1,036
Residence					
Urban	36.1	79.5	10.2	22.7	1,246
Rural	26.2	82.3	5.1	9.7	2,696
Region					
Western	28.9	84.9	6.0	10.8	1,130
Central	29.0	80.9	7.1	14.8	1,557
Eastern	30.2	78.9	6.8	15.4	1,255
Educational attainment					
Primary incomplete ¹	15.0	14.3	0.7	2.1	167
Primary complete	8.1	28.6	.9	1.5	140
Secondary incomplete	23.7	83.2	4.3	7.4	2,269
Secondary complete or higher	42.6	92.1	12.0	27.2	1,367
Wealth quintile					
Lowest	16.5	72.3	3.9	4.3	532
Second	20.8	77.4	3.9	5.7	793
Middle	27.9	82.6	5.0	9.8	857
Fourth	33.3	84.7	4.9	14.0	827
Highest	41.7	85.9	13.8	29.8	934
Total	29.3	81.4	6.7	13.9	3,943

¹ Includes no education.

Table 4.4A. Hygienic menstrual practices: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 by use of sanitary materials, appropriate cleansing of reusable products, frequency of changing sanitary materials, and hygienic practices, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Use of sanitary pad or any disposable product	Use of cloths/ reusable products and washing with water and soap/ detergent/soda/ any antiseptic solutions	Change of sanitary material/ disposable product at least 4 times a day	Hygienic menstrual practices ¹	Number of ever-married female adolescents
Age					
15-17	64.8	32.7	10.8	10.6	1,090
18-19	63.0	34.6	8.3	8.2	1,349
Residence					
Urban	69.9	28.0	11.1	10.9	553
Rural	62.0	35.4	8.9	8.8	1,886
Region					
Western	64.3	33.1	9.9	9.7	1,019
Central	61.8	35.7	8.5	8.3	966
Eastern	67.1	30.9	10.5	10.5	454
Educational attainment					
Primary incomplete*	30.0	65.2	8.8	8.8	278
Primary complete	39.8	52.9	7.9	7.4	205
Secondary incomplete	65.3	32.8	8.3	8.1	1,343
Secondary complete or higher	84.0	15.0	12.7	12.7	612
Wealth quintile					
Lowest	42.1	54.0	9.4	9.2	454
Second	50.3	46.1	8.7	8.5	534
Middle	67.2	31.3	8.1	8.1	570
Fourth	78.5	20.0	10.2	10.2	528
Highest	84.8	13.5	11.5	11.2	352
Total	63.8	33.7	9.4	9.3	2,439

* Includes no education.

¹ Hygienic menstrual practices are defined as follows: "Use of sanitary pad OR any disposable product used during menstrual period + change of sanitary material/disposable product at least four times a day;" OR "Use of cloths/ reusable products + washing with water and soap/detergent/soda/any antiseptic solutions + change of sanitary material at least four times a day."

Table 4.4B. Hygienic menstrual practices: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 by use of sanitary materials, appropriate cleansing of reusable products, frequency of changing sanitary materials, and hygienic practices, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Use of sanitary pad or any disposable product	Use of cloths/ reusable products and washing with water and soap/ detergent/soda/ any antiseptic solutions	Change of sanitary material/ disposable product at least 4 times a day	Hygienic menstrual practices ¹	Number of unmarried female adolescents who experienced menstruation
Age					
15-17	65.0	32.5	11.4	11.2	2,900
18-19	72.5	26.0	13.2	13.0	1,034
Residence					
Urban	72.3	25.5	13.5	13.2	1,246
Rural	64.5	33.2	11.1	11.0	2,689
Region					
Western	74.2	24.4	12.4	12.3	1,125
Central	65.4	32.0	11.4	11.1	1,557
Eastern	62.4	35.0	11.9	11.8	1,252
Educational attainment					
Primary incomplete*	33.0	61.7	10.6	10.6	164
Primary complete	25.2	70.4	9.0	8.5	140
Secondary incomplete	63.4	33.8	10.8	10.6	2,264
Secondary complete or higher	81.2	18.0	14.0	13.9	1,367
Wealth quintile					
Lowest	43.7	52.9	8.5	8.3	528
Second	53.5	43.7	10.1	9.8	791
Middle	65.6	32.1	10.4	10.4	856
Fourth	74.1	23.6	12.7	12.4	826
Highest	86.5	12.6	15.9	15.8	934
Total	67.0	30.8	11.9	11.7	3,935

* Includes no education.

¹ Hygienic menstrual practices are defined as follows: "Use of sanitary pad OR any disposable product used during menstrual period + change of sanitary material/disposable product at least four times a day;" OR "Use of cloths/ reusable products + washing with water and soap/detergent/soda/any antiseptic solutions + change of sanitary material at least four times a day."

Table 4.5A. School attendance during menstruation: Ever-married female adolescents

Percentage of school-going ever-married female adolescents ages 15-19 whose schools were open during their last menstruation, by their school attendance, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Number of days of school missed				Total	Mean number of days of school missed	Percentage who missed school during last menstrual cycle	Number of school-going ever-married adolescents whose schools were open during their last menstruation
	0 days	1 day	2-3 days	4 or more days				
Age								
15-17	77.2	5.2	9.4	8.3	100.0	0.7	22.8	117
18-19	71.4	10.4	6.0	12.1	100.0	0.9	28.6	105
Residence								
Urban	70.3	13.3	8.5	7.9	100.0	0.8	29.7	43
Rural	75.5	6.3	7.6	10.6	100.0	0.8	24.5	179
Region								
Western	77.0	6.7	6.7	9.6	100.0	0.7	23.0	128
Central	72.8	6.7	10.0	10.5	100.0	0.9	27.2	73
Eastern	65.0	16.6	6.7	11.7	100.0	0.9	35.0	21
Educational attainment								
Primary incomplete ¹	-	-	--	-	-	-	-	-
Primary complete	-	-	-	-	-	-	-	2
Secondary incomplete	79.6	2.9	8.1	9.5	100.0	0.7	20.4	75
Secondary complete or higher	72.2	10.2	7.0	10.5	100.0	0.8	27.8	145
Wealth quintile								
Lowest	60.3	6.6	13.4	19.8	100.0	1.3	39.7	16
Second	74.8	3.2	8.7	13.3	100.0	1.1	25.2	33
Middle	74.5	6.9	7.0	11.7	100.0	0.7	25.5	53
Fourth	75.7	7.0	11.0	6.3	100.0	0.6	24.3	64
Highest	77.1	12.1	2.8	8.1	100.0	0.7	22.9	55
Total	74.5	7.6	7.8	10.1	100.0	0.8	25.5	222

¹ Includes no education.

Table 4.5B. School attendance during menstruation: Unmarried female adolescents

Percentage of school-going unmarried female adolescents ages 15-19 whose schools were open during their last menstruation, by their school attendance, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Number of days of school missed				Total	Mean number of days of school missed	Percentage who missed school during last menstrual cycle	Number of school-going unmarried adolescents whose schools were open during their last menstruation
	0 days	1 day	2-3 days	4 or more days				
Age								
15-17	75.9	6.7	12.5	4.9	100.0	0.6	24.1	1,849
18-19	75.9	7.1	11.7	5.3	100.0	0.7	24.1	463
Residence								
Urban	75.6	7.6	12.8	4.0	100.0	0.6	24.4	657
Rural	76.0	6.5	12.2	5.4	100.0	0.7	24.0	1,655
Region								
Western	75.9	5.4	12.9	5.8	100.0	0.7	24.1	813
Central	78.2	7.4	10.0	4.5	100.0	0.6	21.8	868
Eastern	72.6	7.7	15.0	4.7	100.0	0.7	27.4	632
Educational attainment								
Primary incomplete ¹	81.9		3.8	14.2	100.0	1.1	18.1	16
Primary complete	61.5	20.7	10.2	7.5	100.0	0.9	38.5	23
Secondary incomplete	75.4	6.3	13.5	4.8	100.0	0.6	24.6	1,451
Secondary complete or higher	76.9	7.3	10.6	5.1	100.0	0.6	23.1	822
Wealth quintile								
Lowest	80.0	2.7	13.4	3.9	100.0	0.6	20.0	282
Second	74.3	6.3	13.7	5.7	100.0	0.7	25.7	450
Middle	74.0	7.0	12.6	6.4	100.0	0.7	26.0	512
Fourth	75.3	8.1	12.8	3.8	100.0	0.6	24.7	489
Highest	77.3	7.8	10.3	4.7	100.0	0.6	22.7	580
Total	75.9	6.8	12.4	5.0	100.0	0.6	24.1	2,313

¹ Includes no education.

Table 4.6A. Misconceptions about menstruation: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 who agreed with various statements on misconceptions about menstruation, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Percent of ever-married female adolescents who agreed that:			
	Menstrual blood is impure	One cannot eat sour during menstruation	During menstruation one cannot do physical activity	Number of ever-married female adolescents
Age				
15-17	86.7	68.8	58.2	1,090
18-19	86.3	63.3	58.9	1,349
Residence				
Urban	86.6	60.8	54.3	553
Rural	86.4	67.2	59.8	1,886
Region				
Western	82.6	67.0	56.4	1,019
Central	89.6	67.1	60.4	966
Eastern	88.5	60.3	59.7	454
Educational attainment				
Primary incomplete ¹	85.2	69.4	67.5	278
Primary complete	82.9	69.8	58.9	205
Secondary incomplete	86.2	68.0	58.5	1,343
Secondary complete or higher	88.8	58.0	54.7	612
Wealth quintile				
Lowest	85.2	70.7	61.8	454
Second	86.5	68.8	61.1	534
Middle	85.5	66.8	58.5	570
Fourth	88.0	61.3	54.6	528
Highest	87.4	59.9	56.9	352
Total	86.5	65.8	58.6	2,439

¹ Includes no education.

Table 4.6B. Misconceptions about menstruation: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 who agreed with various statements on misconceptions about menstruation, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Percent of unmarried female adolescents who agreed that:			Number of unmarried female adolescents
	Menstrual blood is impure	Cannot eat sour during menstruation	Cannot do physical activity during menstruation	
Age				
15-17	85.2	61.1	53.4	2,907
18-19	84.0	53.7	50.1	1,036
Residence				
Urban	82.1	53.3	49.8	1,246
Rural	86.1	61.8	53.8	2,696
Region				
Western	84.7	59.8	47.0	1,130
Central	87.0	62.1	53.4	1,557
Eastern	82.3	54.9	56.4	1,255
Educational attainment				
Primary incomplete ¹	79.3	62.1	49.8	167
Primary complete	86.7	73.6	60.5	140
Secondary incomplete	85.6	60.8	54.6	2,269
Secondary complete or higher	84.1	54.6	48.6	1,367
Wealth quintile				
Lowest	86.0	66.3	57.0	532
Second	87.8	64.5	51.5	793
Middle	84.6	58.6	57.2	857
Fourth	85.3	58.3	53.0	827
Highest	81.5	51.8	46.2	934
Total	84.9	59.1	52.5	3,943

¹ Includes no education.

6. Family Planning

Table 6.4A. Knowledge of contraceptive methods: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 who heard of specific methods, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Heard of:			At least one of the three methods	Number of adolescents
	Pill	Condom	ECP		
Age					
15-17	68.3	35.0	7.5	71.2	5,812
18-19	81.9	53.7	14.6	84.2	1,988
Residence					
Urban	72.0	45.4	13.4	75.5	2,504
Rural	71.6	37.1	7.4	74.0	5,296
Region					
Western	79.6	49.2	10.5	82.9	2,320
Central	71.0	41.5	9.7	74.3	3,031
Eastern	65.3	28.6	7.7	66.9	2,448
Educational attainment					
Primary incomplete ¹	55.4	18.2	4.4	57.0	361
Primary complete	63.9	20.7	5.1	65.7	296
Secondary incomplete	66.5	31.2	6.7	69.3	4,390
Secondary complete or higher	83.2	58.3	14.6	86.1	2,752
Wealth quintile					
Lowest	71.7	28.5	5.8	73.4	1,087
Second	72.2	32.0	4.2	73.8	1,500
Middle	70.6	35.0	7.1	72.7	1,707
Fourth	70.2	43.0	10.1	73.6	1,655
Highest	73.8	54.1	16.9	78.3	1,850
Total	71.8	39.7	9.3	74.5	7,800

Note: Questions were probed for pill, condom, and ECP.

¹ Includes a few cases with no education.

Table 6.4B. Knowledge of contraceptive methods: Unmarried male adolescents

Percentage of unmarried male adolescents ages 15-19 who have heard of specific methods, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Heard of:			At least one of the three methods	Number of adolescents
	Pill	Condom	ECP		
Age					
15-17	56.2	78.1	16.0	80.3	3,726
18-19	69.7	90.2	26.5	92.0	1,797
Residence					
Urban	56.6	82.1	24.1	83.7	1,578
Rural	62.2	82.1	17.6	84.3	3,945
Region					
Western	71.3	88.1	19.3	90.6	2,050
Central	61.2	83.7	20.3	85.3	2,008
Eastern	44.7	71.4	18.4	73.4	1,465
Educational attainment					
Primary incomplete ¹	45.7	68.4	9.5	70.4	701
Primary complete	45.8	69.8	10.7	73.0	343
Secondary incomplete	56.5	79.7	15.1	82.4	2,817
Secondary complete or higher	76.9	94.3	32.7	95.2	1,661
Wealth quintile					
Lowest	61.8	81.3	12.7	84.6	959
Second	60.2	78.3	15.9	81.0	1,173
Middle	61.9	82.1	19.3	83.5	1,139
Fourth	60.2	83.6	20.6	85.3	1,191
Highest	59.0	85.2	28.1	86.6	1,061

Note: Questions were probed for pill, condom, and ECP.

¹ Includes a few cases with no education.

7. Nutrition and Dietary Diversity

Table 7.1A. Stunting (height-for-age): Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 according to height-for-age, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Stunted (height-for-age)		Not stunted	Number of adolescents
	Percentage below -3 SD ²	Percentage below -2 SD ³	Percentage above -2 SD ⁴	
Age				
15	5.7	33.2	66.8	174
16	7.9	34.2	65.8	350
17	4.5	31.3	68.7	540
18	6.0	36.5	63.5	690
19	6.7	40.2	59.8	634
Residence				
Urban	7.7	37.5	62.5	537
Rural	5.6	35.2	64.8	1,852
Region				
Western	5.1	33.8	66.2	1,002
Central	6.8	37.3	62.7	946
Eastern	6.8	36.8	63.2	440
Educational attainment				
Primary incomplete ¹	15.6	52.7	47.3	269
Primary complete	8.3	44.7	55.3	193
Secondary incomplete	4.8	34.7	65.3	1,323
Secondary complete or higher	4.0	27.5	72.5	603
Wealth quintile				
Lowest	10.4	41.6	58.4	441
Second	6.6	38.8	61.2	521
Middle	3.3	38.1	61.9	560
Fourth	5.5	32.7	67.3	519
Highest	5.2	24.3	75.7	347
Total	6.1	35.7	64.3	2,388

Note: The tables are based on cases with valid measures of height and weight.

¹ Includes a few cases with no education.

² Includes adolescents who are below -3 standard deviations from WHO standard population median.

³ Includes adolescents who are below -2 standard deviations from WHO standard population median.

⁴ Includes adolescents who are above -2 standard deviations from WHO standard population median.

Table 7.1B. Stunting (height-for-age): Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 according to height-for-age, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Stunted (height-for-age)		Not stunted	Number of adolescents
	Percentage below -3 SD ²	Percentage below -2 SD ³	Percentage above -2 SD ⁴	
Age				
15	2.2	26.3	73.7	1,073
16	5.2	31.3	68.7	1,041
17	4.2	34.5	65.5	754
18	5.0	32.7	67.3	611
19	8.6	38.6	61.4	400
Residence				
Urban	3.3	30.4	69.6	1,225
Rural	5.1	32.0	68.0	2,654
Region				
Western	3.9	26.3	73.7	1,114
Central	5.6	35.2	64.8	1,534
Eastern	3.7	31.6	68.4	1,232
Educational attainment				
Primary incomplete ¹	11.4	44.0	56.0	161
Primary complete	6.4	57.1	42.9	136
Secondary incomplete	3.9	30.2	69.8	2,237
Secondary complete or higher	4.5	29.6	70.4	1,346
Wealth quintile				
Lowest	4.8	38.8	61.2	521
Second	6.9	35.3	64.7	781
Middle	5.1	33.2	66.8	845
Fourth	3.5	30.8	69.2	818
Highest	2.7	23.2	76.8	914
Total	4.5	31.5	68.5	3,879

Note: The tables are based on cases with valid measures of height and weight.

¹ Includes a few cases with no education.

² Includes adolescents who are below -3 standard deviations from WHO standard population median.

³ Includes adolescents who are below -2 standard deviations from WHO standard population median.

⁴ Includes adolescents who are above -2 standard deviations from WHO standard population median.

Table 7.1C. Stunting (height-for-age): Unmarried male adolescents

Percentage of unmarried male adolescents ages 15-19 according to height-for-age, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Stunted (height-for-age)		Not stunted	Number of adolescents
	Percentage below -3 SD ²	Percentage below -2 SD ³	Percentage above -2 SD ⁴	
Age				
15	2.9	13.0	87.0	536
16	2.3	17.9	82.1	647
17	3.4	23.4	76.6	612
18	4.9	29.4	70.6	557
19	7.5	31.3	68.7	349
Residence				
Urban	3.1	20.1	79.9	737
Rural	4.2	23.1	76.9	1,965
Region				
Western	4.1	22.8	77.2	1,022
Central	3.7	21.8	78.2	976
Eastern	3.7	22.1	77.9	704
Educational attainment				
Primary incomplete ¹	8.9	38.1	61.9	330
Primary complete	6.2	27.0	73.0	167
Secondary incomplete	3.3	19.7	80.3	1395
Secondary complete or higher	2.3	19.2	80.8	810
Wealth quintile				
Lowest	6.2	31.1	68.9	458
Second	4.7	27.5	72.5	623
Middle	3.2	21.5	78.5	550
Fourth	2.8	18.0	82.0	565
Highest	2.5	13.5	86.5	505
Total	3.9	22.3	77.7	2,702

Note: The tables are based on cases with valid measures of height and weight.

¹ Includes a few cases with no education.

² Includes adolescents who are below -3 standard deviations from WHO standard population median.

³ Includes adolescents who are below -2 standard deviations from WHO standard population median.

⁴ Includes adolescents who are above -2 standard deviations from WHO standard population median.

Table 7.2A. Nutritional status: Ever-married female adolescents

Percent distribution of ever-married female adolescents ages 15-19 classified by body mass index (using WHO 2007 cut-off points by age and sex), according to background characteristics, Bangladesh, 2019-20.

Background characteristic	Body mass index ¹			Total	Number of adolescents
	Thin (Z-score < -2SD)	Normal (Z-score \geq -2SD and \leq 1 SD)	Over-weight (Z-score > 1SD)		
Age					
15-17	4.3	80.3	15.3	100.0	875
18-19	3.1	80.6	16.4	100.0	1,143
Residence					
Urban	1.8	76.5	21.6	100.0	442
Rural	4.1	81.6	14.3	100.0	1,576
Region					
Western	3.9	82.9	13.2	100.0	862
Central	3.6	79.5	16.8	100.0	797
Eastern	2.9	76.8	20.4	100.0	359
Educational attainment					
Primary incomplete ²	3.6	83.6	12.8	100.0	229
Primary complete	6.6	80.3	13.0	100.0	165
Secondary incomplete	3.2	81.0	15.8	100.0	1,116
Secondary complete or higher	3.6	77.9	18.5	100.0	507
Wealth quintile					
Lowest	4.1	87.2	8.6	100.0	363
Second	4.3	84.9	10.8	100.0	449
Middle	4.0	79.7	16.3	100.0	461
Fourth	2.6	78.8	18.6	100.0	444
Highest	2.9	69.4	27.7	100.0	301
Total	3.6	80.5	15.9	100.0	2,018

¹ Excludes pregnant women.

² Used WHO 2007 cut-off points by age and sex.

Table 7.2B. Nutritional status: Unmarried female adolescents

Percent distribution of unmarried female adolescents ages 15-19 classified by body mass index (using WHO 2007 cut-off points by age and sex), according to background characteristics, Bangladesh, 2019-20.

Background characteristic	Body mass index ¹			Total	Number of adolescents
	Thin (Z-score < -2SD)	Normal (Z-score \geq -2SD and \leq 1 SD)	Over-weight (Z-score > 1SD)		
Age					
15-17	7.5	82.2	10.2	100.0	2,868
18-19	7.7	82.6	9.8	100.0	1,012
Residence					
Urban	7.8	78.6	13.6	100.0	1,227
Rural	7.5	84.0	8.5	100.0	2,653
Region					
Western	8.4	82.0	9.7	100.0	1,112
Central	6.7	81.3	12.0	100.0	1,536
Eastern	7.9	84.0	8.1	100.0	1,232
Educational attainment					
Primary incomplete ²	10.0	83.9	6.1	100.0	162
Primary complete	8.9	85.1	6.0	100.0	136
Secondary incomplete	7.6	82.3	10.1	100.0	2,237
Secondary complete or higher	7.1	81.9	10.9	100.0	1,345
Wealth quintile					
Lowest	9.9	84.6	5.5	100.0	521
Second	7.2	83.9	8.8	100.0	780
Middle	7.2	85.5	7.3	100.0	847
Fourth	8.3	81.6	10.1	100.0	818
Highest	6.2	77.3	16.5	100.0	914
Total	7.6	82.3	10.1	100.0	3,880

¹ Excludes pregnant women.

² Used WHO 2007 cut-off points by age and sex.

Table 7.2C. Nutritional status: Unmarried male adolescents

Among unmarried male adolescents ages 15-19, percentage with specific BMI levels (using WHO 2007 cut-off points by age and sex), according to background characteristics, Bangladesh, 2019-20.

Background characteristic	Body mass index			Total	Number of adolescents
	Thin (Z-score < -2SD)	Normal (Z-score \geq -2SD and \leq 1 SD)	Over-weight (Z-score > 1SD)		
Age					
15-17	10.6	79.8	9.6	100.0	1,794
18-19	13.1	79.4	7.5	100.0	907
Residence					
Urban	10.9	74.9	14.2	100.0	737
Rural	11.7	81.5	6.9	100.0	1,964
Region					
Western	11.5	81.1	7.5	100.0	1,022
Central	13.2	77.0	9.8	100.0	976
Eastern	9.0	81.4	9.6	100.0	703
Educational attainment					
Primary incomplete ¹	19.0	75.5	5.5	100.0	330
Primary complete	9.8	84.8	5.5	100.0	167
Secondary incomplete	10.3	80.6	9.1	100.0	1,394
Secondary complete or higher	10.7	78.8	10.5	100.0	810
Wealth quintile					
Lowest	14.1	81.6	4.3	100.0	457
Second	11.9	84.5	3.5	100.0	623
Middle	13.4	80.1	6.5	100.0	550
Fourth	8.3	78.8	13.0	100.0	565
Highest	9.8	72.6	17.5	100.0	505
Total	11.4	79.7	8.9	100.0	2,701

¹ Used WHO 2007 cut-off points by age and sex.

Table 7.3A. Dietary diversity: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 by dietary diversity, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Poor dietary diversity < 4 food groups	Adequate dietary diversity ≥ 4 food groups	Vitamin A-rich food	Iron-rich food	Number of adolescents
Age					
15	20.8	79.2	17.1	69.7	178
16	24.8	75.2	23.1	74.3	358
17	23.9	76.1	21.5	68.7	554
18	24.4	75.6	21.8	68.7	703
19	24.2	75.8	23.5	70.8	646
Residence					
Urban	23.7	76.3	21.8	68.9	553
Rural	24.1	75.9	22.1	70.5	1,886
Region					
Western	26.3	73.7	20.7	70.2	1,019
Central	21.3	78.7	20.9	70.4	966
Eastern	24.6	75.4	27.3	69.4	454
Educational attainment					
Primary incomplete ¹	34.8	65.2	16.3	61.3	278
Primary complete	31.9	68.1	16.9	74.3	205
Secondary incomplete	23.4	76.6	21.6	69.9	1,343
Secondary complete or higher	17.9	82.1	27.4	73.4	612
Wealth quintile					
Lowest	33.0	67.0	18.7	68.9	454
Second	28.7	71.3	20.1	68.3	534
Middle	23.0	77.0	22.0	67.8	570
Fourth	19.4	80.6	24.4	72.3	528
Highest	14.1	85.9	25.7	75.0	352
Total	24.0	76.0	22.0	70.1	2,439

Note: Food groups consist of: a) milk, cheese or yogurt, or other milk products; b) foods made from grains, roots, and tubers; c) vitamin A-rich fruits and vegetables; d) other fruits and vegetables; e) eggs; f) meat, poultry, fish, and shellfish (and organ meats); g) legumes and nuts; and h) green leafy vegetables.

¹ Includes a few cases with no education.

Table 7.3B. Dietary diversity: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 by dietary diversity, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Poor dietary diversity < 4 food groups	Adequate dietary diversity ≥ 4 food groups	Vitamin A-rich food	Iron-rich food	Number of adolescents
Age					
15	19.9	80.1	24.2	74.6	1,088
16	22.1	77.9	23.3	71.9	1,052
17	24.8	75.2	24.1	72.0	767
18	22.5	77.5	26.5	70.5	622
19	21.8	78.2	21.9	74.1	414
Residence					
Urban	20.4	79.6	26.4	74.3	1,246
Rural	22.8	77.2	23.0	71.9	2,696
Region					
Western	21.0	79.0	22.4	74.8	1,130
Central	22.2	77.8	23.7	70.8	1,557
Eastern	22.8	77.2	26.0	73.1	1,255
Educational attainment					
Primary incomplete ¹	30.3	69.7	20.6	67.5	167
Primary complete	28.9	71.1	14.7	67.9	140
Secondary incomplete	21.9	78.1	23.0	72.4	2,269
Secondary complete or higher	20.6	79.4	27.3	74.2	1,367
Wealth quintile					
Lowest	29.6	70.4	15.1	69.0	532
Second	26.4	73.6	19.5	70.2	793
Middle	21.5	78.5	21.7	72.4	857
Fourth	20.8	79.2	26.6	72.3	827
Highest	15.7	84.3	33.1	77.3	934
Total	22.0	78.0	24.1	72.7	3,943

Food groups consist of: a) milk, cheese or yogurt, or other milk products; b) foods made from grains, roots, and tubers; c) vitamin A-rich fruits and vegetables; d) other fruits and vegetables; e) eggs; f) meat, poultry, fish, and shellfish (and organ meats); g) legumes and nuts; and h) green leafy vegetables.

¹ Includes a few cases with no education.

Table 7.3C. Dietary diversity: Unmarried male adolescents

Percentage of unmarried male adolescents ages 15-19 by dietary diversity, according to background characteristics, Bangladesh, 2019-20.

Background characteristics	Poor dietary diversity < 4 food groups	Adequate dietary diversity ≥ 4 food groups	Vitamin A-rich food	Iron-rich food	Number of adolescents
Age					
15	17.0	83.0	27.1	74.9	542
16	17.7	82.3	29.8	76.7	660
17	13.6	86.4	31.5	79.7	622
18	13.8	86.2	28.3	77.7	562
19	14.5	85.5	28.3	81.8	352
Residence					
Urban	15.5	84.5	33.2	80.4	745
Rural	15.4	84.6	27.6	77.0	1993
Region					
Western	15.4	84.6	28.5	80.3	1,028
Central	14.1	85.9	31.1	75.6	996
Eastern	17.3	82.7	27.4	77.7	714
Educational attainment					
Primary incomplete ¹	20.2	79.8	25.4	72.6	338
Primary complete	19.4	80.6	24.1	75.2	169
Secondary incomplete	14.9	85.1	27.9	76.8	1,414
Secondary complete or higher	13.5	86.5	33.9	82.6	816
Wealth quintile					
Lowest	20.2	79.8	25.2	73.5	467
Second	16.2	83.8	24.5	75.3	633
Middle	12.7	87.3	29.1	76.8	559
Fourth	15.6	84.4	31.5	81.7	569
Highest	12.9	87.1	36.0	82.2	510
Total	15.4	84.6	29.2	77.9	2,738

Food groups consist of: a) milk, cheese or yogurt, or other milk products; b) foods made from grains, roots, and tubers; c) vitamin A-rich fruits and vegetables; d) other fruits and vegetables; e) eggs; f) meat, poultry, fish, and shellfish (and organ meats); g) legumes and nuts; and h) green leafy vegetables.

¹ Includes a few cases with no education.

9. Gender Norms

Table 9.1A. Gender norms: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 who agreed with the following gender norm statements, Bangladesh, 2019-20.

Background characteristics	Family composition	Access to education	Working outside	Outdoor games	Household responsibilities		Marital power dynamics		Number of respondents
					Household chores	Household dynamics	A woman should always listen to her husband even if she disagrees	Husband has the right to beat his wife when she does not obey him	
Age group									
15-17	47.9	40.9	33.4	30.8	43.5	25.3	65.2	36.1	2,159
18-19	45.9	36.8	33.2	27.8	39.5	22.8	61.3	32.2	2,767
Residence									
Urban	45.2	36.5	29.6	27.2	40.3	23.6	58.1	27.8	1,142
Rural	47.3	39.2	34.4	29.7	41.5	23.9	64.5	35.8	3,784
Region									
Western	44.7	38.9	31.1	25.2	40.2	21.3	62.7	35.7	2,009
Central	48.3	37.3	35.1	31.5	41.4	24.4	63.6	34.9	1,947
Eastern	47.8	40.6	34.0	32.4	43.1	28.0	62.4	28.4	970
Educational attainment									
Primary incomplete ¹	63.7	54.6	48.0	46.4	63.2	42.8	74.8	50.9	580
Primary complete	58.6	53.1	44.2	42.4	59.3	38.9	73.8	47.9	439
Secondary incomplete	48.9	40.0	34.5	29.7	41.9	24.3	64.6	34.4	2,699
Secondary complete or higher	29.6	22.4	19.5	14.7	22.7	8.4	49.9	19.6	1,209
Wealth quintile									
Lowest	53.7	46.8	39.4	36.7	51.2	32.0	69.4	46.7	951
Second	53.6	45.3	38.3	33.4	48.5	30.3	68.2	40.9	1,067
Middle	48.8	38.8	33.9	29.6	41.1	21.7	60.9	31.4	1,143
Fourth	39.3	33.1	27.3	24.7	33.5	17.9	59.9	28.3	1,037
Highest	35.1	25.6	25.3	18.4	28.8	15.7	54.9	19.1	727
Total	46.8	38.6	33.3	29.1	41.2	23.9	63.0	33.9	4,926

¹Includes a few cases with no education.

Table 9.1B. Gender norms: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 who agreed with the following gender norm statements, Bangladesh, 2019-20.

