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Roles and Functions of Field Administration Related to Child Rights Issues in Bangladesh

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Acknowledgement

Bangladesh Public Administration Training Centre
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UNICEF Bangladesh

Published In

December 2018

© Bangladesh Public Administration Training Centre, Savar, Dhaka, Bangladesh
December 2018

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Funded By

UNICEF Bangladesh
(Under BPATC-UNICEF Bangladesh Partnership)

Price

Free of Cost

Graphics Design

Md. Ripon Hossain

Printed By

A to Z Printing Press
333, Nilkhet, Dhaka
Cell: +8801754753015
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Preface

This paper on 'Roles and Functions of Field Administration Related to Child Rights Issues in Bangladesh' is eventually a result of a scrupulous effort in the concerned area. The writers engaged themselves enormously in writing the paper. In true sense, assiduousness and condescending earnestness of the writers have made possible to bring out it brightly. Both primary and secondary data has been used for preparing the paper. Different books, booklets, reports, conventions, articles, legislations, and related documents have been used for preparing the paper as secondary sources of data. In collecting secondary data different websites have been visited. Content Analysis method has also been used in various areas. Primary data has been collected through Focus Group Discussion and Observation method.

Child Rights related international documents, national legislations, the situation of the children and roles and functions of the Field Administration have been consolidated so far as possible in this paper for creating a knowledge base for the Civil Service Officers and related others aiming to improve the child right situation in the country. Therefore, the objectives of the paper are to explore the roles and functions of the Field Administration, to find out the legal gaps and the challenges or barriers in ensuring child rights by the Field Administration. It is expected that the Civil Service Officers as well as concerned all will engage themselves deeply in implementing the child rights agenda of the Government luminously through accessing to this knowledge hub and thus contribute to realizing the UNCRC, child-related legislations, Vision 2021, Vision 2041 of the Government as well as the SDGs 2030 of the UN related to children. The paper may also persuade intensive research in this field to bring more findings and suitable recommendations for the children of the country.

In preparing the document, we have received the utmost support and guidance from the Rector of BPATC Dr. M Aslam Alam (Senior Secretary). Therefore, our heartfelt gratefulness goes to him. Concurrently, we are expressing our incalculable recognition to the Thematic Group Members and other Faculty Members of BPATC for their continuous support which facilitated us to step forward the paper.

Simultaneously, we feel proud in expressing luminescent appreciation to Mr. Edouard Beigbeder, Representative, UNICEF Bangladesh for his incandescent inclination in promoting child rights through institutional support and cooperation. We are inestimably owed to Mr. Mohd. Anwar Hossain, Programme Specialist and Focal Point of UNICEF Bangladesh for BPATC-UNICEF Bangladesh partnership and other officials of UNICEF Bangladesh and different organizations for their earnest cooperation and vital support.

Many books, booklets, brochures, reports, websites, articles, etc. have generated strength to develop the paper otherwise it could be difficult to get done the daunting task within a short time. We are placing unending thankfulness and acknowledgment to all the authors, editors and authorities of those documents. Our paramount gratitude and thanks to the FGD participants for giving us time and providing critical opinions.

-The Paper Writers

Acronyms & Abbreviations

ADCs	Additional Deputy Commissioners
ARI	Acute Respiratory Infection
BANBEIS	Bangladesh Bureau of Educational Information and Statistics
BBS	Bangladesh Bureau of Statistics
BPATC	Bangladesh Public Administration Training Centre
C4D	Communication for Development
CC	City Corporation
CC-DRR	Child-Centred Disaster Risk Reduction
CEOs	Chief Executive Officers
CHPs	Community Health Promoters
CHT	Chattogram Hill Tracts
CLTS	Community-Led Total Sanitation
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
DC	Deputy Commissioner
DCs	Deputy Commissioners
DEOs	District Education Officers
DGHS	Directorate General of Health Services
DPE	Directorate of Primary Education
DPEO	District Primary Education Officer
DPHE	Department of Public Health Engineering
DPs	Development Partners
DRR	Disaster Risk Reduction
ECCD	Early Child Care and Development
EPI	Expanded Programme on Immunization
FGD	Focus Group Discussion
GoB	Government of Bangladesh
GPI	Gender Parity Index
HIES	Household Income and Expenditure Survey
HNPSP	Health, Nutrition and Population Sector Programme
HPNSDP	Health, Population and Nutrition Sector Development Programme
ICT	Information and Communication Technology
ILO	International Labour Organization
IMED	Implementation, Monitoring and Evaluation Division
JMP	Joint Monitoring Programme
LGC	Local Governance for Children
LGD	Local Government Division
LGIs	Local Government Institutions
LGOs	Local Government Organizations
MDG	Millennium Development Goal
MDGs	Millennium Development Goals
MoE	Ministry of Education
MoHFW	Ministry of Health & Family Welfare

Acronyms & Abbreviations

MoPME	Ministry of Primary and Mass Education
MoWCA	Ministry of Women and Children Affairs
NAR	Net Attendance Ratio
NDD	Neuro-Developmental Disorder
NER	Net Enrolment Rate
NFE	Non Formal Education
NGOs	Non-Government Organizations
NIPORT	National Institute of Population Research and Training
NTRCA	Non-Government Teachers' Registration and Certification Authority
OHCHR	Office of the United Nations High Commissioner for Human Rights
PEC Exam	Primary Education Completion Examination
PEDP	Primary Education Development Programme
PPE	Pre Primary Education
SAARC	South Asian Association for Regional Cooperation
SAIEVAC	South Asia Initiative to End Violence Against Children
SCANUs	Special Care Newborn Units
SCE	Second Chance Education
SDG	Sustainable Development Goal
SDGs	Sustainable Development Goals
SHEWA-B	Sanitation, Hygiene Education and Water Supply in Bangladesh
SMCs	School Management Committees
TQM	Total Quality Management
UEO	Upazila Education Officer
UHCs	Upazila Health Complexes
UN	United Nations
UNCRC	United Nations Convention on the Rights of the Child
UNDAF	United Nations Development Assistance Fund
UNDESA	United Nations Department of Economic and Social Affairs
UNGA	United Nations General Assembly
UNICEF	United Nations Children's Fund (Original United Nations International Children's Emergency Fund)
UNIGME	United Nations Inter-agency Group for Child Mortality Estimation
UNOs	Upazila Nirbahi Officers
UP	Union Parishad
USA	United States of America
USEOs	Upazila Secondary Education Officers
VAC	Violence Against Children
WASA	Water Supply & Sewerage Authority
WASH	Water, Sanitation and Hygiene
WatSan	Water and Sanitation
WHO	World Health Organization

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1.1 Who are Children?

The definition of the child is generally determined by the age of a human being and by the laws of the concerned country. Different country defines a child in different age limits. UN in article 1 of CRC 1989 has defined a child as every human being below 18 years age unless any legislation of a country recognizes otherwise (OHCHR 2018). In Bangladesh definition of a child has been decorated in the Children Act, 2013. Section 4 of the Children Act, 2013 declares that a child means a person not exceeding 18 year's age to fulfill the purpose of the act. This age limit has been fixed aligning with the UN age perimeter. In other laws, a child may be defined in different age limits but the age limit described in the Children Act, 2013 will override other laws in serving its purpose. Here it should be pointed out that a child is an abridged adult possessing rights that cannot be abridged. A child is a human being for all realistic purposes. It observes, feels and imitates as well as reacts to what is happening surroundings.

1.2 Rights, Human Rights and Child Rights

1.2.1 Rights: Rights are those indispensable conditions of social life except which human beings generally cannot enjoy their best life. These conditions are crucial for individuals and society to grow healthily. These rights, in other words, claims are recognized by society and enforced by the states. These rights equal to everyone. When these rights are equally available in society, people become able to develop their personalities. Consequently, they can contribute the best services to the society. Rights are related to duties. If someone wants to enjoy rights, definitely he or she needs to perform certain duties or actions. Rights are considered as the fundamental pillars of civilization as well as the established culture. Example of rights: the right to life, right to property, right to freedom of expression, right to vote, right to equal treatment before the law, right to asylum, etc. In civilized societies, rights are highly exercised and cannot be used against society or the state. Rights are not absolute rather subject to certain limitations due to emerging issues like security, pandemic, public health, etc.

As per The Stanford Encyclopedia of Philosophy (2018), "Rights are entitlements (not) to perform certain actions, or (not) to be in certain states; or entitlements that others (not) perform certain actions or (not) be in certain states. Rights dominate modern understandings of what actions are permissible and which institutions are just. Rights structure the form of governments, the content of laws, and the shape of morality as many now see it. To accept a set of rights is to approve a distribution of freedom and authority, and so to endorse a certain view of what may, must, and must not be done."

1.2.2 Human Rights: Human rights are known as standards that recognize as well as protect the dignity of every human being. These rights administer how human beings live or behave in society as well as with other individuals, determine the relationship with them, and also determine the obligations of the state towards the citizens. Human rights-related laws force governments to uphold their rights and prevent them from violation. When individuals enjoy human rights, they have some duties and responsibilities. They should remember that they cannot do whatever they like which violet the rights of other people. Human rights may be regarded as the internationally agreed standards to protect human dignity (Ministry for Foreign Affairs Finland 2015). Basic principles of human rights are as such:

- Human rights are universal as well as inalienable. No one can take them away.
- Civil, political, economic, social, cultural whatever nature, all human rights have equal status.
- Human rights have inter-dependency as well as inter-relatedness. The realization of right may partly or fully depend on the implementation of another right.
- Human rights are equal to all human beings irrespective of race, caste, sex, colour, religion, place, etc.
- All people have entitlement to free, lively, and effective participation in, contribution to as well as the enjoyment of civil, political, economic, social, and cultural development as this helps to realize human rights.
- Accountability and rule of law are critical to realizing human rights. States as well as the other duty-bearers have to comply with the legal factors and standards mentioned in the human rights instruments. When they fail to do

so, aggrieved persons are entitled to go to competent courts or other arbitrators as per state law for proper redress.

In today's world, the human rights that people enjoy have been enshrined in the UN 'Universal Declaration of Human Rights, 1948'.

1.2.3 Child Rights: The Declaration of the Rights of the Child 1924 indicates, "the child, by reason of his physical and mental immaturity, needs special safeguards, care, and appropriate legal protection, before as well as after birth" (OHCHR 2018).

The rights that children enjoy under the UNCRC of 1989, are child rights. All children are born with fundamental freedoms as well as inherent rights. These are the same human rights as stated in the Universal Declaration of Human Rights of 1948 that adults enjoy but children also have the right to special consideration because of their vulnerability to exploitation and abuse. The rights of the children have been outlined in the UNCRC which describes how adults and governments should work together to make sure all children can fulfill their rights.

The UNCRC, popularly known as CRC, focuses truly on the whole child and reminds that a child is an individual and as a member of a family and community bears rights along with responsibilities suitable to age and steps of development. The sets out rights, therefore, must be realized to develop the full potential of the children.

1.3 Importance of Children's Rights

The importance of children's rights is enormous due to some reasons. Therefore, the rights of the children have been declared in a separate convention (UNICEF no date). The significance of children's rights may be pointed out as such:

- Children are individuals; they possess equal status as adults and members of the human family.
- Children begin their life completely depending on others for their care as well as guidance to grow up and make them independent. When adults in the family or family members or other primary caregivers fail to meet the needs of the children, the state needs to come forward as primary duty bearer for finding out alternatives to ensure the best interest of the children.
- When government policies, from education to public health, fail to address the issues of children or do not consider the issues of children, children become affected. The actions, or inactions, of government impact extensively on children comparing to other groups of the society.
- Views of the children remain unheard as they do not vote or take part in the political processes which may affect them at present or in the upcoming times. Therefore, need to hear the views of the children and consider them in the political processes.
- Many changes in society due to family structure transformation, globalization, changes in climate, huge migration, rapid shifting in employment patterns, etc. are putting gigantic impact on children. These impacts may turn into distressing especially in aggravating situations like armed conflict, pandemic, disasters, etc.
- The future well-being of any society is dependent on children; therefore, the healthy development of the children is very significant. But the children are more vulnerable than adults in any circumstances i.e. poverty, nutrition, insufficient health care, etc. The situation of children become more vulnerable in the case of diseases, disasters, etc. Consequently, the future of societies falls in threats.
- It is found from social researches that children's initial experiences notably sway their future development. The route of their development identifies seriously their contribution, or cost to society throughout the whole life.

It is true that during the last 30 years, the lives of the children have been changed a lot in various fields around the world, but millions are yet lagging as well as childhood is changing hastily. 262 million children as well as youth are away from school. On the other hand, 650 million girls, as well as women, have been married before the 18th birthday. It is apprehended that 1 out of 4 children will reside in places awfully limited water resources by the year 2040.

1.4 The Genesis of Child Rights

Children are an integral part of society and they are the future of human civilization. The future of the world, as well as the prospect of any country, depends on the environment the children are growing up. Children become good citizens when they enjoy different rights recognized by the society, state, and international community. Therefore,

children should have indubitable rights as an integral part of society. And the global community has acknowledged the rights of the children in the recent epoch. The Charter of the UN recognizes that inherent dignity along with equal and incontrovertible rights of all human family members is the basis of liberty, justice as well as peace of the universe.

The Geneva Declaration of the Rights of the Child, 1924, and the Declaration of the Rights of the Child accepted on 20th November 1959 in the General Assembly pledge the requirement to extend special care for children. The Declaration of the Rights of the Child, 1924 announces that the child requires particular safeguards, care and lawful protection before and following its birth. Besides, the welfare of the children has also been focused on the statutes and related instruments of international organizations and specialized agencies.

UN General Assembly passed the Universal Declaration of Human Rights in 1948 in which article 25 entitles special care, assistance as well as social protection for mothers and children (UN No Date).

UN General Assembly announces the 1979 year as the 'International Year of the Child' for marking the twentieth anniversary of the '1959 Declaration of the Rights of the Child' and UNICEF played a principal role in this regard.

The UN Standard Minimum Rules for the Administration of Juvenile Justice (The Beijing Rules) as well as the Declaration on the Protection of Women and Children in Emergency and Armed Conflict felt that children living in exceptionally intricate conditions necessitate special consideration. There are also different provisions such as promoting placement including adoption both countrywide and internationally in the Declaration on Social and Legal Principles involving security along with the wellbeing of the Children. Besides, each people bear traditions in addition to cultural values in the field of protection along with the harmonious improvement of the children. Bearing, recognizing and considering all these historic credentials, the UNCRC of 1989 came into force on 2 September 1990 as per the article 49.

1.5 International Documents and Organization for Genesis of Child Rights-At a Glance

Table 1: International Documents and Organization for Genesis of Child Rights

Sl	Name of Document/Organization	Comment
01	Geneva Declaration of the Rights of the Child, 1924	League of Nations (LoN) adopted it on 26 th September 1924
02	Charter of the United Nations, 1945	At the conclusion of the 'UN Conference on International Organization' in San Francisco on 26 th June 1945, the charter was signed and became effective on 24 th October 1945.
03	Establishment of the United Nations Children Fund-UNICEF	Established on 11 th December 1946.
04	Universal Declaration of Human Rights, 1948	UNGA proclaimed it on 10 th December 1948 in Paris (Resolution 217 A).
05	Declaration of the Rights of the Child, 1959	UNGA adopted it on 20 th November 1959.
06	International Covenant on Civil and Political Rights, 1966	Particularly article 23 and 24 are related.
07	International Covenant on Economic, Social and Cultural Rights, 1966	Particularly article 10 is related.
08	Declaration on the Protection of Women and Children in Emergency and Armed Conflict, 1974	UNGA declared it through the resolution 3318(XXIX) of 14 th December 1974.
09	International Year of the Child 1979	UNGA Declared the year
10	United Nations Standard Minimum Rules for the Administration of Juvenile Justice (The Beijing Rules), 1985	UNGA approved it through resolution 40/33 of 29 th November 1985.

Sl	Name of Document/Organization	Comment
11	Declaration on Social and Legal Principles relating to the Protection and Welfare of Children with special reference to Foster Placement and Adoption Nationally and Internationally, 1987	Adopted by the UNGA on 6 th February 1987 by the resolution A/RES/41/85.
12	United Nations Convention on the Rights of the Child, 1989	Opened for signature, ratification as well as accession through resolution 44/25 of 20 th November 1989 by UNGA and became effective on 2 nd September 1990.
13	The Optional Protocol to the Convention on the Rights of the Child on the involvement of Children in Armed Conflict (OPAC)	It aims to protect children from recruitment as well as use in hostilities. Adopted and opened for signature, ratification and accession by UNGA resolution A/RES/54/263 of 25 May 2000 and entered into force on 12 February 2002.
14	Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography	Adopted and opened for signature, ratification and accession by UNGA resolution A/RES/54/263 of 25 May 2000 and came into force on 18 January 2002.
15	The Optional Protocol to the Convention on the Rights of the Child on a Communications Procedure	The Protocol was adopted by the UNGA on 19 December 2011 and entered into force on 14 April 2014.

1.6 The CRC, 1989-Guiding Principles

The Convention on the Rights of the Child, 1989 is the most extensively ratified human rights agreement across the world. The human rights treaty is based on diverse legal systems along with cultural traditions that place the civil, cultural, socio-economic as well as political rights of the children. For doing all these things, the UN promulgates a globally approved set of standards and obligations which is non-negotiable. 196 countries have ratified the Convention, including every member country of the UN except the USA.

The CRC mentions a guideline for the international communities as well as individual governments to develop everlasting organizations or mechanisms for promoting harmonization, monitoring, along with the evaluation of actions of all sectors. The Convention has created a framework that has come to inspire an escalating child-centred focus in relevant areas including child well-being and human and social development.

The convention is the first lawfully obligatory international document to integrate all human rights. It specifies the basic human rights that are held by the children everywhere.

1.7 The CRC, 1989-Fundamental Pillars

The UN Committee on the Rights of the Child discussed the basic denotation of 'Child Rights' when they met at its first ceremonial sitting in September/October 1991. The committee decided that the CRC is about the human rights of the children. In draft guidelines, the Committee focused the general principles for writing and structuring government preliminary reports on the activities of the CRC. The general principles help to interpret the convention in particular and thus guide its execution. Formulation of the following general principles comes a lot from 2, 3, 6 and 12 No. Articles of the CRC itself.

- **Non-Discrimination:** Article 2 of the CRC expresses the compulsion of equal opportunity for all children as it focuses on respect as well as execution of the rights of the children as stated in the CRC by the states to every child in their own territory without any types of discrimination based on race, gender, faith or religion, disability, holding a particular opinion, etc. of the child or the child's parents or lawful guardians.

- **Best Interests of the Child:** Children are in vulnerable situations particularly when they are much young and at that time they require special support or care to make them able to enjoy the rights they have entirely. The provision for essential protection and scope of enjoying equal rights has been stated in article 3. Article 3:1 of the CRC describes that the best interest of the child must be considered primarily in taking any activities by any social welfare institutions whether public or private, courts of law, administrative or lawmaking bodies.
- **The Right to Life, Survival, and Development:** The general principle right to life continued existence and development is critical for a child, and without these rights, children are unable to enjoy their economic as well as social rights.
- **The Views of the Child:** Views of a child must be respected which can help to ensure the topmost interest of a child. Article 12:1 mentions "States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child" (OHCHR 2018). Article 12:2 provides the guideline that to express the views freely of the child; he ought to be given the scope or opportunity to be heard in any sort of proceedings whether judicial or administrative that affects him or her. The child may be heard straightly or through a representative or suitable body in such a way that is constant with the existing procedures of the state legislations.

The 4 general principles help to form a universal attitude for the children along with their rights. The ethical and ideological dimensions, evolve from the 4 principles of the convention are very critical to be realized in any country.

1.8 Rights of the Children in the CRC

The CRC contains a preamble and 54 articles in 3 parts and sets out the civil, cultural, economic, political, and social rights of children (OHCHR 2018). The rights of the children have been focused in article 1-41 in part one whereas article 42-45 of part two describe the procedure of execution of the convention and Article 46-54 in part three pronounce about the amendment, revision and preservation of the convention. Amongst the 41 articles of part one, 37 are, actually, related to child rights. Herewith the articles related to child protection, education, child health, and WASH have been discussed.

1.8.1 Child Protection Related Rights in the CRC

Article 1, 2, 3, 7, 19, 23, 30, 32, 34, 35, 37, and 41 have a direct or straight impact on child protection and other components of protection. But definitely, other articles too have effects on child protection. The articles related to child protection rights are being discussed below:

Article 1: Article 1 of the CRC has defined a child as each human being below 18 years of age unless the legislations of a country recognize otherwise. The definition of the child guides countries to ascertain the age of a child depending on the various grounds of their own. For ensuring protection, the definition of a child may be considered as a prerequisite.

Article 2: All children ought to enjoy the rights they have and that no child should be subjected to any sort of discrimination. In article 2:1, the CRC expresses the compulsion of equal opportunity for all children as it mentions on respect as well as execution of the rights of the children as stated in the CRC by the States to every child in their own territory without any types of discrimination. Article 2:2 describes that countries must adopt entirely proper steps for ensuring the protection of the children against all sorts of discriminations and penalties based on the child's parents, lawful guardians, or family members' status, activities, uttered opinions, or beliefs.

Article 3: Children are in vulnerable situations particularly when they are much young and at that time they require special support or care to make them able to enjoy the rights fully they have. The provision for essential protection and scope of enjoying equal rights has been stated in article 3 of the convention. Article 3:1 pronounces that the best interest of the child must be considered primarily in taking any activities by any social welfare institutions be it public or be it private, courts of law, administrative or lawmaking bodies. This article reminds that the highest interest of a child, of course, be ensured at times of taking any decisions affecting him or her.

Article 3:2 pronounces that countries will commence and confirm such protection, care, legislative and administrative steps for a child indispensable for welfare bearing in mind the rights along with duties of his or her parents or lawful guardians or other persons lawfully responsible for him or her while article 3:3 directs that the countries shall confirm

the standards of the institutions, services as well as facilities recognized by the suitable authorities, especially in safety and health matters of the children. The number including the appropriateness of the employees and proper supervision of the institutions, services as well as facilities need to be obeyed rules.

Article 7: As per this article, after birth the child must be registered without any delay and enjoy the right after birth to a name, obtain a nationality, to know as well as be looked after by the parents. Execution of these rights shall be confirmed by the signatory countries in line with the national legislation along with obligations evolved from pertinent international mechanisms in the area, particularly when the child otherwise becomes stateless.

Article 19: Protection of the child against all types of oppression has been guaranteed by article 19. Article 19:1 proclaims that protection of the child from all sorts of corporal and mental violence, damage, abuse, sexual abuse, negligence or neglectful treatment, ill-treatment and exploitation when they remain in the care of his or her parent(s) or legitimate guardian(s) or other individuals responsible for the carefulness of him or her. As per article 19:2, the protective actions should be proper including setting up social programmes for providing required support of the child as well as for those having the care of the child and the states shall also adopt other types of prevention.

Article 23: Article 23 proclaims that children having disability possesses the right to distinctive care, education including training for assisting himself or herself in enjoying a complete decent life with pride as well as to attain the highest level of self-reliance and active participation for social integration which all shall be ensured by the states as per available resources. The states shall also provide necessary assistance to the child or his or her guardians as per application depending on existing resources without charges whenever possible considering the financial assets of the parents or guardians. The signatory countries shall promote international cooperation for the betterment of the disabled children and also improve the states' capabilities, skills and broaden their experience in the areas of information, health care, rehabilitation, education, vocational services, etc.

Article 30: Article 30 declares the protection of minorities in various fields. The article depicts that in the countries where minority people in terms of ethnicity, religion or language or people of aboriginal derivation live, a child belongs to any of the minorities or an indigenous child must not be denied or deprived of the rights in the society with the different members he or she belongs, to relish personal culture, confess as well as run-through personal religion and to exercise personal language.

Article 32: Countries signed the CRC agreed that the child holds the right to be protected from economic exploitation as well hazardous work that interferes with education or any work injurious to healthiness, harmful to bodily, psychological, spiritual, ethical, or societal development. The countries shall accept legislative, administrative, and social including educational actions to realize this article. To fulfill this article and other international documents, they shall fix the lowest age or lowest age for access to work; proper rules for working hours and conditions of employment; necessary punishments, or supplementary sanctions for ensuring the successful execution of this article.

Article 34: According to this article, the countries have consented to give protection to all the children against all sexual exploitation as well as abuse. To fulfill this requirement, the states shall adopt all suitable national, bilateral as well as multilateral steps for prevention of encouragement or compulsion of a child to employ in illegal activity related to sex; abusive utilization in prostitution or other illegitimate sexual activities; and abusive practice of them in pornographic shows as well as in materials.

Article 35: In article 35, the states have agreed to accept all proper national bilateral as well as multilateral actions for preventing abduction, sale, or traffic of children for whichever reason or structure.

Article 37: In this article, children have been given the protection against torture or other brutal, inhuman, shameful treatment, or sentence or death penalty or life imprisonment without the likelihood of discharge. This article also describes that a child cannot be deprived of his or her freedom illegally or arbitrarily by anyone. All shall follow law during arrest, custody or detention or sentence a child and these can be applied only as of the final or last remedy as well as for the shortest time.

The article also declares that a child must be dealt with humankind as well as respect when he or she is deprived of liberty as the child possesses the intrinsic dignity of a humanoid and treated in such a way that meets the requirements

of the age. Especially when a child is rundown of liberty, he or she shall be detached from adults unless separation is acceptable in the highest interest of the youngster not to do accordingly and the child must enjoy the right of continuing contact with the family by means of correspondence including visits and save in special situations. It is significant to note that as per this article, any child lost liberty holds the right to quick entree to legitimate and other suitable support, and to contest the legitimacy of his or her deprivation in a court or separate appropriate, independent and neutral authority, and get a speedy decision or judgment on any of the matters.

Article 41: Article 41 ensures respect for higher standards for the children. The article pronounces that if the standards of national or international laws related to the children's rights are upper than the rights stated in the CRC, then the upper standards shall be always applicable. Thus the rights or topmost interest of the children have been protected excellently by this article.

1.8.2 Education Related Rights of the Children in the CRC

According to the CRC, a child should be provided a friendly and happy atmosphere, love and understanding environment so that the child can develop and grow up own personality according to the requirement of society. The CRC emphasizes the dignity of a child, his or her freedom of growing up without any obstacle and in a serene, equal and harmonized environment so that he or she will prepare himself or herself as an indispensable part of the larger society.

As per the CRC, a child should be entrusted with the safeguard as well as special care for developing his or her mental, social as well as physical maturity before and after birth take place. For the development of the child, education is a key tool. Therefore, the rights of education of the children have been focused in the CRC. 2 articles, so far, have been found in the CRC related to the education rights of the children. The articles are 28 and 29.

Article 28: The signatory countries have recognized education as the right of every child in this article. To realize the education right of the children progressively, the State Parties shall adopt necessary measures on the following matters based on equal opportunity for all-

- to make primary education compulsory, free, as well as available for all;
- to promote the development of various types of secondary education, for instance, general and vocational education. This education will be available as well as reachable for all children. The States will adopt proper steps to introduce this education as free and if necessary, shall provide financial support;
- to confirm higher education reachable to everyone based on capacity and highest means;
- to make information along with guidance on educational as well as vocational matters available which will also be accessible to every child;
- to adopt actions in inspiring children to be present at schools regularly as well as decreasing the rate of dropout.

As per sub-clause 2 of the article, the Member Countries must adopt all proper steps to ensure that school discipline is conducted in a way that is aligned with the dignity of the child as human beings and in line with the Convention.

Sub-clause 3 of the article calls for promoting and supporting international cooperation to issues of education especially to contribute to eliminating ignorance as well as literacy across the globe and assist in access to scientific knowledge, technical knowledge as well as modern teaching methods. For all these, special actions must be taken for developing countries.

Article 29: In this article, the States Parties decided that education of the child must be directed with a view to-

- developing the personality, talents as well as mental and physical capability of the child to their highest level;
- developing respect toward the human rights, fundamental freedoms and principles mentioned in the UN Charter;
- developing respect toward the parents, own cultural identity, language, and values as well as country's national values in which the child is living, the state he or she may originate from, and the civilizations beyond his or her own;
- preparing the child to create a responsible life in a liberated society carrying the spirit of understanding.

tranquility, tolerance, equality of sexes and friendship amongst all persons, groups based on ethnicity, nationality and religion and aboriginal peoples;

- developing respect toward the natural environment.

Sub-clause 2 of the article specifies that there shall not be any interference toward the liberty of individuals as well as organizations in setting up and directing educational institutions; and education shall be conducted according to the above principles and to the necessities and maintaining minimum standards determined by the state.

1.8.3 Health-Related Rights of the Children in the CRC

There are certain articles in the CRC which have specified the health rights of the children for their development and special care. The articles related to the health of the children in the CRC are 19, 23, 24, and 25.

Article 19: As per this article, children have the right to be free from negligence or neglectful treatment, ill-treatment and exploitation. The States shall take protective actions as well as set up of social programmes for providing necessary support of the child and for those care the child. The States shall also adopt other types of prevention and in the case of instances of maltreatment of the child mentioned heretofore, proper identification, reporting, referral, investigation, treatment, and follow-up for judicial proceedings.

Article 23: This article announces that a child with a disability has the right to distinguishing care, education and training for supporting himself or herself in enjoying a comprehensive decent life with pride. The education, training, health services, and recreational conveniences must design in such a way that the child having a disability get real access and attains these completely for social integration, personal, cultural, as well as spiritual development. The signatory countries shall promote international cooperation for the improvement of children with disabilities and also improve the capabilities and skills of the states, and broaden their experience in the areas of information, health care, rehabilitation, education, vocational services, etc.

