From 2018 to 2023, USAID’s Accelerating Universal Access to Family Planning Project, also known as Shukhi Jibon in Bangladesh, reached 1.2 million adolescents across four geographic divisions with family planning information and services. Underpinning this work are innovative community-based initiatives implemented by Shukhi Jibon’s six renowned local partners to increase young people’s ability to exercise their right to sexual and reproductive health care. This brief identifies key activities driven by local partners and conducted directly with adolescents and youth to enhance young people’s engagement, knowledge, skills, and agency to prevent child, early, and forced marriages; avoid unintended pregnancies; access adolescent-friendly sexual and reproductive health services; and create pathways toward healthy adulthood.
BACKGROUND

Bangladesh's adolescent and youth population—one of the largest and fastest-growing in the world—has urgent and varied needs for family planning services and sexual and reproductive health (SRH) care. Bangladesh reports one of the highest rates of child marriage in the world. According to Bangladesh's 2022 Demographic and Health Survey, more than 50% of girls marry before age 18, and more than 1 in 4 (27%) marry before age 16. Bangladesh also has the highest adolescent fertility rate in South Asia. Approximately 1 in 4 girls ages 15-19 have begun childbearing. One in four female adolescents do not know any modern method of contraception, and nearly all (90%) do not know about emergency contraceptive pills.

A strong tradition of early marriage and childbearing, set against a backdrop of conservative social and gender norms, means adolescent and youth sexual and reproductive health and rights (AYSRHR) is often out of reach for Bangladesh's young people, especially the most marginalized. To reduce barriers and ensure more equitable access to AYSRHR services—now and in the future—USAID’s Shukhi Jibon project supports community-driven activities in 15 districts.

Sustainable progress for adolescents and youth depends on the knowledge, capabilities, innovation, and leadership of local partners who know best how to meet the needs of young people in their communities.

1. National Institute of Population Research and Training (NIPORT) and ICF. “Bangladesh Demographic and Health Survey 2022: Key Indicators Report.” (Dhaka, Bangladesh, and Rockville, Maryland, USA: NIPORT and ICF, 2023).
Keeping local partners at the center

Recognizing the complex interplay between individual, interpersonal, household, and community factors on AYSRHR outcomes, organizations and leaders in Bangladesh—nongovernmental organizations (NGOs), youth leaders, religious leaders, and the government’s massive cadre of frontline health workers, among others—are implementing solutions that have the potential to create significant impact on AYSRHR. Shukhi Jibon is committed to expanding and enhancing locally led, equitable, and innovative activities that increase young people’s agency to prevent early, child, and forced marriage; avoid intended pregnancy; and make choices that will affect their health, lives, and futures.

Adolescents (ages 10–19) made 1.2 million visits for SRH services at facilities supported by Shukhi Jibon from October 2018 to June 2023. This result is built upon a constellation of robust activities to strengthen the public sector as well as partnerships with six local NGOs with significant experience, capabilities, and credibility to improve AYSRHR in their communities:

- Eco-Social Development Organization (ESDO),
- Family Planning Association of Bangladesh (FPAB),
- Light House,
- Partners in Health & Development (PHD),
- SERAC Bangladesh, and
- Young Power in Social Action (YPSA).

Shukhi Jibon provides focused grants and technical support to these local NGO partners, who lead new and innovative initiatives, gender-responsive solutions, technology-based approaches, and ongoing AYSRHR programs in Dhaka, Chattogram, Mymensingh, and Sylhet divisions. This program brief highlights community-driven activities conducted directly with young people to expand their knowledge, practices, competencies, and attitudes, and to ensure young people have strong social networks and support from their peers to exercise their right to AYSRHR.
# Youth Agency & Choice

Expand young people’s sexual and reproductive health (SRH) knowledge, skills, attitudes, social networks, and agency that enable them to achieve their SRH rights

## Strategies

- Build young people’s skills, knowledge, and social networks
- Promote youth leadership
- Ensure the inclusion of marginalized young people
- Advance comprehensive sexuality education
- Use digital technologies to promote healthy SRH behaviors

## Results

- Young people have increased knowledge, skills, intention, and agency to make healthy decisions about their sexual and reproductive health and rights (SRHR)
- Young people have access to and utilize safe and supportive opportunities that promote critical thinking, healthy decision making, and the adoption of health-promoting behaviors related to SRHR
- Young people hold and champion favorable attitudes and perceptions related to sexuality, gender-equity, and SRH rights and entitlements
- Young people have a better understanding of the attributes of healthy relationships and agency to maintain respectful social and sexual relationships free of violence
KEY STRATEGIES AND RESULTS

Build young people’s skills, knowledge, and social networks

Shukhi Jibon supports local NGOs to leverage new and existing platforms to directly engage young people. Through monthly training sessions, forums, and clubs—conducted in and out of school—young participants gain knowledge and skills to improve their health and wellness, including how to access AYSRHR services. Such platforms include TararMela, FPAB’s signature youth-led program; the Youth Development Forum organized by ESDO; and clubs for adolescents, including hard-to-reach ethnic minorities, organized by YPSA; among others. Together, young people share their feelings and thoughts with their peers; foster a sense of connectedness that promotes mutual learning; and reflect on gender norms, attitudes, and behaviors that influence their AYSRHR.