Background characteristics	Family composition A family is not complete until they have at least one son	Access to education It is important that sons have more education than daughters	Working outside Women should not be allowed to work outside of home	Outdoor games Outdoor games are only for boys not for girls	Household responsibilities		Marital power dynamics		Number of respondents	
					Household chores are for women only, not for men, even if the woman works outside the house	Looking after the household and kids is the responsibility of women only	A woman should always listen to her husband even if she disagrees	Husband has the right to beat his wife when she does not obey him		
Age group										
15-17	31.0	24.0	19.4	16.2	27.0	14.0	48.4	19.4	5,812	
18-19	24.1	19.5	16.5	14.5	19.5	9.6	41.2	15.4	1,988	
Residence										
Urban	23.1	18.8	14.6	11.9	19.8	10.0	37.6	12.5	2,504	
Rural	32.1	24.7	20.5	17.6	27.6	14.3	50.8	21.2	5,296	
Region										
Western	26.3	19.0	15.0	11.4	22.5	10.1	45.4	18.5	2,320	
Central	29.7	24.4	19.3	17.3	24.6	13.4	47.4	18.8	3,031	
Eastern	31.5	24.6	21.2	18.0	28.1	14.8	46.7	17.6	2,448	
Educational attainment										
Primary incomplete ¹	50.2	43.8	39.6	37.6	52.4	36.9	66.9	39.4	361	
Primary complete	48.3	49.0	37.8	36.0	51.3	36.5	64.7	42.3	296	
Secondary incomplete	32.9	25.3	20.6	16.5	28.6	14.6	50.7	20.5	4,390	
Secondary complete or higher	18.6	13.3	10.6	9.6	13.1	4.4	35.4	9.7	2,752	
Wealth quintile										
Lowest	41.9	31.7	29.1	24.9	37.1	21.3	57.7	30.7	1,087	
Second	34.5	29.0	22.7	19.3	30.7	17.6	53.8	25.9	1,500	
Middle	32.1	25.5	18.6	16.9	27.3	13.6	51.0	19.0	1,707	
Fourth	25.7	19.9	16.7	13.7	22.8	10.6	43.7	15.4	1,655	
Highest	18.1	12.8	10.9	8.4	13.4	5.6	32.7	7.2	1,850	
Total	29.3	22.8	18.6	15.8	25.1	12.9	46.6	18.4	7,800	

¹Includes a few cases with no education.

Table 9.1C. Gender norms: Unmarried male adolescents

Percentage of unmarried male adolescents ages 15-19 who agreed with the following gender norm statements, Bangladesh, 2019-20.

Background characteristics	Family composition	Access to education	Working outside	Outdoor games	Household responsibilities		Marital power dynamics		Number of respondents
	A family is not complete until they have at least one son	It is important that sons have more education than daughters	Women should not be allowed to work outside of home	Outdoor games are only for boys not for girls	Household chores are for women only, not for men, even if the woman works outside the house	Looking after the household and kids is the responsibility of women only	A woman should always listen to her husband even if she disagrees	Husband has the right to beat his wife when she does not obey him	
Age group									
15-17	52.1	65.7	50.9	45.6	35.9	19.4	64.7	24.5	3,726
18-19	52.2	62.6	52.2	44.0	32.4	15.5	63.9	23.6	1,797
Residence									
Urban	44.2	57.1	45.7	39.5	30.1	17.2	62.1	19.5	1,578
Rural	55.3	67.8	53.5	47.3	36.6	18.5	65.4	26.0	3,945
Region									
Western	52.8	63.5	52.0	41.1	35.6	17.4	66.2	26.5	2,050
Central	51.0	65.8	50.4	46.4	33.7	16.4	62.1	21.8	2,008
Eastern	52.5	65.0	51.5	48.9	34.9	21.7	65.1	24.1	1,465
Educational attainment									
Primary incomplete ¹	67.9	76.7	64.7	65.2	51.1	36.3	71.4	41.3	701
Primary complete	61.5	75.9	63.2	62.5	47.1	28.3	67.9	34.3	343
Secondary incomplete	54.3	68.0	50.7	46.2	35.0	18.1	66.1	23.4	2817
Secondary complete or higher	39.8	51.9	44.1	31.1	24.7	8.5	57.9	16.2	1,661
Wealth quintile									
Lowest	59.3	68.4	57.0	51.1	40.9	22.3	66.0	31.7	959
Second	59.5	70.4	58.2	51.2	40.4	22.4	70.6	27.9	1,173
Middle	55.1	70.1	55.2	45.3	35.8	19.7	68.9	26.6	1,139
Fourth	50.0	64.6	49.3	43.5	33.3	15.6	63.2	22.4	1,191
Highest	36.4	49.4	36.6	34.4	23.3	11.0	52.8	12.6	1,061
Total	52.1	64.7	51.3	45.1	34.7	18.2	64.4	24.2	5,523

¹ Includes a few cases with no education.

11. Violence and Harassment

Table 11.1A. Exposure to any form of physical violence, and social, verbal, and cyberbullying: Ever-married female adolescents

Percentage of ever-married female adolescents ages 15-19 who experienced any form of physical violence, verbal or social bullying, and cyberbullying in the 12 months preceding the survey, according to background characteristics, Bangladesh, 2019-20.

Characteristics	Percentage who experienced violence/ bullying in the 12 months preceding the survey			Number of adolescents
	Any physical violence	Any verbal or social bullying	Cyberbullying	
Age group				
15	20.4	31.1	9.6	161
16	23.2	34.1	8.8	288
17	23.8	33.2	9.1	424
18	17.8	26.6	4.7	618
19	18.0	28.2	7.3	530
Residence				
Urban	20.1	26.8	8.4	483
Rural	20.1	30.8	6.9	1,539
Region				
Western	20.6	30.6	5.9	819
Central	20.6	30.8	9.1	799
Eastern	18.1	26.3	6.5	404
Current enrollment in school/ college/madrasah				
Yes	16.1	27.6	9.5	308
No	20.8	30.2	6.9	1,714
Educational attainment				
Primary incomplete ¹	27.7	31.2	8.4	254
Primary complete	20.9	32.5	6.5	202
Secondary incomplete	21.8	31.0	6.7	1,068
Secondary complete or higher	12.2	25.5	8.2	497
Wealth quintile				
Lowest	26.7	36.0	4.4	422
Second	19.5	29.0	7.5	440
Middle	18.3	29.2	7.3	446
Fourth	19.3	27.9	9.7	411
Highest	15.4	25.9	7.7	303
Total	20.1	29.8	7.3	2,022

¹ Includes a few cases with no education.

Table 11.1B. Exposure to any form of physical violence, and social, verbal, and cyberbullying: Unmarried female adolescents

Percentage of unmarried female adolescents ages 15-19 who experienced any form of physical violence, verbal or social bullying, and cyberbullying in the 12 months preceding the survey, according to background characteristics, Bangladesh, 2019-20.

Characteristics	Percentage who experienced violence/ bullying in the 12 months preceding the survey			Number of adolescents
	Any physical violence	Any verbal or social bullying	Cyberbullying	
Age group				
15	19.9	30.9	7.1	853
16	22.5	31.5	8.7	816
17	14.8	29.5	9.4	609
18	13.4	29.4	10.5	423
19	11.8	29.3	7.4	262
Residence				
Urban	21.1	29.5	9.0	989
Rural	16.4	30.9	8.3	1,973
Region				
Western	15.3	32.3	11.4	962
Central	18.1	30.4	7.5	1,140
Eastern	20.7	28.3	6.7	860
Current enrollment in school/ college/madrasah				
Yes	17.8	30.2	9.2	2,545
No	18.6	31.5	4.6	417
Educational attainment				
Primary incomplete ¹	24.6	29.1	4.4	142
Primary complete	30.6	37.8	4.3	110
Secondary incomplete	18.9	31.1	7.9	1,630
Secondary complete or higher	14.3	28.9	10.4	1,080
Wealth quintile				
Lowest	16.6	29.9	9.8	415
Second	18.4	32.8	10.6	534
Middle	15.5	29.9	7.4	642
Fourth	19.4	30.4	7.3	638
Highest	19.2	29.5	8.3	733
Total	17.9	30.4	8.5	2,962

¹ Includes a few cases with no education.

Table 11.1C. Exposure to any form of physical violence, and social, verbal, and cyberbullying: Unmarried male adolescents

Percent distribution of unmarried male adolescents ages 15-19 who experienced any form of physical violence, verbal or social bullying, and cyberbullying in the 12 months preceding the survey, according to background characteristics, Bangladesh, 2019-20.

Characteristics	Percentage who experienced violence/ bullying in the 12 months preceding the survey			Number of adolescents
	Any physical violence	Any verbal or social bullying	Cyberbullying	
Age group				
15	30.2	33.5	2.5	441
16	23.2	35.0	2.8	497
17	27.8	35.1	3.4	451
18	26.6	41.9	4.2	351
19	18.3	30.3	2.3	256
Residence				
Urban	28.4	37.6	3.9	606
Rural	24.6	34.3	2.7	1,390
Region				
Western	20.3	32.6	1.9	801
Central	29.1	38.7	4.0	713
Eastern	29.9	34.8	3.5	483
Current enrollment in school/ college/madrasah				
Yes	25.5	36.4	2.7	1,491
No	26.6	32.0	4.1	506
Educational attainment				
Primary incomplete ¹	23.9	31.6	2.6	230
Primary complete	27.6	34.5	3.0	104
Secondary incomplete	29.9	37.1	2.9	1,023
Secondary complete or higher	19.5	33.8	3.5	640
Wealth quintile				
Lowest	22.4	31.3	2.1	371
Second	26.0	31.0	2.3	409
Middle	26.4	34.5	2.3	402
Fourth	23.8	42.1	4.0	415
Highest	29.9	37.1	4.5	400
Total	25.7	35.3	3.1	1,997

¹ Includes a few cases with no education.

12. Mental Health

Table 12.1. Prevalence of depressive disorder*

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 having major depressive disorder in the last two weeks prior to the survey, by background characteristics, Bangladesh, 2019-20.

Background characteristics	Ever-married females		Unmarried females		Unmarried males	
	% having major depressive disorder	N	% having major depressive disorder	N	% having major depressive disorder	N
Age group						
15-17	15.2	1,070	10.6	2,905	5.0	1,902
18-19	15.1	1,418	13.0	952	5.9	883
Residence						
Urban	15.3	589	13.2	1,258	5.3	833
Rural	15.1	1,898	10.2	2,599	5.3	1,952
Region						
Western	13.6	990	9.2	1,190	3.9	1,021
Central	16.2	981	11.8	1,474	5.7	1,012
Eastern	16.1	516	12.4	1,193	6.6	751
Educational attainment						
Primary incomplete ¹	18.1	302	20.9	194	7.8	363
Primary complete	18.2	233	13.9	157	7.7	174
Secondary incomplete	14.8	1,356	10.2	2,121	5.0	1,405
Secondary complete or higher	13.3	597	11.0	1,385	4.3	845
Wealth quintile						
Lowest	17.2	497	14.4	555	5.4	493
Second	15.8	533	9.5	708	5.1	540
Middle	15.1	573	10.3	850	4.6	580
Fourth	14.9	510	8.8	828	5.8	622
Highest	11.8	375	13.5	916	5.5	551
Total	15.2	2487	11.2	3,857	5.3	2,785

¹ Includes some cases of no education.

* PHQ-9 Score: (≥10)

Table 12.2. Symptoms of depression

Percentage of ever-married female, unmarried female, and unmarried male adolescents ages 15-19 by their reported symptoms in the last two weeks, Bangladesh, 2019-20.

Experience reported in the last two weeks	Ever-married females (N=2,487)			Unmarried females (N=3,857)			Unmarried males (N=2,785)					
	Not at all	Some days	Majority of the days	Nearly every day	Not at all	Some days	Majority of the days	Nearly every day	Not at all	Some days	Majority of the days	Nearly every day
Feeling down, depressed or hopeless	41.0	50.9	3.9	4.3	45.2	48.8	3.8	2.2	57.2	38.5	3.0	1.3
Little interest or pleasure in doing things	37.2	54.4	4.7	3.6	41.5	52.5	3.6	2.4	57.6	38.6	2.6	1.2
Had trouble falling asleep, staying asleep, or sleeping too much	44.0	40.3	8.0	7.6	47.4	42.2	6.4	4.0	58.5	34.0	4.8	2.7
Had poor appetite, weight loss, or overeating/not at all	39.1	46.8	7.5	6.6	40.4	46.5	7.1	6.1	60.5	32.2	4.8	2.5
Felt tired, or had little energy	29.4	56.5	8.9	5.1	34.2	55.5	6.8	3.5	50.4	43.8	4.0	1.8
Felt bad about yourself – or felt that you are a failure,	69.2	26.5	2.4	1.9	68.5	27.0	2.8	1.8	75.7	21.2	2.2	1.0
Trouble concentrating on usual activities	54.4	39.1	3.6	2.9	58.0	37.2	3.0	1.8	67.3	29.3	2.5	0.9
Felt as if you have become more silent or restless	57.8	33.4	4.6	4.2	64.1	28.8	4.1	3.0	75.2	21.0	2.8	1.0
Thoughts that you would be better off dead, or have hurt yourself in some way	89.5	8.2	1.3	1.0	91.3	7.1	0.9	0.7	94.6	4.7	0.5	0.2

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Mr. Md. Rafiqul Islam Sarker, Director (Research), NIPORT	Member-Secretary

Technical Working Group (TWG) for the BAHWS 2019-20

Mr. Md. Rafiqul Islam Sarker, Director (Research), NIPORT	Chairman
Deputy Chief, Medical Education and Family Welfare Division (or representative)	Member
Prof. Syed Shahadat Hossain, Dept. of Applied Statistics, University of Dhaka	Member
Prof. Nitai Chakraborty, Department of Statistics & Informatics, University of Dhaka	Member
Director, Census Wing, Bangladesh Bureau of Statistics (or, representative)	Member
Representative, Directorate of Women Affairs, Eskaton Garden Road, Dhaka	Member
Representative Line Director (MNCAH), Directorate General of Health Services	Member
Representative Line Director (MCRAH), Directorate General of Family Planning	Member
Dr. Kanta Jamil, Senior Monitoring, Evaluation and Research Advisor, USAID	Member
Dr. Quamrun Nahar, Head of Research, icddr,b	Member
Dr. Ahmed Al-Sabir, Consultant, D4I, UNC	Member
Dr. Mizanur Rahman, Senior Advisor, D4I, UNC	Member
Representative, Data Collection/Implementing Agency	Member
Mrs. Shahin Sultana, Sr. Research Associate, NIPORT	Member
Representative, NIPORT Training Unit, NIPORT	Member
Mr. Mohammed Ahsanul Alam, Evaluation Specialist, NIPORT	Member-Secretary

**Bangladesh Adolescent Health and Wellbeing Survey
(BAHWS) 2019-20**

HOUSEHOLD QUESTIONNAIRE

**National Institute of Population Research and Training (NIPORT)
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare**

icddr,b

MEASURE Evaluation

Human Development Research Centre

FACE SHEET

IDENTIFICATION

DIVISION	<input type="checkbox"/>
DISTRICT	<input type="checkbox"/> <input type="checkbox"/>
UPAZILA.....	<input type="checkbox"/> <input type="checkbox"/>
UNION/WARD	<input type="checkbox"/> <input type="checkbox"/>
MOUZA.....	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
VILLAGE/MOHOLLA/BLOCK/PARA	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
SEGMENT NUMBER.....	<input type="checkbox"/>
TYPE OF CLUSTER: 1 = RURAL, 2 = URBAN, 3 = OTHER URBAN	
CLUSTER NUMBER	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
HOUSEHOLD NUMBER	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
TYPE OF QUESTIONNAIRE: 1 = TYPE ONE 2 = TYPE TWO	
SELECTED FOR MALE? 1= YES 2= NO	
NAME OF HOUSEHOLD HEAD.....	<input type="checkbox"/> <input type="checkbox"/>
NAME AND LINE # OF RESPONDENT	

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE				DAY <input type="checkbox"/> <input type="checkbox"/> MONTH <input type="checkbox"/> <input type="checkbox"/> YEAR <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
INTERVIEWER'S NAME				INT. CODE <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
RESULT*				RESULT* <input type="checkbox"/>
NEXT VISIT: DATE				TOTAL NO. OF VISITS <input type="checkbox"/>
TIME				

- *RESULT CODES:
- 1 COMPLETED
 - 2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT
 - 3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME
 - 4 POSTPONED
 - 5 REFUSED
 - 6 DWELLING VACANT OR NOT A DWELLING
 - 7 DWELLING DESTROYED
 - 8 DWELLING NOT FOUND
 - 9 OTHERS _____
(SPECIFY)

NUMBER OF TOTAL PERSONS IN HOUSEHOLD.....

SUPERVISOR	FIELD EDITOR	ICDDRDB MONITORING OFFICER	OFFICE EDITOR	KEYED BY
NAME _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	NAME _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	NAME _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
DATE _____	DATE _____	DATE _____		

Consent of Participant

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. Your household has been selected for the survey.

The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh. If you agree to participate in this survey, you will be asked questions about your household and household members. This questionnaire will take 5-10 minutes to complete. Participation in this survey is voluntary and you can choose not to answer any individual question or all the questions. However, we hope that you will participate in this survey since your views are important.

By providing information s/he will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information you provide will be kept strictly confidential. It will be used only for research purposes.

If you wish to know more about the survey, you can contact the following numbers:
NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)
icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you agree to participate?

Yes = 1 No = 2 —————> END



Participant's Name: _____ Signature (or thumb print): _____ Date: _____

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining consent: _____ Signature: _____ Date: _____

HOUSEHOLD SCHEDULE

HH Interview start time: Hour

Now I would like to know some information about the people who usually live in your household and the guest who stayed last night in your household.

LINE NO.	USUAL RESIDENTS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE	AGE	Date of Birth	IF AGE 10 YEARS OR OLDER		ELIGIBILITY OF NEVER MARRIED FEMALE	ELIGIBILITY OF EVER MARRIED FEMALE	CHECK FACESHEET: If the household is selected for male respondent YES <input type="checkbox"/> NO <input type="checkbox"/>
							MARRITAL STATUS				
(1)	Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household. After listing the names and recording the relationship and sex for each person, ask question 14 to be sure that the listing is complete. Then ask appropriate questions in column 5-8 for each person		Is (NAME) male or female? Male =1 Female=2	Does (NAME) usually live here? YES =1 NO =2	Did (NAME) stay here last night? YES=1 NO =2	How old is (NAME)? IF AGE LESS THAN 1 YEAR WRITE '00' IF 95 OR MORE, RECORD 95. IN YEARS	If age is between 13 and 21 years, write the birth date. -----/-----/----- Day/Month/year	What is (NAME's) current marital status? CURRENTLY MARRIED = 1 DIVORCED/SEPARATED/DESERTED/WIDOWED = 2 NEVER- MARRIED = 3	Circle line number of all eligible 15-19 year old ever married/ adolescent female (Q4=2 AND Q6=1 AND Q7=15-19 AND Q8=3)	Circle line number of all eligible 15-19 year old married/ adolescent female (Q4=1 AND Q6=1 AND Q7=15-19 AND Q8=1 or 2)	
01						(7A)	(8)	(9)	(10)	(11)	
02						-----/-----/-----		01	01	01	
03						-----/-----/-----		02	02	02	
04						-----/-----/-----		03	03	03	
05						-----/-----/-----		04	04	04	
						-----/-----/-----		05	05	05	

LINE NO.	USUAL RESIDENTS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	Date of Birth	IF AGE 10 YEARS OR OLDER		ELIGIBILITY OF NEVER MARRIED FEMALE	ELIGIBILITY OF EVER MARRIED FEMALE	CHECK FACESHEET: If the household is selected for male respondent YES <input type="checkbox"/> NO <input type="checkbox"/>
				Does (NAME) usually live here? YES =1 NO =2	Did (NAME) stay here last night? YES=1 NO =2			MARRITAL STATUS	ELIGIBILITY OF NEVER MARRIED MALE			
	Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household. After listing the names and recording the relationship and sex for each person, ask question 14 to be sure that the listing is complete. Then ask appropriate questions in column 5-8 for each person		Is (NAME) male or female? Male =1 Female=2			How old is (NAME)? IF AGE LESS THAN 1 YEAR WRITE '00' IF 95 OR MORE RECORD 95. IN YEARS	If age is between 13 and 21 years, write the birth date. -----/-----/----- Day/Month/year	What is (NAME's) current marital status? CURRENTLY MARRIED = 1 DIVORCED/SEPARATED/DESERTED/WIDOWED = 2 NEVER- MARRIED = 3	Circle line number of all eligible 15-19 year old never married adolescent female (Q4=2 AND Q6=1 AND Q8=3)	Circle line number of all eligible 15-19 year old ever married/adolescent female (Q4=2 AND Q6=1 AND Q7=15-19 AND Q8=1 or 2)		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(7A)	(8)	(9)	(10)	(11)	
06							-----/-----/-----		06	06	06	
07							-----/-----/-----		07	07	07	
08							-----/-----/-----		08	08	08	
09							-----/-----/-----		09	09	09	

<input type="checkbox"/>	TICK HERE IF ADDITIONAL SHEET USED
<p>(14)</p>	<p style="text-align: center;">In addition, are there any other people who may not be members of your family, such as domestic servants, lodgers or friends who usually live here?</p> <p style="text-align: center;"> <input type="checkbox"/> YES <input type="checkbox"/> ENTER EACH IN TABLE. <input type="checkbox"/> NO </p>
<p>* CODES FOR Q.3 RELATIONSHIP TO HEAD OF HOUSEHOLD</p> <p>01 = HEAD 02 = WIFE OR HUSBAND 03 = SON OR DAUGHTER 04 = SON-IN-LAW OR DAUGHTER-IN-LAW 05 = GRANDCHILD 06 = PARENT</p>	<p>07 = PARENT-IN-LAW 08 = BROTHER OR SISTER 09 = OTHER RELATIVE 10 = ADOPTED/FOSTER/STEPCHILD 11 = NOT RELATED 12 = Domestic help 98 = DON'T KNOW</p>

Q No		
15	Total number of ELIGIBLE NEVER MARRIED FEMALE [sum of column 9]:	<input type="text"/>
16	Total number of ELIGIBLE EVER MARRIED FEMALE [sum of column 10]:	<input type="text"/>
17	Total number of ELIGIBLE NEVER MARRIED MALE [sum of column 11]:	<input type="text"/>
20	Total number of ELIGIBLE NEVER MARRIED FEMALE; EVER MARRIED FEMALE AND NEVER MARRIED MALE [sum of 15, 16 & 17]:	<input type="text"/>

Q No.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
22	What is the main source of drinking water for members of your household?	PIPED WATER Piped into dwelling 11 Piped to yard/plot 12 Piped to neighbour/standpipe 13 Public tap/permanent pipe 14 Tube well or borehole 21 DUG WELL Protected well 31 Unprotected well 32 WATER FROM SPRING Protected spring 41 Unprotected spring 42 Rainwater 51 Tanker truck 61 Cart with small tank 71 Surface water (River/dam/lake /pond/stream/canal/irrigation channel) 81 Bottled water 91 Other(Specify) 96	
23	What kind of toilet facility do members of your household usually use? RECORD AFTER OBSERVATION	Flush or pour flush toilet Flush to piped sewer system 11 Flush to septic tank 12 Flush to pit latrine 13 Flush to somewhere else 14 Flush, don't know where 15 Pit latrine Ventilated improved pit latrine 21 Pit latrine with slab 22 Pit latrine without slab /open pit 23 Composting toilet 31 Bucket toilet 41 Hanging toilet/latrine 51 No facility/bush/field 61 Other(Specify) 96	25
24	Do you share this toilet facility with other households?	YES 1 NO 2	
25	MAIN MATERIAL OF THE FLOOR. RECORD OBSERVATION.	NATURAL FLOOR EARTH/SAND 11 DUNG 12 RUDIMENTARY FLOOR WOOD PLANKS 21 PALM/BAMBOO 22 FINISHED FLOOR PARQUET OR POLISHED WOOD 31 VINYL OR ASPHALT STRIPS 32 CERAMIC TILES 33 CEMENT 34 CARPET 35 OTHER (SPECIFY) 96	
26	MAIN MATERIAL OF THE ROOF. RECORD OBSERVATION	NATURAL ROOFING NO ROOF 11 THATCH/PALM LEAF 12 SOD 13 RUDIMENTARY ROOFING RUSTIC MAT 21 PALM/BAMBOO 22 WOOD PLANKS 23 CARDBOARD 24 FINISHED ROOFING TIN 31 WOOD 32 CERAMIC TILES 34 CEMENT 35 ROOFING SHINGLES 36 OTHER (SPECIFY) 96	

**BANGLADESH ADOLESCENT HEALTH AND WELLBEING SURVEY
(BAHWS) 2019-20**

QUESTIONNAIRE FOR EVER MARRIED GIRL (15-19 YEARS)

TYPE ONE QUESTIONNAIRE

**National Institute of Population Research and Training (NIPORT)
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare**

icddr,b

MEASURE Evaluation

Human Development Research Centre

Consent of participant for individual information

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. You have been selected as respondents in this study.

The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

If you agree to participate in this survey, I will ask some questions about your health and wellbeing. This questionnaire will take 40-45 minutes to complete. Participation in this survey is voluntary and you can choose not to answer any individual question or all the questions. However, we hope that you will participate in this survey since your views are important.

By providing information you will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information you provide will be kept strictly confidential. It will be used for research purposes. There are no financial benefits associated with your participation.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you agree to participate in this survey?

Yes = 1

No = 2



END



Participant's Name: _____ Signature (or thumb print): _____ Date: _____

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining consent: _____ Signature: _____ Date: _____

Section 1: Respondent's Background

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101.	Record the time started	Hour <input type="text"/> <input type="text"/> Min <input type="text"/> <input type="text"/>	
102.	In what month and year were you born?	Month..... <input type="text"/> <input type="text"/> Don't Know Month.....98 Year..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Don't Know Year.....9998	
103.	How old were you at your last birthday? [What is your age?] COMPARE AND CORRECT 102 AND /OR 103 IF INCONSISTENT	Age (In Completed Years) <input type="text"/> <input type="text"/>	
103a	Are you now married, separated, deserted, divorced, and widowed?	Currently Married.....1 Separated.....2 Deserted.....3 Divorced.....4 Widowed.....5	104
103b	How old is your (current) husband?	Age (In Completed Years) <input type="text"/> <input type="text"/>	
104.	Have you ever attended a School, College or Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 Yes, School, College and Madrasha.....3 No.....4	106 109
105.	What type of school/college or Madarasa have you last attended?	School or College.....1 Madrasha.....2	
106.	What is the highest class you have completed at that School/ College or Madrasa? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	Class <input type="text"/> <input type="text"/>	
107.	Are you currently attending a School or College /Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 No.....3	109
108.	For what reasons currently are you not attending School/ College or Madrasha? MULTIPLE ANSWERS ACCEPTABLE	Distance to school.....A Concern about safety.....B Parents concern: School quality.....C Parents lack of interest.....D Poor performance in school.....E No good school in the locality.....F Didn't know about school.....G Student: Lack of interest.....H Got married.....I Had to care for siblings/ others.....J Financial constraints/costs.....K Illness: family/respondent.....L Household Chores/Work.....M Husband oppose.....N Have to take care of child.....O Other (specify).....X Don't know.....Z	
109.	Aside from housework, some persons take up jobs for which they are paid in cash or kind. Are you currently involved in any kind of work paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	111
110.	Within the last six months, have you been involved in any kind of work for which you were paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	112
111.	From where do you/did you do this work? At home, outside or both?	At home.....1 Outside home.....2 Both.....3	
<p>Now I want to talk about the family members that constitute the household you live in most of the time. Every household is different. Some adolescents get to live with both the parents in the same household, while others get to live with either one of them. I'd like to know a bit more about them and the other family members that make up your household.</p>			

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
112	Does your (name below) usually live in same household with you?		
a.	Does your mother (biological mother) usually live in the same household with you?	YES.....1 NO.....2	c
b.	You told that your mother doesn't live with you, Do you have step mother? If yes does your step mother usually live in the same household with you?	YES.....1 NO.....2 I don't have step mother.....9	
c.	Does your father (biological father) usually live in the same household with you?	YES.....1 NO.....2	e
d.	You told that your father doesn't live with you, Do you have step father? If yes does your step father usually live in the same household with you?	YES.....1 NO.....2 I don't have step father.....9	
e.	Does your older brother usually live in the same household with you?	YES.....1 NO.....2	
f.	Does your older sister usually live in the same household with you?	YES.....1 NO.....2	
g.	Does your husband usually live in the same household with you?	YES.....1 NO.....2	
h.	Does your mother-in-law usually live in the same household with you?	YES.....1 NO.....2	
i.	Does your father-in-law usually live in the same household with you?	YES.....1 NO.....2	
Now I am going to ask you about your engagement with any creative activities, cultural activities and/or outdoor sports. I also want to ask you about your affiliation with any club.			
125	Are you currently engaged in any creative, cultural activities or outdoor sports such as		
a.	Drawing/painting	YES.....1 NO.....2	
b.	Singing /Dancing /Drama	YES.....1 NO.....2	
c.	Outdoor Sports such as football, cricket, bou-chi, hadudu/cabady, table tennis, badminton etc	YES.....1 NO.....2	
d.	Reading books other than textbooks	YES.....1 NO.....2	
e.	Creative Writing such as writing stories, poem etc	YES.....1 NO.....2	
f.	Other (Specify):	YES.....1 NO.....2	
126	Are you currently affiliated with any club or organization such as		
a	Local Youth Club	YES.....1 NO.....2	
b	Boys Scout/Girls Scout/ Girls Guide	YES.....1 NO.....2	
c	Cultural Organization: (for example singing, dancing, drama, poetry, painting, drawing etc.)	YES.....1 NO.....2	
d	Sports Club: school/college or community level	YES.....1 NO.....2	
e	Reading Club/ Library	YES.....1 NO.....2	
f	Other (Specify):	YES.....1 NO.....2	
Nowadays, many organizations (such as Government, NGO, and School) are running adolescent programs where they teach about adolescent rights, nutrition, vocational training, reproductive health such as puberty, menstruation, marriage, family planning and other life skills. Now, I would want to know if you have ever been involved in any such adolescent program currently or previously.			
127	Are you currently involved with any adolescent program?	YES.....1 NO.....2	201
128	In the last 3 years were you involved in any adolescent program?	YES.....1 NO.....2	

Section 2: Exposure to Media

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I would like to ask you few questions about your exposure to Mobile phone, Internet, Radio, Television and newspaper.			
201.	Do you have your own mobile phone that is currently functional? [If YES, then ASK; is it a basic mobile phone or a smart phone?	Yes, basic mobile phone.....1 Yes, smart phone.....2 Yes, both basic and smart phone.....3 No.....4	204
202.	Do any of your family members currently own a functional mobile phone?	YES.....1 NO.....2	206
203.	Do you have access to a family member's mobile phone in case you want to?	YES.....1 NO.....2	206
Mobile phones are used to make and receive phone calls, text messages, access the internet etc. Now I want to know if you use the mobile phone for certain purposes.			
204.	Do you use the mobile phone to.....	205 If yes, do you use this every day or at least once a week or less than once a week	
a.	Do you use the mobile phone to make and/or receive phone calls? Yes.....1 No.....2 ↓	Everyday.....1 At least once a week.....2 Less than once a week.....3	
b.	Do you use the mobile phone to send and/or receive texts? Yes.....1 No.....2 ↓	Everyday.....1 At least once a week.....2 Less than once a week.....3	
c.	Do you use the mobile phone to listen radio/FM band? Yes.....1 No.....2 ↓	Everyday.....1 At least once a week.....2 Less than once a week.....3	
d.	Do you use the mobile phone to access the internet/Google/YouTube? Yes.....1 No.....2 ↓	Everyday.....1 At least once a week.....2 Less than once a week.....3	
e.	Do you use the mobile phone to read newspaper/m..... Yes.....1 No.....2 ↓	Everyday.....1 At least once a week.....2 Less than once a week.....3	
f.	Do you use the mobile phone to use Facebook? Yes.....1 No.....2 ↓	Everyday.....1 At least once a week.....2 Less than once a week.....3	
g.	Do you use the mobile phone to use IMO/Viber/WhatsApp/Messenger? Yes.....1 No.....2 ↓	Everyday.....1 At least once a week.....2 Less than once a week.....3	
All this time I listened to your use of mobile phone. Now I want to know about your use of Laptop/Computer or Tab (Tablet)			
206.	Do you use internet through a Laptop/computer/tablet either in the house or elsewhere? How often do you use internet through a computer/tablet: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	
207.	In the last 3 months, have you read any adolescent focused article online/internet, through mobile phone, laptop/ computer or tab?	YES.....1 NO.....2	
208.	Do you listen to the radio? How often do you listen to the radio: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	210
209.	In the last 3 months, did you listen to any adolescent focused program on the radio?	YES.....1 NO.....2	
210.	Do you watch television? How often do you watch television: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	212
211.	In the last 3 months, did you watch any adolescent focused program in TV?	YES.....1 NO.....2	
212.	Do you read printed version of newspaper/magazine? How often do you read: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	301
213.	In the last 3 months, have you read any adolescent focused news article or newspaper or magazine?	YES.....1 NO.....2	

