

# Adolescent girls' capabilities in Bangladesh

The state of the evidence on programme effectiveness

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#### Disclaimer

Gender and Adolescence: Global Evidence (GAGE) is a nine-year longitudinal research programme building knowledge on good practice programmes and policies that support adolescent girls in the Global South to reach their full potential.

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## Acronyms

ADB	Asian Development Bank
ADP	Adolescent Development Programme
AIDS	Acquired Immune Deficiency Syndrome
APON	Adolescent Peer Organised Network
ARHE	Adolescent Reproductive Health Education
BALIKA	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents
BAS	Bangladesh Adolescent Survey
BBS	Bangladesh Bureau of Statistics
BCPS	BRAC Community Primary Schools
BDHS	Bangladesh Demographic and Health Survey
BIDS	Bangladesh Institute of Development Studies
BDT	Bangladeshi Taka
BNFPS	BRAC Non-Formal Primary Schools
BFPS	BRAC Formal Primary Schools
BRAC	Building Resources Across Communities
BSEM	BRAC Schools for Ethnic Minorities
BYWLTS	Building Young Women's Leadership Through Sport
CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women
CIDA	Canadian International Development Agency
CMES	Centre for Mass Education in Science
DAP	Developmental Assets Profile
DBRHCP	Demand-Based Reproductive Health Commodity Project
DD	Double Difference
DFID	Department for International Development
DHS	Demographic and Health Survey
ΕΚΑΤΑ	Empowerment, Knowledge and Transformative Action
ELA	Employment and Livelihood for Adolescents
EPPI	Evidence for Policy and Practice Information
FFE	Food For Education
FGD	Focus Group Discussion
FSSSP	Female Secondary School Stipend Programme
FSSAP	Female Secondary School Assistance Project
GAGE	Gender and Adolescence: Global Evidence
GoB	Government of Bangladesh
GQAL	Gender Quality Action Learning
HIV	Human Immunodeficiency Virus
ICDDR,B	International Centre for Diarrhoeal Disease Research
ICRW	International Center for Research on Women
IDI	In Depth Interview
IFPRI	International Food Policy Research Institute
INGO	International Non-Governmental Organisation
IPV	Intimate Partner Violence



ITSPLEY	Innovation through Sport: Promoting Leaders, Empowering Youth
КА	Kishori Abhijan
KII	Key Informant Interview
КК	Kishoree Kontha
MCI	Meena Communicative Initiative
MENJNIN	Meyeder Janna Nirapad Nagorikatta
MICS	Multiple Indicator Cluster Survey
MoPME	Ministry of Primary and Mass Education
NGO	Non-Governmental Organisation
NORAD	Norwegian Agency for Development Cooperation
PACE	Personal Advancement and Career Enhancement
PES	Primary Education Stipend
PLCE	Post-Literacy and Continuing Education Project
PSM	Propensity Score Matching
RCT	Randomised Control Trial
RH	Reproductive Health
ROSC	Reaching Out of School
SAFE	Growing Up Healthy and Safe
SDC	Swiss Agency for Development and Cooperation
SEDP	Secondary Education Development Project
SIDA	Swedish International Development Cooperation Agency
SFP	School Feeding Programme
SGBV	Sexual and Gender-Based Violence
SRH	Sexual and Reproductive Health
SSC	Secondary School Certificate
SoFEA	Social and Financial Education for Adolescents
STI	Sexually Transmitted Infection
TVET	Technical and Vocational Education and Training
UCEP	Underprivileged Children's Education Programme
UN	United Nations
UNDP	United Nations Development Programme
UNESCO	United Nations Educational Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
US	United States
WASH	Water Sanitation and Hygiene
WFP	World Food Programme
YWCA	Young Women's Christian Association



## **Executive Summary**

#### **Report objectives**

This rapid country evidence mapping report brings together key evidence on the wellbeing of adolescent girls (aged 10-19) in Bangladesh, particularly what is known about the effectiveness of interventions in the six core capability domains of Gender and Adolescence: Global Evidence (GAGE) programme. It focuses on the availability of evidence and important gaps, and it is not intended as a comprehensive assessment of 'what works'. It focuses specifically on adolescent girls and does not attempt to synthesise the enormous body of literature on gender and development interventions in the country, as the girl-focused literature itself draws upon wider gender and development analysis. This report has been produced to inform GAGE programming and to feed into the design of the longitudinal impact evaluation study. In addition, it aims to provide a resource for researchers, programme designers and policy makers to better understand what is known about interventions targeting adolescent girls in Bangladesh and what the key evidence gaps are so that GAGE and other research programmes can best contribute to a robust evidence base to support evidence-informed policy and programming.

## Methodology

This evidence review draws on the analysis of 165 studies, obtained through a systematic search process conducted in Google Scholar and specific searches of key international development websites and databases. The vast majority (86%) of the literature found was grey literature, a large proportion of it produced by international agencies and non-governmental organisations to present or assess implemented programmes. As girls' interventions do not divide neatly into the six GAGE capability domains, there is inevitably some cross-over between sections, particularly where interventions have several components.

# State of the intervention evidence base on adolescent girls in Bangladesh

We found 48 impact studies and evaluations, of which under half used methodologies generally considered rigorous (scoring 4-5 on the Maryland Scale of Scientific Measurement). A total of 25 studies employed mixed methods, only two used purely qualitative techniques, and the remaining 21 employed various quantitative techniques. Only three multi-component interventions (BALIKA, Kishoree Kontha and SAFE) were designed as RCT-based programmes to assess the relative effectiveness of different strategies. Almost all of the accessed impact studies and evaluations were conducted relatively soon after the end of the project (within two years) or on programmes that were still ongoing. In addition, although the intervention target spans the adolescent age group, evaluations rarely assess and specify outcomes by narrower age groups. Identifying which intervention strategies have better effects on different adolescent age groups, understanding whether the impacts prove transformative into adulthood, and determining the relative importance of different components in effecting change in girls' lives, are three key areas where GAGE would be well-placed to make valuable contributions.

## Key findings

#### Voice and agency interventions

**Overview of the evidence and key findings:** Our search generated 18 impact studies and evaluations of interventions aiming to transform discriminatory social norms and empower adolescent girls. Many NGOs



that are active in Bangladesh, have made addressing norms and empowering girls an important focus of their programmatic work, implementing programmes that combine life skills training in safe spaces and similar empowerment strategies with community mobilisation. These interventions, however, have been evaluated with varying degrees of rigour; most have found evidence of attitude change, though this is not always consistent across the issues examined. Further analysis of how far attitude change is linked to behavioural change and how long any such changes persist into adulthood would be useful GAGE contributions both to the Bangladesh-focused literature and globally.

#### Psychosocial wellbeing interventions

**Overview of the evidence and key findings:** We found only one evaluated intervention to delay child marriage and empower adolescent girls that explicitly aimed at measuring changes in girls' psychosocial wellbeing. However, girl-focused empowerment programmes typically seek to increase girls' self-esteem and opportunities to build friendship networks; yet very few evaluations specifically assessed change in these issues. Some evaluations of economic empowerment programmes also included measures of psychosocial wellbeing in terms of girls' ability to establish some control over their lives, improve their relationships and enhance their family and community status. However, it is clear that the evidence in this area is very weak and there is scope for GAGE to make a significant contribution.

#### Bodily autonomy, integrity and freedom from violence interventions

Our search generated 12 evaluations and impact studies of programmes aiming to improve the bodily integrity of adolescent girls in Nepal.

#### Child marriage

**Overview of the evidence and key findings:** The majority of evidence focuses on interventions targeting rural girls and their communities and aiming to raise awareness of the legal age of marriage (generally successful) and to change attitudes towards age of marriage (moderately successful). There is less evidence of actual change in the age of marriage related to these activities; several evaluations suggest that a combination of safe spaces and peer-led awareness raising did not lead to significant change in the age of marriage. However, two recent evaluations of experimental programmes indicate success in delaying child marriage: the one through the provision of a small financial incentive, and the other through the provision of educational support or skills training, although the exact pathways of change remain unclear.

#### Violence against girls

**Overview of the evidence and key findings:** We were surprised to find only a few examples of attitude and behavioural change interventions explicitly focused on reducing violence against girls and young women. It is thus hard to draw conclusions given the weak evidence base and the varying programme designs and implementation. However, there is some evidence of reduced support for gender-based violence, and fewer women and girls experiencing it in intervention areas, especially if boys and men are actively engaged in programme activities.

#### Education and learning interventions

**Overview of the evidence and key findings:** Our search generated 21 impact studies and evaluations of education-related interventions, suggesting that there is a considerable literature on the effects of interventions targeting girls or disadvantaged children and aiming at increasing their access to education and school attendance. A body of studies particularly considers the impact of the Female Secondary School Stipend programme. Most find that it has contributed to boosting girls' secondary enrolment in the country, though some studies suggest that structural economic forces, such as increased employment opportunities for women, also played a key role; others consider that its impact could be enhanced by greater attention to education quality and socioeconomic status differences among participating girls. More recent interventions



explicitly targeting adolescent girls also include provision of safe spaces and peer support groups. We were unable to access any evaluations of programmes explicitly aiming to improve the quality of education or learning outcomes, and thus lack insights into how far educational interventions are enhancing girls' actual learning and capabilities.

#### Economic empowerment interventions

Overview of the evidence and key findings: Our search generated 10 evaluations and impact studies of interventions promoting the economic empowerment of adolescent girls. While there is a body of evidence on vocational skills training programmes, overall we found little clear evidence of their subsequent labour market effects. Girls were particularly attracted by training programmes that enabled them to find employment in garment factories. The evaluations that reported on older girl participants' subsequent income gains found moderate increases. There was no concrete evidence of income-generating activities leading to greater school dropout. In the case of microfinance schemes, one BRAC qualitative study suggested that poorer adolescents were not taking loans as they feared being unable to repay them. The two evaluations of programmes that provided financial skills training found limited impacts from this component. Most evaluations noted increased self-confidence among girl participants; beyond this, they did not discuss acquisition of other soft skills. Few studies used a robust methodology, thus we still do not know what works best to promote the economic wellbeing of adolescent girls in different settings or of different ages, as most interventions targeted older adolescent girls. Given the range of combined social and economic empowerment programmes working with disadvantaged women in Bangladesh, it would also be instructive to examine whether, and if so in what ways, this broader empowerment – resulting in some reconfiguring of power relations, particularly in rural areas, and greater ability to challenge asset dispossession or negotiate for better wages – has affected adolescent girls.

#### Sexual and reproductive health, health and nutrition interventions

**Overview of the evidence and key findings:** Our search generated 16 impact studies and evaluations that aimed to improve adolescent girls' physical wellbeing. The vast majority of examined interventions sought to increase sexual and reproductive health knowledge among male and female youth, and were successful to different degrees. However, changing relevant attitudes and behaviours appeared to be far more challenging. Active involvement of adolescent boys and young men in intervention activities was found to generate better outcomes. Overall, very few studies reported on actual health outcomes and service utilisation.

#### Key evidence gaps

This review uncovered a number of key evidence gaps. Thus GAGE research could usefully focus on the following gaps in order to contribute to a more robust and comprehensive evidence base on adolescent girls' capabilities and programmatic responses:

- Generate insights into the long-term impacts of interventions focused on norm change and girls' empowerment
- Explore the impacts of economic empowerment interventions, both those aimed at younger adolescents as well as those aimed at older adolescents and youth
- Investigate what works to improve girls' psychosocial wellbeing and the factors that affect it
- Explore how best to protect older adolescent girls from child marriage, especially those with increased vulnerability
- Investigate how best to reach and assist particular groups of girls, including girls with disabilities and married girls, to enhance their capabilities
- Ensure that research on adolescent girls is more explicitly linked to the broader economic and political context.



# **1. Introduction**

This Rapid Country Evidence Mapping report outlines key evidence on interventions to boost adolescent girls'<sup>1</sup> capabilities in six key domains in Bangladesh. Together these domains encompass the areas to be explored in the longitudinal studies undertaken by the Gender and Adolescence: Global Evidence (GAGE) programme: voice and agency, psychosocial wellbeing, bodily autonomy, integrity and freedom from violence, education and learning, economic empowerment, and sexual and reproductive health, health and nutrition. This report highlights areas where knowledge on adolescent girls' interventions is strongest and identifies key gaps to inform the design of GAGE's longitudinal studies. The report is intended as a living document and may be updated over the course of GAGE.

## 1.1 Methodology and overview of the literature

This Rapid Country Evidence Mapping is based on a systematic search process. The main search locations were Google Scholar, academic and development databases, and websites of organisations known to be active in Bangladesh. Full details of the search terms and locations are provided in Annex 2. The sources found were uploaded to and coded in EPPI Reviewer (a systematic review software) to facilitate analysis. Inclusion and methodological assessment decisions were made by one researcher as is common in rapid evidence assessments.

The overall search process returned 631 documents. Of these, 165 had information about interventions: 48 were impact studies and evaluations, while the remaining 117 were project descriptions. Overall, 86% of intervention documents were grey literature. Table 1 below outlines the thematic distribution of the impact studies and evaluations, and shows that the greatest number of evaluations concerned interventions seeking to improve girls' education and learning, followed by those aiming to enhance their voice and agency. The smallest number of studies – just one – assessed interventions seeking to measure changes in psychosocial wellbeing, reflecting the fact that these issues have been little studied in relation to adolescent girls in Bangladesh.

Thematic distribution of impact studies and evaluations	Number of studies (n=48)
Education and learning	21
Voice and agency	18
Sexual and reproductive health, health and nutrition	16
Bodily autonomy, integrity and freedom from violence	12
Economic empowerment	10
Psychosocial wellbeing	1

#### Table 1: Thematic foci of impact studies and evaluations

Note: many studies generated insights on multiple capabilities and hence numbers add up to more than 48.

Only 21 of these evaluations and impact studies used methodologies generally considered rigorous (scoring 4-5 on the Maryland Scale of Scientific Measurement). Nine of these highly rated studies examined interventions that aimed to reduce child marriage or gender-based violence and to empower adolescent girls more broadly; seven others assessed interventions that sought to enhance access to education and learning among girls (and/or disadvantaged children more broadly); and the remaining five studies concerned interventions to promote adolescent sexual and reproductive health. Over half – 25 studies – combined qualitative and quantitative methods, only two used a purely qualitative approach, and 21 used various

<sup>1</sup> Adolescents are defined as age 10-19 inclusive.



quantitative techniques. Only three programmes used a cluster randomised control research design to test the relative effectiveness of different intervention strategies: the Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents (BALIKA); the Kishoree Kontha; and the Growing Up Safe and Healthy (SAFE) programme. Having similar objectives, two other sexual and reproductive health programmes in the early 2000s, used a quasi-experimental design with three arms (Bhuiya et al., 2004; 2006; Haseen et al., 2004).

#### **1.2 Limitations**

The rapid and desk-based nature of this study means that some key literature may have been missed. Some relevant evaluations and studies may have been discarded as the age group was not specified precisely enough to be sure that studies were relevant to adolescent girls. Some relevant studies may have also been discarded because inclusion and exclusion decisions were made by a single researcher. Single coding of studies may have also affected the precision by which evaluation methodologies were classified.



# 2. Voice, agency and psychosocial wellbeing interventions

#### 2.1 Overview of the evidence

We found 18 impact studies and evaluations of interventions aiming to tackle discriminatory norms and to empower adolescent girls. Fourteen of these studies were grey literature and the remaining four were papers published in academic journals. Thirteen studies combined qualitative and quantitative methods to evaluate interventions, while only one used purely qualitative methodology and four quantitative techniques. Evaluations of two interventions (BALIKA and Kishoree Kontha) used a randomised control trial (RCT). The majority of studies assess multi-component programmes, which included safe spaces and peer-led life skills training that provided adolescent girls with information about their legal and social rights. As these programmes had multiple objectives, such as tackling child marriage, improving school enrolment, increasing girls' economic activity or improving their health knowledge, a few of these studies are also discussed in the other relevant sections of this review. We also found 43 sources with information about projects with similar objectives. In addition, we found only one study of an evaluated intervention with explicit psychosocial wellbeing indicators. Given that evidence on psychosocial wellbeing (defined here as girls' emotional and social wellbeing) is very limited and so strongly connected to social norms, we also discuss it in this section. A more detailed overview of all accessed studies is provided in Annex 1.

#### 2.2 Interventions aiming to empower adolescent girls

Our search provided evaluations of the major programmes targeting Bangladeshi adolescent girls and aiming to empower them socially and economically. A key component of all of them was the provision of life skills training offered to girls in safe spaces by trained peer educators. The Adolescent Peer Organised Network (APON) intervention – a 5-month course for members of BRAC's reading centres – sought to empower adolescent girls through knowledge provision, attitude change and leadership skills development. An early mixed methods assessment found that APON participants had significantly better knowledge than nonparticipants on a range of social, legal, health and environmental issues. Moreover, the vast majority of girls reported that they disseminated their acquired knowledge to others. Apart from providing knowledge, the course also changed participants' attitude over some issues, including gender equality. The study indeed found that course participants showed significant attitude difference compared to non-participants in six out of the eight relevant statements they were given. However, in the case of two issues - household chores as an exclusively female responsibility and the legitimacy of dowry – no significant change was observed. Thus the study concluded that whilst attitudes changed slowly as part of knowledge acquisition, many respondents continued supporting traditional gender norms and did not take any action against practices such as child marriage or dowry that affected their own lives. A key challenge of APON was that participating adolescents found difficulty making practical links between their newly acquired knowledge and their future life. To this end, the intervention included the provision to maintain linkages between the peer educator and participants for the next 13 months after course completion. Yet no further information is provided about whether this took place (Khan et al., 2003).

A mixed methods assessment of BRAC's Adolescent Development Programme (ADP)<sup>2</sup>, which aims to empower adolescents and particularly girls, found that ADP played a vital role in raising the awareness of

In 1993, BRAC set up reading centres for Bangladeshi girls aged 10-19 to come together, socialise and retain their literacy skills after primary school. The centres evolved and the ADP was established in 2000 to provide girls with life skills and livelihood training. The programme incorporated the APON course. In 2003, the Employment and Livelihood for Adolescents (ELA) was introduced offering in addition savings and credit support. In 2005, with financial assistance from the Nike Foundation, BRAC set up ELA centres for girls aged 14-25. These centres consisted of 30 participants and combined safe spaces, life skills training, microfinance and community mobilisation. In 2009, BRAC integrated ADP and ELA features into the Social and Financial Empowerment for Adolescence (SoFEA) programme aiming to empower



rural adolescents regarding various social issues and allowing them to think differently about their life as a whole. An interesting research finding, however, was that although all respondents were aware of the negative impact of dowry, almost all agreed that it is not a crime and only one girl said that she would not give dowry. Additionally, whilst all respondents proved to have a very good knowledge about sexual violence after the programme, 95% reported having no interest and courage to protest against sexual violence. Once again, the study concluded that although ADP participants improved their awareness on social issues, they were unwilling to act according to this knowledge (Nawaz and Ahmed, 2009).

However, another mixed methods assessment of the ADP found that the programme enabled most adolescent participants to overcome their shyness and express opinions at home and in social meetings. Participants felt confident that they were able to influence others, while they also made decisions regarding their education, marriage and employment. Some of them were even able to successfully stand up against marriage decisions taken by their families. Nevertheless, in terms of influencing other family decisions, only three respondents said that they were able to do so to some extent, with one of them being married. Absence of brothers was cited as an important factor for allowing girls to have a role in decision-making at home. This study also found that all participating adolescents acquired a reasonable level of awareness around violence, harassment, acid throwing and rape. All indicated that they would seek legal assistance if such crimes occurred (Kabir et al., 2007).

A more recent impact study of the ADP combining quantitative and qualitative techniques, compared respondents in ADP intervention and non-intervention areas, and also found that girls from ADP areas had better knowledge on reproductive health, gender discrimination and child marriage compared to those in non-ADP areas. For instance, 85% of adolescent girls in intervention sites reported that marriage before 18 years was 'early marriage' compared to 39% of girls in non-ADP areas. Interestingly though, while girl participants in ADP areas had a good knowledge of gender issues, including domestic violence, the majority of boys were unable to define what it is. Most participants also reported trying to share their improved knowledge with family members, friends and neighbours and even attempting to convince them to stop harmful practices. Yet their knowledge was not easily turned into practice and gender discrimination continued in their households and communities, with participants failing to stop child marriage in most cases, partly due to entrenched patriarchal structures and partly due to dowry considerations (Alim et al., 2012).

Evidence is also available from an evaluation of BRAC's **ADP** in **Border Regions**, which contrary to the conventional ADP included only life skills training. This mainly quantitative study found that participating adolescents aged 11-19 significantly increased their awareness on social and legal issues such as gender equality, marriage and dowry while that of the control group remained almost the same, thus indicating a positive programme impact. For example, awareness of the legal age of marriage or that dowry is punishable, increased more among the intervention group than in the control group. Respondents were also asked about gender equality and women's empowerment, with findings showing more gender egalitarian attitudes in the intervention group between baseline and endline. For instance, 83% of programme participants believed that boys and girls should get equal priority in the family compared to 76% at baseline and 81% of the control group; fewer participants at endline thought that women could not earn an income after having a child. There was also statistically significant evidence of an increase in mobility among adolescent girls in the intervention group (Ara and Das, 2010).

A mixed methods evaluation of the **Employment and Livelihood for Adolescents** (ELA) programme, which provided life skills and livelihood training to girls aged 10-24, found that participants reported that their mobility and number of friends increased. Their participation in the programme enabled them to talk to peers and share their problems, building a sense of solidarity and trust that relieved their stress and made them feel empowered. Although psychosocial wellbeing objectives were not explicitly included, girls revealed that

adolescent girls aged 11-21 socially and economically. BRAC has been constantly evaluating programme components and thus the evaluations presented here are only a part of those.



with the skills they acquired and practised, they gradually felt having more control over their lives, got involved in decision-making, and aspired to continue their studies, get good jobs and marry later. Participants also remarked becoming confident in advocating for their rights, expressing their views, refusing child marriage proposals, and collectively protesting against child marriage, abuse and dowry (Shahnaz and Karim, 2008).

The **Social and Financial Empowerment for Adolescence** (SoFEA) targeted rural adolescent girls with the objective to empower them socially and economically through a combination of clubs, life skills and livelihood training, and social and legal awareness sessions. A qualitative assessment that interviewed club members, family members, programme organisers and community members found that participating girls felt more valued, improved their communication skills, increased their confidence, and started voicing their opinions about family issues more freely. In particular, married girls reported that their husbands respected them more and allowed them to participate in family decisions. Girls also made new friends and increased their participation in various recreational activities provided by the SoFEA clubs (Kamruzzaman et al., 2012).

Another intervention, Tanisha - Improving Income and Advancing Social Identity of Rural Adolescent Girls, targeted rural adolescent girls from extremely poor households with safe spaces, livelihood training and income-generating activities. The evaluation noted that the greatest obstacle to the initial implementation of Tanisha was a series of rumours regarding the intentions of the main INGO involved; these rumours included suspicions of religious conversion, kidnapping and trafficking of girls from these deeply conservative communities. Once implemented, Tanisha was able to socially empower targeted adolescent girls through the provided peer groups, with girls experiencing an increase in self-esteem, confidence, mobility and voice. It is not clear whether these girls were able to apply the acquired knowledge about their rights or whether the income-generating and savings schemes succeeded in empowering them economically, though the situation of Tanisha beneficiary households improved in the areas of income, expenditure, sanitation, access to land, food security, household goods and number of jobs. Interestingly, women's empowerment was the only project indicator that was extremely low. Despite the focus on empowering girls socially and economically, over one-third of girl beneficiaries reported in the endline that they had no decision-making power at all within their families on purchase of land or when to have children. The evaluation pointed out that interventions targeting adolescent girls in conservative areas can be perceived to threaten community values and thus trigger resistance from local communities (GoB et al., 2014).

A smaller scale **life skills intervention** provided girls from the slums of Dhaka with Western female mentors in the work environment of a school for eight weeks. Girls reported that the empowerment aspect focused largely on the mentors' sense of caring and the respect these girls received at the school. At the end of the project, girls were slightly pessimistic, although realistic about their prospects of obtaining the qualifications required to work in such an environment. Whilst the study acknowledges that this could be viewed as counterproductive given that the project aimed to empower adolescent girls, the majority of participants considered the experience extremely helpful as it inspired them to escape the cycle of poverty (Sperandio, 2008).

Provision of life skills training in safe spaces under the guidance of peer educators appears to be vital in increasing adolescent girls' knowledge on a range of topics, including legal and social rights, sexual and reproductive health knowledge, and financial literacy as well as improving girls' confidence, voice, mobility and social networks. Nevertheless, many of the impact studies identify a persistent gap between theory and practice, illustrating girls' need for post-programme support and opportunities to implement their knowledge in real life situations. Moreover, life skills interventions in isolation have proved challenging in changing social norms on the scale that is needed. Finally, interventions aiming to empower adolescent girls in conservative rural communities may encounter significant resistance and thus such programmes require careful design to obtain community buy-in.



#### 2.3 Interventions tackling child marriage and empowering girls

Programmes whose main explicit objective is to tackle child marriage also often aim to transform discriminatory norms and empower adolescent girls. The **Kishori Abhijan** (meaning 'Adolescent Girls Adventure') programme targeted rural adolescent girls with the objectives of delaying their marriage, reducing school dropout rates, and encouraging girls to participate in independent economic activity (Amin and Suran, 2005). It thus provided girls' clubs, life skills and livelihood training, and income-generating activities. Using mixed methods, the evaluation found that programme participants were indeed able to improve their sense of self-worth, social connectedness and mobility as they were more likely to have friends, go to the movies, listen to the radio or watch television. However, the programme did not succeed in delaying girls' marriage, while those who married later often had to pay higher dowries (Amin, 2011). Another study highlighted that one major challenge was that the programme focused on adolescent girls as independent agents of change, capable of deciding when to get married. Since the wider community often influences marriage and dowry decisions, increased community engagement and mobilisation could have been more successful in empowering girls and creating the enabling environment to improve their lives (Heissler, 2011).

**Kishoree Kontha** (meaning 'Adolescent Girls Voices') is another multi-component programme aiming to delay marriage and empower girls. The programme targeted rural girls aged 10-19 living in Southern Bangladesh with four different interventions: a basic package of safe spaces and peer-led intensive empowerment training with both in- and out-of-school girls offered the opportunity to come together in safe spaces, make friends and receive educational support and social competency training for six months; this empowerment training along with a financial competency component; an incentive of cooking oil for older girls aged 15-17 on condition that they remained unmarried until age 18; and the full package consisting of the empowerment training, financial component and the oil incentive (Field et al., 2016). The programme evaluation included a cluster randomised control trial (RCT) with four different arms to test the relative effectiveness of the different components: the empowerment training (basic package); the oil incentive; the empowerment training along with the incentive; and the control group (Buchmann et al. 2017).

The midline report included a number of individual indicators measuring girls' negotiating skills around marriage. Data shows that 73% of girls who received the full package said that they would negotiate with their parents if they were to receive a marriage proposal compared to 69% of girls who received the oil incentive, 67% of girls who only received basic training and 67% of those in the control group. Girls who received the incentive were also 12.5 percentage points more likely to attend community events outside their village alone, indicating increased mobility (Field et al., 2016). Similarly, the first findings of the endline show that older girls aged 15-17 who were eligible for the incentive for at least two years were more likely to delay marriage and childbearing than any other group of girls (Buchmann et al., 2017). However, a study raised some important questions about how an exclusively quantitative assessment that does not include any qualitative research will be able to capture and assess girls' empowerment, as empowerment is not an individual outcome but ultimately a social process that cannot be imposed or measured by material or quantifiable changes (White, 2015). To an extent, this is acknowledged by the evaluators who in the first paper presenting the final findings of their nine-year study note that 'it is possible that the empowerment program will translate in reproductive health outcomes or marital bargaining power later in a woman's life' (Buchmann et al., 2017: 18). Moreover, some qualitative tools were also being used in midline, such as focus group discussions (FGDs) and key informant interviews (KIIs), and endline to conduct in-depth interviews with girls, parents and husbands (Field et al., 2016).

The evaluation of Kishoree Kontha also explicitly aimed to collect and assess programme impact on girls' mental health (Field et al., 2016; Glennerster, 2013). There are specific questions on mental health, along with the use of the Developmental Assets Profile (DAP), a set of items from a US-based scale measuring 'internal strengths and external support'. Although the inclusion of such questions is important, the use of the particular generic questions and scales transferred from a different cultural context instead of developing



new ones more compatible with local realities, triggered concerns over how adequately they capture subjective statements of life satisfaction and control over one's life (White, 2015). Interestingly though, another quantitative study also used the 58-item Developmental Assets Profile<sup>3</sup> and found that all participating girls, particularly those who received the basic package, were able to substantially improve their human and social assets. The study reported that within a period of just 6-9 months, there was an improvement of 28% in the developmental assets of adolescent girls who received the empowerment training, 19% for those who received the full package, and 16% for those who attended the financial and livelihood training (Scales et al., 2013). The latter was added to the empowerment training curriculum and provided to randomly selected communities, while it consisted of financial literacy and encouragement to generate own income (Buchmann et al., 2017). As more data from the endline becomes available, we will know more about programme impact on this area.

The **Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents** (BALIKA) targeted adolescent girls aged 12-18 in Southwest Bangladesh and aimed to empower them and delay their marriage through three distinct interventions: educational support, gender-rights awareness training and livelihood training. The programme also included recruitment of local young women as mentors, provision of safe spaces and community mobilisation. Its mixed methods evaluation also incorporated a four-arm RCT involving more than 9,000 girls. The RCT measured the impact of each intervention among all girls in the community, not just for those girls participating in the programme, and found that BALIKA participants had improved their gender awareness. For instance, they were 61% more likely compared to girls in the control group, to agree with the statement that girls can say no to arranged marriages. They were also 29% more likely to disagree with the statement that a woman should tolerate violence against women. Participants in all interventions were also more likely to say that they had permission to go to the playground and to play outdoor games with boys (Amin et al., 2016).