Article 24: Every child has the right to enjoy the uppermost attainable health standard and facilities for the treatment of his or her illness as well as rehabilitation of health and the States must endeavour to confirm that no child is dispossessed of in accessing such health care services as per sub-clause 24:1. Sub-clause 24:2 promulgates that the States must pursue complete execution of this right, especially shall adopt proper actions-

- to reduce infant as well as child mortality;
- to make sure the proviso of required medical assistance as well as health care for all children and in doing so, development of primary health care will be emphasized by the States Parties;
- to fight against disease as well as malnutrition together with a structure of primary health care by the use of readily existing technology along with the provision of sufficient nutritious foods and clean drinking-water considering the dangers including risks of environmental effluence;
- to confirm suitable health care for the mothers during pre and post-natal times;
- to make certain that all people of society, especially parents and children are well-versed about their access to education and are receiving support for using the fundamental knowledge of child health, nutrition, the benefits of breastfeeding, hygiene as well as environmental sanitation along with preventing accidents;
- to develop a health care system that will be preventive, and also develop guidance for parents, education of family planning, and services.

Sub-clause 3 of the article illuminates that all sorts of effective as well as proper actions must be taken by the signatory countries to eliminate the traditional practices harmful for children's health while sub-clause 4 calls for the promotion and inspire international cooperation to achieve gradually the complete realization of the right which has been recognized in this article. Sub-clause 4 also stresses on the requirements of developing states in this matter.

Article 25: This article emphasizes the right of a child to receive a periodic review of the treatment delivered to him or her placed by the appropriate authorities for care, protection or treatment of his or her physical or mental health.

1.8.4 WASH Related Rights of the Children in the CRC

Article 6, 24, and 27 have a direct or straight link towards WASH services for the children. The articles are being discussed below:

Article 6: Right to life, survival and development is very significant for a child and without these rights, children are unable to enjoy their economic and social rights. Article 6:1 speaks that right to life is intrinsic for every child while Article 6:2 declares that the signatory countries essentially confirm the survival and the development of every child to the highest possible. This principle directs that every child possesses the right to progress whole or full potentials in terms of physical, spiritual, ethical, mental, psychological and social fields.

Article 24: Every child has the right to the highest standard of attainable health as well as medical care. Countries must put particular stress in reducing infant as well as child mortality, and in executing the proviso of primary as well as preventive health care along with education on public health. They shall inspire international cooperation to implement these for children and endeavor to observe that no deprivation occurs in accessing effectual health services.

Article 27: As per this article, each child possesses the right of a standard living sufficient for his or her development in the field of physical, mental, spiritual, moral as well as social areas.

1.9 The CRC and Bangladesh

The CRC recognizes the family as the basic group and natural atmosphere for the human being especially for the growth and welfare of the children and hence, every child should be grown up in a family setting where happiness, adore and understanding prevail. It also opines for international cooperation for better living situations of the children in all countries, especially in the developing states.

Bangladesh has ratified the CRC in August 1990 and it is one of the 22 countries that ratified the CRC first. Bangladesh has shown its firm promise to the children's rights through signing the CRC. But the country has a reservation about article 14(1) and 21 that means Bangladesh ratified the convention with the objection against the 14(1) and 21 articles. Article 14(1) announces that the signatory countries shall show respect to the right of freedom of thought, conscience including the religion of a child. Bangladesh believes in these rights of a child but the state thinks that the children are not able to understand the implicit complexity of the rights by their maturity in the existing social context of the country. Hence, it is not possible to make the right decisions by themselves. For these rights, children might feel pressure or influenced by others which may affect his normal development. For these reasons, Bangladesh gave objection against article 14(1). And analyzing the article 21, it is found that the article talks about the adoption of a child. As adoption is not allowed in Islam religion and Bangladesh is a country of Muslim majority, therefore the country gave objection to this article. Besides, the state thinks that inter-country adoption is not good in terms of religion and ethics. Incidences of child trafficking or sale may also occur in sometimes if adoption prevails. Therefore, people are not in favour of adoption (Islam 2006). Anyway, by ratifying the convention, Bangladesh is morally and legally responsible for compliance with the CRC.

The present Government has adopted a lot of activities for implementing the CRC and also focuses many issues in its Election Manifesto 2018. The Child Welfare objectives and Plans mentioned in the Election Manifesto are as such (Bangladesh Awami League 2018) -

- The different actions for strong social safety and health, education, vocation as well as diverse activities adopted for ending child labour will be strengthened and extended.
- Children will not be used or involved in political activities, forcibly or under enticement. Eliminating child torture will be confirmed as well as the disparity towards the female child will be removed.
- Rehabilitation of street children and arrangement of safe accommodation, establishing shishu Sadan for poor and rootless children as well as vocational training together with compulsory primary education will be improved and expanded.

2.1 Administrative Structure of Bangladesh

The Administration of Bangladesh can be viewed as a two-layer administrative system. Firstly the Secretariat or the Central Administration; and secondly the Field the Administration. Secretariat means the offices of the Ministries and Divisions together (Ministry of Public Administration 2014). The functions of the Secretariat are basically formulating or determining government policies, their implementation and monitoring as well as helping the ministers in performing their duties and responsibilities in the parliament, human resources management at the highest level, etc. Thus the Secretariat has become the core-centre of the administrative system and all governmental affairs.

Execution of the policies and plans as adopted by the Ministries/Divisions is generally accomplished by a number of implementing organizations. These organizations are normally termed as Attached Departments and Subordinate Offices. The department that has a direct working relationship with a Ministry/Division and declared as such by the Government is designated as the Attached Department. An office of the Government that is not declared as the Attached Department and generally does not work directly with any Ministry/Division is termed as Subordinate Office. It normally works as a field office accountable for the full implementation of government policies under the direction of the Attached Department. Yet some subordinate offices are also kept directly under the related Ministries/Divisions.

To carry out definite special public functions or execute specific development programmes, other types of organizations i.e., autonomous and semi-autonomous bodies and public corporations have also been created.

2.2 Field Administration

Field Administration can be further divided into three administrative units, viz the Divisional Administration, the District Administration, and the Upazila Administration. Field Administration for its duties and responsibilities is accountable to the Cabinet Division.

2.2.1 Divisional Administration: The whole country is divided into eight Administrative Divisions: Dhaka, Chattogram, Rajshahi Khulna, Barishal, Sylhet, Rangpur, and Mymensingh for the ease of administration and better delivery of public services. Each Division consists of a number of districts.

The highest tier of local or Field Administration is the division. The Divisional Commissioner is the Chief Administrator of the Divisional Administration and is assisted by Additional Divisional Commissioners and other officials in his/her office. The following are the general responsibilities of the Divisional Commissioners (Cabinet Division 2018a): 1. Revenue Related, 2. Executive Magistracy Related, 3. Law and Order, 4. Education, 5. Food and Disaster Management, 6. Tourism, 7. Political and Confidential, 8. Preventing Corruption and Assisting Anti-Corruption Commission, 9. Mass Mobilization, 10. Election, 11. Statistics, 12. Pension, 13. Protocol, 14. Establishment Activities of the Divisional Commissioner, 15. Training, 16. Public Complaints and Enquiries, 17. LGIs Related Functions, 18. Youth and Sports Development, 19. The commitment of Honorable Prime Minister, 20. Monitoring the Activities of Coal, Hard Rock and Other Power Related Activities, 21. NGO Affairs, 22. Implementation of Vision 2021, SDGs 2030, etc. 23. Citizen Charter, 24. ICT and E-Governance, 25. Right to Information, 26. Activities of the Divisional Selection Board as Chairperson.

Divisional Commissioner plays an overseeing role over all the divisional offices of the Attached Departments and other agencies located in the Division while the divisional office of each Attached Department and other agencies is directly controlled by its head office. But the activities of the District Administration in the Division are controlled, supervised and monitored by the respective Divisional Commissioner.

2.2.2 District Administration: The oldest administrative unit in Bangladesh is perhaps the district. Its inception as a unit of administration is virtually linked with the land system of Bengal. Each district is now sub-divided into some upazilas. The country has currently 64 districts under 8 divisions. Chief Administrator of the District Administration is the DC who is assisted by ADCs and other officials in his/her office. DCs are playing an enormous role at the district level. They are representing the Government at the district level. They are also posted as District Magistrate and are also regarded as Collectors. General duties and responsibilities of the DCs are diverse. A notification of the

Cabinet Division mentions the following Charter of Duties of the DCs (Cabinet Division 2018b): 1. Revenue Administration and Management, 2. District Magistracy and Executive Magistracy, 3. Maintaining Public Order and Security, 4. Law and Order, 5. Jails, 6. Tourism, 7. Control of Fire Arms, 8. Secret Matters of the State, 9. Confidential Report, 10. Treasury and Stamp, 11. Preventing Corruption, 12. Mass Mobilization, 13. Licence, 14. Liberation War Affairs, 15. Land Acquisition and Requisition, 16. Press and Publications, 17. Election Matters, 18. Border, 19. Statistics, 20. Disaster Management, 21. Food, 22. Ansar and VDP, 23. Civil Defence, 24. Labour Affairs, 25. Social Safety Net, 26. Family Planning, 27. Pension and Gratuity, 28. Protocol, 29. Transportation and Communication, 30. District Transport pool, 31. Education, 32. Public Amusement, 33. Ethnic People Matters, 34. Inter-Department Coordination, 35. Establishment Activities of DC, 36. Human Resource Development, 37. Complaints Hearing and Enquiries, 38. Local Government Affairs, 39. Youth & Sports, 40. Woman & Children Affairs, 41. Agriculture, 42. Monitoring Market Price & Protection of Consumer Rights, 43. Fisheries & Livestock, 44. Waqf, Debotter and Trusts Properties, 45. Religious Affairs, 46. Passport Affairs, 47. The commitment of Honorable Prime Minister, 48. Development of Local Industries, 49. NGO Affairs, 50. Shilpakala, 51. Coordination of Development Activities, 52. Primary Healthcare and Public Health, 53. Government Accommodation of the District, 54. Observance of Various National & International Days, 55. Achieving the Development Targets, 56. Citizen Charter, 57. Information and Communication Technology, 58. Right to Information, 59. Climate Change, 60. Plantation /Forestation, 61. Expatriates Welfare, 62. Other Activities.

DCs have a very significant role in ensuring child rights in his/her jurisdiction especially in the areas of child protection, education, health, and WASH as per the mentioned Charter of Duties. Superintendent of Police and other officials of various departments also play a vital role in protecting child rights at the district level.

2.2.3 Upazila Administration: The last administrative tier of the Field Administration is the Upazila administration. Currently, the country has 492 upazilas under 64 districts of 8 divisions. In the Upazila Administration, UNOs are playing a very critical role as Representatives of the Government at the Upazila level. They are at the same time contain the entity of Upazila Executive Magistrate and General Certificate Officer. UNOs are also performing duties as 'Principal Executive Officer' in the 'Upazila Parishad' which is a LGI/LGO.

The major functions executed by UNOs are as such: 1. Revenue Functions, 2. Executive Magisterial Functions, 3. Maintenance of Law and Order, 4. Working as Principal Executive Officer in the Upazila Parishad, 5. Disposal of Certificate Cases, Supplying Certified Copy of the Orders of Certificate Court, and Requisition of Certificate Cases, 6. Lease of Hat-Bazars and other Jalmahals, 7. Education and Conduct of Public Examinations, 8. Remuneration and Salary of Union Parishad Chairmen, Members, Village Polices, and other Functions Relating to LGIs, 9. Departmental Affairs (Financial and Administrative), 10. Inter-Agency Matters, 11. Election Matters, 12. Relief and Rehabilitation, 13. Waqf, Debotter and Trusts Properties, 14. Census/ Statistics Related Matters, 15. Pension/Family Pension, 16. Social Safety Net Programmes, 17. Allocation of Homes of Ashrayan and, Allocation of Khas Property, 18. Prevention of Child Marriage, Dowry and Child and Women Repression, 19. Issuing Certificate for Educational Institutions, Nationality and Income Tax, 20. Issuing Certificate for the Ethnic People, 21. Complaints Hearing and Enquiries, 22. Forwarding Applications to Higher Authorities, 23. ICT Related Activities including Union Digital Centres, 24. Protocol, 25. Public Amusement, 26. NGO Affairs, 27. Observance of Various National & International Days, 28. Preventing Corruption, 29. Inspection, 30. Mass Mobilization, 31. Other Duties as Prescribed by the Government and Deputy Commissioners, etc.

At the upazila level, a large number of offices of the Ministry, Attached Departments and other agencies are providing a variety of services to the citizens. Among the offices exist in the upazila, 17 have been transferred to Upazila Parishad keeping some retained subjects in the hand of the offices or their upper authorities.

However, UNOs have a vital role in ensuring the rights of the children particularly in the case of child protection, education, health, nutrition, and WASH at the upazila level. Their separate entities have given them the scope to perform multiple roles. Simultaneously, upazila level officials like Assistant Commissioner (Land) also Executive Magistrate, Officer-in-Charge of the Police Station, Upazila Health and Family Planning Officer, Upazila Ansar and VDP Officer, USEO, UEO, Assistant Engineer of Public Health, and Upazila Social Services Officer have a wide scope to play crucial roles in preventing the rights of the children in many areas.

3.1 Child Protection and Child Protection Systems

Child Protection denotes the protection of children from any sort of violence, oppression, abuse, and negligence. Protection of the children at home and out of the home has been provided in article 19 of the CRC. Article 19(1) pronounces that countries must adopt all types of proper lawmaking, administrative as well as social and educational steps to defend the child from all sorts of corporal violence, mental violence, wound, abuse, neglect, careless treatment, ill-treatment, exploitation, and sexual abuse while they remain in the care of parents(s) or guardian(s) or any other individual (OHCHR 2018).

Child Protection Systems denote usually a set of services run by the government accepted for protecting children including under age young people and to inspire stability of the family. As per UNICEF a 'child protection system' means the set of laws, policies, regulations, and services required for every social sector-predominantly social welfare, education, health, security, and justice - to support preventive along with responsive measures to risks related to protection. These Child Protection Systems are an integral element of social protection systems and go ahead of it. At the level of prevention, their purpose is to support and strengthen families to decrease social exclusion in addition to minimize risks of separation, violence, or oppression. Responsibilities of that usually go to government organizations, local authorities like LGOs/LGIs, non-government service givers including communal groups having harmonization among sectors and levels as well as regular referral systems (UN Economic and Social Council 2008).

Article 19 (2) of the CRC describes that protective measures include suitable effective processes aim to set up social programmes for delivering required support for children and those having the responsibility of the children and other types of prevention including detection, reporting, referral, inquiry, treatment as well as follow-up of incidences of child mistreatment along with suitable judicial involvement.

Therefore, governments should make sure proper care for the children and protection against any kind of violence or abuse or torture by any parents, guardians, or any other responsible person and ensure their health, education, equality, etc. Any type of discipline involving violence for children is undesirable and unacceptable.

3.2 Child Protection and Child Rights Provisions in Bangladesh

In line with different international documents, Bangladesh has already formulated many legislations for ensuring child rights and their protection. Leading legislations have been discussed herewith.

3.2.1 Child Protection and the Constitution of Bangladesh: The Constitution of the People's Republic of Bangladesh contains certain guidelines as well as provisions regarding the rights of all including the children. The directive principles have been mentioned in Part II that is in the 'Fundamental Principles of State Policy' of the constitution (GoB 2010). The articles which are pertinent to child protection of Part II are article 15, 17, 18, 19, and 25.

Article 15: This article provides the guidelines of fundamental needs of life, for instance, food, clothing, shelter, education, and medical care for all citizens as per sub-clause (a). As per sub-clause (d), an orphan along with others holds the right to social security of the government.

Article 17: Free as well as mandatory education for all children under a unified and people-centred universal education system up to a level as determined by law has been ensured in sub-clause (a). The education will be based on the needs of society as per sub-clause (b).

Article 18: In this article raising nutrition level and improving public health have been identified as a prime duty of the country.

Article 19: Article 19 directs the state to take steps to assure equality of opportunity to all people and children have the same opportunities.

Article 25: As per the article 25(1), the state shall show respect to international law as well as principles enunciated in the UN Charter. Under this provision, Bangladesh is committed to complying with all the ratified and signed international documents of the UN including the CRC.

The principles mentioned above are directive to the government. These are not judicially enforceable. The state will formulate policy and conduct activity in line with these directives. Concurrently, in Part III of the constitution, certain rights of the children for protection against various discriminations have been stated. The rights mentioned in Part III that is in the 'Fundamental Rights' Part are guaranteed by the court (GoB 2010). The articles especially laid down the protection of all including the children are 27, 28, 31, and 32 articles.

Article 27: Before the law, all people are equivalent and all have similar protections in the eyes of law. Thus a child has the same protection as adults.

Article 28: No discrimination can be made against anyone on whatever the grounds i.e. religion, race, caste, gender, or birth place as per this article or barred to admit to any educational institution. Sub-clause 4 of the article provides scope to make special provisions for children as well as women and citizens belong to a backward section.

Article 31: As per this article, all countrymen hold the right to protection of the law which has been made inalienable. Like adults, children have the same right to enjoy.

Article 32 : Protection or security to life as well as individual liberty has been guaranteed for all persons in this article. Children also have a similar right as per this article.

Besides the above-discussed rights, children have the right to enjoy all other fundamental rights mentioned in Part III of the constitution.

3.2.2 Child Protection, Birth Registration and the Birth and Death Registration Act, 2004

Birth Registration gives lawful recognition to the child, which is a permanent record of existence. It is also indispensable for getting health services, enrolling in the informal and formal education system, recognizing inheritance, preventing child oppression, abuse, and receiving any necessary legal papers to access their rights, and this way a child is protected. As per article 7 of the CRC, after birth the child must be registered without any delay and enjoy the right after birth to a name, obtain a nationality, to know as well as be looked after by the parents. These are the rights that children enjoy first. Birth registration provides fundamental statistics to government, and other agencies for the demographic base, national planning, local planning, preparing the budget, and monitoring the systems that enable children as well as adolescents to meet their rights. Birth registration means including a child's full name, date of birth and place of birth, father and mother's name, permanent and present address, and gender information manually or through online.

To ensure the rights of the children and obtain certain purposes, the Government of Bangladesh has enacted the Birth and Death Registration Act, 2004 abolishing the Act of 1873 and 1886. The Act entered into force in July 2006 and amended in 2013. This Act may be regarded as a key initiative for ensuring child rights in Bangladesh. Following the Act, Bangladesh Government has also approved corresponding Birth and Death Registration Rules in 2006 (Office of the Registrar General of Birth and Death Registration 2014).

Parents or guardians or prescribed person of the child is bound to send birth-related information to the Registrar within 45 days of the birth of the child as per section 8 of the Birth and Death Registration Act, 2004. The role of registrar and procedure of registration have been illustrated elaborately in section 4-8 of this Act. Mayor of City Corporation and Municipality or authorized persons or Commissioner, Chairman of Union Parishad or any officer or person empowered by the Government, Cantonment Board Chairman or authorized person by him or her in the cantonment areas, and in abroad, Ambassador of Foreign Mission or authorized person by him or her are treated as Registrar under section 4 of the Act. If any person sends birth and death information to the prescribed person by anyone mentioned in section 9, the prescribed person will adopt required measures for registration or deliver needed help to the informant to registration.

The name of the child needs to be fixed before birth registration. Provided that, the birth of a child may be registered without a name, but the parent or guardian of such a child shall provide the name of the child to the registrar within 45 days of registration as per section 10. As per section 15 of the Act, if any fault is written in the register book or the birth certificate, then may be applied for correction with fee and prescribed procedures. If the Registrar receives the application within 90 days after issuing a certificate, then the Registrar will dispose of the application within 30 working days which means the Registrar will correct the register book or issue a new birth certificate with the correction or reject the application.

Birth registration is free within 45 days of birth as per section 13 of the Act. After maintaining all the procedures including fees and applications, the registrar will provide birth registration to the person apply for this under section 11. If birth is not registered within the stipulated time, then it can be done later on but with late fee and procedure under section 13. Under section 18 of the Act, use of the birth certificate is compulsory to get certain documents such as Passport, Registration of Marriage, Admission in School, Recruitment in Government, Non-government and Autonomous Agencies, Issue of Driving License, Enrolment in Voter List, Land Registration, National Identification, and Life Insurance Policy.

3.2.3 Child Protection and the National Child Policy, 2011

The National Child Policy, 2011 has been made for updating and modernizing the National Child Policy, 1994 based on the recommendation of the UNCRC Committee and the outcome of different initiatives over time. The policy applies to all children in Bangladesh. Under the National Child Policy, 2011, those who are under 18 years old known as child and age 14-18 years are under the purview of Adolescents.

One of the important aspects of the policy is that it includes the fundamental principles which emphasize on ensuring equal child rights based on the Constitution of Bangladesh and UNCRC, alleviating poverty of children, the abolition of discrimination including child abuse, and ensuring the opinion and participation of children in any activities concerned to them for their best interest, etc. The overall objectives of the Child Policy are to provide basic human rights as well as standard rights to all children and special care for female children. It is believed that through this policy all forms of discrimination and abuse will be eliminated. This policy emphasizes special actions and programmes for disadvantaged, disable, and autistic children. Another important aim of this policy is that it empowers children to express their views related to their matter openly and creating a congenial family environment. The policy also stresses on the encouragement of NGO activities and their coordination related to children matters.

For implementing child rights, several programmes and actions have been identified under this policy such as confirming safe birth, full growth, eradicating child poverty, appropriate health of children, ensure 100 percent schooling of children both in pre-primary and primary level and minimizing dropout rate, proper recreation, sports and cultural programmes for the children. The Policy also highlights special programme for disable and autistic children for bringing them to mainstream society. The policy directs for birth registration mandatory for every child. Special care has been emphasized in the policy for development of the adolescent children in particular girl children. It ensures Day Care Centre for the children of working women and six months leave for the women during pregnancy period. Child labor is prohibited in Bangladesh for ensuring the education and development of children under this policy.

Child protection is a crucial area of the policy as it has been mentioned specifically in article 6.7 of the policy. As per the policy, the state shall adopt proper measures against all sorts of violence, mental, physical, and sexual torture, exploitation, and abuse against the children. The state shall also take steps to ensure judicial proceedings of the children violating laws as per the children's Act. The policy also mentions that children shall not be used in politics or involved forcibly. During and after disasters both manmade and natural, special measures have to be taken for the protection of the children as per article 6.12 (MoWCA 2018a).

Under this policy, child rights are treated as prioritized ones in the national development programme. The National Child Policy, 2011 is a comprehensive policy for ensuring child protection, child development, and equal rights for all children of the country. It is being played a catalyst role in eliminating all forms of discrimination and child abuse.

3.2.4 Child Protection and the Children Act, 2013

To implement the UNCRC and to abolish the existing children act and to reformulate and strengthen it, the Children Act, 2013 has been enacted. The Act became effective from 21 August 2013. It is officially known as 'Shishu Ain, 2013' in Bangla.

The Children Act, 2013 is one of the milestones in protecting against various issues of the children in Bangladesh. The Act aligns the age limit of a child to the age definition of CRC as it announces that any person under the age of 18 years will be treated as children for fulfilling the purpose of the Act as per section 4. In section 5 of the Act, the provision of appointment of Probation Officer has been made for every district, upazila and metropolitan area. Section 7-9 of the Act pronounce the formation of National, District, and Upazila Child Welfare Board and their functions. One of the key functions of the National Committee chaired by the Honorable Minister of the Ministry of Social Welfare is to guide the protection of the children.

As per section 13 and 14 of the Act, the Ministry of Home Affairs will establish 'Child Desk' in every Police Station and an officer not below the rank of sub-inspector will be in-charge of the Desk and he or she will be treated as Child Affairs Police Officer.

Section 44 bars arrest or detention of a child below the age of 9 years and the section describes that whatever may be in other laws, a child will not be arrested under any acts special in nature while section 33 bars on death sentence or life imprisonment of a child.

For protecting the child, the Act under section 16 has made the provision of 'Children Court' in every district headquarters. The Act has recognized the participation of the children in the judicial process as right as per section 22. The child will be in safe custody as the last resort and the child will be cared for alternatively that means diversion as soon as possible which has been mentioned in section 26. Section 48 illuminates that 'diversion' may be adopted as an alternative way to obtain the objectives of the Act. 'Diversion' may be adopted for the 'children in conflict with the law' after their arrest or detention and at any stage of the judicial functions. Children Affairs Police Officer or in other cases, the Children Court may send the matter to the Probation Officer for resolving the matter alternatively instead of formal judicial proceedings (Ministry of Law, Justice and Parliamentary Affairs 2018).

3.2.5 Child Protection, Child Marriage, and the Child Marriage Restraint Act, 2017

In ensuring child protection, the Child Marriage Restraint Act, 2017 is a major initiative and key milestone in Bangladesh. To end child marriage, the new law has been enacted with a special proviso repealing the 'Child Marriage Restraint Act, 1929. The new Act has been made to update the previous one that prevailed for a long time. To implement the Act, Child Marriage Restraint Rules, 2018 has been formulated.

The new Act has defined a minor, an adult, and child marriage. In the case of marriage, a minor means a male who has not completed 21 years of age and a female who has not completed 18 years. Contrarily, in the case of marriage, an adult means a male who has completed 21 years of age and a female who has completed 18 years of age. And child marriage means any marriage where any or both of the parties are minors. Child marriage has been made punishable offence except in special cases under section 19 of the Child Marriage Restraint Act, 2017.

Section 19 of the Act announces that if the child marriage is for the minor's best interest, child marriage would not be considered an offence. This must, however, be done by a court's order, parents' or legal guardian's consent, and following due process under the formulated rules. However, considering Bangladesh's socio-economic scenario, this special provision may help in solving special situations like the pregnancy of a girl.

The new law upsurges the punishment for the offence of child marriage. If an adult man or woman commits the offence of child marriage, then imprisonment not exceeding 2 years or a fine not exceeding BDT. 1 lakh or both and in failure to pay the fine, another 3-month imprisonment will be awarded. If a minor whether boy or girl commits the offence of child marriage, then detention not exceeding 1 month or a fine not exceeding BDT. 50,000.00 or both will be awarded but the judicial proceeding will be as per the Children Act, 2013 as stated in section 7 of the Act. Section 8 mentions the punishment of the parents and others related to the offence of child marriage. For engaging with child

marriage or failure to protect child marriage, the punishment will be not exceeding 2 years but not less than 6 months or a fine not exceeding BDT. 50,000.00 or both and in failure to pay the fine, another 3-month imprisonment will be awarded. Similar punishment is applicable for the persons who will conduct child marriage as stated in section 9 and the registrar of the child marriage will enjoy the same punishment in addition to the cancellation of the license or appointment as per section 11.

3.2.6 Other legislations: Other laws relevant to child protection and welfare in Bangladesh are not enclosed in a single act or law; rather they are found scattered in various legislations.

3.3 Key Areas of Child Protection and the Role of Field Administration

3.3.1 Birth Registration and Field Administration: Many parents especially those who are hardcore poor or parents of hard-to-reach localities need to spend money for traveling to registrar offices and these issues force them to be unwilling or reluctant to go to the offices of birth registration. Moreover, many parents do not find any necessity of reporting or informing the birth or obtaining birth certificates of their kids within the 45 days; usually, it is done at the time they require a birth certificate for confirming the identity of their children or age, that is only at the time of enrolling their children at school at the age of 6. Besides, many of the parents do not select the name of their babies within the 45 days of birth which delays reporting the birth of the babies. Furthermore, reporting or informing the birth of the children is supposed to be the duty of the father or male members of a family and if a father or male members are away, the follow-up to get birth certificates will become uncertain. In many cases when a birth certificate is issued, parents of the children may pressurize to alter the birth date due to conflicting ages like enrolment at school and appear for examinations or to give 'legitimacy' of child marriage.

Birth registration of children occurs more likely when children grow older and reach at age 4, at 50.5 percent. A major impediment for birth registration is the lack of sufficient knowledge of the parents on how to register a child and get a certificate and thus a child becomes unable to enjoy the first right. On the whole, the huge gap between accessibility and utilization exists as the primary factor that limits the total performance in the birth registration structure of Bangladesh. Effective coverage (in the case of under 1 year age children who got registered and received a certificate by 45 days of birth) exists as tremendously low that is on an average below 2 percent (BBS and UNICEF 2017; UNICEF 2015).

Under these situations and as per the Birth and the Death Registration Act of 2004, the role of Upazila Administration, District Administration, and the Divisional Administration are enormous which may be pointed as follows:

Giving Order by UNO and DC for Correction of Birth Certificate: As per section 15 of the Act, if any faulty information is written in the register book or the birth certificate, then may be applied for correction with fee and prescribed procedures. If the Registrar receives the application after 90 days of issuing the certificate, then the Registrar will send the application for consideration within 30 working days to: in the case of Union Parishad to the UNO, in the case of Municipality or City Corporation or Cantonment Board to DC, and in the case of Foreign Missions to the Registrar General of Birth. In these cases, the UNO, DC including the Registrar General of Birth shall examine the application, give the order as approved or non-approved within 15 working days and send the order to the concerned Registrar as per section 15(4). If the application is rejected, the Registrar shall inform the matter to the applicant in written and if the application is approved, the Registrar shall correct the register or the birth certificate accordingly and issue a new certificate within 7 working days receiving the previous one. In doing all these activities and supervising as well as monitoring those, the role of DCs and UNOs is highly momentous.

Appellate Authority: If a person is distressed or unhappy or affected by the order of Registrar, s/he may appeal to the Appellate Authority within 30 days from the date of such order under section 20. Against the order of Union Parishad Chairman or authorized person or member, appeal to UNO, against the order of Municipality or City Corporation Mayor or Administrator or Councilor and Cantonment Board Executive Officer or authorized person, appeal to District Magistrate/DC and against the order of Ambassador or an authorized person, appeal to Registrar General of Birth (Legislative and Parliamentary Affairs Division 2018).

DCs perform as appellate authority against the order of UNOs, Registrar General as Appellate authority against the

order of DCs while Secretary of LGD performs as Appellate authority against the order of Registrar General under section 20(2).