Section 3: Menstruation

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES		SKIP
Now I would like to talk to you about menstruation. As you know all of us girls have gone through this experience, so there is nothing to be shy or ashamed of.				
301.	Have you experienced your periods/menstruation?	YES.....1 NO.....2	→	315
302.	How old were you when your period/menstruation first started?	Age (in complete years) <input type="text"/> <input type="text"/> ... Years		
303.	Did you have any knowledge about menstruation before you experienced it for the first time?	YES.....1 NO.....2	→	305
304.	Do you think this knowledge was adequate?	YES.....1 NO.....2		
305.	How many days back did your last menstruation start? (Instruction for interviewer: If respondent is menstruating during the interview period, and if it is less than 1 day, write '000')	Days ago.....1 <input type="text"/> <input type="text"/> <input type="text"/>		
306.	What do you use during menstruation? MULTIPLE ANSWER ACCEPTED	Before last birth.....99! Cloth.....A Sanitary napkin.....B Cotton.....C Toilet/Tissue paper.....D Does not use anything.....E Other (Specify).....X	} →	309 310
307.	How do you usually wash the cloth that you use during menstruation? MULTIPLE ANSWER ACCEPTED	Only water.....A Water and soap/detergent.....B Water and soda.....C Do not wash/throw away.....D Other (Specify).....X	→	309
308.	Do you dry the cloth that you use during menstruation under the sunlight?	YES.....1 NO.....2		
309.	How many times a day do you usually change the cloth/sanitary napkins/cotton/toilet paper?	<input type="text"/> <input type="text"/> Times		
310.	CHECK 107: Currently attending school/College/Madrasha <input type="checkbox"/>	Not attending school/College/Madrasha <input type="checkbox"/>	→	315
311.	Was your school open during your last menstruation?	Yes.....1 No.....2	→	315
312.	Did you miss any days of school during your last menstruation?	Yes.....1 No.....2	→	315
313.	How many days of school did you miss?	_____ days		
314.	Why did you miss school during your menstruation? MULTIPLE ANSWER ACCEPTED	Feel embarrassed.....A Suffered cramps/pain.....B Heavy flow.....C Didn't have any sanitary pads.....D Didn't have clean cloth.....E Was told not to go by parents.....F No changing/bathroom facilities in schoolH Teacher instructed to return home.....I No running water at school toiletJ Others (Specify).....X		
315.	Have you read or heard about menstruation from any of the sources such as	Yes	No	
a.	Have you heard or watched anything about menstruation in TV/Radio?	1	2	
b.	Have you read anything about menstruation in Textbook/books?	1	2	
c.	Have you read anything about menstruation in Newspaper/magazine?	1	2	
d.	Have you read or heard or watched anything about menstruation in the Internet?	1	2	
Now I am going to read out some statements about menstruation which may be true or false. Please take your time to understand the statements and decide if you agree or disagree with the statements.				
316.	Please read out the following statements (A-C) and ask whether she agrees or disagrees.	Agree	Disagree	Not sure/Don't know
a.	Menstrual blood is impure. Do you agree or disagree with this statement?	1	2	8
b.	One cannot eat sour during menstruation. Do you agree or disagree with this statement?	1	2	8
c.	During menstruation one cannot do physical activity. Do you agree or disagree with this statement?	1	2	8

Section 4: Marriage

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
For many people marriage is an important aspect of life. In the following section, I will ask you a few questions on marriage to gain a better understanding of your thoughts about this.			
409.	Check 103a: Currently Married <input type="checkbox"/> ↓ Separated/ Deserted/ Divorced/ Widowed <input type="checkbox"/> →	507	
410.	Is your husband living with you now or is he staying elsewhere?	Living with her.....1 → Staying elsewhere, within Bangladesh.....2 Staying elsewhere, outside Bangladesh.....3	413
411.	How many times did he come, or you met with him in the past 12 months?	Number of times..... <input type="text"/> Did not come/met in the last 12 months.....00	
Now I will ask you some question about your marriage. In some cases, people get married more than once, and no one to be blamed for this or nothing should be ashamed of this. Please don't be ashamed.			
413.	Have you been married only once or more than once?	Only once 1 More than once2	
414.	Check 413: Married only once <input type="checkbox"/> ↓ Ask: In what month and year did you get married? Married more than once <input type="checkbox"/> ↓ In what month and year were you married to your 1 st husband?	Month..... <input type="text"/> Don't know month.....98 Year..... <input type="text"/> Don't know year.....9998	
415.	How old were you when you (first) got married?	Age (In Completed Years) <input type="text"/>	
416.	Did you start living with your (first) husband the day you got married?	Yes.....1 → No.....2 Did not start living with husband yet.....3 →	418
417.	After how many days/months/years of your marriage did you start living with your (first) husband? <i>(If response is in month, convert to year and write)</i>	Months..... <input type="text"/> Days..... <input type="text"/>	
418.	Do you think you got married at an age that was right for you or would you have preferred to marry earlier or later?	Right time.....1 → Earlier.....2 Later.....3	507
419.	At what age would you have preferred to get married?	Age (In Completed Years) <input type="text"/>	

Section 5: Reproductive history, Contraception and Fertility preference

NO	QUESTION AND FILTER	CODING CATEGORY	SKIP
Now I would like to ask about all the births you have had during your life.			
507.	If you have given birth in your lifetime I want to ask you more regarding those births. Have you ever given birth?	Yes.....1 No.....2 →	522
508.	Do you have any sons or daughters to whom you have given birth who are living with you?	Yes.....1 No.....2 →	510
509.	a) How many sons live with you? b) And how many daughters live with you?	a) Sons living at home..... <input type="text"/> <input type="text"/> b) Daughters living at home..... <input type="text"/> <input type="text"/>	
510.	Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?	Yes.....1 No.....2 →	511a
511.	a) How many sons are alive but do not live with you? b) And how many daughters are alive but do not live with you?	a) Sons live elsewhere..... <input type="text"/> <input type="text"/> b) Daughters live elsewhere..... <input type="text"/> <input type="text"/>	
511a	How many boys and girls are alive? "If she has no alive child; write 00"	Total number of living children <input type="text"/> <input type="text"/>	
512.	Have you ever given birth to a boy or girl who was born alive but later died? IF NO, PROBE: Any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life even if for a very short time?	Yes.....1 No.....2 →	514
513.	a) How many boys have died? b) And how many girls have died?	a) Boys died..... <input type="text"/> <input type="text"/> b) Girls died..... <input type="text"/> <input type="text"/>	
514.	SUM ANSWER TO 509, 511 AND 513, AND ENTER TOTAL	Total Births..... <input type="text"/> <input type="text"/>	
515.	CHECK 514: Just to make sure that I have this right: you have had in TOTAL _____ births during your life. Is that correct? YES <input type="checkbox"/> NO <input type="checkbox"/> ↓ PROBE AND CORRECT 507-514 AS NECESSARY ←		
518	At what month and year your 1 st child born?	Month <input type="text"/> <input type="text"/> Month not known.....98 Years <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Year not known.....9998	
519	How old were you when your 1 st child born?	Write in completed year <input type="text"/> <input type="text"/> Years	
520	Did you prefer to have your 1 st child at that age or you wanted to have earlier or later?	At that age.....1 → Wanted to have earlier.....2 Wanted to have later.....3	522
521	When (at what age) would you have preferred to have your 1 st child?	Write in completed year <input type="text"/> <input type="text"/> Years	
522	Are you currently pregnant?	Yes.....1 No.....2 Unsure.....8	
523	Check 507 and 522; If 507=2 and 522=1 ↓ If 507=1 and 522=2 or 8	If 507=1 and 522=2 or 8 → If 507=1 and 522=1 → If 507=2 and 522=2 or 8 →	527 532 526
524	Did you want to get pregnant at this time?	Yes.....1 → No.....2	532
525	When (at what age) would you have prefer to have your first child?	Write in completed year <input type="text"/> <input type="text"/> Years →	532
526	At what age do you want to take your first child?	Write in completed year <input type="text"/> <input type="text"/> Years	
Now I would like to talk about family planning – The various ways or methods that a couple can use to delay or avoid a pregnancy			

NO	QUESTION AND FILTER	CODING CATEGORY	SKIP
527.	Check Q103a Currently Married <input type="checkbox"/>	Separated/Deserted/Divorced/Widowed <input type="checkbox"/>	710
528.	Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?	Yes.....1 No.....2	531
529.	Which method are you using? RECORD ALL MENTIONED	Female sterilization.....A Male sterilization.....B IUD.....C Injectable.....D Implants.....E Pill.....F Condom.....G Female condom.....H Emergency Contraceptive Pill (ECP).....I Lactational Amenorrhea Method (LAM).....K Rhythm Method.....L Withdrawal.....M Other Modern Method (Specify).....X Other Traditional Method (Specify).....Y	536
530.	Where did you obtain (Current method) the last time? Probe to identify the type of source <i>If unable to determine if the facility is a hospital, clinic, public, NGO or private, please write down the name of the facility below:</i> (Name of Facility).	PUBLIC SECTOR Medical college/specialized hospital.....11 District hospital.....12 Maternal child welfare center.....13 Upazila Health Complex.....14 Union Health & Family Welfare Centre/Rural dispensary/ Union Subcentre.....15 Satellite clinic/EPI outreach site.....17 Community clinic.....18 Govt. field worker (FWA).....19 Other govt. (Specify).....20 NGO SECTOR NGO static clinic.....21 NGO satellite clinic.....22 NGO depot holder.....23 NGO fieldworker.....24 Other NGO (Specify).....26 PRIVATE MEDICAL SECTOR Private hospital/clinic.....31 Qualified doctor's chamber.....32 Non-qualified doctor's chamber.....33 Pharmacy/drug store.....34 Homeo/herbal/unani.....35 Other.....36 (Specify) OTHER SOURCE Shop.....41 Friend/relatives.....42 Husband.....43 Other.....96 (Specify)	536
531.	Why are you and your husband not doing something or using any contraceptive method to delay or avoid getting pregnant?	General health concerns.....A Side effects.....B Difficulty in having sex.....C Interfered physiological normal processes...D Did not like the method.....E Husband opposed.....F Others opposed.....G Social stigma.....H Religious prohibition.....I Currently pregnant.....J Want to have child now.....K Didn't find the appropriate FP method.....L Husband lives abroad.....M Other.....X (Specify)	
532.	Do you intent to use family planning method in the next 12 month?	Yes.....1 No.....2 Haven't decided yet.....8	534

NO	QUESTION AND FILTER	CODING CATEGORY	SKIP
533.	Which method do you prefer to use? RECORD ALL MENTIONED	Female sterilization.....A Male sterilization.....B IUD.....C Injectables.....D Implants.....E Pill.....F Condom.....G Emergency Contraceptive Pill (ECP).....I Lactational Amenorrhea Method(LAM).....K Rhythm Method.....L Withdrawal.....M Other Modern Method (Specify).....X Other Traditional Method (Specify).....Y	
534.	Have you ever used anything or tried in any way to delay or avoid pregnancy?	Yes 1 No.....2 →	537
535.	What method did you use? RECORD ALL MENTIONED	Female sterilization.....A Male sterilization.....B IUD.....C Injectables.....D Implants.....E Pill.....F Condom.....G Emergency Contraceptive Pill (ECP)I Lactational Amenorrhea Method (LAM).....K Rhythm Method.....L Withdrawal.....M Other Modern Method (Specify).....X Other Traditional Method (Specify).....Y	
536.	Would you say that using contraception is mainly your decision, mainly your husband's decision, or do you both decide together?	Mainly My Decision.....1 Mainly Husband.....2 Both.....3 Other(Specify).....6	
537	Check 507 or 511 a		
	537 a. Has a living child 511a=1 or more <input type="checkbox"/> ↓	537b. No living child 507=2 or 511a=0 <input type="checkbox"/> ↓	None.....00 Number..... <input type="text"/> <input type="text"/> Did not think of it yet.....98
	If you could go back to the time you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be?	If could choose exactly the number of children to have in your whole life, how many would that be?	

Section 7: Connectedness: family and friends

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
707	PLEASE CHECK Q 103A (Currently married) <input type="checkbox"/> Separated/Deserted/Divorced/Widowed <input type="checkbox"/>					710
708	Now I am going to read out some statements about your relationship with your husband and want to know which statement is applicable about you?	Never	Sometimes	Most of the times	Always	
a.	You enjoy spending time with your husband	1	2	3	4	
b.	You and your husband are pretty close.	1	2	3	4	
c.	You talk with your husband about very personal things	1	2	3	4	
709	Now I am going to mention some issues and ask you if you feel comfortable discussing those with your husband	Yes		No		
a.	Menstruation	1		2		
b.	Progress in studies	1		2		
c.	When you want to have a child	1		2		
d.	Using family planning methods	1		2		
e.	Seeking health services for yourself	1		2		
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g.	Participation in income generating activities outside home	1		2		
h.	Your Marriage	1		2		
i.	Intimate/Personal relationship	1		2		
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		
710	CHECK 112a Mother lives in the same household Yes <input type="checkbox"/> No <input type="checkbox"/>	CHECK 112h mother in law lives in the same household Yes <input type="checkbox"/> No <input type="checkbox"/>				713
	Ask the following questions by referring to biological mother	Ask the following questions by referring to Mother in law				
710.1	Now I am going to read out some statements about your relationship with your mother/mother in law and want to know which statement is applicable about you?	Never	Sometimes	Most of the times	Always	
A	You enjoy spending time with your mother/mother in law.	1	2	3	4	
B	You and your mother/mother in law are pretty close.	1	2	3	4	
C	You talk with your mother/mother in law about very personal things	1	2	3	4	
711	Now I am going to mention some issues and ask you if you feel comfortable discussing those with your mother/mother in law	Yes		No		
a.	Menstruation	1		2		
b.	Progress in studies	1		2		
c.	When you want to have a child	1		2		
d.	Using family planning methods	1		2		
e.	Seeking health services for yourself	1		2		
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g.	Participation in income generating activities outside home	1		2		
h.	Your Marriage	1		2		
i.	Intimate/Personal relationship	1		2		
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		
713	CHECK: 112e and 123 If 112 e=1 or 123=1 <input type="checkbox"/>	If 112e=2 and 123=2 <input type="checkbox"/>				716

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
714	Now I am going to read out some statements about your relationship with your elder brother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder brother, left as a child and now not in touch, then code 'Not in touch with elder brother')	Never	Sometimes	Most of the time	Always	Not in touch with elder brother
a	You enjoy spending time with your elder brother	1	2	3	4	9 716 ↓
b	You and your elder brother are pretty close.	1	2	3	4	9
c	You talk with your elder brother about very personal things	1	2	3	4	9
715	Do you feel comfortable discussing following issues with your elder brother?	Yes		No		
a	Menstruation	1		2		
b	Progress in studies	1		2		
c	When you want to have a child	1		2		
d	Using family planning methods	1		2		
e	Seeking health services for yourself	1		2		
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g	Participation in income generating activities outside home	1		2		
h	Your Marriage	1		2		
i	Intimate/Personal relationship	1		2		
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		
716	CHECK: 112f and 124. If 112 f=1 or 124=1 ↓	If 112f=2 and 124=2 <input type="checkbox"/> →				719
717	Now I am going to read out some statements about your relationship with your elder sister and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder sister, left as a child and now not in touch, then code 'Not in touch with elder sister')	Never	Sometimes	Most of the time	Always	Not in touch with elder sister
a	You enjoy spending time with your elder sister	1	2	3	4	9 719 ↓
b	You and your elder sister are pretty close.	1	2	3	4	9
c	You talk with your elder sister about very personal things.	1	2	3	4	9
718	Do you feel comfortable discussing following issues with your elder sister?	Yes		No		
a	Menstruation	1		2		
b	Progress in studies	1		2		
c	When you want to have a child	1		2		
d	Using family planning methods	1		2		
e	Seeking health services for yourself	1		2		
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g	Participation in income generating activities outside home	1		2		
h	Your Marriage	1		2		
i	Intimate/Personal relationship	1		2		
j	Sexual harassments : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
719.	<p>Now I am going to read out some statements about your relationship with your friends.</p> <p>You may consider anyone as your friend as for example your neighbours, school mates, cousins, play mates, or any individuals you communicate with.</p> <p>Please take your time to understand the statements I will read out. Decide if the statement is true for you always, most of the time, sometimes or never</p>	Never	Sometimes	Most of the time	Always	Does not have friends
a.	You have friends that you consider close and trust completely	1	2	3	4	9 ↓ 801
b.	Spending time with friends is important to you.	1	2	3	4	9
c.	You and your friends talk openly with each other about personal things.	1	2	3	4	9

Section 8: Gender norms

No.	QUESTIONS	CODING CATEGORIES		
<p>There are several opinions about the role and duties of a girl/female or a boy/male in our families and society. Now I am going to read out some statements and would like to know whether you agree or disagree with them.</p>				
801	Gender attitudes	Agree	Disagree	Don't Know
a.	It is important that sons have more education than daughters.	1	2	8
b.	Outdoor games are only for boys not for girls.	1	2	8
c.	A family is not complete until they have at least one son.	1	2	8
d.	Household chores are for women only, not for men, even if the woman works outside the house.	1	2	8
e.	Women should not be allowed to work outside of home.	1	2	8
f.	A woman should always listen to her husband even if she disagrees.	1	2	8
g.	Looking after the household and kids is the responsibility of women only.	1	2	8
h.	Husband has the right to beat his wife when she does not obey him.	1	2	8

Section 11: Utilization of Health Services

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I am going to ask you some questions regarding seeking information and/or service relating to health			
1101.	Did you visit any health facility in last 6 months for yourself?	Yes.....1 No.....2	1201
1102.	How many visits did you make?	_____ TIMES	
1103.	Where did you visit last? <i>Probe to find out the correct health facility that was last visited and circle.</i> <i>If unable to determine if the facility is a hospital, clinic, public, NGO or private, please write down the name of the facility below:</i> (Name of Facility).	PUBLIC Public medical college/specialized hospital.....11 District hospital.....12 Maternal child welfare center (MCWC)13 Upazila Health Complex14 Union Health & Family Welfare Centre/ Rural dispensary/ union sub centre15 School health clinic.....16 Satellite clinic/EPI outreach site17 Community clinic.....18 Other govt.....20 (Specify) NGO NGO static clinic.....21 NGO satellite clinic.....22 NGO depo holder.....23 Other NGO (specify).....26 PRIVATE Private hospital/clinic/medical college.....31 Qualified doctor's chamber32 Non-qualified doctor's chamber33 Pharmacy/drugstore34 Homeopath/Herbal/Unani35 Other.....36 (Specify)	
1104.	In the last health facility you visited, is there a separate corner for adolescents to provide information and service?	Yes.....1 No.....2 Don't Know.....8	
1105.	In your last visit did you go for any information or services or both?	Information only.....1 Service only.....2 Both information and service.....3	
1106.	What information and/ or services did you receive the last time you visited? Anything else? <i>Do not read out responses.</i> <i>Circle all mentioned.</i>	Menstrual problem management.....A Anemia.....B White discharge.....C Nutrition.....D Burning sensation during micturation.....E General illness.....F Weakness.....G Allergy/Rash/Itching.....H Injury/Accident.....I Tetanus or Vaccination.....J Diarrheal disease.....K Gastritis.....L F/P services.....M Post abortion care.....N Antenatal care.....O Delivery.....P Postnatal care.....Q Wet dream.....R Did not receive any treatment or service.....S Other.....X	

Section 12: Nutrition

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP
1201.	Now I would like to ask you about liquids or foods that you may have had during last 24 hours that means yesterday during the day or at night. I am interested in whether you had the item I mention even if it was combined with other foods. (Last 24 hour means from yesterday 6 am till today 6am)				
	Did you drink/eat:	YES	NO	Don't remember	
a.	Milk such as tinned, powdered, or fresh animal milk?	1	2	8	
b.	Shemai, Rice pudding, cheese, curd or other food made from milk?	1	2	8	
c.	Rice, bread, paratha, noodles, puffed rice, flattened rice or other foods made from grains?	1	2	8	
d.	White potatoes, turnips or any other foods made from roots?	1	2	8	
e.	Pumpkin, carrots, squash or sweet potatoes that are yellow or orange inside and enriched in vitamin 'A'?	1	2	8	
f.	Kochu, koshu shaak, kochur loti	1	2	8	
g.	Any dark green, leafy vegetables like spinach, poi sag, methi, kolmi, kochu	1	2	8	
h.	Ripe mangoes, papayas, ripe kathal, bangi or other Vitamin A rich fruits?	1	2	8	
i.	Any other fruits like banana, grapes, apple, guava?	1	2	8	
j.	Any other vegetables like cabbage, potol, kopi?	1	2	8	
k.	Liver, kidney, heart or other organ meats?	1	2	8	
l.	Any meat, such as beef, lamb, goat, chicken, or duck?	1	2	8	
m.	Fish, dry fish, shrimps or crab?	1	2	8	
n.	Eggs?	1	2	8	
o.	Any foods made from beans, peas, lentils, or nuts?	1	2	8	
p.	Unripe banana	1	2	8	
q.	Any other? (SPECIFY)	1	2	8	
1202.	Are you taking any iron folic acid tablets now?	Yes.....1 No.....2 →			1204
1203.	How many iron folic acid tablets did you consume in last 7 days?	Number..... <input type="text"/> <input type="text"/> <input type="text"/>			
1204.	Ask Consent for measuring weight and height and weight?				
1205.	Weight in Kilograms	a.Kilograms..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> b.Kilograms..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> If difference between a and b is more than 0.10 kg, measure the weight for third (c) time. c.Kilograms..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Not Present99994 Refused99995			
1206.	Height in Centimeters	a.Centimetre..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> b.Centimetre..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> If difference between a and b is more than 0.5 cm, measure the height for third (c) time. c.Centimetre..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Not Present.....99994 Refused.....99995			
1207.	ID of weight machine	<input type="text"/> <input type="text"/>			
1208.	ID of height machine	<input type="text"/> <input type="text"/>			
1209.	Code of the data collector for anthropometric measurement	<input type="text"/> <input type="text"/> <input type="text"/>			
1501	End of interview	Hour <input type="text"/> <input type="text"/>	Minute <input type="text"/> <input type="text"/>		

**BANGLADESH ADOLESCENT HEALTH AND WELLBEING SURVEY
(BAHWS) 2019-20**

QUESTIONNAIRE FOR NEVER MARRIED GIRL (15-19 YEARS)

TYPE ONE QUESTIONNAIRE

**National Institute of Population Research and Training (NIPORT)
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare**

icddr,b

MEASURE Evaluation

Human Development Research Centre

FACE SHEET

IDENTIFICATION				
CLUSTER NUMBER.....	□□□□			
HOUSEHOLD NUMBER.....	□□□			
NAME OF HOUSEHOLD HEAD.....				
NAME AND LINE # OF RESPONDENT _____	□□			
INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE				DAY □□ MONTH □□ YEAR □□□□
INTERVIEWER'S NAME				INT. CODE □□□
RESULT*				RESULT* □
NEXT VISIT: DATE TIME	_____ _____	_____ _____		TOTAL NO. OF VISITS □
<p>*RESULT CODES:</p> <p>1 COMPLETED</p> <p>2 NOT AT HOME</p> <p>3 POSTPONED</p> <p>4 REFUSED</p> <p>5 PARTLY COMPLETED</p> <p>6 INCAPACITATED</p> <p>7 OTHERS _____</p> <p align="center">(SPECIFY)</p>				
SUPERVISOR NAME _____ □□□	FIELD EDITOR NAME _____ □□□	ICDDRMB MONITORING OFFICER NAME _____ □□□		OFFICE EDITOR □□
DATE _____	DATE _____	DATE _____		KEYED BY □□

Assent of guardian of 15-17 years old participant

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. Your household has been selected for the survey.

Name _____, a member of your household, has been selected for the survey and her/his age is between 15-17 years. I need your permission to conduct an interview of her/him. The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

_____ has been selected as a respondent in this study. S/he will be asked questions about her/his health and wellbeing. The interview will take 40-45 minutes to complete. His/ her participation in this survey depends on your consent.

By providing information s/he will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information is collected will be kept strictly confidential. It will be used for research purposes.

Participation in this survey is voluntary and s/he can choose not to answer any individual question or all the questions. However, we hope that s/he will participate in this survey since her/his views are important.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you permit (Name _____) to participate in this survey?

Yes = 1

No = 2 → END



Guardian's Name: _____ Signature (or thumb print): _____ Date: _____

(Relation with the respondent-----)

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining assent: _____ Signature: _____ Date: _____

Consent of participant for individual information

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. You have been selected as respondents in this study.

The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

If you agree to participate in this survey, I will ask some questions about your health and wellbeing. This questionnaire will take 40-45 minutes to complete. Participation in this survey is voluntary and you can choose not to answer any individual question or all the questions. However, we hope that you will participate in this survey since your views are important.

By providing information you will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information you provide will be kept strictly confidential. It will be used for research purposes. There are no financial benefits associated with your participation.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you agree to participate in this survey?

Yes = 1 No = 2 → END



Participant's Name: _____ Signature (or thumb print): _____ Date: _____

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining consent: _____ Signature: _____ Date: _____

Section 1: Respondent's Background

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101.	Record the time started	Hour <input type="text"/> <input type="text"/> Min <input type="text"/> <input type="text"/>	
102.	In what month and year were you born?	Month <input type="text"/> <input type="text"/> Don't Know Month.....98 Year..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Don't Know Year.....9998	
103.	How old were you at your last birthday? [What is your age?] COMPARE AND CORRECT 102 AND /OR 103 IF INCONSISTENT	Age (In Completed Years) <input type="text"/> <input type="text"/>	
104.	Have you ever attended a School, College or Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 Yes, School/College and Madrasha.....3 No.....4	} → 106 → 109
105.	What type of school/college or Madrasha have you last attended?	School or College.....1 Madrasha.....2	
106.	What is the highest class you have completed at that School/ College or Madrasha? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	Class <input type="text"/> <input type="text"/>	
107.	Are you currently attending a School or College /Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 No.....3	} → 109
108.	For what reasons currently are you not attending School/ College or Madrasha? MULTIPLE ANSWERS ACCEPTABLE	Distance to school.....A Concern about safety.....B Parents concern: School quality.....C Parents lack of interest.....D Poor performance in school.....E No good school in the locality.....F Didn't know about school.....G Student: Lack of interest.....H Got married.....I Had to care for siblings/ others.....J Financial constraints/costs.....K Illness: family/respondent.....L Household Chores/Work.....M Husband oppose.....N Have to take care of child.....O Other (specify).....X Don't know.....Z	
109.	Aside from housework, some persons take up jobs for which they are paid in cash or kind. Are you currently involved in any kind of work paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	} → 111
110.	Within the last six months, have you been involved in any kind of work for which you were paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	→ 112
111.	From where do you/did you do this work? At home, outside or both?	At home.....1 Outside home.....2 Both.....3	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I want to talk about the family members that constitute the household you live in most of the time. Every household is different. Some adolescents get to live with both the parents in the same household, while others get to live with either one of them. I'd like to know a bit more about them and the other family members that make up your household.			
112	Does your (name below) usually live in same household with you?		
a	Does your mother (biological mother) usually live in the same household with you?	YES.....1. NO.....2	c
b	You told that your mother doesn't live with you, Do you have step mother? If yes does your step mother usually live in the same household with you?	YES.....1. NO.....2 I don't have step mother.....9	
c	Does your father (biological father) usually live in the same household with you?	YES.....1 NO.....2	e
d	You told that your father doesn't live with you, Do you have step father? If yes does your step father usually live in the same household with you?	YES.....1 NO.....2 I don't have step father.....9	
e	Does your older brother usually live in the same household with you?	YES.....1 NO.....2	
f	Does your older sister usually live in the same household with you?	YES.....1 NO.....2	
g	Does your husband usually live in the same household with you?	YES.....1 NO.....2	
h	Does your mother-in-law usually live in the same household with you?	YES.....1 NO.....2	
i	Does your father-in-law usually live in the same household with you?	YES.....1 NO.....2	
113	CHECK Q112 a: (biological mother)	112a=1 (Lives in the same household).....1 112a=2 (Does not live in the same household).....2	118
114	Is your (biological) mother alive?	Yes.....1 No.....2	118
115	Where does she live?	Lives elsewhere, within Bangladesh.....1 Lives elsewhere, outside Bangladesh.....2 Don't know.....8	118
116	In the last one month did you have any communication (met her, by phone, by letter, by email, by IMO/ Viber/ WhatsApp/ Messenger etc.) with her?	YES.....1 NO.....2	118
117	In the last one month how often did you communicate with her?	20 times or more.....1 10-19 times.....2 4-9 times.....3 1-3 times.....4	
118	CHECK Q112 c: (biological father)	112c=1 (Lives in the same household).....1 112c=2 (Does not live in the same household).....2	123
119	Is your (biological) father alive?	YES.....1 NO.....2	123
120	Where does he live?	Lives elsewhere, within Bangladesh.....1 Lives elsewhere, outside Bangladesh.....2 Don't know.....8	123
121	In the last one month did you have any communication (met him, by phone, by letter, by email, by IMO/Viber/WhatsApp/Messenger etc.) with him?	YES.....1 NO.....2	123
122	In the last one month how often did you communicate with him?	20 times or more.....1 10-19 times.....2 4-9 times.....3 1-3 times.....4	
123	Do you have any older brother who does not live in the same household with you or lives somewhere else?	YES.....1 NO.....2	
124	Do you have any older sister who does not live in the same household with you or lives somewhere else?	YES.....1 NO.....2	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I am going to ask you about your engagement with any creative activities, cultural activities and/or outdoor sports. I also want to ask you about your affiliation with any club.			
125	Are you currently engaged in any creative, cultural activities or outdoor sports such as		
a	Drawing/painting	YES.....1 NO.....2	
b	Singing /Dancing /Drama	YES.....1 NO.....2	
c	Outdoor Sports such as football, cricket, bou-chi, hadudu/cabady, table tennis, badminton etc	YES.....1 NO.....2	
d	Reading books other than textbooks	YES.....1 NO.....2	
e	Creative Writing such as writing stories, poem etc	YES.....1 NO.....2	
f	Other (Specify):	YES.....1 NO.....2	
126	Are you currently affiliated with any club or organization such as		
a	Local Youth Club	YES.....1 NO.....2	
b	Boys Scout/Girls Scout/ Girls Guide	YES.....1 NO.....2	
c	Cultural Organization: (for example singing, dancing, drama, poetry, painting, drawing etc.)	YES.....1 NO.....2	
d	Sports Club: school/college or community level	YES.....1 NO.....2	
e	Reading Club/ Library	YES.....1 NO.....2	
f	Other (Specify):	YES.....1 NO.....2	
Nowadays, many organizations (such as Government, NGO, and School) are running adolescent programs where they teach about adolescent rights, nutrition, vocational training, reproductive health such as puberty, menstruation, marriage, family planning and other life skills. Now, I would want to know if you have ever been involved in any such adolescent program currently or previously.			
127	Are you currently involved with any adolescent program?	YES.....1 NO.....2	201
128	In the last 3 years were you involved in any adolescent program?	YES.....1 NO.....2	