## 2.4 Sports and leadership interventions

Our search provided two studies assessing sports and leadership programmes for adolescent girls. Sports programmes are increasingly common tools for increasing girls' confidence, aspirations and leadership skills as well as a means to teach them other life skills related to gender and health. Moreover, the Bangladeshi government actively supports sports activities for girls and young women (CEDAW, 2015). Implemented as part of BRAC's ADP, the **Building Young Women's Leadership Through Sport** (BYWLTS) programme targeted adolescent girls at secondary school and combined sports activities with life skills training and community mobilisation. BRAC assessed the intervention using a mixed methods study which surveyed the girls' parents or caregivers. Respondents reported that programme participation enabled girls to increase their knowledge on a range of issues including sexual and reproductive health, women's rights, violence against women and girls, and financial literacy. Moreover, they all felt that BYWLTS had a positive effect on their daughters' confidence, responsibility, discipline and leadership capabilities, and as a result, they trusted and valued girls more (BRAC, 2016).

Meanwhile, the **Innovation through Sport: Promoting Leaders, Empowering Youth** (ITSPLEY) programme in a remote area of Northeast Bangladesh gave girls, boys and supporting community members opportunities to participate in sports, cultural events and extracurricular activities around sexual and reproductive health, and sexual and gender-based violence. Combining qualitative and quantitative techniques, the evaluation found that girls' level of engagement was impressive at all active sites (Eschenbacher, 2011). Overall, the programme enabled both girls and boys to improve their organisational skills and their ability to state opinions and make decisions about their own lives, while it also helped them develop a clear vision about their future through their involvement in sports and civic action (Miske Witt and Associates, 2011). There is

<sup>3</sup> The Developmental Assets Profile assesses adolescent experience of support, empowerment, boundaries and expectations, constructive use of time, commitment to learning, positive values, social competencies and positive identity (Scales et al., 2013).



some evidence that ITSPLEY was also successful in changing boys' attitudes towards girls: all boys said that their attitudes changed a lot and all believed that 'girls have the same right to be educated'. Men and fathers also started accepting girls' opinions and allowed them to play sports or go out more (Miske Witt and Associates, 2011).

Both ITSPLEY and BYWLTS were successful in including the wider community in their programmes, with the aim of creating a supportive environment for girls to take part in sports activities and of challenging traditional gender roles. Whilst initially girls experienced resistance to their involvement in such programmes – in the case of ITSPLEY some adults resisted girls' participation because the intervention was run by foreigners (Miske Witt and Associates, 2011) – the inclusion of the wider community through events and meetings meant that they became increasingly supportive by the end of the intervention.

#### 2.5 Community engagement interventions

Implemented by BRAC, the Gender Quality Action Learning (GQAL) was a community engagement programme whereby trained educators conducted courtyard meetings in their communities to discuss social issues. While the programme targeted primarily adult women and men, the majority of issues discussed were associated with norms and practices that affect adolescent girls such as household chores and child marriage. Combining surveys and in-depth interviews, an impact study found that participants increased their knowledge about compulsory education, legal age of marriage, nutrition, inheritance law, voting age, punishment for dowry, and divorce laws. The intervention also successfully changed some gendered attitudes: son preference for the first child declined from 72% at baseline to 31% at endline; respondents who believed that both men and women should be educated increased by 50%; and the majority changed their view and accepted that women should participate in the traditional justice mechanism ('shalish'). However, changes in perceptions on specific issues such as division of labour and decision-making within the household or participation of women in social activities did not change as expected. Overall, the majority of respondents developed more positive gender attitudes (regarding gender discrimination, women's empowerment and violence), while 15% of respondents developed more gender discriminatory attitudes, and 14% maintained the same attitudes. One interesting point raised in the study is that men's perceptions changed less, as they did not have as many opportunities to participate in community discussions due to travelling outside of the village for work (Alim, 2009).

Aiming to reduce food insecurity among poor Bangladeshi households by addressing its underlying causes, SHOUHARDO included women's and adolescent girls' livelihood and empowerment components. To this end, SHOUHARDO implemented the 'Empowerment Knowledge and Transformative Action' (EKATA) model which provides life skills training to community-led groups of girls and women and collaborates with other groups to promote gender equality and women's wellbeing at local level. The programme also included community mobilisation with men and adolescent boys getting involved and becoming aware of girls' and women's rights, including the issue of 'eve teasing' (sexual harassment). A report highlights that EKATA groups have significantly contributed to improvements in women's individual and collective agency, and in changes in gender norms and relations. Women and girls in each community came together to discuss, build solidarity and support each other. They improved their awareness of rights, legal issues and available services with a particular focus on domestic violence, and they connected to community structures to intervene and make perpetrators change their behaviour. Indeed, the percentage of women reporting violence declined from 27% to 12%. Participants also increased their mobility, involvement in productive activities, and their household decision-making power, including adolescent girls who insisted on finishing school instead of being forced to marry early as they knew that they had a legal right to do so and that the EKATA group would help them if necessary. In one district, while most group members had been married young, none of the adolescent members did so. In other cases, girls returned to school with the support of group members. Girls also experienced less sexual harassment. However, dowry practices remained largely unchanged (CARE, 2014).



## 2.6 Interventions without evaluations

There were a number of other relevant interventions that we came across for which we were unable to access any impact study or evaluation. For instance, we found another CARE project aimed to contribute to urban poverty reduction by promoting and protecting the rights of the most marginalised women in urban communities, including garment workers and sex workers. The intervention used the EKATA model, which significantly improved garment workers' psychosocial wellbeing, including their capacity to control anger (19%), their stress management skills (25%) and their hopefulness about the future (24%); it also improved their quality of life due to acquired knowledge (27%) (Mozumder, 2014). UNICEF's Child Friendly Spaces as Social Mobilization Programme focused on girls' clubs in disaster-prone areas, while another UNICEF multimedia intervention, the Meena Communication Initiative, involved a mass mobilization campaign of television, cinema and mobile film unit screenings, radio broadcasts, billboards and distribution of Meena comic books to schools with the aim to empower girls and change social norms. A multi-country evaluation of the initiative found that in Bangladesh a considerable proportion of respondents exposed to Meena messages, including children, adolescents and adults, believed that girls and boys must be treated equally and knew that child marriage and dowry are illegal, with more adults than children having those beliefs (Chesterton, 2004).

## 2.7 Limitations of interventions

There is an overwhelming focus on empowering girls through the provision of safe spaces and peer-led life skills education. However, none of the accessed impact studies and evaluations focused on psychosocial wellbeing as such, although one programme (Kishoree Kontha) included relevant indicators and several others could be said to touch on this through their work to improve girls' self-esteem, voice and social connectedness more broadly. In addition, only one small scale study specifically looked at the role of mentoring and female role models. Moreover, despite the emphasis on community dialogue and meetings, none of the interventions – apart from the Meena Initiative which lacked a robust evaluation of the Bangladesh programme – employed large scale media campaigns or social marketing techniques, such as using the radio, television, magazines or even school material to empower girls. Finally, changing discriminatory social norms requires more time and thus the short duration of these interventions is simply not enough to transform them, let alone ensure the sustainability of this change.

## 2.8 Assessment of the evidence and key gaps

The vast majority of the impact studies and evaluations accessed were assessments of large scale, multicomponent programmes, implemented by national or international NGOs such as BRAC, Save the Children and CARE. These programmes targeted adolescent girls of all ages, but in particular, girls over the age of 12. Most of the accessed evaluations seem to speak broadly of girls and adolescent girls, and very few specifically mentioned the inclusion of younger adolescent girls aged between 10 and 12. In the absence of agedisaggregated information, it is thus difficult to identify which specific approaches work to empower adolescent girls of different ages. There is also very limited evidence regarding the impact of attitude and norm change interventions on specific marginalised groups of girls, such as girls living in slums or girls with disabilities. In addition, almost all of the evidence is focused on interventions implemented in rural areas, with quite a few specifically implemented in ultra-poor regions. Whilst married girls are also included in a number of interventions, there is no in-depth evaluation of what has worked to empower them in particular.

Boys, parents and the wider community are also targeted by many programmes, yet there seems to be little evidence on what works to actively engage boys and men. A few evaluations noted that they often remain on the side lines, are less likely to engage in community discussions, or show lower increases in knowledge and attitude changes in comparison to girls. In addition, village leaders, religious leaders and community



leaders are mentioned in a number of evaluations, yet there seems to be no evidence on what practically works to engage them and how they have contributed to empowering girls.

The evidence base is generally a mix of research designs, including qualitative and quantitative evaluation methods, but it also includes two RCTs. The vast majority of evaluations use surveys, interviews and focus group discussions to determine changes in the knowledge, attitudes and capabilities of adolescent girls, boys, parents or the wider community. The evaluations most frequently compare results to a non-intervention/control group. They are particularly focused on measuring changes in legal or health knowledge and confidence levels, but fewer evaluations focus on the practical implications of these changes in knowledge and perceptions, such as girls applying their newly acquired knowledge and refusing an arranged marriage, getting married early or giving dowry, and instead continuing school. Finally, despite the inclusion of different intervention strategies, only two evaluations compared the relative impact of different programme components: these are the evaluations of BALIKA and Kishoree Kontha, both of which included an RCT in their evaluation design.



# **3.** Bodily autonomy, integrity and freedom from violence interventions

#### 3.1 Overview of the evidence

Our search generated nine impact studies and evaluations of programmes aiming to tackle child marriage and three impact studies of two programmes aiming to reduce gender-based violence against girls and young women. Eleven of these studies were grey literature. Our search also identified 22 sources with information about interventions with similar objectives. Apart from programmes with the explicit objective to reduce child marriage or tackle violence, the majority of interventions aiming to empower adolescents or promote gender equality, also include awareness sessions on important issues including child marriage and dowry, violence, 'eve teasing' (sexual harassment) and acid throwing. Thus BRAC's programmes, such as the APON course, the ADP and the SoFEA, also include these topics into their life skills training in order to improve participants' knowledge and prompt appropriate action. Therefore, assessing these programmes' impact on child marriage and violence are also included in this section. Regarding their methodology, eight out of twelve impact studies and evaluations combined qualitative and quantitative techniques, while four used only quantitative methodology. Three programmes (BALIKA, Kishoree Kontha and SAFE) have incorporated an RCT into their evaluation design to assess the relative effectiveness of different intervention strategies.

#### 3.2 Interventions tackling child marriage

Our search identified a few impact studies and evaluations that assessed the effectiveness of key interventions aiming to reduce child marriage and its adverse outcomes. Kishori Abhijan (meaning 'Adolescent Girls Adventure') was implemented in 14 rural districts with the objectives of increasing girls' age of marriage, increasing their school enrolment and retention, and encouraging them to participate in independent economic activity (Amin, 2011). It thus provided vulnerable adolescents with clubs, life skills and livelihood training. The Population Council evaluated the intervention by matching programme participants with non-participants with similar characteristics in the same districts (Amin and Suran, 2005; Amin, 2011). Although most participants delayed marriage longer than their matched non-participants, findings were not statistically significant. Interestingly, the results were different when the evaluation team distinguished between matched and unmatched participants. These were respondents who participated in the programme but could not be matched to a similar non-member in the study population, and tended to be younger (aged 12-14) and poorer girls living in the poorest district. Data showed that while matched participants did not delay marriage, unmatched participants waited significantly longer. However, the fact that the intervention did not have a dowry component made the programme rather challenging, as the older the respondents got married, the higher the dowry they had to pay. The evaluation also found that programme participation had other positive effects with girls improving their sense of self-worth, social connectedness, mobility, health knowledge and employment. Thus researchers suggested that future programmes to delay marriage should focus on younger adolescents in the poorest families and districts of rural Bangladesh and address the economic drivers of marriage, particularly the issue of dowry (Amin, 2011). Another study also pointed out that one major programme challenge was the need for increased community engagement given that the wider community often influences marriage and dowry decisions (Heissler, 2011).

Another multi-component intervention aiming to delay marriage was the **Kishoree Kontha** (meaning 'Adolescent Girls Voices') programme. The programme targeted rural girls aged 10-19, living in communities in Southern Bangladesh, and being both in- and out-of-school. Communities were randomly alocated into four intervention arms and a control group. Girls in the control group did not receive any intervention, while girls in treatment communities were randomly provided with four main packages: a six-month intensive



empowerment training; this training along with a financial competency training; a financial incentive provided to older girls aged 15-17 in the form of cooking oil<sup>4</sup> on condition that they remained unmarried until age 18; and the combined training and incentive. Provided in safe spaces by trained peer educators, the basic empowerment training included educational support and life skills training (Field et al., 2016). The programme evaluation included an RCT with four arms (basic package, the oil incentive, both the training package and the incentive, and the control group) in order to test the relative effectiveness of the different components (Buchmann et al., 2017). Midline data showed that girls who received the incentive reduced the likelihood of being married by 7%, more than any other intervention group (Field et al., 2016). Similarly, the first published study with endline data which was collected 4.5 years after programme completion, reported that overall girls who were eligible for the incentive were 23% less likely to be married under 18, while girls eligible for the incentive for at least two years were 25% less likely to do so; the likelihood of getting married under age 16 fell by 27% among girls eligible for the incentive and aged 15 at distribution start. Available data also shows that the incentive reduced the likelihood of child marriage by 31% among girls in school, and by 6% among girls out of school at baseline. The incentive also reduced the likelihood of early childbearing (that is, giving birth under 20 years of age) overall by 13% and by 16% among girls aged 15 at distribution start. Finally, it also increased their likelihood of staying in school longer (at age 22-25) but only for those girls already in school at programme start. On the other hand, girls eligible for the empowerment training were only more likely to stay in school compared to the control group (Buchmann et al., 2017).

The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents (BALIKA) targeted adolescent girls aged 12-18 in three districts in Southwest Bangladesh with the highest child marriage rates and aimed to empower them to delay their marriage through three distinct interventions: educational support, gender-rights awareness training and livelihood training. The programme, influenced by previous interventions and their outcomes, also included recruitment of local young women as mentors and the provision of safe spaces and community mobilisation. Its mixed methods evaluation included large scale surveys, qualitative research with focus group discussions, key informant interviews and in-depth interviews, community assessments, and a four-arm RCT involving more than 9,000 girls<sup>5</sup>. Girls in the first arm received tutoring in mathematics and English (in-school girls) or computing or financial skills training (out-of-school girls); girls in the second arm received life skills training, including information about gender rights and negotiation, critical thinking and decision-making; girls in the third arm received livelihood training in computers, mobile phone servicing, photography, or entrepreneurship via mobile phones; and girls in the fourth arm were the control group and received no services. The final evaluation, which measured the impact of each intervention strategy among all girls in targeted communities and not just for those girls participating in the programme, found that BALIKA has been successful in delaying child marriage: girls in communities with the educational support intervention were 31% less likely to be married as children compared to girls in the control communities; girls in communities with life skills training were also 31% less likely to be married as children compared to those in control communities; and girls in communities with livelihood training were 23% less likely to do so compared to girls in the control communities. Age-differentiated data also shows that BALIKA was particularly successful in delaying marriage among those aged 16 and 17, and in the case of the education intervention among those under age 16. In addition, all girls who participated in BALIKA were more likely to be in school, access media, improve their sexual and reproductive health knowledge and access to services, and have more gender-equitable attitudes (Amin et al., 2016).

A mixed methods evaluation of the **Adolescent Development Programme** (ADP), which aims to improve awareness around child marriage through life skills training, found that all adolescents as well as their parents in intervention sites had better knowledge of the issue compared to those in non-ADP areas. For instance,

<sup>4</sup> The value of the oil incentive was nearly US\$16 annually, and aimed to offset the estimated cost of dowry. It was offered to participating girls and not to their parents (Buchmann et al., 2017).

<sup>5</sup> The evaluation also included tracking migrants so that girls, who had left the village where they had lived at baseline, were also interviewed (Amin et al., 2016).



85% of adolescent girls in ADP areas reported that marriage before 18 is child marriage compared to 39% of girls in non-ADP areas. Participants – girls more than boys – were also able to identify the negative consequences of child marriage for girls. Moreover, most girl participants (72%) and peer leaders (96%) said that they took action relating to child marriage and dowry, such as talking to friends, explaining the harmful consequences of the practice to a groom's parents, and protesting against child marriage. However, these actions in most cases failed to stop the practice. In some cases, participating girls were unable to prevent their own early marriage, although they had the knowledge and shared it with their parents; dowry payments also continued (Alim et al., 2012). Similar findings are reported by two other impact studies which also found that ADP participants increased their knowledge and willingness to share it with others (Kabir et al., 2007; Nawaz and Ahmed, 2009). However, very few protested against child marriage and almost all continued thinking that dowry is not a crime (Nawaz and Ahmed, 2009). In the case of the **ADP in Border Regions**, the awareness of adolescents about marriage-related issues remained low (Ara and Das, 2010). Finally, a mixed methods evaluation of the **Growing Up Safe and Healthy** (SAFE) intervention found that awareness about legal recourse against dowry increased, while the proportion of dowry payments declined among participants (icddr, b, 2014a).

#### 3.3 Interventions tackling violence against girls and young women

Our search provided evaluations of two programmes - the first aiming to tackle sexual harassment against urban school girls, and the second seeking to reduce intimate partner violence against married girls and young women in urban slums. The Meyeder Janna Nirapad Nagorikatta (MEJNIN) (meaning 'Safe citizenship for girls and women') programme aims to raise youth awareness and combat sexual harassment in public spaces. The programme is implemented by BRAC and targets school-age girls, boys, parents, teachers and other community stakeholders. The pilot ran for a year in Dhaka schools and included life skills education on the topic of sexual harassment. The quantitative evaluation found increased knowledge about sexual harassment in intervention areas compared to control areas; at the end of the programme, 82% of programme participants knew what sexual harassment is compared to 48% of respondents in control areas. Students in grade 10 generally proved to have higher scores in knowledge indicators compared to students in lower grades. The evaluation also found statistically significant changes in attitudes, with 40% of programme participants reporting appropriate attitudes compared to 33% in control areas. In terms of reporting sexual harassment, a higher percentage of programme participants reported to have experienced it at least once compared to those in control areas, a finding which the study attributes to the fact that participants were more open to talk about harassment. Respondents were also asked what measures they took when harassed, with slightly more respondents in control areas (45%) compared to programme areas (44%) stating that they did not take any measures nor protest as they thought that the situation might get worse; the majority said that they discussed the problem with their mothers (Alim, 2013). After the success of the pilot, the programme has been rolled out in more schools.

The **Growing Up Safe and Healthy** (SAFE) programme aimed to improve sexual and reproductive health and reduce intimate partner violence against girls and women in Dhaka slums. The programme combined several prevention and service delivery strategies into an integrated approach that included access to legal and health services, interactive sessions with girls, young women and men, and community mobilisation over a 20-month period (icddr,b, 2014b). Its evaluation used qualitative and quantitative techniques, including an RCT with three arms, which measured the additional benefits of group sessions for women and men. Thus all arms included community mobilisation and service provision, but arm A also included sessions with separate male and female groups, arm B included sessions with female groups, and arm C did not include any group sessions. The evaluation analysed programme impact on spousal violence against girls and women and on their help-seeking behaviour. Only married women living with their spouses during the previous 12 months were included but separate analyses were performed for married adolescents (15-19 years) and married young women (20-29 years). Analysis of married adolescent data reported a reduction in physical and/or



sexual violence by 9%-20% in communities where both young women and men received group sessions. In addition, the severity of such violence was also reduced. Overall, arm A showed the largest reduction in physical and/or sexual violence and the severity of it. However, economic violence against adolescent girls (such as stealing or withholding of economic resources, preventing wives from earning, or throwing women out of the house), increased by 10 percentage points in arm B where only females were offered group sessions, contrary to arm A where spousal economic violence against married girls declined by 8.1 percentage points. Although help-seeking rates remained low, a higher proportion of survivors sought help, particularly from informal sources, at endline in arm A. In the other two arms, changes were statistically insignificant. Qualitative data indicates that help-seeking from formal sources or bear the costs. Overall, SAFE benefited married adolescent girls as it reduced spousal violence more among them than among married young women. This may be related to the fact that their husbands were younger and more educated than the husbands of the young women sample. The RCT showed that spousal violence against girls was reduced in arm B and even more in arm A, which also included male group awareness sessions, thus providing evidence of the critical importance of engaging men too (Naved and Amin, 2014).

#### 3.4 Interventions without evaluations

There were a number of interventions that we came across for which we were unable to access any impact study or evaluation. For instance, Pathfinder's 'Raising the Age of Marriage for Young Girls in Bangladesh' project taught girls about the risks of child marriage and provided education stipends, advocacy and vocational training. Programme data indicated that child marriage was reduced from 50% to 42% (UNFPA and UNICEF, 2016). A project brief noted that after the Pathfinder intervention, most girls reported wanting to wait until they were 20 years of age to marry (Burket et al., 2006). CARE's Tipping Point programme similarly works with community members, activists, experts and government agencies to delay marriage and change social norms in 90 villages of Bangladesh, but we were also unable to access an evaluation of this programme. Plan's Asia Child Marriage Initiative aims to increase the mean age of girls at marriage from 15 to 18 through establishing girls' solidarity groups, organising community campaigns, designating child marriage free communities, working with the police and supporting the government's digital birth registration system; some research confirmed that the girls' solidarity groups opposed planned marriages in targeted communities (UNFPA and UNICEF, 2016).

Between 2011-2015, Plan also ran the 'Girl Power: Promoting Equal Rights and Opportunities for Girls and Young Women' programme in eight districts. The programme aimed to build girls' skills and strengthen civil society to ensure girls' rights and prevent violence against them. The programme provided life skills training and martial arts classes to girls and also included community activities with drama performances and awareness raising activities on child protection and rights. The programme also facilitated the formation and management of forums for girls and young women, trained government officials, and supported 1,002 civil society organisations, grassroots activists and media professionals. Its mid-term review found that participants reported increased ability to say 'no' to sexual activity, from 24% of girls in 2011 to almost 100% in 2013; some respondents also reported lower incidence of physical abuse by teachers or by husbands related to dowry demands. Girls' knowledge of how to act in case of violence also improved with 88% of those aged 14-17 knowing what to do. Community members were also less supportive of child beating by parents or teachers. The programme also tried to reduce child marriage through advocacy workshops for stakeholders after which government officials agreed to distribute a list of authorised marriage registrars to reduce the number of fake ones (Plan, 2014).



## 3.5 Assessment of the evidence and key gaps

Given the persistently high rates of child marriage in the country, the majority of assessed programmes focused on tackling that practice and empowering adolescent girls. These were large scale, multi-component interventions that offered safe spaces and life skills and livelihood training to girls both in- and out-of-school along with community mobilisation in order to create the appropriate enabling environment. However, our search did not yield any impact studies of policy efforts to address the problem nor of any intervention targeting already married adolescent girls to help them cope with life challenges.

Kishori Abhijan, Kishoree Kontha and BALIKA have all aimed to raise awareness of girls' rights, including the legal age of marriage and dowry prohibition and the adverse consequences of child marriage, and to change attitudes and behaviours. Interestingly, while Kishori Abhijan failed to consider the economic importance of dowry, the more recent Kishoree Kontha provided a financial incentive for girls to remain unmarried, which according to recently published findings appears to have worked. The BALIKA project also found that younger participants (under 16 of age) who received educational support, and older participants (aged 16-17) who received gender awareness sessions or livelihood training were more likely to marry later than those in the control group. Although both studies explore changes in a number of indicators, such as increased knowledge and confidence or improved school outcomes and more equitable gender norms, what exactly works and how change takes place remain unclear, let alone whether the outcomes are sustainable.

In the case of programmes tackling violence against girls, our search surprisingly provided evaluations of only two interventions: the first was concerned with sexual harassment and violence against urban school girls and the second with reducing intimate partner violence against married girls and young women in urban slums. Both interventions aimed to improve awareness of the problem and change attitudes, with better results recorded where boys and men were actively engaged in project activities. Overall, evidence in this area is rather weak, including how best to involve boys, parents and the wider community to address high rates of violence across urban and rural areas and towards more marginalised groups of girls, such as domestic or sex workers, and girls with disabilities.

The few evaluations use a combination of qualitative and quantitative methodologies, while the more recent ones employ more rigorous approaches, such as cluster randomised control research designs. The latter enable to test the effectiveness of different strategies, but with the exception of Kishoree Kontha which was a nine-year study, they were carried out shortly after the end of the programme and thus they are unable to provide evidence of how sustainable the measured change in knowledge, attitudes or even behaviours is. Greater attention should also be paid to qualitative research, which is required to shed light on the pathways of this change, which are still unclear.



# 4. Education and learning interventions

#### 4.1 Overview of the evidence

Our search generated 21 impact studies and evaluations of education-related interventions: 9 were papers published in academic journals or as academic research and the remaining 12 constituted grey literature. Among the latter, half of the accessed sources were programme evaluations undertaken by the International Food Policy Research Institute (IFPRI), which was actively involved in their design, implementation and monitoring.

The majority (14 studies) of all accessed evaluations used quantitative methodologies. Most of these evaluations drew upon large scale surveys, such as those conducted by the organisation involved in programme design and monitoring or the Bangladeshi Household and Income Survey (HIES), while one also used the Multiple Indicator Cluster Survey (MICS). Our search for education interventions did not identify any evaluation with an RCT design. However, two multi-component programmes aiming to delay child marriage did incorporate an RCT with several arms in their evaluation design, which also assessed programme impact on girls' education: these are the BALIKA and the Kishoree Kontha programmes (see also section 3).

Five evaluations (Ahmed and Sharmeen, 2004; Amin and Suran, 2005; Amin et al., 2016; Arends-Kuenning and Amin, 2004; Eschenbacher, 2011) used mixed methods, combining survey data with qualitative methodologies such as participant observation, semi-structured interviews, FGDs and IDIs. In addition, two other studies reviewed already published programme literature and evaluations to provide a general multi-aspect assessment, including less quantifiable programme effects such as those on girls' empowerment (Raynor and Esson, 2006; Schurmann, 2009).

The majority of evaluations examined (see Table 2 below) are evaluations of three key large scale social assistance interventions designed and implemented with the technical and financial assistance of international development organisations and aimed at increasing poor children's or girls' primary and secondary school enrolment and attendance. However, some evaluations also examined their impact on children's learning outcomes, employment, marriage prospects and empowerment.

Key evaluated education and learning programmes	Number of sources
Female Secondary School Stipend (FSSS) programme	11
Primary Education Stipend (PES) programme	3
Food for Education (FFE) programme	4

Table 2: Key evaluated education and learning interventions by source number

Apart from these 21 accessed studies, our search generated 55 sources with information about educationrelated interventions benefiting adolescent girls in Bangladesh – almost all of them grey literature. These interventions include large and small scale projects targeting out-of-school children, child labourers or urban slum children with non-formal classes and skills training to enable them to return to mainstream schools or improve their employment opportunities. They also include inclusive education projects supporting the education of children with disabilities and of those living in remote and inaccessible areas, WASH programmes in schools, initiatives to train and recruit female teachers in rural areas, and a communication programme promoting girls' right to education. Most often, project overviews present some key statistical data on the number of benefited children and on their academic achievements along with a few statements about the importance of the intervention for their lives. A more detailed overview of all accessed studies is provided in Annex 1.



## 4.2 Education and learning interventions

The majority of accessed impact studies and evaluations (14 sources) assess conditional cash transfer programmes aiming to enable school-age children to enrol and attend primary or secondary school. There are also five evaluations of two school-feeding programmes targeting poor children. There is only one evaluation of a school club intervention and of an NGO intervention targeting poor out-of-school children, particularly girls and including school construction, a flexible school schedule and free provision of school materials. Finally, three evaluated multi-component programmes that primarily sought to tackle child marriage, also aimed to reduce girls' school dropout, and thus their educational impact is analysed in this section too. However, we were unable to access details of any evaluated intervention addressing gender-friendly school measures, menstrual hygiene management, curriculum reform, teacher training or recruitment of female teachers (see Table 3 below).

#### Table 3: Main types of evaluated education and learning interventions

Type of education and learning intervention	Number of sources
Cash transfers/scholarships/in kind assistance	14
School feeding/take home rations	5
Infrastructure	2
Improve quality of teaching	0
Increase girl-friendliness	0
Bridge to education/second chance programmes	1
School girls' clubs	1
Child marriage	3
Total	21

Note: Numbers add up to more than 21 sources as interventions often carried out multiple activities.

Our search generated evaluations of two large scale government feeding programmes to increase primary school enrolment and attendance for poor children, both girls and boys, in rural areas and to reduce hunger. The Food for Education (FFE) programme was the first such programme implemented in 'economically backwards' districts with low literacy rates. Poor households with primary school-age children were offered a free monthly ration of rice or wheat on condition that their children were enrolled and attended 85% of all classes. After 10 years of implementation, the programme covered 27% of all primary schools and benefited over 2 million students. Actively involved in all programme stages, IFPRI evaluated the programme using data from household, school and community surveys along with academic achievement tests to assess the quality of provided education. Its quantitative evaluation found that the FFE indeed increased primary school enrolment, especially for girls whose enrolment increased by 44% compared to 28% of boys. Attendance in FFE schools also reached 70% compared to 58% in non-FFE schools. Although average test scores were lower in FFE schools, non-beneficiaries scored about the same as students in non-FFE schools, indicating that larger class sizes as a result of increased enrolment and attendance rates did not negatively affect the quality of education provided. Moreover, FFE beneficiaries were able to consume 10% more calories, and perhaps improve their learning capacity (Ahmed and del Ninno, 2002). The dramatic increase in class sizes and concerns about deteriorating education quality prompted another IFPRI evaluation. This quantitative study found that the FFE increased school achievement test scores of non-beneficiaries by 23%, and class performance only worsened when an average of 44% students in class were FFE beneficiaries, thus forcing teachers to go more slowly to accommodate their increased learning needs (Ahmed and Arends-Kuenning, 2003).