122,271 young people, including 30,000+ very young adolescents aged 10–14, participated in AYSRHR sessions supported by Shukhi Jibon from 2021 to 2023.

Promote youth leadership

Adolescents and youth are more than stakeholders; they are creative, dynamic partners with the power to shape their own priorities and futures. Shukhi Jibon implements extensive activities with local partners SERAC, ESDO, FPAB, and Light House to increase the participation and leadership of young people to mobilize their peers and communities to improve AYSRHR. For example, through a partnership with Light House, the project helped establish “Youth Brigades.” Comprising young volunteers of diverse genders, including marginalized transgender youth, Youth Brigades receive skills training; information, education, and communication (IEC) materials; and opportunities to share knowledge related to adolescent-friendly health services, contraceptive choice, decision making for AYSRHR, and more. During sessions with their peers, visits to their neighbors’ homes, and local awareness-raising campaigns, Youth Brigade members speak out to reduce shame and stigma and increase demand for AYSRHR services.

6,754 adolescent peer leaders were trained by Shukhi Jibon’s local partners to promote healthy AYSRH practices and increase healthcare-seeking behavior from 2021 to 2023.
To increase young people’s knowledge of CSE concepts, such as gender, decision making, and SRHR, peer educators and schoolteachers use videos and training modules called “Boyoshondhikalin Jibon Dokkhata Shikkha” (“Life Skill Education in Adolescent Period”).

“Ensure the inclusion of marginalized youth”

Local partners lead activities, such as community sessions, to advance the inclusion of marginalized youth populations, including unmarried adolescents, ethnic minorities, transgender youth, young people with disabilities, and young people living in areas that are geographically isolated or prone to extreme natural disasters. For example, in rural tea garden communities of Sylhet, Shukhi Jibon and local partners work with the Directorate General of Family Planning (DGFP) to reach adolescents and youth—who often face extreme poverty, are socially isolated, and struggle to access distant health services—through tele-counseling visits. Tele-counseling for young, hard-to-reach individuals has been so successful that the government has committed to continuing these services after Shukhi Jibon ends.

89,063 people participated in project-supported community sessions on AYSRHR, including 1,000+ transgender youth, to increase their knowledge and awareness of AYSRHR from 2021 to 2023.

“Advance comprehensive sexuality education”

A proven strategy that has a positive impact on SRH outcomes, including a reduction in sexually transmitted infections (STIs) and unintended pregnancy, comprehensive sexuality education (CSE) is a key component of Bangladesh’s National Plan of Action for Adolescent Health Strategy 2017–2030. In support of the government’s goals, Shukhi Jibon collaborates with local partner FPAB to conduct CSE training sessions with adolescents and youth ages 10–24 to close significant knowledge gaps about sex and sexuality, and to empower young people with the information and life skills they need to lead healthy and productive lives. Project-supported CSE sessions focus on a range of topics, such as communication, decision making, negotiation, gender, respect, AYSRHR, relationships, pleasure, diversity, and violence.

More than 44,800 young people, including 7,000 very young adolescents, participated in CSE sessions supported by Shukhi Jibon from 2021 to 2023.

“I got information about CSE. It helps me enrich my knowledge and skills to navigate relationships, make informed decisions, and foster a culture of respect and consent.”

—Sabikunnahar Priti, Youth Counselor supported by FPAB

3. Types of community sessions include courtyard meetings, in-person communication through household visits, and health education sessions in community clinics.

Use digital technologies to promote healthy SRH behaviors

Shukhi Jibon supports local partners to harness the power of popular digital tools—that many adolescents and youth already use—to connect young people to accurate information and skilled providers, and to promote healthy AYSRHR behaviors. For example, voluntarily enrolled adolescent married couples and first-time parents in project areas receive voice messages and short message service (SMS) focused on AYSRHR and family planning issues. These messages, which are developed by local partner PHD in line with Ministry of Health and Family Welfare (MOHFW) guidelines, are displayed in Bangla. In addition, local partner SERAC develops weekly quizzes that are posted on the social media pages of DGFP’s Information, Education and Motivation (IEM) Unit. Quizzes and other engagement strategies link young people to call center agents, who are trained to deliver adolescent- and youth-friendly information, as well as skilled providers who are ready to answer AYSRHR-related questions and provide referrals for services.

578,800+ people were reached through quizzes posted by DGFP’s IEM Unit’s social media accounts.

Shukhi Jibon collaborates with the DGFP and local NGO partners to reach young people where they are—on their phones, trusted websites, and their favorite social media platforms.

Significant improvements in AYSRHR outcomes, including reductions in early marriage and childbearing, depend on local action. Increasingly, trusted organizations in Bangladesh are taking the lead. Shukhi Jibon is committed to supporting local NGO partners, who work directly with young people to increase their ability to make healthy choices, exercise their rights, improve their sexual and reproductive health, and fulfill their aspirations.
“Through Shukhi Jibon, adolescents can create a ripple of positive change through generations, breaking cycles of poverty and inequality by enabling individuals to plan their families and futures.”

—Dr. Mohammad Nurul Alam, Program Officer (Medical) and District Officer, Family Planning Association of Bangladesh