



Bangladesh Adolescent Health and Wellbeing Survey 2019-20

Summary Findings

Survey background

Primary objective

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

Stakeholders and technical assistance

- The survey was conducted under the leadership of the National Institute of Population Research and Training (NIPORT).
- Technical assistance was provided by Research for Decision Makers (RDM) of icddr,b; MEASURE Evaluation/Data for Impact (D4I) of University of North Carolina at Chapel Hill, USA, and the United States Agency for International Development (USAID)/Bangladesh.
- The field implementation and data processing were completed by Human Development and Research Centre (HDRC).
- The Government of Bangladesh, USAID/Bangladesh, and UKAid provided financial assistance for the survey.

Survey sample

The survey covered a nationally representative sample of 72,800 households, with a 98% response rate. 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 using three types of individual questionnaires.

Data collection

Data collection took place in five phases, from July 25, 2019 to January 10, 2020. icddr,b monitored data collection with 18 independent field monitoring offices and four quality control teams through an independent mobile app.

Data processing

Data processing and analysis used Census and Survey Processing System (CSPro) software.

Respondent characteristics

Living status

Half (52%) of the married females were living with both parents-in-law, while 80% of unmarried females and males were living with both parents, at the time of the survey.

Schooling

- Almost all (98%) adolescents had ever attended school.
- Most ever-married female adolescents (83%) discontinued schooling, mainly due to marriage.
- Over one-quarter of unmarried male adolescents (27%) discontinued schooling, mainly due to lack of interest and financial constraints.
- School discontinuation rate was the lowest (15%) among unmarried females, and discontinuation was mainly due to financial constraints.



Involvement in extracurricular activities/social organizations/adolescent programs

- Almost 90% of unmarried male adolescents were involved in any extracurricular activity. Female adolescents were less likely to be involved in any extracurricular activity (about 26% of ever-married females and 56% of unmarried females) than unmarried males.
- Only 2% of ever-married females, 14% of unmarried females, and 22% of unmarried males were associated with any social organization.
- Around 1%-5% of adolescents were involved in any adolescent program.

Exposure to mass media

- More than 90% of adolescents had access to a mobile phone (either they owned one or could use someone else's phone). Seven-out-of-ten unmarried males owned a mobile phone. Around half of evermarried females and one-quarter of unmarried females owned a mobile phone. At least half of these phones were smartphones.
- More than two-thirds (65%-79%) of all adolescents watched TV at least once a week.
- Almost half of unmarried males and one-fifth of ever-married and unmarried female adolescents accessed the internet at least once a week.
- Around 15%-25% of adolescents had exposure to adolescent-related programs/materials through TV, radio, online and/or print media in the three months preceding the survey.
- A large proportion of unmarried females desired to know more about puberty/physical changes (73%), menstruation (66%), and family planning (55%).
- A notable proportion of unmarried males wanted to know more about puberty/physical changes (66%), nocturnal emission (52%), and family planning (57%).
- The internet/mobile was the most preferred source of information on all health-related topics for unmarried males.
- Unmarried females preferred to get information on menstruation and puberty through books, and on family planning from health providers and books.

Menstruation

- The mean age at first menstruation was 12.8 years for ever-married female adolescents and 12.9 years for unmarried female adolescents.
- Only 23% of married and 30% of unmarried female adolescents reported having knowledge about menstruation prior to menarche.
- Textbooks/books were the most common mass media source of information on menstruation for evermarried females (65%) and unmarried females (81%). TV/radio was the second-most common source of information for ever-married females and unmarried females (23% and 29%, respectively).
- Almost all female adolescents reported using hygienic menstrual products (sanitary napkins or clean reusable materials).
- However, only about one-in-ten female adolescents changed their menstrual products according to the recommended number of times per day (four times per day). About 9% and 12% of ever-married and unmarried female adolescents, respectively, followed hygienic menstrual practices.
- One-in-four female adolescents ages 15-19 years missed at least one day of school during their last menstruation.