A more recent evaluation confirmed that the FFE considerably increased the participation and duration of schooling for poor children who were able to benefit from the programme. Once again, girls were found to benefit more than boys, indicating that the FFE provided incentives to parents to send their daughters to school (Meng and Ryan, 2010). Another evaluation based on time-use data and using mixed methods found that the FFE increased the average hours children spent in school and studying, with a stronger impact on boys, while girls were able to combine schooling with domestic work (Arends-Kuenning and Amin, 2004). However, the programme stopped in 2002 due to concerns about its cost, targeting and geographic selectiveness.

Having similar objectives, the **School Feeding Programme** (SFP)<sup>6</sup> aimed to reach one million primary school children in highly food-insecure rural areas and in four slum areas in Dhaka city. The programme offered a snack that provided 75% of the recommended daily allowance of vitamins and minerals to all girls and boys in nearly 6,000 primary schools. The IFPRI quantitative evaluation found that the SFP increased school enrolment by 14%, reduced the probability of dropping out of school by 7.5%, and increased school attendance by about 1.3 days a month. However, slum children had lower rates than participating children in rural areas. The programme also improved the average energy intake and the nutritional status of students, reduced incidence of illness, and enabled them to focus more on their studies. It also improved their academic performance, as indicated by their improved test scores. Interestingly, students in urban slums did better than participants in rural areas, boys performed better than girls, and girls had better scores in schools with separate toilets (Ahmed, 2004).

When the government stopped the FFE in 2002, it replaced it with the **Primary Education Stipend** (PES) programme, which targeted poor households with primary school-age children in all rural areas and provided a monthly stipend on condition that the child enrolled and attended 85% of classes. At its peak, the programme covered 27% of schools and benefited 5.5 million children. An IFPRI evaluation found a very large degree of variation in enrolment rates and a dropout rate of 26% (Ahmed and Sharmeen, 2004). Based on a small scale survey, another IFPRI quantitative evaluation also found that PES had negligible impacts for a programme of its size on improving primary school enrolments and negative impact on boys' grade progression. However, it led to improvements in the nutritional status of both girls and boys (Baulch, 2010). More recently, another quantitative evaluation using 2005 and 2010 household data also found that enrolment rates did not improve much – although they improved more for girls than for boys, with girls' enrolment rate being on average 10% higher than that for boys (Ullah, 2013).

The programme with the most evaluations is the **Female Secondary School Stipend Programme** (FSSSP). A pilot was first implemented in 1982 by a Bangladeshi NGO but the nation-wide programme was launched in 1994 as four separate projects covering different districts with international donor support<sup>7</sup>. The programme targeted all secondary school-age girls in rural areas and provided payment of tuition fees to their school and a monthly stipend on condition that the girls attended 75% of school days, achieved a 45% pass mark in the annual exams, and remained unmarried. By 1998, the programme had been implemented in 98% of all rural secondary schools and in 2005 it was benefitting nearly three million girls (different sources provide different numbers). In 2000, it received a World Bank gold medal for excellence and was globally promoted as a successful model to increase girls' enrolment (Schurmann, 2009).

Most evaluations agree that the FSSSP had a strong impact on girls' enrolment as indicated by the leap in their secondary school enrolment rates (Raynor and Esson, 2006). An often-cited quantitative evaluation found that the programme indeed increased girls' secondary education with one additional year of exposure

<sup>6</sup> We included these two primary school feeding programmes (FFE and SFP) and the stipend programme (PES) in our discussion as they would have reached the younger end of our focal age group.

<sup>7</sup> These four separate projects were the Female Secondary School Assistance Project (FSSAP) supported by the World Bank; the Female Secondary Stipend Project (FSSP) by the government of Bangladesh; the Secondary Education Development Project (SEDP) by ADB; and the Female Secondary Education Project (FSEP) by Norad.



increasing girls' enrolment rate by 8%, but reducing male class enrolment rate by 29% (Khandker et al., 2003). A mixed methods evaluation by IFPRI confirmed that secondary school enrolment rates were higher for girls than for boys, yet overall enrolment rates were still low, with girls failing in their final school exams, dropping out and getting married (Ahmed and Sharmeen, 2004). A recent quantitative study using 2005 and 2010 household survey data also found that the FSSSP helped increase girls' secondary enrolment rate by 15%; yet girls' participation in the programme declined from 59% to 28% during this period (Ullah, 2013). Another quantitative evaluation argued that the FSSSP also increased primary school completion rates significantly (between 6.1 and 12.3 percentage points) (Hahn et al., 2015), while time-use data showed that the stipend particularly increased the time rural adolescent girls spent studying (Arends-Kuenning and Amin, 2004). Interestingly, the FSSSP also appeared to have positive effects on girls' siblings: using MICS data, a study estimated that the programme not only increased the education of participating girls by about 2.2-2.7 years, but it also increased the education of their younger siblings by about 0.16-0.5 year (Begum et al., 2012).

There is mixed evidence concerning the programme's impact on child marriage. Schurmann (2009) noted that despite donors' statements about significant reductions, this was not reflected in Demographic and Health Survey (DHS) data. However, qualitative research confirmed that the stipend affected parental decisions about when to marry their daughters. A recent evaluation estimated that the FSSSP helped reduce child marriage by 7% between 2005 and 2010 (Ullah, 2013), and another study found that participants were more likely to get married later (0.11 to 0.17 years for each year of exposure) than non-participants (Hahn et al., 2015).

Programme effects on girls' employment prospects were also assessed. Using 2005 and 2010 household survey data, a study estimated that girls receiving the stipend were 4% more likely to be in the labour force; 3% more likely to find a job in the formal sector; and to have 14% higher earnings than their male counterparts of the same age (Shamsuddin, 2013). This aligns with the findings of another quantitative evaluation that participants were more likely to be in formal employment instead of working in agriculture or in the informal economy (Hahn et al., 2015).

Although the programme did not have explicit empowerment objectives, a few evaluations also examined its empowerment effects using quantifiable proxies. Using non-participants as a control group, a study of the FSSSP pilot found that participating girls were more likely to earn money (34% vs. 11%), less likely to be married (36% vs. 53%), and more likely to decide about their lives (e.g. to go alone outside the village, 53% vs. 28%) (Pathmark Associates, 2001 cited in Raynor and Esson, 2006). A more recent evaluation found that young women who had received the stipend were more likely to have lower desired and actual fertility; to use contraception; to show greater autonomy in making decisions about household purchases, their own health care and visiting relatives; and to marry more educated husbands with better occupations and closer in age to their own (Hahn et al., 2015).

However, a considerable body of literature has been more cautious concerning FSSSP's success and stressed the need for a rigorous evaluation to establish its actual effectiveness (Heath and Mobarak, 2012; Raynor and Esson, 2006; Schurmann, 2009; Ullah, 2013). Although these studies accept that the programme contributed to increased girls' secondary school enrolment rates, they find it only 'moderately satisfactory' and that it has been credited with more success than is the reality (Raynor and Esson, 2006; Schurmann, 2009; Ullah, 2013). They remark that the programme could have maximised its impact if it had also paid attention to education quality and socioeconomic status differentials so that girls could also improve their academic performance and poor girls could be actively assisted to stay in school after enrolment (Ahmed and Sharmeen, 2004; Raynor and Esson, 2006; Schurmann, 2009). Moreover, most evaluations tended to assess specific aspects of the programme and thus failed to provide the whole picture. In addition, there is no accurate data to measure the relative impact of the FSSSP compared to other interventions that preceded it or ran concurrently as well as to changes in the economic and social context and development policies (Raynor and Esson, 2006; Schurmann, 2009; Heath and Mobarak, 2012).



For example, a study using survey data from sub-districts with a significant number of garment factories found that the arrival of garment jobs increased school enrolment rates for younger girls by 27 percentage points (statistically significant for ages 5-10) in villages within commuting distance to the factories. On the other hand, school dropout rates increased among older adolescent girls who were more likely to leave school to get a factory job. Girls were also less likely to get married at an early age – a 10% increase in garment jobs decreased by 7.3% a girl's propensity to be married before age 18. These effects of the garment jobs on girls' enrolment were larger than those of the FSSSP. Thus the authors concluded that although the dramatic increase in girls' secondary school enrolment is often attributed to the FSSSP, most studies are based on descriptive statistics and do not control for the effects of economic changes (e.g. trade or industrial policy) or other interventions and policies (Heath and Mobarak, 2012).

A more critical study of the programme examined its evolution and how its objectives shifted in line with changes in the political and social context and in development priorities. Initially the programme aimed to increase girls' enrolment and retention as a means to delay marriage and to control population growth. During the 1990s, employment and income-generation concerns were added. Only much later did girls' empowerment objectives appear in some programme documents but they were neither explicit nor high priority (Raynor and Esson, 2006). Based on a desk review of published literature through a capabilities framework, Schurmann (2009) also argues that the FSSSP has only been a partial success in terms of helping girls overcome secondary education barriers, enhancing their capabilities and empowering them. She also emphasises that the programme was introduced to increase girls' enrolment, tackle child marriage and control population growth, while focus was placed on quantitative and not qualitative targets that are more difficult to define and measure. As such, the programme was not designed to pay attention to issues of quality education or a curriculum that could enhance girls' skills and use education as an opportunity to empower them.

Another much evaluated education intervention is **BRAC Non-Formal Primary Schools** (BNFPS). The programme targets poor children out of school and with donor support establishes a second chance school for rural children, trains a teacher – usually a woman – from the same village, and provides a short and flexible school schedule and free school materials. The programme has an explicit gender focus and allocates the majority of the places to girls – initially the proportion was 70% but in response to girls' increased enrolment, the proportion fell to 65%. In recent years, the programme has been expanded to urban slums. A quantitative assessment of the cognitive competencies of students in these schools<sup>8</sup> over a decade found that students had a satisfactory or excellent performance in the majority of subjects. Interestingly, urban students had consistently better performance than rural students. In addition, no significant difference between the performance of boys and girls was found in most years, but in urban schools, girls outperformed boys. Compared to government schools, these BRAC schools performed better in terms of gender parity in competencies achievement, with a notable difference of 20 percentage points. The assessment points out that female teachers and programme organisers apparently created a girl-friendly environment and supported girls to actively participate in classroom; on the contrary, where the programme organiser was a man, boys outperformed girls (Nath, 2012).

It is estimated that there are around 40,000 BRAC non-formal primary schools in areas with poor government provision. More than 97% of BRAC graduates – the majority of whom are girls – continue to formal secondary school. Many graduates who are unable to complete their secondary education due to poverty, are provided financial assistance by the NGO (UNESCO, 2015). The organisation also runs community primary schools (BCPS), formal primary schools (BFPS) where girls receive free education while boys pay tuition fees, and schools for ethnic minorities (BSEM). However, students in the latter appear to have the poorest performance compared to students in other types of BRAC schools (Nath, 2012). A number of other BRAC

<sup>8</sup> This is one of a number of evaluations of BRAC's education programmes. Time constraints did not allow a comprehensive search for and analysis of the gender impacts of the many evaluations of BRAC's education work.



non-formal education initiatives aiming at empowering and building adolescent girls' life skills were also discussed in section 2.

An evaluated intervention which included the creation of school clubs is the **Innovation through Sport: Promoting Leaders, Empowering Youth** (ITSPLEY) programme in Bangladesh, which reached 27,000 girls. The programme was part of a larger CARE initiative in four countries that provided marginalised children, particularly girls, with opportunities to develop and practise their leadership skills as members of youth school and community sports clubs. The mixed-methods evaluation found that apart from developing girls' skills and raising awareness about child marriage, sexual and reproductive health and gender-based violence, the sports and extracurricular (games, arts and civic engagement) activities provided by the clubs, attracted girls to schools. The evaluation also found that 'eve teasing' (sexual harassment) was reduced, girls' enrolment rates appeared to be increasing, girls were more interested in learning, and a few child marriages were stopped by girls' groups as participants developed supportive relationships with peers in- and out-ofschool and helped them or talked to adults to allow them to go to school. Compared to community groups, the evaluation observed that in-school life skills training was led more by adults and not peers, and as a result, girls were less lively and assertive than those in community training groups (Eschenbacher, 2011).

The two programmes with an RCT evaluation also had some positive effects on girls' education (see also section 3). The **Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents** (BALIKA) targeted 9,000 adolescent girls aged 12-18 and aimed to delay their marriage through three distinct interventions: educational support, awareness raising about gender rights, and a livelihood intervention. The evaluation conducted at the end of the programme included a four-arm RCT with girls in the first arm receiving 100 hours of tutoring in mathematics and English (in-school girls) or of computing or financial skills training (out-of-school girls). In communities where girls received educational support, they were 31% less likely to be married as children compared to girls in the control communities. Age-differentiated data shows that the BALIKA educational intervention was particularly successful in delaying marriage among those under 16 of age. In addition, girls who received educational support were 20% more likely to improve their maths skills, 57% more likely to listen to the radio, 43% more likely to watch television, and 97% more likely to read a newspaper in the last week compared to the control group (Amin et al., 2016).

Data from the midline of Kishoree Kontha showed that girls who received the oil incentive had the best reading and maths scores that were on average 0.2 and 0.1 points respectively higher compared to those of the control group (Field et al., 2016). The first final findings from the cluster RCT evaluation also indicate that the small and relative inexpensive conditional incentive (cooking oil) enabled the older cohort of girls aged 15-17<sup>9</sup> that were already in school when the programme started, to stay in school. In particular, girls eligible for the incentive were 12% more likely to be in school at age 22 to 25 and had completed 2.2 months of additional schooling. On the other hand, girls who received the empowerment training consisting of educational support (basic literacy, numeracy and oral communication) and social competency (life skills and nutritional and reproductive health knowledge) in safe spaces by trained peer educators, were 6% more likely to be in school and had completed 2.4 months of additional schooling. Moreover, girls who were 15 years in the incentive group were 24% more likely to be in school and to have completed 3.8 months of additional schooling compared to girls of the same age in the empowerment group who were only 10% more likely to remain in school and to have completed two additional months. The study notes that there was no evidence of complementarities between the empowerment training and the incentive on girls' schooling; there was also no evidence of impact of the incentive on the schooling of girls who were out of school when the programme started (Buchmann et al., 2017).

<sup>9</sup> The first study presenting the final results focused on a sample of 15,739 girls from 438 communities, aged 15-17 and unmarried when the programme started in 2007. This follow-up study took place in 2015, 4.5 years after programme completion, and looked at programme outcomes on child marriage, adolescent childbearing and current school enrolment (Buchmann et al., 2017).



Although it did not have an RCT design, the often-cited **Kishori Abhijan** programme aimed to empower rural adolescent girls through life skills and livelihood training and among other goals, to increase their primary and secondary school enrolment and retention rates by 30%. Its mixed methods evaluation found that programme participation did not have a significant effect on school dropout rates, which were linked more to marriage and poverty than to education. The programme contributed to improved enrolment rates only for younger girls, aged 12-14, and those living in the poorest districts. It also increased participants' exposure to information, as they were more likely to listen to the radio, watch television and read a newspaper (Amin and Suran, 2005; Amin, 2011).

Among the interventions for which we did not find evaluations, there is a considerable number of projects targeting children who are out of school due to poverty, child labour or disability. The World Bank-led Reaching Out of School (ROSC) project targeted out-of-school children and provided stipends and grants to second chance schools. The project benefited over 790,000 children – more than half were girls – and enabled many of them to complete their primary education and transition to mainstream secondary schools after the majority successfully passed national examinations (World Bank, 2012). The Underprivileged Children's Education Programme (UCEP) also targeted child labourers in urban slums and provided them with general education and vocational training – girls accounted for half of participants in the education course (Ahuja and Ibrahim, 2006).

Similarly, the Supporting the Hardest to Reach through Basic Education (SHARE) programme enabled over 650,000 out-of-school children to combine work and school in various urban and rural settings (MoPME, 2015). Out-of-school children aged 10-14 were also the target of the Basic Education for Hard-to-Reach Urban Working Children (BEHTRUWC), which offered flexible non-formal education and life skills training. Given the explicit focus on girls, the project implemented a gender-sensitive curriculum which included awareness raising activities around gender relations and dowry. Indeed, girls represented over 60% of participants and had higher attendance and pass rates than boys. However, girls also faced greater difficulty attending regularly as they were responsible for household chores and childcare; sometimes they even brought their siblings to school (MoPME, 2015). Apart from these large scale projects, we found evidence of several smaller scale ones, such as those implemented by Nari Maitree and two INGOs, which also provide non-formal education to out-of-school slum children, child domestic workers and urban youth in informal employment (Dolly, 2015).

Our search also accessed an inclusive education initiative, the 'Promoting rights through community action: improved access to inclusive education for children with disabilities', which targeted children with disabilities in one district – without an explicit gender objective – and aimed to create a disability-friendly school environment through providing teacher training, child clubs and parents' groups as well as improving school accessibility and school curricula (Leonard Cheshire, 2014). The programme was effective in bringing children with disabilities to school and enabling them to remain and pass their grades; two-fifths of participants were girls (Peter et al., 2015). Apart from BRAC and its non-formal primary schools, other NGOs also run schools and provide scholarships and training to poor children in rural areas and urban slums, including the YMCA free schools and the Grameen Education programme (YMCA, 2011; Rouf, 2014). In addition, increasing attention is being paid by the government, donor agencies and NGOs to the educational needs of children living in areas that are inaccessible, flood-prone or affected by natural disasters; a few schemes provide boat schools (Yasunaga, 2014).

Interventions have also aimed to improve school sanitation facilities and promote hygienic attitudes. With support from bilateral donors, UNICEF has been implementing WASH initiatives in primary and secondary schools, including the establishment of adolescent clubs to work on menstrual hygiene management (MHM) (UNICEF, 2014; Seymour, 2008). Yet apart from some basic statistics, there is not much information on their effectiveness, particularly with regard to girls' attendance. In order to promote a more girl-friendly school environment, the government has also supported curriculum reforms and the recruitment and training of female teachers in rural secondary schools through initiatives such as the Programme to Motivate, Train and



Employ Female Teachers in Rural Secondary Schools (PROMOTE) (HDRC, 2011). Aiming to improve girls' school participation, the UNICEF-led Meena Communicative Initiative (MCI), built around the stories of a girl (Meena) and her family, appeared to have a considerable impact on promoting awareness of girls' right to education and equal treatment with boys. The MCI was integrated into formal and non-formal education projects and teacher trainings for more girl-friendly schools and led to some positive attitude change among both adults and youth, with 67% of adults exposed to the programme agreeing that girls must also be educated and 50% saying that girls and boys must be treated equally, compared to 59% and 44% of children respectively (Chesterton, 2004).

## 4.3 Limitations of interventions

The examined interventions with evaluations are mostly large scale programmes aiming to increase primary and secondary education. In the case of the social assistance programmes – FFE, SFP, PES, FSSSP – the reviewed literature identifies three key limitations that affected their overall effectiveness: lack of attention to quality of education and learning outcomes that are necessary to enhance girls' educational capabilities; lack of an explicit gender lens that considers girls' vulnerabilities, such as the household tasks that affect their time use and school performance (FFE and PES), or the negative impact on poor boys' secondary schooling given the lack of support and higher opportunity costs (FSSSP); and targeting problems in which better-off households benefit from programmes at the expense of those most in need.

Thus, the FFE focused on increasing enrolment and attendance, but did not pay much attention to learning (though other policies and programmes have attempted to improve it) and lacked a gender lens. Although girls increased their primary school enrolment more than boys, they consistently performed worse in the achievement tests, indicating worse learning outcomes (Ahmed and del Ninno, 2002). Likewise, in the SFP and PES boys outperformed girls in primary school achievement tests (Ahmed, 2004; Ahmed and Sharmeen, 2004). Girls benefiting from the FSSSP also had worse performance than their male counterparts, who were not eligible for the stipend (Ahmed and Sharmeen, 2004; Asadullah and Chaudhury, 2009). However, no explanation is provided in any of the studies reviewed.

Given that the FSSSP only targeted girls in rural areas, it had an unintended negative effect on adolescent boys' education. Comparing programme effects in peri-urban areas where the programme was implemented with urban areas where it was not, an evaluation found that in the former areas boys had lower secondary school enrolment rates and years of completed education, and were more likely to engage in child labour than girls. This reversed gender gap was particularly pronounced among poor households with female-to-male ratio among the poor reaching 125% in 2005 from 80% in mid-1990s. The evaluation thus suggested that female enrolment may have been significantly increased not only because the stipend brought more girls to school, but also because boys' secondary school participation was reduced (Asadullah and Chaudhury, 2006; 2009). Based on time-use data, another study found that the stipend particularly increased the time rural adolescent girls spent studying while adolescent boys increased the amount of time spent in wage work as they were not eligible for the stipend and had higher school opportunity costs (Arends-Kuenning and Amin, 2004). Acknowledging the problem, the government extended the programme to also benefit poor boys (Glennerster, 2013).

Another shortcoming of the interventions examined was the effectiveness of targeting with problems of excluding poor households and including those better-off. For example, the FFE benefited only 63% of those in the poorest quintile along with about one-third of those in the wealthiest. Thus many extremely poor children remained out of school (Ahmed and del Ninno, 2002). Poor targeting and limited attention to poor children's educational needs meant that their enrolment and completion rates were much lower than those of children from better-off families in PES (Ahmed and Sharmeen, 2004). The programme failed to reach its 40% participation target and only increased the enrolment rate of the poor by 10% more than that of the non-poor group (Ullah, 2013). One of the first FSSSP evaluations also pointed out that the girls that benefited



most belonged to households with larger land plots (Khandker et al., 2003). An evaluation using more recent data confirmed that although the FSSSP enabled poor girls to enrol in secondary school, only 37% of those from the bottom two quintiles were enrolled as the stipend covered only 20% of school expenses with overall non-poor enrolment rates being much higher (Ullah, 2013).

Beyond these large scale programmes, the majority of education and learning interventions appear to be small scale, last for a short time, and lack evaluations. Those that target marginalised youth groups such as children and adolescents with disabilities, out-of-school children or children in urban slums tend to lack a gender-sensitive perspective and provide only limited sex-disaggregated data with very little information on gender differences apart from gender differentials in test scores.

#### 4.4 Assessment of the evidence and key gaps

The reviewed interventions targeted both younger and older adolescent girls – yet some tended to consider younger adolescents within the broader group of children and did not distinguish between different age groups. Our search generated several sources with information about interventions targeting children living in urban slums or child labourers, but very little on indigenous minority children and youth, and none on married girls. Interestingly, a baseline study for a recent intervention (BALIKA) found that one in five girls attending school in the intervention area were married (Amin et al., 2014), while an earlier time-use study estimated that marital status was the principal determinant of how adolescent girls spend their time with married girls dedicating most of their time to household chores (Arends-Kuenning and Amin, 2004). However, we know very little about how best to help married girls complete their schooling. Likewise, because the majority of interventions target girls in rural areas, especially the large scale government programmes, there is much less evidence concerning how to support education and skills development among marginalised urban girls such as those living in urban slums or employed as domestic workers (see section 5 for discussion of some initiatives that focus on skills development for older adolescents).

Most of the interventions examined have aimed to increase enrolment and attendance by providing material – cash or in-kind – support to students. However, more recent interventions explicitly targeting adolescent girls also include provision of safe spaces and peer support groups. We have found no evaluations of programmes explicitly aiming to improve the quality of education or of learning outcomes, and thus lack insights into how far educational interventions are enhancing girls' actual learning and capabilities.

Finally, there are only a few evaluations combining a survey with qualitative research methodology. As already stated, large scale programmes are often evaluated by international programme partners through the use of quantitative methodologies that focus on particular programme aspects – most often enrolment and attendance rates or academic performance scores. These evaluations have not investigated issues such as teachers' behaviour in classroom, girls' vulnerability to violence or menstruation concerns. Either there is limited attention to these issues in programming, or evaluation evidence is not readily available. This rapid review thus suggests that understanding how best to address these broader factors that affect girls' educational experience is an evidence gap.



## **5. Economic empowerment interventions**

#### 5.1 Overview of the evidence

Our search identified 10 impact studies and evaluations of programmes promoting the economic capabilities of adolescent girls in Bangladesh. Nine of these studies were grey literature. We also found 40 sources providing information about other projects aiming to increase girls' economic participation. All impact studies and evaluations assessed medium to large scale programmes that included vocational skills training, livelihood training, microfinance and income-generating activities. Six studies used mixed qualitative and quantitative methodology, three used only quantitative techniques, and only one used purely qualitative methods. Two programmes (BALIKA and Kishoree Kontha) included an RCT in their evaluation design. Multi-component programmes such as BALIKA, Kishori Abhijan and Tanisha, which also offered financial education, livelihood training or support for income-generating activities, are primarily covered in other thematic sections, but their impact on girls' economic empowerment is also analysed below. Likewise, the impact of cash transfers is discussed in the preceding education section, as girl-oriented cash transfers in Bangladesh have been focused on enhancing school enrolment and attendance.

## 5.2 Vocational skills training interventions

A number of impact studies and evaluations assessed the effectiveness of skills-based training to promote the economic empowerment of adolescent girls. Using a community-based and needs-oriented approach, the **Post-Literacy and Continuing Education Project** (PLCE)<sup>10</sup> provided literacy, numeracy and practical skills training to participants aged 11-45 - half of them female - with the aim to increase their employment and productivity. A World Bank report (2008) noted that in its first phase the programme had a positive impact on raising the literacy and numeracy competencies of participants. In addition, it provided training in fifteen trade courses such as tailoring, poultry and goat rearing. A tracer study in 2007 found that 16% of female graduates were girls aged 11-17 and 84% aged 18-45. Female participants who acquired a trade were able to find self- or factory-employment and to raise their income between 10% and 100%. Income generation empowered them and in some cases – when they were able to considerably raise their household income – they increased their confidence and participation in household decision-making and community activities. However, the World Bank rated the programme 'moderately unsatisfactory' as its post-literacy component only reached 73% of its target number of participants due to problems with contracting local NGOs, while its employment potential was compromised by a limited number of trade courses and poor links to technical assistance and microcredit for graduates. Moreover, the programme had weak sustainability levels; although it promoted the community ownership of established education centres under local sponsorship and administration, this was impossible due to the limited financial capabilities of the targeted communities (World Bank, 2008).

An assessment of its second phase used quantitative analysis and tracer studies to gauge the impact. Additionally, qualitative data was gathered from credit proposals, previous reports and interviews with beneficiaries and stakeholders, and compared with those of a control group. The evaluation determined that both the intervention and the control group had employment rates (most often self-employment) near 100% (though underemployment among former participants is not represented in this statistic) (Maurer et al., 2011). However, although the programme was considered to be more labour-market oriented than typical vocational training schemes, participants felt that the provided training was not practical enough, that the

<sup>10</sup> The PLCE was designed by the government, the World Bank and other donors in the 1990s to provide vocational training to semi-illiterate youth and adults. World Bank data shows that at the beginning of 2008, 972,900 participants had completed the PLCE courses. Between 2008 and 2011, 870,000 participants benefited from its second phase – PLCE II. The programme was implemented by government agencies in 29 rural and urban districts (World Bank, 2008; Maurer et al., 2011).



supply of skills became saturated, and that PLCE II did not provide direct access to employment or to the equipment and the start-up capital necessary for many types of self-employment. The assessment also found that some implementing partners had limited capacity to specify and provide the skills required by the labour market. While the programme explicitly targeted girls and young women, it failed in most cases to provide them with sustainable access to self-employment. Moreover, it did not enable them to increase their income: 60% of female respondents reported that their non-participating siblings were doing better in terms of income contrary to 80% of male respondents, who said they were doing better than their siblings – yet no explanation is provided for these gender differences in outcomes. Rural to urban migration and work in the garment industry appealed more to women than the non-formal education provided by the programme and related self-employment. Lastly, while PLCE II encouraged centres to be community-owned and financially supported, there was again little such evidence, and their sustainability was also questionable as training was provided through NGOs and almost exclusively dependent on national-level funding (Maurer et al., 2011).

The Centre for Mass Education in Science (CMES) Second Chance Education Programme<sup>11</sup> has aimed to improve the lives of disadvantaged rural adolescents by offering a combination of basic educational, technical and life skills training development. The programme targets poor rural youth and among its specific objectives, it includes empowering adolescent girls and enabling them to realise their potential (Maurer et al., 2011; SDC, 2016). An assessment found that the programme uses student-centred pedagogical approaches and provides high quality education. Moreover, with its strong labour-market orientation, it has linked the provided vocational skills training to the skill needs of local factories and in that way has enabled participants to access employment and employers to have well-trained staff with increased productivity. Indeed, a considerable number of trainees have been able to find employment in the trades for which they received training. Unemployment rates are 14% at junior and 40% at senior level and these rates are much lower than the average rate of conventional Technical and Vocational Education and Training (TVET) graduates in the country. There is some evidence suggesting that trainees also earn higher incomes. The programme has a garment-oriented skills component and girls attend it as a means to access higher paid jobs in the garment industry. But as higher level jobs are generally offered to internally promoted operators, motivation to stay at the higher grades of the CMES programme declines over its course and dropout rates are higher for advanced grades. While dropout rates are lower than the average for such programmes, they are still high during transitions between programme levels (Maurer et al., 2011).

The Underprivileged Children's Education Programme (UCEP) has aimed to provide quality general and technical education and employment support to working children and youth from underprivileged communities, primarily from urban slums, shanties and squatter settlements (DFID, 2014; Amin et al., 2010). Designed to be an accelerated learning programme, UCEP provides the government's eight-year basic education curriculum in 4.5 years. As a multi-component programme, it also includes a year of marketoriented skills training and employment upon graduation as well as life skills training. In addition, a Child and Women Rights Advocacy Unit creates awareness of children's and women's rights and advocates against their exploitation and abuse. Most importantly, UCEP explicitly aims to promote gender equality with 50% of general education participants and 45% of technical training graduates expected to be girls (DFID, 2014). The majority of UCEP general education graduates continue to complete the secondary school certificate exams with almost perfect pass rates. On the other hand, UCEP technical schools achieve high rankings among all secondary technical schools in the country and almost all their senior graduates are offered employment before they finish studying and expect much higher incomes than those they earned before the programme (DFID, 2014). The 2014 DFID Review states that within the first three months of graduating, 80% of participants were employed, and within six months 95% have found employment due to the strong programme linkages with the labour market and employers. Meetings with employers are regularly held

<sup>11</sup> The first phase of the programme ran between 2007 and 2011. The second phase started in 2011 and was expected to be completed in July 2016. Between 2007 and 2009, there were around 9,800 students at junior level, 2,750 at senior level and 2,900 who received short-term skills training (Maurer et al., 2011; SDC, 2016).



where UCEP technical schools operate in order to identify market demands and labour needs, and UCEP has the reputation of being a reliable source of high quality workers (DFID, 2014).