Section 2: Exposure to Media

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I would like to ask you few questions about your exposure to Mobile phone, Internet, Radio, Television and newspaper.			
201.	Do you have your own mobile phone that is currently functional? [If YES, then ASK; is it a basic mobile phone or a smart phone?	Yes, basic mobile phone.....1 Yes, smart phone.....2 Yes, both basic and smart phone.....3 No.....4	204
202.	Do any of your family members currently own a functional mobile phone?	YES.....1 NO.....2	206
203.	Do you have access to a family member's mobile phone in case you want to?	YES.....1 NO.....2	206
Mobile phones are used to make and receive phone calls, text messages, access the internet etc. Now I want to know if you use the mobile phone for certain purposes.			
204.	Do you use the mobile phone to.....	205. If yes, do you use this every day or at least once a week or less than once a week	
a.	Do you use the mobile phone to make and/or receive phone calls? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
b.	Do you use the mobile phone to send and/or receive texts? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
c.	Do you use the mobile phone to listen radio/FM band? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
d.	Do you use the mobile phone to access the internet/Google/YouTube? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
e.	Do you use the mobile phone to read newspaper/magazine? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
f.	Do you use the mobile phone to use Facebook? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
g.	Do you use the mobile phone to use IMO/Viber/WhatsApp/Messenger? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
All this time I listened to your use of mobile phone. Now I want to know about your use of Laptop/Computer or Tab (Tablet)			
206.	Do you use internet through a Laptop/computer/tablet either in the house or elsewhere? How often do you use internet through a computer/tablet: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	
207.	In the last 3 months, have you read any adolescent focused article online/internet, through mobile phone, laptop/ computer or tab?	YES.....1 NO.....2	
208.	Do you listen to the radio? How often do you listen to the radio: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	210
209.	In the last 3 months, did you listen to any adolescent focused program on the radio?	YES.....1 NO.....2	
210.	Do you watch television? How often do you watch television: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	212
211.	In the last 3 months, did you watch any adolescent focused program in TV?	YES.....1 NO.....2	
212.	Do you read printed version of newspaper/magazine? How often do you read: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	301
213.	In the last 3 months, have you read any adolescent focused news article or newspaper or magazine?	YES.....1 NO.....2	

Section 3: Menstruation

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP
Now I would like to talk to you about menstruation. As you know all of us girls have gone through this experience, so there is nothing to be shy or ashamed of.					
301.	Have you experienced your periods/menstruation?	YES.....1 NO.....2 (If answer is NO, please keep a note) Note:	→		315
302.	How old were you when your period/menstruation first started?	Age (in complete years)	<input type="text"/> <input type="text"/>		
303.	Did you have any knowledge about menstruation before you experienced it for the first time?	YES.....1 NO.....2	→		305
304.	Do you think this knowledge was adequate?	YES.....1 NO.....2			
305.	How many days back did your last menstruation start? (Instruction for interviewer: If respondent is menstruating during the interview period, and if it is less than 1 day, write '000')	Days ago.....1 Before last birth.....995			
306.	What do you use during menstruation? MULTIPLE ANSWER ACCEPTED	Cloth.....A Sanitary napkin.....B Cotton.....C Toilet/Tissue paper.....D Does not use anything.....E Other (Specify).....X	} → } →		309 310
307.	How do you usually wash the cloth that you use during menstruation? MULTIPLE ANSWER ACCEPTED	Only water.....A Water and soap/detergent.....B Water and soda.....C Do not wash/throw away.....D Other (Specify).....X	→		309
308.	Do you dry the cloth that you use during menstruation under the sunlight?	YES.....1 NO.....2			
309.	How many times a day do you usually change the cloth/sanitary napkins/cotton/toilet paper?	<input type="text"/> <input type="text"/> Times			
310.	CHECK 107: Currently attending school/College/Madrasha <input type="checkbox"/>	Not attending school/College/Madrasha <input type="checkbox"/>	→		315
311.	Was your school open during your last menstruation?	Yes.....1 No.....2	→		315
312.	Did you miss any days of school during your last menstruation?	Yes.....1 No.....2	→		315
313.	How many days of school did you miss? days			
314.	Why did you miss school during your menstruation? MULTIPLE ANSWER ACCEPTED	Feel embarrassed.....A Suffered cramps/pain.....B Heavy flow.....C Didn't have any sanitary pads.....D Didn't have clean cloth.....E Was told not to go by parents.....F No changing/bathroom facilities in school.....H Teacher instructed to return home.....J No running water at school toilet.....J Others (Specify).....X			
315.	Have you read or heard about menstruation from any of the sources such as	Yes	No		
a.	Have you heard or watched anything about menstruation in TV/Radio?	1	2		
b.	Have you read anything about menstruation in Textbook/books?	1	2		
c.	Have you read anything about menstruation in Newspaper/magazine?	1	2		
d.	Have you read or heard or watched anything about menstruation in the Internet?	1	2		
Now I am going to read out some statements about menstruation which may be true or false. Please take your time to understand the statements and decide if you agree or disagree with the statements.					
316.	Please read out the following statements (A-C) and ask whether she agrees or disagrees.	Agree	Disagree	Not sure/Don't know	
a.	Menstrual blood is impure Do you agree or disagree with this statement?	1	2	8	
b.	One cannot eat sour during menstruation Do you agree or disagree with this statement?	1	2	8	
c.	During menstruation one cannot do physical activity Do you agree or disagree with this statement?	1	2	8	

Section 4: Marriage

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
<p>For many people marriage is an important aspect of life. In the following section, I will ask you a few questions on marriage to gain a better understanding of your thoughts about this.</p>			
401.	At what age would you like to be married?	Age in Years <input type="text"/> <input type="text"/> Don't Want to Get Married.....95 →	404
402.	At what age would your parents/ guardians like you to be married?	Age in Years <input type="text"/> <input type="text"/> Don't Know.....98 →	407
403.	CHECK Q401 (RESPONDENTS PREFERRED AGE) and Q402 (PARENTS' PREFERRED AGE).	401=402.....1 401 < 402.....2 401 > 402.....3 } →	407
404.	How likely is it that you would be able to convince your parents/guardian that you want to delay your marriage? <i>Or (ask when Q 401=95 that is those who don't want to get married)</i> How likely is it that you would be able to convince your parents/guardian that you do not want to get married?	Extremely Likely.....1 Quite Likely.....2 Unlikely.....3 Extremely Unlikely.....4 Not Sure/Don't Know.....8 →	407
405.	Is there anybody who can assist you to convince your parents/guardian to comply with your preferred marriage age? <i>Or (ask when Q 401=95 that is those who don't want to get married)</i> Is there anybody who can assist you to convince your parents/guardian to comply with your wish to not get married?	Yes.....1 No.....2 Don't Know/Not Sure.....8 } →	407
406.	Who can assist you to convince your parents/guardian to delay the age at which you marry? <i>Or (when q401=95 that is those who don't want to get married)</i> Who can assist you to convince your parents/guardian to comply with your wish to not get married?	Father.....A Mother.....B GrandmotherC GrandfatherD Brother.....E Sister.....F Uncle/aunty.....G Brother-in-law.....H Sister-in-law.....I Other relatives.....J Neighbours/friends.....K Teacher.....L Local leaders.....M Other (specify).....X	
407.	In your opinion, what is the ideal age for a girl to get married?	<input type="text"/> <input type="text"/> Years	
408.	In your opinion, what is the ideal age for a boy to get married?	<input type="text"/> <input type="text"/> Years	

Section 5: Contraception

Now I would like to talk about family planning. By using various ways or methods of family planning a couple can delay or avoid a pregnancy. I know you are not married and you may not need it, however, your thoughts and knowledge would help us to assess how unmarried girls perceive issues around Contraception.

[Circle code 1 in 501 for each method mentioned spontaneously. Check question 501 whether A-C was mentioned spontaneously. If any of these are not mentioned spontaneously then proceed down question 502 for that specific method. Read the name and description of those specific methods. Circle code 2 if method is recognized, and code 3 if not recognized in code 502.]

NO	QUESTION AND FILTER	CODING CATEGORY			SKIP
		Spontaneous YES	502. Have you ever heard of (method) of familyplanning? Probed		
			YES	NO	
501.	Which ways or methods have you heard about?				
A.	PILL: A woman can take oral pill to prevent pregnancy	1	2	3	
B.	CONDOM: Men can put a rubber sheath on their penis before sexual intercourse to prevent pregnancy	1	2	3	
C.	EMERGENCY CONTRACEPTION PILLS (ECP): As an emergency measure after unprotected sexual intercourse, women can take special pills at any time within three days to prevent pregnancy.	1	2	3	
D.	WITHDRAWAL: Men can be careful and pull out before climax.	1			
E.	SAFE PERIOD (COUNTING DAYS, CALENDER, and RHYTHM METHOD): Couples can avoid having sexual intercourse on certain days of the month when the women is more likely to get pregnant.	1			
F.	INJECTION: Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months	1			
G.	MALE STERILIZATION (VASECTOMY): Men can have an operation to avoid having any more children.	1			
H.	FEMALE STERILIZATION: Woman can have an operation to avoid having any more children.	1			
I.	IUD: Women can have a loop or coil placed inside them by a doctor or a nurse.	1			
J.	IMPLANT/NORPLANTS: Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for several years.	1			
K.	If respondent tells about any method spontaneously other than above:(SPECIFY) _____	1			
503.	<p>CHECK Q501 (A to K) At least one circle (501=1) Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p align="center">Check Q 502 (A to C) At least one yes (502=2) Yes <input type="checkbox"/> No <input type="checkbox"/></p>				601
504.	Do you know any place or person where one can get family planning information and services?	YES.....1	NO.....2		601
505.	<p>Where is that place?</p> <p>Any other place?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. RECORD ALL MENTIONED</p>	<p>PUBLIC SECTOR Medical college/specialized hospital.....A District Hospital.....B Maternal Child Welfare Center (MCWC)....C School Health Clinic.....D Upazila Health Complex.....E Union Health & Family Welfare Centre/Rural dispensary/ Union Subcentre/Family Welfare Centre ...F Community Clinic.....G Satellite clinic/EPI outreach site.....H Govt. field worker (FWA).....I Other govt. (Specify).....J</p> <p>NGO SECTOR NGO static clinic.....K NGO satellite clinic.....L NGO depot holder.....M NGO fieldworker.....N Other NGO (Specify).....O</p> <p>PRIVATE MEDICAL SECTOR Private hospital/clinic.....P Qualified doctor's chamber.....Q Non-qualified doctor's chamber.....R Pharmacy/drug store.....S Homeo/Herbal/Unani.....T Other private medical sector (Specify).....U</p> <p>OTHER SOURCE Shop.....V Friend/relatives.....W Other (Specify).....X</p>			

Section 6: Time Use

NO	QUESTION AND FILTER	CODING CATEGORY		SKIP
601.	Instruction to interviewer: Check the day of the interview and circle the appropriate Code	Sunday.....1 Monday.....2 Tuesday.....3 Wednesday.....4 Thursday.....5 Friday.....6 Saturday.....7		
CHECK 107: Currently attending school/College/Madrasha <input type="checkbox"/>		Not attending school/College/Madrasha <input type="checkbox"/>		604a
Now, I want to ask you about different activities you are involved in last 24 hours. I want to know about the amount of time you have spent yesterday doing these activities. (The last 24 hours means the time frame in between 6 am yesterday morning to 6 am today morning.)		If yes, how much time in total you spend doing this yesterday/ in the last 24 hours: (in minutes/hours)		
602 a.	Did you go to school/College/Madrasha yesterday?	Yes.....1 No.....2	602 b. <input type="text"/> Hours <input type="text"/> Minutes	
603 a.	Yesterday did you spend any time on studying at home/attending any coaching centre or private tutor at home?	Yes.....1 No.....2	603 b. <input type="text"/> Hours <input type="text"/> Minutes	
604 a	Yesterday did you spend any time on any physical activity like exercise, walking for exercise, swimming, cycling, sports etc?	Yes.....1 No.....2	604 b. <input type="text"/> Hours <input type="text"/> Minutes	
605 a	Yesterday did you spend any time doing creative or recreational activities such as-, singing, playing instrument, painting, reading any books other than text-books?	Yes.....1 No.....2	605 b. <input type="text"/> Hours <input type="text"/> Minutes	
606.	For how long in total did you sleep from yesterday 6 am till today 6am?	<input type="text"/> Hours <input type="text"/> Minutes		

Section 7: Connectedness: family and friends

NO	QUESTION AND FILTER	CODING CATEGORY					SKIP
701	CHECK 112 a and 114 : If 112a=1 or Q114=1 <input type="checkbox"/>	If 112a=2 and 114=2 <input type="checkbox"/>					704
702	Now I am going to read out some statements about your relationship with your biological mother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with mother left as a child and now not in touch, then code 'Not in touch with mother')	Never	Sometimes	Most of the time	Always	Not in touch with mother	
a	You enjoy spending time with your mother	1	2	3	4	9	704
b	You and your mother are pretty close.	1	2	3	4	9	
c	You talk with your mother about very personal things	1	2	3	4	9	
703	Now I am going to mention some issues and ask you if you feel comfortable discussing those with your mother	Yes		No			
a.	Menstruation	1		2			
b.	Progress in studies	1		2			
c.	When you want to have a child	1		2			
d.	Using family planning methods	1		2			
e.	Seeking health services for yourself	1		2			
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g.	Participation in income generating activities outside home	1		2			
h.	Your Marriage	1		2			
i.	Intimate/Personal relationship	1		2			
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2			
704	CHECK: 112c and 119 If 112 c=1 or 119=1 <input type="checkbox"/>	If 112c=2 and 119=2 <input type="checkbox"/>					713
705	Now I am going to read out some statements about your relationship with your biological father and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with father left as a child and now not in touch, then code 'Not in touch with father')	Never	Sometimes	Most of the time	Always	Not in touch with father	
a.	You enjoy spending time with your father	1	2	3	4	9	713
b.	You and your father are pretty close.	1	2	3	4	9	
c.	You talk with your father about very personal things	1	2	3	4	9	
706	Do you feel comfortable discussing following issues with your father?	Yes		No			
a.	Menstruation	1		2			
b.	Progress in studies	1		2			
c.	When you want to have a child	1		2			
d.	Using family planning methods	1		2			
e.	Seeking health services for yourself	1		2			
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g.	Participation in income generating activities outside home	1		2			
h.	Your Marriage	1		2			
i.	Intimate/Personal relationship	1		2			
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing	1		2			

NO	QUESTION AND FILTER	CODING CATEGORY				SKIP
	obscene photos, flashing of private parts, harassment through mobile call or text message.					
713	CHECK: 112e and 123 If 112 e=1 or 123=1 <input type="checkbox"/> ↓	If 112e=2 and 123=2 <input type="checkbox"/> →				716
714	Now I am going to read out some statements about your relationship with your elder brother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder brother, left as a child and now not in touch, then code 'Not in touch with elder brother')	Never	Sometimes	Most of the time	Always	Not in touch with elder brother
a	You enjoy spending time with your elder brother	1	2	3	4	9 ↓ 716
b	You and your elder brother are pretty close.	1	2	3	4	9
c	You talk with your elder brother about very personal things	1	2	3	4	9
715	Do you feel comfortable discussing following issues with your elder brother?	Yes	No			
a	Menstruation	1	2			
b	Progress in studies	1	2			
c	When you want to have a child	1	2			
d	Using family planning methods	1	2			
e	Seeking health services for yourself	1	2			
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1	2			
g	Participation in income generating activities outside home	1	2			
h	Your Marriage	1	2			
i	Intimate/Personal relationship	1	2			
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1	2			
716	CHECK: 112f and 124 If 112 f=1 or 124=1 <input type="checkbox"/> ↓	If 112f=2 and 124=2 <input type="checkbox"/> →				719
717	Now I am going to read out some statements about your relationship with your elder sister and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder sister, left as a child and now not in touch, then code 'Not in touch with elder sister')	Never	Sometimes	Most of the time	Always	Not in touch with elder sister
a	You enjoy spending time with your elder sister	1	2	3	4	9 ↓ 719
b	You and your elder sister are pretty close.	1	2	3	4	9
c	You talk with your elder sister about very personal things	1	2	3	4	9
718	Do you feel comfortable discussing following issues with your elder sister?	Yes	No			
a	Menstruation	1	2			
b	Progress in studies	1	2			
c	When you want to have a child	1	2			
d	Using family planning methods	1	2			

NO	QUESTION AND FILTER	CODING CATEGORY				SKIP
e	Seeking health services for yourself	1	2			
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1	2			
g	Participation in income generating activities outside home	1	2			
h	Your Marriage	1	2			
i	Intimate/Personal relationship	1	2			
j	Sexual harassments : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1	2			
719	Now I am going to read out some statements about your relationship with your friends. You may consider anyone as your friend as for example your neighbours, school mates, cousins, play mates, or any individuals you communicate with.	Never	Sometimes	Most of the time	Always	Does not have friends
a.	You have friends that you consider close and trust completely	1	2	3	4	9 ↓ 801
b.	Spending time with friends is important to you.	1	2	3	4	9
c.	You and your friends talk openly with each other about personal things.	1	2	3	4	9

Section 8: Gender norms

No.	QUESTIONS	CODING CATEGORIES		
There are several opinions about the role and duties of a girl/female or a boy/male in our families and society. Now I am going to read out some statements and would like to know whether you agree or disagree with them.				
801	Gender attitudes	Agree	Disagree	Don't Know
A.	It is important that sons have more education than daughters.	1	2	8
B.	Outdoor games are only for boys not for girls.	1	2	8
C.	A family is not complete until they have at least one son.	1	2	8
D.	Household chores are for women only, not for men, even if the woman works outside the house.	1	2	8
E.	Women should not be allowed to work outside of home.	1	2	8
F.	A woman should always listen to her husband even if she disagrees.	1	2	8
G.	Looking after the household and kids is the responsibility of women only.	1	2	8
H.	Husband has the right to beat his wife when she does not obey him.	1	2	8

Section 11: Utilization of Health Services

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	Now I am going to ask you some questions regarding seeking information and/or service relating to health .		
1101.	Did you visit any health facility in last 6 months for yourself?	Yes.....1 No.....2	1107
1102.	How many visits did you make?	_____ TIMES	
1103.	Where did you visit last? <i>Probe to find out the correct health facility that was last visited and circle.</i> <i>If unable to determine if the facility is a hospital, clinic, public, NGO or private, please write down the name of the facility below:</i> (Name of Facility).	PUBLIC Public medical college/specialized hospital....11 District hospital.....12 Maternal child welfare center (MCWC).....13 Upazila Health Complex.....14 Union Health & Family Welfare Centre/ Rural dispensary/ union sub centre.....15 School health.....16 Satellite clinic/EPI outreach site.....17 Community clinic.....18 Other govt.....20 (Specify) NGO NGO static clinic.....21 NGO satellite clinic.....22 NGO depo holder.....23 Other NGO (specify).....26 PRIVATE Private hospital/clinic/medical college.....31 Qualified doctor's chamber.....32 Non-qualified doctor's chamber.....33 Pharmacy/drugstore.....34 Homeopath/Herbal/Unani.....35 Other.....36 (Specify)	
1104.	In the last health facility you visited, is there a separate corner for adolescents to provide information and service?	Yes.....1 No.....2 Don't Know.....8	
1105.	In your last visit did you go for any information or services or both?	Information only.....1 Service only.....2 Both information and service.....3	
1106.	What information and/ or services did you receive the last time you visited? Anything else? <i>Do not read out responses.</i> <i>Circle all mentioned.</i>	Menstrual problem management.....A Anemia.....B White discharge.....C Nutrition.....D Burning sensation during micturation.....E General illness.....F Weakness.....G Allergy/Rash/Itching.....H Injury/Accident.....I Tetanus or Vaccination.....J Diarrheal disease.....K Gastritis.....L F/P services.....M Post abortion care.....N Antenatal care.....O Delivery.....P Postnatal care.....Q Wet dream.....R Did not receive any treatment or service.....S Other.....X	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES		SKIP
1107	Now I would want to know if you like to know more about following topics?	1108	If yes, what would be your two most preferred medium to receive information on this topic? (Interview should show the picture page showing 8 medium such as A= Teacher, B= Books, C=Television, D= Radio/FM; E= Mobile/ Internet; F= Newspaper/Magazine; G=Hotline; H= Health Provider)	
a.	Do you want to know more about Puberty/ Physical Change?	Yes.....1 No.....2	a. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
b.	Do you want to know more about Wet Dream?	Yes.....1 No.....2	b. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
c.	Do you want to know more about menstruation?	Yes.....1 No.....2	c. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
d.	Do you want to know more about marriage?	Yes.....1 No.....2	d. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
e.	Do you want to know more about pregnancy?	Yes.....1 No.....2	e. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
f.	Do you want to know more about family panning?	Yes.....1 No.....2	f. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
g.	Do you want to know more about ANC/ Delivery and PNC?	Yes.....1 No.....2	g. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	

Section 12: Nutrition

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP
1201.	Now I would like to ask you about liquids or foods that you may have had during last 24 hours that means yesterday during the day or at night. I am interested in whether you had the item I mention even if it was combined with other foods. (Last 24 hour means from yesterday 6 am till today 6am)				
	Did you drink/eat:	YES	NO	Don't remember	
a.	Milk such as tinned, powdered, or fresh animal milk?	1	2	8	
b.	Shemai, Rice pudding, cheese, curd or other food made from milk?	1	2	8	
c.	Rice, bread, paratha, noodles, puffed rice, flattened rice or other foods made from grains?	1	2	8	
d.	White potatoes, turnips or any other foods made from roots?	1	2	8	
e.	Pumpkin, carrots, squash or sweet potatoes that are yellow or orange inside and enriched in vitamin 'A'?	1	2	8	
f.	Kochu, koshu shaak, kochur loti.	1	2	8	
g.	Any dark green, leafy vegetables like spinach, poi sag, methi, kolmi, kochu.	1	2	8	
h.	Ripe mangoes, papayas, ripe kathal, bangi or other Vitamin A rich fruits?	1	2	8	
i.	Any other fruits like banana, grapes, apple, guava?	1	2	8	
j.	Any other vegetables like cabbage, potol, kopi?	1	2	8	
k.	Liver, kidney, heart or other organ meats?	1	2	8	
l.	Any meat, such as beef, lamb, goat, chicken, or duck?	1	2	8	
m.	Fish, dry fish, shrimps or crab?	1	2	8	
n.	Eggs?	1	2	8	
o.	Any foods made from beans, peas, lentils, or nuts?	1	2	8	
p.	Unripe banana	1	2	8	
q.	Any other? (SPECIFY)	1	2	8	
1202.	Are you taking any iron folic acid tablets now?	Yes.....1	No.....2		1204
1203.	How many iron folic acid tablets did you consume in last 7 days?	Number.....	<input type="checkbox"/> <input type="checkbox"/>		
1204.	Ask Consent for measuring weight and height and weight?				
1205.	Weight in Kilograms	a.Kilograms.....	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
		b.Kilograms.....	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
		If difference between a and b is more than 0.10 kg, measure the weight for third (c) time.			
		c.Kilograms.....	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
		Not Present.....	99994		
		Refused.....	99995		
1206.	Height in Centimeters	a.Centimetre.....	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
		b.Centimetre.....	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
		If difference between a and b is more than 0.5 cm, measure the height for third (c) time.			
		c.Centimetre.....	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
		Not Present.....	99994		
		Refused.....	99995		
1207.	ID of weight machine	<input type="text"/> <input type="text"/>			
1208.	ID of height machine	<input type="text"/> <input type="text"/>			
1209.	Code of the data collector for anthropometric measurement	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
1501	End of interview	Hour	<input type="text"/> <input type="text"/>	Minute	<input type="text"/> <input type="text"/>

**BANGLADESH ADOLESCENT HEALTH AND WELLBEING SURVEY
(BAHWS) 2019-20**

QUESTIONNAIRE FOR NEVER MARRIED BOY (15-19 YEARS)

TYPE ONE QUESTIONNAIRE

**National Institute of Population Research and Training (NIPORT)
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare**

icddr,b

MEASURE Evaluation

Human Development Research Centre

FACE SHEET

IDENTIFICATION				
CLUSTER NUMBER.....	□□□□			
HOUSEHOLD NUMBER.....	□□□			
NAME OF HOUSEHOLD HEAD.....	□□			
NAME AND LINE # OF RESPONDENT _____				
INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE				DAY □□ MONTH □□ YEAR □□□□
INTERVIEWER 'S NAME				INT. CODE □□□
RESULT*				RESULT* <input type="checkbox"/>
NEXT VISIT: DATE	_____	_____		TOTAL NO. OF VISITS <input type="checkbox"/>
TIME	_____	_____		
<p>*RESULT CODES:</p> <p>1 COMPLETED</p> <p>2 NOT AT HOME</p> <p>3 POSTPONED</p> <p>4 REFUSED</p> <p>5 PARTLY COMPLETED</p> <p>6 INCAPACITATED</p> <p>7 OTHERS _____</p> <p align="center">(SPECIFY)</p>				
SUPERVISOR	FIELD EDITOR	ICDDR B MONITORING OFFICER		OFFICE EDITOR
NAME _____	NAME _____	NAME _____		□□
□□□	□□□	□□□		□□
DATE _____	DATE _____	DATE _____		

Assent of guardian of 15-17 years old participant

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. Your household has been selected for the survey.

Name _____, a member of your household, has been selected for the survey and her/his age is between 15-17 years. I need your permission to conduct an interview of her/him. The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

_____ has been selected as a respondent in this study. S/he will be asked questions about her/his health and wellbeing. The interview will take 40-45 minutes to complete. His/ her participation in this survey depends on your consent.

By providing information s/he will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information is collected will be kept strictly confidential. It will be used for research purposes.

Participation in this survey is voluntary and s/he can choose not to answer any individual question or all the questions. However, we hope that s/he will participate in this survey since her/his views are important.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you permit (Name _____) to participate in this survey?

Yes = 1

No = 2

→ END



Guardian's Name: _____ Signature (or thumb print): _____ Date: _____

(Relation with the respondent-----)

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining assent: _____ Signature: _____ Date: _____

Consent of participant for individual information

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. You have been selected as respondents in this study.

The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

If you agree to participate in this survey, I will ask some questions about your health and wellbeing. This questionnaire will take 40-45 minutes to complete. Participation in this survey is voluntary and you can choose not to answer any individual question or all the questions. However, we hope that you will participate in this survey since your views are important.

By providing information you will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information you provide will be kept strictly confidential. It will be used for research purposes. There are no financial benefits associated with your participation.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you agree to participate in this survey?