Punishment of Offences through Mobile Court and Prevention of Offences: The Act also mentions and clarifies the provision of fine and imprisonment if anyone breaches the sections of the Act. Any person breaches this Act or any rule made thereunder this Act shall be punished with a fine not exceeding Tk. 5000.00 as per section 21(1). But if any person provides false information or gives false declaration for a birth certificate, he or she will be fined not exceeding Tk. 5000.00 or 1-year jail without labour or shall be penalized both of them as per section 21(2). Any Registrar who delivers a birth certificate knowing the false information or declaration shall liable for a fine of not exceeding Tk. 5000.00 or 1 year jail without labour or both of them unless he proves that the offence has occurred beyond his or her knowledge and tried best to protect the offence (Legislative and Parliamentary Affairs Division 2018). As the Act has been included in the schedule of Mobile Court, therefore, the District Magistrates, Additional District Magistrates, Executive Magistrates, and the UNOs have an enormous role in executing the Act and preventing offences in this regard.

Social Mobilization: Divisional Commissioners, DCs and UNOs as head of administration at the field level can play a vital role in creating awareness amongst the people about the first rights of the children, the necessity of the birth certificate, the procedure to get a birth certificate and the penalty for false information or false declaration through various programmes and can create a social movement on this issue. They can also aware of the Registrars and informants in their respective areas for performing their duties in this regard duly and perfectly.

Bangladesh, a highly populated country in the world has over 165 million populations. And the population growth rate is 1.37 percent which means every year joining huge children to the existing population. It is believed that through this Act and with the assistance of Field Administration, the country will achieve universal birth registration.

3.3.2 Child Marriage Restraint and Field Administration: The situation of child marriage is alarming in Bangladesh as evidence shows and Bangladesh is considered as one of the countries in the world where highest child marriage rates are prevailing. Child marriage is happening due to different socio-economic as well as cultural factors and tradition plays a significant role in maintaining the ill practices. Factors like poverty, fear of safety and security of the girls, and complexity in the mesh of social norms and beliefs enlarge the menace of child marriage in the country.

Marriage of girls before they reach the age of 18 years causes a serious violation of their rights. This has been focused on an analysis made by GoB and UNICEF jointly. It has also been mentioned in the analysis that 23.8 percent of the girls and women aged 15 to 49 years got married before they have reached their 15th birthday while 34.3 percent of the adolescents having the age 15-19 years got married. A brawny negative correlation or relationship prevails between the practice of child marriage and the level of education. Girls who do not have an education are hugely subjected to child marriage and the percentage is 73.1 contrary to 52.3 percent of women holding ages 20-24 years (UNICEF 2015).

MoWCA statistics show that child marriage is decreasing, for instance, the percentage of marriage below 18 years was 62.8 in 2015 that came down to 47 percent in 2017 while marriage below 15 years reduced to 10.7 percent from 23.8 percent within 2015 to 2017. Child marriage is undesirable and unacceptable (UNICEF Bangladesh no date). It is because:

Child marriage is undesirable and unacceptable (UNICEF Bangladesh no date). It is because:

- **Harmful:** A child does not get any protection or benefit from child marriage. Child marriage deprives him or her of childhood and opportunities in life. No community or society is benefitted from child marriage. When a child gets an education, he or she can pave the way for a better life, a better future of the country.
- **Illegal:** Child marriage is unlawful and punishable offence except in special cases. Lack of knowledge and negligence cannot be an excuse for child marriage.
- **Outdated:** Child marriage is decreasing. More and more people gradually are giving away the practice of child marriage. It is not essential rather it is harmful to a community or society.

Under the above circumstances, the Government of Bangladesh cherishes to abolish child marriage below 15 years completely by 2021 and 15-18 years one-third and entirely by the year 2041. To end child marriage MoWCA has

made a 'Child Marriage Elimination National Action Plan 2018-2030'. Considering the scenario, the role of Field Administration is manifold and extensive.

3.3.2.1 Officials Responsible for Stopping Child Marriage: Section 4 of the Child Marriage Restraint Act, 2017 pronounces that Upazila Nirbahi Officer, Executive Magistrate, Upazila Women Affairs Officer, Social Services Officer, Upazila Secondary or Primary Education Officer, Officer-in-Charge of a Police Station and the local government representative shall stop the child marriage or take actions as per rule if they know or receive information about it without hampering the court process of section 5. Rule 15(1) of the 'Child Marriage Restraint Rules, 2018' directs that the empowered person shall take necessary measures to stop child marriage upon receiving information of initiative of child marriage or organization of child marriage or the empowered person can lodge a complaint to the court as per section 4 of the Child Marriage Restraint Act, 2017. If any complaint is lodged, the empowered person shall by written inform the information of the lodged complaint to the Member-Secretary of the concerned Upazila Committee.

3.3.2.2 UNO Led Verification Committee: The role of the UNO led 'Verification Committee' in the case of applying the Special provision of the Child Marriage Restraint Act bears high essence. Section 19 of the Act illuminates, "Notwithstanding anything contained in any other provision of this Act if a marriage is solemnized in such manner and under such special circumstances as may be prescribed by rules in the best interests of the minor, at the directions of the court and with the consent of the parents or the guardian of the minor, as the case may be, it shall not be deemed to be an offence under this Act (Ministry of Law, Justice and Parliamentary Affairs 2018). "Rule 17(1) mentions that as per section 19 of the Act and in the applicable fields, parents of both parties/legal guardian or both parties along with the minors where applicable or the bride and bridegroom may apply together to a competent court mentioning the reason with documentary evidence if any. The court shall send the application to the 'Verification Committee' formed under 17 (3) (a) of the Rules 2018 to find out the truth of the application.

The 'Verification Committee' shall submit a report to the court within not exceeding 15 days after verifying the matter as per rule 17 (2).

Table 2: UNO Led 'Verification Committee for the Best Interest of the Minors' in every upazila

1	Upazila Nirbahi Officer	Chairperson
2	A Medical Officer nominated by Upazila Health & Family Planning Officer	Member
3	Upazila Social Service Officer	Member
4	Concerned Union Parishad Chairman	Member
5	Concerned Ward Female Member of the Municipality/Union	Member
6	A Male Adolescent and a Female Adolescent Nominated by UNO	Member
7	Upazila Women Affairs Officer	Member-Secretary

The 'Verification Committee' after receiving the application shall go for enquiry and if thinks and confirmed that the marriage is for the best interest of the minors and as the last resort and send the report to the competent court with a specific opinion about the application before the prescribed time. Provided that (i) if the applied marriage is occurred forcibly; (ii) if the marriage is occurred due to rape, abduction, forcible physical relationship, etc.; (iii) if any case is pending in the court of the parties on rape, abduction, forcible physical relationship, etc.; the 'Verification Committee' shall submit the report to the court before the prescribed time holding the opinion of 'no marriage'. If the court thinks that the applied marriage should occur in the best interest of the minor, the court may give permission of the marriage or the court if thinks necessary, the court may dispose of the application through further enquiry or re-enquiry.

3.3.2.3 Child Marriage and Mobile Court: Strong implementation of the Child Marriage Restraint Act can help to stop child marriage in Bangladesh. Punishment should be imposed on parents, guardians, and others involved in child marriages as per the law. In executing the Act, Field Administration has a wide scope to play the key role through driving Mobile Courts across the country. Executive Magistrates are conducting Mobile Court in this regard and stopping child marriage in various places of the country which may be extensive that requires assistance from all concerned.

3.3.2.4 District and Upazila Child Marriage Restraint Committee: For preventing child marriage, a provision has been made under section 3 of the Act to form committees at national, district, upazila and union level combining government officials, representatives of the LGOs/LGIs, NGO representative and local elite peoples. As per this provision and to implement the 'Child Marriage Restraint Act', Government of Bangladesh has enacted the 'Child Marriage Restraint Rules, 2018'. In the Rules, National Committee, District Committee, Upazila Committee, and Union Committee have been formed which have been further notified through notifications (Bangladesh Gazette 2018). Formation and activities of the field level committees are being discussed herewith to point out the role of Field Administration.

- **District Child Marriage Restraint Committee:** Formation of the District Child Marriage Restraint Committee has been prescribed in the Child Marriage Restraint Rules, 2018. MoWCA on 7 November 2018 has notified the committee through a notification.

Table 3: District Child Marriage Restraint Committee

1	Deputy Commissioner	Chairperson
2	Police Super	Member
3	Civil Surgeon	Member
4	A Representative of Zilla Parishad nominated by Parishad Chairman	Member
5	In the case of hill districts, a representative of Hill Zilla Parishad nominated by Hill Zilla Parishad Chairman	Member
6	Where applicable, a representative of concerned City Corporation nominated by its Mayor	Member
7	Mayor, Municipality (First Class)	Member
8	Upazila Parishad Chairman all	Member
9	Upazila Nirbahi Officer all	Member
10	District Information Officer	Member
11	District Children Affairs Officer	Member
12	District Education Officer	Member
13	District Primary Education Officer	Member
14	District Answer & VDP Officer	Member
15	Deputy Director, Department of Youth Development	Member
16	Deputy Director, Department of Social Services	Member
17	Deputy Director, Directorate of Family Planning	Member
18	Deputy Director, Islamic Foundation	Member
19	District Committee Chairman of Jatiyo Mohila Sangstha	Member
20	District Registrar	Member
21	Public Prosecutor	Member
22	District Legal Aid Officer	Member
23	Programme Officer of One-Stop Crisis Cell	Member
24	Nominated by the Deputy Commissioner-	Member
	A Headmaster or Principal or Superintendent each from Secondary & Higher Secondary Schools, Colleges, Technical Educational Institutes and Madrasa located at District Sadar	Member
	A Marriage Registrar	Member
	Two Representatives of which one is female from two Non-Government Organizations which have child marriage prevention or women & child rights activities	Member
	Two competent women representative resides in the district who have experience in child marriage prevention or on preserving women and child rights.	Member
	A male and a female student of secondary schools located at district sadar	Member
25	District Women Affairs Officer	Member-Secretary

Members of the Parliament of the concerned district are the advisers of the committee. The Committee can co-opt any person or a representative from any organization if feel necessary. Members nominated by the DC shall hold membership for 3 years from the date of nomination and the DC can exempt any member without issuing any show

cause notice any time before the expiry of the date while any of the members can also submit resignation letter signed by himself or herself to the DC.

The District Committee shall determine the work procedure of the committee. At least one meeting will be held every month and the date, time, and venue of the meeting shall be determined by the Committee chairperson. At least one-third members will require to form Quorum of the committee meeting while quorum will not require in the case of the postponed meeting as per Rule 7. Duties and functions of the committee are as such:

- a. To supervise, coordinate, monitor, and evaluate the activities of the Upazila Committee to prevent child marriage and give necessary directions.
- b. To implement the received directions or recommendations of the National Committee.
- c. To take measures for propagation against the bad effects of child marriage to create awareness through folksong, print, and electronic media, newspaper, cable network, billboard, poster, leaflet, documentary, workshop, seminar, symposium, and social media to prevent child marriage.
- d. To identify the challenges of child marriage and to send recommendations to the National Committee for the solution.
- e. To prepare a work plan at the beginning of every calendar year on prevention of child marriage and to implement the work plan.
- f. To prepare a monthly report on the accomplished activities as per Form a, b, and c mentioned in the schedule-1 and send a copy to the Ministry of Women and Children Affairs.

If it is analyzed, it will be found that the duties and responsibilities of the District Committee are vast and the role of DC as chairperson is very momentous. The success of the committee depends largely on the initiatives of the chairperson. Divisional Commissioners can play a significant role in supervising the activity of the committee.

- **Upazila Child Marriage Restraint Committee:** The Upazila Committee as per the rules and notification of 7 November 2018 of MoWCA is shown in the table.

Table 4: Upazila Child Marriage Restraint Committee

1	Upazila Nirbahi Officer	Chairperson
2	All Vice Chairman of Upazila Parishad	Member
3	A Representative of Municipality Nominated by Mayor, if any	Member
4	Upazila Health and Family Planning Officer/Upazila Family Planning Officer	Member
5	Upazila Education Officer	Member
6	Upazila Primary Education Officer	Member
7	Upazila Cooperative Officer	Member
8	Upazila Youth Development Officer	Member
9	Upazila Answer & VDP Officer	Member
10	Upazila Social Services Officer	Member
11	Officer-in-Charge of Police Station	Member
12	Upazila Committee Chairman of Jatiyo Mahila Sangstha	Member
13	All Union Parishad Chairman	Member
14	Nominated by Upazila Nirbahi Officer-	Member
	A Headmaster or Principal or Superintendent each from Secondary & Higher Secondary Schools, Colleges, Technical Educational Institutes and Madrasa located at Upazila Sadar	Member
	Two Representatives of which one is female from two Non-Government Organizations which have child marriage prevention or women & child rights activities	Member
	Two competent women representatives reside in the upazila who have experience in child marriage prevention or on preserving women and child rights.	Member
	A male and a female student of secondary schools located at Upazila Sadar	Member
	A Nikah (Marriage) Registrar and one marriage registrar from each other religions	Member
15	Programme Officer of One-Stop Crisis Cell, and	Member
16	Upazila Women Affairs Officer	Member- Secretary

Members of the Parliament of the concerned upazila work as Chief Adviser and the Upazila Parishad Chairman is the Adviser of the committee. Work procedure and tenure of the nominated members by UNO of the committee are likewise the District Committee.

Duties and functions of the committee are as such:

- a. To supervise, coordinate, monitor, and evaluate the activities of the Union committee to prevent child marriage and give necessary directions.
- b. To implement the received directions or recommendations of the District Committee.
- c. To take measures for propagation to create awareness against the bad effects of child marriage through folksong, print, and electronic media, newspaper, cable network, billboard, poster, leaflet, documentary, workshop, seminar, symposium, and social media to prevent child marriage.
- d. To identify the challenges of child marriage and to send recommendations to the District Committee for the solution.
- e. To prepare a work plan at the beginning of every calendar year on prevention of child marriage and to implement the work plan.
- f. To prepare a monthly report on the accomplished activities as per the Form a, b and c mentioned in the schedule-2 and send a copy to the chairperson of the District Committee.
- g. To preserve the records of the disposed of cases under the Mobile Court Act, 2009 as per schedule-7.
- h. To prepare a database.

The functions of the Upazila Committee are huge and bear immense significance as it is the last committee of the administrative tiers and leads by UNO. The committee has the mandate to supervise the activities of the Union Committee which is chaired by the Union Parishad Chairman. UNOs can make vigilant all the officers of the administration to prevent child marriage and can also play a dynamic role in making effective the Union Committees through various steps.

3.3.2.5 Social Mobilization: To end child marriages requires social awareness; social norms need to be changed through social campaigns. These requires information dissemination and dialogue through strategic media and communication. UNICEF Bangladesh launched a National Multimedia Campaign for ending child marriage on 31 July 2017 (UNICEF Bangladesh No Date). Field Administration may gear up this sort of campaign intensively throughout the country to achieve the targets as envisioned by the Government.



3.3.3 Child Labour Elimination and Field Administration: About 1.6 million working children whose ages are 5-17 years live in Bangladesh, which is stated by ILO and BBS though the figure of working children had been declined recently. Child labour is prevailing due to social norms and economic realities that are for poverty. These factors push people to accept child labour widely and thus millions of children are being deprived of education and children remain vulnerable to exploitation, violence, and abuse.

Children are often preferably employed by the employers in various activities like in domestic work, garment factories, waste picking, construction functions, machine workshops, hotels, and restaurants, etc. as because the labour of the children are comparatively cheaper and they are considered more obedient than that of the adult workers. It could be mentioned that a nearly equal number of real child workers are involved in the agricultural sectors.



Nationwide 1 in every 16 adolescents is engaged in child labour while the ratio remains 1 in every 6 in the capital city of Dhaka, which is more than 3 times upper than that of the national average. In Dhaka city, enormous children are in the workforce because huge young girls are involved in various work (UNICEF 2015).

Bangladesh as per its constitutional obligation or direction remains devoted to eliminate child labour from the country and implement child rights. The Government of Bangladesh has ratified the CRC that safeguards the rights of the millions of children of the country. The government is committed to ensuring the right to compulsory and free primary education. Bangladesh has also ratified the ILO Convention on the Worst Form of Child Labour of 1999, Convention No. 182 promising to adopt active actions for securing ban as well as the annihilation of the worst types of child labour as an issue of emergency as per article 3. As per the convention, the state is committed to stopping any work that may injure children's health, safety, or morals (ILO 2017). Bangladesh has enacted the Bangladesh Labour Law 2006 as well as adopted the Child Labour Elimination Policy, 2010. Related government organizations along with DPs are executing diverse programmes to diminish child labour. Despite various efforts, child labour is still a key concern.

Under the above context, the role of Field Administration can be multi-dimensional. Child labour cannot be removed overnight; it may be removed phase by phase. To eliminate child labour successfully requires coordinated, constant as well as steady efforts at field level. In doing so, requires a set of tasks such as:

- Identification of child workers and their parents/households is very urgent to prepare any sort of planning to end the problem. The task is tough but not impossible for Field Administration. Upazila Administration can prepare the list with the help of Union Parishads, Municipalities and District Administration can prepare the list with the help of City Corporations. Thus the database will be prepared at the local level and correspondingly district and the national database will be prepared. Based on the database, Upazila and District Administration can prepare robust planning for implementing various tasks to solve the problem. The tasks may include health care, income generation, self-employment training, credit facilities, community services, Social Safety Net programmes for the parents/households, and bi-stipends for the child workers so that they enroll them in the schools and ensure attendance. To eliminate child labour in some cases will require rehabilitation. In this case, replacement of working children with unemployed family members may also be considered. However, strong coordination and cooperation will require between Field Administration and LGOs to achieve the target.
- Propagation against the bad effects of child labour is crucial to remove the problem. This propagation will bring good results when it will be done at the grassroots levels. And this is possible jointly by the Field Administration and the Union Councils, Municipalities and City Corporations. Besides this, officials of Field Administration can aware of people and concerned organizations about the existing laws related to child labour through different awareness programmes. For this, officials should be sensitized about child rights, child labour, child labour laws through training, etc.
- District Magistrates, Additional District Magistrates, and Executive Magistrates can conduct Mobile Court against the persons who violate the provisions related to children and adolescents under the Labour Act, 2006 which has been amended in 2018. Under this Act, the Magistrates can punish under section 284 as the section says, "whoever employs any child or adolescent or permits any child or adolescent to work in contravention of any provision of this Act; shall be punishable with fine which may extend to five thousand Taka." In section 285 it has also been mentioned "whoever, being the parent or guardian of a child, makes an agreement in respect of such child in contravention of section 35, shall be punishable with fine which may extend to one thousand Taka" (Legislative and Parliamentary Affairs Division 2018). Section 35 does not permit any parent or guardian to make an agreement to allow the service of a child to be utilized in any employment. It should be noted here that the Act has been brought under the schedule of Mobile Court.

3.3.4 Prevention of Corporal Punishment, Violence, Sexual Abuse and Exploitation of Children and Field Administration

Some research shows that educational performance and children's achievement might be affected negatively due to violence and its consequences on the economy including poverty may persist for a long time. Children affected by violence at the early stage of their lives can damage brain development as well as children may suffer from various mental health issues. Violence can also bring severe and long-standing problems for children i.e. physical, sexual,

reproductive health, and cause harm to their psychological happiness.

In Bangladesh, violence hits children in diverse types, for instance, corporal or bodily punishment or physical violence, sexual violence and abuse, mental violence, negligence, and careless treatment, etc. The SAIEVAC, a top body of SAARC, working since the year 2011 has identified physical punishment, trafficking of children, child labour, child marriage, sexual misuse as well as exploitation as main concern VAC thematic areas. Bangladesh is also a party of the SAIEVAC.

The Government of Bangladesh has issued harsh orders regarding the elimination of physical punishment from schools. Despite it, the practice of corporal punishment is continuing as the Child-Led Alternative Report to the Fifth State Party Report on the CRC stated. The report mentioned different forms of punishment, for example, whipping pupils by cane stick, scale, dusters, hand, grabbing students' ears, and use of obnoxious words as well as other sorts of punishments. The report also stated that in the special schools, students holding disabilities are also tortured and hence, the guardians are unwilling in sending their kids to schools. Child domestic helpers as well as children staying at homes and adolescent development centres, also suffer from corporal punishments (Child Rights Advocacy Coalition in Bangladesh 2014). Adolescents at the societal level face ordinary problems like harassment, needless intervention from other people, restrictions on movement, sexual harassment, or eve-teasing (UNICEF 2015; BBS & UNICEF 2017). Suicide sometimes prevails as a type of violence amongst children due to thoughts of suicide and the thoughts are generally generated from the feelings of complete helplessness and losing command over the obnoxious situations and intensified by extensive poverty as well as gender disparity.

By commercial sexual exploitation of children means engagement of girls or boys less than 18 years old in sexual activities or work and is oppressed in the development of pornographic things or materials and their participation as a sexual character in other commercial ventures. Despite prostitution below the age of 18 years is illegitimate, young girls lower 18 years have been involved in prostitution for a long time, most are on streets, residential hotels having the risk of arrest, fear, thrashing, snatching, robbery as well as possibility of infected in HIV.

Among the countries where human trafficking prevails, Bangladesh is one of them as reported. It happens, especially in bordering and Middle East countries. Recently, the country has turned into a land of transit along with a destination. Human trafficking is ultimately interrelated to the insecurity of livings or livelihoods and enduring disparities including discrimination for the marginalized communities in general, and particularly women. A great number of trafficked boys or girls are allured and deceived or cheated by the false commitment of 'good quality jobs or employment opportunity', marriage and other boys or girls are kidnapped, purchased, forced, endangered, and kept as the matter of debt bondage. Many of the children as well as women are trafficked with the implicit sanction of their poor families. Besides, the intra-country and cross-border trafficking of children is on the increasing level with a view to labour exploitation.

In reducing and controlling bodily punishment, violence, sexual abuse, and exploitation against the children as discussed above, Field Administration is playing and can truly play an intensive role across the country as such:

3.3.4.1 Awareness and Training Programme: Government of Bangladesh has issued tough orders regarding the elimination of physical punishment from schools. Field Administration especially District and Upazila Administration can arrange awareness programme and sound training for the teachers. For financing the programme and training, they can seek special allocation from the Government or involve LGOs. LGOs can easily involve in such activities as they have the mandate to improve education and conduct welfare activities in their areas. Besides these activities, Field Administration can take stern action against the teachers who will torture students physically violating Government orders or send proposals of action to the concerned higher authorities.

3.3.4.2 Social Mobilization and Mobile Court: Field Administration can aware adults and adolescents about the bad effects of violence, homicide, sexual violence and abuse as well as child trafficking and inform about the punishment of doing such crimes through different programmes i.e. campaigns, workshops, seminars, symposiums, folksongs, posters, leaflets, dramas, etc. In the case of eve-teasing, Executive Magistrates can punish any offenders under the

section 509 of the Penal Code 1860 as the section has been brought under the Mobile Court Schedule. Executive Magistrates are playing a vital role in preventing eve-teasing through Mobile Courts which can be further intensified.

3.3.4.3 District and Upazila Women & Children Repression Prevention Committee: Field administration has the opportunity to play a big role at district and upazila levels in preventing child repression through the 'District Women & Children Repression Prevention Committee' and the 'Upazila Women & Children Repression Prevention Committee'.

 **District Women & Children Repression Prevention Committee:** MoWCA has reformed the 'District Women & Children Repression Prevention Committee' on 16 November 2016 in a notification (MoWCA 2016).

Table 5: District Women & Children Repression Prevention Committee

1	Deputy Commissioner	Chairperson
2	Police Super	Member
3	Civil Surgeon	Member
4	Upazila Parishad Chairman (All)	Member
5	Upazila Nirbahi Officer (All)	Member
6	A Female Vice Chairman of Upazila Parishad (Nominated by DC)	Member
7	Deputy Director, Department of Social Services	Member
8	Deputy Director, Department of Youth Development	Member
9	Deputy Director, Islamic Foundation, Bangladesh	Member
10	District Information Officer	Member
11	District Education Officer	Member
12	Learned PP	Member
13	District Registrar	Member
14	District Chairman of Jatiyo Mohila Sangstha	Member
15	A Woman Teacher of Local Government Colleges (Nominated by DC)	Member
16	President, Local Press Club	Member
17	Representative of District Bar	Member
18	A Woman Representative of Non-Government Organizations (Nominated by DC)	Member
19	Programme Officer, One-Stop Crisis Cell (where Applicable)	Member
20	Co-coordinator, One -Stop Crisis Centre (where Applicable)	Member
21	District Women Affairs Officer	Member-Secretary

The committee may co-opt new members if necessary.

Working area of the Committee: To monitor and coordinate the activities of the 'Women and Children Oppression Prevention Cell' at the district level; to help comprehensively to conduct the activities smoothly and the committee will send the meeting minutes holding a meeting in every month to the 'Women and Children Repression Prevention Central Cell'.

If it is analyzed, it will be found that the committee led by DC is a high powered committee and its functions are various from monitoring to coordinating the activities of the 'Women and Children Oppression Prevention Cell' at the district level and to help widely in conducting their activities. The effectiveness of the committee may bring huge results for the society in the field of preventing children's oppression.

 **Upazila Women & Children Repression Prevention Committee:** The Upazila Committee has been reformed (MoCA 2016) which is shown in the table.

Table 6: Upazila Women & Children Repression Prevention Committee

1	Upazila Nirbahi Officer	Chairperson
2	Female Vice Chairman of Upazila Parishad	Member
3	A Physician Representative of Upazila Health and Family Planning Officer	Member
4	Officer-In-Charge of the Police Station	Member

5	Upazila Social Services Officer	Member
6	Upazila Education Officer	Member
7	Upazila Youth Development Officer	Member
8	Upazila Sub-Registrar	Member
9	Chairman of Jatiyo Mohila Sangstha (where applicable)	Member
10	Representative of Local Press Club	Member
11	A Woman Representative of Non-Government Organizations (Nominated by Upazila Nirbahi Officer)	Member
12	Chairman of Teacher's Association (Secondary and Primary)	Member
13	Programme Officer, One-Stop Crisis Centre (where Applicable)	Member
14	Upazila Women Affairs Officer	Member-Secretary

The Committee can co-opt new members if necessary.

Working area of the Committee: To monitor and coordinate the activities of the 'Women and Children Repression Prevention Cell' at the upazila level; to help comprehensively to conduct the activities smoothly; the committee will send the meeting minutes holding a meeting in every month to the 'Women and Children Repression Prevention Central Cell'.

The Upazila Committee led by UNO has a wide scope to play a vital role in preventing child repression in the respective areas and initiating different functions in collaboration with the Women and Children Repression Prevention Cell' and the Union Councils, Municipalities, if any and Zilla Parishad at the upazila level.

3.3.4.4 Providing Necessary Emergency Services: DCs, UNOs, Executive Magistrates, Police and other officials are playing a significant role and also have a varied scope to play a critical role in protecting violence, torture or exploitation against children through providing emergency services for the protection of child trafficking, in protecting risky child labour and child marriage, in arranging legal aid, rescue children in dangerous or hazardous situations or abuse; providing telephonic information and counseling services; helping in receiving any existing social protection services through responding calls or upon receiving information from the 'Child Helpline 1098' operated by the Department of Social Services (Department of Social Service 2018). Similarly, they can respond quickly upon receiving calls or information from the 'National Helpline Centre for Violence against Women and Children 109'. The purpose of the helpline is to provide instant service to victim women and children as well as links up to pertinent agencies. Different services like legal advice, police help, telephone counseling, services of referrals to other agencies, and any information related to violence issues are provided from the helpline. The helpline is toll-free and accessible to 24 hours every day through fixed and mobile phones from every corner of the country (Department of Women Affairs 2018).

Field Administration officials can also play a great role to aware different agencies and people especially of the remote areas about the Child Helpline 1098, National Helpline Centre for Violence against Women and Children 109' and also about the National Emergency Service number which is 999 to receive offered services whenever they need.

3.3.5 Children with Disability and Field Administration

In the mainstream development programmes, the issue of disabled children often remains invisible which is intensified further due to proper quality data especially lack available and reliable data on the figure of disabled children. In Bangladesh, generally, disabled children are taken care of by the families at their homes. The families having hardcore poverty or poverty often find the disabled child as a burden or curse for them. Treatment at home for children having disabilities is not always equal and helpful for many of the children. Many families also keep their disabled children sequestered at home due to limited knowledge and sufficient scope of support. In some cases, families feel shame for their children with disabilities and even exploit or neglect them.

In true sense, institutional care for the children having disability is insufficient, and sometimes they violate many rights of the children. Besides, information on exploitation, violence including abuse of children having disabilities living in the institutions remains scared or limited.

However, NGOs have conducted small-scale assessments that report a high occurrence of abuse as well as violence; in particular, girls are at target. Again, because of pervasive negative attitudes regarding disability, children are also abused emotionally at their homes, communities, and schools regularly.

Bangladesh as a welfare state is committed to addressing all the problems confronted by the children having disabilities. The country is one of the first ones that has ratified and brought into force the most two vital international agreements that are in 1990 the CRC and in the year 2007 the CRPD. Bangladesh has also undertaken enormous legal as well as policy activities for realizing the universal commitments; the steps are the Children Policy, 2011; Children Act, 2013 as well as the Rights and Protection of Persons with Disabilities Act, 2013. Approval of the CRPD has increased a broad governmental arrangement for coordination along with answerability. A vivacious civil society armors the CRPD that promotes human rights including equity by the proviso of fundamental societal services for disabled children (UNICEF 2015; UNICEF Bangladesh 2014).

Under the above perspective, what role the Field Administration can play for the child having a disability? That is the main question here and the possible responses may be:

For doing anything for the children with disabilities requires firstly authenticated available data. District and Upazila administration can make a strong database with necessary data with a prescribed format with the active assistance and collaboration of Union Parishads, Municipalities, and City Corporations. This database can be used in local planning for inclusive development. Through inclusive development, children with disabilities may be brought in the mainstream and improved their situations.

Inclusive development activities may include coverage of social security as per the priority list of the prepared database, bi-stipends for all the children with disabilities to increase enrolment rate and attendance in the classes, equal treatment for all, awareness programme for eliminating negative attitudes, violence and emotional abuse at homes, communities, and schools, arrangement of training for both parents and children for adequate knowledge and support, increase of institutional care for the child with disabilities at upazila, district and divisional levels directly and motivating as well as patronizing other organizations to do so, etc. Of course, LGOs/LGIs need to be involved in all the activities and prepared local planning to achieve the purpose.