Marriage

Marital status

- Three percent of ever-married females ages 15-19 were separated, divorced, or widowed.
- One-in-six (17%) of currently married females had been married for four years or more.

Spousal age difference

- Thirty percent of currently married female adolescents had an age difference of ten or more years with their husband.
- The proportion of currently married female adolescents with a spousal age difference of ten years or more was highest among those in the highest wealth quintile (45%).

Living separately from husbands

- One-in-five currently married female adolescents (18%) lived separately from their husbands. Among those, half (9%) of the husbands lived in Bangladesh and half (9%) lived overseas.
- Living separately was more common for currently married female adolescents in the Eastern region compared to the Central or Western regions.

Preferred timing/age at marriage

- Two-thirds of married female adolescents would have preferred to be married later than the age when they got married.
- Over one-quarter (26%) of unmarried females preferred to marry at age 22 or later.
- Over half (55%) of unmarried males preferred to marry at age 24 or later.

Knowledge and use of family planning and health services

Knowledge and use of family planning

- Knowledge of the oral pill as a method of family planning was higher among unmarried females (72%) than among unmarried males (61%). However, the opposite was true for knowledge of condoms and emergency contraceptive pills (ECPs)—about 40% and 9% of unmarried females knew about condoms and ECPs, respectively; while 82% and 19% of unmarried males knew about condoms and ECPs, respectively.
- The contraceptive prevalence rate among currently married female adolescents ages 15-19 was 56%. Modern method use was 51%. The oral pill was the most widely used method (33%).
- 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.

Knowledge and use of health services

- More than half of all adolescents visited any health care facility in the six months prior to the survey. The proportion ranged from 50% among unmarried females to 62% among ever-married females.
- Adolescents were most likely to go to the private sector for health services.
- Most adolescents seeking health services received health care for general illnesses.

Nutrition and dietary diversity

- About one-third of female adolescents and one-fifth of male adolescents were nutritionally stunted.
- Around one-in-ten unmarried adolescents were underweight and another one-in-ten were overweight. Among ever-married adolescent females, 4% were underweight and 16% were overweight.

- About 76%-85% of adolescents had adequate dietary diversity. Most adolescents (70%-78%) consumed iron-rich food. Only around one-quarter consumed vitamin A-rich food.
- A very low proportion of adolescents (12% of ever-married females; 1%-3% of unmarried adolescents) received iron folic acid supplementation in the seven days before the survey.

Gender norms

- Unmarried females held the most liberal (gender-equitable) views among the three groups of adolescents (ever-married females, unmarried females, and unmarried males).
- Married females were more likely than other adolescent groups to support traditional (less genderequitable) societal views about women's roles in doing household chores and taking care of the family and kids, even if women work outside the home. They were also more likely than any other group to support women's submissive status to men.
- Compared to ever-married and unmarried females, unmarried male adolescents were more likely to support the importance of having a son in the family and the importance of more education for sons than daughters. Similarly, opposition to girls playing outdoor games and women working outside the home was higher among male adolescents compared to either of the female adolescent groups.

Violence and harassment

Physical violence

- One-fifth of ever-married and unmarried female adolescents and one-quarter of unmarried male adolescents experienced physical violence at least once in the last 12 months; 4-6% of all adolescents experienced physical violence five or more times in the last 12 months.
- Husbands (77%) were reported as the most common perpetrators of physical violence towards evermarried females. Among unmarried females, mothers (38%) and friends/classmates (29%) were reported to be the most common perpetrators of physical violence. Friends/classmates (56%) were reported as the most common perpetrators of physical violence towards unmarried males.