The **Personal Advancement and Career Enhancement** (P.A.C.E.) programme, which works with 20,000 female workers in garment industries in Bangladesh, Cambodia, China, India, Indonesia, Sri Lanka, and Vietnam, also promotes skills training through 65-80 hours of life skills education followed by enhanced technical training. The programme works with employers to create an environment that encourages women to apply their new skills and enables participants to acquire the skills and knowledge to move into supervisory or management roles (ICRW, 2013). The ICRW undertook qualitative research with approximately 15 participants and 7-16 factory supervisors at every site, while it also established a global monitoring data system with key indicators on programme attendance, retention and advancement among P.A.C.E. participants and non-participants. The study found that P.A.C.E. participants in Bangladesh significantly increased their confidence and influence within their household as well as their communication with work supervisors. However, it is not clear the extent to which adolescent girls in participating garment factories have been able to benefit from the programme (ICRW, 2013).

The **Kishori Abhijan** programme is primarily discussed in section 3, but since it also included a livelihood training component aiming to economically empower adolescent girls aged 15-18, it is relevant to this section too. A mixed methods assessment found that participants increased their economic participation, although school enrolment and living in better-off families significantly reduced their likelihood of working for pay (Amin and Suran, 2005). Overall, the programme increased the number of girls working for pay and the amount of income they earned, especially when programme activities included microcredit provision. Participation in paid work did not lead to school dropout, but working girls reported spending fewer hours on school work outside the classroom (Amin, 2011).

The **Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents** (BALIKA) project also included among its three intervention strategies the provision of livelihood training and thus provided participating girls aged 12-18 with training in computers (25 hours), entrepreneurship (15 hours), mobile phone servicing (13 hours), photography (30 hours) and basic first aid (17 hours). Its RCT evaluation found that girls in communities with such training were 23% less likely to marry early; 22% more likely to be in school; 35% more likely to earn an income; 70% more likely to listen to the radio; and 119% more likely to read a newspaper compared to girls in control communities. Overall, BALIKA had a limited impact on girls' livelihood activities as few girls were working. Yet significantly more girls in all intervention areas reported working and having a higher income at endline compared to the baseline. Programme impact was also found to be significantly higher among out-of-school girls who participated in the livelihood intervention, while inschool girls were more likely to report working in higher status jobs after the intervention (Amin et al., 2016).

## 5.3 Interventions with financial literacy, microfinance and incomegeneration components

The main BRAC adolescent programme, the **Adolescent Development Programme** (ADP) has evolved since it was first established in 2000 and also included the provision of livelihood training. Research shows that participants in BRAC programmes sharply increased the number of days spent on income-generating activities annually and increased their financial literacy by 10% (Kashfi et al., 2012). Although the **ADP in Border Regions** provided only life skills training, it was expected to affect participants' income-generating potential. The training taught participants that women can work after marriage or after having a child, and that paid work does not threaten marital relationships. A quantitative evaluation found that while 16% of participants were engaged in earning activities at baseline, their proportion increased to 43% in the followup – compared to 20% and 37% of the control group respectively (Ara and Das, 2010).


In 2003, BRAC launched the Employment and Livelihood for Adolescents (ELA) programme which targeted girls aged 10-24, and apart from safe spaces, it also provided them with savings and credit support. Two years later, with financial assistance from the Nike Foundation, BRAC set up ELA centres for girls. Each centre had thirty participants and combined safe spaces, microfinance, life skills and livelihood training along with mobilisation of parents and community members in order to create a positive attitude towards girls' participation (Shahnaz and Karim, 2008). An evaluation by the Research and Evaluation Division at BRAC combined qualitative and quantitative techniques and assessed programme impact on child marriage, school enrolment, mobility, health awareness and economic empowerment. Indeed, participants demonstrated higher engagement in earning activity and financial market participation, and a slightly higher level of financial literacy than non-participants. Most girls who received training and a loan were able to control their loan, yet some girls who did not receive training gave it to their parents or spouse for investment. A negative correlation was also found between schooling, loan intake and earning activities as adolescent girls were afraid that their involvement in income-generating activities would have a negative impact on their studies and thus did not use available loans to fund their education. In addition, those from very poor families feared not being able to repay a loan and thus also reported no experience nor future plans to take a loan. The majority of participants also expressed their wish to marry later, get good jobs and financially support their families (Shahnaz and Karim, 2008).

In 2009, BRAC integrated ADP and ELA features into the **Social and Financial Education for Adolescents** (SoFEA) programme which aimed to empower rural girls aged 11-21 both socially and financially through creating girls' clubs and providing life skills, livelihood and financial literacy training. Girls were encouraged to start saving a minimum amount on a weekly basis, while older adolescents aged 15-21 could also ask for a loan. The Research and Evaluation Division at BRAC used qualitative methods (in-depth interviews, focus group discussions and informal discussions) and content analysis to assess the programme. Girls reported that the programme increased their self-confidence and motivation. It also enabled them to acquire basic financial knowledge, improve their planning skills, and increase their involvement in economic activities and ownership of assets, such as poultry and livestock. Several participants stressed that, encouraged by the staff and the training they received, they started income-generating activities or improved the management of the small business they had already run. The programme was also found to have spill-over effects, as influenced by their neighbours, non-participating girls also got involved in productive activities. Girls also stated that thanks to their new skills and knowledge acquired from SoFEA, they were more respected by their families (Kamruzzaman et al., 2012).

The **Shonglap Education Project** targeted adolescent girls 12-19 who had dropped out of school. They received nine months of literacy, basic education and life skills training, followed by three months of training in income-generating activities such as tailoring, poultry farming and homestead gardening. Girls were organised in groups led by a young woman from the same village who had received training. Based on the REFLECT<sup>12</sup> methodology, teaching was characterised by intensive teacher-student interaction and aimed to promote knowledge transfer, self-awareness and confidence building. Apart from training, girls who could handle and repay a loan were provided with an interest-free loan. On the grounds that the family and the community play a crucial role in sustainable transformation, the project also set up support teams that involved village leaders, guardians and other external stakeholders who guided and supported girls' groups (Sigvaldsen and Shahjahan, 2012).

A mixed methods assessment in 2011 found that 84% of graduates were involved in income-generating activities compared to just 10% at the baseline. Half of working girls were involved in more than one economic activity. Although the project also offered mobile servicing and beauty skills training, girls and their families often preferred to engage in activities that were in accordance with traditional gender roles, such as

<sup>12</sup> The REFLECT (Regenerated Freirean Literacy through Empowering Community Techniques) approach is an innovative participatory methodology that places students at the centre of their own learning process and enables all participants to have a voice, set their own goals and reflect on their learning and achievements.



livestock rearing and embroidery. Participating girls were able to meet the costs of their education (46%) and clothing (56%) or contributed to family expenses such as food (67%), debt repayment (38%) or medical care (6%). In general, 97% of participants contributed financially to their family. Girls were also more likely to decide on their own or with other family members how to spend their earned income. They also learnt and acquired good saving practices, with 74% of them saving compared to just 3% at baseline; in some cases, they formed savings groups and used the accumulated amounts to start small businesses. The vast majority of those who took a loan were able to repay it; only 5% of loans were outstanding. Data also shows that girls increased their mobility with relatives' and friends' houses, school, market and NGOs being the most frequently visited places. The programme also had a significant impact on decision-making with 87% (22% higher than the baseline) of girls stating they were empowered to make decisions at the family level on issues of education, marriage, mobility, participation in festivals and controlling family expenses. Finally, most girls acquired a basic knowledge and understanding of their legal rights. Regarding the sustainability of project effects, the study recommended the establishment of graduation centres or groups where girls could continue to meet and access some support (Sigvaldsen and Shahjahan, 2012).

Tanisha - Improving Income and Advancing Social Identity of Rural Adolescent girls' project, a DFID funded project, targeted rural adolescent girls aged 12-19 in Barisal district and aimed to help them graduate out of extreme poverty by providing them with the economic means to engage in income-generating activities and acquire the necessary social and leadership skills. The project set up peer groups and safe spaces which provided training on life and livelihood skills, including financial literacy, business and savings skills along with training on tailoring, livestock rearing and homestead gardening. Tanisha also included community mobilisation and establishment of community adult groups who would support girls' empowerment. A mixed methods assessment reported that all targeted adolescent girls completed the life and livelihood skills training and were provided with productive assets of their choice. However, income-generating activities faced considerable challenges such as selection of girl-appropriate activities in terms of their skill level, available time, local gender norms and profitability. Some girls faced tensions and jealousy from other participants if they received larger or better activities than others. Some girls were discouraged from getting involved in the income-generating activities due to fear of social stigma and family pressure, with older male household members often managing these activities. Girls who participated in the savings scheme said that they enjoyed it, and many opened NGO bank accounts and had small savings which they planned to invest in their education and marriage. However, given the small amounts saved, the effects of the scheme were largely limited to equipping girls with skills and making them aware that they need to invest in their future (GoB et al., 2014).

The **Kishoree Kontha** targeted rural adolescent girls aged 10-19 in Southern Bangladesh and also included a financial literacy and livelihood training on top of the basic empowerment training in some communities. A random sample of these communities was also selected to receive an additional intervention, which included the establishment of girls' savings clubs (Field et al., 2016). The programme evaluation design included an RCT which tested the effectiveness of different components and found that the provision of a financial incentive (cooking oil) had the best results in terms of delaying child marriage and early childbearing, and keeping girls in school (Buchmann et al., 2017). More findings of the endline will probably be published to highlight programme impact on girls' economic capabilities. However, another quantitative study measured change in girls' developmental assets and found that girls who received the financial and livelihood training improved them by 16% compared to 19% among girls who received the training and the incentive; yet the authors admit that this is a 'puzzling finding' and additional research is necessary to determine the impact of livelihood training and whether its linkages to income-generating activities could improve its effectiveness (Scales et al., 2013).



#### 5.4 Limitations of interventions

The majority of accessed programmes have targeted older adolescent girls who are already engaged in economic activities or will soon be entering the workforce in both rural and urban areas. There were only a few programmes targeting younger adolescents to provide basic training around saving and managing money effectively; UCEP also noted a lack of curriculum for this age.

Skills training programmes (such as the CMES, UCEP and P.A.C.E.) that established linkages with local factories and employers to identify the skills required by the labour market were often successful in enabling participants to find jobs and receive higher incomes. Training that provided generic rather than trade-specific skills was less helpful to participants, while entrepreneurship training without access to the credit and services needed to start a small business also failed to have a significant impact. Overall, interventions that partnered with employers, combined microcredit with entrepreneurship training, and provided training to increase girls' self-esteem demonstrate the greatest impact. However, even interventions intended primarily for economic empowerment were successful in increasing girls' confidence and decision-making ability alongside improving their financial literacy or developing their business skills.

There is concern that interventions providing livelihood training and microcredit to older adolescent girls can act as a disincentive to stay in school; girls may be tempted to drop out of school early in order to join the workforce or start their own business and earn an income. In the particular case of BRAC's ELA programme, some girls gave their loans to family members or male relatives for their business. The programme evaluation (Shahnaz and Karim, 2008) noted that parents were allowing their daughters to participate in order to utilise the financial services they gained access to, but it is unclear to what extent girls experienced this as exploitative or as a welcome source of additional income. In programmes where this is common, it should be monitored more closely.

#### 5.5 Assessment of the evidence and key gaps

Overall, it was often challenging to distinguish between programmes targeting women and those targeting or including adolescent girls as impact studies do not always specify the ages of participants. Nor do evaluations of programmes working across a wide adolescent age range always specify which components or activities targeted which age groups, or with which age group impacts were measured. Finally, several programmes have aimed to enhance households' economic wellbeing, with potentially positive effects on adolescent girls, but analysing them was outside the scope of this rapid evidence mapping.

Self-selection in many of the programmes may over-represent the impact of the programme on confidence and self-esteem levels, as girls who are interested in participating are likely to already have higher levels of confidence. A few evaluations also assessed spill-over effects, as they included among their respondents, non-participants living in the same villages were the girls' clubs or the intervention took place. Although this is a positive indication that these programmes can have a wider impact other than on the immediate target group, it also presents a challenge in determining programme impact.

The lack of quasi-experimental evaluations and of evaluations drawing on both baseline and endline data indicates a great need for additional rigour in future evaluation methods. In multi-component programmes with a combination of skills training, financial literacy, microcredit, savings education and social networks, evaluations were limited in their ability to discern which aspect of the programme had the greatest impact. The majority of evaluations concentrated on vocational and livelihood skills training and more research is needed on the impacts of savings, microcredit and asset-building programmes for adolescent girls of different age groups. Further attention should be paid to evaluating the risk of adolescent girls participating in child labour as a result of economic empowerment programmes, particularly those oriented towards skills training needed for garment sector employment, and vocational skills training more generally as well as those providing access to microcredit.



# 6. Sexual and reproductive health, health and nutrition interventions

#### 6.1 Overview of the evidence

Our search generated 16 impact studies and evaluations along with 50 project documents of interventions aiming to improve adolescent girls' sexual and reproductive health, physical health and nutrition. Twelve impact studies were grey literature and four were academic papers. Eleven studies used mixed methods, and only one evaluation used a purely qualitative approach; the remaining four studies used quantitative techniques. Two interventions used a quasi-experimental design with three arms (Bhuiya et al., 2004; Bhuiya et al., 2006; Haseen et al., 2004), while two more recent ones (BALIKA and SAFE) included an RCT (Amin et al., 2016; Naved and Amin, 2014; Hossain et al., 2015; icddr,b, 2014a). While the broad physical wellbeing theme covers an array of topics, the most commonly occurring subtheme is adolescent sexual and reproductive health, with almost all impact studies, including those of multi-component programmes, having at least one such element. A more detailed overview of this evidence is presented in Annex 1.

#### 6.2 Sexual and reproductive health interventions

A number of impact studies and evaluations assessed the effects of sexual and reproductive health interventions, aiming to increase adolescent-relevant knowledge, improve attitudes and practices, and increase access to youth-friendly services. A quantitative evaluation of **a school-based menstrual health intervention** targeting female students aged 11-16 found that participants substantially increased their knowledge and belief scores on various topics related to the menstrual cycle (from 51% to 82%), improved their menstrual practices (from 29% to 89%), and experienced fewer complications in their menstrual cycle. Participating girls also increased their mobility during menses, visited relatives and friends, and increased their school attendance (Haque et al., 2014). Although the evaluation suggests that this was a very effective intervention, the methodology used could have introduced a bias due to reliance on self-reported data and the absence of a control group preventing understanding of the influence of other factors.

The 12-month intervention implemented under the **Demand-Based Reproductive Health Commodity Project** (DBRHCP) was similarly effective in imparting knowledge related to menstruation. This was a lengthier, larger project attempting to impact a range of sexual and reproductive outcomes among the 800 unmarried girls aged 12-19 who were questioned using pre- and post-test surveys. The quantitative assessment found that adolescents' knowledge increased in relation to semi-permanent family planning methods (injectable contraceptives and condoms), HIV and AIDS, and healthcare facilities. However, there was no marked increase in knowledge about sexually-transmitted infections, while knowledge about longterm contraception dropped from baseline to endline. Results were thus mixed, while evaluation design did not allow confident attribution of outcomes to the intervention (Kabir et al., 2015).

Using a quasi-experimental design, another **school-based sexual and reproductive health intervention** targeted both girls and boys aged 13-19 in two rural sub-districts. The intervention included development and distribution of three booklets with information about puberty, family planning, sexually transmitted infections (STIs) and HIV and AIDS, training of government health clinic staff in the provision of adolescent-friendly services, and community sensitisation activities, which involved orientation meetings with parents, teachers and the community. Students were assigned to one of three groups, depending upon what school they attended: group A received community sensitisation, booklet distribution and health staff training; group B received booklet distribution and community sensitisation; and group C served as the control group (Haseen et al., 2004).



Despite the attempt to make government health facilities adolescent-friendly in group A, this was beset by obstacles. Ultimately, only 5% of the adolescents had visited a government clinic by the end of the intervention so the impact of this component was not tested. Results are reported for the changes from preand post-intervention surveys from the intervention schools, which were aggregated and compared to changes in the control group. The evaluation carried out three months after the final distribution of booklets found that 76% of girls and 75% of boys reported reading all three booklets, while none of the students in the control group had seen or read them. Based upon both univariate and multivariate analyses, the study also found significant improvements in knowledge among students attending the intervention schools. In particular, girls and boys improved their knowledge of modern contraception methods, STIs and prevention methods. Regarding changes in practices, very few students reported high-risk behaviours or attended health services to permit a statistical analysis of group differences, which indicates the difficulty in demonstrating behavioural change impacts. The study concluded that the distribution of booklets along with community sensitisation can effectively improve adolescent knowledge - yet there is no further specific information about the different outcomes between group A and B. In terms of gender differences in outcomes, programme impact was greater among boys than among girls, but the absolute level of knowledge was higher among girls (Haseen et al., 2004).

The **Improving Adolescent Reproductive Health intervention** also targeted both in- and out-of-school adolescents aged 13-19 as well as gatekeepers such as parents, teachers, religious leaders and community leaders in Northwest Bangladesh to provide sexual and reproductive health education and services, and to promote healthy lifestyles (Bhuiya et al. 2004; 2006). The intervention study included a quasi-experimental approach with activities across three urban areas. Site A provided reproductive health education to out-of-school adolescents along with adolescent-friendly services; Site B provided such education to both in- and out-of-school adolescents and adolescent-friendly services at health facilities; and Site C served as the control area and received no special intervention. There were six types of interventions, including sensitising gatekeepers; training teachers, facilitators, peers and service providers; imparting sexual and reproductive health information; providing adolescent-friendly services; promoting awareness through behavioural change communication; and linking schools, community services (Bhuiya et al., 2006).

Using bivariate and multivariate analyses, the evaluation that took place after 18 months of intervention found a significant increase in HIV and AIDS knowledge in all intervention sites compared to the control sites, with greater improvement in Site B which had the additional school-based intervention. This indicates that teachers can be effective in providing reproductive health information to adolescents. Knowledge of the fertile period and health risks of child marriage also improved, with greatest improvement again recorded in Site B. Knowledge of contraceptives improved in all sites, but greatest improvement was seen in Site A. With the exception of knowledge of a girl's fertile period, girls were less likely than boys to have knowledge of reproductive health outcomes (Bhuiya et al., 2004).

In terms of reproductive health attitudes, adolescents in Site B were more likely than those in Site A to support use of contraceptives, including use of condoms by unmarried and married adolescents. Overall, more boys than girls approved of unmarried adolescents' use of contraceptives. There was also a more positive attitude towards using health facilities for contraception and STIs than pharmacies. The use of condoms also increased in the intervention sites and especially in Site B. On the other hand, the proportion of unmarried males reported ever having had sex increased significantly in the control area but it did not change in the intervention sites (Bhuiya et al., 2004).

Service utilisation data revealed that compared to the control Site C, use of health services in Site B increased ten-fold while it doubled in Site A. Nearly one-fourth of the adolescents in the intervention catchment areas visited the adolescent-friendly health facilities and 87%, mostly girls, obtained relevant services. Girls mainly sought tetanus toxoid vaccines (52%), but also antenatal and postnatal care (22%), family planning (14%), reproductive tract infection or STI services (15%), and help with menstruation-related problems (for which data was unavailable). Interestingly, the evaluation collected age- and sex-disaggregated data about each



intervention component. The study concluded that a combination of reproductive health interventions at school, health and community levels appears to be more effective as demonstrated by the fact that Site B with its inclusion of the school-based activity proved to have better effects than the other two sites (Bhuiya et al., 2004).

The **Growing Up Safe and Healthy** (SAFE) programme targeted adolescent girls and young women aged 10-29 living in Dhaka slums with a 20-month integrated multi-sectoral intervention that combined several established strategies of prevention and service delivery, including access to health and legal services, awareness raising sessions with men, young women and girls, community mobilisation campaigns, and networking and advocacy activities. The objective was to improve sexual and reproductive health and to reduce intimate partner violence against girls and women in urban slums. The comprehensive programme evaluation used qualitative and quantitative techniques, including a multi-cluster RCT. The RCT had three arms with a randomly selected sample of over 9,000 ever-married women aged 15-29<sup>13</sup> and 3,000 men aged 18-35 living in the community. Arm A included community awareness raising, access to one-stop service centres and separate group sessions with female and male participants. Arm B had the same activities but for female participants only. And Arm C included community awareness raising and access to one stop service centres but not group sessions (Naved and Amin, 2014).

The evaluation found that awareness of modern family planning methods and adverse effects of adolescent pregnancy were already high at baseline and thus improved very little at endline. However, the programme considerably increased menstrual regulation awareness, particularly in Arm B where female group sessions were held. The evaluation also showed increased awareness of service delivery points for sexual health problems as well as knowledge of sexual health problems, STIs and HIV and AIDS, particularly in Arms A and B. In terms of improving sexual and reproductive health practices, the programme increased the use of modern family planning methods, significantly only among women in Arm A where both men and women received sessions. Arm A also showed the largest increase in condom use, although change was small. Yet the overall use of male condoms reported by participants was almost double the rates reported in national surveys (11% at endline compared to 5.5%). Use of menstrual regulation declined, especially in Arm A. The evaluation also found substantial changes in the uptake of antenatal and postnatal services, but only small changes in institutional delivery and use of services for sexual health problems. Overall, the evaluation revealed that SAFE produced mixed results (Naved and Amin, 2014). What was particularly interesting was the importance of including and working with men in programmes aiming to improve women's reproductive health. Clearly, modern contraceptive use increased and the need for abortion services declined more where men were also engaged compared to interventions where only women were involved in group sessions (Hossain et al., 2015).

The final study considered in this section is an evaluation of BRAC's **Adolescent Reproductive Health Education** (ARHE) programme (Rashid, 2000). The programme consisted of reproductive health classes provided through BRAC's Basic Education for Older Children or Kishor Kishori schools, which ran for three years. Pupils were adolescent boys and girls over the age of 12 who had never been enrolled in school and were from very poor households. Almost all parents were illiterate and had had very little formal schooling. The ARHE classes were provided in the third year of schooling and taught by female teachers from the same community. In addition, ARHE education was also provided in BRAC's community libraries and government secondary schools. Classes were taught for an hour a fortnight in the schools, and once a month in community libraries. They covered education on the physical and mental changes experienced during adolescence; female and male physiology; reproduction, including conception, pregnancy and childbearing, and guidance on the age at which marriage and childbearing should take place; sexually transmitted infections; family

<sup>13</sup> Age-disaggregated data by age group (15-19, 20-24 and 25-29) shows that those aged 15-19 accounted for 17% of female respondents at baseline and 17.5% at endline at all sites (Naved and Amin, 2014).



planning and disease prevention; substance abuse, including smoking; and gender issues, including gender inequality, the role of men and women in reproduction, and violence against women and girls (Rashid, 2000).

This is the only evaluation on sexual and reproduction health education found in our search that used a purely qualitative approach and did not report on how widespread certain changes were. Research methods included FGDs, participant observation and semi-structured interviews with adolescents, mothers and aunts, teachers and BRAC programme staff. Adolescent girls reported that menstruation was the most significant topic discussed at the classes, given that it was often considered a shameful and hidden subject and girls typically got very little information about what it is and how to deal with it. A number of girls said they were now using their newly acquired knowledge of hygienic menstruation practices and discussing it with other girls in the village and in some cases with their mothers. The interviewed BRAC staff confirmed the adoption of hygienic practices by adolescent girls during menstruation. Family planning methods were also a popular topic with girls who typically could not discuss this with mothers or older female relatives. However, most girls were unclear about the causes and symptoms of STIs and HIV and AIDS. On the other hand, boys were more interested in sex-related information, including AIDS, STIs and family planning methods. They were also keen to disseminate this knowledge to peer networks in the village. In general, adolescent boys appeared to be aware that compared to girls they had more sexual freedom and rights, and could openly talk about masturbation and satisfying their sexual desires (Rashid, 2000).

The evaluation pointed out that the programme enabled adolescents to learn and speak about their bodies and sexual activity and thus contributed to breaking the taboo and the shame surrounding such issues. However, some female teachers were embarrassed at discussing sexual and reproductive health issues with boys and thus failed to do so. Adolescents reported that teachers preferred to focus mainly on menstruation, child marriage and family planning topics, while they skimmed over the topic of STIs, including HIV and AIDS, resulting in several misconceptions among respondents. Finally, ARHE classes apparently provided an opportunity for some adolescent girls and boys to speak and share their feelings about love and 'romance' (Rashid, 2000).

## 6.3 Multi-component interventions with adolescent sexual and reproductive health elements

Our search also generated a few evaluations of multi-component programmes that also aimed to improve adolescent sexual and reproductive health knowledge. In the case of BRAC interventions, it has to be noted that with project operation spanning from the 1990s to the present day, building a coherent picture of the interconnected activities is challenging, particularly when projects overlap or the names of activities change. Focusing on sexual and reproductive health knowledge, we will first discuss an evaluation that covers the general Adolescent Development Programme and then look at evaluations of the Adolescent Peer Organized Network component and the ADP in Border Regions programme. Programme effects in other areas have already been discussed in the relevant preceding thematic sections. We will also present findings from three other evaluated multi-component programmes that also attempted to improve adolescent sexual and reproductive health outcomes.

An impact study of BRAC's **Adolescent Development Programme** (ADP) collected qualitative data from FGDs with adolescent girls and boys and KIIs both in an ADP area and a non-ADP area, and combined it with quantitative data collected and analysed by UNICEF. However, the authors do not explain in detail the methodology employed by UNICEF or the particular population sampled, and the results section lacks clarity in terms of how this data was used to supplement the primary research. The programme provides sexual and reproductive health and rights education and the study found that more respondents in ADP areas, including adolescent girls, boys and mothers, reported having knowledge about reproductive health issues compared to those in non-ADP areas. In particular, adolescent girls from ADP areas had complete knowledge of adolescent reproductive health. They were also aware of personal health and hygiene and had a good



understanding of menstruation and the need to maintain good hygienic conditions. On the other hand, boys from ADP areas were well informed about wet dreams, their causes and how to deal with them, contrary to boys in non-ADP areas. In addition, both girls and boys had good knowledge of family planning methods and of child marriage, pregnancy, antenatal and postnatal care, and danger signs for pregnant mothers. They also increased their knowledge of HIV and STIs and even discussed sharing their knowledge about HIV and family planning with their relatives and neighbours (Alim et al., 2012).

Our search also provided two mixed methods studies evaluating a key ADP's component, the **Adolescent Peer Organized Network** (APON) course, which provided life skills training, including reproductive health, family planning, STIs and maternity information to participating girls (Khan et al., 2003; Kabir et al., 2007). The first study interviewed 200 adolescent girls through a structured questionnaire to measure their knowledge, attitudes and extent of knowledge dissemination (Khan et al., 2003). In addition, FGDs were held with course participants and separately with their mothers. The authors acknowledge that their study is limited, covering only two of the 179 APON groups, while interviewed girls did not include those who married at a young age or moved away. The study is also presented as a pilot and thus results should be interpreted with these limitations in mind. Two groups of APON participants were compared against a non-APON group. The study found that APON participants had significantly better knowledge on health issues such as ways of HIV infection, iodine deficiency diseases and female contraceptive methods. Furthermore, they disseminated their knowledge about common diseases to others, especially their peers, but found it difficult to discuss sexual health issues with their parents or elder brothers (Khan et al., 2003).

The second evaluation also used a mixed methods approach, surveying 3,175 APON graduates and presenting eight case studies (Kabir et al., 2007). Data from these graduates was compared against the national data of the 2005 Bangladesh Adolescent Survey (BAS), which included all adolescents and youth aged 10 to 24<sup>14</sup> and served as the control group. Stronger conclusions about APON's effects on sexual and reproductive health knowledge can be drawn from this larger and more recent study, although it also had some limitations. For instance, it was found that some of the targeted adolescents were missing mainly due to migration, an issue resolved through substitute sampling. The study also suffered from absence of baseline data with some comparative data lacking from the BAS survey. Male respondents were found to be more knowledgeable than female respondents about permanent family planning methods for males and females. Most APON respondents thought that both husband and wife should discuss and take decisions about family planning matters. While BAS respondents indicated 11 or 12 as the maximum number of desired children, APON respondents desired a maximum of four or five. The majority of participants had heard of HIV and AIDS, but no other STI. Moreover, the case studies indicated that all the girls found that APON was useful in terms of teaching them personal health and hygiene, especially how to deal with menstruation, which they did not know before. This knowledge was widely disseminated and well received by their friends, neighbours and other female family members (Kabir et al., 2007).

A quantitative assessment of BRAC's **ADP in Border Regions** also examined programme impact on sexual and reproductive health knowledge and attitudes (Ara and Das, 2010). The programme operated in remote villages near the border that had been previously neglected by NGOs. The programme had a few main differences from the existing ADP, including the introduction of an activity that involved the use of audio-visual materials on HIV and AIDS, gender equality and girls' education, which were developed and used for the first time. The study used two rounds of survey data on the same adolescents included in an intervention and a control group. Respondents' awareness regarding any problem faced during the two periods increased in both groups but was more pronounced (from 38% to 46%) among the intervention group. The proportion of adolescent girls being restricted from any activities during menstruation decreased from 47% to 41% among the intervention group, while it decreased by only 1% (from 38% to 37%) among the control group. Border ADP participants also increased their HIV and AIDS knowledge, including probable routes of disease

<sup>14</sup> The total BAS sample was 14,942 (Kabir et al., 2007).



transmission such as unprotected sex, non-hygienic injection and unprotected sex with sex workers. For the control group, awareness on such issues remained almost the same or to some extent decreased during the same period (Ara and Das, 2010).