Yes = 1 No = 2 —————> END
↓

Participant's Name: _____ Signature (or thumb print): _____ Date: _____

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining consent: _____ Signature: _____ Date: _____

Section 1: Respondent's Background

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101.	Record the time started	Hour <input type="text"/> <input type="text"/> Min <input type="text"/> <input type="text"/>	
102.	In what month and year were you born?	Month <input type="text"/> <input type="text"/> Don't Know Month 98 Year..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Don't Know Year 9998	
103.	How old were you at your last birthday? [What is your age?] COMPARE AND CORRECT 102 AND /OR 103 IF INCONSISTENT	Age (In Completed Years) <input type="text"/> <input type="text"/>	
104.	Have you ever attended a School, College or Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 Yes, School,College and Madrasha.....3 No.....4	106 109
105.	What type of school/college or Madarasa have you last attended?	School or College.....1 Madrasha.....2	
106.	What is the highest class you have completed at that School/ College or Madrasha? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	Class <input type="text"/> <input type="text"/>	
107.	Are you currently attending a School or College /Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 No.....3	109
108.	For what reasons are you not currently attending School/ College or Madrasha? MULTIPLE ANSWERS ACCEPTABLE	Distance to school.....A Concern about safety.....B Parents concern: School quality.....C Parents lack of interest.....D Poor performance in school.....E No good school in the locality.....F Didn't know about school.....G Student: Lack of interest.....H Got married.....I Had to care for siblings/ others.....J Financial constraints/costs.....K Illness: family/respondent.....L Household Chores/Work.....M Husband oppose.....N Have to take care of child.....O Other (specify).....X Don't know.....Z	
109.	Aside from housework, some persons take up jobs for which they are paid in cash or kind. Are you currently involved in any kind of work paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	111
110.	Within the last six months, have you been involved in any kind of work for which you were paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	112
111.	From where do you/did you do this work? At home, outside or both?	At home.....1 Outside home.....2 Both.....3	
<p>Now I want to talk about the family members that constitute the household you live in most of the time. Every household is different. Some adolescents get to live with both the parents in the same household, while others get to live with either one of them. I'd like to know a bit more about them and the other family members that make up your household.</p>			

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
112	Does your (name below) usually live in same household with you?		
a	Does your mother (biological mother) usually live in the same household with you?	YES.....1. NO.....2	c
b	You told that your mother doesn't live with you, Do you have step mother? If yes does your step mother usually live in the same household with you?	YES.....1 NO.....2 I don't have step mother.....9	
c	Does your father (biological father) usually live in the same household with you?	YES.....1 NO.....2	e
d	You told that your father doesn't live with you, Do you have step father? If yes does your step father usually live in the same household with you?	YES.....1 NO.....2 I don't have step father.....9	
e	Does your older brother usually live in the same household with you?	YES.....1 NO.....2	
f	Does your older sister usually live in the same household with you?	YES.....1 NO.....2	
g	Does your husband usually live in the same household with you?	YES.....1 NO.....2	
h	Does your mother-in-law usually live in the same household with you?	YES.....1 NO.....2	
i	Does your father-in-law usually live in the same household with you?	YES.....1 NO.....2	
113	CHECK Q112 a: (biological mother)	112a=1 (Lives in the same household).....1 112a=2 (Does not live in the same household).....2	118
114	Is your (biological) mother alive?	Yes.....1 No.....2	118
115	Where does she live?	Lives elsewhere, within Bangladesh.....1 Lives elsewhere, outside Bangladesh.....2 Don't know.....8	118
116	In the last one month did you have any communication (met her, by phone, by letter, by email, by IMO/Viber/WhatsApp/Messenger etc.) with her?	YES.....1 NO.....2	118
117	In the last one month how often did you communicate with her?	20 times or more.....1 10-19 times.....2 4-9 times.....3 1-3 times.....4	
118	CHECK Q112 c: (biological father)	112c=1 (Lives in the same household).....1 112c=2 (Does not live in the same household).....2	123
119	Is your (biological) father alive?	YES.....1 NO.....2	123
120	Where does he live?	Lives elsewhere, within Bangladesh.....1 Lives elsewhere, outside Bangladesh.....2 Don't know.....8	123
121	In the last one month did you have any communication (met him, by phone, by letter, by email, by IMO/ Viber/ WhatsApp/ Messenger etc.) with him?	YES.....1 NO.....2	123
122	In the last one month how often did you communicate with him?	20 times or more.....1 10-19 times.....2 4-9 times.....3 1-3 times.....4	
123	Do you have any older brother who does not live in the same household with you or lives somewhere else?	YES.....1 NO.....2	
124	Do you have any older sister who does not live in the same household with you or lives somewhere else?	YES.....1 NO.....2	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I am going to ask you about your engagement with any creative activities, cultural activities and/or outdoor sports. I also want to ask you about your affiliation with any club.			
125	Are you currently engaged in any creative, cultural activities or outdoor sports such as		
a	Drawing/painting	YES.....1 NO.....2	
b	Singing /Dancing /Drama	YES.....1 NO.....2	
c	Outdoor Sports such as football, cricket, bou-chi, hadudu/cabady, table tennis, badminton etc	YES.....1 NO.....2	
d	Reading books other than textbooks	YES.....1 NO.....2	
e	Creative Writing such as writing stories, poem etc	YES.....1 NO.....2	
f	Other (Specify):	YES.....1 NO.....2	
126	Are you currently affiliated with any club or organization such as		
a	Local Youth Club	YES.....1 NO.....2	
b	Boys Scout/Girls Scout/ Girls Guide	YES.....1 NO.....2	
c	Cultural Organization: (for example singing, dancing, drama, poetry, painting, drawing etc.)	YES.....1 NO.....2	
d	Sports Club: school/college or community level	YES.....1 NO.....2	
e	Reading Club/ Library	YES.....1 NO.....2	
f	Other (Specify):	YES.....1 NO.....2	
Nowadays, many organizations (such as Government, NGO, and School) are running adolescent programs where they teach about adolescent rights, nutrition, vocational training, reproductive health such as puberty, menstruation, marriage, family planning and other life skills. Now, I would want to know if you have ever been involved in any such adolescent program currently or previously.			
127	Are you currently involved with any adolescent program?	YES.....1 NO.....2	201
128	In the last 3 years were you involved in any adolescent program?	YES.....1 NO.....2	

Section 2: Exposure to Media

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I would like to ask you few questions about your exposure to Mobile phone, Internet, Radio, Television and newspaper.			
201.	Do you have your own mobile phone that is currently functional? [If YES, then ASK; is it a basic mobile phone or a smart phone?	Yes, basic mobile phone.....1 Yes, smart phone.....2 Yes, both basic and smart phone.....3 No.....4	204
202.	Do any of your family members currently own a functional mobile phone?	YES.....1 NO.....2	206
203.	Do you have access to a family member's mobile phone in case you want to?	YES.....1 NO.....2	206
Mobile phones are used to make and receive phone calls, text messages, access the internet etc. Now I want to know if you use the mobile phone for certain purposes.			
204.	Do you use the mobile phone to.....	205 If yes, do you use this every day or at least once a week or less than once a week	
a.	Do you use the mobile phone to make and/or receive phone calls? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
b.	Do you use the mobile phone to send and/or receive texts? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
c.	Do you use the mobile phone to listen radio/? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
d.	Do you use the mobile phone to access the internet/Google/Youtube? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
e.	Do you use the mobile phone to read newspaper/magazine? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
f.	Do you use the mobile phone to use Facebook? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
g.	Do you use the mobile phone to use IMO/Viber/WhatsApp/Messenger? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
All this time I listened to your use of mobile phone. Now I want to know about your use of Laptop/Computer or Tab (Tablet)			
206.	Do you use internet through a Laptop/computer/tablet either in the house or elsewhere? How often do you use internet through a computer/tablet: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	
207.	In the last 3 months, have you read any adolescent focused article online/internet, through mobile phone, laptop/ computer or tab?	YES.....1 NO.....2	
208.	Do you listen to the radio? How often do you listen to the radio: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	210
209.	In the last 3 months, did you listen to any adolescent focused program on the radio?	YES.....1 NO.....2	
210.	Do you watch television? How often do you watch television: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	212
211.	In the last 3 months, did you watch any adolescent focused program in TV?	YES.....1 NO.....2	
212.	Do you read printed version of newspaper/magazine? How often do you read: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	401
213.	In the last 3 months, have you read any adolescent focused news article or newspaper or magazine?	YES.....1 NO.....2	

Section 4: Marriage

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
<p>For many people marriage is an important aspect of life. In the following section, I will ask you a few questions on marriage to gain a better understanding of your thoughts about this.</p>			
401.	At what age would you like to be married?	Age in Years <input type="text"/> <input type="text"/> Don't Want to Get Married.....951	→ 404
402.	At what age would your parents/ guardians like you to be married?	Age in Years <input type="text"/> <input type="text"/> Don't Know.....98	→ 407
403.	CHECK Q401 (RESPONDENTS PREFERRED AGE) and Q402 (PARENTS' PREFERRED AGE).	401=402.....1 401 < 402.....2 401 > 402.....3	} → 407
404.	How likely is it that you would be able to convince your parents/guardian that you want to delay your marriage? Or (ask when Q 401=95 that is those who don't want to get married) How likely is it that you would be able to convince your parents/guardian that you do not want to get married?	Extremely Likely.....1 Quite Likely.....2 Unlikely.....3 Extremely Unlikely.....4 Not Sure/Don't Know.....8	→ 407
405.	Is there anybody who can assist you to convince your parents/ guardian to comply with your preferred marriage age? Or (ask when Q 401=95 that is those who don't want to get married) Is there anybody who can assist you to convince your parents/guardian to comply with your wish to not get married?	Yes.....1 No.....2 Don't Know/Not Sure.....8	} → 407
406.	Who can assist you to convince your parents/guardian to delay the age at which you marry? Or (when q401=95 that is those who don't want to get married) Who can assist you to convince your parents/guardian to comply with your wish to not get married?	Father.....A Mother.....B Grandmother.....C Grandfather.....D Brother.....E Sister.....F Uncle/aunt.....G Brother-in-law.....H Sister-in-law.....I Other relatives.....J Neighbours/friends.....K Teacher.....L Local leaders.....M Other (specify).....X	
407.	In your opinion, what is the ideal age for a girl to get married?	<input type="text"/> <input type="text"/> Years	
408.	In your opinion, what is the ideal age for a boy to get married?	<input type="text"/> <input type="text"/> Years	

Section 5: Contraception

Now I would like to talk about family planning. By using various ways or methods of family planning a couple can delay or avoid a pregnancy. I know you are not married and you may not need it, however, your thoughts and knowledge would help us to assess how unmarried girls perceive issues around Contraception.

[Circle code 1 in 501 for each method mentioned spontaneously. Check question 501 whether A-C was mentioned spontaneously. If any of these are not mentioned spontaneously then proceed down question 502 for that specific method. Read the name and description of those specific methods. Circle code 2 if method is recognized, and code 3 if not recognized in Q502.]

NO	QUESTION AND FILTER	CODING CATEGORY			SKIP
		Spontaneous YES	502. Have you ever heard of (method) of family planning? Probed		
			YES	NO	
501.	Which ways or methods have you heard about?		2	3	
A.	PILL: A woman can take oral pill to prevent pregnancy	1	2	3	
B.	CONDOM: Men can put a rubber sheath on their penis before sexual intercourse to prevent pregnancy	1	2	3	
C.	EMERGENCY CONTRACEPTION PILLS (ECP): As an emergency measure after unprotected sexual intercourse, women can take special pills at any time within three days to prevent pregnancy.	1	2	3	
D.	WITHDRAWAL: Men can be careful and pull out before climax.	1			
E.	SAFE PERIOD (COUNTING DAYS, CALENDER, and RHYTHM METHOD): Couples can avoid having sexual intercourse on certain days of the month when the women is more likely to get pregnant.	1			
F.	INJECTION: Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months	1			
G.	MALE STERILIZATION (VASECTOMY): Men can have an operation to avoid having any more children.	1			
H.	FEMALE STERILIZATION: Woman can have an operation to avoid having any more children.	1			
I.	IUD: Women can have a loop or coil placed inside them by a doctor or a nurse.	1			
J.	IMPLANT/NORPLANTS: Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for several years.	1			
K.	If respondent tells about any method spontaneously other than above: (SPECIFY)	1			
503.	CHECK Q501 *A to K At least one circle Yes <input type="checkbox"/> No <input type="checkbox"/>	Check Q502 (A to C) At least one yes (502=2) Yes <input type="checkbox"/> No <input type="checkbox"/>			601
504.	Do you know any place or person where one can get family planning information and services?	YES.....1 NO.....2			601
505.	Where is that place? Any other place? PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. RECORD ALL MENTIONED	PUBLIC SECTOR Medical college/specialized hospital.....A District Hospital.....B Maternal Child Welfare Center (MCWC).....C School Health Clinic.....D Upazila Health Complex.....E Union Health & Family Welfare Centre/Rural dispensary/ Union Subcentre/Family Welfare CentreF Community Clinic.....G Satellite clinic/EPI outreach site.....H Govt. field worker (FWA).....I Other govt. (Specify).....J NGO SECTOR NGO static clinic.....K NGO satellite clinic.....L NGO depot holder.....M NGO fieldworker.....N Other NGO (Specify).....O PRIVATE MEDICAL SECTOR Private hospital/clinic.....P Qualified doctor's chamber.....Q Non-qualified doctor's chamber.....R Pharmacy/drug store.....S Homeo/Herbal/Unani.....T Other private medical (Specify).....U OTHER SOURCE Shop.....V Friend/relatives.....W			

Section 6: Time Use

No	Filters and Questions	Coding Categories	Skip
601.	Instruction to interviewer: Check the day of the interview and circle the appropriate Code	Sunday.....1 Monday.....2 Tuesday.....3 Wednesday.....4 Thursday.....5 Friday.....6 Saturday.....7	
CHECK 107: Currently attending school/College/Madrasha <input type="checkbox"/> Not attending school/College/Madrasha <input type="checkbox"/>			604a
Now, I want to ask you about different activities you are involved in last 24 hours. I want to know about the amount of time you have spent yesterday doing these activities. (The last 24 hours means the time frame in between 6 am yesterday morning to 6 am today morning.)		If yes, how much time in total you spend doing this yesterday/ in the last 24 hours: (in minutes/hours)	
602 a.	Did you go to school/College/Madrasha yesterday?	Yes.....1 No.....2 <div style="text-align: right; margin-top: 5px;">↓</div>	602 b. <input type="text"/> Hours <input type="text"/> Minutes
603 a.	Yesterday did you spend any time on studying at home/attending any coaching centre or private tutor at home?	Yes.....1 No.....2 <div style="text-align: right; margin-top: 5px;">↓</div>	603 b. <input type="text"/> Hours <input type="text"/> Minutes
604 a	Yesterday did you spend any time on any physical activity like exercise, walking for exercise, swimming, cycling, sports etc?	Yes.....1 No.....2 <div style="text-align: right; margin-top: 5px;">↓</div>	604 b. <input type="text"/> Hours <input type="text"/> Minutes
605 a	Yesterday did you spend any time doing creative or recreational activities such as-, singing, playing instrument, painting, reading any books other than text-books?	Yes.....1 No.....2 <div style="text-align: right; margin-top: 5px;">↓</div>	605 b. <input type="text"/> Hours <input type="text"/> Minutes
606.	For how long in total did you sleep from yesterday 6 am till today 6am.	<input type="text"/> Hours <input type="text"/> Minutes	

Section 7: Connectedness: family and friends

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					Skip
701	CHECK 112 a and 114 : If 112a=1 or Q114=1 <input type="checkbox"/>	If 112a=2 and 114=2 <input type="checkbox"/>					704
702	Now I am going to read out some statements about your relationship with your biological mother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with mother left as a child and now not in touch, then code 'Not in touch with mother')	Never	Sometim es	Most of the time	Always	Not in touch with mothe r	
a.	You enjoy spending time with your mother	1	2	3	4	9	704
b.	You and your mother are pretty close.	1	2	3	4	9	
c.	You talk with your mother about very personal things	1	2	3	4	9	
703	Now I am going to mention some issues and ask you if you feel comfortable discussing those with your mother	Yes		No			
a.	Menstruation	1		2			
b.	Progress in studies	1		2			
c.	When you want to have a child	1		2			
d.	Using family planning methods	1		2			
e.	Seeking health services for yourself	1		2			
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g.	Participation in income generating activities outside home	1		2			
h.	Your Marriage	1		2			
i.	Intimate/Personal relationship	1		2			
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2			
704	CHECK: 112c and 119 If 112 c=1 or 119=1 <input type="checkbox"/>	If 112c=2 and 119=2 <input type="checkbox"/>					713
705	Now I am going to read out some statements about your relationship with your biological father and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with father left as a child and now not in touch, then code 'Not in touch with father')	Never	Sometim es	Most of the time	Always	Not in touch with father	
a.	You enjoy spending time with your father	1	2	3	4	9	713
b.	You and your father are pretty close.	1	2	3	4	9	
c.	You talk with your father about very personal things	1	2	3	4	9	
706	Do you feel comfortable discussing following issues with your father?	Yes		No			
a.	Menstruation	1		2			
b.	Progress in studies	1		2			
c.	When you want to have a child	1		2			
d.	Using family planning methods	1		2			
e.	Seeking health services for yourself	1		2			
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g.	Participation in income generating activities outside home	1		2			
h.	Your Marriage	1		2			
i.	Intimate/Personal relationship	1		2			
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private	1		2			

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				Skip
	parts, harassment through mobile call or text message.					
713	CHECK: 112e and 123 If 112 e=1 or 123=1 <input type="checkbox"/> ↓	If 112e=2 and 123=2 <input type="checkbox"/> →				716
714	Now I am going to read out some statements about your relationship with your elder brother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder brother, left as a child and now not in touch, then code 'Not in touch with elder brother')	Never	Sometim es	Most of the time	Always	Not in touch with elder brother
a	You enjoy spending time with your elder brother	1	2	3	4	g ↓ 716
b	You and your elder brother are pretty close.	1	2	3	4	9
c	You talk with your elder brother about very personal things	1	2	3	4	9
715	Do you feel comfortable discussing following issues with your elder brother?	Yes		No		
a	Menstruation	1		2		
b	Progress in studies	1		2		
c	When you want to have a child	1		2		
d	Using family planning methods	1		2		
e	Seeking health services for yourself	1		2		
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g	Participation in income generating activities outside home	1		2		
h	Your Marriage	1		2		
i	Intimate/Personal relationship	1		2		
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		
716	CHECK: 112f and 124 If 112 f=1 or 124=1 <input type="checkbox"/> ↓	If 112f=2 and 124=2 <input type="checkbox"/> →				719
717	Now I am going to read out some statements about your relationship with your elder sister and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder sister, left as a child and now not in touch, then code 'Not in touch with elder sister')	Never	Sometim es	Most of the time	Always	Not in touch with elder sister
a	You enjoy spending time with your elder sister	1	2	3	4	g ↓ 719
b	You and your elder sister are pretty close.	1	2	3	4	9
c	You talk with your elder sister about very personal things	1	2	3	4	9

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				Skip
718	Do you feel comfortable discussing following issues with your elder sister?	Yes	No			
a	Menstruation	1	2			
b	Progress in studies	1	2			
c	When you want to have a child	1	2			
d	Using family planning methods	1	2			
e	Seeking health services for yourself	1	2			
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1	2			
g	Participation in income generating activities outside home	1	2			
h	Your Marriage	1	2			
i	Intimate/Personal relationship	1	2			
j	Sexual harassments : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1	2			
719	Now I am going to read out some statements about your relationship with your friends. You may consider anyone as your friend as for example your neighbours, school mates, cousins, play mates, or any individuals you communicate with.	Never	Sometimes	Most of the time	Always	Does not have friends
a.	You have friends that you consider close and trust completely	1	2	3	4	9 ↓ 801
b.	Spending time with friends is important to you.	1	2	3	4	9
c.	You and your friends talk openly with each other about personal things.	1	2	3	4	9

Section 8: Gender norms

No.	QUESTIONS	CODING CATEGORIES		
<p>There are several opinions about the role and duties of a girl/female or a boy/male in our families and society. Now I am going to read out some statements and would like to know whether you agree or disagree with them.</p>				
801	Gender attitudes	Agree	Disagree	Don't Know
A.	It is important that sons have more education than daughters.	1	2	8
B.	Outdoor games are only for boys not for girls.	1	2	8
C.	A family is not complete until they have at least one son.	1	2	8
D.	Household chores are for women only, not for men, even if the woman works outside the house.	1	2	8
E.	Women should not be allowed to work outside of home.	1	2	8
F.	A woman should always listen to her husband even if she disagrees.	1	2	8
G.	Looking after the household and kids is the responsibility of women only.	1	2	8
H.	Husband has the right to beat his wife when she does not obey him.	1	2	8

Section 11: Utilization of Health Services

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	Now I am going to ask you some questions regarding seeking information and/or service relating to health .		
1101.	Did you visit any health facility in last 6 months for yourself?	Yes.....1 No.....2	1107
1102.	How many visits did you make?	_____ TIMES	
1103.	Where did you visit last? <i>Probe to find out the correct health facility that was last visited and circle.</i> <i>If unable to determine if the facility is a hospital, clinic, public, NGO or private, please write down the name of the facility below:</i> (Name of Facility).	PUBLIC Public medical college/specialized hospital.....11 District hospital.....12 Maternal child welfare center (MCWC).....13 Upazila Health Complex14 Union Health & Family Welfare Centre/ Rural dispensary/ union sub centre.....15 School health clinic16 Satellite clinic/EPI outreach site.....17 Community clinic.....18 Other govt. (Specify).....20 NGO NGO static clinic.....21 NGO satellite clinic.....22 NGO depo holder.....23 Other NGO (specify).....26 PRIVATE Private hospital/clinic/medical college.....31 Qualified doctor's chamber32 Non-qualified doctor's chamber33 Pharmacy/drugstore34 Homeopath/Herbal/Unani35 Other Private medical_(Specify).....36	
1104.	In the last health facility you visited, is there a separate corner for adolescents to provide information and service?	Yes.....1 No.....2 Don't Know.....8	
1105.	In your last visit did you go for any information or services or both?	Information only.....1 Service only.....2 Both information and service.....3	
1106.	What information and/ or services did you receive the last time you visited? Anything else? <i>Do not read out responses.</i> <i>Circle all mentioned.</i>	Menstrual problem management.....A Anemia.....B White discharge.....C Nutrition.....D Burning sensation during micturition.....E General illness.....F Weakness.....G Allergy/Rash/Itching.....H Injury/Accident.....I Tetanus or Vaccination.....J Diarrheal disease.....K Gastric problem.....L FP services.....M Post abortion care.....N Antenatal care.....O Delivery.....P Postnatal care.....Q Wet dream.....R Did not receive any treatment or service.....S Other.....X	

NO.	QUESTIONS AND FILTERS		CODING CATEGORIES		SKIP
1107	Now I would want to know if you like to know more about following topics?		1108	If yes , what would be your two most preferred medium to receive information on this topic? (Interview should show the picture page showing 8 medium such as A= Teacher, B= Books, C=Television, D=Radio/FM E= Mobile/ Internet; F= Newspaper/Magazine; G=Hotline; H= Health Provider)	
a.	Do you want to know more about Puberty/ Physical Change?	Yes.....1 No.....2 ↓	a.	1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
b.	Do you want to know more about Wet Dream?	Yes.....1 No.....2 ↓	b.	1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
c.	Do you want to know more about menstruation?	Yes.....1 No.....2 ↓	c.	1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
d.	Do you want to know more about marriage?	Yes.....1 No.....2 ↓	d.	1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
e.	Do you want to know more about pregnancy?	Yes.....1 No.....2 ↓	e.	1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
f.	Do you want to know more about family panning?	Yes.....1 No.....2 ↓	f.	1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
g.	Do you want to know more about ANC/ Delivery and PNC?	Yes.....1 No.....2	g.	1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	

Section 12: Nutrition

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP
1201.	Now I would like to ask you about liquids or foods that you may have had during last 24 hours that means yesterday during the day or at night. I am interested in whether you had the item I mention even if it was combined with other foods. (Last 24 hour means from yesterday 6 am till today 6am)				
	Did you drink/eat:	YES	NO	Don't remember	
a	Milk such as tinned, powdered, or fresh animal milk?	1	2	8	
b	Shemai, Rice pudding, cheese, curd or other food made from milk?	1	2	8	
c	Rice, bread, paratha, noodles, puffed rice, flattened rice or other foods made from grains?	1	2	8	
d	White potatoes, turnips or any other foods made from roots?	1	2	8	
e	Pumpkin, carrots, squash or sweet potatoes that are yellow or orange inside and enriched in vitamin 'A'?	1	2	8	
f	Kochu, koshu shaak, kochur loti	1	2	8	
g	Any dark green, leafy vegetables like spinach, poi sag, methi, kolmi, kochu,	1	2	8	
h	Ripe mangoes, papayas, ripe kathal, bangi or other Vitamin A rich fruits?	1	2	8	
i	Any other fruits like banana, grapes, apple, guava?	1	2	8	
j	Any other vegetables like cabbage, potol, kopi?	1	2	8	
k	Liver, kidney, heart or other organ meats?	1	2	8	
l	Any meat, such as beef, lamb, goat, duck, chicken, or bird ?	1	2	8	
m	Fish, dry fish, shrimps or crab?	1	2	8	
n	Eggs?	1	2	8	
o	Any foods made from beans, peas, lentils, or nuts?	1	2	8	
p	Unripe banana	1	2	8	
q	Any other? (SPECIFY)	1	2	8	
1202.	Are you taking any iron folic acid tablets now?	Yes.....1	No.....2		1204
1203.	How many iron folic acid tablets did you consume in last 7 days?	Number.....□□			
1204.	Ask Consent for measuring weight and height and weight?				
1205.	Weight in Kilograms	a.Kilograms.....□□□□ □□ b.Kilograms.....□□□□ □□ If difference between a and b is more than 0.10 kg, measure the weight for third (c) time. c.Kilograms.....□□□□ □□ Not Present.....99994 Refused.....99995			
1206.	Height in Centimeters	a.Centimetre.....□□□□ □□ b.Centimetre.....□□□□ □□ If difference between a and b is more than 0.5 cm, measure the height for third (c) time. c.Centimetre.....□□□□ □□ Not Present.....99994 Refused.....99995			
1207.	ID of weight machine	□□			
1208.	ID of height machine	□□			
1209.	Code of the data collector for anthropometric measurement	□□□□			
1501.	End of interview	Hour	□□	Minute	□□

**BANGLADESH ADOLESCENT HEALTH AND WELLBEING SURVEY
(BAHWS) 2019-20**

QUESTIONNAIRE FOR EVER MARRIED GIRL (15-19 YEARS)

TYPE TWO QUESTIONNAIRE

**National Institute of Population Research and Training (NIPORT)
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare**

icddr,b

MEASURE Evaluation

Human Development Research Centre

FACE SHEET

IDENTIFICATION				
CLUSTER NUMBER.....	□□□□			
HOUSEHOLD NUMBER.....	□□□			
NAME OF HOUSEHOLD HEAD.....	□□			
NAME AND LINE # OF RESPONDENT _____				
INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE				DAY □□ MONTH □□ YEAR □□□□
INTERVIEWER'S NAME				INT. CODE □□□
RESULT*				RESULT* □
NEXT VISIT: DATE TIME	_____ _____	_____ _____		TOTAL NO. OF VISITS □
<p>*RESULT CODES:</p> <p>1 COMPLETED</p> <p>2 NOT AT HOME</p> <p>3 POSTPONED</p> <p>4 REFUSED</p> <p>5 PARTLY COMPLETED</p> <p>6 INCAPACITATED</p> <p>7 OTHERS _____</p> <p align="center">(SPECIFY)</p>				
SUPERVISOR NAME _____ □□□□ DATE _____	FIELD EDITOR NAME _____ □□□□ DATE _____	ICDDRDB MONITORING OFFICER NAME _____ □□□□ DATE _____	OFFICE EDITOR □□	KEYED BY □□

Consent of participant for individual information

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. You have been selected as respondents in this study.

The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

If you agree to participate in this survey, I will ask some questions about your health and wellbeing. This questionnaire will take 40-45 minutes to complete. Participation in this survey is voluntary and you can choose not to answer any individual question or all the questions. However, we hope that you will participate in this survey since your views are important.

By providing information you will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information you provide will be kept strictly confidential. It will be used for research purposes. There are no financial benefits associated with your participation.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you agree to participate in this survey?

Yes = 1

No = 2

—————> END



Participant's Name: _____ Signature (or thumb print): _____ Date: _____

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining consent: _____ Signature: _____ Date: _____

Section 1: Respondent's Background

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101.	Record the time started	Hour <input type="text"/> <input type="text"/> Min <input type="text"/> <input type="text"/>	
102.	In what month and year were you born?	Month..... <input type="text"/> <input type="text"/> Don't Know Month.....98 Year..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Don't Know Year.....9998	
103.	How old were you at your last birthday? [What is your age?] COMPARE AND CORRECT 102 AND /OR 103 IF INCONSISTENT	Age (In Completed Years) <input type="text"/> <input type="text"/>	
103a	Are you now married, separated, deserted, divorced, and widowed?	Currently Married.....1 Separated.....2 Deserted.....3 Divorced.....4 Widowed.....5	104
103b	How old is your (current) husband?	Age (In Completed Years) <input type="text"/> <input type="text"/>	
104.	Have you ever attended a School, College or Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 Yes, School, College and Madrasha.....3 No.....4	106 109
105.	What type of school/college or Madarasa have you last attended?	School or College.....1 Madrasha.....2	
106.	What is the highest class you have completed at that School/ College or Madrasha? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	Class..... <input type="text"/> <input type="text"/>	
107.	Are you currently attending a School or College /Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 No.....3	109
108.	For what reasons currently are you not attending School/ College or Madrasha? MULTIPLE ANSWERS ACCEPTABLE	Distance to school.....A Concern about safety.....B Parents concern: School quality.....C Parents lack of interest.....D Poor performance in school.....E No good school in the locality.....F Didn't know about school.....G Student: Lack of interest.....H Got married.....I Had to care for siblings/ others.....J Financial constraints/costs.....K Illness: family/respondent.....L Household Chores/Work.....M Husband oppose.....N Have to take care of child.....O Other (specify).....X Don't know.....Z	
109.	Aside from housework, some persons take up jobs for which they are paid in cash or kind. Are you currently involved in any kind of work paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	111
110.	Within the last six months, have you been involved in any kind of work for which you were paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	112
111.	From where do you/did you do this work? At home, outside or both?	At home.....1 Outside home.....2 Both.....3	
Now I want to talk about the family members that constitute the household you live in most of the time. Every household is different. Some adolescents get to live with both the parents in the same household, while others get to live with either one of them. I'd like to know a bit more about them and the other family members that make up your household.			
112	Does your (name below) usually live in same household with you?		
a.	Does your mother (biological mother) usually live in the same household with you?	YES.....1 NO.....2	c

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
b.	You told that your mother doesn't live with you, Do you have step mother? If yes does your step mother usually live in the same household with you?	YES.....1 NO.....2 I don't have step mother9	
c.	Does your father (biological father) usually live in the same household with you?	YES.....1 NO.....2	e
d.	You told that your father doesn't live with you, Do you have step father? If yes does your step father usually live in the same household with you?	YES.....1 NO.....2 I don't have step father9	
e.	Does your older brother usually live in the same household with you?	YES.....1 NO.....2	
f.	Does your older sister usually live in the same household with you?	YES.....1 NO.....2	
g.	Does your husband usually live in the same household with you?	YES.....1 NO.....2	
h.	Does your mother-in-law usually live in the same household with you?	YES.....1 NO.....2	
i.	Does your father-in-law usually live in the same household with you?	YES.....1 NO.....2	
Now I am going to ask you about your engagement with any creative activities, cultural activities and/or outdoor sports. I also want to ask you about your affiliation with any club.			
125	Are you currently engaged in any creative, cultural activities or outdoor sports such as		
a.	Drawing/painting	YES.....1 NO.....2	
b.	Singing /Dancing /Drama	YES.....1 NO.....2	
c.	Outdoor Sports such as football, cricket, bou-chi, hadudu/cabady, table tennis, badminton etc	YES.....1 NO.....2	
d.	Reading books other than textbooks	YES.....1 NO.....2	
e.	Creative Writing such as writing stories, poem etc	YES.....1 NO.....2	
f.	Other (Specify):	YES.....1 NO.....2	
126	Are you currently affiliated with any club or organization such as		
a	Local Youth Club	YES.....1 NO.....2	
b	Boys Scout/Girls Scout/ Girls Guide	YES.....1 NO.....2	
c	Cultural Organization: (for example singing, dancing, drama, poetry, painting, drawing etc.)	YES.....1 NO.....2	
d	Sports Club: school/college or community level	YES.....1 NO.....2	
e	Reading Club/ Library	YES.....1 NO.....2	
f	Other (Specify):	YES.....1 NO.....2	
Nowadays, many organizations (such as Government, NGO, and School) are running adolescent programs where they teach about adolescent rights, nutrition, vocational training, reproductive health such as puberty, menstruation, marriage, family planning and other life skills. Now, I would want to know if you have ever been involved in any such adolescent program currently or previously.			
127	Are you currently involved with any adolescent program?	YES.....1 NO.....2	201
128	In the last 3 years were you involved in any adolescent program?	YES.....1 NO.....2	

Section 2: Exposure to Media

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I would like to ask you few questions about your exposure to Mobile phone, Internet, Radio, Television and newspaper.			
201.	Do you have your own mobile phone that is currently functional? [If YES, then ASK; is it a basic mobile phone or a smart phone?	Yes, basic mobile phone.....1 Yes, smart phone.....2 Yes, both basic and smart phone.....3 No.....4	204
202.	Do any of your family members currently own a functional mobile phone?	YES.....1 NO.....2	206
203.	Do you have access to a family member's mobile phone in case you want to?	YES.....1 NO.....2	206
Mobile phones are used to make and receive phone calls, text messages, access the internet etc. Now I want to know if you use the mobile phone for certain purposes.			
204.	Do you use the mobile phone to.....	205 If yes, do you use this every day or at least once a week or less than once a week	
a.	Do you use the mobile phone to make and/or receive phone calls? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
b.	Do you use the mobile phone to send and/or receive texts? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
c.	Do you use the mobile phone to listen radio/? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
d.	Do you use the mobile phone to access the internet/Google/YouTube? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
e.	Do you use the mobile phone to read newspaper? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
f.	Do you use the mobile phone to use Facebook? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
g.	Do you use the mobile phone to use IMO/Viber/WhatsApp/Messenger? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
All this time I listened to your use of mobile phone. Now I want to know about your use of Laptop/Computer or Tab (Tablet)			
206.	Do you use internet through a Laptop/computer/tablet either in the house or elsewhere? How often do you use internet through a computer/tablet: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	
207.	In the last 3 months, have you read any adolescent focused article online/internet, through mobile phone, laptop/ computer or tab?	YES.....1 NO.....2	
208.	Do you listen to the radio? How often do you listen to the radio: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	210
209.	In the last 3 months, did you listen to any adolescent focused program on the radio?	YES.....1 NO.....2	
210.	Do you watch television? How often do you watch television: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	212
211.	In the last 3 months, did you watch any adolescent focused program in TV?	YES.....1 NO.....2	
212.	Do you read printed version of newspaper/magazine? How often do you read: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	409
213.	In the last 3 months, have you read any adolescent focused news article or newspaper or magazine?	YES.....1 NO.....2	