Verbal/social bullying

- Around one-third of all adolescents experienced verbal/social bullying at least once in the 12 months preceding the survey. Unmarried males were more likely to have experienced verbal/social bullying than female adolescents (35% versus 30%, respectively); 10-14% of all adolescents experienced verbal or social bullying five or more times in the last 12 months.
- Husbands (47%) and in-laws (37%) were reported as the most common perpetrators of verbal/social bullying towards ever-married females. Among unmarried females, friends/classmates (39%) and mothers (33%) were reported as the most common perpetrators of verbal/social bullying. Friends (63%) and neighbors (36%) were reported to be the most common perpetrators of verbal/social bullying towards unmarried males.

Cyberbullying

- Around 7% of ever-married females, 9% of unmarried females, and 3% of unmarried males had experienced cyberbullying at least once in the last 12 months.
- The main perpetrators of cyberbullying reported by all adolescent groups (77% of ever-married females, 80% of unmarried females, and 55% of unmarried males) were unknown persons.

Sexual harassment

- One-third of unmarried female adolescents experienced sexual harassment at least once in the last 12 months. Among ever-married females this proportion was less than one-fifth.
- Sexual harassment was most often experienced by females on the road (74%-88%).

Connectedness with family and friends

Connectedness with husband

• Two-thirds of the currently married female adolescents reported enjoying spending time with their husbands always or most of the time. A smaller proportion (57%) said they discussed very personal matters with their husbands.

Connectedness with mother-in-law

• Almost three-fourths of ever-married female adolescents who lived with their mothers-in-law reported feeling close to and/or enjoying spending time with them. A little under one-third (28%) reported discussing very personal matters with their mothers-in-law.

Connectedness with mother

• A very high proportion of unmarried females—87%—stated that they enjoyed spending time with their mothers always or most of the time. Among unmarried males this proportion was 65%. Over half of the girls discussed very personal matters with their mothers, but only one-fifth of the boys did so. Overall, compared to unmarried males, unmarried females appeared to be more connected with their mothers.

Connectedness with father

• Around half of unmarried adolescents said they enjoyed spending time with their fathers. Only a small proportion of unmarried adolescents (13%-14%) reported discussing personal matters with their fathers. Overall, about the same percentage of female and male adolescents had high levels of connectedness with their fathers. Unmarried female and male adolescents were more connected with their mothers than with their fathers.

Connectedness with friends

• Unmarried male and female adolescents were more likely to have trusted friends and to discuss personal matters with them compared to ever-married females of the same age.

Mental Health

Prevalence of major depressive disorder

- One-in-seven married female adolescents and one-in-ten unmarried female adolescents had major depressive disorder (MDD). Females were two to three times more likely to have MDD than males.
- For all three adolescent groups, the likelihood of having MDD was lower among adolescents with higher educational attainment.

Major depressive disorder and connectedness with family

- Married female adolescents who had high levels of connectedness with their husbands were less likely to experience MDD than those who were not connected.
- Unmarried females who had high levels of connectedness with their mothers were less likely to have MDD compared to those who were less connected. Prevalence of depression varied very little by level of connectedness with their fathers.
- Unmarried males' level of connectedness with their mothers or fathers had no association with prevalence of depression.

Major depressive disorder and connectedness with friends

• Adolescents who had high levels of connectedness with friends were more likely to experience MDD. This pattern was particularly notable among ever-married female adolescents.

Suggested citation: National Institute of Population Research and Training (NIPORT), International Centre for Diarrhoeal Disease Research, Bangladesh (icddr,b), and Data for Impact (D4I). 2021. Bangladesh Adolescent Health and Wellbeing Survey 2019-20: Summary Findings. Dhaka, Bangladesh, and Chapel Hill, NC, USA. NIPORT, icddr,b, and Data for Impact.

This publication was produced by NIPORT with the support of the United States Agency for International Development (USAID) under the terms of USAID's Research for Decision Makers (RDM) Activity cooperative agreement no. AID-388-A-17-00006 and of Data for Impact (D4I) associate award no. 7200AA18LA00008. Views expressed herein do not necessarily reflect the views of the U.S. Government or USAID. FS-20-514 D4I