3.3.6 Ensuring the Basic Rights of the Street Children and Field Administration

The Committee on the Rights of the Child has uttered its anxiety over the increasing figure of children working or living in the urban areas' streets, principally in Dhaka city. These children have become the main targets of planned child trafficking rings as the Committee considers. It warns that they are vulnerable for abuse as well as frequently charged for vagrancy, kept in shelters, vagrant institutions, or homes that are not appropriate for the children.

It is assumed that nearly 700,000 street children in the country are still vulnerable to violence, sexual abuse, and hazardous work or trafficking. Amongst the 700,000 street children, 250,000 live in capital Dhaka. A study of Combating Commercial Sexual Exploitation of Children-CCSEC consortium found out that 86% of street children are addicted to drugs, and a maximum of them are traumatized because of diverse awful experiences. Some of the children are also affianced with theft, violence, drugs, or use drugs. Brokers or middlemen are frequently exploiting the street children. Orphaned children or children who live merely with father or mother are likely awfully vulnerable because they lack complete parental care.

Considering the above context, the role of the Field Administration may be sorted out as follows:

- Street children problem is acute especially in Dhaka city and also in other metropolitan cities. Therefore, District Administration of Dhaka and other districts having City Corporations have a wide scope to play a crucial role for removing street children's problems. District Administration under the close supervision of Divisional Commissioners can involve the City Corporations and NGOs in preparing a reliable and concrete database of the street children and based on the database can chalk out a robust rehabilitation programme. The programme may include shelter, education, bi-stipends, skill development training, and for their parents or guardians, financial support or inclusion in the Social Safety Net programmes to eradicate their poverty.

Street children's problem is not a static one. Every year there will be new children in the streets. That is why the database needs to be upgraded every year.

- Need to coordinate the Government and NGO programmes for planned rehabilitation of the street children. District and Upazila Administration in collaboration with the LGOs/LGIs can expedite the coordination and monitoring activities.
- A campaign based on the terrible experiences of the street children may be conducted overprint, electronic and social media to aware of the citizens especially the poor and distressed families of the country so that they do not allow or permit their children to go to streets. This campaign may be continued with the active participation of the LGOs, NGOs, DPs and Civil Society Organizations under the banner of the District Administration.

3.3.7 'Child in Conflict with the Law', 'Child in Contact with the Law', 'Disadvantaged Children' and Field Administration

3.3.7.1 Probation Officer, 'Child in Conflict with the Law' and 'Child in Contact with the Law': There is a provision of Probation Officer for protection of children in the Children Act of 2013. Section 5 of the Act describes that one or more Probation Officers shall be appointed by the Government in each district, upazila as well as metropolitan area, as per the case. If no Probation Officer is appointed for a particular area, responsibilities of the Probation Officer may be delegated to any Social Services Officer or any other officer holding similar posts or work in different districts or upazilas under the Department of Social Services.

Duties and responsibilities of the Probation Officer for the children of 'in contact with the law' or 'in conflict with the law' include to coordinate with the Child Affairs Police Officer when a child is brought or otherwise comes to a police station due to 'in contact with the law' or 'in conflict with the law, organize a Safe Home when diversion or bail becomes impossible for any rational reason, to stay in the court or remain present at the time of trial, to conduct field inquiry and prepare a social inquiry report for submission to the court, to confirm the child's legal representation together with legal support where required by the District Legal Aid Committee, when any child 'in conflict with the law' is sent to a Child Development Centre or any certified institute, where pertinent, to prepare as well as maintain a different file for every child and when children comes 'in contact with the law' or 'in conflict with the law', where relevant, to observe or watch the conditions to go for diversion or alternative care.

The purpose of the activities is to ensure child protection and ensure the best interest of the children of 'in contact with the law' or 'in conflict with the law'. These protective activities may be intensively looked after and reviewed by DCs and UNOs through the Child Welfare Boards.

3.3.7.2 Child Affairs Desk in the Police Station and 'Child in Conflict with the Law' and 'Child in Contact with the Law': As per section 13 of the Children Act, 2013 a Child Affairs Desk in every police station shall be established by the Ministry of Home Affairs, and its responsibilities shall be assigned to an officer who will be not lower than a Sub-Inspector. If any female Sub-Inspector works in the concerned police station, she shall be given the predilection for the task of the desk. The officer in charge of the 'Child Affairs Desk' shall be known as the 'Child Affairs Police Officer'.

Duties and functions of Child Affairs Police Officer are as such: Maintaining separate files as well as registers for the case pertaining to children; whenever any child comes or is brought to the police station to notify the Probation Officer, to inform the child's parents and in the absence of both of them, the child's guardian or the authority of him or her, or legal or lawful guardian or caregiver, as the case may be, any member of the extended family or the nearest Board where pertinent, and to inform them regarding the date of producing the child before the court including complete information; to give instantaneous mental support; to organize first aid for the child, if require to send him or her to a clinic or hospital; to adopt required steps to meet up the basic needs of the child; to confirm that the child's age is identified appropriately through birth certificate or pertinent document; to adopt diversionary steps or to organize for bail assessing its possibility based on the joint assessment with the Probation Officer related to the complains brought against the child, if it becomes impossible to adopt diversion or free the child on bail because of any reason to organize for the child a placement in a Safe Home (if the police station does not hold any safe place for

the child) before producing him or her in the court at first time and to send monthly all information of the child related cases as per prescribed form to the Probation Officer as well as to the Police Head Quarters through Superintendent of Police including, where relevant, to the District Legal Aid Committee; to take care in the issue that the child is not hand-cuffed or tied up with rope or cord around the waist; if the child is detained in a Safe Home, he shall not be kept together with the adults or any child by this time found guilty or offender and with any child 'in contact with law'.

If it is impossible to notify the child's parents or others as mentioned above, the Child Affairs Police Officer shall submit a report to the court describing the reasons for not executing so, on the first date the child is produced before the court.

As per section 47 of the Act, the Child Affairs Police Officer shall record the statements of the child in presence of the parents of the child or others mentioned above and the Probation Officer or the Social Worker and taking into consideration the type of allegation brought against the child as well as his mental and socio-economic condition, may (a) release the child after warning in writing or verbally, (b) send the child for diversion in presence of them.

Divisional Commissioners, Deputy Inspector Generals of Police, DCs and District Magistrates as well as the Police Supers may inspect deeply the above-mentioned tasks when they go to Police Stations for formal inspection.

3.3.7.3 Disadvantaged Child: If any disadvantaged child as mentioned in section 89 of the Children Act is found and send to the Department of Social Services or its nearest office by Child Affairs Police Officer, the department shall arrange Institutional Care if parental care or non-intuitional care under sub-sections (2) and (3) of section 84 may not be ensured. Following are the institutes for institutional care as mentioned in section 85: (a) government children homes (Sharkari Shishu Paribar); (b) baby homes (Chotomoni Nibash); (c) training and rehabilitation centres for the destitute children; (d) government shelter homes; and (e) other institutes as determined by the Government.

After placing the child in any institute as stated in section 85 or in any other 'Safe Home', the Probation Officer or the Social Worker shall assess him and shall adopt required steps in line with the provisions of this Act with a view to confirm his on the complete development and shall locate the parents, or in their absence the caregiver, or the authority responsible for the supervision, or legal or lawful guardian or, otherwise extended family members and real conditions as per section 92. Simultaneously, as per section 93, the Probation Officer shall put forward all the information of the child to the concerned Child Welfare Board through the Member-Secretary of the Board regularly as well as send a copy to the Director General of the department. Then the information shall be reviewed by the District Child Welfare Board or, where applicable, the Upazila Child Welfare Board to forward recommendations to the related authorities for in general well-being of the child. As per section 94, if the Board thinks that to ensure the best interest of the child, it is required to remove him from his parents or the responsible person or authority, the Board may refer the issue to the Children's Court to adopt required steps on the issue as per section 94 and the Children's Court, after due process, may order the child to be placed in alternative care under the responsibility of the Probation Officer.

3.3.7.4 District and Upazila Child Welfare Board: In the Children Act, 2013, there are provisions of District and Upazila Child Welfare Board for the protection and best welfare of the children of 'Child in Conflict with the Law', 'Child in Contact with the Law' and 'Disadvantaged Children'

■ **District Child Welfare Board:** The Board is composed as per sub-section (1) of section 8.

Table 7: District Child Welfare Board

(a)	Deputy Commissioner, ex-officio	Chairperson
(b)	Superintendent of Police of the district, ex-officio	Member
(c)	One representative to be nominated by the Chairman of the District Legal Aid Service Committee	Member
(d)	Civil Surgeon, ex-officio	Member
(e)	Superintendent of Jail of the District, ex-officio	Member
(f)	District Child Affairs Officer, ex-officio	Member
(g)	District Education Officer, ex-officio	Member

(h)	District Primary Education Officer, ex-officio	Member
(i)	2 (two) Probation Officers nominated by the Deputy Director of the District Social Services Office	Member Member
(j)	District Information Officer, ex-officio	Member
(k)	Chairperson of the District Committee of Jatiya Mohila Sangstha	Member
(l)	President of the District Bar Association	Member
(m)	Public Prosecutor of the District	Member
(n)	2 (two) distinguished persons of the concerned District nominated by the DC	Member
(o)	2 (two) representatives from the non-government voluntary organizations engaged in activities relating to affairs of the child in the concerned district, if any, nominated by the DC	Member
(p)	Deputy Director of the District Social Services office	Member-Secretary

A Member of Parliament of the concerned district with preference to a female member, if any, nominated by the Speaker performs as the advisor to the District Child Welfare Board as per section 12 of the Act.

The members nominated to the District Child Welfare Board hold their membership for the tenure of 2 years from the date of their nomination as per section 10 of the Children Act, 2013. But any member who is nominated as such may resign whenever likes by writing own hand addressed to the chairperson and the post becomes vacant from the date of approval of the resignation letter while the nominating authority may, whenever wishes, cancel the nomination and nominate a different proficient individual for the post. It should be noted here that Government may if needed, reduce or elevate the number of members of the Board through an official gazette notification.

The Board may identify the meeting procedures. Venue as well as the time of the Board meeting must be fixed by the Chairperson of the board.

The District Child Welfare Board must have at least 1 meeting in every 4 months. The meetings will be presided over by the chairperson and when he or she remains absent, any member selected or directed by the chairperson and in absence of such direction, an elected member elected by the members present in the meeting presides over the Board meeting.

A quorum of the meeting of the Board shall require the presence of the majority number of members of the Board and decisions of the Board shall depend on the majority of votes of the present members.

As per sub-section (2) of section 8, duties and functions of the District Child Welfare Board are as follows:

- (a) to visit the Child Development Centre or, as the case may be, the certified institute or any other institute for children, if any, and to inspect the jail with a view to supervising, coordinating, monitoring as well as evaluating the activities adopted by those organizations or institutes;
- (b) to identify the process of required alternative care for the children who are disadvantaged as per section 89, and for children 'in contact with the law' and, where pertinent, send those children to alternative care, as well as to analyze the data along with information of the children remain in such care;
- (c) to execute the National Child Welfare Board's directions;
- (d) to approve the recommendations sent by the Upazila Child Welfare Board or, if needed, forward the recommendations to the National Child Welfare Board for approval;
- (e) to call for, from time to time, report from the Upazila Child Welfare Boards on their activities as well as, if needed, to arrange inter Board meetings with a view to coordinating their actions;
- (f) to discuss about the information sent by the Child Development Centres, certified institutes or, jail authority, whatever, and to adopt required steps or actions for the children's welfare; and
- (g) to adopt such other actions as deemed essential to fulfill the abovementioned duties and functions.

- **Upazila Child Welfare Board:** In section 9 of the Children Act, 2013 the provision of Upazila Child Welfare Board in each Upazila has been made.

Table 8: Upazila Child Welfare Board

(a)	Upazila Nirbahi Officer	Chairperson
(b)	Upazila Health and Family Planning Officer	Member
(c)	Upazila Women Affairs Officer	Member
(d)	Upazila Education Officer	Member
(e)	Officer-in-Charge of the Police Station or the Child Affairs Police Officer nominated by him	Member
(f)	Probation Officer	Member
(g)	Chairman of Upazila Legal Aid Committee or a representative nominated by him, if any	Member
(h)	2 (two) distinguished persons of the concerned upazila nominated by the Upazila Nirbahi Officer	Member
(i)	1 (one) representative from the non-government voluntary organizations engaged in activities relating to child affairs in the concerned upazila, if any, nominated by the Upazila Nirbahi Officer	Member
(j)	Upazila Social Services Officer	Member-Secretary

The female Vice-Chairman of the Upazila Parishad is the advisor to the Upazila Child Welfare Board as per section 12 of the Children Act. Tenure of the members and work procedures of the Upazila Board is similar to the District Child Welfare Board. But the Upazila Board needs to have at least 1 meeting every 3 months.

Following are the duties and functions of the Upazila Child Welfare Board as per sub-section (2) of section 9 of the Children Act:

- Supervising, coordinating, monitoring and evaluating the activities adopted by the certified institutes located in the upazila;
- Identifying the process of required alternative care for the disadvantaged children, and for children 'in contact with the law' and, where pertinent, send those children to alternative care, as well as to analyze the data along with information of the child remain in such care;
- Implementing the adopted policies as well as sent directions by the National Child Welfare Board or by the District Child Welfare Board on different times and sending the report when they call for;
- Discharging such other duties as per rules; and
- Adopting such other actions as deemed essential to fulfill the abovementioned duties and functions.

It is found that Upazila Child Welfare Board has plenty of duties and responsibilities and the success of the Board largely relies on the promptness of the chairperson and the Member-Secretary.

3.4 Child Protection-Challenges for Field Administration

Bangladesh has obtained a significant improvement in the living standards of children along with women in recent years facing multiple challenges. Furthermore, all these successes have been achieved comparatively in a very short time although the budget in the social sector was not sufficient. Thus the girls, boys, adolescents as well as the women of the country are improved today in all aspects than their previous peers or generations a few decades back. While substantial challenges persist, they are being gradually identified and dealt with by the Central and Field Administration, NGOs, societies, parents, international agencies, philanthropists as well as by children themselves.

Bangladesh must be invigorated to expedite her topmost commitment to the advancement of the children. It needs to travel a long way for achieving its cherished expectations, manifestoes, and vision regarding child rights. Nothing to

be denied that the problems and challenges Bangladesh is facing constantly originated more or less from the same or alike root causes and these impede the execution of the whole rights amongst all the children, adolescents including the women to a big scale. However, here the key challenges for Field Administration to ensure child protection are being pointed out:

- Improvement of systems and strengthening institutions at divisional, district, and upazila levels are required critically to address inadequate capabilities for preparing equity-based planning, execution, harmonization, and monitoring.
- Motivating the LGOs/LGIs to make those child-friendly and confirming the proper allocation of local resources in their budgets and plans for child protection.
- Despite national economic advancement in recent decades, still poverty persists extensively that continuously affects the choices or living standards of numerous families.
- The country faces continual vulnerability to disasters and subsequent emergencies in many places which turns the poor families poorer and resourceless, making high risky children's lives in terms of life threat and curtail of existing facilities of the families and state organizations.
- Giving priority to emerging themes i.e. strengthening systems, promoting local level planning, increasing concentration towards children, eliminating child marriage, intensive focus to speedily increasing urban slums that tinted all sectors. These theme areas intend to touch main development issues and widespread vital structural causes which are linked to governance as well as environment that shape the root of deeper themes of vulnerability. Of course, these emerging themes are quite aligned with the vision 2021, vision 2041, Election Manifesto of the Government, and also with the Agenda 2030 of the UN.
- Ensuring quality services including Social Safety Net programmes for the children of the disadvantaged localities, slums of urban areas and hard-to-reach areas as well as for other disadvantaged children.
- Predominantly, disseminating sufficient knowledge as well as consciousness at the family level on good practices of development and their benefits remain as big challenge.
- Need crucially transformational change of the culture of the society as well as behavioural development for abolishing detrimental practices and to ensure respect towards children's rights.
- Introducing an integrated approach to address the development needs amongst children as well as women holds a vital essence. Such an approach at field level may be effective and fruitful in bringing the best results in many areas of children and women. But this step is highly challenging.
- The structure, systems and legal provisions are changing, even the changes occur very dramatically in some cases. But the issue is that the analyzed structural causes are embedded stringently in the everyday life that till today squeezes or constricts socio-economic, cultural as well as governance opportunities for considerable figures of children including women in the country.

The maximum of the challenges mentioned herewith is complicated that necessitates inclusive policies by the Central Administration and vigorous execution continuously by the Field Administration for a certain time. Indeed, for addressing all the wide areas will once more require emphasizing the magnitude of 'context responsive strategies' which are customized explicitly to local requirements and discriminations or inequalities based on various regions, socio-economic groups as well as others in the country. Field Administration can play a critical role in these areas with a view to solving as well as supporting the Central Administration. However, to address these issues will require further intensive research and more attention while other challenges need to be identified to create a path for the general welfare of the children.

3.5 Recommendations

Children have the recognized rights in getting protection from all sorts of violence, abuse as well as exploitation. It is intricate to quantify the direct impact of society's failure in sufficiently giving protection to the children. However, abuse, violence as well as the exploitation of children is recognized as deep social problems which have effects both on the rights including children's welfare and long-term stability of the society exclusively. In true sense, an integrated and effective protective system is a multifarious task. Keeping these in mind, the following recommendations are

forwarded for Field Administration with a view to realizing the concerned articles of the UNCRC, constitutional provisions of the country, the National Child Policy 2011, the Children Act 2013 and other national and international documents related to the protection of the children:

In the Case of Policy/Strategy:

- Field Administration may continue supporting the Central Administration for legal reform as well as point out critical issues of child protection in different forums i.e. DCs conference.
- Pointing out new policy areas for safeguard and welfare of the children and ensuring enabling environment so that the children feel safe.
- To send proposal to the Government to set up and maintain the necessary number of Child Development Centres, or may recommend institute or establishment as suitable for placement of the children who are charged for any offence.

In the case of Institution/Governance:

- For ending child marriage within 2041 needs a strong execution of the 'Child Marriage Elimination National Action Plan 2018-2030' and the effective implementation of the 'Child Marriage Restraint Act, 2017'. For this Field Administration officials should be sensitized more about this issue through training, workshop, seminar, conference, discussion, dialogue, etc.
- Enforcement of the Children Act strictly, making an action plan, and arranging necessary funds for properly executing the Act, increasing the capacity of the concerned officials and committees at the field level.
- Need to facilitate and expedite strong coordination among birth registration, child marriage, education, and health sectors.
- To augment the effectiveness of the committees related to child protection and welfare at the field levels.
- Ensure a continuum of care and make available quality services including the Social Safety Net programmes in the remote and hard-to-reach areas and for the disadvantaged children.

In the Case of Programmes/Projects

- Require to speed up and expand implementation of C4D activities to underpin social mobilization and community rendezvous for social and behavioural change, rejection of detrimental social norms or practices, for instance, violence, abuse, exploitation, child marriage, suicide, etc. C4D components are expected to assist hugely especially in raising awareness, developing positive attitudes, behaviours as well as social norms amid selected people groups for long-lasting development. Therefore, support is essential to C4D for strengthening it for all children, particularly for disadvantaged and vulnerable ones.
- Create and patronize forums to work with adults and boys to create opinion against violence and thus lessen or eliminate violence.
- Promote larger protection with the help of LGOs for children having disabilities, principally for girls; motivate to invest or spend in the education system for executing various actions to eradicate corporal punishment and ensure inclusive education for the children having disabilities.

In the Case of Monitoring and Evaluation/Data/Knowledge Management/Best Practices/Innovation:

- Strengthening coordination, supervision, monitoring, and evaluation system for better results as well as to ensure accountability of the duty bearers at field levels.
- Improving data collection, reporting, and knowledge management system as well as patronize innovation in the related areas of children at field levels.
- Discussing best practices/innovations of child protection at related different forums, meetings, and arrangements of local training, workshops, seminars, discussions, dialogues, etc. with the government support or with the collaboration of LGOs and NGOs.

4.1 Constitution of Bangladesh and Education Rights of the Children

The Constitution of the People's Republic of Bangladesh contains certain guidelines as well as provisions regarding the rights of the citizens including children. The directive principles have been mentioned in Part II that is in the 'Fundamental Principles of State Policy' part of the constitution (GoB 2010). Among the articles related to the rights of the citizens including the children, 2 are related to education. The articles which are pertinent to education rights are 15 and 17.

Article 15: This article provides the guidelines of fundamental needs of life which are food, clothing, shelter, education, and medical care for all citizens. Here education has been recognized as a fundamental need of all people including the children.

Article 17: As per this article, the State shall take effective actions in order to-

- establish a uniform, mass-oriented and universal education system and to expand free and compulsory education to all children up to a level as may be fixed by law;
- relate education to the requirements of society, create appropriately trained as well as motivated citizens to serve the requirements of the society, and
- remove illiteracy within the stipulated time as may be fixed by law.

4.2 Education- Structure, Streams, and Governance in Bangladesh

Bangladesh Government has been implementing different policies, programmes and projects to increase enrolment and complete the school cycle to address dropout problems of children, child labor problems, and the problem of the hard-to-reach children staying in hard-to-reach areas. And a key deficiency of the education system is to solve the quality problem. Bangladesh is also committed to ensuring education for all as it is also a signatory country to the 'World Declaration on Education For All' (BBS and UNICEF 2017). Structure, Streams, and Governance of Education in Bangladesh are being discussed herewith:

4.2.1 Present Structure of Education: In Bangladesh, at present, the education system has 3 major stages that are primary, secondary, and higher educations. Primary education is composed of a 5-year cycle and secondary education is a 7-year one comprising 3 sub-stages. The sub-stages are 3 years of junior secondary, 2 years of secondary, and 2 years of higher secondary. Secondary education is provided by junior secondary schools, some government primary schools, secondary schools, school & colleges.

The entry age for primary education is 6 years. The junior, secondary, and higher stages of the secondary educations have been premeditated for the age groups of 11-13, 14-15, and 16-17 years. After higher secondary education, students can enter into graduate-level education in general, technical, engineering, agriculture, business studies, and medical streams and afterward in masters' degree except for medical education (MoE 2018a).

4.2.2 Streams in Education: Primary level education consists of 2 main streams: general and madrasa. On the other hand, secondary education consists of 3 key streams: general. Technical-vocational and madrasa while higher education has also 3 streams: general (inclusive of pure and applied science, arts, business, and social science), madrasa and technology education. In higher education, technology education includes agriculture, engineering, medical, textile, leather technology as well as ICT. Madrasahs have alike core courses as in the general stream of primary, secondary, and post-secondary levels but have added stress on religious studies (MoE 2018a).

4.2.3 Governance in Education System: In Bangladesh, two key ministries along with their attached departments, directorates, and autonomous bodies are responsible to manage and administer the education system. In the education sector, MoPME and MoE are mainly responsible for education. MoPME is responsible for primary and non-formal education while MoE is responsible for secondary, higher secondary, and higher education. Under the MoPME, Directorate of Primary Education, National Academy for Primary Education, Compulsory Primary Education Implementation Monitoring Unit, Shishu Kollan Trust and Bureau of Non-formal Education are playing vital roles for ensuring the education of the children of Bangladesh.

MoE has 2 divisions namely 1. Secondary and Higher Education Division and 2. Technical and Madrasa Education Division. Under the Secondary and Higher Education Division, University Grants Commission, Directorate of Secondary and Higher Secondary Education, National Academy for Educational Management, Education Engineering Department, BANBEIS, Directorate of Inspection and Audit, National Curriculum and Textbook Board, NTRCA, Bangladesh National Commission for UNESCO, Prime Minister Education Trust, International Mother Language Institute, Non-Government Teacher Employee Retirement Benefit Board and Non-Government Teachers and Employee Welfare Trust are carrying out specific functions while under the Technical and Madrasa Education Division, Directorate of Technical Education, Directorate of Madrasa Education, Bangladesh Madrasa Teachers' Training Institute, Bangladesh Technical Education Board, National Computer Training and Research Academy and Bangladesh Madrasa Education Board are performing different duties.

Bangladesh has formulated numerous legal instruments to govern the education system. Among the legal instruments, the National Education Policy 2010 is a highly significant one. Other key legal instruments for Pre-Primary and Primary Education are Compulsory Primary Education Act 1990, ECCD Policy 2013, Government Primary School Teachers Recruitment Rules 2013, Teacher Transfer Guideline of Government Primary School 2015, Primary Education Completion Examination Policy (Revised) 2016, Government Primary School Grading Policy 2017, Government Primary School Teacher Transfer Guidelines 2018, and Free Book Distribution Policy for Primary Education.

In the Secondary and Higher Secondary Education in Bangladesh, an important legal instrument is the Non-government Teachers' Registration and Certification Act 2005. Under the Act, the NTRCA was established in March 2005 to ensure quality teaching in classrooms of all non-government educational institutions: junior high schools, secondary schools, colleges, madrasahs, technical schools and vocational institutions of the country.

There are two key legal instruments for Non-Formal Education: Non-Formal Education Policy 2006 and Non-Formal Education Act 2014.

4.3 The National Education Policy, 2010

The policy has been adopted to ensure quality and inclusive education for all so that children can learn appropriate and equal learning in a suitable environment and can share their learnings. It has also emphasized on the quality teacher, an increase of the teacher ratio compared to students, update curriculum, and proper infrastructure.

The policy covers the areas of Pre-Primary Education, Primary Education, Adult, and Non-formal Education, Secondary Education, Vocational and Technical Education, Madrasa Education, Religious and Moral Education as well as Higher Education. Several types of educational systems such as General (Bangla and English version), English Medium, Kindergarten, Madrasa (Ebtedayee and Aliya), Vocational (Technical), etc. have been marked in the policy.

4.3.1 Introduction of Pre-primary Education: The 'National Education Policy 2010' recognized the importance of pre-primary education for children of 4 to 6 years old. The main objective of pre-primary education is to create a conducive environment for children of under 6 so that they can learn with enjoyment for the development of their universal sense of humanity. As per this policy, the children must undergo a year pre-primary education before primary education and in the future, pre-primary education will be extended up to 4+ children. Under this policy, the government has the provision for creating posts and equipping classrooms for a pre-primary class in every primary school.

4.3.2 Primary Education: As primary education is the backbone of the country, the government ensures access for all sections of the children in this level irrespective of their religion, ethnicity, geographical difference, and physical condition under the guideline of the policy. However, the challenges in this stage are quality teachers, equal facilities for all regions, infrastructure constraints, adequate training, etc. One significant change brought in the policy is the extended

primary level education up to class VIII from class V. The designated age, for the children, for admission in the primary level is 6+ and the ratio of teacher and student is 1:30 under this policy. Class VI has been started in 764 primary schools till 2016 to implement the Education Policy 2010 (DPE 2018).



To introduce a non-discriminatory education system, uniform curricula as well as syllabus will have to be followed in some specific subjects at the primary level. However, schools can teach extra subjects or issue in addition to those specified subjects taking permission from the relevant authorities. In line with the policy, the government will take special measures to ensure the participation of ethnic, disable, and disadvantaged groups. The school authority will ensure a conducive and learning environment for the students in the school so that they can learn by playing and joyfully.

4.3.3 Secondary Education: As per the policy, secondary education ranges from grades nine to twelve. After finishing this level, students can enroll themselves in different levels of tertiary education or vocational education or skill. Even, some of them can join the job sector at this level. Therefore, the main objectives at this level are:

- to help in enhancing latent intellects and inner faculties of the students;
- to equip the students in such a way so that they can compete in the job market;
- to impart quality education etc.

In the secondary level, there will be three streams i.e. general (Bangla and English Version), Madrasha, and Technical education. High schools need to add classes of eleven and twelve under this policy and higher secondary colleges need to open classes of nine and ten which is a tremendous change brought under this policy. The policy had the goal to have a teacher-student ratio to 1:30 by 2018 (MoE 2010).

4.4 The Situation of Child Education in Bangladesh

One of the fundamental human rights is access to quality education and it plays a positive role to access other essential rights. It is a powerful tool for the marginalized as well as disadvantaged people to participate fully as citizens since it promotes an individual's confidence, freedom, empowerment, and yields important development benefits. Despite huge success during recent times, millions of children and adults are still deprived of lifelong educational opportunities in Bangladesh which occurs mainly because of poverty, child labour, child marriage and prevailing gaps of the education system, etc.

4.4.1 Situation of Pre- Primary and Primary Education: The Government of Bangladesh recognized in the National Education Policy 2010 that there should be a separate pre-primary class for children aged 5+. Enrolment in pre-primary school in number was 35,78,384 in 2018. Huge amount of money and manpower have been allocated under the PEDP-3 for incorporating PPE to primary schools.

Children mostly receive their early childhood education at home from parents and other adults. Children of families whose members are not educated in most cases remain unattended and no early childhood education is available for them.

In the case of primary education, for both girls and boys, Bangladesh has achieved significant improvement since the dropout rate as well as gender parity gap reduced tremendously, and the enrolment rate has increased largely. The gender parity is now in favour of girls and their percentage is 50.75 in primary education. The country has reached the target of MDGs, especially for gender parity. In primary education, the NER of boys and girls in 2018 is 97.55 Vs 98.16 percent and overall NER 97.85 percent. The NER of boys and girls in 2017 was 97.66 Vs 98.29 percent and overall NER was 97.97 percent. It is found that in 2018 the NER has been reduced slightly compared to 2017. The overall NER in 2005 was 87.2. It is appreciating that the NER has increased gradually from 2005 but still the dropout rate in primary education is very high. In 2018, the dropout rate stands at 18.6 percent which was 47.2 in 2005. This means that a huge number of children remain deprived of primary education.