**Kishori Abhijan** also provided rural adolescent girls with life skills training, including reproductive health, HIV and AIDS, nutrition and hygiene knowledge in order to improve their health awareness. An impact evaluation using a mixed methods approach found that the percentage of participants aged 13-19 with STIs knowledge increased significantly<sup>15</sup> between the baseline and endline, with programme members exhibiting a greater increase (Amin and Suran, 2005). Participants were also more likely to give accurate answers to questions about HIV transmission and aspects of female reproductive biology; overall, they demonstrated improved knowledge about health, family planning, nutrition and the causes of disease (Amin, 2011).

Two more multi-component programmes also included provision of sexual and reproductive health knowledge to participating adolescent girls. The **Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents** (also see section 3) project provided participating girls aged 12-18 with sexual and reproductive health knowledge; its evaluation, which included an RCT, reported positive changes. The project included three distinct strategies: education, gender rights awareness or livelihood training. The RCT showed that girls in all three strategies significantly improved their reproductive health knowledge and even changed their behaviour compared to the control group. Thus girls who participated in the education intervention were 65% more likely to know about family planning methods; and girls in the gender rights intervention compared to the control group. Girls in all three intervention arms were also significantly more likely (between 76% and 122%) to receive treatment for reproductive health problems, while girls in the gender rights and livelihood intervention arms were 36% more likely to use menstrual hygiene products (Amin et al., 2016).

Finally, the **Shonglap Education Project** involved a 12-month programme of education and life skills training for adolescent girls who had dropped out of school (also see Section 5). Its evaluation also found that it improved participants' health knowledge. Knowledge about tuberculosis, polio, tetanus, pneumonia, whooping cough, hepatitis A, measles and their related immunisations increased significantly as well as the general understanding of HIV and AIDS. There was also some improvement in access to water and sanitation, including use of safe drinking water at household level (Sigvaldsen and Shahjahan, 2012).

#### 6.4 Assessment of the evidence and key gaps

Generally, the evidence spanned the adolescent girl age group appropriately, with sexual and reproductive health interventions targeting girls aged between 10 and 19 years. However, where programmes spanned the adolescent age group, rarely did impact studies attempt to break down outcomes according to narrower age ranges. This would have been particularly useful, as activities may vary in their impact according to the maturity or circumstances of the targeted population, both of which are very transient during adolescence. In addition, there was a lack of evidence on the impact of broader health sector reform programmes, such as family planning or safe motherhood interventions, probably due to the fact that assessments do not disaggregate between the impact on older adolescent girls and young women.

Several of the examined interventions either carried out all or some of their activities in schools, or sampled directly from school attendees, which indicates that a significant proportion are opting for more mainstream participants, perhaps due to the relative ease of reaching this population. A few interventions, such as SAFE, targeted urban slum populations. Only three other evaluations attempted targeting more marginalised adolescents: BRAC's ADP in Border Regions (Ara and Das, 2010), BRAC's ARHE programme for

<sup>15</sup> While 25% of matched and 31% of unmatched programme members reported awareness of STIs at baseline, 75% and 76.5% did so at endline. Non-members showed a much lower increase (from 26% to 44% and from 21% to 34% respectively) (Amin and Suran, 2005).



socioeconomically deprived adolescents (Rashid, 2000), and the Shonglap project for adolescents who were no longer in school (Sigvaldsen and Shahjahan, 2010). Thus there is a critical evidence gap for programmes targeting more marginalised adolescent girls such as sex workers<sup>16</sup> or youth living with HIV.

There was also a paucity of evidence that considered long-term impacts of interventions. This is an important evidence gap for sexual and reproductive health programmes because some of the knowledge imparted at a younger age is unlikely to impact behaviour until the participants are sexually active or married, which for some may not be for a number of years after the intervention ended. A related issue is the high levels of attrition in some studies, which prevents a full understanding of the impacts of some of the interventions (Ara and Das, 2010; Haseen et al., 2004). Studies that use pre- and post-test surveys suffer from losing participants from endline data collection, such as those who marry early or move away, which is likely to bias findings.

There was a considerable variety of methodological approaches used in the evaluations, with some using mixed method designs and others quasi-experimental designs that attempted to use control groups with varying success. Generally, there was a too frequent reliance on self-reported data, with a distinct lack of objectively measured evidence, such as service attendance data or rates of pregnancy or STIs among programme versus non-programme participants. A notable exception was the study by Bhuiya and colleagues (2004), which reported health service attendance in the study population, although it did not provide detail on how this data was obtained.

The evidence is skewed towards large scale programmes that reach over 1,000 participants, although some impact studies sampled a relatively small proportion of the larger population. The remainder were small or mid-scale. The higher proportion of large scale evaluations is typically a reflection of sexual and reproductive health programmes recognising the value of capturing a wide section of the population, including boys and other community members, with whom girls interact in their daily lives. This is demonstrated by the SAFE study which had a more successful impact in sites where both young men and women participated in programme activities (Naved and Amin, 2014). Nevertheless, more small scale interventions may be needed in order to refine targeted approaches to specific population groups, including younger adolescents.

To conclude, the evidence indicates that there has been considerable investment in programmatic efforts to improve sexual and reproductive health and related issues among girls and young women in Bangladesh. The evaluations reveal the complexity of these interventions and the great challenges that come with attempts to overcome deficits in sexual and reproductive health knowledge and awareness and especially the difficulty in changing often deeply entrenched norms and behaviours. The dominance of sexual and reproductive health interventions also suggests that a critical evidence gap is the absence of evaluated interventions on other health issues that are likely to directly or indirectly impact the physical wellbeing of girls and young women in the country.

<sup>16</sup> The only evaluation we found of a programme working with sex workers suggested that most of the participants were young adults.



## 7. Conclusions: key findings and gaps

This report has provided an overview of the 48 examined evaluations and impact studies, covering the effects of various interventions on girls' voice, agency and psychosocial wellbeing, child marriage, gender-based violence, girls' access to education, the development of their economic capabilities and girls' physical wellbeing. The largest number of assessed interventions have attempted to boost girls' school enrolment and attendance through the provision of cash and in-kind transfers. The next most evaluated interventions are programmes aiming to empower girls and change discriminatory norms, and in so doing tackle obstacles to adolescent girls' capability development. There is also a considerable number of studies assessing interventions that sought to improve adolescent girls' knowledge of sexual and reproductive health issues. The smallest number of impact studies address psychosocial wellbeing, reflecting the fact that this area has been little studied in relation to adolescent girls in Bangladesh.

The most common approach to changing discriminatory norms, socially empowering girls and enhancing their sexual and reproductive health knowledge is via short life skills training/gender awareness courses, often delivered through existing girls' or youth clubs, and in the case of sexual and reproductive health education, sometimes through schools. The majority of evaluations show positive change in adolescent knowledge and attitudes; there is less evidence on impact on child marriage rates, educational attendance or achievement, or actual health status. One reason for this is that studies that do examine impacts on indicators of wellbeing typically fail to disaggregate among age groups, and thus it is unclear whether there are different effects among adolescents and older age groups. In addition, although only about one third of the evaluations assessed impacts on girls' self-confidence or perceived ability to influence decisions, those that did generally found positive impacts. However, it should be noted that these are self-reported perceptions rather than evidence of actual changes in adolescent decision-making.

The evaluations of education programmes all focus on large scale initiatives to enhance adolescent girls' primary and secondary school enrolment and attendance. The achievements of these programmes are well-recognised; the examined evaluations point out some of the limitations and weaknesses in terms of capture by better-off groups, disincentives for investing in the education of disadvantaged boys, and limited attention to learning outcomes. On the other hand, evaluations of programmes to promote adolescent girls' economic capabilities rarely disaggregate among the age groups targeted; thus it is unclear whether certain approaches are more effective with younger or older girls, or whether these programmes are really targeting young women – who may nevertheless include some older married adolescents, given that marriage is a marker of adult status. These programmes typically show mixed results with some positive effects of vocational skills training with a strong labour-market orientation along with concerns about their overall effectiveness in enhancing older adolescents' access to decent work opportunities. In the case of microfinance, this is usually provided to older adolescents, and actually very few programmes target younger adolescents and provide them with basic financial education.

While the target of many evaluated programmes spans the whole adolescent age group, often the average participant's age in the evaluation studies is around 16. A few evaluations apparently collected agedisaggregated data of adolescent participants, and they accordingly disaggregate intervention outcomes. Only one evaluation reported that younger adolescents aged 12-14 were those who benefited more from an intervention to tackle child marriage. In particular, evidence about strategies to target and effectively work with adolescents aged 10-12 is apparently missing. Another gap is that only a few evaluations provide information about the dose and exposure to different intervention components, yet without comparing potential differential impacts in line with adolescent age group, socioeconomic status, residence or other variables.

The quality and rigour of the examined evaluations also varies considerably. Less than half (just 21) used methodologies generally considered rigorous; over half used mixed qualitative and quantitative methods.



Although qualitative components did not always provide deep insights, in the best cases they helped illuminate both the mechanisms by which impacts were achieved and the broader context of programme implementation. A few evaluations referred to fears that girl-focused development activities were a cover for religious conversion or trafficking, highlighting some significant challenges for programming of this kind, especially in conservative communities with strong religious beliefs. Other studies pointed out high rates of attrition where participating girls had married or moved away, and highlighted the fact that these may create an overly positive impression of programme impact.

Only five evaluations examined the relative effectiveness of different intervention strategies. Conducted at the beginning of the 2000s, one evaluation used a quasi-experimental design to assess the effectiveness of a three-pronged sexual and reproductive health intervention (Bhuiya et al. 2004; 2006). Likewise, another evaluation used a similar design with one control and two intervention groups (Haseen et al., 2004). More recently, three large scale programmes used a cluster randomised control research design to test the relative effectiveness of their components: the first two aimed to delay child marriage and empower girls (BALIKA and Kishoree Kontha), while the third (SAFE) focused on improving sexual and reproductive health and reducing intimate partner violence against adolescent girls and young women.

The majority of evaluations were conducted either at the end of or within two years of the end of the programme or after the girls sampled had graduated from the programme. This means that there is very little evidence on how far programme effects led to sustained changes in girls' later adolescence or adult lives. A few evaluations acknowledge the need to set up mechanisms that will enable graduates of norm change and empowerment programmes to maintain linkages with the programme and be able to access support at least for a few months after programme completion. However, no further information is provided. In addition, several studies note that effective norm change often requires more time than the short duration of most interventions which is simply not enough to transform them and translate measured attitude change into actual behavioural change, let alone ensure the sustainability of this change.



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## **Annex I: Bangladesh Interventions Table**

Programme name and details	Target group	Main activities	Impact evaluation and if so, methodology	Programme impacts
Voice, agency and psycho	social wellbeing inter	ventions		
Adolescent Peer Organised Network (APON) BRAC BRAC created reading centres/youth clubs in 1993 to help adolescent girls come together and retain their literacy skills after primary school. APON was incorporated into ADP as one of its main components to help adolescents reach their goals.	Underprivileged youth, graduates of BRAC non-formal schools, and other youth from very poor families or minority communities, and those who were divorced and wanted to maintain their literacy skills by reading books, magazines and newspapers. Overall, girls and boys aged 10- 19.	A 5-month course for members of BRAC's reading centres, providing knowledge and aiming to empower adolescent girls. Other persons interested in the course, including married adolescents, were also welcome. The course provided life skills training that would teach adolescents the facts about many taboo issues in traditional Bangladeshi society. The contents taught in the APON course can be classified into four broad categories: health, environment, legal, and social issues. Duration of each class was two hours and classes took place twice a week. Participants were encouraged to disseminate their learning among family members and other adolescents who did not participate in the course, sharing meetings were arranged once a month for the next 13 months.	An early impact study (Khan et al., 2003) used quantitative and qualitative methodology. Two hundred adolescent girls were interviewed through a structured questionnaire to measure their knowledge, attitudes and extent of knowledge dissemination. In addition, five FGDs were held with course participants and four with their mothers. In total, 46 adolescents and 39 mothers attended the FGDs. The second impact study (Kabir et al 2007) used a quantitative survey with 3,175 adolescents. Respondents were selected from APON course participants who had graduated between 2003 and 2005. In addition, the evaluation contained case studies - eight female and seven males. Comparative analysis was conducted against the 2005 Bangladesh Adolescent Survey.	APON participants had significantly better knowledge than non-participants on a range of social, legal, health and environmental issues. In addition, they disseminated their knowledge to others. They also showed significant attitude difference compared to non-participants in six out of the eight statements they were given, yet they continued thinking that household work is an exclusively female responsibility and that dowry should be given to the groom's family. The evaluation concluded that participants found difficulty applying their acquired knowledge into their daily life (Khan et al., 2003).



		APON classes for girls were held in the Reading Centres, while boys' APON classes in secondary schools.		
Adolescent Development Programme (ADP) BRAC BRAC started working with adolescents in 1990 and ADP came into existence in 1993 with the establishment of local reading centres, which later were renamed Kishori clubs. Since then it has incorporated several components. ADP is the main BRAC adolescent programme.	Adolescent girls and boys, 10-19 of age, and their communities.	Main activities include the adolescent clubs (Kishori Kendro), safe spaces where adolescent girls can read, socialise and discuss issues of interest; the Adolescent Peer Organized Network (APON) that provides life skills training; livelihood training; and communication, awareness and advocacy work through the engagement of parents and significant community members.	ADP has constantly been evaluated by the Research and Evaluation Division (RED) of BRAC. Kabir et al. (2007) assessed the programme using mixed methods with participants who had graduated between 2003 and 2005. Another mixed methods evaluation was conducted by Nawaz and Ahmed (2009). Finally, a third more recent impact study – again using mixed methodology – compared girls and boys in ADP intervention areas to assess their sexual and reproductive health knowledge and gender attitudes. This study focused on ADP clubs which were running for two years (Alim et al., 2012).	The first evaluation found that ADP enabled most adolescent participants to be more confident and express their opinions at home and in public spaces. Participants also reported being able to influence others and making decisions regarding their education, marriage and employment. Some of them were even able to successfully stand up against marriage decisions taken by their families. This study also found that all participating adolescents acquired a reasonable level of awareness around violence, harassment, rape and acid throwing. All indicated that they would seek legal assistance if such crimes occurred (Kabir et al., 2007). ADP provided rural adolescents with knowledge about key social and legal issues such as early marriage and dowry. Although all respondents in the study were aware of the negative impact of dowry, almost all believed that it is not a crime. Moreover, although all acquired good knowledge about sexual violence, 95% reported having no interest and courage to protest against it. The evaluation concluded that although ADP participants improved their awareness on social issues, they

were unwilling to act according to this knowledge (Nawaz and Ahmed, 2009). The third study also found that girls in ADP intervention areas had better knowledge of reproductive health, gender discrimination and child marriage issues compared to those in non-ADP areas; for example, 85% of adolescent



				girls in intervention sites reported that marriage before 18 years was 'early marriage' compared to 39% of girls in non-ADP areas. However, the majority of boys did not acquire a good understanding of gender issues; for example, they were unable to define what domestic violence is. Most participants also reported trying to disseminate their knowledge to family members, friends and neighbours and even attempting to convince them to stop negative practices. However, their knowledge was not easily turned into practice, and gender discrimination continued in their households, while participants failed to stop child marriage in most cases (Alim et al, 2012).
ADP in Border Regions BRAC Border ADP started in 2008 in communities in six districts (Jessore, Jamalpur, Chapainawabganj, Sylhet, Cox's Bazar and Dinajpur) in border areas where there were no NGO activities.	Adolescents aged 11- 19, along with their parents and communities.	Creation of adolescent clubs and provision of life skills training. Developing master trainers was a new activity under Border ADP. Audio-visual materials on HIV and AIDS, gender equality and girls' education were developed for the first time; these were not used in the conventional ADP.	A mainly quantitative evaluation by BRAC used two rounds of survey data on the same adolescents collected in 2008 (baseline) and 2010 (follow-up). The sample size for the baseline survey was 1,534 adolescents (767 girls and 767 boys). Of them, 616 were in the intervention group and 918 were in the control group. Of these, 797 were successfully revisited in 2010, of whom 352 were from intervention group and 445 were from the control group (Ara and Das, 2010).	The evaluation found that participants increased their awareness of social and legal issues such as gender equality, marriage and dowry while that of the control group remained almost the same. Respondents were also asked about gender equality and women's empowerment, with findings showing more gender egalitarian attitudes in the intervention group between baseline and endline. For example, 83% of programme participants believed that boys and girls should get equal priority in the family compared to 76% at baseline and 81% of the control group; fewer participants at endline thought that women could not earn income after having a child. There was also statistically significant evidence of an increase in mobility among adolescent girls in the intervention group (Ara and Das, 2010).
Employment and Livelihood for Adolescents (ELA)	Adolescents aged 14- 25.	Each ELA centre consisted of 30 participants who were provided with safe spaces, life skills and	A mixed methods BRAC evaluation compared data from the 2005 baseline with those	The evaluation found that participants were able to acquire skills that allowed them to establish some control over their lives, feel



BRAC BRAC started ELA in 2003. With funding from the Nike Foundation, ELA was scaled up and in 2005 ELA centres were created for the ELA microfinance group members. 10,600 ELA groups with more than 300,000 members.		livelihood training, and microfinance. Participants met weekly for 2-3 hours. Loans had to be repaid within one year. The programme also included community mobilisation.	from the follow-up survey in 2007 (Shahnaz and Karim, 2008).	confident and express their views, get involved in decision-making, and even refuse early marriage proposals as they developed high aspirations about marrying later, continuing their studies and getting good jobs. Participants also increased their mobility and their friends. The study pointed out that participating in ELA groups and establishing friendly relationships with peers created a sense of solidarity and trust among girls, enabled them to talk about their problems, relieved their stress and made them feel empowered (Shahnaz and Karim, 2008).
Social Network and Financial Literacy of Adolescents (SoFEA) BRAC BRAC integrated ADP and ELA features and created SoFEA with financial support from the Nike Foundation in 2009.	Rural adolescent girls, 11-21.	The programme provided clubs, life skills and livelihood training.	A qualitative assessment was carried out by BRAC and interviewed SoFEA club members along with family members, programme organisers and community members (Kamruzzaman et al., 2012).	The study found that participating girls improved their communication skills, increased their confidence, started voicing their opinions about family issues more freely, and felt more respected and valued overall. In particular, married girls reported that their husbands respected them more and allowed them to participate in family decisions. Girls also made new friends and participated more in various recreational activities provided by the SoFEA clubs (Kamruzzaman et al., 2012).
Tanisha - Improving Income and Advancing Social Identity of Rural Adolescent girls' project Implemented by Save the Children in the Barisal district between 2011-2013. Funded by DFID.	Rural adolescent girls, 12-19, belonging to extremely poor households.	Provision of safe spaces and peer education groups that met on a regular basis over at least two years. Groups provided sessions on financial literacy, business skills, savings and livelihood skills. Girls were also provided with income- generating activities. Peer groups were supported by Community Advocacy Councils (CACs), groups of adults who demonstrated enthusiasm for	One internal evaluation used mixed methods. There was a mid-term review in 2012 and a lesson learning review in early 2014. Data was collected in November 2013. 64 representative sample households were randomly selected from the baseline database to carry out the endline study (GoB et al., 2014).	Girls experienced an increase in self-esteem, confidence, mobility and voice. Although the situation of Tanisha beneficiary households improved in the areas of income, expenditure, sanitation, access to land, food security, household goods and number of jobs, it is unclear whether girls were able to realise all the acquired knowledge about their rights, and whether the income-generating and savings schemes empowered them economically. Women's empowerment was actually the only indicator that was extremely low. Despite the project focus on empowering girls, over one-



## Benefited 900 extremely poor adolescent girls.

girls' empowerment and an interest in supporting them in their economic and leadership endeavours. third of girl beneficiaries reported in the endline survey that they had no decisionmaking power at all within their families on purchase of land or when to have children (GoB et al., 2014).

#### Kishori Abhijan ('Adolescent girls' adventure')

Implemented by the Ministry of Women and Children Affairs and several local and international NGOs including BRAC, CMES, Bangladesh Shishu Academy and Save the Children Australia.

The project was funded by the European Union through a grant of 5.85 million euros.

The programme ran from 2001 to 2006; it was then extended until 2010.

Implemented in 27 mainly rural districts, it reached 550,000 girls and 50,000 boys. The majority were rural girls, aged 14-19, at secondary school, and vulnerable to child marriage. The programme also included rural girls aged 10-19, not attending school. Also, 50,000 boys were targeted. The programme offered alternatives to early marriage through girls' clubs, life skills training, and income-generating activities.

Using a peer-to-peer participatory education approach, sessions were based around different social issues, such as puberty, reproductive health, hygiene, child marriage, birth registration, dowry, HIV and AIDS, acid attack and divorce.

Amin and Suran (2005) assessed the programme. Their study combined a longitudinal quasiexperimental approach and qualitative methodology. The baseline survey was conducted in 2001 in 75 intervention and 15 control villages, with 6,000 randomly selected married and unmarried boys and girls between 13 and 22. In the 2003 follow-up survey 2,500 girls were re-interviewed, and 3 villages were selected randomly for an in-depth qualitative study. Researchers decided to match participants with nonparticipants who had similar characteristics – as programme participants tended to be younger, less likely to be married and had spent more time in school. Thus, out of the 445 participants included in the survey, 360 were matched with

More than 65,000 adolescents reported having discussed at least one of programme priority issues with family members and other adolescents. More than 40,000 parents knew about at least one programme priority issues, and 9,000 influential community members reported speaking out at a public event on at least one priority issues (EuropeAid, n.d.). Participating girls had more specific knowledge of their rights and health than nonparticipants

of their rights and health than nonparticipants. Researchers also found a substantial increase in participants' sense of self-worth, mobility and social connectedness, as these girls were more likely to report having friends in the same village and participating in social activities (Amin and Suran, 2005; Amin, 2011).

Heissler (2011) highlighted that the programme focus on adolescent girls as independent change agents, capable of making independent decisions contrasted with the reality and the important role of family and community members in girls' lives.



other adolescents in the same districts.

Kishoree Kontha ('Adolescent Girls Voices')

The programme started in 2007 by Save the Children USA and the Bangladesh Development Society with funding from the Nike Foundation.

It was implemented in rural communities in five subdistricts of Southern Bangladesh in the Barisal Division.

It targeted 42,244 girls aged 10–19 in 460 villages.

Rural adolescent girls, aged 10-19 in Southern Bangladesh. The programme offered four main packages: the basic package consisting of safe spaces and peer-led educational support and life skills training; the basic package and financial and livelihood training; cooking oil as an incentive for older girls aged 15-17 to remain unmarried until age 18; and all three components. The programme evaluation included a cluster RCT with four arms (basic package, oil incentive, both the training and the oil, and the control group) to test the relative effectiveness of different components along with a control group. The baseline survey took place in 2007, the midline in 2011 and the endline in 2015 (Field et al., 2016; Buchmann et al., 2017). Another quantitative impact study used the 58-item **Developmental Asset Profile** (DAP) to assess programme impact on girls' human and social assets (Scales et al., 2013).

The midline report included a number of individual indicators measuring girls' negotiating skills around marriage. Data shows that 73% of girls who received the full package said that they would negotiate with their parents if they were to receive a marriage proposal compared to 69% of girls who received the oil incentive, 67% of girls who only received training and 67% of those in the control group. Girls who received the incentive were 12.5 percentage points more likely to attend community events outside their village alone, indicating increased mobility (Field et al., 2016). Similarly, the first findings of the endline show that older girls aged 15-17 who were eligible for the incentive for at least two years were more likely to delay marriage and childbearing than any other group of girls (Buchmann et al., 2017).

This is the only evaluation that explicitly aimed to collect and assess programme impact on girls' mental health (Field et al., 2016). There are specific questions on mental health along with the use of DAP, a set of items from a USbased scale measuring 'internal strengths and external support'. Although the inclusion of such questions is important, the use of the particular generic questions and scales transferred from a different cultural context, raised concerns over how adequately they will



be able to capture subjective statements of life satisfaction and control over one's life in Bangladesh (White, 2015).

The study that used the DAP reported that within a period of just 6-9 months, there was an improvement of 28% in the developmental assets of adolescent girls who received the basic package, 19% for those who received the full package, and 16% for those who attended the livelihood training (Scales et al., 2013).

The evaluation found that BALIKA participants improved their gender awareness. For example, they were considerably more likely to agree that girls can say 'no' to arranged marriages, and to disagree that a woman should tolerate violence against women, compared to the girls in the control group. In particular, girls who received the livelihood training were 61% and 29% more likely to agree with these two statements respectively compared to the control group. Participants in all three interventions were also more likely to say that they had permission to go to the playground, and to play outdoor games with boys (Amin et al., 2016).

Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents (BALIKA)

The programme was implemented by the Population Council, Population Services and Training Center, Centre for International Development Issues Nijmegen, and mPower.

Funding was provided by the Embassy of the Kingdom of the Netherlands.

Between 2012 and 2016, it targeted girls in 96 communities in three districts – Khulna, Narail and Satkhira - in Southwest Bangladesh.

Adolescent girls aged 12-18.

The programme included three distinct intervention strategies: educational support, genderrights awareness training and livelihood training. It also included recruitment of local young women as mentors, provision of safe spaces and community mobilisation. Population Council evaluated the programme using a mixed methods methodology, including a four-arm randomised control trial (RCT) involving more than 9,000 girls. The RCT measured the impact of each intervention among all girls in the community and not just among those who participated in the programme (Amin et al., 2016).



Building Young Women's Leadership Through Sport (BYWLTS) programme BYWLTS ran between 2013 and 2015. It was funded by the Department for International Development (DFID) and implemented by Women Win and BRAC. It was part of BRAC's Adolescent Development Programme (ADP).	Adolescent girls at secondary school and wider community.	Provision of life skills sessions and sports, including karate, football and cricket, both at secondary school and community level. BYWLTS also engaged with the community through mothers' meetings, parents' meetings, community meetings, workshops, and events such as sports competitions and adolescent fairs. These activities aimed to challenge traditional stereotypes about girls' ability to participate in outdoor games and create a supportive environment for girls to play sports, increase their confidence and support them in becoming leaders.	An evaluation by BRAC used mixed methods. Data was collected through a questionnaire administered to a random sample of 46 respondents and key informant interviews. All respondents were parents or caregivers of girls participating in the programme, with the majority being mothers. The average respondent age was between 36 and 40 years (BRAC, 2016).	All parents/caregivers responded positively when asked if programme participation had had a positive effect on girls' confidence. Respondents also highlighted that BYWLTS instilled a sense of discipline and purpose in their daughters, who focused more on their studies, played a larger role in the family and started thinking about their future careers. When asked about whether their daughters were more capable of leading activities, all respondents gave a positive answer to this question, with 80% agreeing and 20% agreeing strongly. When asked if they themselves trusted their daughter more, all respondents gave positive answers, with 72% agreeing and 28% expressing strong agreement. When asked if the girls were trusted more by their peers, 89% agreed to this, and the remaining 11% strongly agreed. Moreover, all respondents noted that programme participants had become more aware of different health issues, increased their knowledge on violence against women and women's rights, and improved their financial literacy (BRAC, 2016).
Innovation through Sport: Promoting Leaders, Empowering Youth (ITSPLEY) ITSPLEY was run in Northeast Bangladesh between 2009 and 2011 with USAID funding. It was implemented by CARE	Adolescent girls and boys.	Used sports-based activities to enhance leadership skills and empower youth, especially girls. It also provided information about sexual and reproductive health, and sexual and gender- based violence. It also included community mobilisation to ensure an enabling environment.	An external evaluation was led by Eschenbacher (2011) and used mixed methods, including a quasi-experimental research design (Miske Witt and Associates, 2011).	Overall, the ITSPLEY programme in Bangladesh created many avenues for participation in leadership development. The level of engagement for girls was impressive at all three active sites. Both girls and boys who participated were able to improve their organisational skills and their ability to state opinions and make decisions about their own lives. The programme also helped them develop a clear vision about their

Bangladesh and built upon a

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previous Adolescent Reproductive and Sexual Health Initiative (ARSHI) in Sunamganj district. future through their involvement in sports and civic action (Miske Witt and Associates, 2011). Moreover, the programme positively affected the attitudes of boys and girls toward girls and women. For instance, 55% of boys in the control group agreed that 'if a woman insulted her husband, he has all the right to beat her', compared to 31% of boys in the intervention group. In addition, 51% of girls in the control group (45% boys) versus 91% girls in the intervention group (93% boys) agreed that 'women have the same right as men to work outside the house'. All participating boys said that 'girls have the same right to be educated'. Men and fathers also accepted more girls' opinions and allowed them to play sports or go out more (Miske Witt and Associates, 2011). Many participating girls also stated that they would like to engage in non-traditional professional roles as doctors, teachers, lawyers, police and professors. However, boys in general were noticed to be on the sidelines, literally and figuratively, in all active sites – and most of the statements related to men's roles indicated limited to no change in attitudes towards men. Girls and boys faced some problems in participating at first due to the views of community members, but by far the biggest barrier to participation was weather and transportation (Eschenbacher, 2011).

#### Gender Quality Action Learning (GQAL)

BRAC

in rural villages. Trainees were selected from ultra-poor households, moderately poor

Community members

The trainees worked as educators and conducted 7,200 courtyard meetings in their communities. Videos and popular theatre on genderThe mixed methods evaluation by Alim (2009) examined whether villagers' knowledge, perceptions and attitudes towards men and women and towards gender discrimination Almost half (47%) of respondents increased their knowledge about compulsory education and the legal age of marriage for men (51% of respondents). A slight increase was observed for all other issues, including inheritance law, voting age, punishment for dowry, divorce laws



GQAL began in 1994 as a BRAC staff-training programme. It expanded in 2011 to BRAC Village Organisations (VO) on a pilot basis. BRAC selected 10 upazilas (sub-districts) in 2 districts to implement GQAL in 2005 and 2006.