Section 4: Marriage

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
<p>For many people marriage is an important aspect of life. In the following section, I will ask you a few questions on marriage to gain a better understanding of your thoughts about this.</p>			
409.	<p>Check 103a: Currently Married <input type="checkbox"/></p>	<p>Separated/ Deserted/ Divorced/ Widowed <input type="checkbox"/></p>	507
410.	<p>Is your husband living with you now or is he staying elsewhere?</p>	<p>Living with her.....1 Staying elsewhere, within Bangladesh.....2 Staying elsewhere, outside Bangladesh.....3</p>	413
411.	<p>How many times did he come, or you met with him in the past 12 months?</p>	<p>Number of times.....<input type="text"/><input type="text"/> Did not come/met in the last 12 months.....00</p>	
<p>Now I will ask you some question about your marriage. In some cases, people get married more than once, and no one to be blamed for this or nothing should be ashamed of this. Please don't be ashamed.</p>			
413.	<p>Have you been married only once or more than once?</p>	<p>Only once 1 More than once 2</p>	
414.	<p>Check 413: Married only once <input type="checkbox"/> Married more than once <input type="checkbox"/></p> <p>Ask: In what month and year did you get married? In what month and year were you married to your 1st husband?</p>	<p>Month.....<input type="text"/><input type="text"/> Don't know month.....98 Year.....<input type="text"/><input type="text"/><input type="text"/><input type="text"/> Don't know year.....9998</p>	
415.	<p>How old were you when you (first) got married?</p>	<p>Age (In Completed Years)<input type="text"/><input type="text"/></p>	
416.	<p>Did you start living with your (first) husband the day you got married?</p>	<p>Yes.....1 No.....2 Did not start living with husband yet.....3</p>	418 418
417.	<p>After how many days/months/years of your marriage did you start living with your (first) husband? <i>(If response is in month, convert to year and write)</i></p>	<p>Months.....<input type="text"/><input type="text"/> Days.....<input type="text"/><input type="text"/></p>	
418.	<p>Do you think you got married at an age that was right for you or would you have preferred to marry earlier or later?</p>	<p>Right time.....1 Earlier.....2 Later.....3</p>	507
419.	<p>At what age would you have preferred to get married?</p>	<p>Age (In Completed Years)<input type="text"/><input type="text"/></p>	









Section 5: Reproductive history, Contraception and Fertility preference



NO	QUESTION AND FILTER	CODING CATEGORY	SKIP
Now I would like to ask about all the births you have had during your life.			
507.	If you have given birth in your lifetime I want to ask you more regarding those births. Have you ever given birth?	Yes.....1 No.....2 →	522
508.	Do you have any sons or daughters to whom you have given birth who are living with you?	Yes.....1 No.....2 →	510
509.	c) How many sons live with you? d) And how many daughters live with you?	c) Sons living at home..... <input type="text"/> <input type="text"/> d) Daughters living at home..... <input type="text"/> <input type="text"/>	
510.	Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?	Yes.....1 No.....2 →	511a
511.	a)How many sons are alive but do not live with you? b) And how many daughters are alive but do not live with you?	c) Sons live elsewhere..... <input type="text"/> <input type="text"/> d) Daughters live elsewhere..... <input type="text"/> <input type="text"/>	
511a	How many boys and girls are alive? "If she has no alive child; write 00"	Total number of living children <input type="text"/> <input type="text"/>	
512.	Have you ever given birth to a boy or girl who was born alive but later died? IF NO, PROBE: Any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life even if for a very short time?	Yes.....1 No.....2 →	514
513.	c) How many boys have died? d) And how many girls have died?	a) Boys died..... <input type="text"/> <input type="text"/> b) Girls died..... <input type="text"/> <input type="text"/>	
514.	SUM ANSWER TO 509, 511 AND 513, AND ENTER TOTAL	Total Births..... <input type="text"/> <input type="text"/>	
515.	CHECK 514: Just to make sure that I have this right: you have had in TOTAL _____ births during your life. Is that correct? YES <input type="checkbox"/> NO <input type="checkbox"/> PROBE AND CORRECT 507-514 AS NECESSARY ←		
518	At what month and year your 1 st child born?	Month <input type="text"/> <input type="text"/> Month not known.....98 Years <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Year not known.....9998	
519	How old were you when your 1 st child born?	Write in completed year <input type="text"/> <input type="text"/> Years	
520	Did you prefer to have your 1 st child at that age or you wanted to have earlier or later?	At that age.....1 → Wanted to have earlier.....2 Wanted to have later.....3	522
521	When (at what age) would you have preferred to have your 1 st child?	Write in completed year <input type="text"/> <input type="text"/> Years	
522	Are you currently pregnant?	Yes.....1 No.....2 Unsure.....8	

NO	QUESTION AND FILTER	CODING CATEGORY	SKIP
523	Check 507 and 522; If 507=2 and 522=1 ↓	If 507=1 and 522=2 or 8 If 507=1 and 522=1 If 507=2 and 522=2 or 8	527 532 526
524	Did you want to get pregnant at this time?	Yes.....1 No.....2	532
525	When (at what age) would you have prefer to have your first child?	Write in completed year <input type="text"/> <input type="text"/> Years	532
526	At what age do you want to take your first child?	Write in completed year <input type="text"/> <input type="text"/> Years	
Now I would like to talk about family planning – The various ways or methods that a couple can use to delay or avoid a pregnancy			
527.	Check Q103a Currently Married <input type="checkbox"/> ↓	Separated/Deserted/Divorced/Widowed <input type="checkbox"/>	710
528.	Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?	Yes.....1 No.....2	531
529.	Which method are you using? RECORD ALL MENTIONED	Female sterilization.....A Male sterilization.....B IUD.....C Injectables.....D Implants.....E Pill.....F Condom.....G Female condom.....H Emergency Contraceptive Pill (ECP).....I Lactational Amenorrhea Method (LAM).....K Rhythm Method.....L Withdrawal.....M Other Modern Method (Specify).....X Other Traditional Method (Specify).....Y	536
530.	Where did you obtain (Current method) the last time? Probe to identify the type of source <i>If unable to determine if the facility is a hospital, clinic, public, NGO or private, please write down the name of the facility below:</i> (Name of Facility).	PUBLIC SECTOR Medical college/specialized hospital.....11 District hospital.....12 Maternal child welfare center (MCWC).....13 Upazila Health Complex.....14 Union Health & Family Welfare Centre/ Rural dispensary/ Union Subcentre.....15 Satellite clinic/EPI outreach site.....17 Community clinic.....18 Govt. field worker (FWA).....19 Other govt. (Specify).....20 NGO SECTOR NGO static clinic.....21 NGO satellite clinic.....22 NGO depot holder.....23 NGO fieldworker.....24 Other NGO (Specify).....26 PRIVATE MEDICAL SECTOR Private hospital/clinic.....31 Qualified doctor's chamber.....32 Non-qualified doctor's chamber.....33 Pharmacy/drug store.....34 Homeo/Herbal/Unani.....35 Other(Specify).....36 OTHER SOURCE Shop.....41 Friend/relatives.....42 Husband.....43 Other(Specify).....96	536

NO	QUESTION AND FILTER	CODING CATEGORY	SKIP
531.	Why are you and your husband not doing something or using any contraceptive method to delay or avoid getting pregnant?	General health concerns.....A Side effects.....B Difficulty in having sex.....C Interfered physiological normal processes...D Did not like the method.....E Husband opposed.....F Others opposed.....G Social stigma.....H Religious prohibition.....I Currently pregnant.....J Want to have child now.....K Didn't find the appropriate FP method.....L Husband lives abroad.....M Other (Specify).....X	
532.	Do you intent to use family planning method in the next 12 month?	Yes.....1 No.....2 Haven't decided yet.....8	534
533.	Which method do you prefer to use? RECORD ALL MENTIONED	Female sterilization.....A Male sterilization.....B IUD.....C Injectables.....D Implants.....E Pill.....F Condom.....G Emergency Contraceptive Pill (ECP).....I Lactational Amenorrhea Method(LAM).....K Rhythm Method.....L Withdrawal.....M Other Modern Method (Specify).....X Other Traditional Method (Specify).....Y	
534.	Have you ever used anything or tried in any way to delay or avoid pregnancy?	Yes.....1 No.....2	537
535.	What methodid you use? RECORD ALL MENTIONED	Female sterilization.....A Male sterilization.....B IUD.....C Injectables.....D Implants.....E Pill.....F Condom.....G Emergency Contraceptive Pill (ECP).....I Lactational Amenorrhea Method (LAM).....K Rhythm Method.....L Withdrawal.....M Other Modern Method (Specify).....X Other Traditional Method (Specify).....Y	
536.	Would you say that using contraception is mainly your decision, mainly your husband's decision, or do you both decide together?	Mainly My Decision.....1 Mainly Husband.....2 Both.....3 Other.....6 (Specify)	
537	Check 507 or 511 a		
	537 a. Has a living child 511a=1 or more <input type="checkbox"/>	537b. No living child 507=2 or 511a=0 <input type="checkbox"/>	None.....00 Number..... <input type="text"/> <input type="text"/> Did not think of it yet.....98
	If you could go back to the time you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be?	If could choose exactly the number of children to have in your whole life, how many would that be?	

Section 7: Connectedness: family and friends

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
707	PLEASE CHECK Q 103A (Currently married) <input type="checkbox"/> 	Separated/Deserted/Divorced/Widowed <input type="checkbox"/> 				710
708	Now I am going to read out some statements about your relationship with your husband and want to know which statement is applicable about you?	Never	Sometimes	Most of the times	Always	
a.	You enjoy spending time with your husband	1	2	3	4	
b.	You and your husband are pretty close.	1	2	3	4	
c.	You talk with your husband about very personal things	1	2	3	4	
709	Now I am going to mention some issues and ask you if you feel comfortable discussing those with your husband	Yes		No		
a.	Menstruation	1		2		
b.	Progress in studies	1		2		
c.	When you want to have a child	1		2		
d.	Using family planning methods	1		2		
e.	Seeking health services for yourself	1		2		
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g.	Participation in income generating activities outside home	1		2		
h.	Your Marriage	1		2		
i.	Intimate/Personal relationship	1		2		
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		
710	CHECK 112a Mother lives in the same household Yes <input type="checkbox"/>  No <input type="checkbox"/> 	CHECK 112h mother in law lives in the same household Yes <input type="checkbox"/>  No <input type="checkbox"/> 				713
	Ask the following questions by referring to biological mother	Ask the following questions by referring to Mother in law				
710.1	Now I am going to read out some statements about your relationship with your mother/mother in law and want to know which statement is applicable about you?	Never	Sometimes	Most of the times	Always	
a	You enjoy spending time with your mother/mother in law.	1	2	3	4	
b	You and your mother/mother in law are pretty close.	1	2	3	4	
c	You talk with your mother/mother in law about very personal things	1	2	3	4	
711	Now I am going to mention some issues and ask you if you feel comfortable discussing those with your mother/mother in law	Yes		No		
a.	Menstruation	1		2		
b.	Progress in studies	1		2		
c.	When you want to have a child	1		2		
d.	Using family planning methods	1		2		
e.	Seeking health services for yourself	1		2		
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g.	Participation in income generating activities outside home	1		2		
h.	Your Marriage	1		2		
i	Intimate/Personal relationship	1		2		
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		
713	CHECK: 112e and 123 If 112 e=1 or 123=1 <input type="checkbox"/> 	If 112e=2 and 123=2 <input type="checkbox"/> 				716
714	Now I am going to read out some statements about your relationship with your elder brother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder brother, left as a child and now not in touch, then code 'Not in touch with elder brother')	Never	Sometimes	Most of the time	Always	Not in touch with elder brother
a	You enjoy spending time with your elder brother	1	2	3	4	g ↓ 716

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
		1	2	3	4	
b	You and your elder brother are pretty close.	1	2	3	4	9
c	You talk with your elder brother about very personal things	1	2	3	4	9
715	Do you feel comfortable discussing following issues with your elder brother?	Yes		No		
a	Menstruation	1		2		
b	Progress in studies	1		2		
c	When you want to have a child	1		2		
d	Using family planning methods	1		2		
e	Seeking health services for yourself	1		2		
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g	Participation in income generating activities outside home	1		2		
h	Your Marriage	1		2		
i	Intimate/Personal relationship	1		2		
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		
716	CHECK: 112f and 124. If 112 f=1 or 124=1 <input type="checkbox"/>  If 112f=2 and 124=2 <input type="checkbox"/> 					719
717	Now I am going to read out some statements about your relationship with your elder sister and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder sister, left as a child and now not in touch, then code 'Not in touch with elder sister')	Never	Sometimes	Most of the time	Always	Not in touch with elder sister
a	You enjoy spending time with your elder sister	1	2	3	4	9 ↓ 719
b	You and your elder sister are pretty close.	1	2	3	4	9
c	You talk with your elder sister about very personal things	1	2	3	4	9
718	Do you feel comfortable discussing following issues with your elder sister?	Yes		No		
a	Menstruation	1		2		
b	Progress in studies	1		2		
c	When you want to have a child	1		2		
d	Using family planning methods	1		2		
e	Seeking health services for yourself	1		2		
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2		
g	Participation in income generating activities outside home	1		2		
h	Your Marriage	1		2		
i	Intimate/Personal relationship	1		2		
j	Sexual harassments : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2		
719.	Now I am going to read out some statements about your relationship with your friends. You may consider anyone as your friend as for example your neighbours, school mates, cousins, play mates, or any individuals you communicate with. Please take your time to understand the statements I will read out. Decide if the statement is true for you always, most of the time, sometimes or never	Never	Sometimes	Most of the time	Always	Does not have friend
a.	You have friends that you consider close and trust completely	1	2	3	4	9 ↓ 801
b.	Spending time with friends is important to you.	1	2	3	4	9
c.	You and your friends talk openly with each other about personal things.	1	2	3	4	9

Section 8: Gender norms

No.	QUESTIONS	CODING CATEGORIES		
There are several opinions about the role and duties of a girl/female or a boy/male in our families and society. Now I am going to read out some statements and would like to know whether you agree or disagree with them.				
801	Gender attitudes	Agree	Disagree	Don't Know
A.	It is important that sons have more education than daughters.	1	2	8
B.	Outdoor games are only for boys not for girls	1	2	8
C.	A family is not complete until they have at least one son.	1	2	8
D.	Household chores are for women only, not for men, even if the woman works outside the house.	1	2	8
E.	Women should not be allowed to work outside of home.	1	2	8
F.	A woman should always listen to her husband even if she disagrees.	1	2	8
G.	Looking after the household and kids is the responsibility of women only.	1	2	8
H.	Husband has the right to beat his wife when she does not obey him.	1	2	8

Section 9: Mental Health

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			
<p>Now I am going to discuss some mental health conditions that a person may experience. I want to know whether you experienced any such conditions in the last 2 weeks; if you have encountered these conditions, I would like to know how frequently you have experienced them in the last two weeks.</p> <p>Instruction for interviewer: Please explain to the respondent what is meant by 2 weeks.</p>					
901	In the last two weeks till today how often have you.....	Not at all	Some days	Majority of the days	Nearly Everyday
a.	In the last two weeks till today how often have you felt down, depressed, irritable, or hopeless- Not at all, some days, majority of the days or nearly every day?	0	1	2	3
b.	In the last two weeks till today how often have you had little interest or pleasure in doing things- Not at all, some days, majority of the days or nearly every day?	0	1	2	3
c.	In the last two weeks till today how often have you had trouble falling asleep, staying asleep, or sleeping too much- Not at all, some days, majority of the days or nearly every day?	0	1	2	3
d.	In the last two weeks till today how often have you had poor appetite, weight loss, or overeating- not at all, some days, majority of the days or nearly every day?	0	1	2	3
e.	In the last two weeks till today how often have you felt tired, or had little energy- not at all, some days, majority of the days or nearly every day?	0	1	2	3
f.	In the last two weeks till today how often have you felt bad about yourself – or felt that you are a failure- not at all, some days, majority of the days or nearly every day?	0	1	2	3
g.	In the last two weeks till today how often have you had trouble concentrating on usual activities- not at all, some days, majority of the days or nearly every day?	0	1	2	3
h.	In the last two weeks till today how often have you felt as if you have become more silent or restless- not at all, some days, majority of the days or nearly every day?	0	1	2	3
i.	In the last two weeks till today how often have you thoughts that you would be better off dead, or have hurt yourself in some way- not at all, some days, majority of the days or nearly every day?	0	1	2	3
<p>Instruction to Interviewer:</p> <p>If 901i= 1,2 or 3, ask the respondent if he/she has discussed about this matter with anyone.</p> <p>If the answer is “YES” (has discussed about this matter with someone) than advice him/her to continue the discussion with that person.</p> <p>If the answer is “NO” then advice him/her to discuss the matter with someone he/she likes and trusts</p> <p>Or call +880</p>					

Section 10: Violence against adolescents, bullying and sexual harassment

1000	Check Household Questionnaire Q20:				
	HH Q20=1 <input type="checkbox"/>			HH Q20=2 or more <input type="checkbox"/>	1101
READ TO RESPONDENT					
Individuals including adolescents experience certain situations in their lives that are unpleasant and/or it make them uncomfortable. I would like to briefly ask about some of your own experiences and would like to know whether you have faced them in the last 12 months. I would also like to know from whom you have experienced it and how many times. You can talk to me openly about it and everything that you say will be kept confidential.					
NO.	QUESTIONS	CODING CATEGORIES	QUESTIONS	CODING CATEGORIES	SKIP
1001	In the last 12 months, has anyone acted in the following manner with you?		1002. In the past 12 months how many times did it happen?	1003. Who did this to you? (Multiple answers acceptable) Probe: Who else?	
a	In the last 12 months, has anyone slapped you, pushed you or pulled your hair?	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X	
b	In the last 12 months, has anyone punched, thrown something at you, hit you with a stick or something heavy?	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X	
c	In the last 12 months, has anyone kicked you, dragged you or, beat you up?	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X	
d	In the last 12 months, has anyone tried to choke you or burn you on purpose with something hot (fire, object, acid)	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K	

				Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
e	In the last 12 months , has anyone threatened or attacked you with a knife, gun or any other weapon	Yes...1 No....2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X

READ TO RESPONDENT

I have listened to the unwanted experiences that you might have faced in the last 12 months. Now, I would like to briefly ask you if anyone has cursed you, passed mean comments, called you names, had lies told about you, threatened you or excluded you socially in the last 12 months. You can talk to me freely about this and everything that you say will be kept confidential.

1004	In the last 12 months , has anyone acted in the following manner with you?		1005. In the past 12 months how many times did it happen?	1006. Who did this to you? (Multiple answers acceptable)
a	In the last 12 months , has anyone cursed you or passed mean comments or called you names?	Yes...1 No....2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
b.	In the last 12 months , has anyone blamed you to be liar or had lies told about you?	Yes...1 No....2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
c.	In the last 12 months , has anyone given you a written or verbal threat?	Yes...1 No....2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K Friends.....L

				School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
d	In the last 12 months , has anyone excluded you socially like did not include you while playing, did not let you sit with them or did not include you in idle chats.	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Other Family Member/Relative..A Friends.....B School Peers.....C Neighbours.....D Colleagues.....E Unknown person.....F House holder/owner.....G Other (Specify).....X

READ TO RESPONDENT
I would like to briefly ask you if anyone has insulted you, made fun of you or spread false rumors about you using mobile SMS, MMS or Internet. You can talk to me freely about this and everything that you say will be kept confidential.

1007.	In the last 12 months , has anyone acted in the following manner with you?		1008. In the past 12 months how many times did it happen?	1009. Who did this to you? (Multiple answer acceptable)
	In the last 12 months, has anyone used a mobile phone or internet to bother or harass you or to spread mean words or pictures about you in the last 12 months?	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/ Mother in Law....E Husband.....F Brother.....G Sister.....H Other Family Member/Relative...I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
READ TO RESPONDENT:			
Now I'd like to ask you some questions about sexual harassment. Please do not feel shy about any questions, as the information you provide us would be very useful. Everything that you say will be kept confidential.			
Instruction to interviewer If all the response is "NO" skip to next section			
1010	In the last 12 months , has anyone acted in the following manner with you?		
a.	In the last 12 months , has someone stared at you in a vulgar way that made you uncomfortable	YES.....1 NO.....2	
b.	In the last 12 months have you encountered sly whistle/ humming of suggestive songs/or passing of sexual comments or jokes from someone	YES.....1 NO.....2	
c.	In the last 12 months has someone touched you,/ grabbed you or pinched you in a way that made you uncomfortable	YES.....1 NO.....2	
d.	In the last 12 months has someone forced you to watch obscene photos ,videos or flashed or mooned you?	YES.....1 NO.....2	
e.	In the last 12 months did you face other similar experiences of sexual harassment?	YES.....1 NO.....2 If YES, SPECIFY _____	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1011	CHECK Q1010a to 1010e	Yes to any of the responses.....1 No to all responses.....2	1101
1012.	(If any of the responses from 1010a to 1010e is yes) Where did this harrasment take place? CIRCLE ALL MENTIONED	At home.....A At School/College/Madrasha.....B On the road.....C Public Transport.....D Marketplace.....E Neighbourhood.....F Friends house.....G Relatives house.....H Coaching Centre.....I Workplace.....J Park or other other recreational place.....K Health facility.....L Other(specify _____).....X	

Section 11: Utilization of Health Services

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I am going to ask you some questions regarding seeking information and/or service relating to health .			
1101.	Did you visit any health facility in last 6 months for yourself?	Yes.....1 No.....2 →	1501
1102.	How many visits did you make?	_____ TIMES	
1103.	Where did you visit last? <i>Probe to find out the correct health facility that was last visited and circle.</i> <i>If unable to determine if the facility is a hospital, clinic, public, NGO or private, please write down the name of the facility below:</i> (Name of Facility).	PUBLIC Public medical college/specialized hospital.....11 District hospital.....12 Maternal child welfare center (MCWC)13 Upazila Health Complex14 Union Health & Family Welfare Centre/ Rural dispensary/ union sub centre.....15 School health clinic.....16 Satellite clinic/EPI outreach site.....17 Community clinic.....18 Other govt.....20 (Specify) NGO NGO static clinic.....21 NGO satellite clinic.....22 NGO depo holder.....23 Other NGO (specify).....26 PRIVATE Private hospital/clinic/medical college.....31 Qualified doctor's chamber.....32 Non-qualified doctor's chamber33 Pharmacy/drugstore34 Homeopath/Herbal/Unani.....35 Other Private medical36 (Specify)	
1104.	In the last health facility you visited, is there a separate corner for adolescents to provide information and service?	Yes.....1 No.....2 Don't Know.....8	
1105.	In your last visit did you go for any information or services or both?	Information only.....1 Service only.....2 Both information and service.....3	
1106.	What information and/ or services did you receive the last time you visited? Anything else? <i>Do not read out responses.</i> <i>Circle all mentioned.</i>	Menstrual problem management.....A Anemia.....B White discharge.....C Nutrition.....D Burning sensation during micturation.....E General illness.....F Weakness.....G Allergy/Rash/Itching.....H Injury/Accident.....I Tetanus or Vaccination.....J Diarrheal disease.....K Gastric problem.....L FP services.....M Post abortion care.....N Antenatal care.....O Delivery.....P Postnatal care.....Q Wet dream.....R Did not receive any treatment or service.....S Other.....X	
1501	End of interview	Hour <input type="text"/> <input type="text"/> Minute <input type="text"/> <input type="text"/>	

**BANGLADESH ADOLESCENT HEALTH AND WELLBEING SURVEY
(BAHWS) 2019-20**

QUESTIONNAIRE FOR NEVER MARRIED GIRL (15-19 YEARS)

TYPE TWO QUESTIONNAIRE

**National Institute of Population Research and Training (NIPORT)
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare**

icddr,b

MEASURE Evaluation

Human Development Research Centre

FACE SHEET

IDENTIFICATION				
CLUSTER NUMBER.....	□□□□			
HOUSEHOLD NUMBER.....	□□□			
NAME OF HOUSEHOLD HEAD.....				
NAME AND LINE # OF RESPONDENT _____	□□			
INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE				DAY □□ MONTH □□ YEAR □□□□
INTERVIEWER'S NAME				INT. CODE □□□
RESULT*				RESULT* <input type="checkbox"/>
NEXT VISIT: DATE	_____	_____		TOTAL NO. OF VISITS <input type="checkbox"/>
TIME	_____	_____		
<p>*RESULT CODES:</p> <p>1 COMPLETED</p> <p>2 NOT AT HOME</p> <p>3 POSTPONED</p> <p>4 REFUSED</p> <p>5 PARTLY COMPLETED</p> <p>6 INCAPACITATED</p> <p>7 OTHERS _____</p> <p align="center">(SPECIFY)</p>				
SUPERVISOR	FIELD EDITOR	ICDDRDB MONITORING OFFICER		OFFICE EDITOR
NAME _____	NAME _____	NAME _____		□□
□□□	□□□	□□□		□□
DATE _____	DATE _____	DATE _____		

Assent of guardian of 15-17 years old participant

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. Your household has been selected for the survey.

Name _____, a member of your household, has been selected for the survey and her/his age is between 15-17 years. I need your permission to conduct an interview of her/him. The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

_____ has been selected as a respondent in this study. S/he will be asked questions about her/his health and wellbeing. The interview will take 40-45 minutes to complete. His/ her participation in this survey depends on your consent.

By providing information s/he will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information is collected will be kept strictly confidential. It will be used for research purposes.

Participation in this survey is voluntary and s/he can choose not to answer any individual question or all the questions. However, we hope that s/he will participate in this survey since her/his views are important.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you permit (Name _____) to participate in this survey?

Yes = 1 No = 2 → END
↓

Guardian's Name: _____ Signature (or thumb print): _____ Date: _____

(Relation with the respondent-----)

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining assent: _____ Signature: _____ Date: _____

Consent of participant for individual information

Assalamualikum/Adab. My name is _____. The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. You have been selected as respondents in this study.

The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

If you agree to participate in this survey, I will ask some questions about your health and wellbeing. This questionnaire will take 40-45 minutes to complete. Participation in this survey is voluntary and you can choose not to answer any individual question or all the questions. However, we hope that you will participate in this survey since your views are important.

By providing information you will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information you provide will be kept strictly confidential. It will be used for research purposes. There are no financial benefits associated with your participation.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you agree to participate in this survey?

Yes = 1

No = 2

→ END



Participant's Name: _____ Signature (or thumb print): _____ Date: _____

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining consent: _____ Signature: _____ Date: _____

Section 1: Respondent's Background

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101.	Record the time started	Hour <input type="text"/> <input type="text"/> Min <input type="text"/> <input type="text"/>	
102.	In what month and year were you born?	Month..... <input type="text"/> <input type="text"/> Don't Know Month..... 98 Year..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Don't Know Year 9998	
103.	How old were you at your last birthday? [What is your age?] COMPARE AND CORRECT 102 AND /OR 103 IF INCONSISTENT	Age (In Completed Years) <input type="text"/> <input type="text"/>	
104.	Have you ever attended a School, College or Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 Yes, School/College and Madrasha.....3 No.....4	} → 106 } → 109
105.	What type of school/college or Madrasha have you last attended?	School or College.....1 Madrasha.....2	
106.	What is the highest class you have completed at that School/ College or Madrasha? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	Class <input type="text"/> <input type="text"/>	
107.	Are you currently attending a School or College /Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 No.....3	} → 109
108.	For what reasons currently are you not attending School/ College or Madrasha? MULTIPLE ANSWERS ACCEPTABLE	Distance to school.....A Concern about safety.....B Parents concern: School quality.....C Parents lack of interest.....D Poor performance in school.....E No good school in the locality.....F Didn't know about school.....G Student: Lack of interest.....H Got married.....I Had to care for siblings/ others.....J Financial constraints/costs.....K Illness: family/respondent.....L Household Chores/Work.....M Husband oppose.....N Have to take care of child.....O Other (specify).....X Don't know.....Z	
109.	Aside from housework, some persons take up jobs for which they are paid in cash or kind. Are you currently involved in any kind of work paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	} → 111
110.	Within the last six months, have you been involved in any kind of work for which you were paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	} → 112
111.	From where do you/did you do this work? At home, outside or both?	At home.....1 Outside home.....2 Both.....3	
<p>Now I want to talk about the family members that constitute the household you live in most of the time. Every household is different. Some adolescents get to live with both the parents in the same household, while others get to live with either one of them. I'd like to</p>			

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
know a bit more about them and the other family members that make up your household.			
112	Does your (name below) usually live in same household with you?		
a	Does your mother (biological mother) usually live in the same household with you?	YES.....1 NO.....2 →	c
b	You told that your mother doesn't live with you, Do you have step mother? If yes does your step mother usually live in the same household with you?	YES.....1 NO.....2 I don't have step mother.....9	
c	Does your father (biological father) usually live in the same household with you?	YES.....1 NO.....2 →	e
d	You told that your father doesn't live with you, Do you have step father? If yes does your step father usually live in the same household with you?	YES.....1 NO.....2 I don't have step father.....9	
e	Does your older brother usually live in the same household with you?	YES.....1 NO.....2	
f	Does your older sister usually live in the same household with you?	YES.....1 NO.....2	
g	Does your husband usually live in the same household with you?	YES.....1 NO.....2	
h	Does your mother-in-law usually live in the same household with you?	YES.....1 NO.....2	
i	Does your father-in-law usually live in the same household with you?	YES.....1 NO.....2	
113	CHECK Q112 a: (biological mother)	112a=1 (Lives in the same household).....1 → 112a=2 (Does not live in the same household).....2	118
114	Is your (biological) mother alive?	Yes.....1 No.....2 →	118
115	Where does she live?	Lives elsewhere, within Bangladesh.....1 Lives elsewhere, outside Bangladesh.....2 Don't know.....8 →	118
116	In the last one month did you have any communication (met her, by phone, by letter, by email, by IMO/Viber/WhatsApp/Messenger etc.) with her?	YES.....1 NO.....2 →	118
117	In the last one month how often did you communicate with her?	20 times or more.....1 10-19 times.....2 4-9 times.....3 1-3 times.....4	
118	CHECK Q112 c: (biological father)	112c=1 (Lives in the same household).....1 → 112c=2 (Does not live in the same household).....2	123
119	Is your (biological) father alive?	YES.....1 NO.....2 →	123
120	Where does he live?	Lives elsewhere, within Bangladesh.....1 Lives elsewhere, outside Bangladesh.....2 Don't know.....8 →	123
121	In the last one month did you have any communication (met him, by phone, by letter, by email, by IMO/Viber/WhatsApp/Messenger etc.) with him?	YES.....1 NO.....2 →	123
122	In the last one month how often did you communicate with him?	20 times or more.....1 10-19 times.....2 4-9 times.....3 1-3 times.....4	
123	Do you have any older brother who does not live in the same household with you or lives somewhere else?	YES.....1 NO.....2	
124	Do you have any older sister who does not live in the same household with you or lives somewhere else?	YES.....1 NO.....2	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I am going to ask you about your engagement with any creative activities, cultural activities and/or outdoor sports. I also want to ask you about your affiliation with any club.			
125	Are you currently engaged in any creative, cultural activities or outdoor sports such as		
A	Drawing/painting	YES.....1 NO.....2	
B	Singing /Dancing /Drama	YES.....1 NO.....2	
C	Outdoor Sports such as football, cricket, bou-chi, hadudu/cabady, table tennis, badminton etc	YES.....1 NO.....2	
D	Reading books other than textbooks	YES.....1 NO.....2	
E	Creative Writing such as writing stories, poem etc	YES.....1 NO.....2	
F	Other (Specify):	YES.....1 NO.....2	
126	Are you currently affiliated with any club or organization such as		
A	Local Youth Club	YES.....1 NO.....2	
B	Boys Scout/Girls Scout/ Girls Guide	YES.....1 NO.....2	
C	Cultural Organization: (for example singing, dancing, drama, poetry, painting, drawing etc.)	YES.....1 NO.....2	
D	Sports Club: school/college or community level	YES.....1 NO.....2	
E	Reading Club/ Library	YES.....1 NO.....2	
F	Other (Specify):	YES.....1 NO.....2	
Nowadays, many organizations (such as Government, NGO, and School) are running adolescent programs where they teach about adolescent rights, nutrition, vocational training, reproductive health such as puberty, menstruation, marriage, family planning and other life skills. Now, I would want to know if you have ever been involved in any such adolescent program currently or previously.			
127	Are you currently involved with any adolescent program?	YES.....1 NO.....2	201
128	In the last 3 years were you involved in any adolescent program?	YES.....1 NO.....2	

Section 2: Exposure to Media

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I would like to ask you few questions about your exposure to mobile phone, internet, radio, television and newspaper.			
201.	Do you have your own mobile phone that is currently functional? [If YES, then ASK; is it a basic mobile phone or a smart phone?	Yes, basic mobile phone.....1 Yes, smart phone.....2 Yes, both basic and smart phone.....3 No.....4	204
202.	Do any of your family members currently own a functional mobile phone?	YES.....1 NO.....2	206
203.	Do you have access to a family member's mobile phone in case you want to?	YES.....1 NO.....2	206
Mobile phones are used to make and receive phone calls, text messages, access the internet etc. Now I want to know if you use the mobile phone for certain purposes.			
204.	Do you use the mobile phone to.....	205. If yes, do you use this every day or at least once a week or less than once a week	
a.	Do you use the mobile phone to make and/or receive phone calls? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
b.	Do you use the mobile phone to send and/or receive texts? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
c.	Do you use the mobile phone to listen radio/FM band? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
d.	Do you use the mobile phone to access the internet/Google/YouTube? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
e.	Do you use the mobile phone to read newspaper/magazine? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
f.	Do you use the mobile phone to use Facebook? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
g.	Do you use the mobile phone to use IMO/Viber/WhatsApp/Messenger? Yes.....1 No.....2	Everyday.....1 At least once a week.....2 Less than once a week.....3	
All this time I listened to your use of mobile phone. Now I want to know about your use of Laptop/Computer or Tab (Tablet)			
206.	Do you use internet through a Laptop/computer/tablet either in the house or elsewhere? How often do you use internet through a computer/tablet: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	
207.	In the last 3 months, have you read any adolescent focused article online/internet, through mobile phone, laptop/ computer or tab?	YES.....1 NO.....2	
208.	Do you listen to the radio? How often do you listen to the radio: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	210
209.	In the last 3 months, did you listen to any adolescent focused program on the radio?	YES.....1 NO.....2	
210.	Do you watch television? How often do you watch television: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	212
211.	In the last 3 months, did you watch any adolescent focused program in TV?	YES.....1 NO.....2	
212.	Do you read printed version of newspaper/magazine? How often do you read: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	501
213.	In the last 3 months, have you read any adolescent focused news article or newspaper or magazine?	YES.....1 NO.....2	

Section 5: Contraception

Now I would like to talk about family planning. By using various ways or methods of family planning a couple can delay or avoid a pregnancy. I know you are not married and you may not need it, however, your thoughts and knowledge would help us to assess how unmarried girls perceive issues around Contraception.