The government has taken several initiatives to ensure primary education for all children such as bi-stipend for 13 million children and School Feeding Programme. Under the School Feeding Programme in 15,700 primary schools of 93 poverty-stricken upazilas, 30,00,758 students are getting food at schools and this programme is likely to be extended with the support of the World Bank. The introduction of the PEC exam in 2009 is a kind of incentive for the parents as well as students to continue their studies and consequently, survival rates to Grade 5 have increased. On the other hand, Decentralized School Level Improvement Plan-SLIP is playing a crucial role to increase the number of students in the primary level.

Table 9: Child-focused Education Indicators/Data of Primary Education at a Glance

Indicator/Data Type	Value	Year
Number of schools (including Ebtedayee and high madrasha attached Ebtedayee)	134147	2018
Number of total Students (including Ebtedayee and high madrasha attached Ebtedayee)	17338100	2018
Number of girl students in Percentage	50.75	2018
Teacher Student Ratio (TSR)	1:25	2018
Number of special needs children Enrolled (children with a disability)	45977	2018
Net Intake Rate (NIR) in percentage	96.48	2018
Net Enrolment Rate (NER) in percentage	97.85	2018
Net Enrolment Rate (NER) Boys in percentage	97.55	2018
Net Enrolment Rate (NER) Girls in percentage	98.16	2018
The dropout rate in percentage	18.6	2018
PEC Exam pass rate	97.59	2018
PEC Exam pass rate Girls	97.68	2018
Ebtedayee Education Completion Exam pass rate	97.69	2018
Ebtedayee Education Completion Exam pass rate girls	97.94	2018

Source: BANBEIS

In the primary level, education is provided by 25 types of providers under 5 broad categories. However, among 6 primary schools at least 1 does not have any functioning toilet and the overall percentage is 17. In 2010 only 31 percent of government schools had facilities of water points in good condition which stood to 72 percent in 2013 that also indicate that there is still room for huge improvement for portable drinking water category (UNICEF 2015).

4.4.2 Situation of Secondary Education: In secondary education, the number of girl students is also higher than boys. Overall NER in 2018 is 53.10 and the NER for boys is 47.51 while for girls it is 59.00. In 2017, the overall NER was 54.68. The NER decreased by 1.58 percent in 2018 compared to 2017. Teacher Students Ratio stands in secondary education 1:45 and in the Education Policy 2010, the expected ratio is 1:30 by 2018. Among the teachers of the junior secondary schools, secondary schools and schools and colleges (school section), 66.86 percent are trained which means 33.14 percent of teachers did not receive training. As per the statistics of 2018, 2.59 percent of institutions do not have the arrangement of pure drinking water while 6.48 percent of institutions do not have a separate toilet for girls. In 46.95 percent of institutions do not have handwashing facilities.

Table 10: Child-focused Education Indicators/Data of Secondary School Education

Indicator/Data Type	Value	Year
Number of total schools (including 626 upgraded primary schools having students from grade VI to VIII)	20465	2018
Number of total Students	10475100	2018
Number of girl students in Percentage	53.99	2018
Teacher Student Ratio (TSR)	1:45	2018
The Average number of teacher per institution	11	2018
Number of trained teachers in percentage	66.86	2018
Number of special needs children Enrolled (children with a disability)	66093	2018
Net Enrolment Rate (NER) in percentage	53.10	2018
Net Enrolment Rate (NER) Boys in percentage	47.51	2018
Net Enrolment Rate (NER) Girls in percentage	59.00	2018
Number of institutions having electricity connection in percentage	92.03	2018
Number of institutions having multimedia in percentage	78.63	2018

Indicator/Data Type	Value	Year
Number of institutions having computer facility in percentage	87.24	2018
Number of institutions having computer teacher in percentage	79.18	2018
Number of institutions having internet facility in percentage	80.80	2018
Number of institutions having pure drinking water in percentage	97.41	2018
Number of institutions having separate toilet facilities in percentage	93.52	2018
Number of institutions having a ramp in percentage	21.75	2018
Number of institutions having computer lab in percentage	30.77	2018
Number of institutions having a web site in percentage	43.15	2018
Number of institutions having handwashing facilities in percentage	53.05	2018
Institutions publicly managed in percentage	3.24	2018
Institutions privately managed in percentage	96.76	2018
Number of schools having digital attendance for students	6.35	2018
Number of schools having digital attendance for teachers	8.82	2018

Source: BANBEIS

4.4.3 Situation of Higher Secondary (College) Education: Higher secondary education is provided by schools and colleges and higher secondary colleges which are also known as intermediate college. The total number of intermediate colleges is 2,603 that is 57.91 percent of the total colleges in 2018. The percentage of total enrolment in intermediate college is 17.33 percent out of 4.278 million enrolled students of the college education in 2018.

Table 11: Child-focused Education Indicators/Data of Higher Secondary (College) Education

Indicator/Data Type	Value	Year
Number of total schools and college/intermediate college	2603	2018
Number of total schools and college/intermediate college Female	389	2018
Number of total students	741295	2018
Number of girl students	381165	2018
Enrolment in school and college (college section) in percentage	53	2018
Enrollment in higher secondary college in percentage	50	2018
Teacher Student Ratio (TSR) in school and college (college section)	1:19	2018
Teacher Student Ratio (TSR) in higher secondary college	1:16	2018

Source: BANBEIS

4.4.4 Situation of Madrasha Education: Madrasha education has turned into a big sub-sector of education in Bangladesh dealing with over 3.81 million students including the Ebtedayee. This education is commonly known as a religious stream that is distinct from the general stream. The Ebtedayee madrashas provide primary equivalent education, Dhakhil madrashas secondary equivalent, Alim madrashas higher secondary, Fazil madrashas degree equivalent while Kamil madrashas provide masters equivalent education of general stream. Among all categories of madrashas, 58.28 percent of them use computers in academic/pedagogy purposes.

Table 12: Child-focused Education Indicators/Data of Madrasha Education

Indicator/Data Type	Value	Year
Number of Ebtedayee madrashas	5164	2018
Number of students in Ebtedayee madrashas	348936	2018
Number of total Dakhil Madrasha	6553	2018
Number of students in Dakhil madrashas	1352590	2018
The ratio of teacher students in Dakhil madrashas	1:21	2018
Number of teachers trained in dakhil madrashas in percentage	24	2018
Number of students in Alim Madrashas	442875	2018
Number of Alim Madrashas	1412	2018
The ratio of Teacher students in Alim Madrashas	1:21	2018

Source: BANBEIS

4.4.5 Situation of Child Education in the Urban Areas of Bangladesh: A survey was conducted during 2016 in the urban areas of Bangladesh by the BBS and UNICEF, titled 'Child Well-Being Survey in Urban Areas of Bangladesh 2016' which shows some statistics regarding the situation of education of the children in urban areas. The important findings are:

- The primary school adjusted NAR of the children was 85.5 percent.
- The adjusted primary school NAR for children of CC non-slums was 85.0 percent, other urban areas 86.8 percent while it was 69.4 percent in CC slums. There is a little variation of the NAR by division, but some variations have been found by the education of mothers as well as the status of the socio-economic condition.
- Primary School Completion Rate was observed extensively higher in other urban areas (92.8 percent) compared to CC non-slums (77.4 percent) and CC slum areas (73.1 percent). The Primary School Completion Rate in Rajshahi division was 99.4 percent (highest) while it was 81.8 percent in the Dhaka division (lowest).
- The effective transition rate to secondary school was 97.3 percent.
- Secondary school adjusted NAR was 63.1 percent which means children of 11 to 15 years were attending secondary school or higher. The NAR at the secondary level is considerably lower than primary school NAR (85.5 percent).
- NAR of male children in secondary education was lower (57.9 percent) than female children (68.4 percent).
- The secondary school NAR varied notably in terms of urban domains. It was 62.0 percent in CC non-slums, other urban areas 65.5 percent while only 33.3 percent in CC slum areas. NAR at the secondary level was highest in Barisal (74.4 percent) while lowest in the Dhaka division (59.4 percent).
- GPI for primary school adjusted NAR was 1.05 that indicates an advantage in the attendance of girls over boys in primary school or higher. The index rises higher to 1.18 for secondary education. The advantage of girls was predominantly prominent in children with less-educated mothers as well as children from poorer households (BBS & UNICEF 2017).

It should be noted here that the condition of street children is very vulnerable as they do not have, normally, any access to school and they are out of any statistics. It is reported that at present, there are 0.7 million children live in the streets of Bangladesh and among them, 250,000 live in capital Dhaka alone. Therefore, systems of education need to be relaxed and flexible for them so that they can continue or get access to any form of education such as SCE or NFE. The main challenge, in this case, is to introduce the equivalent system with its counterpart formal education.

4.4.6 Situation of Education of the Children with Disabilities: Like other countries, children with disabilities are the most vulnerable and marginalized in Bangladesh. In 2002, only 4 percent of children with disabilities (1.6 million) get access to primary school. Among them, most of them had mild to moderate physical problems. But the journey of achievement started since then. Under the PEDP-2 with the duration of 2004-2011 inclusive education was incorporated first which addressed some of the barriers faced by the children having disabilities.

In PEDP-3, holding the period of July 2011-December 2017, priority was given to make schools more accessible. Therefore, the enrolment of children with disabilities in the government and registered NGO primary schools had been increased as per the Annual Education Sector Performance Report of 2013. As per statistics of BANBEIS, the number of special needs children (disable) enrolled in government primary schools in 2018 is 45,977 and in all types of primary schools, NGO run schools and Ebtedayee madrasahs, the number of students is 96,385. In secondary schools, the total number of children with disabilities up to grade twelve in 2018 is 66,093 and among them, 30,311 are girls while in intermediate colleges, the number of students is 7,440 including 3,010 female students. In Dhakhil and Alim madrasahs, the total number of students with disabilities is 9,927 including 4,597 girls/female students.

However, the concept of inclusive education remains still at an emerging stage in Bangladesh. Even, there is a lack of awareness among different stakeholders about the concept. Therefore, this concept further needs to address some social problems relating to children such as poor, disadvantaged children and children with physical/intellectual

disabilities. It is expected that special measures will be implemented for the students with disabilities through PEDP-4 (NEWAGE 2018).

There is an acute need for reformation in the mainstream schooling system to address the various needs of children with disabilities. Besides, more initiatives are required in secondary schools since enrolment tends lower among children with disabilities.

Another barrier for the children having disabilities is the infrastructure barrier at the secondary level. Since most of the secondary level institutions are multi-stored buildings, it is very tough for children with disabilities to continue their education. Among the secondary schools, only 21.75 percent have Ramp facilities in 2018. On the other hand, teachers are not properly trained to handle children with disabilities in Bangladesh.

For including persons with disabilities in skills development activities a national strategy was formulated in 2013 by the Government of Bangladesh. The main philosophy of the strategy was to include disabled children in the larger society. Disable children need skill-oriented education and training so that they can get a job by finishing primary or secondary education and can overcome the deprivation caused by existing belief and stigma.

4.5 Education - Supports of UNICEF

UNICEF has contributed a lot in achieving the targets of MDGs and is contributing to achieving several targets of SDGs. The journey of UNICEF in Bangladesh has started before 60 years back and the organization is working in the country in collaboration with the Government, DPs, Civil Society Organizations, and local people. And the progress or results are remarkable in reducing preventable child deaths, ensuring the enrolment of more boys and girls in primary education, reducing gender inequality in schools, and ensuring more peoples' access to safe water and nutritious food during this long 60 years. Though the future of Bangladesh is promising, there are lots of challenges in this case. However, UNICEF expressed its interest and commitment to continue its supports and efforts to the Government of Bangladesh and its other stakeholders in the country to improve the survival, development, protection, and participation of women and children, especially the most vulnerable. By this time, the Government of Bangladesh and UNICEF Bangladesh have jointly adopted Country Programme 2017-2020 for Bangladesh which has been prepared to align with the 7th Five Year Plan.

The Country Programme 2017-2020 intends to protect the school-age children as they are facing enormous challenges particularly in getting high-quality education as well as protection. As per the National Student Assessment 2013 for Grades 3 and 5, only 1 in 4 children in grade 5 have the necessary competencies in mathematics and Bangla (DPE 2014). Functional gender-or disability-responsive water, sanitation, and menstrual hygiene facilities are absent in most of the schools. There is a lack of safety and prevailing high sexual harassment as well as abuse in public places and on way to schools that create dropout of girls from schools. It is projected that around 6.2 million children are out of school and among them; 2.6 million are primary school age while 1.1 million are pre-primary school age. Most of the out of school children live in urban slums and hard-to-reach areas. Geographical disparities are also found (UNICEF 2015). Moreover, a recent survey anticipated that 1.7 million children are involved in child labour and a maximum of them are boys, and 1 in every 4 of them are between the age of 6 and 11 years. Therefore, the general vision of the country programme 2017-2020 is that all the children of primary school age whether boys or girls, will learn equitably in a healthy, secured as well as a resilient environment. Hence, several programmes have been initiated by the GoB and UNICEF especially to strengthen equitable coverage of inclusive high-quality formal and non-formal primary education as well as to prevent violence against children in schools and communities.

Support of UNICEF has also been extended to strategic advocacy to carry out support toward better investment for quality education and confirm the progress of the children to secondary education that means informal, non-formal, and second-chance education. Some research projects are being carried out for generating evidence to see the returns of education relating to an investment in WASH in schools together with the benchmarking of WASH facilities as well as practices, promoting handwashing, hygiene and taking up of technical designs in support of inclusive and climate-resilient WASH in the schools. Support of UNICEF extended to-

Early Learning: For ensuring 100 percent primary education, UNICEF has initiated different programmes and one

of them is the Early Childhood Development-ECD programme. Children who get the opportunity of the ECD programme are likely to enroll in primary education more than those who do not get this benefit.

Mainstreaming of Pre-Primary Education: Bangladesh Government introduces a one-year pre-primary education under the Education Policy 2010 and it is mandatory for all primary schools. UNICEF is also providing support in this programme which opens a new era in the country.

Comprehensive Early Childhood Care and Development Policy: The Comprehensive ECCD Policy 2013 is another UNICEF supported initiative for increasing the percentage of primary and quality education. This programme is being implemented with the collaboration of UNICEF and the MoWCA (MoWCA 2018b).

Early Learning Centres-ELCs: UNICEF has developed early learner centre for providing centre-based care and education for the vulnerable children ages between 4 and 6 years. Under the project of the Early Learning for Child Development and PPE programme more than 1.1 million children were covered from the disadvantaged groups such as CHT, slums, etc. since 2006. Teachers of primary school are also getting training under this programme and teachers are supporting children for developing their skills in terms of social and cognitive skills i.e. story-telling, singing, indoor and outdoor games, toys making with the materials brought from home, drawing, show-and-tell, question-and-answer sessions, and age-suitable early literacy and numeracy materials.

Education for Teachers and Parents: For ensuring proper functioning of Early Learning Centres, UNICEF is providing training to one pre-school teacher for each Early Learning Centre. Moreover, parents are inspired to visit the centres so that they can learn how to give age suitable interactive care to their young children at home.

Working with Primary Schools: Children are encouraged to stay at school by the Early Learning Centres through providing support at the transition time. Research shows that 94 percent of the children who had participated in the pre-school in the CHT ELCs have enrolled afterward in primary schools. Subsequently, the transition rate stands at 99 percent in the primary schools.

Food and Learning: For the Pre-School children attending the ELCs in the CHT region, UNICE provides micronutrient fortified biscuits taking assistance from the UN World Food Programme. Children are motivated in attending classes regularly through this programme. The programme also helps in improving the nutritional status, decreasing hunger, increasing the capacity of the children for concentration.

Early Learning for All: UNICEF is working for ensuring early learning for all children in all the regions of the country as it is very essential for developing their capability through education. Therefore, UNICEF is working in this regard at the policy level with the government as well as using the public media.

In true sense, UNICEF and the Government of Bangladesh are committed together to promote the global movement of Education for All in Bangladesh. Goal one of the movement is to extend and get better early childhood care as well as education, particularly for highly vulnerable children.

4.6 Education, SDG-4 and Bangladesh

Bangladesh has obtained enormous progress in achieving MDG targets especially in bringing gender parity in primary and secondary education, reducing child and maternal mortality rate, escalating access to improved drinking water and improved sanitation, reducing poverty, etc. Hence, the country has the confidence to reach the targets of the SDGs. The Government of Bangladesh has by this time adopted some initiatives for attaining the targets of SDGs such as the Seventh Five-Year Plan 2016-2020 that seeks to increase economic growth which is inclusive, pro-poor and adapted to an economy progressively powered by urban productivity as well as environmental sustainability. Several plans have also been outlined for accomplishing the targets of SDG-4 which is related to education.

Goal-4 aims to ensure inclusive and equitable quality education and promote lifelong learning opportunities for all (UN 2018). Targets and indicators of the Goal-4 related with the children may be viewed in the following table.

Table 13: SDG-4 Targets and Indicators

Target No.	Targets	Indicators
4.1	By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes	4.1.1 Proportion of children and young people (a) in grades 2/3; (b) at the end of primary; and (c) at the end of lower secondary achieving at least a minimum proficiency level in (i) reading and (ii) mathematics, by sex
4.2	By 2030, ensure that all girls and boys have access to quality early childhood development, care, and pre-primary education so that they are ready for primary education	4.2.1 Proportion of children under 5 years of age who are developmentally on track in health, learning, and psychosocial well-being, by sex 4.2.2 Participation rate in organized learning (one year before the official primary entry age), by sex
4.3	By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university	4.3.1 Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex
4.5	By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations	4.5.1 Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflict-affected, as data become available) for all education indicators on this list that can be disaggregated
4.7	By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and culture's contribution to sustainable development	4.7.1 Extent to which (i) global citizenship education and (ii) education for sustainable development, including gender equality and human rights, are mainstreamed at all levels in (a) national education policies; (b) curricula; (c) teacher education; and (d) student assessment
4.a	Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all	4.a.1 Proportion of schools with access to (a) electricity; (b) the Internet for pedagogical purposes; (c) computers for pedagogical purposes; (d) adapted infrastructure and materials for students with disabilities; (e) basic drinking water; (f) single-sex basic sanitation facilities; and (g) basic handwashing facilities (as per the WASH indicator definitions)
4.c	By 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially the least developed countries and small island developing States.	4.c.1 Proportion of teachers in (a) pre-primary; (b) primary; (c) lower secondary; and (d) upper secondary education who have received at least the minimum organized teacher training (e.g. pedagogical training) pre-service or in-service required for teaching at the relevant level in a given country.

In Bangladesh, the Government recognizes education as a means of decreasing poverty and upgrading the quality of life for the children. Therefore, stress has been given on education. It is expected that Bangladesh will be able to achieve the targets and fulfill the indicators of the SDG-4 within 2030 overcoming different challenges by the Central and Field Administration.

4.7 Role of Field Administration toward Education of Children

Field Administration has been playing a multi-dimensional role in improving the education especially pre-primary, primary, secondary, and higher secondary education of the children across the country.

4.7.1 Role of Field Administration toward Pre-primary and Primary Education

4.7.1.1 Upazila Education Committee: MoPME has formed Upazila Education Committee for accomplishing certain functions for the improvement of primary education. The notification of the Upazila Education Committee has been circulated on 12 March 2014 as the latest which is applicable for all the districts except the three hill districts. The hill districts are to form policy in line with this for their areas (MoPME 2014). As per the notification, the formation and functions of the Committee have been shown in the following table.

Table 14: Upazila Education Committee

1.1	Member of Parliament of the area	Advisor
1.2	Upazila Parishad Chairman	Chairman
1.3	Upazila Nirbahi Officer	Executive Vice-Chairman
1.4-1.5	Vice-Chairman of the Upazila Parishad, 2 person (their serial will be determined as per their age)	Vice-Chairman
1.6	Upazila Health and Family Planning Officer	Member
1.7	Upazila Engineer	Member
1.8	Mayor of Municipality (if any, as per portfolio)	Member
1.9	One Union Parishad Chairman (nominated by honourable Member of Parliament of the area)	Member
1.10	One headmaster/headmistress from the secondary and higher secondary schools of the upazila (nominated by District Education Officer)	Member
1.11	One eminent patron of education residing in the upazila, Female (nominated by honourable Member of Parliament of the area)	Member
1.12	One eminent patron of education residing in the upazila, Male (nominated by honourable Member of Parliament of the area)	Member
1.13	One Managing Committee Chairman of the Government Primary schools (nominated by DC in consultation with the District Primary Education Officer)	Member
1.14	One headmaster/headmistress from the Government Primary schools (nominated by DC in consultation with the District Primary Education Officer)	Member
1.15	Instructor of the Upazila Resource Centre	Member
1.16	Upazila Education Officer	Member-Secretary

The notification describes that in absence of the Committee Chairman the Executive Vice-Chairman will perform all of his duties. A quorum will require at least nine member's presence in the meeting. The notification also describes that if the Committee Chairman becomes unable to call/urge meeting of the committee or do not call/urge meeting of the committee, the Executive Vice-Chairman will call meeting of the committee and take measures to preside over the meeting. As per the notification, following are the duties and functions of the Upazila Education Committee:

- To observe and review the overall condition and advancement of primary education of the upazila;
- To supervise the management of all primary schools of the upazila, regular attendance of the students, and the matter of performing duties properly of the teachers;
- To monitor whether the primary schools are inspected regularly by the Upazila Education Officer and the Assistant Upazila Education Officers or not as per Government instruction;
- To review and take necessary steps to increase enrolment rate of the students in the primary schools of the upazila, to prevent the rate of dropout of the admitted students, to ensure the primary education of the children aged 6-10 years, to check the accuracy of the child Survey, etc.;
- To recommend for registration of the non-government schools as per existing policy;
- To recommend for inclusion in the M.P.O of schools in line with the present policy and recruitment of teachers in the vacant posts after checking;
- To prepare a priority list of schools for reconstruction and repair for development of the schools of the upazila; and
- To perform other duties as assigned by proper authorities from time to time.

4.7.1.2 Metropolitan Primary Education Committee: For metropolitan areas, a notification has been made to form Metropolitan Primary Education Committee on 10 August 2015 canceling the previous notification which was circulated on 10 August 2009 by the MoPME. The committee comprises of 14 members headed by the Divisional Deputy Director of Primary Education. The committee includes a competent official nominated by the DC. DPEO works as Member-Secretary in the committee. The Committee is supposed to sit at least in one meeting every month. Tenure of the committee is 3 years from the date of notification (MoPME 2015). The committee performs the following activities:

- To observe and review the overall condition and advancement of primary education of the metropolitan areas;
- To monitor whether the primary schools are inspected regularly by the Thana Education Officers and the Assistant Thana Education Officers as per Government instruction or not;
- If necessary, members of the committee individually or jointly will inspect different primary schools of the metropolitan area and submit the report to the chairperson;
- To review and take necessary steps to increase enrolment rate of the students in the primary schools of the metropolitan area, to prevent the rate of dropout of the admitted students, to ensure the primary education of the children aged 6-10 years, to verify the accuracy of the child Survey, etc.;
- To prepare a priority list of schools for reconstruction and repair for development of the schools of the metropolitan area;
- Identifying the areas having no primary school and assessing the needs of schools in the metropolitan areas and then selecting a new place to relocate primary schools and send a proposal to the proper authority in this regard;
- To perform other duties as assigned by proper authorities from time to time.

It is assumed that Metropolitan Primary Education Committee has an important scope to play a significant role in the metro areas in the case of improving the indicators of primary education.

4.7.1.3 Divisional, District and Upazila Taskforces: Non-Government Primary Schools (Bangla and English Medium) Registration Rules 2011 was formulated under the 'Registration of Private Schools Ordinance 1962 (Ord. XX of 1962) for Non-Government schools along with nursery, preparatory and kindergarten schools and was expected that the nursery, preparatory and kindergarten schools will be registered and run in line with the promulgated rules but not happened so. Many educational institutions were built up and run violating the rules and found that the institutions were not following rules in terms of infrastructure, student admission, fixing admission fees, use of technology, and inclusion of textbooks. Simultaneously, news media had the news that so many books are creating mental pressure upon the children. Under this circumstance, Divisional, District, and Upazila Taskforces were formed to recommend on what to be done verifying the existing nursery, preparatory and kindergarten schools as per the Rules of 2011 (MoPME 2016). The Taskforces were formed as shown in the table.

Table 15: Divisional Taskforce/In the Case of Metropolitan Cities, District and Upazila Taskforces

Divisional Taskforce/In the Case of Metropolitan Cities	1	Divisional Commissioner	Chairperson
	2	DIG	Member
	3	Director, Local Government	Member
	4	Concerned Deputy Commissioner	Member
	5	Divisional Deputy Director	Member-Secretary
District Taskforce	1	Deputy Commissioner	Chairperson
	2	Superintendent of Police	Member
	3	District Education Officer	Member
	4	Deputy Director, Social Services	Member
	5	District Primary Education Officer	Member-Secretary
Upazila Taskforce	1	Upazila Nirbahi Officer	Chairperson
	2	Upazila Secondary Education Officer	Member
	3	Upazila Social Services Officer	Member
	4	Officer in charge	Member
	5	Upazila Primary Education Officer	Member-Secretary

Working Area of the Taskforces: Divisional Taskforce/In the Case of Metropolitan Cities had to work in the divisional and metropolitan areas, District Taskforce in the district/municipal areas and the Upazila Taskforce in the upazila/municipal areas. The committee had to perform the following activities:

- a. Examination of documents relating to the permission/registration of the establishment of all existing non-government primary (Bengali and English Medium) schools (Nursery/Preparatory/Kindergarten) and assessment of school requirements.
- b. Verification of conducting the study, school co-curriculum, financial activities, and class-wise textbook inclusion.
- c. Examination of school management activities, student admission, fee determination and collection, student-teacher ratio, infrastructural facilities, use of information technology and other relevant information, and
- d. Sending specific recommendations to the ministry within a month regarding what is to be done.

Divisional Taskforce had to give instruction and advice to District/Upazila Taskforce on all matters as required while District Taskforce had to give instruction and advice to Upazila Taskforce on all matters as required.

As per this notification, the role of the Field Administration is enormous in the case of quality education and in preventing indiscipline in the education sector.

4.7.1.4 District Interview Board for Recruiting Government Primary School Teachers: DCs are playing a very significant role in the recruitment process of primary school teachers. They are leading the Interview Board at the district level formed for recruiting government primary school teachers. The Interview Board is comprised of three members. DPEO works as Member-secretary in the Board while the other member is a scholar or a patron of education or a former school teacher residing in the district nominated by the DPE (MoPME 2010). In selecting qualified and quality teachers, DCs and other members have a wide scope to play an important role through this Board to ensure quality education.

4.7.1.5 Other Duties and Responsibilities of DCs and UNOs toward Primary Education: DCs perform the following activities for primary education (Cabinet Division 2018b; Panchagarh District 2018)-

- a. to supervise the admission functioning of all the children suitable to admit into the primary schools.
- b. to supervise and coordinate the admission test of primary schools at the primary level.
- c. to supervise the activities to prevent dropout at primary schools.
- d. to coordinate and supervise the free book distribution programme.
- e. to supervise and coordinate the PEC exam.
- f. to inspect primary schools and send a report to the concerned authorities.
- g. to conduct Mobile Court against note-book/guide-book printing, publishing, and sale as per the Note-Books (Prohibition) Act, 1980.
- h. to supervise the activities of bi-stipend distribution.
- i. to work as chairperson of the committee for selection of the best teacher, best school at the district level, etc.
- j. to perform the activities related to the recruitment of primary school teachers.
- k. to supervise and coordinate the club activities.
- l. to supervise the construction, repair, and maintenance schemes of the primary schools for smooth completion.
- m. to motivate and initiate activities for the establishment of new primary schools in the disadvantaged areas.
- n. If necessary, to initiate activities for new examination centre.

UNOs also perform similar activities at the upazila level under the guidance of the DCs.

4.7.1.6 Inspection and Addressing Different Issues: Divisional Commissioners, DCs and UNOs inspect the primary schools and in doing so, they can intensively oversee the following areas for smooth running and functioning of the schools: committee formation and its activities; resource management and maintenance; School Level Improvement Plan-SLIP; unified and quality education; construction, reconstruction and maintenance work; Second Change Education in the primary education under non-formal education; training of the teachers; education during a disaster; teachers-parents meeting; Cub Scouting activities, co-curricular activities; PPE; and role of LGIs.

During inspection, the officials can give necessary guidelines to the teachers and the SMCs to solve any problem or issues while they can also reflect serious issues in the inspection report and send the report to the DPE and the MoPME for required action.

4.7.2 Role of Field Administration toward Secondary and Higher Secondary Education

4.7.2.1 General Roles and Responsibilities: Role of Field Administration in the case of Secondary and Higher Secondary Education may be found in different circulars, notifications, charter of duties, etc. Following duties and responsibilities are accomplished by DCs at the district level (Cabinet Division 2018b; Panchagarh District 2018):

- a. to supervise and coordinate the admission test activities of the government and non-government high schools and colleges for their better accomplishment.
- b. to supervise the dropout prevention activities of the admitted students.
- c. to supervise and coordinate the free book distribution activities of the students.
- d. to organize, supervise and coordinate the JSC, JDC, SSC, HSC, and other examinations of the equivalent and control of unfair means in public examinations.
- e. to inspect the high schools and send report to the concerned authorities.
- f. to conduct Mobile Court to prevent note-book/guide-book printing, publishing, and sale at secondary level textbooks as per the Note-Books (Prohibition) Act, 1980.
- g. to supervise the bi-stipend programme.
- h. to supervise the Scout and Girls Guide activities.
- i. to supervise the construction, repair, and maintenance schemes of the secondary schools for smooth completion.
- j. to adopt necessary activities to improve the quality of education.
- k. to maintain law and order in the examination centres.
- l. to oversee the management activities of the dakhil madrasahs as per the regulation of Bangladesh Madrasah Education Board.
- m. to oversee the management activities of the lower secondary, secondary schools, higher secondary schools, colleges, Alim, and upper madrasahs as per education board regulations and encourage co-curricular activities.
- n. to supervise and coordinate the activities of the government secondary schools and dakhil madrasahs.
- o. to establish libraries and motivate students and others concerned in using libraries.
- p. to form committees against drug and aware students about the bad effects of drug addiction.
- q. to supervise the Bangladesh National Cadet Core-BNCC and Rover Scout activities at higher secondary/college level.
- r. to motivate and initiate activities to establish new schools and colleges in the disadvantaged areas.
- s. if necessary, to initiate activities for new examination centres.
- t. to adopt effective measures so that no anti-state activities can grow in the educational institutions.

