Adolescent Reproductive Health in Bangladesh
Big Problem—little progress

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Road Map

- “Lies, Damn Lies and Statistics”
- Adolescent Demographic Profile
- Adolescent Fertility
- Adolescent Health and Nutritional Status
- Adolescent STDs and HIV
- Conclusions
- What to Do?
- Barriers to improving ARH
“Lies, Damn Lies and Statistics”

- What do we know and how sure are we that we know it?
- Relatively few reliable, large sample data sets
- Trends difficult to establish
- Focus on broad ranges and categories
Demographic Profile

- Ages 15-19--app 15/138 million=11%
- Ages 19-24—app 13/138 million=09%
- Age at marriage—increasing?
- Education attainment increasing with decreasing gender disparity
- Employment: Male=36%; Fem=7%
Sec-higher educ for girls 15-19

Countries in S. Asia

Bdesh  India  Pakistan  Nepal

Percent completed

91-94  96-97  98-2001
Fertility

- Teen Age fertility rates are high and unchanged in last ten years: 36% are mothers
- Compares unfavorably to regional neighbors
- Age at marriage is the big lever as it influences age at first birth
Age Specific Fertility Rates: 15-19

Births/1000

# 87-94 96-97 98-2001

Bdesh  India  Pak  Nepal  Slanka
Health & Nutritional Status

- WOMEN MUCH WORSE OFF THAN MEN
- Low nutritional status—50% malnourished
- Pregnancy related Morbidity-Mortality
- STI—HIV—growing in IDUs
- Gender based violence—physical--mental
- INADEQUATE CONTRACEPTION—unmet need is 20%
STDs and HIV

- Point prevalence low
- Prevalence among high risk groups growing (IDUs)
- STDs reasonably high among CSWs
- Awareness of risks and prevention low but growing
- High risk behaviors--?
Conclusions

- High fertility & Low Health & Nut status
- High levels of gender violence
- Low levels of awareness, knowledge about pregnancy & STDs-HIV: risky behaviors, preventative measures, availability of treatment.
WHAT TO DO?

- Govt-NGO partnership
- Increase Age at Marriage & First Birth
  - Education & Employment for women
- More info & services about STDs-RH
  - Physical access points—comm. clinics
  - School curriculums and Mass Media
Barriers to improvement of ARH

- Increasing awareness of imp of social/cultural/legal context of ARH
- Physical—Resources
  - Inadequate # clinics, equipment, personnel
  - Quality of ARH services—privacy, confidentiality, professionalism,
- Psychological/Cultural
  - Cultural values about discussing sexuality