[Circle code 1 in 501 for each method mentioned spontaneously. Check question 501 whether A-C was mentioned spontaneously. If any of these are not mentioned spontaneously then proceed down question 502 for that specific method. Read the name and description of those specific methods. Circle code 2 if method is recognized, and code 3 if not recognized in Q502.]

NO	QUESTION AND FILTER	CODING CATEGORY			SKIP
		Spontaneous YES	502. Have you ever heard of (method) of family planning? Probed		
			YES	NO	
501.	Which ways or methods have you heard about?				
A.	PILL: A woman can take oral pill to prevent pregnancy	1	2	3	
B.	CONDOM: Men can put a rubber sheath on their penis before sexual intercourse to prevent pregnancy	1	2	3	
C.	EMERGENCY CONTRACEPTION PILLS (ECP): As an emergency measure after unprotected sexual intercourse, women can take special pills at any time within three days to prevent pregnancy.	1	2	3	
D.	WITHDRAWAL: Men can be careful and pull out before climax.	1			
E.	SAFE PERIOD (COUNTING DAYS, CALENDER, and RHYTHM METHOD): Couples can avoid having sexual intercourse on certain days of the month when the women is more likely to get pregnant.	1			
F.	INJECTION: Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months	1			
G.	MALE STERILIZATION (VASECTOMY): Men can have an operation to avoid having any more children.	1			
H.	FEMALE STERILIZATION: Woman can have an operation to avoid having any more children.	1			
I.	IUD: Women can have a loop or coil placed inside them by a doctor or a nurse.	1			
J.	IMPLANT/NORPLANTS: Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for several years.	1			
K.	If respondent tells about any method spontaneously other than above: (SPECIFY) _____	1			
503.	CHECK Q501 A to K) At least one circle (501=1) Yes <input type="checkbox"/> No <input type="checkbox"/>	Check Q 502 (A to C) At least one yes (502=2) Yes <input type="checkbox"/> No <input type="checkbox"/>			601
504.	Do you know any place or person where one can get family planning information and services?	YES.....1	NO.....2		601
505.	Where is that place? Any other place? PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. RECORD ALL MENTIONED	PUBLIC SECTOR Medical college/specialized hospital.....A District Hospital.....B Maternal Child Welfare Center (MCWC).....C School Health Clinic.....D Upazila Health Complex.....E Union Health & Family Welfare Centre/Rural dispensary/Union Subcentre/Family Welfare Centre.....F Community Clinic.....G Satellite clinic/EPI outreach site.....H Govt. field worker (FWA).....I Other govt. (Specify).....J NGO SECTOR NGO static clinic.....K NGO satellite clinic.....L NGO depot holder.....M NGO fieldworker.....N Other NGO (Specify).....O PRIVATE MEDICAL SECTOR Private hospital/clinic.....P Qualified doctor's chamber.....Q Non-qualified doctor's chamber.....R Pharmacy/drug store.....S Homeo/Herbal/Unani.....T Other private medical sector (Specify).....U OTHER SOURCE Shop.....V Friend/relatives.....W Other (Specify).....X			

Section 6: Time Use

No	Filters and Questions	Coding Categories	SKIP
601.	Instruction to interviewer: Check the day of the interview and circle the appropriate Code	Sunday.....1 Monday.....2 Tuesday.....3 Wednesday.....4 Thursday.....5 Friday.....6 Saturday.....7	
CHECK 107: Currently attending school/College/Madrasha <input type="checkbox"/> Not attending school/College/Madrasha <input type="checkbox"/>			604a
Now, I want to ask you about different activities you are involved in last 24 hours. I want to know about the amount of time you have spent yesterday doing these activities. (The last 24 hours means the time frame in between 6 am yesterday morning to 6 am today morning.)		If yes, how much time in total you spend doing this yesterday/ in the last 24 hours: (in minutes/hours)	
602 a.	Did you go to school/College/Madrasha yesterday?	Yes.....1 No.....2	602 b. <input type="text"/> Hours <input type="text"/> Minutes
603 a.	Yesterday did you spend any time on studying at home/attending any coaching centre or private tutor at home?	Yes.....1 No.....2	603 b. <input type="text"/> Hours <input type="text"/> Minutes
604 a	Yesterday did you spend any time on any physical activity like exercise, walking for exercise, swimming, cycling, sports etc?	Yes.....1 No.....2	604 b. <input type="text"/> Hours <input type="text"/> Minutes
605 a	Yesterday did you spend any time doing creative or recreational activities such as-, singing, playing instrument, painting, reading any books other than text-books?	Yes.....1 No.....2	605 b. <input type="text"/> Hours <input type="text"/> Minutes
606.	For how long in total did you sleep from yesterday 6 am till today 6am?		<input type="text"/> Hours <input type="text"/> Minutes



Section 7: Connectedness: family and friends

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKIP
701	CHECK 112 a and 114 : If 112a=1 or Q114=1 <input type="checkbox"/>	If 112a=2 and 114=2 <input type="checkbox"/>					704
702	Now I am going to read out some statements about your relationship with your biological mother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with mother left as a child and now not in touch, then code 'Not in touch with mother')	Never	Someti mes	Most of the time	Always	Not in touch with mother	
a	You enjoy spending time with your mother	1	2	3	4	9 →	704
b	You and your mother are pretty close.	1	2	3	4	9	
c	You talk with your mother about very personal things	1	2	3	4	9	
703	Now I am going to mention some issues and ask you if you feel comfortable discussing those with your mother	Yes		No			
a.	Menstruation	1		2			
b.	Progress in studies	1		2			
c.	When you want to have a child	1		2			
d.	Using family planning methods	1		2			
e.	Seeking health services for yourself	1		2			
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g.	Participation in income generating activities outside home	1		2			
h.	Your Marriage	1		2			
i.	Intimate/Personal relationship	1		2			
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2			
704	CHECK: 112c and 119 If 112 c=1 or 119=1 <input type="checkbox"/>	If 112c=2 and 119=2 <input type="checkbox"/>					713
705	Now I am going to read out some statements about your relationship with your biological father and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with father left as a child and now not in touch, then code 'Not in touch with father')	Never	Someti mes	Most of the time	Always	Not in touch with father	
a.	You enjoy spending time with your father	1	2	3	4	9 →	713
b.	You and your father are pretty close.	1	2	3	4	9	
c.	You talk with your father about very personal things	1	2	3	4	9	
706	Do you feel comfortable discussing following issues with your father?	Yes		No			
a.	Menstruation	1		2			
b.	Progress in studies	1		2			
c.	When you want to have a child	1		2			
d.	Using family planning methods	1		2			
e.	Seeking health services for yourself	1		2			
f.	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g.	Participation in income generating activities outside home	1		2			
h.	Your Marriage	1		2			
i.	Intimate/Personal relationship	1		2			
j.	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2			
713	CHECK: 112e and 123 If 112 e=1 or 123=1 <input type="checkbox"/>	If 112e=2 and 123=2 <input type="checkbox"/>					716

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKIP
714	<p>Now I am going to read out some statements about your relationship with your elder brother and want to know which statement is applicable about you?</p> <p>(Instruction for interviewer : If respondent is not in touch with elder brother, left as a child and now not in touch, then code 'Not in touch with elder brother')</p>	Never	Sometimes	Most of the time	Always	9Not in touch with elder brother	
a	You enjoy spending time with your elder brother	1	2	3	4	9 →	716
b	You and your elder brother are pretty close.	1	2	3	4	9	
c	You talk with your elder brother about very personal things	1	2	3	4	9	
715	Do you feel comfortable discussing following issues with your elder brother?	Yes		No			
a	Menstruation	1		2			
b	Progress in studies	1		2			
c	When you want to have a child	1		2			
d	Using family planning methods	1		2			
e	Seeking health services for yourself	1		2			
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g	Participation in income generating activities outside home	1		2			
h	Intimate/Personal relationship	1		2			
i	Intimate/Personal relationship	1		2			
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2			
716	<p>CHECK: 112f and 124</p> <p>If 112 f=1 or 124=1 <input type="checkbox"/> ↓</p> <p>If 112f=2 and 124=2 <input type="checkbox"/> →</p>						719
717	<p>Now I am going to read out some statements about your relationship with your elder sister and want to know which statement is applicable about you?</p> <p>(Instruction for interviewer : If respondent is not in touch with elder sister, left as a child and now not in touch, then code 'Not in touch with elder sister')</p>	Never	Sometimes	Most of the time	Always	Not in touch with elder sister	
a	You enjoy spending time with your elder sister	1	2	3	4	9 →	719
b	You and your elder sister are pretty close.	1	2	3	4	9	
c	You talk with your elder sister about very personal things	1	2	3	4	9	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKIP
		Yes	No				
718	Do you feel comfortable discussing following issues with your elder sister?						
a	Menstruation	1	2				
b	Progress in studies	1	2				
c	When you want to have a child	1	2				
d	Using family planning methods	1	2				
e	Seeking health services for yourself	1	2				
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1	2				
g	Participation in income generating activities outside home	1	2				
h	Your Marriage	1	2				
i	Intimate/Personal relationship	1	2				
j	Sexual harassments : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1	2				
719	Now I am going to read out some statements about your relationship with your friends. You may consider anyone as your friend as for example your neighbours, school mates, cousins, play mates, or any individuals you communicate with.	Never	Someti mes	Most of the time	Always	Does not have friends	
a.	You have friends that you consider close and trust completely	1	2	3	4	9 →	801
b.	Spending time with friends is important to you.	1	2	3	4	9	
c.	You and your friends talk openly with each other about personal things.	1	2	3	4	9	

Section 8: Gender norms

No.	QUESTIONS	CODING CATEGORIES		
<p>There are several opinions about the role and duties of a girl/female or a boy/male in our families and society. Now I am going to read out some statements and would like to know whether you agree or disagree with them.</p>				
801	Gender attitudes	Agree	Disagree	Don't Know
A.	It is important that sons have more education than daughters.	1	2	8
B.	Outdoor games are only for boys not for girls.	1	2	8
C.	A family is not complete until they have at least one son.	1	2	8
D.	Household chores are for women only, not for men, even if the woman works outside the house.	1	2	8
E.	Women should not be allowed to work outside of home.	1	2	8
F.	A woman should always listen to her husband even if she disagrees.	1	2	8
G.	Looking after the household and kids is the responsibility of women only.	1	2	8
H.	Husband has the right to beat his wife when she does not obey him.	1	2	8

Section 9: Mental Health

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			
<p>Now I am going to discuss some mental health conditions that a person may experience. I want to know whether you experienced any such conditions in the last 2 weeks; if you have encountered these conditions, I would like to know how frequently you have experienced them in the last two weeks.</p> <p>Instruction for interviewer: Please explain to the respondent what is meant by 2 weeks.</p>					
901	In the last two weeks till today how often have you.....	Not at all	Some days	Majority of the days	Nearly Everyday
a.	In the last two weeks till today how often have you felt down, depressed, irritable, or hopeless- Not at all, somedays, majority of the days or nearly every day?	0	1	2	3
b.	In the last two weeks till today how often have you had little interest or pleasure in doing things- Not at all, somedays, majority of the days or nearly every day?	0	1	2	3
c.	In the last two weeks till today how often have you had trouble falling asleep, staying asleep, or sleeping too much- Not at all, somedays, majority of the days or nearly every day?	0	1	2	3
d.	In the last two weeks till today how often have you had poor appetite, weight loss, or overeating- not at all, somedays, majority of the days or nearly every day?	0	1	2	3
e.	In the last two weeks till today how often have you felt tired, or had little energy- not at all, somedays, majority of the days or nearly every day?	0	1	2	3
f.	In the last two weeks till today how often have you felt bad about yourself – or felt that you are a failure- not at all, some days, majority of the days or nearly every day?	0	1	2	3
g.	In the last two weeks till today how often have you had trouble concentrating on usual activities- not at all, some days, majority of the days or nearly every day?	0	1	2	3
h.	In the last two weeks till today how often have you felt as if you have become more silent or restless- not at all, some days, majority of the days or nearly every day?	0	1	2	3
i.	In the last two weeks till today how often have you thoughts that you would be better off dead, or have hurt yourself in some way- not at all, some days, majority of the days or nearly every day?	0	1	2	3
<p>Instruction to Interviewer:</p> <p>If 901i= 1,2 or 3, ask the respondent if he/she has discussed about this matter with anyone. If the answer is “YES” (has discussed about this matter with someone) than advice him/her to continue the discussion with that person. If the answer is “NO” then advice him/her to discuss the matter with someone he/she likes and trusts Or call +88.....</p>					

Section 10: Violence against adolescents, bullying and sexual harassment



1000	Check Household Questionnaire Q20:			1101
	HH Q20=1 <input type="checkbox"/>		HH Q20=2 or more <input type="checkbox"/>	
READ TO RESPONDENT				
Individuals including adolescents experience certain situations in their lives that are unpleasant and/or it make them uncomfortable. I would like to briefly ask about some of your own experiences and would like to know whether you have faced them in the last 12 months. I would also like to know from whom you have experienced it and how many times. You can talk to me openly about it and everything that you say will be kept confidential.				
NO.	QUESTIONS	CODING CATEGORIES	QUESTIONS	CODING CATEGORIES
1001	In the last 12 months, has anyone acted in the following manner with you?		1002. In the past 12 months how many times did it happen?	1003. Who did this to you? (Multiple answers acceptable) Probe: Who else?
a	In the last 12 months, has anyone slapped you, pushed you or pulled your hair?	Yes...1 No....2 	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/relative..I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
b	In the last 12 months, has anyone punched, thrown something at you, hit you with a stick or something heavy?	Yes...1 No....2 	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/relative..I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
c	In the last 12 months, has anyone kicked you, dragged you or, beat you up?	Yes...1 No....2 	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/relative..I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
d	In the last 12 months, has anyone tried to choke you or burn you on purpose with something hot (fire, object, acid)	Yes...1 No....2 	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G

				Sister.....H Other Family Member/relative..I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
e	In the last 12 months, has anyone threatened or attacked you with a knife, gun or any other weapon	Yes...1 No....2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/relative..I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X

READ TO RESPONDENT

I have listened to the unwanted experiences that you might have faced in the last 12 months. Now, I would like to briefly ask you if anyone has cursed you, passed mean comments, called you names, had lies told about you, threatened you or excluded you socially in the last 12 months. You can talk to me freely about this and everything that you say will be kept confidential.

1004.	In the last 12 months, has anyone acted in the following manner with you?		1005. In the past 12 months how many times did it happen?	1006. Who did this to you? (Multiple answers acceptable)
a	In the last 12 months, has anyone cursed you or passed mean comments or called you names?	Yes...1 No....2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/relative..I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
b	In the last 12 months, has anyone blamed you to be liar or had lies told about you?	Yes...1 No....2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/relative..I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
c	In the last 12 months, has anyone given you a written or verbal threat?	Yes...1 No....2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/relative..I Teacher.....J

				Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
d	In the last 12 months , has anyone excluded you socially like did not include you while playing, did not let you sit with them or did not include you in idle chats.	Yes...1 No....2 	Once.....1 2-4 times.....2 5 or more times.....3	Other Family Member.....A Friends.....B School Peers.....C Neighbours.....D Colleagues.....E Unknown person.....F House holder/owner.....G Other (Specify).....X
READ TO RESPONDENT				
I would like to briefly ask you if anyone has insulted you, made fun of you or spread false rumors about you using mobile SMS, MMS or Internet. You can talk to me freely about this and everything that you say will be kept confidential.				
1007.	In the last 12 months , has anyone acted in the following manner with you?		1008. In the past 12 months how many times did it happen?	1009. Who did this to you? (Multiple answer acceptable)
a	In the last 12 months, has anyone used a mobile phone or internet to bother or harass you or to spread mean words or pictures about you in the last 12 months?	Yes...1 No....2 	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/relative..I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I'd like to ask you some questions about sexual harassment. Please do not feel shy about any questions, as the information you provide us would be very useful. Everything that you say will be kept confidential.			
Instruction to interviewer If all the response is "NO" skip to next section			
1010	In the last 12 months , has anyone acted in the following manner with you?		
a.	In the last 12 months , has someone stared at you in a vulgar way that made you uncomfortable	YES.....1 NO.....2	
b.	In the last 12 months have you encountered sly whistle/ humming of suggestive songs/or passing of sexual comments or jokes from someone	YES.....1 NO.....2	
c.	In the last 12 months has someone touched you,/ grabbed you or pinched you in a way that made you uncomfortable	YES.....1 NO.....2	
d.	In the last 12 months has someone forced you to watch obscene photos, videos or flashed or mooned you?	YES.....1 NO.....2	
e.	In the last 12 months did you face other similar experiences of sexual harassment?	YES.....1 NO.....2 If YES, SPECIFY _____	

1011	CHECK Q1010a to 1010e	Yes to any of the responses.....1 No to all responses.....2	→ 1101
1012.	(If any of the responses from 1010a to 1010e is yes) Where did this harrasment take place? CIRCLE ALL MENTIONED	At home.....A At school/college/madrasha.....B On the road.....C Public Transport.....D Marketplace.....E Neighbourhood.....F Friends house.....G Relatives house.....H Coaching Centre.....I Workplace.....J Park or other recreational place.....K Health facility.....L Other(specify.....).....X	

Section 11: Utilization of Health Services

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I am going to ask you some questions regarding seeking information and/or service relating to health .			
1101.	Did you visit any health facility in last 6 months for yourself?	Yes.....1 No.....2 →	1107
1102.	How many visits did you make?	_____ TIMES	
1103.	Where did you visit last? <i>Probe to find out the correct health facility that was last visited and circle.</i> <i>If unable to determine if the facility is a hospital, clinic, public, NGO or private, please write down the name of the facility below:</i> (Name of Facility).	PUBLIC Public medical college/specialized hospital.....11 District hospital.....12 Maternal child welfare center (MCWC).....13 Upazila Health Complex.....14 Union Health & Family Welfare Centre/ Rural dispensary/ union sub centre.....15 School health clinic.....16 Satellite clinic/EPI outreach site.....17 Community clinic.....18 Other govt.....20 (Specify) NGO NGO static clinic21 NGO satellite clinic.....22 NGO depo holder.....23 Other NGO (specify).....26 PRIVATE Private hospital/clinic/medical college.....31 Qualified doctor's chamber32 Non-qualified doctor's chamber33 Pharmacy/drugstore34 Homeopath/Herbal/Unani35 Other.....36 (Specify)	
1104.	In the last health facility you visited, is there a separate corner for adolescents to provide information and service?	Yes.....1 No.....2 Don't Know.....8	
1105.	In your last visit did you go for any information or services or both?	Information only.....1 Service only.....2 Both information and service.....3	
1106.	What information and/ or services did you receive the last time you visited? Anything else? <i>Do not read out responses.</i> <i>Circle all mentioned.</i>	Menstrual problem management.....A Anemia.....B White discharge.....C Nutrition.....D Burning sensation during micturation.....E General illness.....F Weakness.....G Allergy/Rash/Itching.....H Injury/Accident.....I Tetanus or Vaccination.....J Diarrheal disease.....K Gastric problem.....L FP services.....M Post abortion care.....N Antenatal care.....O Delivery.....P Postnatal care.....Q Wet dream.....R Did not receive any treatment or service.....S Other.....X	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1107.	Now I would want to know if you like to know more about following topics?	1108. If yes, what would be your two most preferred medium to receive information on this topic? (Interview should show the picture page showing 8 medium such as A= Teacher, B= Books, C=Television, D= Radio/FM; E= Mobile/ Internet; F= Newspaper/Magazine; G=Hotline; H= Health Provider)	
a.	Do you want to know more about Puberty/ Physical Change? Yes.....1 No.....2	h. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
b.	Do you want to know more about Wet Dream? Yes.....1 No.....2	i. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
c.	Do you want to know more about menstruation? Yes.....1 No.....2	j. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
d.	Do you want to know more about marriage? Yes.....1 No.....2	k. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
e.	Do you want to know more about pregnancy? Yes.....1 No.....2	l. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
f.	Do you want to know more about family panning? Yes.....1 No.....2	m. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
g.	Do you want to know more about ANC/ Delivery and PNC? Yes.....1 No.....2	n. 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
1501	End of interview	Hour <input type="text"/> <input type="text"/> Minute <input type="text"/> <input type="text"/>	

**BANGLADESH ADOLESCENT HEALTH AND WELLBEING SURVEY
(BAHWS) 2019-20**

QUESTIONNAIRE FOR NEVER MARRIED BOY (15-19 YEARS)

TYPE TWO QUESTIONNAIRE

**National Institute of Population Research and Training (NIPORT)
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare**

icddr,b

MEASURE Evaluation

Human Development Research Centre

FACE SHEET

IDENTIFICATION				
CLUSTER NUMBER.....	□□□□			
HOUSEHOLD NUMBER.....	□□□			
NAME OF HOUSEHOLD HEAD.....				
NAME AND LINE # OF RESPONDENT _____	□□			
INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE				DAY □□ MONTH □□ YEAR □□□□
INTERVIEWER 'S NAME				INT. CODE □□□
RESULT*				RESULT* <input type="checkbox"/>
NEXT VISIT: DATE	_____	_____		TOTAL NO. OF VISITS <input type="checkbox"/>
TIME	_____	_____		
<p>*RESULT CODES:</p> <p>1 COMPLETED</p> <p>2 NOT AT HOME</p> <p>3 POSTPONED</p> <p>4 REFUSED</p> <p>5 PARTLY COMPLETED</p> <p>6 INCAPACITATED</p> <p>7 OTHERS _____</p> <p align="center">(SPECIFY)</p>				
<p>SUPERVISOR</p> <p>NAME _____</p> <p>□□□</p> <p>DATE _____</p>	<p>FIELD EDITOR</p> <p>NAME _____</p> <p>□□□</p> <p>DATE _____</p>	<p>ICDDRDB MONITORING OFFICER</p> <p>NAME _____</p> <p>□□□</p> <p>DATE _____</p>	<p>OFFICE EDITOR</p> <p>□□</p>	<p>KEYED BY</p> <p>□□</p>

Assent of guardian of 15-17 years old participant

Assalamualikum/Adab. My name is _____ . The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. Your household has been selected for the survey.

Name _____, a member of your household, has been selected for the survey and her/his age is between 15-17 years. I need your permission to conduct an interview of her/him. The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

_____ has been selected as a respondent in this study. S/he will be asked questions about her/his health and wellbeing. The interview will take 40-45 minutes to complete. His/ her participation in this survey depends on your consent.

By providing information s/he will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information is collected will be kept strictly confidential. It will be used for research purposes.

Participation in this survey is voluntary and s/he can choose not to answer any individual question or all the questions. However, we hope that s/he will participate in this survey since her/his views are important.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT, : 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you permit (Name _____) to participate in this survey?

Yes = 1

No = 2



END



Guardian's Name: _____ Signature (or thumb print): _____ Date: _____

(Relation with the respondent-----)

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining assent: _____ Signature: _____ Date: _____

Consent of participant for individual information

Assalamualikum/Adab. My name is _____, The National Institute of Population Research and Training (NIPORT) of the Ministry of Health, Government of Bangladesh is conducting a national survey on adolescents' health and wellbeing. On behalf of NIPORT, I come from Human Development Research Centre (HDRC), a private research organization, to collect some information. The information will help to improve adolescent health and wellbeing in Bangladesh. We are conducting the survey in collaboration with icddr,b and the University of North Carolina, USA. You have been selected as respondents in this study.

The survey aims to understand the state of adolescent health and some aspects of wellbeing in Bangladesh.

If you agree to participate in this survey, I will ask some questions about your health and wellbeing. This questionnaire will take 40-45 minutes to complete. Participation in this survey is voluntary and you can choose not to answer any individual question or all the questions. However, we hope that you will participate in this survey since your views are important.

By providing information you will not have any risk whatsoever, rather this will help the government and policy planners to evaluate, strengthen and refocus national efforts for adolescent health and wellbeing.

Whatever information you provide will be kept strictly confidential. It will be used for research purposes. There are no financial benefits associated with your participation.

If you wish to know more about the survey, you can contact the following numbers:

NIPORT,: 0258611206 (Director , Research), 01552356842 (Evaluation Specialist)

icddr,b: 01777790154 (Research Investigator), 029886498/3206, 01711428989 (IRB Secretary).

Do you want to ask me anything about the interview/survey?

Do you agree to participate in this survey?