It should be noted here that UNOs also perform the same and similar activities at the upazila level under the control of the DCs.

4.7.2.2 Overseeing the Activities of National Strategic Plan for Neurodevelopmental Disorder 2016-21: DCs have to oversee the implementation of the 'National Strategic Plan for Neurodevelopmental Disorder 2016-21' circulated by the Secondary and Higher Education Division of the MoE on 8 May 2018 and implemented by the officials and employees of its departments/sub-ordinate offices/organizations at field levels. The strategic plan has been made by the MoHFW with the assistance of Suchana Foundation and the Institute for Community Inclusion of the Massachusetts University of the USA (MoE 2018b). As per the circular, DCs can oversee the following activities:

- Confirming 100 percent admission of the learners in the secondary and higher educational institutions having autism and NDD;
- Awareness programme through orientation, workshop on autism and NDD for the secondary school teachers, managing committee members, and the mass people;
- Demonstration and circulation of the supplied leaflet, festoon and documentary to increase awareness for the establishment of educational rights of the students having autism and NDD;
- Observing the 'World Autism Awareness Day' and related other days in all educational institutions;
- Ensuring training of at least two teachers on autism and NDD of every secondary school to ensure the education of the students having autism and NDD;
- Education scholarship to every student having autism and NDD at the secondary level;
- Ensuring disabled-friendly infrastructure in all types of educational institutions for the students having autism and NDD;
- Ensuring participation of the students having autism and NDD in the co-curricular activities;
- Advisory discussion in the classrooms to grow sympathetic and empathetic attitude amongst the students in the educational institutions;
- Arranging entertainment for the students having autism and NDD;
- Adopting activities (advocacy, sensitization, awareness) to create cooperative and empathetic behavior amongst teachers, staff and the pupils;
- Ensuring admission of the students having autism and NDD in the nearest educational institutions from their residence;
- Keeping separate register for every student having autism and NDD and noting down their special needs, ability, limitations and behavioral disadvantages in the register;
- Arranging view exchange meeting every two months with the students and guardians in the educational institutions;
- Maintaining coordination on information exchange among the Ministry of Social Welfare, Technical and Madrasa Education Division, MoPME, MoWCA, and NGOs for service delivery.

4.8 Education of Children in Bangladesh-Key Challenges for Field Administration

Although success is huge in the education sector in Bangladesh, still there exist enormous challenges at all levels. Challenges may be discussed level-wise herein for Field Administration:

4.8.1 Challenges in Pre-primary and Primary Education

- The Comprehensive ECCD Policy, 2013 is very relevant and important for integrating child services with ECCD's multi-sectoral network and scope. For ensuring excellent education and human resources, the ECCD needs to emphasize primary and pre-primary level education. However, special programmes and care for special needs (disabled) and disadvantaged children need to be addressed by both systems. Without keen support and supervision of the Field Administration, these will not be achievable at the field level.

- As per the National Education Policy 2010, 1-year pre-primary schooling is mandatory for 5+ children which will be extended up to 4+ years later on. Although most of the 5+ children attend pre-primary classes in the government primary schools, data on the total number of 5+ children is not available as there is no linkage with the birth registration system. Therefore, the key challenge in this area is to interlink the pre-primary and primary education to the birth registration and health system, especially with the immunization system. Field Administration officials, especially Divisional Commissioners, DCs and UNOs can play a crucial role in this regard with the active cooperation of LGIs which is a robust task.
- Non-enrolment still remains a key challenge in primary education. In 2018, the NER in primary education is 97.85 percent which was 97.97 percent in the previous year. That means 2.15 percent of children were not enrolled in 2018 and in terms of figure, the number is enormous. To ensure 100 percent NER Divisional Commissioners, DCs and UNOs can chalk out a real action plan with the active assistance of LGIs, NGOs, and civil society.
- The dropout problem is a serious concern for the primary education sector as the rate remains 18.6 percent in 2018 although the rate is declining slowly. On the other hand, for aged 6, more than 1 in 4 children are out of school (26.8 percent) due to a very low attendance rate; but it can be prevented. The situation is actually very bad in the worst-performing upazilas since 45 percent of children are out of school which requires necessary action. In remote areas, especially in the CHT region, it is very tough to go to school because of the weak communication system, less educational institution and awareness of parents, the existence of superstition related to the modern educational system, high cost in terms of transportation, cultural barriers, etc.
- Children from poor families suffer as much as twice (27 percent) compared to the richest families (13 percent) in the case of education deprivation. In the urban slums and hard-to-reach areas, around 6.2 million children are out of school. Among them, 1.1 million are pre-primary school age whereas 2.6 million are primary level (UNICEF 2015).
- To overcome the challenges arise from poverty, the focus should be given on school meal feeding programmes, bi-stipends, and transport facilities for all schools especially in poverty-stricken and hard-to-reach areas.
Field Administration has a big scope in creating school meal/school feeding programme and transport facilities for all schools especially in poverty-stricken and hard-to-reach with the help of LGIs, NGOs, other organizations, communities, and rich persons, etc. In many places, Field Administration has been able to start school meal programme using local resources.
- Extending primary education up to class VIII in all primary schools as per the Education Policy of 2010 is a gigantic task. As per available data from BANBEIS only 626 Government Primary schools have been upgraded while DPE data shows that 764 schools have started class VI till 2016. Field Administration can prepare a priority list of schools in this regard based on certain criteria and send proposal to the Government to implement the plan.
- Efficient coverage and outcome from learning compared to global are also significant challenges for ensuring the sustainability of the achievement in primary level education and it is, of course, the area that requires even more attention. Quality education and outcomes from the learner remain a vital issue along with the number and quality of teachers, infrastructure, and so on impact in this case. Because of the huge number of students and less infrastructure, most schools run a double shift, therefore, teachers cannot give proper attention to the children and in the case of international standards, the position of Bangladesh is not up to the mark.
Therefore, ensuring the overall quality of primary education and learning outcomes are key issues at present. Although the target of TSR has been achieved, it requires more quality teachers with standard training before joining the classroom as well as other staff. Standard classrooms, neat and clean premises, toilet and handwashing facilities with soap, pure drinking water, ramp facilities, co-curricular activities, skill-based education, and inclusiveness are pre-requisite for quality education.
- Training for the teachers needs to be intensified and training should be imparted to teachers before they join the classroom. However, teachers get one year of in-service training. The National Academy of Primary Education-NAPE and Primary Teachers Training Institutes-PTI are responsible for providing training to the teachers. Therefore, these institutions need to be empowered in terms of capacity and skill for ensuring quality teachers as

well as overall education at the primary level. Need to impart continuous training to the officials managing the sector. However, training workshops, seminars, etc. may be arranged to increase skills of the teachers and officials at the upazila or district level under the auspices of District and Upazila Administration with the collaboration of DPE, LGIs, and NGOs which deemed to be a challenging task.

Union Parishad has the mandate to improve the primary and mass education as per the Local Government (Union Parishad) Act, 2009. Therefore, involving this LGI in primary education development remains a key challenge. Involving other LGIs widely with primary schools is also a key issue for improvement.

- PEDP-4, the ever biggest programme in primary education, for the period of five years to be ended on June 2023 will contribute to solving many of the challenges of the primary education sector and in ensuring inclusive, equitable and quality primary education enormously. The estimated cost of the programme is BDT. 38,397.16 crore. DPs including UNICEF is providing financial support to the GoB led programme. The programme also envisages imparting non-formal education to 10 lakh out of school children (NEWAGE 2018). In implementing the project, Field Administration may be involved extensively which seems to be a rigorous task.
- Supervision, monitoring, and accountability are critical issues for better results from primary education. Ensuring better planning, improving management capacity, proper use of resources and bi-stipends remain a vibrant issue for advancement.

4.8.2 Challenges in Secondary and Higher Secondary Education

- To bring uniformity and a unified education system is a key challenge in secondary education. As per the National Education Policy 2010, secondary education is to be extended up to class XII. Every school needs to add classes of XI and XII under the policy while colleges need to open classes of IX and X which is a tremendous challenge. Transforming these areas will necessitate huge infrastructures as well as quality teachers. Technical/vocational education also needs to be emphasized. A district-based plan can be made to address these issues which will require local resource mobilization and motivation. In these areas, Field Administration can play a central role which seems to be easy but difficult to do.
- Integration of Life Skills Based Education-LSBE is critical for adolescents at the secondary level. Adequate investment in technical and vocational education can reduce the additional pressure on secondary and tertiary levels. Since the dropout rate is very high at the secondary level, therefore, the government can introduce model vocational training institutions with special curriculum for the dropout and less educated adolescents for providing them skill-oriented education and training in line with the National Technical Vocational Qualification Framework. LGIs especially 'A' Class Municipalities, City Corporations and Zilla Parishads can introduce skill-oriented education and training with their resources and Divisional Commissioners as well as DCs can act as a catalyst in initiating and improving these activities.
- In South Asia, the performance of Bangladesh is very poor in the case of dropout at the secondary level. It is found that child marriage is one of the main reasons for the girl students for dropping out of school at primary and secondary levels. Overcoming this problem will require intensive application of the Child Marriage Restraint Act of 2017 by the Field Administration. No doubt that Executive Magistrates are playing a very significant role in this regard and this action may be further expedited while strong awareness against child marriage up to the root level may be created by the Upazila and District Administration. And in doing so, involving all LGIs is a gargantuan task.
- For overall quality secondary and higher secondary education and ensuring learning outcomes remain as major challenges in the sector. The TSR is 1:45 at present which needs to be 1:30 as per the Education Policy and at the same time requires more quality teachers with standard training as well as need other staff. Standard classrooms, neat and clean premises, separate toilet and handwashing facilities with soap, pure drinking water, ramp facilities, co-curricular activities, skill-based education, and inclusiveness are pre-requisite for quality education. For the children with disabilities, urban slums, third gender, the unprivileged, worst performing as well as CHT regions need special measures to ensure quality-driven education. In all these areas, Field Administration can contribute a

lot in various ways and can motivate the teachers and SMC members to use the TQM method to improve the situation gradually.

- Secondary and higher secondary education also needs proper supervision, coordination, monitoring, and accountability for better output and impact. Ensuring better planning, improving management capacity, proper use of resources, bi-stipends, scholarships, and involving LGIs with the educational institutions are also key issues.
- C4D will contribute to addressing the behavioral and social dimensions of education programmes through community engagement and social norm change among families and communities to create demand for quality education and this is, in fact, urgent but not easy.
- The target of bi-stipends and scholarships should be better so that the poor and the marginalized children can avail of the opportunity. School meal/school feeding programme may be introduced extensively using local resources and with the assistance and collaboration of LGIs, NGOs, civil society, rich persons of the society, etc.
- For overall improvement of the whole education system and implementation of the Education Policy need real-time and reliable data at the upazila and district level. Separate action and implementation plan as well as a huge amount of money will be needed to face the challenges in this case by the Field Administration.

4.9 Recommendations

To implement the Education Policy 2010 and achieve the targets of the Vision 2021, Vision 2041, the Delta Plan and the UN SDGs 2030 need quality, equal, inclusive and strategic education and life-long educational opportunities for the children.

Since education is the backbone of a nation and a major tool to expedite the socio-economic development of a country, it should be unified, quality-driven, universal and appropriate to meet the demands of the society as well as the state. Education for all children as per the Constitution of Bangladesh, the UNCRC and other national and international documents need to be realized for the interest of the country. In doing so, Field Administration may consider the following recommendations:

In the Case of Policy/Strategy:

- Sending proposal with critical analysis to the Government for ensuring a uniform, mass-oriented, and universal education system for all children.
- Forwarding proposal to the Government for specific policy and strategy to eliminating dropout from the primary and secondary level or developing a local strategy to eliminating dropout from the primary and secondary level or developing innovations in this field to solve the problem locally.
- Developing local plans for aligning the activities of the education sector to SDG-4 for achieving those.
- Preparing separate action and implementation plan to realize all directions mentioned in the National Education Policy 2010 and the ECCD Policy 2013 as much as applicable at field level.
- Creating consensus at field level for implementing the SCE/NFE vision.
- Developing strategy at the local level for skill development/technical/vocational education and training with the collaboration and assistance of LGOs/LGIs.

In the case of Institution/Governance:

- Increasing institutional capacities to realize all legal instruments at the field level.
- Supporting and supervising strongly decentralized planning as well as decision making, development planning at the school level, and ensuring quality standards at all schools.
- Mobilizing LGIs to adequate allocation to ECCD programmes in their budgets and also sending proposals to the Government for regular allocation in the ECCD programme.
- Developing all the classrooms and school premises as child-friendly that means neat and clean, healthy, green, having safe drinking water, good sanitation, and hygiene practices etc. for good teaching/learning practices with

the available resources. Need to involve the guardians, LGIs, NGOs, civil society and rich persons in these activities. Students and their organizations i.e. Cub, Scouts, Girl Guides, Students Cabinet, BNCC, etc. should be motivated and involved in these activities and shared the concept of TQM for building up improved learning places. These activities, no doubt, will help to achieve the SDG Goal-4.

- At the time of inspection, USEOs, DEOs, UNOs, ADCs, DCs, and Divisional Commissioners can look into the various issues of the schools including the attendance of the teachers, attendance of the staff, the context of clean school, green school, dengue prevention activities, the safety of the students at schools, on their ways, road crossing, prevention of rumours, etc. and deliver instruction to solve the identified problems and send the inspection report to the concerned DGs and Secretaries for necessary action.
- Preparing a local plan for the introduction of pre-service training and intensifying in-service professional training for the teachers to ensure quality teachers for quality education at all level schools/institutions.
- Supporting the expansion of NFE to Grade 8 which will be linked to technical and vocational education and training for the development of skills to meet the needs of the society.
- Supporting for working children, a flexible SCE/NFE model at the local level.

In the Case of Programmes/Projects

- More support for the development of quality and disaster-prone infrastructure and increase WASH facilities to inspire the enrolment of girls as well as children with disabilities in all areas.
- Ensuring accurate implementation of the programmes and projects related to the children.
- Mobilizing LGIs for special programme/project/scheme to eliminate dropout and ensure 100 percent enrolment.
- Supporting bigger access to secondary education with extended NFE.
- For SCE/NFE apprenticeships, need to develop a partnership with the private sector which may act as a catalyst in preventing child marriage.
- More intervention toward improved quality of early learning as well as primary schools in slums of urban areas and making linkages with SCE/NFE as a catalyst.
- Sending proposal to the Government to establish more government schools and extended support in the urban slum areas for minimizing the deprivation.
- Arranging skill-based training and education as well as extend the necessary support for the adolescents who left the schools in their secondary level and consequently can get decent work for maintaining their livelihood with the involvement of LGIs, NGOs, and Private Companies. Through these, the prevailing gap between urban slums and other areas may be reduced or eliminated.
- Intensifying the execution of C4D interventions with the assistance and collaboration of LGIs, NGOs, and Civil Societies to improve the priorities of the education sector including parenting education, lessening the rates of dropout, increasing the rates of enrolment, supporting child- centred pedagogy, enhancing learning outcomes of early childhood development.

In the Case of Monitoring and Evaluation/Data/Knowledge Management/Best Practices/Innovation:

- Internal efficacy of PPE programmes have to be tracked as well as need to support an intensive information management system related to PPE and it should be linked with the birth registration and health system especially with immunization.
- Strong and effective monitoring, coordination, and evaluation system at field level for confirming the improvement in all spheres of the education sector including the Safety Net programmes or bi-stipends related to the education sector.
- Tracking in-depth the transition to secondary education especially the survival of the girls to secondary school completion which will help to stop child marriage in the country.
- Generating data to exhibit the contribution of C4D interventions especially on the engagement of the communities and SMCs at each administrative unit.
- Listing the best practices and innovations at the local level for replication to improve the situations.

5.1 Constitution of Bangladesh and Child Health Rights

The Constitution of the People's Republic of Bangladesh contains certain guidelines as well as provisions regarding the health rights of the citizens. The directive principles have been mentioned in Part II that is in the 'Fundamental Principles of State Policy' part of the constitution. The articles which are pertinent to the health rights of the citizens in Part II are article 11, 15, and 18. Children have the same health rights as adults.

Article 11: This article declares that Bangladesh will be a democratic country where fundamental human rights, freedoms, dignity as well as worth of the human being have been guaranteed.

Article 15: This article provides the guidelines of fundamental needs of life, for instance, food, clothing, shelter, education, and medical care for all citizens. Here medical care has been recognized as a fundamental need of all people including the children.

Article 18: In this article, increasing the nutritional level and improvement of public health has been recognized as one of the primary duties of the state.

The above principles are directive to the government but not judicially enforceable (GoB 2010). The state will formulate policy and conduct activity in line with these directives.

5.2 Health Institutions, Systems, and Governance in Bangladesh

The right of healthcare for the citizen of Bangladesh has been incorporated and protected in the Constitution of Bangladesh right after independence. Though more than four decades have passed after independence the issue is still very crucial and burning for achieving by the government, DPs, NGOs, and related agencies. For ensuring proper policies and implementing strategy, the Ministry of Health and Family Welfare is solely responsible for health care and health education. By this time, different policies, acts, strategies and programmes have been taken place and some are under the process of formulation to strengthen the capacity as well as the quality of the health service (DGSN 2018; MoHFW 2008). Among the legal instruments passed or amended in recent times are-

- National Health Policy, 2011
- The Health sector, and Health, Nutrition and Population Development Strategy of the 7th Five Year Plan
- National Nutrition Policy, 2015
- Mental Health Act, 2018
- Organ transplant in Human Body (Amendment) Act, 2018
- 4th Health, Population and Nutrition Sector Program (HPNSP) 2017-2022 with the cost of US\$ 14.7 billion with the assistance of DPs
- Healthcare Financing Strategy 2012-2032: Expanding Social Protection for Health Towards Universal Coverage
- Bangladesh Health Workforce Strategy 2016-2021

Multiple departments and agencies are working in the health sector of the country. For instance, Directorate General of Health Services, Directorate General of Drug Administration, Directorate General of Family Planning, and NIPORT, etc. are working under the MoHFW. The directorates have huge infrastructures and manpower and are working in the health sector although there is a lack of coordination among them. On the other hand, multiple NGOs and development agencies are working in the sector that also lacks coordination.

Bangladesh has good institutional health set up as well as infrastructure under the MoHFW across the country. At the grass-root levels, the government has established 13500 Community Clinics as a one-stop service centre for the rural people. In the second tier, it has the Union Health and Family Welfare Centre, and also has 33 Mother and Child Welfare Centre, 10+20 bed hospital 43, and Union Sub-centre 1228. At the Upazila level, it has 435 Upazila Health

Complexes and also 60 Sadar Upazila Health Office and 37 Thana Health Centre. At the district level, the country has district hospitals where specialized services are provided. At the national level, 35 specialized hospitals exist for specialized services at the top level (MoHFW 2008). Besides these institutions, people also get health services from medical college hospitals. The Department of Family Planning also provides various services for mothers and children at different levels.

5.3 Achievements in the Health Sector in Bangladesh

EPI has become a prioritized programme by the Government of Bangladesh which has a positive role to reduce infant death in the country. Its successes in traditional routine immunization, introducing new vaccines, eradication of poliomyelitis, and control of measles and rubella are to name a few. Pneumococcal Vaccine-PCV introduced in 2015 in Bangladesh to better protect more than 3 million babies from pneumonia. After the successful interruption of indigenous wild poliovirus-WPV transmission and 'imported' WPV, the country received the Polio Free Certificate along with 11 other countries of South East Asia in March 2014. The country also received Maternal and Neonatal Tetanus elimination status in 2008.

Bangladesh is one of the most successful countries in the case of achieving MDGs and targets especially related to child mortality. As per the government data, the country has reduced the child mortality under-5 up to 48 deaths per 1000 live birth which was the target under MDG. And presently Under-5 Mortality Rate in Bangladesh is 32 per 1,000 live births (UNICEF 2018). On the other hand, Infant Mortality Rate that is below 1 year of age per thousand live births came down to 24 in 2017 (Ministry of Finance 2018). Even, in the case of adult mortality, the country has also achieved huge success. For example, compared to 1975 and 1991, the rate of death for the age of above 40 and above 60, has reduced significantly. Therefore, the overall life expectancy of the country has increased to 72 years in 2017 (Ministry of Finance 2018).

In the case of child healthcare and its several indicators, Bangladesh has achieved tremendous success and international acknowledgment for its remarkable progress. It is one of a select group of countries included in a high-profile 'Good Health at Low Cost' study published in the renowned medical journal Lancet in 2014. According to that study, Bangladesh did very well in the case of increasing life expectancy and reducing fertility rate and the lowest infant and under-5 mortality rates in South Asia despite spending less on health care than several neighbouring countries. Therefore, Bangladesh was awarded the MDG Award by the UN.

Application of Evidence-based intervention approach in all spheres has played a vital role in improving the maternal as well as child healthcare system in Bangladesh. There are some other factors which contributed positively for improving maternal and child care system in Bangladesh such as involving and mobilizing the community, pro-people policies, different life-saving technologies and facilities in the rural areas and engagement of poor in activities which were taken for them, collaborative activities by the government, civil society, and NGOs which is unique in the region.

5.4 Child Health Situation in Bangladesh

5.4.1 Overall Child Health Situation in Bangladesh

- In the case of reducing maternal and child mortality, Bangladesh has achieved remarkable advancement over the past two and a half decades. The rate of under-five mortality has declined from 144 deaths per 1,000 live births in 1990 to 32 in 2017 (UNICEF 2018). On the other hand, Infant Mortality Rate that is below 1 year of age per thousand live births came down to 24 in 2017. This remarkable achievement is largely attributable to improved immunization of children, improvements in access to safe water, oral rehydration salts for management of diarrhoea, improved management of pneumonia and other childhood illnesses, vitamin A supplementation, exclusive breastfeeding, and improved nutrition, along with reduced total fertility rate, birth spacing, improved mothers' education and improved access to the health facility for maternal health services.

Table 16: Key Child-focused Health Indicators at a Glance

Indicator	Value	Latest Year With Data
Neonatal mortality rate (deaths per 1,000 live births)	20	2016
Under-1 mortality rate (deaths per 1,000 live births)	24	2017
Under-five mortality rate (deaths per 1,000 live births)	32	2017
Prevalence of stunting among children under 5 (%)	36	2014
Prevalence of wasting among children under 5 (%)	14	2014
Overweight among children under 5 (%)	1	2014
Prevalence of Proportion of births attended by skilled health personnel (%)	42	2014
Adolescent birth rate (births per 1,000 girls 15-19)	83	2011
Number of new HIV infections per 1,000 uninfected population (adolescent girls 15-19)	0.01	2016
Malaria incidence per 1,000 population	1	2015
Maternal mortality ratio (maternal deaths per 100,000 live births)	176	2018

- Despite huge success, there has been slow progress on reducing newborn deaths, and currently, around 73 percent of infant deaths and 52 percent of Under-5 deaths occur during the first twenty-eight days of life. As per UNIGME (2017) and UNICEF (2018) present rate of neonatal mortality is 28 per 1000 live births. That means annually, around 62,000 newborn dies in Bangladesh without reaching the first 28 days of their life. 88 percent of neonatal deaths in Bangladesh are from three preventable causes: severe infection, intrapartum-related (asphyxia), and complications of preterm birth (NIPORT 2015). Bangladesh is still struggling to reduce the burden of maternal deaths and the Government has planned to reduce the rate 105 by 2022 (MoHFW 2008). The major barrier for high newborn and maternal deaths is the quality of care during the perinatal period. Most of these deaths occur at the community level and even not accounted for in the national level mortality tracking landscape.
- Care during labour and around birth and the first week of life as well as care for the small and sick newborn, have the greatest impact on ending preventable neonatal deaths and stillbirths (NIPORT 2015). Thus, universal coverage of high-quality interventions before, during and after delivery can bring a 'triple return' in saving the most newborn lives, while also preventing maternal deaths (5,200/year) and stillbirths (83,000/year). Although 230 stillbirths occur every day in Bangladesh, this issue remains largely unrecognized and not effectively addressed in the current health programme.
- The Universal and National Immunization Programme works as a significant catalyst to reduce child and infant deaths in the country. Vaccination coverage has increased over the year as measles vaccinations increased to 87.5 percent in 2016 which was 77 percent in 2004 and full vaccination coverage reached 86.8 percent (DGHS 2018). The statistics indicate that still, 13.2 percent of children are out of full vaccination coverage which calls for special attention of the authorities and health workers. On the other hand, Bangladesh reached children with fully vaccinated by 12 months to 82 percent in 2016. But the progress is not even and inequalities remain across different socio-economic groups and geographical locations. For example, a difference exists between the highest (92.6 percent) and lowest-performing districts (68.5 percent).

Table 17: EPI Childhood Vaccination Schedule

Name of Vaccination	Doses	Minimum interval between doses	Starting age
BCG	1	-	At birth
Pentavalent (diphtherias, pertussis, tetanus, hepatitis B, and haemophiles influenza type B)	3	4 weeks	6 weeks
OPV	4*	4 weeks	6 weeks
MR	1	-	9 months
Measles second dose (MSD)	1	-	15 months

Source: BBS, IMED and UNICEF 2017

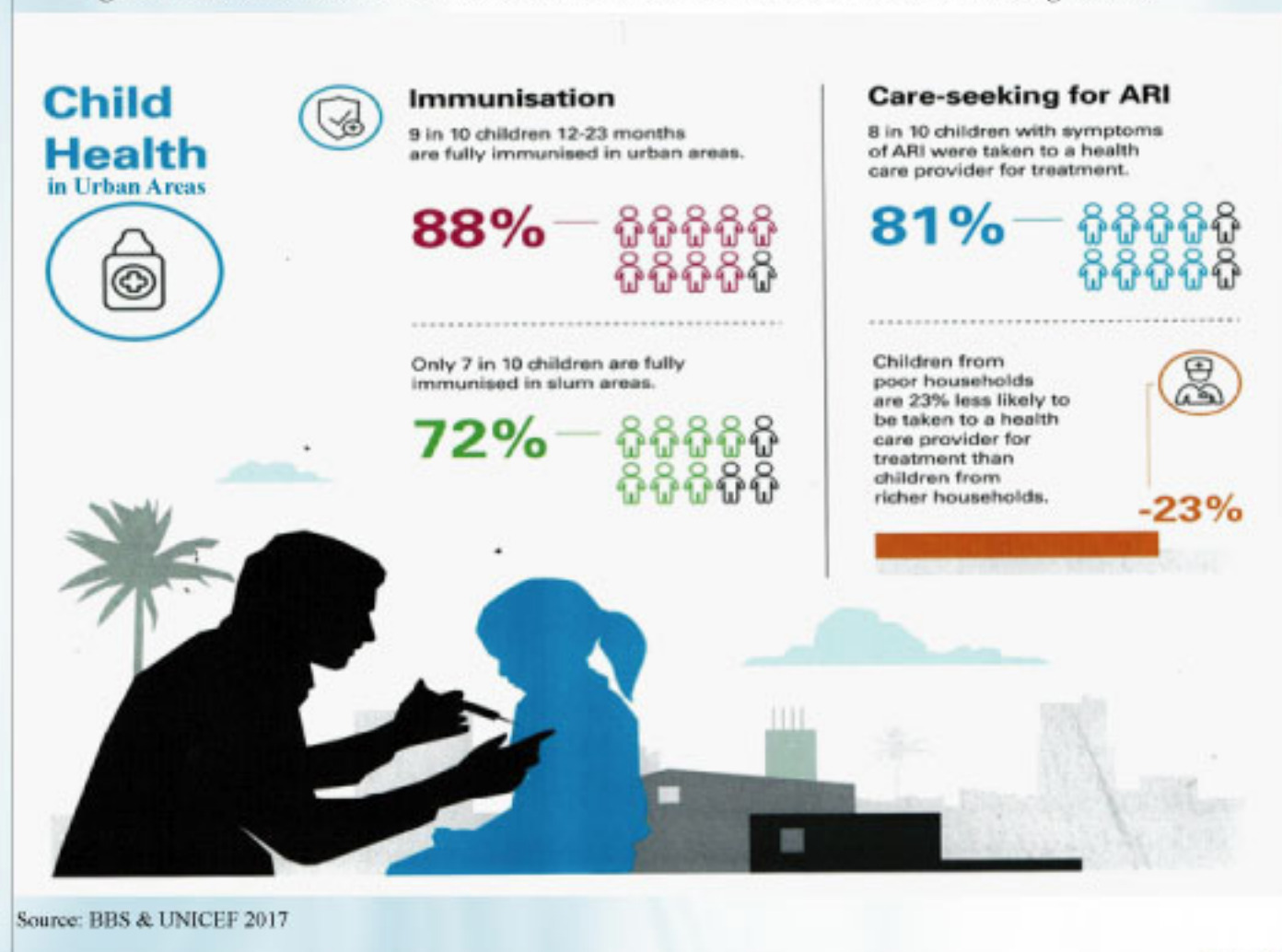
Besides these, EPI has incorporated TT Vaccination for 15-49 years-old women as well as MR vaccine for 16-17 year old adolescent girls.