1,200 men and women were given GQAL training.

households, VOs, and union parishads (the lowest administrative

unit).

based violence and discrimination were also used.

and equality changed after the intervention. The study used individual household surveys, attitude scales, and in-depth interviews. Baseline data was collected in May 2005 and endline data in September 2006. and legal age for marriage of women. Women's knowledge increased more than men's. But knowledge remained unchanged for the vast majority of all participants. The reason was that most were already aware of these issues.

The intervention also changed some gendered attitudes. Son preference for the first child decreased significantly from 72% to 31%, and there was an increase of 50% in the number of respondents who believed education was important for both boys and girls. There was a 12% increase in respondents who felt that both the husband and the wife should be involved in decisions to purchase land, and a 16% increase regarding decision-making on the buying, selling and using of proceeds by the father-in-law.

However, perceptions changed negatively on the question of whether only the husband or only the wife should decide on buying livestock or domestic goods. Likewise, perceptions changed negatively on the question of who should decide on using proceeds from land.

Overall, the majority of respondents developed more positive gender attitudes (towards gender discrimination, women's empowerment and violence), while 15% of respondents developed more gender discriminatory attitudes and 14% maintained the same attitudes. Respondents justified these views through asserting gender norms, stereotypes, religion and division of labour. Perceptions on division of work, decision-making on household assets, female participation in social activities and violence against women did not change as expected. Men's perceptions changed less as they did not have as many opportunities to



Strengthening Household Ability to Respond to Development Opportunities (SHOUHARDO)

Rural and village households.

SHOUHARDO I ran from 2004 to 2010.

It had US\$126 million funding mostly from USAID with a 10% contribution from the Government of Bangladesh. It was implemented by CARE.

CARE began implementing SHOUHARDO II in June 2010 in four regions (the North Char, Mid-Char, Haor and Coastal areas), 11 districts, 30 upazilas (sub-districts) and 172 parashad unions. SHOUHARDO had a wide array of interventions, including projects on maternal and child health and nutrition, sanitation, homestead food production, income-generation, village savings and loans groups, institutional strengthening, and climate change adaptation. The empowerment strategies ranged from promotion of female entrepreneurship to selfhelp groups where women and girls could take on taboo subjects such as early marriage, dowry and violence against women. EKATA groups were particularly

EKATA groups were particularly central to SHOUHARDO's empowerment component (EKATA stands for Empowerment, Knowledge and Transformative Action and translates as 'unity'). These groups of 20 women and 10 adolescent girls got together regularly, analysing their own circumstances and generating solutions to the problems they faced. Girls learnt from women's A project document by CARE (2012) notes that there was an evaluation of the first SHOUHARDO programme, but this evaluation was not available online.

time due to such deep-rooted traditional values and beliefs (Alim, 2009). In SHOUHARDO I, participation, particularly in an EKATA group, was found to be positively linked to indicators of women's empowerment, including women's decision-making power, freedom of movement. freedom from patriarchal beliefs and women's likelihood of earning cash income (CARE, 2014). The score for women's decision-making power increased by far the most (41% in the North Char region), where EKATA meeting attendance was highest. SHOUHARDO II was also deemed successful as participating women and girls improved their awareness of rights, legal issues and available services. Participants also increased their mobility, involvement in productive activities, and their household decision-making power, including adolescent girls who insisted on finishing school instead of being forced to marry early as they knew that they had a legal right to do so and that their EKATA group would help them if necessary. However, dowry practices remained largely unchanged (CARE, 2014).

take part in community discussions due to travelling outside of the village for work. Given the short time that the project ran, there were positive results but changing overall perceptions and attitudes would take more



		life experience and women committed to protect girls.		
Meider Jonno Asha (ASHA) project for street girls Dhaka slums	Nine marginalised girls from Dhaka slums.	An eight-week project that provided nine girls from the slums with Western female mentors who became their role models in the work environment of a school.	One assessment by Sperandio (2008) used mixed methods, including girls' diaries, focus groups and interviews. The study focused on project empowering effects rather than skill acquisition.	The analysis showed that the empowerment aspect for the targeted girls focused largely on the mentors' sense of caring and involvement and the respect the girls were given at the school. The girls were slightly pessimistic, although realistic, regarding their chances of obtaining the qualifications needed to work in an environment like the school. The majority did see that the experience was very helpful as it inspired them to escape the cycle of poverty and make something of their lives (Sperandio, 2008).
Meena Communication Initiative (MCI) Began in 1991 with support from UNICEF offices in Bangladesh, India, Pakistan and Nepal. In Bangladesh, Meena partnered with BRAC. The most extensive implementation occurred in	Nationwide.	The MCI uses a multi-media entertainment education approach that involves the use of entertaining stories to convey educational and behavioural development messages to its audiences. The stories developed for the MCI revolve around the adventures of Meena, a nine- year-old South Asian girl and members of her family and village community.	An evaluation across all four countries (Chesterton, 2004), used a mix of quantitative and qualitative techniques. Quantitative data was gathered from children and adults through household surveys using structured interviews. Questionnaires were also used for UNICEF personnel at country and regional levels. Qualitative techniques included document analysis, FGDs, interviews, workshops and meetings.	The evaluation found that a considerable proportion of respondents, including children, adolescents and adults, exposed to Meena messages, believed that girls and boys must be treated equally and knew that it is illegal to marry early or that dowry is illegal, with adults scoring higher than children (Chesterton, 2004).
Bangladesh, involving a mass mobilization campaign of television, cinema and mobile film unit screenings, radio broadcasts, billboards and distribution of Meena			workshops and meetings.	

comic books to schools.



Screenings by mobile film units in rural and urban areas are estimated to have reached more than 3 million people.

#### Bodily autonomy, integrity and freedom from violence interventions

Kishori Abhijan ('Adolescent Girls Adventure')

Implemented in 27 rural districts by the Ministry of Women and Children Affairs and several local and international NGOs including BRAC, CMES, Bangladesh Shishu Academy and Save the Children Australia.

It started in 2001 and it was extended in 2006 until 2010.

It reached 550,000 girls and 50,000 boys.

Rural adolescent girls aged 14-19 at secondary school and vulnerable to child marriage. It also targeted out-of-school rural girls aged 10-19 and boys.

The programme aimed to increase girls' age of marriage, increase their school enrolment and retention, and encourage them to participate in independent economic activity. It thus provided vulnerable adolescents with clubs, life skills and livelihood training. The Population Council evaluated the intervention using mixed methodology and by matching programme participants with nonparticipants with similar characteristics in the same districts (Amin and Suran, 2005; Amin, 2011).

Most participants delayed marriage longer than their matched non-participants, yet findings were not statistically significant. However, findings were different when the evaluation team distinguished between matched and unmatched participants. Respondents who participated in the programme but could not be matched to a similar non-member in the study population tended to be younger (aged 12-14) and poorer girls living in the poorest district. Data showed that while matched participants did not delay marriage, unmatched participants waited significantly longer. However, the fact that the intervention did not have a dowry component limited its effectiveness, because the longer the respondents waited to marry, the higher the dowry they had to pay.

The evaluation also found that programme participation had other positive effects, with girls improving their sense of self-worth, social connectedness, mobility, health knowledge and employment. Thus researchers suggested that future programmes to delay marriage should focus on younger adolescents in the poorest families and districts of rural Bangladesh and specifically address the economic drivers of marriage, particularly dowry (Amin, 2011). Another study also pointed out that one major programme challenge was the need for



increased community engagement given that the wider community often influences marriage and dowry decisions (Heissler, 2011).

Kishoree Kontha ('Adolescent Girls Voices') programme The programme started in 2007 by Save the Children USA and the Bangladesh Development Society with funding from the Nike Foundation. The programme targeted rural adolescent girls in the Barisal Division in Southern Bangladesh. It targeted 42,244 girls in 460 villages.	Rural adolescent girls aged 10-19.	The programme provided four main packages: a basic package of safe spaces, educational support and life skills training; the basic package and additional financial and livelihood training; cooking oil to older girls aged 15-17 on condition that they remained unmarried until age 18; the full package with both training and oil.	The evaluation included a cluster RCT with four arms (basic package, the oil incentive, both the training and the incentive, and the control group). The baseline survey took place in 2007, the midline in 2011 and the endline in 2015 (Buchmann et al., 2017; Field et al., 2016).	Midline data showed that girls who received the incentive reduced the likelihood of being married by 7%, more than any other intervention group (Field et al., 2016). The first published study with endline data reported that overall girls who were eligible for the incentive were 23% less likely to be married under 18, while girls eligible for the incentive for at least two years were 25% less likely to do so; the likelihood of getting married under age 16 fell by 27% among girls eligible for the incentive and age 15 at distribution start. Available data also shows that the incentive reduced the likelihood of child marriage by 31% among girls in school, and by 6% among girls out of school at baseline. The incentive also reduced the likelihood of early childbearing (giving birth under 20) overall by 13% and by 16% among girls age 15 at distribution start. Finally, it also increased their likelihood of staying in school longer (at age 22-25) but only for those girls already in school at programme start. On the other hand, girls eligible for the empowerment training were only more likely to stay in school compared to the control group (Buchmann et al., 2017).
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents (BALIKA) Implemented by the	Adolescent girls aged 12-18.	The programme included three distinct interventions: educational support, gender- rights awareness training and livelihood training. The programme also included	A mixed methods evaluation included large scale surveys, qualitative research with FGDs, KIIs and IDIs, community assessments, and a four-arm RCT involving more than 9,000 girls. Girls in the first arm	BALIKA was successful in delaying child marriage: girls in communities with the educational support intervention were 31% less likely to be married as children compared to girls in the control communities; girls in communities with life skills training were also 21% less likely to be married as children
Population Council,		women as mentors, provision of	received tutoring in	compared to those in control communities; and



Population Services and Training Center, Centre for International Development Issues Nijmegen, and mPower. Between 2012 and 2016, it targeted girls in 96 communities in three districts – Khulna, Narail and Satkhira - in Southwest Bangladesh with the highest child marriage rates.		safe spaces and community mobilisation, and was influenced by previous interventions and their outcomes.	mathematics and English (in- school girls) or computing or financial skills training (out-of- school girls); girls in the second arm received life skills training, including information about gender rights and negotiation, critical thinking, and decision- making skills; girls in the third arm received training in computers, mobile phone servicing, photography, or entrepreneurship via mobile phone; and girls in the fourth arm were the control group with no services. The evaluation measured the impact of each intervention among all girls in the community and not just for those girls participating in the programme (Amin et al., 2016).	girls in communities with livelihood training were 23% less likely to do so compared to girls in the control communities. Age-differentiated data also shows that BALIKA was particularly successful in delaying marriage among those aged 16 and 17 years, and in the case of the education intervention among those under age 16. In addition, all girls who participated in BALIKA were more likely to be in school, access media and improve their sexual and reproductive health knowledge and access to services, and have more gender-equitable attitudes (Amin et al., 2016).
Adolescent Development Programme (ADP) BRAC started ADP in 1993. It is the main BRAC programme for adolescents.	Adolescent girls and boys aged 10-19.	Main activities include the adolescent clubs (Kishori Kendro), safe spaces where adolescent girls can read, socialise and discuss issues of interest; the Adolescent Peer Organized Network (APON) which provides life skills training; livelihood training; and communication, awareness and advocacy work through the engagement of parents and significant community members. The programme has explicitly aimed to improve awareness around child marriage through	A mixed methods BRAC evaluation (Alim et al., 2012).	The evaluation found that all adolescents as well as their parents in intervention sites had better knowledge compared to those in non- ADP areas. For example, 85% of adolescent girls in ADP areas reported that marriage before 18 is early marriage compared to 39% of girls in non-ADP areas. Participants – girls more than boys – were also able to identify the negative consequences child marriage has for girls. Moreover, most girl participants (72%) and peer leaders (96%) said that they took action against child marriage and dowry, such as talking to friends, explaining the negative consequences of the practice to a groom's parents, and protesting against early marriage. Yet these actions in most cases failed to stop



		its life skills training and awareness sessions among participating adolescents, their parents and communities.		the practice. In some cases, participating girls were unable to prevent their own early marriage, although they had the knowledge and shared it with their parents; dowry payments also continued (Alim et al, 2012).
Meyeder Janna Nirapad Nagorikatta (MEJNIN) ('Safe citizenship for girls and women') BRAC The programme started in August 2010 and ran as a pilot for 12 months in 57 schools in the municipality of Dhaka. BRAC has expanded the programme to several other districts.	School girls aged 11-17 and boys, parents, teachers and other community stakeholders.	The programme aimed to raise youth awareness and combat sexual harassment in public spaces. MEJNIN trainers held two hour orientations, which included a docudrama and discussion for all the girls at school. Then four or five girls from each grade became student leaders to serve on the School Watch Group, advocate to their peers, and refer problems that arose to the MEJNIN trainer. The School Watch Group coordinated with the Community Watch Group, Teacher Watch Groups and local authorities.	A quantitative evaluation by BRAC (Alim, 2013).	The evaluation found increased knowledge about sexual harassment in intervention areas compared to control areas: at the end of the programme, 82% of programme participants knew what sexual harassment was compared to 48% of respondents in control areas. Students in grade 10 generally proved to have higher scores in knowledge indicators compared to students in lower grades. There were also statistically significant changes in attitudes, with 40% of programme participants reporting appropriate attitudes compared to 33% in control areas. In terms of reporting sexual harassment, a higher percentage of programme participants reported to have experienced it at least once compared to those in control areas, a finding which the study attributes to the fact that participants were more open to express harassment. Respondents were also asked what measures they took when harassed, with slightly more respondents in control areas (45%) compared to programme areas (44%) stating that they did not take any measures nor protest as they thought that the situation might get worse; the majority said that they had discussed the problem with their mothers (Alim, 2013).
Growing Up Safe and Healthy (SAFE) Icddr,b	Girls and young women aged 10-29 and young men aged 18-35. It also targeted community leaders	The programme combined several prevention and service delivery strategies into an integrated approach that included access to legal and	The evaluation used qualitative and quantitative techniques, including an RCT with three arms that measured additional benefits of group sessions for	Married adolescents reported a reduction in physical and/or sexual violence by 9%-20% in communities where both young women and men received group sessions. In addition, the severity of such violence was also reduced
	contrainty reducts		Serverite of Broup sessions for	serving of such hereitee was also reduced.



Overall, arm A showed the largest reduction in

Implemented between 2012 and 2013 with funding from the Embassy of the Kingdom of the Netherlands. Targeted nearly 17,000 men, women and girls living in 19 slums.	stakeholders such as police and NGO staff.	sessions with girls, young women and men; and community mobilisation over a 20-month period.	included community mobilisation and service provision, but arm A also included sessions with separate male and female groups, arm B included sessions with female groups, and arm C did not include any group sessions. The evaluation analysed programme impact on spousal violence against girls and women and on their help-seeking behaviour. Only married women living with their spouses during the previous 12 months were included but separate analyses were performed for married adolescents (15-19 years) and married young women (20-29 years) (Naved and Amin, 2014).	physical and/or sexual violence and the severity of it. However, economic violence against adolescent girls (that is, the stealing or withholding of economic resources or wives being prevented from earning or being thrown out of the house), increased by 10 percentage points in arm B where only females were offered group sessions, contrary to arm A where spousal economic violence against married girls declined by 8.1 percentage points. Although help-seeking rates remained low, a higher proportion of survivors sought help, particularly from informal sources, at endline in arm A. In the other two arms, changes were statistically insignificant. Qualitative data indicate that help-seeking from formal sources was low due to fear of marriage breakdown or retaliation, lack of trust, and inability to deal with these sources or bear the costs. Overall, SAFE benefited married adolescent girls as it reduced spousal violence more among them than among married young women. This may be related to the fact that their husbands were also younger and more educated than the husbands of the young women in the sample. The RCT showed that spousal violence against girls was reduced in arm B, but even more so in arm A which also included male group awareness sessions, thus providing evidence of the critical importance of engaging men too (Naved and Amin, 2014).
Raising the Age of Marriage for Young Girls in Bangladesh Pathfinder	The project targeted the neediest girls.	The three aspects of the programme — primary and secondary school support, advocacy, and vocational training — were combined to	Two project overviews were found with some discussion of impacts: Burket et al. (2006) and Girls Not Brides (2013).	Reports showed that 84% of grade-six girls who had passed their examinations, enrolled in grade 7 in 2005. Of that same group of girls, 85% who passed their December 2005 examinations enrolled in grade 8 in 2006.

health services; interactive

and various

women and men. Thus all arms



The three-year project was launched in July 2003 with support from an anonymous donor and closed at the end of June 2006. It reached 4,092 girls in grades 3 through 6 in 274 schools in five upazilas (sub- districts) of Kishoreganj, one of the poorest areas of Bangladesh.		help girls overcome the hurdles that prevented them from finishing school, finding employment, and delaying marriage until they felt ready.	Girls said that they became aware of the risks of child marriage from the advocacy meetings, and most expressed the wish to wait until they were 20 to marry. None wished to get married before the age of 18. Though attitudes toward girls' education were changing and enrolment rates were high, the need for financial assistance was still acute. Every student, parent, teacher, headmaster, religious leader and government official interviewed, requested that the scholarship programme be continued and extended through grade 10.
Tipping Point CARE with support from the Kendeda Fund, and in partnership with Siddhartha Samudayik Samaj, the Dalit Social Development Center, JASHIS, and the Association for Slum Dwellers. 90 villages of Bangladesh.	Adolescent girls and boys; parents; community and religious leaders; national networks of social activists and experts; and government agencies.	The programme works with adolescents and various stakeholders to delay marriage and change related gender norms.	
Girl Power: Promoting Equal Rights and Opportunities for Girls and Young Women Plan 2011-2015 Eight districts.	Adolescent girls and their communities.	The project aimed to build girls' skills and strengthen civil society to ensure girls' rights and prevent violence against them. It thus provided life skills training and martial arts classes to girls and also included community activities with drama performances and awareness raising on child protection and rights. The programme also	A mid-term review found that participants reported increased ability to say no to sexual activity, from 24% of girls in 2011 to almost 100% in 2013; some respondents also reported lower incidence of physical abuse by teachers, or by husbands related to dowry demands; girls' knowledge of how to act in case of violence also improved, with 88% of those aged 14-17 knowing what to do. Community members were also less supportive of child beating by parents or teachers. The programme



management of forums for girls and young women, trained government officials, and supported 1,002 civil society organisations, grassroots activists and media professionals. advocacy workshops for stakeholders after which government officials agreed to distribute a list of authorised marriage registrars to reduce the number of fake ones (Plan, 2014).

#### **Education and learning interventions**

Food for Education (FFE) Programme

FFE was implemented between 1993 and 2002 by the Government of Bangladesh (GoB).

It targeted poor households in two to three 'economically backwards' unions (districts) with low literacy rates selected from each of the 460 thanas (rural regions). Poor households with primary school-age children living in selected areas. on condition that they met at least 1 of 4 targeting criteria: be landless or own less than half an acre of land: household head was a day labourer or female; had a lowincome profession; and did not participate in any major social protection programme. All eligible children in a household could benefit from the programme.

A free monthly ration of rice or wheat was provided to poor families on condition that their children were enrolled in any type of primary school (all types participated in the programme) and attended 85% of classes in a month.

Participating households received up to a free ration of 20 kilos of wheat or 16 kilos of rice per month. Recipients could either consume the grain or sell it and use the cash to meet expenses. The IFPRI-led quantitative evaluation study by Ahmed and del Ninno (2002) used data from IFPRI surveys and achievement test scores.

In 2000, IFPRI collected primary data from multiple surveys covering primary schools with and without the FFE programme, households with programme beneficiaries and nonbeneficiaries, communities, and food grain dealers (as part of the **IFPRI - Food Management and** Research Support Project). IFPRI also used a standard achievement test administered to students in FFE and non-FFE schools to assess the quality of provided education - tests included three subjects: Bangla, English and mathematics. The sample included 600 households in 60 villages in 30 unions in 10 thanas, and 110 schools in the same 30 unions from which the household sample was drawn. The

In 2002, FFE covered 27% of all primary schools in the country. FFE beneficiary students accounted for about 13% (2.1 million) of all students in primary schools.

Within the first year of FFE implementation, school surveys showed that student enrolment in FFE schools increased by 35% per school.

Ahmed and del Ninno (2002) found that FFE increased primary school enrolment – girls' enrolment increased by 44% and boys' by 28%, while in non-FFE government primary schools it increased only 5% and 0.1% respectively within the first year of FFE implementation. Attendance in FFE schools was 70% compared to 58% in non-FFE schools.

The average size of FFE schools was found to be about 27% larger than that of non-FFE schools. About half of students were girls. FFE schools had, on average, 76 students per teacher compared to 62 students in non-FFE schools. Thus increased enrolment and attendance led to crowded FFE classrooms. Average test scores were lower in FFE schools, and in FFE schools average scores of FFE beneficiary students were less than that of non-beneficiary students due to their relatively lower socioeconomic status. Non-beneficiaries in FFE schools scored about the same as students in non-FFE schools.


academic achievement tests were given to 3,369 students enrolled in both FFE and non-FFE schools. These tests were also given to children in the sample households during the household survey to correlate test scores with household characteristics.

IFPRI chaired the working group commissioned by the government to review the options for developing food programmes that would reach the neediest people in a costeffective manner. It was this group that introduced the concept of the FFE. In 2000, IFPRI evaluated the programme to find the extent to which its goals were met. Ahmed and del Ninno (2002) examined education outcomes and increased indicators over the two-year period from one year prior to programme introduction to one year after programme implementation.

Ahmed and Arends-Kuenning (2003) used a multivariate analysis to assess whether classrooms crowded due to FFE reduced the quality of education. They used the same IFPRI 2000 data from school and household surveys to assess whether classroom crowding or

Thus larger class size did not lead to lower test scores. Students in government schools performed better in the test than those in nongovernment schools - both FFE and non-FFE due to better facilities, gualified teachers and better teacher incentives. Boys consistently outperformed girls in achievement tests. This study also assessed targeting effectiveness and found that the programme effectively targeted poor households. However, a considerable number of such households were also excluded while many non-poor were included – about 63% of those in the poorest quintile were beneficiaries along with about one third of those in the richest quintile. Many extremely poor households continued not sending their children to school as the opportunity costs were higher than the expected income transfer from FFE. For others. the transfer was not enough to cover minimum clothing and supplies necessary to send children to school. In general, the multivariate analysis suggested that the availability of FFE increased the likelihood of a child going to school by 8.4% in 2000. It also found that FFE beneficiaries consumed 10% more calories. The study also investigated the efficiency of the distribution system through private dealers and found that it was not satisfactory, as households had difficulty getting their free and full ration (Ahmed and del Ninno, 2002). The Ahmed and Arends-Kuenning (2003) study

noted that there was much concern that relatively crowded classrooms in FFE schools could cause the quality of education to deteriorate. However, this study found that class size had no effect on student



the lower level of the FFE children (peer effect) affected test scores of non-FFE students in FFE schools.

Based on the same 2000 survey data, Meng and Ryan (2010) used propensity score matching combined with difference-indifferences methodologies to evaluate the FFE effects on school participation and duration of schooling. As a control group, they used children who would have been eligible had they lived in regions where the FFE programme was introduced rather than those who did not receive the treatment.

achievement. Students who did not receive FFE benefits, but went to an FFE school had significantly higher achievement test scores than students who did not attend FFE schools. The net impact of the FFE programme was to increase school achievement test scores of non-beneficiaries from 10.4 points to 12.9 points (23%). Thus there were benefits to non-FFE beneficiaries from being in an FFE school because FFE schools had to meet certain minimum educational quality standards to maintain FFE eligibility. For example, in FFE schools, at least 10% of grade 5 students had to gualify for the national annual scholarship examination. These benefits to non-FFE beneficiaries outweighed the negative peer effects up to a point. The learning performance of non-FFE students in FFE schools was negatively affected when an average of 44% of students in class were FFE beneficiaries. The researchers pointed out that this was probably due to teachers going more slowly to accommodate poorly performing FFE students coming from poor families who tend not to help their children in their studies at home or cannot afford study materials. Poor children also suffer from malnutrition, which affects their learning. When the percentage of students receiving the FFE programme increased by ten percentage points from 44% to 54%, the predicted test score fell from 12.9 points to 11.9 points. After 69%, the benefits derived from minimum performance standards, vanished.

The Meng and Ryan (2010) study found that eligible children on average had 15% to 26% higher school participation rates compared to children who would have been eligible for the



programme had they lived in FFE-eligible areas. They also stayed at school 0.7 to 1.05 years longer than the latter. FFE eligibility had a larger effect on girls than boys, indicating that had there been no FFE programme, boys of poor households would have been sent to school anyway and thus FFE provided incentives to parents to send their daughters to school.

School Feeding Program (SFP)

It started in 2002 by the government and WFP in chronically food-insecure areas.

One million children in approximately 6,000 primary schools in highly food-insecure rural areas and in four slum areas in Dhaka city – the only intervention covering urban areas at that time. A mid-morning snack consisting of eight fortified wheat biscuits, providing 300 kilocalories and 75% of the recommended daily allowance of vitamins and minerals.

Each student entitled to one packet of biscuits for each day of school attendance.

## IFPRI conducted a comprehensive

quantitative evaluation of the impact of SFP based on a number of surveys at the household, school and community levels in addition to achievement tests for schoolchildren, all carried out in late 2003 (Ahmed, 2004). The surveys gathered information on a broad range of issues relating to educational attainment, food consumption, and nutritional status. Special attention was given to the collection of sex-disaggregated data. These surveys were designed by IFPRI and carried out by a Bangladeshi consulting firm.

A baseline study for the SFP was also conducted in 2002 by Tufts University. IFPRI surveys were conducted in the same areas with the baseline. In 2003, the SFP benefited 1.2 million primary school children in 6,126 schools in 9 districts. Most came from very poor families.

The IFPRI evaluation found that SFP raised school enrolment by 14%, reduced the probability of dropping out of school by 7.5%, and increased school attendance by about 1.3 days a month. Net enrolment in slum areas was 50% for girls and 44% for boys compared to 46% and 36% respectively in the control group. In rural areas it was 70% for girls and 69% for boys compared to 60% and 56% respectively in the control group. Almost 42% of girls and 56% of boys from slum areas who participated completed primary school as well as 72% of girls and 71% of boys from rural areas. Children in urban slums attended school 1.5 fewer days per month and were 23% more likely to drop out of school than children in rural areas.

SFP also improved children's diets, because aside from rice, SFP biscuits were the most important source of energy, protein and iron in the diet of programme participants. Average energy intake of participating students was 11% and 19% higher in rural and urban slum areas respectively than energy intake of primary school students in control areas. In the



This study used household survey data from SFP beneficiary and non-beneficiary (control) households, and school survey data from SFP and non-SFP (control) schools (Ahmed, 2004). household survey, 82% of mothers reported that the SFP increased their child's concentration on studying; 86% said that their child showed more interest in attending school than before; 88% that their child was livelier and happier than before; and 78% that incidence of child illness declined.

SFP also improved child nutritional status, but children in urban slums had lower nutritional status than children in rural areas. No sexdisaggregated data is available on these changes.

SFP also improved academic performance as test scores increased by 16 percentage points. Participating students did especially well in maths. Girls had better scores when there were separate toilets in school. Overall, boys performed better than girls. Students from urban slums did better in achievement tests than students from rural areas, probably due to the difference in quality between urban and rural primary schools (Ahmed, 2004).

# Primary Education Stipend programme (PESP/PES)

PES was introduced in 2002 by the government in all rural areas and replaced the FFE Poor rural families on condition that they send their children to primary school and that they attend 85% of the time. There are 5 eligibility criteria: the 4 criteria of FFE and the criterion of a household deriving its income from sharecropping. A stipend of 100 Bangladeshi Taka (BDT) per month for one child (about US\$1.70) and BDT 125 per month for more than one child.

The stipend was disbursed to the student' parents or legal guardians on presentation of bank-issued identity cards.

Based on data from a longitudinal study for 2000 to 2006, Baulch (2010) used covariate and propensity score matching and difference-indifferences methods to evaluate PESP impact on school enrolment, household expenditures, calorie consumption, and protein consumption. His study was part of a DFID-ESRC funded project 'What Development Interventions Work? The Longterm Impact of Anti-poverty At its peak, PES was running in 1,255 unions covering 27% of the country. Between 2002 and 2007, it benefited 5.5 million children.

The evaluation by Baulch (2010) found that PSEP had negligible impacts for a programme of its size in terms of improving primary school enrolments, household expenditures, and calorie or protein consumption. It had a negative impact on grade progression, especially among boys from poor households (twice that among girls) that were ineligible to receive the secondary school stipends. When boys reached the age of 11 or 12, they also had more employment opportunities in rural areas than girls. Yet PESP led to improvements in



Interventions in Bangladesh', led by IFPRI. The data comes from a small scale three-wave panel survey of 511 households in 8 sub-districts in rural Bangladesh, in which the same households were interviewed in 2000, 2003 and 2006 for IFPRI.

IFPRI was commissioned by the Partnership for Sustainable Strategies on Girls' Education to conduct an assessment of the two Bangladeshi CCTs and assess their differential impacts on girls and boys, and poorer and richer groups. Ahmed and Sharmeen (2004) used mixed methods. They combined quantitative data from school, household and community surveys with qualitative semi-structured interviews and FGDs with parents, teachers, students and project officers in 2003. They also included data from academic achievement test scores administered to 1,105 students attending the sample primary schools.

Ullah (2013) used propensity score matching (PSM), double difference (DD), standard logistic and ordered probit regression on two waves of Household Income and Expenditure Survey (HIES) data of Bangladesh – 2005 and 2010 – to investigate height for age among girls and body mass index among boys. Overall, its impact was small due to poor targeting, limited coverage, lack of geographical targeting and declining stipend value.