Yes = 1

No = 2

—————> END



Participant's Name: _____ Signature (or thumb print): _____ Date: _____

Name of witness: _____ Signature: _____ Date: _____

Name of person obtaining consent: _____ Signature: _____ Date: _____

Section 1: Respondent's Background

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101.	Record the time started	Hour <input type="text"/> <input type="text"/> Min <input type="text"/> <input type="text"/>	
102.	In what month and year were you born?	Month <input type="text"/> <input type="text"/> Don't Know Month.....98 Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Don't Know Year.....9998	
103.	How old were you at your last birthday? [What is your age?] COMPARE AND CORRECT 102 AND /OR 103 IF INCONSISTENT	Age (In Completed Years) <input type="text"/> <input type="text"/>	
104.	Have you ever attended a School, College or Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 Yes, School,College and Madrasha.....3 No.....4	106 109
105.	What type of school/college or Madarasa have you last attended?	School or College.....1 Madrasha.....2	
106.	What is the highest class you have completed at that School/ College or Madrasha? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	Class <input type="text"/> <input type="text"/>	
107.	Are you currently attending a School or College /Madrasha?	Yes, School or College.....1 Yes, Madrasha.....2 No.....3	109
108.	For what reasons are you not currently attending School/ College or Madrasha? MULTIPLE ANSWERS ACCEPTABLE	Distance to school.....A Concern about safety.....B Parents concern: School quality.....C Parents lack of interest.....D Poor performance in school.....E No good school in the locality.....F Didn't know about school.....G Student: Lack of interest.....H Got married.....I Had to care for siblings/ others.....J Financial constraints/costs.....K Illness: family/respondent.....L Household Chores/Work.....M Husband oppose.....N Have to take care of child.....O Other (specify).....X Don't know.....Z	
109.	Aside from housework, some persons take up jobs for which they are paid in cash or kind. Are you currently involved in any kind of work paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash. and kind.....3 No.....4	111
110.	Within the last six months, have you been involved in any kind of work for which you were paid in cash or kind?	Yes, paid in cash.....1 Yes, paid in kind2 Yes, paid in both cash and kind.....3 No.....4	112
111.	From where do you/did you do this work? At home, outside or both?	At home.....1 Outside home.....2 Both.....3	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
<p>Now I want to talk about the family members that constitute the household you live in most of the time. Every household is different. Some adolescents get to live with both the parents in the same household, while others get to live with either one of them. I'd like to know a bit more about them and the other family members that make up your household.</p>			
112	Does your (name below) usually live in same household with you?		
a.	Does your mother (biological mother) usually live in the same household with you?	YES.....1 NO.....2	c
b.	You told that your mother doesn't live with you, Do you have step mother? If yes does your step mother usually live in the same household with you?	YES.....1 NO.....2 I don't have step mother.....9	
c.	Does your father (biological father) usually live in the same household with you?	YES.....1 NO.....2	e
d.	You told that your father doesn't live with you, Do you have step father? If yes does your step father usually live in the same household with you?	YE.....1 NO.....2 I don't have step father.....9	
e.	Does your older brother usually live in the same household with you?	YES.....1 NO.....2	
f.	Does your older sister usually live in the same household with you?	YE.....1 NO.....2	
g.	Does your husband usually live in the same household with you?	YES.....1. NO.....2	
h.	Does your mother-in-law usually live in the same household with you?	YES.....1. NO.....2	
i.	Does your father-in-law usually live in the same household with you?	YES.....1. NO.....2	
113	CHECK Q112 a: (biological mother)	112a=1 (Lives in the same household).....1 112a=2 (Does not live in the same household).....2	118
114	Is your (biological) mother alive?	Yes.....1 No.....2	118
115	Where does she live?	Lives elsewhere, within Bangladesh.....1 Lives elsewhere, outside Bangladesh.....2 Don't know.....8	118
116	In the last one month did you have any communication (met her, by phone, by letter, by email, by IMO/Viber/WhatsApp/Messenger etc.) with her?	YES.....1 NO.....2	118
117	In the last one month how often did you communicate with her?	20 times or more.....1 10-19 times.....2 4-9 times.....3 1-3 times.....4	
118	CHECK Q112 c: (biological father)	112c=1 (Lives in the same household).....1 112c=2 (Does not live in the same household).....2	123
119	Is your (biological) father alive?	YES.....1 NO.....2	123
120	Where does he live?	Lives elsewhere, within Bangladesh.....1 Lives elsewhere, outside Bangladesh.....2 Don't know.....8	123
121	In the last one month did you have any communication (met him, by phone, by letter, by email, by IMO/Viber/WhatsApp/Messenger etc.) with him?	YES.....1 NO.....2	123
122	In the last one month how often did you communicate with him?	20 times or more.....1 10-19 times.....2 4-9 times.....3 1-3 times.....4	
123	Do you have any older brother who does not live in the same household with you or lives somewhere else?	YES.....1 NO.....2	
124	Do you have any older sister who does not live in the same household with you or lives somewhere else?	YES.....1 NO.....2	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I am going to ask you about your engagement with any creative activities, cultural activities and/or outdoor sports. I also want to ask you about your affiliation with any club.			
125	Are you currently engaged in any creative, cultural activities or outdoor sports such as		
a.	Drawing/painting	YES.....1 NO.....2	
b.	Singing /Dancing /Drama	YES.....1 NO.....2	
c.	Outdoor Sports such as football, cricket, bou-chi, hadudu/cabady, table tennis, badminton etc	YES.....1 NO.....2	
d.	Reading books other than textbooks	YES.....1 NO.....2	
e.	Creative Writing such as writing stories, poem etc	YES.....1 NO.....2	
f.	Other (Specify):	YES.....1 NO.....2	
126	Are you currently affiliated with any club or organization such as		
a	Local Youth Club	YES.....1 NO.....2	
b	Boys Scout/Girls Scout/ Girls Guide	YES.....1 NO.....2	
c	Cultural Organization: (for example singing, dancing, drama, poetry, painting, drawing etc.)	YES.....1 NO.....2	
d	Sports Club: school/college or community level	YES.....1 NO.....2	
e	Reading Club/ Library	YES.....1 NO.....2	
f	Other (Specify):	YES.....1 NO.....2	
Now a days, many organizations (such as Government, NGO, and School) are running adolescent programs where they teach about adolescent rights, nutrition, vocational training, reproductive health such as puberty, menstruation, marriage, family planning and other life skills. Now, I would want to know if you have ever been involved in any such adolescent program currently or previously.			
127	Are you currently involved with any adolescent program?	YES.....1 NO.....2	201
128	In the last 3 years were you involved in any adolescent program?	YES.....1 NO.....2	

Section 2: Exposure to Media

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Now I would like to ask you few questions about your exposure to Mobile phone, Internet, Radio, Television and newspaper.			
201.	Do you have your own mobile phone that is currently functional? [If YES, then ASK; is it a basic mobile phone or a smart phone?	Yes, basic mobile phone.....1 Yes, smart phone.....2 Yes, both basic and smart phone.....3 No.....4	204
202.	Do any of your family members currently own a functional mobile phone?	YES.....1 NO.....2	206
203.	Do you have access to a family member's mobile phone in case you want to?	YES.....1 NO.....2	206
Mobile phones are used to make and receive phone calls, text messages, access the internet etc. Now I want to know if you use the mobile phone for certain purposes.			
204.	Do you use the mobile phone to.....	205 If yes, do you use this every day or at least once a week or less than once a week	
a.	Do you use the mobile phone to make and/or receive phone calls?	Yes.....1 No.....2	
b.	Do you use the mobile phone to send and/or receive texts?	Yes.....1 No.....2	
c.	Do you use the mobile phone to listen radio?	Yes.....1 No.....2	
d.	Do you use the mobile phone to access the internet/Google/Youtube?	Yes.....1 No.....2	
e.	Do you use the mobile phone to read newspaper/magazine?	Yes.....1 No.....2	
f.	Do you use the mobile phone to use Facebook?	Yes.....1 No.....2	
g.	Do you use the mobile phone to use IMO/Viber/WhatsApp/Messenger?	Yes.....1 No.....2	
All this time I listened to your use of mobile phone. Now I want to know about your use of Laptop/Computer or Tab (Tablet)			
206.	Do you use internet through a Laptop/computer/tablet either in the house or elsewhere? How often do you use internet through a computer/tablet: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	
207.	In the last 3 months, have you read any adolescent focused article online/internet, through mobile phone, laptop/ computer or tab?	YES.....1 NO.....2	
208.	Do you listen to the radio? How often do you listen to the radio: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	210
209.	In the last 3 months, did you listen to any adolescent focused program on the radio?	YES.....1 NO.....2	
210.	Do you watch television? How often do you watch television: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	212
211.	In the last 3 months, did you watch any adolescent focused program in TV?	YES.....1 NO.....2	
212.	Do you read printed version of newspaper/magazine? How often do you read: everyday, at least once a week, less than once a week or not at all?	Everyday.....1 At least once a week.....2 Less than once a week.....3 Not at all.....4	501
213.	In the last 3 months, have you read any adolescent focused news article or newspaper or magazine?	YES.....1 NO.....2	

Section 5: Contraception

Now I would like to talk about family planning. By using various ways or methods of family planning a couple can delay or avoid a pregnancy. I know you are not married and you may not need it, however, your thoughts and knowledge would help us to assess how unmarried girls perceive issues around Contraception.

[Circle code 1 in 501 for each method mentioned spontaneously. Check question 501 whether A-C was mentioned spontaneously. If any of these are not mentioned spontaneously then proceed down question 502 for that specific method. Read the name and description of those specific methods. Circle code 2 if method is recognized, and code 3 if not recognized in Q502.]

NO	QUESTION AND FILTER	CODING CATEGORY		SKIP
501.	Which ways or methods have you heard about?	Spontaneous YES	502. Have you ever heard of (method) of family planning? Probed YES NO	
A	PILL: A woman can take oral pill to prevent pregnancy	1	2 3	
B	CONDOM: Men can put a rubber sheath on their penis before sexual intercourse to prevent pregnancy	1	2 3	
C	EMERGENCY CONTRACEPTION PILLS (ECP): As an emergency measure after unprotected sexual intercourse, women can take special pills at any time within three days to prevent pregnancy.	1	2 3	
D	WITHDRAWAL: Men can be careful and pull out before climax.	1		
E	SAFE PERIOD (COUNTING DAYS, CALENDER, and RHYTHM METHOD): Couples can avoid having sexual intercourse on certain days of the month when the women is more likely to get pregnant.	1		
F	INJECTION: Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months	1		
G	MALE STERILIZATION (VASECTOMY): Men can have an operation to avoid having any more children.	1		
H	FEMALE STERILIZATION: Woman can have an operation to avoid having any more children.	1		
I	IUD: Women can have a loop or coil placed inside them by a doctor or a nurse.	1		
J	IMPLANT/NORPLANTS: Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for several years.	1		
K	If respondent tells about any method spontaneously other than above (SPECIFY) _____	1		
503.	CHECK Q501 *A to K) At least one circle (501=1) Yes <input type="checkbox"/> No <input type="checkbox"/> →	Check Q502 (A to C) At least one yes (502=2) Yes <input type="checkbox"/> No <input type="checkbox"/> →		601
504.	Do you know any place or person where one can get family planning information and services?	YES.....1 NO.....2		601
505.	Where is that place? Any other place? PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. RECORD ALL MENTIONED	PUBLIC SECTOR Medical college/specialized hospital.....A District Hospital.....B Maternal Child Welfare Center (MCWC).....C School Health Clinic.....D Upazila Health Complex.....E Union Health & Family Welfare Centre/Rural dispensary/ Union Subcentre/Family Welfare CentreF Community Clinic.....G Satellite clinic/EPI outreach site.....H Govt. field worker (FWA).....I Other govt. (Specify).....J NGO SECTOR NGO static clinic.....K NGO satellite clinic.....L NGO depot holder.....M NGO fieldworker.....N Other NGO (Specify).....O PRIVATE MEDICAL SECTOR Private hospital/clinic.....P Qualified doctor's chamber.....Q Non-qualified doctor's chamber.....R Pharmacy/drug store.....S Homeo/Herbal/Unani.....T Other private medical (Specify).....U OTHER SOURCE Shop.....V Friend/relatives.....W Other (Specify).....X		

Section 6: Time Use

No	Filters and Questions	Coding Categories	SKIP
601.	Instruction to interviewer: Check the day of the interview and circle the appropriate Code	Sunday.....1 Monday.....2 Tuesday.....3 Wednesday.....4 Thursday.....5 Friday.....6 Saturday.....7	
CHECK 107: Currently attending school/College/Madrasha <input type="checkbox"/> Not attending school/College/Madrasha <input type="checkbox"/>			604a
Now, I want to ask you about different activities you are involved in last 24 hours. I want to know about the amount of time you have spent yesterday doing these activities. (The last 24 hours means the time frame in between 6 am yesterday morning to 6 am today morning.)		If yes, how much time in total you spend doing this yesterday/ in the last 24 hours: (in minutes/hours)	
602 a.	Did you go to school/College/Madrasha yesterday?	Yes.....1 No.....2	602 b. _ _ Hours _ _ Minutes
603 a.	Yesterday did you spend any time on studying at home/attending any coaching centre or private tutor at home?	Yes.....1 No.....2	603 b. _ _ Hours _ _ Minutes
604 a.	Yesterday did you spend any time on any physical activity like exercise, walking for exercise, swimming, cycling, sports etc?	Yes.....1 No.....2	604 b. _ _ Hours _ _ Minutes
605 a.	Yesterday did you spend any time doing creative or recreational activities such as-, singing, playing instrument, painting, reading any books other than text-books?	Yes.....1 No.....2	605 b. _ _ Hours _ _ Minutes
606.	For how long in total did you sleep from yesterday 6 am till today 6am>		_ _ Hours _ _ Minutes

Section 7: Connectedness: family and friends

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKP
701	CHECK 112 a and 114 : If 112a=1 or Q114=1 <input type="checkbox"/>	If 112a=2 and 114=2 <input type="checkbox"/>					704
702	Now I am going to read out some statements about your relationship with your biological mother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with mother left as a child and now not in touch, then code 'Not in touch with mother')	Never	Sometimes	Most of the time	Always	Not in touch with mother	
a	You enjoy spending time with your mother	1	2	3	4	9	704
b	You and your mother are pretty close.	1	2	3	4	9	
c	You talk with your mother about very personal things	1	2	3	4	9	
703	Now I am going to mention some issues and ask you if you feel comfortable discussing those with your mother	Yes		No			
a	Menstruation	1		2			
b	Progress in studies	1		2			
c	When you want to have a child	1		2			
d	Using family planning methods	1		2			
e	Seeking health services for yourself	1		2			
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g	Participation in income generating activities outside home	1		2			
h	Your Marriage	1		2			
i	Intimate/Personal relationship	1		2			
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2			
704	CHECK: 112c and 119 If 112 c=1 or 119=1 <input type="checkbox"/>	If 112c=2 and 119=2 <input type="checkbox"/>					713
705	Now I am going to read out some statements about your relationship with your biological father and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with father left as a child and now not in touch, then code 'Not in touch with father')	Never	Sometimes	Most of the time	Always	Not in touch with father	
a.	You enjoy spending time with your father	1	2	3	4	9	713
b.	You and your father are pretty close.	1	2	3	4	9	
c.	You talk with your father about very personal things	1	2	3	4	9	
706	Do you feel comfortable discussing following issues with your father?	Yes		No			
a	Menstruation	1		2			
b	Progress in studies	1		2			
c	When you want to have a child	1		2			
d	Using family planning methods	1		2			
e	Seeking health services for yourself	1		2			

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKP
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g	Participation in income generating activities outside home	1		2			
h	Your Marriage	1		2			
i	Intimate/Personal relationship	1		2			
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2			
713	CHECK: 112e and 123 If 112 e=1 or 123=1 <input type="checkbox"/> ↓ If 112e=2 and 123=2 <input type="checkbox"/> →						716
714	Now I am going to read out some statements about your relationship with your elder brother and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder brother, left as a child and now not in touch, then code 'Not in touch with elder brother')	Never	Sometim es	Most of the time	Always	Not in touch with elder brother	
a	You enjoy spending time with your elder brother	1	2	3	4	9 →	716
b	You and your elder brother are pretty close.	1	2	3	4	9	
c	You talk with your elder brother about very personal things	1	2	3	4	9	
715	Do you feel comfortable discussing following issues with your elder brother? Yes No						
a	Menstruation	1		2			
b	Progress in studies	1		2			
c	When you want to have a child	1		2			
d	Using family planning methods	1		2			
e	Seeking health services for yourself	1		2			
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g	Participation in income generating activities outside home	1		2			
h	Your Marriage	1		2			
i	Intimate/Personal relationship	1		2			
j	Sexual harassment : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message.	1		2			
716	CHECK: 112f and 124 If 112 f=1 or 124=1 <input type="checkbox"/> ↓ If 112f=2 and 124=2 <input type="checkbox"/> →						719
717	Now I am going to read out some statements about your relationship with your elder sister and want to know which statement is applicable about you? (Instruction for interviewer : If respondent is not in touch with elder sister, left as a child and now not in touch, then code 'Not in touch with elder sister')	Never	Sometim es	Most of the time	Always	Not in touch with elder sister	
a	You enjoy spending time with your elder sister	1	2	3	4	9 →	719
b	You and your elder sister are pretty close.	1	2	3	4	9	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKP
c	You talk with your elder sister about very personal things	1	2	3	4	9	
718	Do you feel comfortable discussing following issues with your elder sister?	Yes		No			
a	Menstruation	1		2			
b	Progress in studies	1		2			
c	When you want to have a child	1		2			
d	Using family planning methods	1		2			
e	Seeking health services for yourself	1		2			
f	Participation in recreational activities: singing, dancing, drama, recitation of poem, drawing etc.	1		2			
g	Participation in income generating activities outside home	1		2			
h	Your Marriage	1		2			
i	Intimate/Personal relationship	1		2			
j	Sexual harassments : Sometimes we go through uncomfortable experiences inside and outside of home ; passing of sexual comments, sly whistle, physical touch that makes you uncomfortable, showing obscene photos, flashing of private parts, harassment through mobile call or text message	1		2			
719	Now I am going to read out some statements about your relationship with your friends. You may consider anyone as your friend as for example your neighbours, school mates, cousins, play mates, or any individuals you communicate with.	Never	Sometimes	Most of the time	Always	Does not have friends	
a	You have friends that you consider close and trust completely	1	2	3	4	9 →	801
b	Spending time with friends is important to you.	1	2	3	4	9	
c	You and your friends talk openly with each other about personal things.	1	2	3	4	9	

Section 8: Gender norms

No.	QUESTIONS	CODING CATEGORIES		
<p>There are several opinions about the role and duties of a girl/female or a boy/male in our families and society. Now I am going to read out some statements and would like to know whether you agree or disagree with them.</p>				
801	Gender attitudes	Agree	Disagree	Don't Know
a	It is important that sons have more education than daughters.	1	2	8
b	Outdoor games are only for boys not for girls.	1	2	8
c	A family is not complete until they have at least one son.	1	2	8
d	Household chores are for women only, not for men, even if the woman works outside the house.	1	2	8
e	Women should not be allowed to work outside of home.	1	2	8
f	A woman should always listen to her husband even if she disagrees.	1	2	8
g	Looking after the household and kids is the responsibility of women only.	1	2	8
h	Husband has the right to beat his wife when she does not obey him.	1	2	8

Section 9: Mental Health

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			
<p>Now I am going to discuss some mental health conditions that a person may experience. I want to know whether you experienced any such conditions in the last 2 weeks; if you have encountered these conditions, I would like to know how frequently you have experienced them in the last two weeks.</p> <p>Instruction for interviewer: Please explain to the respondent what is meant by 2 weeks.</p>					
901	In the last two weeks till today how often have you.....	Not at all	Some days	Majority of the days	Nearly Everyday
a	In the last two weeks till today how often have you felt down, depressed, irritable, or hopeless- Not at all, some days, majority of the days or nearly every day?	0	1	2	3
b	In the last two weeks till today how often have you had little interest or pleasure in doing things- Not at all, some days, majority of the days or nearly every day?	0	1	2	3
c	In the last two weeks till today how often have you had trouble falling asleep, staying asleep, or sleeping too much- Not at all, some days, majority of the days or nearly every day?	0	1	2	3
d	In the last two weeks till today how often have you had poor appetite, weight loss, or overeating- not at all, some days, majority of the days or nearly every day?	0	1	2	3
e	In the last two weeks till today how often have you felt tired, or had little energy- not at all, some days, majority of the days or nearly every day?	0	1	2	3
f	In the last two weeks till today how often have you felt bad about yourself – or felt that you are a failure- not at all, some days, majority of the days or nearly every day?	0	1	2	3
g	In the last two weeks till today how often have you had trouble concentrating on usual activities- not at all, some days, majority of the days or nearly every day?	0	1	2	3
h	In the last two weeks till today how often have you felt as if you have become more silent or restless- not at all, some days, majority of the days or nearly every day?	0	1	2	3
i	In the last two weeks till today how often have you thoughts that you would be better off dead, or have hurt yourself in some way- not at all, some days, majority of the days or nearly every day?	0	1	2	3
<p>Instruction to Interviewer:</p> <p>If 901i= 1,2 or 3, ask the respondent if he/she has discussed about this matter with anyone. If the answer is “YES” (has discussed about this matter with someone) than advice him/her to continue the discussion with that person. If the answer is “NO” then advice him/her to discuss the matter with someone he/she likes and trusts Or call +880</p>					

Section 10: Violence against adolescents, bullying and sexual Harassment

1000	Check Household Questionnaire Q20:			1101
	HH Q20=1 <input type="checkbox"/>		HH Q20=2 or more <input type="checkbox"/>	
READ TO RESPONDENT				
Individuals including adolescents experience certain situations in their lives that are unpleasant and/or it make them uncomfortable. I would like to briefly ask about some of your own experiences and would like to know whether you have faced them in the last 12 months. I would also like to know from whom you have experienced it and how many times. You can talk to me openly about it and everything that you say will be kept confidential.				
NO.	QUESTIONS	CODING CATEGORIES	QUESTIONS	CODING CATEGORIES
1001	In the last 12 months, has anyone acted in the following manner with you?		1002. In the past 12 months how many times did it happen?	1003. Who did this to you? (Multiple answers acceptable) Probe: Who else?
a	In the last 12 months, has anyone slapped you, pushed you or pulled your hair?	Yes...1 No...2	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative. I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
b	In the last 12 months, has anyone punched, thrown something at you, hit you with a stick or something heavy?	Yes...1 No...2	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative. I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
c	In the last 12 months, has anyone kicked you, dragged you or, beat you up?	Yes...1 No...2	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member//Relative. I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X

d	In the last 12 months , has anyone tried to choke you or burn you on purpose with something hot (fire, object, acid)	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative.I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
e	In the last 12 months , has anyone threatened or attacked you with a knife, gun or any other weapon	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative.I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
READ TO RESPONDENT				
I have listened to the unwanted experiences that you might have faced in the last 12 months. Now, I would like to briefly ask you if anyone has cursed you, passed mean comments, called you names, had lies told about you, threatened you or excluded you socially in the last 12 months. You can talk to me freely about this and everything that you say will be kept confidential.				
1004	In the last 12 months , has anyone acted in the following manner with you?		1005. In the past 12 months how many times did it happen?	1006. Who did this to you? (Multiple answers acceptable)
a	In the last 12 months , has anyone cursed you or passed mean comments or called you names?	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative.I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
b	In the last 12 months , has anyone blamed you to be liar or had lies told about you?	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative.I Teacher.....J Law Enforcement.....K Friends.....L

				School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
c	In the last 12 months , has anyone given you a written or verbal threat?	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative.I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X
d	In the last 12 months , has anyone excluded you socially like did not include you while playing, did not let you sit with them or did not include you in idle chats.	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Other Family Member/Relative..A Friends.....B School Peers.....C Neighbours.....D Colleagues.....E Unknown person.....F House holder/owner.....G Other (Specify).....X
READ TO RESPONDENT				
I would like to briefly ask you if anyone has insulted you, made fun of you or spread false rumors about you using mobile SMS, MMS or Internet. You can talk to me freely about this and everything that you say will be kept confidential.				
1007.	In the last 12 months , has anyone acted in the following manner with you?		1008. In the past 12 months how many times did it happen?	1009. Who did this to you? (Multiple answer acceptable)
a	In the last 12 months, has anyone used a mobile phone or internet to bother or harass you or to spread mean words or pictures about you in the last 12 months?	Yes...1 No...2 ↓	Once.....1 2-4 times.....2 5 or more times.....3	Father.....A Step Father.....B Mother.....C Step mother.....D Father in Law/Mother in Law...E Husband.....F Brother.....G Sister.....H Other Family Member/Relative.I Teacher.....J Law Enforcement.....K Friends.....L School Peers.....M Neighbours.....N Colleagues.....O Unknown person.....P House holder/owner.....Q Other (Specify).....X

Section 11: Utilization of Health Services

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	Now I am going to ask you some questions regarding seeking information and/or service relating to health .		
1101.	Did you visit any health facility in last 6 months for yourself?	Yes.....1 No.....2 →	1107
1102.	How many visits did you make?	_____ TIMES	
1103.	Where did you visit last? <i>Probe to find out the correct health facility that was last visited and circle.</i> <i>If unable to determine if the facility is a hospital, clinic, public, NGO or private, please write down the name of the facility below:</i> (Name of Facility).	PUBLIC Public medical college/specialized hospital.....11 District hospital.....12 Maternal child welfare center (MCWC)13 Upazila Health Complex14 Union Health & Family Welfare Centre/ Rural dispensary/ union sub centre.....15 School health clinic16 Satellite clinic/EPI outreach site.....17 Community clinic.....18 Other govt(Specify).....20 NGO NGO static clinic.....21 NGO satellite clinic.....22 NGO depo holder.....23 Other NGO (specify).....26 PRIVATE Private hospital/clinic/medical college.....31 Qualified doctor's chamber32 Non-qualified doctor's chamber33 Pharmacy/drugstore34 Homeopath/Herbal/Unani.....35 Other Private medical.....36 (Specify)	
1104.	In the last health facility you visited, is there a separate corner for adolescents to provide information and service?	Yes.....1 No.....2 Don't Know.....8	
1105.	In your last visit did you go for any information or services or both?	Information only.....1 Service only.....2 Both information and service.....3	
1106.	What information and/ or services did you receive the last time you visited? Anything else? <i>Do not read out responses.</i> <i>Circle all mentioned.</i>	Menstrual problem management.....A Anemia.....B White discharge.....C Nutrition.....D Burning sensation during micturation.....E General illness.....F Weakness.....G Allergy/Rash/Itching.....H Injury/Accident.....I Tetanus or Vaccination.....J Diarrheal disease.....K Gastritis problem.....L FP services.....M Post abortion care.....N Antenatal care.....O Delivery.....P Postnatal care.....Q Wet dream.....R Did not receive any treatment or service.....S Other.....X	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1107.	Now I would want to know if you like to know more about following topics?	1108. If yes, what would be your two most preferred medium to receive information on this topic? (Interview should show the picture page showing 8 medium such as A= Teacher, B= Books, C=Television, D= Radio/FM; E= Mobile/ Internet; F= Newspaper/Magazine; G=Hotline; H= Health Provider)	
a	Do you want to know more about Puberty/ Physical Change? Yes.....1 No.....2 ↓	a 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
b	Do you want to know more about Wet Dream? Yes.....1 No.....2 ↓	b 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
c	Do you want to know more about menstruation? Yes.....1 No.....2 ↓	c 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
d	Do you want to know more about marriage? Yes.....1 No.....2 ↓	d 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
e	Do you want to know more about pregnancy? Yes.....1 No.....2 ↓	e 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
f	Do you want to know more about family panning? Yes.....1 No.....2 ↓	f 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
g	Do you want to know more about ANC/ Delivery and PNC? Yes.....1 No.....2	g 1 st Source <input type="checkbox"/> 2 nd Source <input type="checkbox"/>	
1501	End of interview	Hour <input type="text"/> <input type="text"/> Minute <input type="text"/> <input type="text"/>	

ফরম-২
গণপ্রজাতন্ত্রী বাংলাদেশ সরকার
পরিকল্পনা মন্ত্রণালয়
পরিসংখ্যান ও তথ্য ব্যবস্থাপনা বিভাগ
বাংলাদেশ পরিসংখ্যান ব্যুরো

সংস্থা কর্তৃক পরিসংখ্যান প্রস্তুত ও প্রকাশের জন্য বাংলাদেশ পরিসংখ্যান ব্যুরোর অনাপত্তি

পরিসংখ্যান আইন, ২০১৩ (২০১৩ সনের ১২ নং আইন)-এর ধারা ১১ এর উদ্দেশ্য পূরণকল্পে উক্ত আইন এবং এতদসংক্রান্ত বিধি ও নীতিমালা অনুযায়ী নিম্নবর্ণিত শর্তসাপেক্ষে জনসংখ্যা গবেষণা ও প্রশিক্ষণ ইনস্টিটিউট (নিপোর্ট) কর্তৃক 'বাংলাদেশে কিশোর-কিশোরীদের স্বাস্থ্য বিষয়ক জরিপ (Bangladesh Adolescent Health and Wellbeing Survey 2018-19)' শীর্ষক জরিপ পরিচালনায় অনাপত্তি প্রদান করা হইল।

শর্তসমূহ:

- (১) তথ্য সংগ্রহের পূর্বে জরিপের Sampling Design গঠিত সাব-কমিটির পর্যালোচনার জন্য প্রেরণ করিতে হইবে;
 - (২) জরিপ কার্যক্রমের নির্বাচিত PSUতে খানার তালিকা প্রস্তুত করিয়া দৈবচয়নের ভিত্তিতে খানা নির্বাচন করিতে হইবে;
 - (৩) মাঠ পর্যায়ে তথ্য সংগ্রহ কার্যক্রম পরিবীক্ষণের জন্য বিবিএসকে সম্পৃক্ত করিতে হইবে;
 - (৪) জরিপের প্রতিবেদন প্রকাশের পূর্বে প্রস্তুতকৃত খসড়া প্রতিবেদন অত্র কমিটির সভায় উপস্থাপন করিতে হইবে;
 - (৫) প্রকাশিত জরিপ প্রতিবেদনের সহিত বিবিএস-এর অনাপত্তিপত্র সংযুক্ত করিতে হইবে এবং বিবিএসকে প্রকাশনার ১০ (দশ) টি কপি, প্রতিবেদনের সফট কপি এবং Metadataসহ Microdata সরবরাহ করিতে হইবে;
 - (৬) 'সংস্থা কর্তৃক পরিসংখ্যান প্রস্তুত ও প্রকাশ নীতিমালা, ২০১৬'-এর অনুচ্ছেদ-৪, ৫ ও ৭ এর নির্দেশনাসমূহ যথাযথভাবে প্রতিপালন করিতে হইবে।
- ২। নিপোর্ট কর্তৃক 'সংস্থা কর্তৃক পরিসংখ্যান প্রস্তুত ও প্রকাশ নীতিমালা, ২০১৬' অনুসরণ এবং ব্যুরো কর্তৃক প্রদত্ত শর্তাবলী পূরণ ও মান বজায় রাখিবার বিষয়টি নিশ্চিত করিবে।
- ৩। নির্ধারিত সময়সীমার মধ্যে পরিসংখ্যান প্রস্তুত ও প্রকাশের কার্যক্রম সম্পন্ন করিতে না পারিলে নিপোর্ট এই বিধিমালায় অধীন বাংলাদেশ পরিসংখ্যান ব্যুরোর নিকট সময় বৃদ্ধির জন্য আবেদন করিতে পারিবে।
- ৪। নীতিমালা যথাযথভাবে অনুসরণ এবং শর্তসমূহ যথাযথভাবে পূরণ ও মান বজায় রাখিবার বিষয়টি বাংলাদেশ পরিসংখ্যান ব্যুরো ও নিপোর্টের যৌথ পরিবীক্ষণের (Monitoring) মাধ্যমে নিশ্চিত করা হইবে।

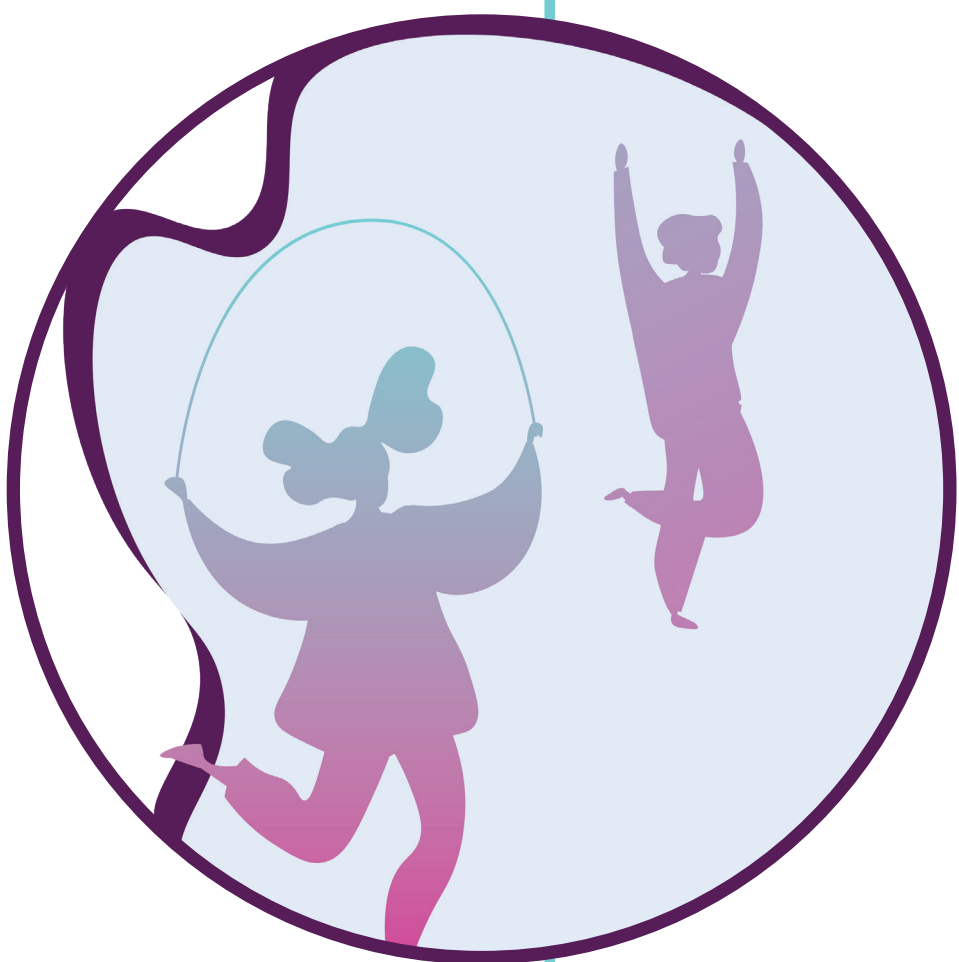

(মোহাম্মদ তাজুল ইসলাম)
সভাপতি

ও
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