- Access to age-appropriate health services represents a key challenge for adolescents in part because of the unavailability of adolescent-friendly health services at fixed sites and of outreach to this important population group. Gendered bottlenecks, involving cultural practices and social barriers that constrain access to adequate information and knowledge, also constrain positive outcomes for adolescents. Since the adolescent period is very important for a child, the health of adolescents was included under the HPNSDP 2011-2016 as well as in the Plan of Action of the Adolescent Reproductive health Strategy 2011-2016. Yet access to adolescent-friendly health services continues to be very low because of a strong need for higher prioritization and resource allocation by Government and DPs alike. This is further compounded by low awareness among adolescents and their parents/families about adolescent health needs, including psycho-social counselling.
- Around 77 percent of the children below the age of 2 years do not get sufficient food with quality and diversity. Among pregnant women, nearly 46 percent have anemia which also causes low birth weight, child as well as maternal mortality. Rural and urban disparities are prevailing regarding the nutritional position of children. Especially child nutrition is worse in the slums of urban areas. Merely less than 25 percent of children below the age 5 in slums of Dhaka city follow meal frequency as well as diet practices as the trained health workers recommend (BBS, IMED and UNICEF 2017).
- Epidemiological studies found that low birth weight primarily caused by poor nutrition, micronutrient deficiency, and inadequate monitoring during pregnancy is associated with pre-term delivery. Pre-term delivery also increases the likelihood of neonatal death. It could always be mentioned that the health of mothers during pregnancy is more than important for the health of the child.
- There is a positive well-built relation among the stunting of children (low height) cognitive functioning, poor attention span, physical growth and mortality, and remains prevalent in Bangladesh. In the case of stunting and underweight, the number is reducing though the amount is not that significant. For instance 1.1 percent stunting and 1.2 percent underweight this means that around 6 million children are stunted while 2.4 million are wasted. It can also be mentioned that .6 million children are suffering from malnutrition, especially in urban slums.
- One of the important issues in the case of child healthcare is breastfeeding since it is a great and ideal source of nutrition. It is very effective to protect children from various diseases and it is very safe and economical. On the other hand, it increases the immunity power of children. Therefore, it is suggested by the child health experts that within one hour of birth, every child has to go under the process of breastfeeding and until 6 months it is the only food for a child whether it is a baby boy or baby girl. They also suggest that until 2 years or more, the mother can continually provide their children with this food. In the case of breastfeeding, the scenario is very good in Bangladesh since almost all the children, around 97.1 percent are breastfed in their life after birth. However, the condition of breastfeeding in the case of one hour of birth is very poor as only 3 children amongst the 5 are under this. Yet, regional disparities, in this case also exist in Bangladesh since, in the Sylhet division, the percentage is 73.5 whereas it is 47.3 in the case of Khulna division (UNICEF 2015).
- Another important area for children is access to ECCD. In Bangladesh, the ECCD index is better for girls compared to boys. However, generally speaking, only 63.9 percent of children, age 3-5, is on track in the case of four key development indicators such as literacy-numeracy, physical, learning, social-emotional.
- In every criteria and indicator such as taking the vaccination, ORS, etc. the rate of urban children are better than rural children. Even, differences exist division to division, district to district and region to region. Unless appropriate initiatives are not taken by the concerned authority, an equitable and congenial environment for children cannot be ensured.

5.4.2 Child Health Situation in the Urban Areas of Bangladesh: Though health facilities and services are available within the 2 kilometres of every slum those are mainly provided by the NGOs. However, those are very basic health facilities such as first aid and in terms of quality, not up to the mark. Using hygienic latrine is another vital issue for the urban slum people as they have to use a common toilet which again indicates low access to a hygienic toilet by them. A survey was conducted during 2016 in the urban areas of Bangladesh by the GoB, BBS and UNICEF, titled as 'Child Well-Being Survey in Urban Areas of Bangladesh 2016'. Some key features for management of the health of the urban areas are found from the survey.

- In urban areas, full immunization coverage amongst children age 12-23 months was 88.0 percent. Of them, around 86.4 percent were entirely vaccinated by the age of 12 months. In City Corporation slums, full vaccination coverage was 72.1 percent while in City Corporation non-slums the coverage was 92.1 percent and 87.3 percent in other urban areas. These results indicate that all the children are not fully vaccinated and there is a marked difference between urban areas and its slum areas.
- 81.2 percent of children below 5 years' age with ARI symptoms in the last 2 weeks prior to the survey wanted advice or treatment for ARI from a health facility or provider. No mentionable difference is found between children of City Corporation non-slum areas (79.4 percent) and City Corporation slum areas (78.5 percent).
- 59.4 percent of urban children below the age of 5 with diarrhea in the last two weeks (6.1 percent) preceding the survey had received advice or treatment form a health facility or health provider.
- Around 88.8 percent of children below the age of 5 years with diarrhea have taken any ORS fluid.

Figure 1: The child health situation of urban areas on immunization and care-seeking for ARI



5.4.3 Health Situation of the Children with Disabilities

The Census 2011 has identified 1.41 percent of people (a total of 101, 585 disables) have disabilities in Bangladesh while the HIES 2010 estimated 9.01 percent for the overall disability prevalence. The percentage of disability varies as the census and survey used different approaches for calculating disability prevalence (BBS 2015). As per World Bank statistics of 2004, 10 percent of the country's population has disabilities. The prevalence of disability among those below the age of 18 is estimated at 6 percent.

Health issues of disabled people have been recognized by the National Health Policy of 2011, and urge the health systems to give attention to meet the health needs of the people with disabilities. The 4th HPNSP (2017-2022) recognizes the need to make user-friendly, accessible facilities for old and physically challenged people. As per the MoHFW, psycho-social issues i.e. autism are very crucial for the country, therefore, it is very essential to formulate appropriate laws related to mental health.

Since there are lots of challenges existing in the healthcare system of children with disabilities such as lack of drug, manpower particularly skilled manpower, coordination, and management problem, unattended remote areas, etc. Due to many problems, children with disabilities are not getting proper healthcare and services, their equal rights. Even, medical professionals and health care workers are not aware of their psychology, special needs, and problems. Till today stigma and superstition are prevailing in the countryside of Bangladesh. Therefore, many of them are not able to get health services from the hospitals and clinics which are even very close to their home. Discrimination is very persistent in this case.

5.5 Health, SDG-3 and Bangladesh

Bangladesh is committed to achieving the SDGs 2030 of the UN and MoHFW cherishes to realize the health-related SDGs and its targets. MoHFW is particularly responsible as a lead ministry to implement the targets of SDG-3. SDG-3 cherishes to Ensure healthy lives and promote well-being for all at all ages.

Table 18: SDG-3 Targets and Indicators

Targets	Indicators
3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births	3.1.1 Maternal mortality ratio 3.1.2 Proportion of births attended by skilled health personnel
3.2 By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births	3.2.1 Under-five mortality rate 3.2.2 Neonatal mortality rate
3.3 By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases	3.3.1 Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations 3.3.2 Tuberculosis incidence per 100,000 population 3.3.3 Malaria incidence per 1,000 population 3.3.4 Hepatitis B incidence per 100,000 population 3.3.5 Number of people requiring interventions against neglected tropical diseases
3.4 By 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being	3.4.1 Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease 3.4.2 Suicide mortality rate

3.5 Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol	3.5.1 Coverage of treatment interventions (pharmacological, psychosocial and rehabilitation and aftercare services) for substance use disorders 3.5.2 Harmful use of alcohol, defined according to the national context as alcohol per capita consumption (aged 15 years and older) within a calendar year in litres of pure alcohol
3.6 By 2020, halve the number of global deaths and injuries from road traffic accidents	3.6.1 Death rate due to road traffic injuries
3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes	3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods 3.7.2 Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women in that age group
3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all	3.8.1 Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population) 3.8.2 Proportion of population with large household expenditures on health as a share of total household expenditure or income
3.9 By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water, and soil pollution and contamination	3.9.1 Mortality rate attributed to household and ambient air pollution 3.9.2 Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene (exposure to unsafe Water, Sanitation and Hygiene for All (WASH) services) 3.9.3 Mortality rate attributed to unintentional poisoning
3.a Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate	3.a.1 Age-standardized prevalence of current tobacco use among persons aged 15 years and older
3.b Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all	3.b.1 Proportion of the target population covered by all vaccines included in their national programme 3.b.2 Total net official development assistance to medical research and basic health sectors 3.b.3 Proportion of health facilities that have a core set of relevant essential medicines available and affordable on a sustainable basis
3.c Substantially increase health financing and the recruitment, development, training, and retention of the health workforce in developing countries, especially in the least developed countries and small island developing States	3.c.1 Health worker density and distribution
3.d Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks	3.d.1 International Health Regulations (IHR) capacity and health emergency preparedness

Source: UN 2018

5.6 Health - Supports of UNICEF in Bangladesh

UNICEF continues to work with the Government and WHO to improve vaccination coverage, increase the cold-chain capacity, escalating the capacity of the district and upazila health department as well as social mobilization to augment vaccination coverage.

Child survival: For reducing infant death, UNICEF supports immunization, newborn, and child health. UNICEF has been continuously supporting countrywide drives of immunization against measles, tetanus, hepatitis, polio, and other childhood diseases and the progress is inspiring.

Childhood illness: In the childhood period, children have to face some diseases such as pneumonia infection & diarrhoea, etc. and during this time parents and family members should ensure proper treatment for the children. UNICEF provides support to the family members through awareness programmes for ensuring a better healthcare system and health education for the children. Therefore, the rate of death of children from pneumonia has sharply reduced.

During the lifecycle-based Country Programme 2017-2020, UNICEF will continue to support strengthening the health system by contributing across age groups with particular strategic interventions for delivery of quality Maternal, Neonatal, and Child Health services. In all cases, the focus will be given to the most marginalized and excluded children, adolescents as well as women. The country programme will pay special attention to the interventions related to newborn care (UNICEF 2016 a).

These major interventions (see also the figure below) are divided into three major categories: (1) interventions with high coverage levels of at least 80 percent (e.g., immunization), which requires a particular emphasis on remote and slums (urban) to reach the unreached children; (2) key existing interventions that have low coverage (below 50 percent), which require scaling up in hard-to-reach areas and low-performing districts; and (3) interventions with high efficacy and strong impact on reducing mortality and morbidity, but yet to be introduced at scale.

Figure 2: Health Programme Key Interventions

Sustain the high coverage

- Focus on hard-to-reach areas and urban slum to sustain the current coverage of the Expanded Programme of Immunisation (EPI)

Scale up existing interventions and increase utilisation

- Improve coverage of essential newborn care
- Establish SCANUs in 24 new districts for sick newborn care
- Ensure functioning comprehensive and basic emergency obstetric care in all district hospitals and selected UHCs
- Scale up case management of pneumonia and diarrhoea
- Calcium supplementation for pregnant women
- Scale up water, sanitation and hygiene promotion to reduce diarrhoea and ARI

Prioritise high-impact interventions at scale

- Four priority newborn interventions (chlorhexidine cord care, Antenatal Corticosteroid for pre-term birth, Kangaroo Mother Care for pre-term/low birth weight babies, neonatal sepsis management)
- Priority focus on care during labour, childbirth and first week of life
- New vaccines (pneumococcal/Rotavirus/cholera)

UNICEF is also emphasizing adolescent healthcare under its strategy of 2016-2030 which is explicitly based on the Healthcare of adolescents. The main focus under this strategy are adolescent and key issues related to adolescent health, right of adolescents and advocating them in the case of their health care, government programmes and policies to support adolescents, providing appropriate support for strengthening service delivery and involving communities through empowering them, etc.(UNICEF 2016a). Therefore, it can be said that proper implementation of the strategy will bring a big scale positive change in the areas of adolescent health services. Of course, keen interest of the field level officials is pre-requisite to achieve the desired targets. Field Administration top officials is expected to play a critical role in gearing up the related activities to obtain the highest results.

5.7 Health Sector in Bangladesh- Key Challenges for Field Administration

The country needs to travel a long way to ensure children as well as people's friendly medical care to realize the universal coverage of health and the SDG-3 targets. To achieve all these high ambitions, Bangladesh will have to face numerous challenges. Here the key challenges for Field Administration have been mentioned:

- One of the most important challenges is to ensure equitable health services for people of all ages all times. Disparities and inequality exist among the regions, inside the cities and towns and people from different strata though the government has taken huge initiatives for reducing those. As a result, many people are not able to meet the health services. Therefore, it is critical to eliminate the disparities and inequalities to ensure equitable health services for all. Special initiatives and projects are required for reducing regional disparities and inequality amongst the regions and people. Preparing and sending concrete proposals to the government in this regard is a key challenge for Field Administration. Again involving LGIs intensively to adopt local plans to solve these issues is a critical challenge.
- The country has a mammoth institutional structure as well as infrastructure in the health sector but quality service cannot be ensured. The urban primary health care service delivery is also inadequate and ineffective. There is a deficit in the Quality Assurance System, medical auditing, accreditation, and the legal frameworks regarding these issues are weak in the sector. Therefore, ensuring quality health services remain a key challenge.
- Though, in general, Bangladesh has achieved significant progress in the case of reducing child mortality, maternal mortality, and some other indicators compared to its past decades, still preventable deaths of infant and child are high in Bangladesh.
- The country needs to decrease child mortality of under-1 year age which is occurring after one month of its birth. High rates of neonatal deaths prevail especially in rural and hard-to-reach areas. Low rate of deliveries by skilled birth attendants cause injuries to child health. These areas necessitate keen attention as well as require increased special allocation.
- The health services need to be made gender-sensitive and child-friendly. As the number of children huge, it requires child specialized hospital in every district for their intensive and quality treatment.
- There are inadequacies of doctors, nurses, technicians, and managerial personnel in the health sector. A lot of posts remain vacant round the year. On the other hand, doctors and technicians are reluctant to stay at upazila level and those who are posted in the remote areas or upazila level, many of them are unwilling to work regularly and timely. There is also an acute promotion problem for the doctors as well as a lack of motivation and coordination in the grass-root level. Improper management of manpower may cause harm to the health of the people. Thus, coordination and using manpower appropriately become the key governance issues of the health sector. To overcome these issues needs strong Management Information System functions along with sustained monitoring and evaluation system at the divisional, district and upazila levels.
- The country has a very striving agenda for achieving and scaling up the Universal Health Care Coverage within 2032. In this field, persistent poverty and unemployment are the biggest challenges for the country. To overcome these need to introduce health insurance for all people or free health care for all may be ensured which will be a daunting task.
- Malnutrition and micronutrient deficiencies prevail hugely in the country. These conditions are not favourable to build a healthy nation. For achieving the Vision 2021 and Vision 2041 of the Government require a healthy nation and for healthy nation require proper nutritious food from childhood and equitable as well as available health services at all ages.
- Multiple departments and agencies are working in the health sector of the country but they lack proper coordination. On the other hand, various NGOs and other agencies are working in the sector without, again, lack of coordination which may increase threat and risk in this sector.

- Since child marriage creates many health problems for the children and mothers, it needs to be stopped which is not easy. Eliminating child marriage will take time and require strong intervention of the Field Administration.
- Poor people do not have easy access to health services or health facilities due to a lack of information and ignorance. Maximizing the utilization of public health facilities by the poor is also a challenge for the Field Administration.
- The country also faces emerging and re-emerging diseases, disasters as well as the impact of climate change. These factors seriously affect the health of the children as well as adults and cause deaths.
- One of the key challenges of the health sector is to ensure adulteration free medicines and food to ensure public health for both children and adults. Adulteration refers to the act or function of making food or drugs worse in quality by adding something to them and this has become a serious concern for Bangladesh. Adulteration widely prevailing in the sector of food, medicine, diagnosing diseases, etc. which need to be stopped. For stopping adulteration, need serious intervention of the concerned ministries and the Field Administration. It is appreciating that the Field Administration has expedited the activities of the Mobile Courts for reducing adulteration of various sectors.
- To achieve the targets of SDG-3 related to the health matters of the children as well as the adults is a highly ambitious task which will require local level planning, strategy and implementation plan. Developing key instruments to ensure better health of the people of all ages at all times is a challenging task but not impossible for Administration.
- It has been proved that motivation, congenial and safe environment, bonding, proper care, attachment, etc. in the early stage of children have a positive influence in their brain. And those who get above mentioned positive environment can grow in a better way compared to those who do not. Therefore, early 5 years of age for any child is very important since it is the foundation of the brain's architecture. It is also evident from the empirical research that investment in early childhood provided better and more results in any country. Therefore, Field Administration should motivate concerned all to invest in the early stage of childhood for ensuring a safe and congenial environment for every child who will be the future boatman of the country.

5.8 Recommendations

Health is one of the basic human rights. It means that everyone irrespective of age, sex, gender, and race has the right to access available standard health services whenever it is necessary. It means that all the hospitals, clinics, and other health service providers will be accessible for the service seekers as per their demand and they will be entrusted equitable and quality health services. Following recommendations can be considered by Field Administration for ensuring standard health services for the children and the adults to comply with the rights mentioned in the CRC and national as well as other international documents:

In the Case of Policy/Strategy:

- Health for all with state expenditure or introducing health insurance for all where a major portion of the premium of the poor people will be given by the state. Strategic action will require reaching Universal Health Coverage. Top officials of the Field Administration especially DCs can prepare specific proposals and action plans in this regard and send it to the government. In doing so, LGIs must be involved.
- Proposal to increase resource allocation in the health sector and to enhance resource allocation for the hard-to-reach areas, urban slums and CHT areas to close the equity gap.
- Specific proposal to reduce the gap of health facilities between Capital Dhaka and other districts and thus specialized health facilities at least at districts levels.
- Quality medical education and training for doctors and allied all people at divisional, district and even at upazila level under close supervision. And thus disseminate proper knowledge amongst the Healthcare Workers in critical issues such as autism, reproductive healthcare and special care for adolescents.

- District-based specific action plan to achieve the targets of SDG-3 and proposal to form strong local committees with the representatives of LGIs, NGOs, Civil Society, teachers, children, Mosque Imams, Journalists, community leaders, etc. under the leadership of DCs and UNOs.

In the Case of Institutions/Governance:

- ★ Proposal to create decentralized capacity of the health system, enrichment of the Human Management Information Systems and planning capacities.
- ★ Enhancement of capacity and facilities of the UHCs using local resources.
- ★ Institutional mechanism of quality assurance and quality control up to community clinic. The TQM method may be applied to improve the situation under intensive supervision.
- ★ Increased focus on sufficient numbers of skilled human resources including technologists in all medical setups.

In the Case of Programmes/Projects:

- Proposal for promoting low-cost and high-impact interventions.
- Supporting reproductive and neonatal health as a pressing priority. Evidence-based and proven interventions, such as the use of Antenatal Corticosteroid, essential newborn care, Kangaroo Mother Care, and full supportive care at facilities need to be implemented through universal coverage.
- Emphasizing on adolescent health and their awareness especially in adolescent clubs or in educational institutions.
- Improved counseling for preventing the suicide of children/adolescents.
- Gearing up life-saving, healthy and preventive behaviors and helpful social norms to ensure maternal, newborn and child health through special projects/schemes of the LGIs and NGOs.
- Intensifying awareness for creating demand for quality services and disseminate knowledge amongst the family members about health care. Engaging community groups and community support groups for the social norm and behavioral change, thereby stimulating demand for enhanced maternal and newborn care practices and establishing linkages between communities and facilities for effective service use. Besides, innovative social models need to be employed to establish community support systems linking community groups, community support groups and LGIs, NGO networks to promote key newborn care practices and service use. Different communication channels and media may also be used at the local level.
- Ensuring the sustainability of health programme and project outputs at upazila, district and divisional levels.
- Building a special fund at the district level for poor children to ensure all sorts of treatment.

In the Case of Monitoring and Evaluation, Data/Knowledge Management and Innovation:

- Proposal for promoting a strong monitoring and evaluation culture in the health sector at the local level.
- Highly monitoring the Universal Health Coverage activities through the District Development and Coordination Committee.
- Demonstrating and replicating best practices/models in managing emerging challenges, neonatal management, preventing drowning, detecting early disability, etc.
- Proposal to generate behavioral data for demonstrating progress in the achievement of programme/project objectives at divisional and district level.
- Supporting innovation to successfully manage health-related problems and risks at the upazila and district levels.

6.1 Meaning of Safe Water, Sanitation and Hygiene

Safe Water: Safe water means that water which does not cause any vital risk to the consumer's health for consuming throughout the lifetime.

Sanitation: Sanitation denotes the promotion of health through treatment as well as safe disposal or clearance of faeces, surface drainage as well as solid waste.

Hygiene: Hygiene means the conditions or practices beneficial to maintain or preserve health and to prevent disease, particularly by cleanliness (LGD 2014).

6.2 Three Pillars-Water, Sanitation, and Hygiene

Access to safe drinking water, improved sanitation and hygiene-WASH are crucial for the welfare of the family and these 3 pillars play an important role in preserving health. Many water-borne infections like diarrhoea are caused by contaminated water and that contaminated water also works as a transporter for vectors, for instance, mosquitoes spread epidemics.

Open defecation and use of open or unsealed latrines mean no sanitation. Sanitation plays a positive role in family literacy and places a contribution to the social and economic development of a country. Furthermore, improved sanitation assists the environment.

On the other hand, the infection cannot be prevented only by drinking safe water and using improved sanitation; preventing infection requires good hygiene practices. A small habit of washing hands puts a huge role in preventing various diseases. A combined success in each of these three areas can bring good results in controlling entire diseases as well as boost the health of the household members, especially maternal and child health (UNICEF 2016a).

6.3 Genesis of WASH

The UN Committee on Economic, Social, and Cultural Rights has identified 'water as a human right' by its General Comment No. 15 in November of 2002. Its article I.1 declares that to lead a life as a human with dignity the right to water is essential. The document defines the right to water as adequate, safe, suitable, physically accessible, and affordable water for everyone for personal as well as domestic uses (UNDESA no date).

Access to safe water as well as decent sanitation has been recognized as human rights on 28 July 2010 by the UN General Assembly by Resolution 64/292. These rights are indispensable for the life of human beings and their dignity which means these rights are the foundation of realizing the entire human rights. The Resolution urges the countries along with international organizations to give monetary resources, assist in building capacity and transfer technology to facilitate countries, especially developing ones with a view to delivering safe, clean, accessible, and affordable drinking water as well as sanitation for everyone (UNDESA no date).

Bangladesh launched a 'National Sanitation Campaign' in 2003 and since then Government has inspired a partnership approach with the LGIs, NGOs, DPs as well as civil society. Overall this multi-stakeholder partnership has created a large platform in putting synergistic effect in escalating coverage of sanitation. Bangladesh cherishes to establish her as global water security research observatories amongst three with a view to designing, testing, and augmenting innovations based on evidence to secure national, regional, and worldwide benefits.

In Bangladesh, the private sector too places important contributions toward the improvement of the WASH sector through delivering goods along with services; it sets up approximately 300,000 hand pump tube wells as well as 10 lakhs toilets every year.

At the local levels, community-based WASH delivery approaches also developed, scaled up, and become successful which have been supported by LGIs and NGOs. Amongst the approaches, CLTS campaign is a top successful one that has been supported by the Government, UNICEF as well as other partners. The campaign highlights the social along with behavioral changes required for discouraging open defecation.

In 2007, UNICEF and Bangladesh Government introduced the urban component of the sanitation in the 'Hygiene Education and Water Supply in Bangladesh Project' which is a countrywide programme that targets to bring 30 million people of rural and urban areas. The aim of the SHEWA-B Urban component is to decrease mortality, morbidity, as well as malnutrition caused by water and excreta, linked diseases, particularly amongst women and the children in 31 urban municipalities. Decreasing the attack of diarrhoea helps to inspire school attendance as well as raise completion rates. The project intends to increase the standards of hygiene-related behavior especially hand washing, progress the accessibility to safe water as well as anticipated to obtain 100 percent sanitation coverage by 2010 in the areas of the programme.

A national campaign on handwashing was launched by UNICEF marking the International Year of Sanitation 2008. A campaign song as well as other few programmes broadcasted on TV and radio explaining the benefits of appropriate handwashing. UNICEF collaborated with the Government in different other public programmes in 2008 for raising the people's sanitation profile (UNICEF 2015).

Today, the WASH sector of Bangladesh possesses sectoral policies, plans, and strategies. The Government wants that 60 percent of the people will use improved sanitation by the year 2016 while 100 percent use of improved sanitation by 2021. For creating awareness on sanitation, October month is being observed as 'Sanitation Month' throughout the country. LGD, DPHE, Field Administration, and LGIs have been observing the programme countrywide.

6.4 The Child and WASH

For keeping the health fit of the children, services of water and sanitation are very significant. Economic benefits are generated; dignity is increased; social development is fastened and the environment is helped to remain at the desired level by the water and sanitation services. Concurrently, proper hygiene practices immensely contribute to the improvement of health that eventually assists in reducing child and neonatal mortality. Bangladesh has improved a lot in sanitation especially in rural areas through experiment and execution of innovative approaches, and consequently, open defecation has been reduced dramatically to 3 from 34 percent. This success has emerged Bangladesh as a leader in Asian countries (UNICEF 2015).

Despite progress, the rate of access to improved sanitation stay moderate that is 56 percent, with a rate of 28 percent shared facilities especially in slums of urban areas. A strong correlation is seen between the WASH sector's links and affects with nutrition that is between drinking water of households and the stunting of children aged below 5 years. It is found from 400 regular and protracted hit of diarrhoea that occurred due to poor hygiene practices as well as drinking water holding faecal coliforms persist to hamper the physical development of the children and also cause stunting as well as malnourishment.

Children living in the households having unimproved sources of drinking water are considerably facing more risk: In total, 57 percent of children belong to these households were identified as stunted, wasted or underweight while 31 percent of children of the households having improved sources of water suffered from the problem.

There is also a strong correlation between severe stunting or underweight and unimproved sanitation use. In general, the percentage of children stunted, wasted or underweight is greatly higher for the children living in the households using unimproved sanitation or practicing open defecation (48 and 64 percent respectively) than those children living with improved sanitation (37 percent).

Hygiene has generally a 'weak or poor link' with the WASH sector and that carries enormous diseases burden because of the unsafe water use or insufficient supply of safe water. Most people have knowledge regarding key messages but the proportion of effective practice of handwashing at the key times is extremely low that is after defecation 26 percent, before preparation of food and eating 1 percent, and before feeding a child 4 percent. Water as well as soap is readily accessible and available all over the country and in the households but frequently soap and water are not adjacent or close to a latrine that decreases the practice of handwashing significantly.

Usually, children suffer from 3 to 5 episodes of diarrhea averagely every year that causes serious dehydration as well as malnutrition. Although there are initiatives of national hygiene promotion, the actual impact is still low due to different reasons. Traditional beliefs, for instance, some people think that the stool of a young child is not harmful or detrimental, stay high. The language may also be an impediment for communicating messages of hygiene effectively in the hard-to-reach regions like Hill Tracts areas as there some of the ethnic minorities do not know Bangla and remain hugely out of the campaigns of national hygiene promotion by the mass media.

6.5 The Constitution of Bangladesh and WASH

Two articles related to WASH are found in the Constitution of Bangladesh. The articles are as follows:

Article 11: As per this article, Bangladesh will be a democratic country where fundamental human rights, freedoms, dignity as well as worth of the human being have been guaranteed.

Article 18: In this article, increasing the nutritional level and improvement of public health has been recognized as one of the primary duties of the state.

These are directive principles that have been mentioned in the 'Fundamental Principles of State Policy' in Part II of the constitution. The principles are directive to the government but not judicially enforceable (GoB 2010). The state will formulate policy and conduct activity in line with these directives.

6.6 The National Children Policy, 2011 and WASH

In the National Children Policy of 2011, WASH issues of the children have been given emphasis in chapter 6 (MoWCA 2018a). WASH-related directives illuminated in the chapter are:

- Adopting needed steps for inclusion of fundamental information on health, nutrition, physical as well as mental health, etc. in the school syllabus.
- Conducting regular awareness programme at the grass-root levels all over the country to ensure child rights.
- Ensuring special actions for making available sources of safe water and delivering pure drinking water for the children in the saline coastal and arsenic affected zones.
- Ensuring child-friendly sewerage facilities and supplying water in the schools.
- Ensuring a sewerage system in the educational institutions, job place for female children including adolescents.

6.7 Plan and Strategies on WASH Sector in Bangladesh and the SDG-6

Bangladesh has achieved notable success in ensuring improved safe water as well as sanitation facilities as per MDG-7. Ensuring access to drinking water, sanitation, as well as good hygiene practices for everyone has been given high priority in the Perspective Plan (2010-21) by the Government of Bangladesh and support to these have been considered as fundamental for sustainable national development; upgrading the people's standards of living as well as increasing welfare (GoB 2012). The Government is committed to its 7th Five Year Plan 2016-20 to ensure the availability of safe drinking water as well as improved sanitary facilities by the end of the plan period (GoB 2015). The country has prepared a Sector Development Plan 2011-25 for water and sanitation. The Government formulated the 'National Hygiene Promotion Strategy for Water Supply and Sanitation Sector in Bangladesh 2012 (LGD 2012a). To implement the plan, the National Strategy for Water Supply and Sanitation 2014 has also been made. For achieving the sector goal, 17 strategies have been identified which are broadly categorized into 3 themes- 1. WASH Interventions- to increase coverage as well as improve WASH interventions' quality; 2. Emerging challenges-to address promising challenges in the sector; and 3. Sector Governance-to strengthen the governance system of the sector (LGD 2014).

The Government is committed to achieving the targets of SDG-6 of the UN. SDG-6 is 'Ensure availability and sustainable management of water and sanitation for all' (UN 2018). Targets and indicators of the Goal are mentioned in the following table.

Table 19: SDG-6 Targets and Indicators

Target	Indicator
6.1 By 2030, achieve universal and equitable access to safe and affordable drinking water for all	6.1.1 Proportion of population using safely managed drinking water services
6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations	6.2.1 Proportion of population using safely managed sanitation services, including a hand-washing facility with soap and water
6.3 By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing the release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally	6.3.1 Proportion of wastewater safely treated 6.3.2 Proportion of bodies of water with good ambient water quality
6.4 By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity and substantially reduce the number of people suffering from water scarcity	6.4.1 Change in water-use efficiency over time 6.4.2 Level of water stress: freshwater withdrawal as a proportion of available freshwater resources
6.5 By 2030, implement integrated water resources management at all levels, including through transboundary cooperation as appropriate	6.5.1 Degree of integrated water resources management implementation (0-100) 6.5.2 Proportion of transboundary basin area with an operational arrangement for water cooperation
6.6 By 2020, protect and restore water-related ecosystems, including mountains, forests, wetlands, rivers, aquifers, and lakes	6.6.1 Change in the extent of water-related ecosystems over time
6.a By 2030, expand international cooperation and capacity-building support to developing countries in water- and sanitation-related activities and programmes, including water harvesting, desalination, water efficiency, wastewater treatment, recycling, and reuse technologies	6.a.1 Amount of water- and sanitation-related official development assistance that is part of a government-coordinated spending plan
6.b Support and strengthen the participation of local communities in improving water and sanitation management.	6.b.1 Proportion of local administrative units with established and operational policies and procedures for participation of local communities in water and sanitation management.