Ahmed and Sharmeen (2004) found a very large degree of variation in enrolment levels with gross enrolment rates ranging from 89% to 140% in primary schools. With 74% of both boys and girls entering primary school and completing it, the overall primary school dropout rate was 26%. However, enrolment and completion rates were much lower for children from poor households than those for children from wealthier households. The results also show that late entry into school reduced the rate of completion. Poor children had lower rates of the proper-age enrolment and primary school completion than their richer counterparts. Targeting of PESP was not satisfactory with large errors of exclusion (leaving out those who were needy) and inclusion (including those who did not need it). Despite the negative impacts on boys' attendance, boys outperformed girls in achievement tests.

Ullah (2013) notes that the PSP targeted 40% of rural poor children and in 2005 benefited more than 4 million students. The study finds that overall enrolment rate increased by only 1.9 percentage points between 2005 and 2010. Changes in enrolment rate for boys and girls were 0.1 and 3.6 percentage point respectively. The enrolment rate of the poor increased by 1 percentage point while the enrolment rate of the non-poor improved by 1.7 percentage points. The enrolment rate of the bottom two



			programme impact on enrolment, poverty and child labour.	quintiles increased by 3 percentage points, while the share of the top three quintiles increased by 10.4 percentage points. PSP targeting was weak. While the PSP target was to reach 40% of poor children, overall participation was 24% in 2005 and 26% in 2010. Only 59% of beneficiaries were poor in 2005 and 45% in 2010. Only 53% of the total beneficiaries came from the bottom two quintiles. In addition, girls benefited around 10% more than boys. Overall, PSP helped to increase the enrolment rate of the poor group by nearly 10% more than for the non-poor group. In 2010 the stipend amount only covered 55% of school expenses. Parents spent around 15% less for girls than what they spent on boys. Household head age, parental education, having a phone connection, area of household land and involvement in child labour were some of the factors found to be significant for primary school enrolment.
Female Secondary School Stipend Programme (FSSSP)	Girls of secondary- school-age in rural areas.	The project includes payment of tuition, fees and a monthly stipend to rural girls.	The World Bank conducted a mid-term review and suggested that the programme was	By 1998, the programme was implemented in 98% of all rural secondary schools with girls. In 2000, the programme received a World Bank
It was implemented in all rural areas in 1994.	More recently the programme also	The girl's school is directly paid all of her tuition.	increasing girls' enrolment. Khandker et al. (2003) used two	gold medal for excellence. In 2005, almost 2.3 million girls were enrolled.
A small pilot, the first form of what later became known as the female secondary school stipend programme was first launched in 1982 by a Bangladeshi NGO, the Bangladesh Association for Community Education (BACE), supported by USAID and the Asia Foundation. In	disadvantaged boys.	The girl receives the stipend on condition that: she attends 75% of secondary school days; achieves a 45% pass mark in annual exams; and remains unmarried until sitting the Secondary School Certificate (SSC) exams or turning 18. The stipend is expected to cover up to 50% of direct school costs	econometric analysis to estimate the effects of this stipend programme on school enrolment. The first was the World Bank database with data for FSSAP schools by grade and sex since the stipend programme was introduced in 1994. It includes data from two household surveys. The 1991/92	that the programme increased girls' secondary education significantly, but had no effect on the education of boys. It actually reduced boys' enrolment in co-educational secondary schools. On average, one additional year of programme exposure increased female enrolment rate by 8%, and reduced male enrolment rate by 29%. An additional year of future programme exposure until graduation increased girls' secondary level enrolment by 3.4%. The study



1992, Norad took over its funding and extended it to a few more areas. In 1994, the nation-wide FSSSP was launched, funded by Norad, the World Bank, GoB and ADB.

In fact, there were four separate projects covering different districts with donor support: Female Secondary School Assistance Project (FSSAP) funded by World Bank; Female Secondary Stipend Project (FSSP) funded by the GoB; Secondary Education Development Project (SEDP) funded by ADB; and Female Secondary Education Project (FSEP) funded by Norad.

In 2002, the GoB extended the programme to include higher secondary education. (textbooks, uniforms, transportation, exam fees). The FSSSP has provided BDT 300 per year in grade 6 up to BDT 720 in grade 10. The stipend is paid directly to an account in the girl's name in the nearest Agrani Bank, a state agricultural bank with branches all over rural Bangladesh. The ratio of stipend levels to average income is low. Girls receive additional payments of BDT 250 in grade 9 for new books and in grade 10 for exam fees.

survey covered roughly 1,800 households from 87 villages in 29 thanas. The school-level survey was simultaneously administered covering the 687 primary, secondary and postsecondary schools attended by members of surveyed households. In 1998/99, a follow-up survey of the same set of households and schools was conducted. The second dataset contained published government statistics on nationwide school enrolment, collected by the Ministry of Education.

Ahmed and Sharmeen (2004), as part of an IFPRI study to assess PESP and FSSAP's differential impacts on girls and boys and poorer and richer groups, used data from quantitative surveys, qualitative data from semistructured interviews and FGDs, and achievement test scores from nine students. Using data from the 2000 Household Income and Expenditure Survey (HIES). Asadullah and Chaudhury (2006) examined the programme impact on reversing the gender gap in secondary education in favour of girls. As the programme was not implemented in metropolitan

also found that the girls who benefited most were those from households with larger quantities of owned land. There was no effect on boy's school enrolment of stipend duration or its interaction with land.

Ahmed and Sharmeen (2004) estimated that gross enrolment rate ranged from 21% to 77% in secondary schools. While enrolment rates were considerably higher for girls than for boys, overall enrolment rates were still low for girls and very low for boys at this level of education. This was probably due to widespread poverty and long distance to secondary schools — the average distance from home to a secondary school was almost three times the average distance to a primary school. Distance to school particularly affected girls. Girls who failed in the SSC exam typically dropped out from repeating grade 10 and the qualitative research found that most parents got their dropped-out daughters married at the age of 15 or 16. Performance in achievement test was extremely poor, but boys outperformed girls. Girls from relatively affluent families were overrepresented among stipend beneficiaries. Yet FSSAP performed better than the other three female secondary school stipend projects: it performed better in reaching the poor since it was implemented in areas with high poverty levels; dropout rates for both boys and girls were lower in FSSAP schools; and quality of education was better in FSSAP schools as students scored higher in achievement tests.

The study by Asadullah and Chaudhury (2006) identified a reverse gender gap in secondary education with boys aged 11-17 years lagging



parts of urban areas, they compare outcomes by gender across urban metropolitan and non-metropolitan areas (thus having a control and a treatment group) to estimate the programme's impact on the gender gap in schooling and child labour outcomes for the urban population. Their sample included 3,088 urban and 6,959 rural children aged 6-17. A later study by the two authors (Asadullah and Chaudhury, 2009) used three rounds of nationally representative

(Asadullah and Chaudhury, 2009) used three rounds of nationally representative household survey data —the Household Expenditure Survey (HIES) conducted during the years 1995, 2000 and 2005, to investigate stipend effects on girls' and boys' enrolment, completion and child labour across rural and urban (metropolitan and nonmetropolitan/peri-urban) areas. They are cautious to point out that 'it is almost impossible to adequately evaluate the causal impact of FSS scheme' as there is no randomisation or a properly defined control and treatment group with baseline and followup data due to the rapid scalingup of the programme nationwide.

behind girls in urban areas in terms of enrolment status and years of schooling completed as was the case in rural areas. However, boys in metropolitan areas not exposed to the stipend programme did better in school. Girls' enrolment rate and years of education completed were systematically higher in the treatment area. Girls also had a significantly smaller probability of child labour suggesting that households responded to the stipend programme not by just enrolling girls in school but also by withdrawing them from paid employment.

Asadullah and Chaudhury (2009) found that in terms of enrolment status and years of schooling completed, boys lagged behind girls in rural and urban non-metropolitan areas in the 2000 and 2005 data contrary to pre-2000 data. In the sample, boys completed significantly fewer grades, had a lower enrolment rate, and were more likely to engage in child labour. Girls' enrolment rates and years of education completed were systematically higher in the non-metropolitan area compared to the metropolitan area. No evidence of a gender gap was found for primary school-aged children. Within the urban sample, boys lagged behind girls only in the non-metropolitan area, where the programme was implemented. Boys were also more likely to be in employment in these areas. The gender gap was evident for cohorts of secondary school-age children more exposed to the programme; and it was particularly pronounced among poor households. Poor girls significantly increased their enrolment during the first decade of the stipend programme, but enrolment levels for poor boys remained stagnant. The female-to-



Arends-Kuenning and Amin (2004) investigated the impact of school incentive programmes on children's time allocation. They used time-use data collected from a sample of 240 households in two Bangladeshi villages in 1992, 1995, and 1996; in-depth interviews conducted in 1995; responses to two village censuses collected in 1992 and 1995: and data from an education survey conducted in 1996. Children in these two villages were exposed to the FFE, the FSSSP and the opening of BRAC schools which allocated 70% of places to girls. Based on already published literature (including FSSSP study evaluations) and data, Schurmann (2009) used a social exclusion framework and Sen's capabilities approach to examine the extent to which the stipend affected girls' capabilities and social participation. She stressed that the programme lacks rigorous data. Her paper was funded by WHO as part of the Social Exclusion Knowledge Network, which is a component of the WHO Commission on the Social Determinants of Health. Raynor and Esson (2006) prepared a desk (secondary) study reviewing already

male ratio among the poor reached 125% in 2005 from 80% in mid-1990s. The authors argued that female enrolment may have been increased not only because the programme brought more girls to school, but also in an unintended way: cutting back participation of boys in secondary school. The study also stressed that despite the gender gap reverse, girls had lower pass-rates in SSC exams compared to boys.

The study by Arends-Kuenning and Amin (2004) stressed that as a result of all 3 programmes, school enrolment for girls and poor young boys increased dramatically. Children also spent more time in schooling activities in 1995 and 1996 than they did in 1992. While both the FFE and FSSSP increased the average hours children spent on schooling activities, the FFE appeared to have an especially strong impact on boys aged 6–10, while the FSSSP had such an impact on girls aged 11–19. Boys aged 11–19 showed the smallest increases in the amount of time spent in school and studying. The study suggested that parents sent their daughters to secondary school, because the stipend covered school expenses and the opportunity costs of time were higher for boys than for girls. Adolescent boys increased the amount of time that they spent in wage work. While boys were involved in agricultural and wage labour, girls were more involved in domestic work. Children benefiting from these programmes spent less time doing work. Girls aged 6-10 increased their time spent in school by 1 hour and 21 minutes between 1992 and 1995, and did not significantly decrease their time spent in housework. Marital status was the principal determinant of how adolescent girls spent their



published material on the FSSSP for the Bangladesh Office of DFID to evaluate programme effects. They also stress the need for rigorous evaluation studies that look beyond access - only one reviewed publication found a tracer study. There were many studies assessing isolated aspects of the FSSSP but they do not reveal the whole picture. Heath and Mobarak (2012) used a triple difference estimation strategy and data on school enrolment and factory growth in rural Bangladesh to analyse the effects of the growth of the garment industry on girls' enrolment between 1983 and 2000. The data come from a survey of 1,395 households conducted by the authors in 60 villages in 4 sub-districts. They also repeat that given the FSSSP focus and the fact that the dramatic increase in girls' secondary school enrolment has been attributed to it, a rigorous evaluation of the programme with control groups is important but missing with most studies so far based on descriptive statistics and not controlling for the effects of economic changes (e.g. trade or industrial policy) or other programmes.

time. The decrease in time spent on housework was greater for unmarried girls than married girls, so the difference between the two groups increased.

Schurmann (2009) argues that the programme is only a partial success. She examines the project objectives and how they evolved. Initially the programme was part of a broader effort to control population growth. She also examines how and to what extent the programme overcame key barriers to girls' secondary education. Empowerment of girls was not an explicit objective of the programme, and no such indicator was included to assess this construct. This is due in part to the difficulty of defining and measuring empowerment. The programme put emphasis on quantitative targets such as enrolment and pass rates, but neglected issues of education quality. Failure in SSC exams was high with the majority of students failing and the pass rate only slowly improving. Analysis of the available 2005 SSC data shows that girls accounted for 46% of those who entered and less than 44% of those who passed. In addition, the school curriculum did not prepare girls for employment or provide life skills that could empower them. However, it increased girls' networks and social capital. According to some evidence, the programme may have improved parental perception of the value of girls but this perception was largely based on the stipend provided and not the independent value of girls themselves. Although it is argued by involved donors that the FSSSP reduced child marriage significantly, DHS data did not show such a change. Qualitative data showed that the stipend affected parental decision-making



Shamsuddin (2013) studied the FSSSP effects on women's educational outcomes and economic empowerment using a difference-in-differences estimation method and a regression discontinuity approach. The data used is derived from combining 4 guinguennial Household Income and Expenditure Surveys (HIES) from 1995 to 2010. The combined dataset contains 71,942 females aged 25 to 50, between 1995 and 2010. Hahn et al. (2015) examined the long-term effects of the stipend programme on education, marriage and fertility outcomes. They use the Bangladesh Demographic and Health Surveys (BDHS) data for the years 2004, 2007, and 2011 and limit their sample to females who were ever married and were aged 6-23 when the FSSSP was first introduced in the 1990s. They compare rural girls who missed the stipend programme marginally to those who received it because they met the cut-off age. They use a difference-in-difference method exploiting the geographic concentration and the introduction timing of the programme

about when to marry their daughters. In terms of addressing poverty as a barrier to girls' education, as the previous evaluation found, girls from families with more land appear to benefit more. Thus the FSSSP appears to have benefited families who could already afford to support their children, not the poorest, since the stipend only covered part of school expenses. Girls' enrolment did increase and surpassed that of boys. However, there is no accurate data to measure the specific impact of the FSSSP on enrolment as it was implemented among other interventions to increase girls' enrolment. In addition, apart from enrolment there is not enough evidence on how long girls remain in school. Schurmann thus concludes that the FSSSP has done little to increase girls' capabilities and transform their lives. Raynor and Esson (2006) examined the

evolution of FSSSP and its objectives. Its objectives shifted in line with changes in the social/political environment and development policies and priorities. Initially the key objective was higher secondary enrolment and retention, indirectly linked to fertility control, delayed marriage and population reduction. Objectives changed in the 1990s to include employment and contribution to family income, thus the main issue was again delayed marriage and reduced fertility. Moreover, higher status acquired through education and income was linked to more decision-making which could lower fertility. The term 'empowerment' appears much later in programme documents as a low priority.

Overall, the FSSSP helped reduce gender disparities in enrolment. But there is



Using data from the 2009 Bangladesh MICS on rural households with children aged 7-14 years with at least one older sibling, Begum et al. (2012) examined the effect of educational attainment of older siblings benefiting from the FSSSP on the schooling outcomes of younger siblings. Ullah (2013) uses PSM, DD, standard logistic and ordered probit regression on two waves of Household Income and Expenditure Survey (HIES) data of Bangladesh - 2005 and 2010 to investigate the impact of the FSSSP on enrolment, poverty, and early marriage.

insufficient evidence of its impact on fertility control or delayed marriage, or increasing employment, or empowering girls. The study also stresses that the FSSSP is credited with more success than is supported by the evidence, and that analyses are more critical, whereas donor reports are positive. These analyses criticise education guality, equality and sustainability. Thanks to the FSSSP, girls were able to increase their enrolment as data shows, but no other help was provided, especially to poor girls to stay in school after they were enrolled, and to pass their exams. Thus the FSSSP was 'moderately satisfactory'. In addition, other factors may have also influenced enrolment such as the free tuition established earlier. Yet the leap in girls' enrolment suggests a strong FSSSP impact on enrolment. There is also some evidence of a limited positive impact on delaying marriage – the FSSSP probably helped delay marriage for some girls for a few years. A reviewed study indicated that only a few girls benefited from FSSSP-related delayed marriage, because only primary school graduates were eligible, so those who did not continue were still at risk of child marriage. Lack of accurate data on marriage age makes such an assessment difficult. Assessment of programme effect on fertility and employment is also difficult. Yet garment factories that employ young women now ask for SSC-gualified workers. A study that looked at the pilot indicated that girls from the study area compared to a control group were more likely to be employed and earning money (34% vs 11%), less likely to be married (36% vs 53%) and more likely to decide about their lives (e.g. to go alone outside the village, 53% vs



28%). However, the FSSSP did not focus on education quality and did not enable girls to pass their exams. It focused on increasing the number of girls entering and staying in secondary education. It also does not appear to have alleviated poverty directly as it actually targeted families who could support girls' primary education and continue helping them to complete secondary.

In their study, Heath and Mobarak (2012) find that the arrival of garment jobs increased schooling only for younger girls (statistically significant for ages 5-10) in villages within commuting distance to the factories. These jobs required education and provided better wages. Between 1983 and 2000, in sampled villages within commuting distance to garment factories, exposure to these jobs led to a 27 percentage point increase in girl's enrolment rate. A 10% increase in garment jobs appears to lead to a 1.4 percentage point increase in the likelihood that a 5-year-old girl is in school. There is a roughly zero average effect for older girls, with a negative point estimate for 17- and 18-year-olds, some of whom are more likely to drop out of school to get a job in a garment factory. The effect of garment jobs on girls' enrolment is larger than the effect of FSSSP. Girls in these villages exposed to garment factory openings earlier in life are also less likely to get married at an early age – a 10% increase in garment jobs decreases by 7.3% a girl's propensity to be married before age 18 and to have children at an early age. While 37% of women in the sample worked in the garment sector compared to 8% of women across the country, the authors argue that roughly 20%-25% of the gain in girls' enrolment across the



country could be attributed to the remarkable growth in this export industry.

Shamsuddin (2013) finds that girls receiving the stipend attain about one year more of education; are 4% more likely to be in the labour force; are 3% more likely to find a job in the formal sector; and earn 14% more than their male counterparts of the same age. The study also questions the findings of the previous study by Health and Mobarak (2012), on the grounds that they used data from sub-districts where most of the garment factories are located and thus it is unlikely that they hold for the whole country.

Hahn et al. (2015) found that the FSSSP significantly increased years of education for eligible girls by an average of 14% to 25% — it actually had the strongest effect on completion of primary school, which increased between 6.1 and 12.3 percentage points. Girls were more likely to get married later (0.11 to 0.17 years for each year of exposure) and have lower desired (3% fewer children), and actual, fertility (8%-12% lower). Women who received the stipend for all 5 years were 2.7 percentage points more likely to use contraception. They also showed greater autonomy in making decisions about household purchases, their own health care, and visiting relatives. They were more likely to work in the formal sector instead of the agricultural and informal sectors, and they were more likely to marry more educated husbands with better occupations and closer in age to their own. Thus the study concluded that the FSSSP increased women's empowerment through positive marriage market outcomes.



Begum et al. (2012) found that FSSSP participation of older siblings had a positive effect on the schooling of younger siblings the FSSSP increased the education of older sisters by about 2.2-2.7 years, and subsequently increased the education of the younger siblings by about 0.16-0.5 years, indicating an increase of 5%-15% from their mean education. The study also found that the effect was sometimes stronger on younger brothers than on younger sisters.

Ullah (2013) claims that the FSSSP did not achieve its overall target. Between 2005 and 2010 secondary enrolment rates increased for rural girls from 51% to 57%. While in 2005, only 17% of secondary-school-age children from the bottom two quintiles were found to be enrolled, their percentage reached 37% in 2010. However, the non-poor had a higher enrolment rate in both years. The average FSSSP stipend amount covered only around 20% of costs in both 2005 and 2010, but grade comparison shows that at grade 10 the stipend covered only 15% of the total school expenses. Between 2005 and 2010, the marital status among enrolled girls was found to be the same. However, only 1% of enrolled girls were found to be married in both 2010 and 2005 compared to 30% of the non-enrolled rural girls. The marital status for both poor and non-poor cohorts for years was around 15%. Compared to the PSP, the FSSSP was more successful in enhancing the enrolment rate for its target group. The FSSSP stipend helped raise the enrolment rate by 15% to 40% and reduce the rate of child marriage by 7 percentage points to 16%. Age, marital status, child labour, parental level of education, household head sex and



BRAC Non-Formal Primary Schools (BNFPS)

#### 1985-

BRAC implements these schools mostly in rural areas but 5% of them operate in urban slums. of poor households. At the beginning of the programme, particular attention was paid to girls and 70% of places were allocated to them, but in recent years and in response to the increase in girls' education, their share reduced to 65% (Nath, 2012).

Out-of-school children

Establishment of a non-formal primary school with a female teacher and 33 students with a flexible schedule following the national curriculum and providing free school materials. When an adequate number of out-of-school children (at least 30) is no longer available, the school is moved to another rural remote area where there is such need.

A recent assessment by Nath (2012) of the cognitive competencies of students in **BNFPS** and other types of BRAC schools (subjects included Bangla, English, mathematics, social sciences, science and religious studies) between 2000 and 2010 used a 64-item questionnaire administered in a randomly selected school from each area. The assessment identified distribution of competencies, and those competencies which were very difficult or very easy for the students. It also used multivariate analysis to find out the factors predicting student learning achievement. Sexdisaggregated data was collected.

household head age were foun dto be some of the important determinants in schooling choice at the secondary level.

BRAC runs over 34,000 primary schools outside of the formal state system for 1.1 million students, 70% of whom are girls.

A recent study found low dropout rates and high enrolment rates: 63% for girls and 37% for boys. However, teachers' education was not characterised by high quality and their salaries are low (Hossain, 2012).

The assessment by Nath (2012) found that the average performance of BNFPS students varied substantially from one year to another. An upward trend was noticed during 2008, 2009 and 2010. Students had a satisfactory or excellent performance in the majority of competencies. No statistical difference between the performance of boys and girls was found in 7 of the 11 test years. In the remaining four, boys significantly performed better than girls. Two competencies in which students performed poorly — 40% or a lower proportion of students achieved these competencies were 'writing skills in English' and 'knowing life sketch of prophet Mohammad or the preachers of own religion'. A comparison of students in rural and urban BRAC non-formal primary schools shows that urban students consistently had on average more competencies than those in rural schools. The urban-rural gap increased over time. Moreover, while there was no gender difference in rural schools, in urban schools, boys were significantly ahead of girls in 2000, but girls outperformed boys in 2008. Urban students were closer to schools, more had access to electricity and more had access



			to mass media compared to rural students, and
			thus the assessment suggests that these three
			factors may have improved their competencies.
			The assessment particularly noted that girls are
			almost double of boys in the total BRAC
			student population. The use of female teachers
			created a favourable environment for girls to
			be in school and participate in the classroom.
			Analysis of competencies found no gender
			difference in about three-fourths of the cases,
			and BRAC non-formal schools did better than
			government schools in terms of gender parity
			in competencies achievement with a difference
			of 20 percentage points. The assessment also
			found that both boys and girls in schools with
			female programme organizers performed
			equally, while if the programme organizer was
			a man, the boys outperformed the girls.
			However, BNFPS students did less well
			compared to BFPS and BCPS students. The
			assessment attributes this to the non-formal
			type of school, its temporary nature and the
			fact that students receive the full course of
			primary education within four (not five)
			calendar years as in the other two types of
			BRAC schools. Moreover, students in these two
			types of schools are also ahead in terms of
			parental education and household wealth.
Children in	Community primary schools	The assessment by Nath (2012)	The assessment found that after BFPS students,
communities with these schools.	established in permanent locations with government	also included children in BCPS.	students in BCPS had the best performance.
	assistance that also pays		
	teachers salaries.		

Started in 1998 by BRAC but also received government financial assistance.

BRAC Community Primary

Schools (BCPS)



BRAC Formal Primary Schools (BFPS) BRAC runs these schools in rural areas.	Children in these areas. The number of boys and girls is equal, but girls receive free education, while boys pay tuition fees.	Formal permanent primary schools adjacent to BRAC training and resource centres in rural areas.	The competencies assessment by Nath (2012) also included BFPS students.	The assessment found that BFPS students had better performance compared to BCPS students.
BRAC Schools for Ethnic Minorities (BSEM) Started in 2003 by BRAC.	Children of ethnic minorities.	Schools in ethnic minority communities, organised in a similar way to BRAC's non- formal schools. Each school has two teachers – one from the minority and one Bengali. Children start learning in their mother tongue and continue to the national language.	The competencies assessment by Nath (2012) also included BSEM students.	The assessment found that BSEM students did not do as well as students in other types of BRAC schools.
Promoting rights through community action: improved access to inclusive education for children with disabilities This project ran between 2012 and 2014; it was funded by the Leonard Cheshire Disability, Gana Unnayan Kendra (GUK) and the European Union in the Nilphamari district.	Children with disabilities, their families and communities. The project did not have any gender specific objective and paid no particular attention to the needs of girls with disabilities.	This is an inclusive primary education project that aimed at improving access and school participation for children – boys and girls — with disabilities through creating a friendly school environment for children with disabilities.	The project was evaluated and a case study explored the impact of the project on girls with disabilities. The study used available sex-disaggregated data collected as part of the project monitoring and evaluation and combined it with empirical quantitative data collected by an independent project evaluation team through a probabilistic field survey at the end of the project. The study also reviewed project documents and collected primary data through qualitative research – including interviews with stakeholders, teachers, parents and girls with disabilities (Peter et al., 2015).	More than 2,100 children with disabilities were supported to enrol and stay in 262 district schools. More than 300 teachers were trained on aspects of inclusive education. In addition, 100 parents' groups were set up, and 1,000 inclusive children's clubs were also established. More than 90 schools were made accessible; 10 Inclusive Resource Centres were created in mainstream schools. The project, in consultation with stakeholders, also carried out a review of the primary school curriculum, textbooks and teacher training curriculum and produced a policy note to the Ministry of Education (Leonard Cheshire, 2014). The evaluation found that over 70% of beneficiary children would have remained out of school in the absence of the project. Over 400 teachers acquired the skills to teach and manage inclusive classes, and 85 schools became accessible (Peter et al., 2015).



		The case study revealed that a key means of sending girls with disabilities to school was winning their parents' confidence that girls were safe outside the home. The project organised village meetings to sensitise parents and elders on the rights of children to education and the importance of educating girls with disabilities. Parents, through formation of and participation in parents' groups, became aware of girls' abilities and needs and learnt skills to better support them. Girls were also provided with therapeutic services that improved their functional abilities – girls accounted for 44% of beneficiaries of such services. Teachers also attended training, while girls' mothers were appointed as volunteers in selected schools to help teachers with issues affecting girls with disabilities. The project also helped parents' groups develop local transport plans and provided transport allowances to those in need so that their children with disabilities could commute to school and visit therapeutic services. The project also improved WASH facilities, including separate toilets for girls and boys in 85 schools as well as access to such facilities. As a result, two-fifths of participating children were girls, 94% of new female enrolments actually stayed in school, and more than 91% passed their grade.
Girls and boys were provided	The evaluation took place in	The programme reached around 27,000 girls.
with opportunities to practise	2011 by a team of five	While 95% of girls had faced forms of sexual
and further develop their	independent consultants. The	harassment, as a result of the programme it
leadership skills. Girls practised	original plan was to visit three	was reduced. Sports and extracurricular
their leadership skills through	sites, two active sites where	activities also attracted girls to schools. Girls'
sports, artistic and cultural	ITSPLEY was implemented, and	enrolment rates at schools appeared to be

Empowering Youth (ITSPLEY) programme

> The project was implemented between 2009 and 2012 by

Innovation through Sport:

Promoting Leaders,

Marginalised youth, especially girls.

ν а S activities. The project had two

one non-active site to serve as a increasing. Girls also became more interested



CARE Bangladesh and USAID. It was also implemented in Egypt, Kenya and Tanzania.		components: school-based groups/activities and community groups.	control group. However, since the number of girls and boys available to complete surveys were fewer than hoped for a reasonable sample size at the second site, a fourth site was randomly selected from the list of community sites. The team combined a survey with qualitative research (Eschenbacher, 2011).	in learning. 102 girls who had dropped out of school, returned to school, supported by their peers, and 96 early marriages were stopped by girls' groups. Girls increased their awareness about SRH, SGBV, sanitation, disaster response and child marriage. Yet girls in school clubs appeared to be less lively and assertive than those in community clubs with the life skills training in school being led more by adults and not peers (Eschenbacher, 2011).
Adolescent Peer Organised Network (APON) Part of the Adolescent Development Programme (ADP), it started in 1998 by BRAC and incorporated into ADP.	Underprivileged youth, graduates of BRAC non-formal schools, and other youth from a very poor family, minority youth, or those divorced and wanting to maintain their literacy skills by reading books, magazines and newspapers.	Access to Reading Centres, participation in classes of about 25 adolescent girls, and assistance from peer educators (unmarried girls aged 17) so that girls develop their confidence, life skills and leadership abilities; benefit from a network of peer support; and are encouraged to continue their education. Some girls also provided with vocational skills training and loans to start their own business. The initiative also included the APON for Boys, explicitly targeting male graduate adolescents in high school to raise their awareness on key issues and improve their life skills.	APON was evaluated several times (see ADP evaluations in other sections of this table).	Between 2000 and 2002 nearly 220,000 adolescents, especially girls, completed or attended the APON course in 6,500 Reading Centres. Girls learnt about their rights and sensitive social issues such as inheritance law, oral divorce, dowry, legal rights, acid attacks or how to deal effectively with their mother-in- law. Trained girls could become peer educators, leaders or supervisors and were paid a small sum. Most girls who were trained and assisted to start their business were able to do so, but one in four was unable to find employment. In addition, BRAC ran monthly parental meetings to overcome parental resistance. In these meeting parents were informed about the course and its benefits (BRAC, n.d.). The initiative has been undergoing substantial change in terms of the centres' location, curriculum and services provided.
Meena Communicative Initiative (MCI) MCI started in 1992 by	Children and families.	MCI is a multi-media Entertainment Education approach that involves the use of entertaining stories to convey	During the 1990s some studies assessed the MCI. In 2003, UNICEF commissioned an external mixed methods	In a national media study, Dhaka residents said that the programme was about girls' rights. The baseline survey for the Meena component of the IDEAL project indicated that among



UNICEF. It has also been implemented in India, Pakistan and Nepal. educational and behavioural development messages to its audiences.