In pursuit of its own development trajectory and promise to the accomplishment of the SDGs, Bangladesh Government incessantly invests in social sectors like health and education apart from adopting various policies to eradicate poverty and strengthening social protection. Achieving the targets of WASH mentioned in SDG-6 will require a considerable amount of direct, indirect physical as well as financial resources from the government and the society and wide involvement of Field Administration as well as LGOs.

6.8 WASH Situation in Bangladesh

6.8.1 WASH Situation both in Urban and Rural Areas: In the globe, about 1 billion people have a deficiency in the access of safe water, and in the case of sanitation 2.4 billion people lack improved sanitation. In that perspective, Bangladesh, a country of 170 million people has made significant progress in the WASH sector during the last two decades. As per the JMP 2014 published by WHO and UNICEF, 85 percent of the people in Bangladesh possess

accessibility to safe water while amongst the population, 57 percent enjoy hygienic sanitation facilities. As per the latest data, 87 percent of people have access to an improved water source. The collection of water by households from improved sources has been increased significantly since 1990. Anyway, the figure contains harsh variations in various fields, for instance, coverage and quality variation amongst districts, unions, communities, educational institutions, and also within households.

Bangladesh has effectively decreased the proportion of the poorest people having no access to water as well as sanitation facilities (LGD 2014). Despite successes, there are enormous challenges in ensuring safe, affordable, dependable as well as sustainable WASH services for all of the inhabitants of the country. Safety issues of drinking water undermine the quality of water in Bangladesh (LGD 2014). Critically, the country has been suffering from arsenic contamination in water and the situation is one of the worst ones in the globe.

The chemical carcinogen carries the characteristics of skin manifestation to deadly heart diseases, lung disease as well as multiple cancers. Nearly 1 in 4 households have water that bears arsenic content over global standards; it means that around 20 million people of Bangladesh drink arsenic-contaminated water and half of this exposed population lives in harshly affected regions. In the harshly affected regions over 80 percent of tube wells have become injurious to contamination while 800,000 water points are identified as contaminated. Approximately, 42,000 deaths yearly are caused by fatal arsenic. Moreover, it is estimated that 3 out of 5 sources of water provide manganese over national standards and evidence indicates that the intellectual development of children is impaired by high levels of manganese.

61 percent of the population uses improved toilet facilities and 59 percent have specific places for handwashing, equipped with soap and water. A significant component of good hygiene is handwashing. Handwashing is a must at times of after defecation, afterward cleaning the bottom or disposing of feces of a baby, before preparing and serving food and before eating or feeding the child. These are critical times of handwashing. In Bangladesh one-fifth of the households do not have hand wash facilities within five metres of the latrine while 21 percent of the rural households do not have any such hand wash facilities (BBS, IMED, and UNICEF 2017).

As per the JMP 2014, over 50 percent of the latrines that are used in the country are unhygienic in design, operation, or in maintenance. Among the total population, 3 percent defecates in the open. Regarding hygiene, the percentage of people wash hands by soap or ash and water following defecating is only 30.

Over 20 percent of areas of Bangladesh are rated as tremendously hard-to-reach with the water as well as sanitation services that cover around 28.6 million people. On the other hand, the scenario of urban areas regarding sanitation coverage and hand-washing is not still up to the mark.

6.8.2 WASH Situation in Urban Areas: A Survey was conducted during 2016 in the urban areas of Bangladesh by the Bangladesh Government, BBS and UNICEF, titled as 'Child Well-Being Survey in Urban Areas of Bangladesh 2016' which also dealt WASH and the results of urban areas are as such:

- 99.2 percent of households use drinking water from improved water sources
- Around 57.3 percent of the urban population is using improved sanitation facilities (not shared with members of other households). But it varies by type of urban areas as such 51.3 percent in city corporation non-slums, 18.9 percent in city corporation slums and 62.4 percent in other urban areas. The use of improved sanitation facilities (not shared) is the highest in Barisal (80.7 percent) and lowest in Dhaka (47.1 percent).
- Overall 56.7 percent of the urban population use both improved drinking water sources and improved sanitation facilities. In City Corporation non-slums the percentage is 50.5. City Corporation slums 18.2, and other urban areas 61.9 percent. It is found that in City Corporation slums areas the percentage is very low.
- In general, 55.4 percent of households have a specific place for handwashing with water and soap available. But the percentage varies based on the nature of urban areas as such 67.1 percent in the City Corporation non-slums, 35.4 percent in City Corporation slums, 51.1 percent in other urban areas.

6.8.3 WASH Situation in Secondary Schools: As per data of BANBEIS 97.41 percent of Secondary Schools of the country have pure drinking water facilities while 93.52 percent have separate toilet facilities and 53.05 percent have handwashing facilities in 2018. These data indicate that still a huge number of students studying in secondary schools are deprived of pure drinking water, separate toilet, and handwashing facilities.

Maximum schools have created the scope of accessibility to water as well as sanitation facilities, but the facilities frequently become seriously unhygienic, non-functional, and very often non-available for use of the students which put a negative impact on the enrolment, presence, retention, and rates of attendance.

6.9 National Budget and WASH

Bangladesh has achieved significant progress in financing the WASH sector. Allocation in the WASH has been risen to Tk. 65.09 billion in the Financial Year 2017-18 and 68.04 billion in the 2018-19 Financial Year which was Tk. 25.63 billion in the 2007-08 Financial Year. But this increase is low compared to the considerable GDP growth as well as the growth of the National Budget. Besides, geographical inequality is found where cities and towns receive maximum allocation despite the acute demands of the char, hilly, coastal, and rural regions. And there is also under-utilization of the allocations (WaterAid no date).

6.10 WASH - Supports of UNICEF

UNICEF has big support for the WASH sector in Bangladesh. The UN agency works to progress sanitation coverage and promotes hygiene practices. The SHEWA-B project of UNICEF intended to cover 30 million people. The project is executed through 10,000 CHPs in 19 districts of the country.

Sanitation for Health and Comfort: Families are encouraged by CHPs to spend money on improved latrines. Improve latrines isolate excreta from the human environment. The hygiene promoters inspire the people to defecate in a permanent or fixed place as well as remain away from the sources of water. The hygiene promoters encourage attaining this first step of proper sanitation.

Mapping Toilets: For mapping toilets, community members of 'Meet for Water and Sanitation Assessment' visited their village and prepare maps showing all houses, pumps, toilets as well as waste sites and the map is being used for making a plan for the improvement of sanitation in future. Around 1.3 million latrines had been installed by 2010 by the communities by their own money under the SHEWA-B Project.

Community Hygiene Promoters: 10,000 CHPs of SHEWA-B project in 19 districts were trained to educate their neighbourhoods regarding health as well as economic benefits of appropriate sanitation, disposing of wastes, and good hygiene. The promoters visit the women at their homes, arrange courtyard, tea-stall as well as school sessions. The CHPs include both male and female, they were young and belong to local communities.

Handwashing with Soap: A national campaign on handwashing was launched by UNICEF observing the International Year of Sanitation 2008. The CHPs highlight the essence of handwashing with soap or ash especially after defecation and before eating in the education sessions (UNICEF 2015). After a formative research report published in 2010, project strategies as well as approaches were made sharpened. Mothers of under-5 year's children, as well as the primary school students, brought under the project to address the issues of WASH and rigorous mass communication, the hygiene promotion campaign was organized in 2010 reaching 10 million more people.



School Sanitation and Hygiene: Based on the success of the school sanitation, it has been included in the Primary Education Development Programme. Schools having appropriate sanitation, students miss fewer days of class. The CHPs carry on working with local schools to interpret hygiene behavior as well as supporting the improvement of WASH in the plans of the schools.

It is learnt that UNICEF is providing a budget for the WASH sector for 2019 US\$ 21.22 million of which US\$ 8.5 million for Cox's Bazar.

6.11 Role of Field Administration toward WASH through Different Committees

The government has formed District, Municipality, Upazila, Union, and Ward 'Water Supply and Sanitation'-WatSan Committees across the country while for the Chattogram Hill Tracts a 'Water Supply and Sanitation' Committee under the leadership of the Hill Tracts Regional Council has been formed.

6.11.1 District Water Supply and Sanitation Committee (Except Hill Tracts Areas): As per the circular of 2007, formation and functions of the 'District WatSan Committee' (LGD 2007) have been shown in the table below. `

Table 20: District Water Supply and Sanitation Committee (Except Hill Tracts Areas)

1	Deputy Commissioner	Chairperson
2	Chief Executive Officer, Zilla Parishad	Member
3	Civil Surgeon	Member
4	Mayor of the Municipality of the district headquarter	Member
5	Upazila Nirbahi Officer all	Member
6	Deputy Director, Local Government	Member
7	District Information Officer	Member
8	Executive Engineer, LGED	Member
9	Deputy Director, Department of Social Services	Member
10	Deputy Director, Directorate General of Family Planning	Member
11	Deputy Director, Bangladesh Rural Development Board	Member
12	Deputy Director, Islamic Foundation	Member
13	Deputy Director/Assistant Director, Department of Youth Development	Member
14	District Education Officer	Member
15	District Primary Education Officer	Member
16	District Women Affairs Officer	Member
17	One NGO representative nominated by DC	Member
18	Executive Engineer, Department of Public Health Engineering	Member- Secretary

The committee can co-opt members not exceeding two. The committee will meet at least once within three months. Functions of the Committee are as follows:

- To review the activities of safe water supply and sanitation in the concerned districts, identify the problems and provide necessary recommendations to solve the identified problems to the Department of Public Health Engineering;
- To review the activities of the Upazila WatSan Committee, deliver required suggestions and assistance;
- To coordinate activities of inter-department related to water supply and sanitation;
- To give recommendations in formulating projects on water supply and sanitation; and
- To perform prescribed duties in a development project.

It is assumed that the smooth and efficient functioning of the District WatSan Committee led by DC has a wide scope to play a vital role in the water supply and sanitation sector. The committee can promote safe water and child-friendly sanitation facilities in the educational institutions with the assistance of the LGOs/LGIs, NGOs and Civil Society Organizations and involving the guardians. At the same time, the committee members can visit the educational institutions surprisingly to view the actual scenario of the sanitation and hygiene facilities.

6.11.2 Upazila Water Supply and Sanitation Committee: As per the circular of 2012, Upazila WatSan Committee has been reformed (LGD 2012b) which has been shown herewith in the table.

Table 21: Upazila Water Supply and Sanitation Committee

1	Upazila Parishad Chairman	Chairperson
2	Upazila Nirbahi Officer	Vice-Chairperson
3	Upazila Parishad Vice-Chairman 2	Member
4	Upazila Health and Family Planning Officer	Member
5	Union Parishad Chairman all	Member
6	Upazila Secondary Education Officer	Member
7	Upazila Primary Education Officer	Member
8	Upazila Engineer, LGED	Member
9	Upazila Rural Development Officer	Member
10	Upazila Statistics Officer	Member
11	Upazila Social Services Officer	Member
12	Upazila Women Affairs Officer	Member
13	Upazila Youth Development Officer	Member
14	One NGO Representative Nominated by UNO	Member
15	Assistant Engineer/Deputy Assistant Engineer, Department of Public Health Engineering	Member-Secretary

The committee can co-opt members not exceeding two. The committee will meet at least once within two months. Functions of the Committee are mentioned below:

- To review the activities of the Union WatSan Committees regarding safe water supply and sanitation and deliver required suggestions and assistance;
- To create awareness with a view to following health rules through sanitation and health education activities based on educational institutions, mass-communication, etc.;
- To provide the required assistance to the Department of Public Health Engineering in collecting information/data on water supply and sanitation at the upazila level;
- To identify the existing problems related to water supply and sanitation and prepare recommendations for their solutions and to inform the solutions to the 'District WatSan Committee';
- To adopt projects on water supply and sanitation; and
- To perform prescribed duties in a development project.

It should be noted here that earlier UNOs perform as chairperson in the Upazila WatSan Committee and due to circumstances they have been made Vice-Chairperson. It needs to be mentioned that UNOs and other officials of the Upazila Administration played a significant role in promoting water supply and sanitation activities in Bangladesh and their role may be intensified further in the WASH activities.

The sector plan 2011-2025 and the prevailing strategies need to be aligned with the SDG Goal-6. Various benefits may be obtained from a robust coordination and monitoring system at upazila and district levels. The benefits may be the avoidance of duplication, escalating mechanisms in finding out the causes of good or poor performance; creating easy and more accountability of the service providers in respect to their performance transparently, and supplying of better and real-time information to assess the efficacy of policies, plans and strategies.

Local Committees have a noteworthy role in promoting, coordinating and monitoring the WASH activities. At the field level, Deputy Commissioners and Upazila Nirbahi Officers can expedite the WASH activities vigorously. Simultaneously, District, Upazila, and Union WatSan Committees have critical roles in supervising, coordinating and monitoring WASH activities. It is very crucial to accelerate the activities of the committees to achieve better results.

6.12 WASH in Bangladesh- Key Challenges for Field Administration

- Viewing safe water as well as access to decent sanitation as human rights is a key issue for countries like Bangladesh. These rights are inevitable for life as well as dignity and also the base for obtaining a wealth of the right to health, development, and other human rights. Disseminating these concepts amongst the officials and the representatives of the LGIs at the field level seems to be a big challenge.
- At present, the key challenges for the water as well as sanitation sector are to furnish them for meeting the rising challenges of delivering improved, equitable as well as sustainable services to each and every one. Accessibility to quality and safe water for the whole time of the year, insufficient facilities of sanitation and poor handwashing practices harshly affect the welfare of the children as well as their physical and mental development.
- The deficit of knowledge regarding the impact of WASH on health and nutrition is momentous. Other critical factors i.e. poverty, quick urbanization, water levels declination, arsenic contamination of water along with various diseases burden from this known carcinogen, and vulnerability to natural disasters including climate change compound the exigent WASH situation. Furthermore, the condition of WASH in the slums of urban areas is mostly insecure and has low access that seriously requires strong sludge as well as solid waste management practices. To overcome these challenges Field Administration needs to chalk out district-based Action Plan with the help of LGIs, NGOs, Civil Society, and the SMCs.
- In families, women play a vital role in managing water and sanitation and sometimes women are regarded as guardians of hygiene enforcement. To involve women widely in planning, execution, operation, as well as maintenance of WASH services, will require intervention that is needed to empower women and augment their representation in the organizations of the community and existing committees of the WASH sector.
- The duty bearers at the community level i.e. water user groups, community latrine user groups, committees of water & sanitation, SMCs & CHPs can play a critical role in water quality & sanitation matters. The CHPs generally highlight more on the issues of health while giving a small focus on promoting hygiene. However, there might be a deficiency in the field of skills on quality of water, the infrastructure of latrines, required mechanisms on the operation as well as maintenance amongst the duty bearers.
- One of the key challenges is to make available low-priced water quality testing services and technologies for the households. In the meantime, technological innovations occurred in the WASH sector i.e. smart hand pumps by using ICTs for measuring, monitoring, and improving water security of rural areas and the engineering for improvement of water quality through application of nanotechnology as well as biosensors. It could be mentioned that the country has the opportunity to set up a water-secure risk framework by the use of state-of-the-art integrated modeling from local to national levels for predicting water risks as well as consequences which will notify better investment for reducing poverty, improving child health as well as deliver value for money. Other innovations, for instance, managed aquifer recharge, as well as solar pumps, may bring good results. To use technological innovations in all areas is a gigantic as well as challenging task.
- DPHE has been made responsible to provide safe water and to ensure sanitation in every part of Bangladesh except the WASA covered areas in Dhaka, Chattogram, Rajshahi, and Khulna. The department has a lack of expert and dedicated manpower, technically sound mechanics, adequate allocation, logistic support, and proper training for the district and upazila level employees. To overcome all these issues is not so easy. However, Union Parishads, Upazila and Zila Parishads may be involved widely in the WASH services while Municipalities and City Corporations, where applicable, can put wider attention towards these activities and prepare local level planning to solve the issues.
- Developing as well as implementing vigorous coordination, monitoring as well as evaluation system at the district level is central to determine the track of the WASH sector in accomplishing its goals as per its sector plan 2011-2025 and the SDG Goal-6.

6.13 Recommendations

Despite significant achievements in the WASH sector during the last two decades, Bangladesh needs to do a lot to ensure universal access to safe water, sanitation as well as first-class hygiene practices. Worldwide, presently the actual challenge is to realize WASH as human rights meaningfully in the states of the globe. To achieve this in Bangladesh in line with the national and international documents, the following recommendations may be considered by Field Administration:

In the Case of Policy/Strategy:

- To send a proposal to the government to declare the WASH sector as a highly prioritized sector.
- To provide a proposal to the government to allocate in the WASH sector proportionately, adequately and equitably from the budget. In allocating resources in WASH, spatial inequities may be addressed where issues of rural, hard-to-reach areas, lagging regions, water-challenged areas, and standard WASH practices at schools for children will be highly prioritized.
- Need to adopt a local/district-based plan reviewing the Water Supply and Sanitation Sector Development Plan (2011-2025), the National Strategy for Water Supply and Sanitation 2014 and the SDG-6. A multi-pronged approach for all with special consideration to the needs of children is a must in doing so. LGIs must be extensively involved in these activities.
- Harmonized approach for arsenic mitigation needs to be adopted at the district level.
- Importance should be given on the neglected issues like Faecal Sludge Management as well as hygiene.
- Additional priority to Integrated Water Resources Management at the divisional level may bring a good result.
- To send a proposal to the government to include the contents of the WASH sector in the school curriculum appropriately and there should be practical aspects.
- Special WASH intervention for the Rohingyas who fled away from Myanmar and took shelter in Bangladesh.

In the Case of Institutions/Governance:

- To avoid the gap between allocation and expenditure and to utilize the allocation fully and more effectively, institutional capacity development of field offices of DPHE, WASA, and LGIs. Work culture should also be changed and the TQM method/Kaizen approach may be used to improve gradually at the local level.
- Observance of the Sanitation Programme during the Sanitation Month extensively up to root level.
- Require to strengthen WatSan Committees at field level to achieve the stipulated purposes.
- More focus on the WASH facilities in educational institutions. Need to engage the LGIs and local communities in the WASH activities intensively.
- To speed up WASH service delivery.
- To intensify the drives of Mobile Courts to ensure sanitation and hygiene practices both in urban and rural areas.

In the Case of Programmes/Projects:

- In schools as well as in health centres WASH facilities together with the facilities of menstrual health management for all giving special attention to children having disabilities.
- Stress on awareness and promotional programme especially on safe water, better sanitation and hygiene practices like handwashing with liquid soap or soap at vital times. Harmful social norms, as well as cultural beliefs that persuade the practices of WASH, should be removed and need to disseminate health messages widely. C4D activities can play a critical role in mobilizing the less conscious people and concerned all.

- In urban slums and hard-to-reach areas, '100 percent coverage approach'. To achieve 100 percent coverage will require a coordinated approach. LGOs/LGIs, NGOs, Civil Society Organizations and educational institutions must be vigorously motivated through various activities. LGOs/LGIs should make strong local plan on water, sanitation and hygiene issues and allocate sufficient resources/money in their budgets to attain the targets and to make the achievements sustainable.
- More support to involve women in WASH planning, execution, operation as well as maintenance.
- In the field of improved sanitation, creating a strong linkage between handwashing and solid waste management.
- Early emergency preparedness on safe water and improved sanitation for managing disasters. Steps to prevent recurrent devastation of WASH infrastructures by natural disasters.
- A special programme may be arranged for the ethnic minorities who do not know Bangla and for the people living in hard-to-reach areas like char lands to disseminate the WASH messages.
- Intensive training to enhance capacity building at local levels of all the officials including the LGIs involve with the WASH sector.
- A two days training programme on sanitation and hygiene for the young and adult people may be arranged at the upazila or union levels by the District and Upazila Administration in collaboration with the LGOs/LGIs using local resources. Similar programme may also be arranged in the educational institutions involving the School Management Committees. For these programmes, projects/schemes may also be adopted by the LGOs/LGIs.

In the Case of Monitoring & Evaluation /Data/Knowledge Management/Innovation:

- Strong quality surveillance, supervision, coordination, monitoring along with reporting structure emphasized on equity and children at all levels.
- Encouraging climate-resilient WASH technologies and making those available.
- Promoting new technologies to tackle challenges of water quality, all-time access, operation including maintenance as well as gearing up pilot measures on substitute technologies.
- Developing a strong evidence base regarding the impact of arsenic, manganese, salinity as well as faecal contamination on health for effectual advocacy.
- With a view to generating available 'Real-time data' adopt changes in knowledge as well as practices including the changes of norms.
- Listing the best practices of the sanitation and hygiene field and disseminating those for their wide scale use to attain better results.
- Uploading the real-time data and best practices in the district web portal with special consideration to the children.

7.1 UNICEF Country Programme 2017-2020

Government of the People's Republic of Bangladesh and the UNICEF has adopted a four year tenured comprehensive Country Programme 2017-2020 to improve the living standard and establish the rights of the children of the country. Concerned ministries/divisions and departments of the Government are implementing the programmes at field levels following the approved policies of development work implementation of the government. Simultaneously, some NGOs are functioning as associate organizations for some fixed activities. An Action Plan Document has been prepared to execute the programme. It is to be noted here that the country programme has been prepared based on the review of the 2012-2016 Country Programme.

The Country Programme is being executed within UNDAF 2017-2020. UNICEF contributes prominently to the UNDAF outcome: "develop and implement improved social policies and programmes that focus on good governance, the reduction of structural inequalities and the advancement of vulnerable individuals and groups". UNICEF is providing 340 million US dollars as assistance for the programme (UNICEF 2016b).

Table 22: UNICEF Country Programme budget summary table (In thousands of United States dollars)

SL	Programme Component	Regular Resources	Other Resources	Total
1	Young children and their mothers	15 000	110 500	125 500
2	Boys and girls of primary-school age	20 000	37 500	57 500
3	Adolescents as agents of change	20 000	55 000	75 000
4	Social inclusion and increased awareness on child rights	20 000	20 000	40 000
5	Programme effectiveness	15 000	27 000	42 000
6	Total	90 000	250 000	340 000

Source: UNICEF Bangladesh Country Programme for 2017-2020

7.2 LGC Programme

The LGC programme is being implemented with the cost of 42,000 thousands US dollars to ensure the programme effectiveness of the Country Programme 2017-2020.

7.2.1 Objectives and Aims of the LGC programme: Under the Country Programme, Cabinet Division and UNICEF have jointly undertaken a programme named 'Local Governance for Children' known as LGC based on discussions with the ministries/divisions at the national level and the departments of the field level. The LGC has been made based on the recommendations of achieved outcomes, information and data on child situation as well as formal evaluation of the 'Local Capacity Building and Community Empowerment' programme which was executed from 2012 to 2016. Objectives and aims of the LGC programme are to provide necessary assistance to the officials and public representatives working in the programme areas till 2020 so that they can in a better way analyze the situation of the children of their areas, adopt development plans, implement and evaluate those for the children magnificently. The specific objectives of the programme are:

- to analyze and monitor the present condition and situation regularly of the children in all the programme districts and city corporations;
- to prepare micro-plans by identifying, analyzing and monitoring the impediments against the overall development of the children and the disaster risks and adopt measures for solutions through the participation of the local people;
- to adopt a child-centred disaster risk reduction approach for reducing the risks by identifying the disaster risks of the children and keeping in mind the probable effects or results of the disaster risks; and
- to identify the problems and disaster risks of all the children and involve the local people during the discussion on local development and to include those in the local planning as well as allocate budget on a priority basis.

7.2.2 Key Components of LGC Programme

Area 1: Strengthen focus on child rights programming in the Sub-National Development Coordination System

Specific Activities: 1. Formation of a Thematic Group on Children to monitor children's situation, 2. Programme review meetings: Mid-Year and End-year, 3. Monitoring visits by district and CC team, 4. Support to review Citizen Charters and children's issues, 5. Establish a network of Mayors and CEOs to support thematic dialogue in urban areas, and 6. Support to partners with human resources.

Area 2: Capacity building of Sub-National Level Development Coordination Structures in the area of Evidence-based Planning and Risk-Informed Programming

Specific activities: Assess capacity and Training Needs of the Development Coordination Structures on data and bottleneck analysis i.e. 1. Train sectoral officials on Evidence-based Planning, 2. Analyze the bottleneck and situation of children, 3. Strengthen basic social services for children in tea garden areas in Sylhet and 4. Train Disaster Management Committees on CC-DRR.

Area 3: Adoption of CC-DRR approach in Government's Country Strategy on DRR and Emergency Preparedness

Specific activities: 1. Review available tools for assessment of disaster risks both rural and urban, 2. Mapping of partners implementing DRR/CC-DRR related activities, 3. Assess disaster risks, with special focus on children, in rural and urban areas, and 4. Update Disaster Contingency Plans by using the findings of risk assessment.

Area 4: Conduct bottleneck analysis and Develop Sector Status Report

Specific Activities: 1. Data and bottleneck analysis of service coverage, and 2. Develop Sectoral Status Report in children as minimum situation analysis.

Area 5: Integration of Children's issues in sectoral and Local Government Plans with Public Funds.

Specific Activities: 1. Support partners to develop local sectoral plans with children's priorities, and 2. Support local level initiatives (linked to government priority) for children.

Area 6: Monitoring and reporting

Specific Activities: 1. Joint Monitoring visits by National Steering Committee: 4 missions/year, 2. Quarterly Progress Report: 4 reports/year, and 3. Documentation and dissemination of programme learning.

7.2.3 Geographical Coverage of the LGC Programme: The LGC programme is being implemented in 46 upazilas of 22 districts and in all 11 City Corporations of the country. The districts are Bandarban, Cox's Bazar, Rangamati, Khagrachhari, Bhola, Habiganj, Sunamgonj, Sherpur, Netrokona, Jamalpur, Kushtia, Chapainawabgonj, Nilphamari, Tangail, Kurigram, Sirajgonj, Barguna, Patuakhali, Bagerhat, Satkhira, Khulna, Gaibandha. The first eight districts have been selected considering poor social indicators while the next eight districts have been selected based on high child marriage rate and the rest six based on disaster-prone/climate change.

7.2.4 Role of Field Administration in Implementing the LGC Programme: In implementing the LGC programme, there are Convergence Coordination Committees at the field level led by the Divisional Commissioners, DCs, UNOs, and at the grassroots level UP Chairmen and the Ward Members. Therefore, the role of the Field Administration in executing the programme is enormous.

7.2.4.1 Role of Divisional Commissioners

- To lead the committee
- To give required assistance in implementing all the adopted activities at the district level
- To inspire all the development departments or sectors at the divisional level in increasing allocation for the development of children
- To monitor the project activities of the field levels
- To review the advancement of project implementation twice in June and November in a year

7.2.4.2 Role of Deputy Commissioners

- To form a 'Thematic Group on Children' with the concerned officials of the District Coordination Committee
- To hold a meeting in every month of the 'Thematic Group on Children'
- To arrange necessary measures by the concerned department on identified problems of the children reviewing the district child situation in the Thematic Group on Children
- To initiate steps to include the prioritized required needs of the children in the respective departments and organization's development plans by reviewing the data and reports on district child situation
- To assist the District Coordination Committee in monitoring the advancement of the project implementation for the development of the children
- To provide necessary directions for executing the child-related projects at upazila level
- To recruit a coordinator for each district
- To maintain the bank account, send requisition for allocation of money and managing the fund sent by UNICEF as per Government laws
- To prepare monthly progress reports of the project and send it to the Divisional Commissioner, copy to the concerned ministry, and to the Cabinet Division (DFA) as well as to the Field Office of UNICEF Bangladesh and its Field Service Head of Dhaka
- To conduct all the activities of LGC with the assistance of concerned UNICEF officials

Provided that, in the case of CHT districts, the programme will be implemented through maintaining coordination with the Hill Tracts District Parishads and Chattogram Development Board.

7.2.4.3 Role of Upazila Nirbahi Officers

- To review the child situation of the upazila in the monthly General meeting of the Upazila Parishad with the participation of the concerned officials related to it, to identify problems, if any and to take necessary measures by the concerned department
- To give necessary directions in implementing programmes at unions of the upazila
- To initiate steps to include the prioritized required needs of the children in the respective departments and organization's development plans by reviewing the data and reports on upazila child situation
- To monitor the progress of the projects adopted for the development of children

The role of the UNOs is very significant because they lead the upazila as Representative of the Government and can supervise the activities of the Union and Ward Committees and can play a role in including child-related issues in the local level planning and motivate to increase allocation for the children. DCs and Divisional Commissioners have also large scope in doing so especially in supervising such activities and in the case of motivating LGOs/LGIs.

District and City Corporation Committees receive strategic directions from a national level Steering Committee led by the Additional Secretary (DFA) of the Cabinet Division. The Steering Committee is comprised of the representatives from Ministry of Local Government, Rural Development and Cooperatives, Ministry of Primary and Mass Education, Ministry of Women and Children Affairs, Ministry of Disaster Management & Relief, Ministry of Chattogram Hill Tracts Affairs, Ministry of Information, Economic Relations Division, Health Services Division, Health Education and Family Welfare Division, Finance Division, Bangladesh Public Administration Training Centre, and National Institute of Local Government.

Thus LGC programme is being implemented by the National and Field Coordination Committees for strengthening development coordination structures/mechanisms for better results for children. It can be said that Divisional Commissioners, DCs and UNOs of the concerned areas have a significant role in bringing effectiveness of the UNICEF Country Programme.

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