The leading character of the stories is Meena, a nine-year-old South Asian girl, the members of her family, and village residents. Her adventures aim to increase audience's awareness, knowledge and understanding of the status, rights and treatment of girls.

The Meena TV Programme was successful and led to Meena films shown on large screens in urban and rural areas, billboards and wall paintings, and 1 million comic books with Meena adventures. BRAC started using Meena materials in its nonformal schools.

The MCI was integrated into the IDEAL (Intensive District Approach to Education for All) project, and a range of materials were produced to introduce gender issues in schools and promote a more child/girlfriendly learning environment. Copies of Meena materials were also distributed in non-formal learning centres to provide education for urban working children. Meena videos were incorporated into teacher training courses and Meena evaluation. In Bangladesh nearly 2,400 children aged 7-18 participated in the survey and 51 adolescents in IDIs or FGDs (Chesterton, 2004).

school children, 87% of girls and 84% of boys knew of Meena. In addition, 87% of girls and 86% of boys reported that they practised what Meena did. Moreover, 77% of parents saw Meena as a small village girl and only 10% said that she was a cartoon character.

In the UNICEF assessment, 59% of Bangladeshi children and 67% adults reported that according to the programme, girls must be educated. Children also said that they knew of others who had been exposed to Meena and noticed positive change, for example in terms of regular school attendance (Chesterton, 2004).



		stories were included in school curricula and textbooks.	
Patsy Collins Trust Fund Initiative (PCTFI) Started in 2003 by CARE, PCTFI has been implemented in 18 countries, including Bangladesh.	Marginalised girls.	Research-based activities to examine and address factors – structural and relational – that influence girls' education and empowerment opportunities.	CARE works with girls' families and communities so that they support their children's education. Local school governance community structures and the School Management Committees ensure that teachers show up at school and use inclusive teaching methods, and that girls enrol and attend school regularly. Community members also ensure that girls travel safely to and from school and do not experience verbal or physical abuse. The project also creates a framework to monitor education equality; in measuring children's perception of this, 100% of students agreed that girls are good at school (Moll, 2013).
Support Urban Slum Children to Access Inclusive Non- Formal Education (SUSTAIN) The project was established in 2011 by Nari Maitree, Save the Children, and European Union in slum areas. It will run until 2017.	Out-of-school slum children.	Provision of basic education in non-formal schools for slum children and assistance to transition them to the mainstream system. Sources speak about 28 non-formal education centres that provide a 2-3 year course.	In 2014, more than 2,500 children received non-formal education in these centres, and 560 children were enrolled in primary school. The vast majority of children succeeded in the final primary school exams (Dolly, 2015).
Education for Youth Empowerment (EYE) The project runs between 2014 and 2016 by Nari Maitree, Save the Children and the European Union in five locations in Dhaka city.	Urban adolescents and youth who work in the informal sector.	Education and skills training in special centres.	In 2014, 400 adolescent participants transitioned into formal schools. In addition, 290 participants received skills training in three trades (Dolly, 2015).



Supporting Child Domestic Workers (CDW) The project ran between 2011 and 2014 by Nari Maitree and Plan International in Dhaka city.	Child domestic workers aged 8-17.	Establishment of 20 learning centres providing basic education and helping these children enter the mainstream education system; provision of skills-training; birth registration and registration with police stations; community mobilisation and creation of child protection committees.	Between 2011 and 2014, the project assisted 1,100 child domestic workers — almost all of them girls (Dolly, 2015).
Reaching Out of School Children (ROSC) project The project started in 2004 by the World Bank and GoB.	Out-of-school children.	Provision of stipends to students and grants to second chance primary education centres	Between 2005 and 2012, ROSC provided primary education to over 790,000 out-of- school children in more than 23,000 learning centres. More than half of beneficiaries were girls. Average student attendance rate exceeded 90%. The pass rate of ROSC students in national examinations reached 83% in 2012, and students were able to transition to secondary education (World Bank, 2012).
Shikhon (Learning) The project started in 2007 by NGOs in remote rural communities, river islands (chars), low-lying areas affected by flooding, coastal areas, Chittagong Hill Tracts districts and urban slums.	Out-of-school children aged 7-14.	Education in community non- formal primary schools. Educated local youths were recruited and trained as teachers.	The programme benefited over 300,000 children through 5,000 schools (MoPME, 2015).
Shoishob	Street children and child domestic workers.	Basic literacy and numeracy training.	The domestic workers' component targeted mostly girls who were able to spend time with their classmates and socialise. However, only two thirds were able to attend classes regularly. Those who attended classes became more confident and hopeful for the future.



			Their employers also became more careful towards them (Ahuja and Ibrahim, 2006).
Underprivileged Children's Education Programme (UCEP) UCEP started in 1972 by NGOs in urban slums, shanties and squatter settlements in Barisal, Chittagong, Dhaka, Khulna, Rajshahi and Sylhet.	Child labourers.	General education and vocational training along with employment support service for child labourers in urban slums.	Girls accounted for half of the participants in the general education course and 35% of those in vocational training (Ahuja and Ibrahim, 2006).
Supporting the Hardest to Reach through Basic Education (SHARE) The project is run by the European Union and NGOs in 219 rural and urban sub- districts.	Out-of-school children.	Flexible curriculum to allow children to combine work with school.	The programme has reached 655,000 children (MoPME, 2015).
Basic Education for Hard-To- Reach Urban Working Children (BEHTRUWC) Started in 1997 by the GoB, UNICEF, SIDA, CIDA and NGOs in urban slums in the six divisional cities – Barisal, Chittagong, Dhaka, Khulna, Rajshahi and Sylhet.	Young adolescents, aged 10-14, who never attended school or dropped out to work. At least 60% of participants have to be girls.	Provision of non-formal basic education and life skills. The course runs for 40 months with a shorter school day and flexible curriculum so that participants can combine work with school. The focus on girls led to a gender-sensitive curriculum (Watkins, 2013; MoPME, 2015).	Girls' enrolment reached 62.5% in all cities. Girls' attendance (98%) was also higher than that of boys. Moreover, 67% of girls and 66% of boys successfully passed school tests, and 90% completed the Livelihoods Skills Training. However, girls faced greater difficulty attending the learning centres as they also had to perform household chores and look after younger siblings. Sometimes they even brought their siblings to school. Sometimes their employers did not allow them to attend. Although the curriculum included awareness raising activities around gender relations and dowry in the life skills training, girls found it difficult to apply this knowledge to their daily lives (MOPME, 2015).



Skills Training for Advancing Resource (STAR) Started in 2012 by UNICEF and BRAC with an initial focus on six urban locations in Barisal, Chittagong, Dhaka, Khulna, Rajshahi and Sylhet.	Adolescents aged 14- 18 in the informal economy. Out-of-school participants should have at least five years of primary education.	Assistance to participate in a 6- month TVET course, develop life and soft skills, and acquire decent employment. STAR also includes a 3-day refresher and 6- month follow-up, during which each participant is helped to find a job.	STAR reached 1,000 adolescents, 58% of them girls (Ahmed et al., 2013).
Boat schools in haor areas BRAC.	Children living in these areas.	Boat schools enable children to continue their education, especially during flooding. Boats are used for transportation and as classrooms for learning (Yasunaga, 2014).	
Schools in haor areas NGO and funding from the Dutch government in Sylhet.	Children living in these areas.	150 schools.	
Programme to Motivate, Train and Employ Female Teachers in Rural Secondary Schools (PROMOTE) Implemented between 1995 and 2005 by the GoB and World Bank.	Female students assisted to become teachers and work in rural secondary schools.	Provision of accommodation, expanded training facilities, and an incentive package.	A successful programme to recruit, train and support female teachers. It has thus contributed to increased enrolment rates of girls in rural areas (HDRC, 2011).
Grameen Shikka Education Programme Started in 1997 by	Poor children and youth in rural areas as well as slum children.	Formal and non-formal education assistance, including scholarships and vocational skills training.	By 2011, Gramme Shikka supported more than 3,200 poor students with scholarships. In 2013, it provided 2,000 youth with vocational training, including courses in tailoring and dressmaking for poor adolescent girls (Rouf, 2014).



Grameen Shikka which is an extension of Grameen Bank in 64 districts

in 64 districts.				
Sanitation, Hygiene Education and Water Supply in Bangladesh (SHEWAB) UNICEF.	School girls and their communities.	Community workers visit schools and raise awareness about menstrual hygiene and set up community hygiene education groups. In addition, they promote the construction of hygienic latrines (Seymour, 2008).		
WASH in Schools These projects started in 2009 by UNICEF Bangladesh, DFID, and the Dutch government.	Schools.	Construction and rehabilitation of water points and sanitation blocks in primary schools; construction of group handwashing facilities; dissemination of messages through classes; training of teachers and the development of guides and booklets; establishment and training of adolescent clubs that disseminate messages on MHM.		UNICEF Bangladesh with funding from DFID and the GoB has been implementing several WASH projects in schools such as the SHEWA-B programme which reached over 9,000 primary and secondary schools in 24 districts across the country between 2009 and 2013. Since late 2012, UNICEF has also implemented the School Led Total Sanitation project, with funding from the Dutch government, in 500 schools in 7 districts across Bangladesh. It planned to implement it in 500 more schools with funding from the British government until 2016 (UNICEF, 2014).
YMCA free schools They started in 1980 by YMCA.	Under-privileged children and youth.	Free primary schools for poor children and non-formal education programmes for adolescent girls (aged 8-14) who dropped out of the regular school programme and for women (aged 16-50).		In 2011, there were 2,000 students in free schools. Graduates may later become teachers in their schools (YMCA, 2011).
		Economic empowerme	ent interventions	
Post-Literacy and Continuing Education Project (PLCE)	Semi-illiterate youth and adults aged 11-45,	PLCE provided post-literacy and vocational training through community-based and needs-	An external assessment used quantitative analysis and tracer studies. Additionally, qualitative	A World Bank report (2008) noted that in its first phase the programme had a positive impact on raising the literacy and numeracy of



The PLCE was designed by the government, the World Bank and other donors in the 1990s to provide vocational training to semi-illiterate vouth and adults. At the beginning of 2008, 972,900 participants had completed the PLCE courses. Between 2008 and 2011, 870,000 participants benefited from its second phase – PLCE II. The programme was implemented by government agencies in 29 rural and urban districts.

Funding came from the World Bank and later also from the Swiss Agency for Development and Cooperation (SDC). explicitly targeting adolescent girls. oriented approaches to nonformal education. In particular, it included training in 15 trade courses such as tailoring, poultry and goat rearing. data was used from credit proposals, previous reports etc., to which the evaluation team had access, and from interviews with beneficiaries and stakeholders and compared with those of a control group (Maurer et al., 2011).

participants. A tracer study in 2007 found that 16% of female graduates were girls aged 11-17 and 84% aged 18-45. Female participants who acquired a trade were able to find self- or factory-employment and increase their income between 10% and 100%. Income-generation empowered them and in some cases – when they were able to considerably raise their household income – increased their confidence and participation in household decision-making and community activities. However, the programme's post-literacy component only reached 73% of its targeted beneficiaries, while its employment potential was compromised by a limited number of trade courses and poor links to technical assistance and microcredit for graduates (World Bank, 2008).

The 2011 assessment found that both beneficiaries and control group participants had employment rates (most often selfemployment) near 100%, but beneficiaries felt that skills training was not practical enough, that the supply of skills became saturated, and that the programme did not provide access to the equipment or the start-up capital necessary for practical training and many types of selfemployment.

While the programme explicitly targeted girls and young women, it failed in most cases to provide them with sustainable access to selfemployment. Moreover, it did not enable them to increase their income: 60% of female respondents reported that their nonparticipating siblings were doing better in terms of income, contrary to 80% of male respondents who said they were doing better than their siblings. Rural to urban migration



Centre for Mass Education in Science (CMES) Second Chance Education Programme

## CMES

Funding provided by the Swiss Agency for Development and Cooperation (SDC).

The first phase of the programme ran between 2007 and 2011. The second phase started in 2011 and was expected to be completed in 2016.

Between 2007 and 2009, there were around 9,800 students at junior level, 2,750 at senior level and 2,900 received short-term skills training. Disadvantaged rural adolescents, both girls and bovs.

Using a student oriented pedagogical approach, the programme aims to improve lives by offering a combination of basic educational, technical and life skills training. Girls' empowerment is a specific programme objective. A mixed methods assessment was commissioned by the funding agency (Maurer et al., 2011). and work in the garment industry appealed more to women than the non-formal education provided by the programme and related selfemployment. Lastly, while PLCE encouraged centres to be community-owned and financially supported, there was again little such evidence and their sustainability was also questionable as training was provided through NGOs and almost exclusively dependent on national-level funding (Maurer et al., 2011).

Due to the strong labour-market orientation of the CMES trainings, the employment rate of graduates was much higher than that of graduates from traditional theory-based programmes. The programme linked the provided vocational skills training to the skill needs of local factories. Unemployment rates were 14% at junior and 40% at senior level, and these rates were much lower than the average rate of conventional TVET graduates in the country. There is some evidence suggesting that trainees also earn higher incomes.

The programme has a garment-oriented skills component and girls attend it as a means to access higher paid jobs in the garment industry. However, as higher level jobs are generally offered to internally promoted operators, motivation to stay at the higher grades of the programme, declines over its course and dropout rates are higher for advanced grades. While dropout rates are lower than the average for such programmes, they are still high during transitions between programme levels (Maurer et al., 2011).



Underprivileged Children's Education Programme (UCEP) Running since 1972 in Dhaka, Chittagong, Rangpur, Rajshahi, Khulna, Barisal, Sylhet, Gazipur, Bogra and Sherpur. Support is also provided by DFID.	Working children and youth from underprivileged communities, primarily from urban slums, shanties and squatter settlements.	UCEP offers quality general and employment support. It is designed to be an accelerated learning programme that provides basic education in 4.5 years instead of eight. This is followed by a year of market- oriented skills training and employment upon graduation. Meetings with employers are regularly held where UCEP technical schools operate in order to identify market demands and labour needs. It also includes a Child and Women Rights Advocacy Unit that creates awareness of child and women's rights and advocates against their exploitation and abuse. UCEP explicitly aims to promote gender equality, with 50% of general education participants and 45% of technical training graduates expected to be girls.	A programme annual review provided useful information about its impact (DFID, 2014).	The majority of UCEP general education graduates continue to complete the secondary school certificate exams with almost perfect pass rates, while UCEP technical schools achieve high rankings among all secondary technical schools in the country. Almost all their senior graduates are offered employment before they finish studying and expect much higher incomes than those they earned before the programme. The 2014 DFID Review states that within the first three months of graduating, 80% of participants were employed and within six months, 95% have found employment due to the strong programme linkages with the labour market and employers. UCEP has the reputation of being a reliable source of high quality workers (DFID, 2014).
Personal Advancement & Career Enhancement (P.A.C.E.) Programme	Female garment workers.	The P.A.C.E. programme provides skills training through 65-80 hours of life skills education, followed by	The ICRW conducted qualitative research with approximately 15 participants and 7-16 factory supervisors at every site while it	The study found that P.A.C.E participants in Bangladesh significantly increased their confidence and influence within their household and in communication with work
Gap Inc. Implemented since 2011 in Bangladesh and still active		enhanced technical training. The programme works with employers to create an environment which encourages	also established a global monitoring data system with key indicators on programme attendance, retention and	supervisors. However, it is unclear whether and to what extent adolescent girls in participating garment factories have been able to benefit from the programme (ICRW, 2013).
Implementing partner: CARE		women to apply their new skills and enables participants to acquire the skills and knowledge	advancement among P.A.C.E. participants and non- participants (ICRW, 2013).	



		to move into supervisory or management roles.		
Kishori Abhijan The programme was implemented by the Ministry of Women and Children Affairs and several local and international NGOs including BRAC, CMES, Bangladesh Shishu Academy and Save the Children Australia. It first ran from 2001 to 2006; it was then extended until 2010. Implemented in 27 mainly rural districts, it reached 550,000 girls and 50,000 boys.	Adolescent girls aged 14-19 in school, out-of- school girls aged 10-19, and boys.	The programme also provided livelihood training to girls aged 15-18 to increase their independent economic activity and to empower them.	A mixed methods BRAC assessment (Amin and Suran, 2005).	Participants increased their economic participation, but school enrolment and living in better-off families significantly reduced the likelihood of working for pay (Amin and Suran, 2005). Overall, the programme increased the number of girls working for pay and the amount of income they earned, especially when programme activities included microcredit provision. Participation in paid work did not lead to school dropout but working girls reported spending fewer hours on school work outside the classroom (Amin, 2011).
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents (BALIKA) The programme was implemented by the Population Council, Population Services and Training Center, Centre for International Development Issues Nijmegen, and mPower.	Adolescent girls aged 12-18.	One of the intervention strategies was the provision of livelihood training, which thus provided participating girls aged 12-18 with training in computers (25 hours), entrepreneurship (15 hours), mobile phone servicing (13 hours), photography (30 hours) and basic first aid (17 hours) to enhance their knowledge about future livelihood options.	The mixed methods evaluation by the Population Council included an RCT with four arms (Amin et al., 2016).	The evaluation found that girls in communities with livelihood training were 23% less likely to marry early; 22% more likely to be in school; 35% more likely to earn an income; 70% more likely to listen to the radio and 119% more likely to read a newspaper compared to girls in control communities. Overall, BALIKA had a limited impact on girls' livelihood activities as only a few girls were working, but significantly more girls in all intervention areas reported working and having a higher income at endline compared to baseline. Programme impact was also found to be significantly higher among out- of-school girls who participated in the



Between 2012 and 2016, it targeted girls in 96 communities in three districts – Khulna, Narail and Satkhira - in Southwest Bangladesh.

Employment and Livelihood for Adolescents (ELA)

Girls aged 14-

BRAC started the programme in 2003. With funding from the Nike Foundation, ELA was scaled up and in 2005 ELA centres were created for ELA microfinance group members.

There were 10,600 ELA groups with more than 300,000 members.

25. Only villages with an

adequate number of girls (around 30) were selected for the intervention. Through weekly meetings, this programme created safe spaces for girls where they were provided with life skills and livelihood training. Participants were also provided with credit, books for extracurricular reading and equipment for indoor games.

There were also meetings with parents and community to create 'a positive attitude [around] the participation of their daughters in activities beyond study and household chores'. A mixed methods assessment by BRAC compared differences in the outcome variables between ELA Centre participants and nonparticipants.

Qualitative research was also completed through IDIs, case studies, FGDs, and observation. Two rounds of surveys were conducted on the same respondents in 2005 and in 2007; the overall attrition rate was 20%.

The evaluation also explored spill- over effects of the programme as non-participating respondents were from the same villages where the ELA Centres were operating (Shahnaz and Karim, 2008).

Participants had higher engagement in earning activities, yet no significant increase in financial literacy compared to non-participants. Most girls who received training and a loan were able to control their loan, yet some girls who did not receive training gave it to their parents or spouse for investment. A negative correlation was also found between schooling, loan intake and earning activities as adolescent girls were afraid that their involvement in incomegenerating activities would have a negative impact on their studies and thus did not use the loans to fund their education. In addition. those from very poor families feared not being able to repay a loan and thus reported no experience nor future plans to take a loan. The majority of participants also expressed their wish to marry later, get good jobs and financially support their families.

livelihood intervention, while in-school girls were more likely to report working in higher

status jobs after the intervention (Amin et al.,

2016).

While the school enrolment ratio was more than double among participants than the control group, participants did not demonstrate higher educational aspirations. Though participants read more often and had higher writing skills, the programme showed no impact on reading levels (Shahnaz and Karim, 2008).



Social and Financial	
Education for Adolescents	
(SoFEA)	

In 2009 BRAC integrated ADP and ELA features and created SoFEA with the support of the Nike Foundation. Rural adolescent girls aged 11-21.

SoFEA aimed to empower adolescent girls both socially and financially through creating girls' clubs that provided life skills, livelihood and financial literacy training. Older adolescents aged 15-21 were provided with a loan if they wanted one. A BRAC evaluation used qualitative methods (in-depth interviews, focus group discussions and informal discussions) and content analysis to assess the programme (Kamruzzaman et al., 2012). SoFEA participants reported an increase in confidence to express their opinions as a direct result of the programme. It also enabled them to acquire basic financial knowledge, improve their planning skills, and increase their involvement in economic activities and ownership of assets, such as poultry and livestock. Several participants stressed that, encouraged by the staff and the training they received, they started income-generating activities or improved the management of the small business they were already running. The programme was also found to have spill-over effects, as even non-participating girls got involved in productive activities influenced by their neighbours. Girls also stated that their relatives developed more respect for them because of their new skills and knowledge acquired from SoFEA. There was a negative correlation between commitment to the programme and distance of the club from the participants' homes (Kamruzzaman et al., 2012).

Shonglap Education Project	Girls aged 12-19 who have dropped out of	A 12-month programme, it provided nine months of	A mixed methods assessment consisted of document reviews,	The assessment found that 84% of project graduates were involved in income-generating
Shonglap	school.	literacy, basic education and life skills training, followed by three	interviews with 20 girls and other stakeholders, and	activities compared to just 10% at the baseline. Half of working girls were involved in more
The project first started in 2006.		months of training in income- generating activities, such as tailoring, poultry farming and homestead gardening. REFLECT	structured field visits to 4 NGOs, which included FGDs and interviews with stakeholders. Animators and supervisors were	than one economic activity. Girls and their families often preferred to engage in activities that were in accordance with traditional gender roles such as livestock rearing and embroidery.
Between 2009 and 2011		methodology was used	interviewed separately.	Girls used their earnings to meet the costs of
funding was provided by		promoting teacher-student	Assessors were also able to	their education (46%) and clothing (56%) or
<b>Operations Days Work, the</b>		interaction, and self-awareness	conduct FGDs with girls that did	contributed to family expenses such as family
Strømme Foundation,		and confidence building. It was	not participate in the project. A	food expenses (67%) payment of family debts
Geneva Global, and the		also possible for some girls to	baseline study was conducted in	(38%) or medical expenses (6%). In general,
Goddi Fund.		take a loan for chosen activities.	2009 through a structured	97% of participants contributed financially to



		Each group was led by an animator, a girl from the same village with higher levels of education and interest in community work (normally aged 20-25). There was also a Shonglap Support Team made up of village leaders, guardians and other external stakeholders to provide guidance to the group.	survey questionnaire (Sigvaldsen and Shahjahan, 2012).	their family. Girls were also more likely to decide on their own or with other family members on how to spend their earned income. They also learnt and acquired good saving practices, with 74% of them saving compared to just 3% at baseline; in some cases, they formed savings groups and used the accumulated amounts to start small businesses. The vast majority of those who took a loan were able to repay it, with only 5% of loans outstanding. Data also shows that girls increased their mobility, with relatives' and friends' houses, school, market and NGOs being the most frequently visited places. The programme also had a significant impact on decision-making with 87% (22% higher than the baseline) of girls stating they were empowered to make decisions at the family level on issues of education, marriage, mobility, participation in social festivals and controlling family expenses. Finally, most girls acquired a basic knowledge and understanding of their legal rights. Regarding the sustainability of project effects, the study recommended the formation of graduation centres or groups where girls who wished to continue could meet and access some support (Sigvaldsen and Shahjahan, 2012).
Tanisha - Improving Income and Advancing Social Identity of Rural Adolescent girls' project Save the Children implemented the project in Barisal district between 2011 and 2013.	Adolescent girls aged 12-19.	Tanisha aimed to help girls and their households graduate out of extreme poverty by providing them with the economic means to engage in income- generating activities and acquire the necessary social and leadership skills. The project set up peer groups and safe spaces that	A mixed methods assessment (GoB et al., 2014).	All targeted adolescent girls completed their life skills and livelihood training and were provided with productive assets of their choice. However, income-generating activities faced considerable challenges, such as selection of appropriate activities relative to their skill level, available time, local norms and profitability. Some girls faced tensions and jealousy from other participants as they received larger or



### DFID provided funding.

It benefited 900 extremely poor adolescent girls.

provided training on life and livelihood skills, including financial literacy, business and savings skills along with livelihood training on tailoring, livestock rearing and homestead gardening. It also included community mobilisation and establishment of community adult groups who would support girls' empowerment. better activities than others. Girls were also discouraged from getting involved in such activities due to fear of social stigma by engaging in them and family pressure. In some cases, older male household members ended up managing these activities. Girls who participated in the savings scheme said that they enjoyed it, and many opened NGO bank accounts and had small savings which they planned to invest in their education and marriage. Given the small amounts saved, the scheme largely equipped girls with skills and made them aware that they need to invest in their future (GoB et al., 2014).

# Sexual and reproductive health, health and nutrition interventions

Menstrual Health Intervention One year between 2012 and 2013.

Funding was provided by Honjo International Scholarship Foundation, Japan.

The intervention took place in Araihazar thana (area) in the Narayanganj district.

It had 416 participants in three randomly selected high schools (out of 26 in the area). Adolescent femaleSix months of educationalstudents aged 11-16,intervention by trained (by anattending grades 6-8obstetrician and gynaecologist)and living with parents.research assistants on menstrualhygiene among school girls.Menstrual education focused on<br/>menstrual hygiene knowledge,<br/>beliefs and behaviours,<br/>menstrual disorders. and

restrictions on menstruating

adolescent girls.

An evaluation was conducted at the end of the intervention and used quantitative methodology with a baseline and follow-up survey (Hague et al., 2014). Participants reported significant improvement in their knowledge and belief scores on various topics related to menstruation compared to baseline (51% vs 82%). Significant improvement was also observed in overall good menstrual practices (29% vs 89%), including improvements in using sanitary pads (23% change after the intervention), frequency of changing pads/cloths per day (69%), drying the used absorbent (78%), methods of disposing of the used absorbent (25.5%), and cleaning of genitalia (20%). Participants also reported significant improvements in the regularity of their menstrual cycle and fewer complications during menstruation (Hague et al., 2014).



Demand-Based Reproductive Health Commodity Project (DBRHCP) DBRHCP was an operation research project which run for three years (2005-2008) by the National Institute of Population Research and Training. Under DBRHCP, a twelve-month intervention targeting 800 unmarried adolescent girls was implemented in rural sub- district Nabiganj and an urban slum in Dhaka city.	Female unmarried adolescents (12-19 years).	The aim of this particular intervention was to improve girls' knowledge around menstruation and sexual health. Under DBRHCP, interventions focused on training government service providers, disseminating behaviour change materials within the targeted communities, and employing community-based health promoters (Community Support Group and Peer Promoters) to foster linkages between the community and providers.	A quantitative evaluation assessed changes in participants' knowledge between baseline and endline (Kabir et al., 2015).	Female unmarried adolescents significantly increased knowledge at endline about measures to be taken during menstruation, such as using clean and dry cloths. They also significantly increased knowledge on injectables and condoms. Knowledge on HIV and AIDs was markedly different in the urban and rural areas, but at endline, a significantly higher proportion of female unmarried adolescents knew about it from relatives and school curricula, and increased knowledge about modes of transmission, such as receiving blood from an HIV-infected person and using a HIV-infected needle or syringe. A significantly higher proportion of female unmarried adolescents also reported sexually transmitted infection-related symptoms at endline compared to baseline. While variation in knowledge about government, NGO and private healthcare facilities was found in both study areas, awareness about these facilities increased at endline (Kabir et al., 2015).
Sexual and reproductive health education for adolescents in rural Bangladesh	Adolescent boys and girls, aged 13-19, attending secondary schools.	The intervention combined development and distribution of three booklets with sexual and reproductive health information to students along with	The evaluation used a quasi- experimental design with pre- and post-test surveys. The former took place in 2001 and the latter in 2002 (Haseen et al.,	The evaluation, carried out three months after the final distribution of booklets, found that 76% of girls and 75% of boys reported reading all three booklets, while none of the students in the control group had seen or read them.
The intervention was implemented by icddr,b between 2001 and 2002 in two rural sub-districts, Abhoynagar and Mirsarai.		community sensitisation and training of government clinic staff in order to improve adolescent sexual and reproductive health knowledge and services.	2004).	Based upon both univariate and multivariate analyses, the study also found significant improvements in knowledge among students attending the intervention schools. In particular, girls and boys improved their knowledge of modern contraception methods,
Funding was provided by USAID.		Students were assigned to one of three groups depending upon what school they attended: Group A received community		sexually transmitted infections, and prevention methods. Regarding changes in practices, very few students reported high-risk behaviours or attended health services to permit a statistical



It reached 1,870 girls and 1,880 boys, enrolled in 18 secondary schools.		sensitization, booklet distribution, and training of providers in clinics of the Ministry of Health and Family Welfare in order to provide adolescent-friendly services; Group B received community sensitisation and the booklet distribution; and Group C served as the control group. Group meetings were also held with parents, teachers and local decision makers.		analysis of group differences, emphasising the difficulty in demonstrating impacts on behavioural change. The study concluded that the distribution of booklets along with community sensitization can effectively improve adolescent knowledge – yet there is no further specific information about the different outcomes between group A and B. In terms of gender differential outcomes, programme impact was greater among boys than among girls, but the absolute level of knowledge was higher among girls (Haseen et al., 2004).
<ul> <li>Improving adolescent reproductive health</li> <li>The project was implemented by several NGOs, including the Urban Family Health Partnership, Kanchan Samity, Ananya Samaj Kallyan Sangostha and Unnata Paribar</li> <li>Gathan Mohila Sangostha, and ran between 1999 and 2003.</li> <li>USAID provided funding.</li> <li>The intervention took place in three pre-selected urban areas located in the North- western region of the country: Pabna, Dinajpur, and Rangpur.</li> </ul>	Adolescents – girls and boys aged 13-19, both in and out of school. It also targeted gatekeepers, including parents, teachers, and religious and community leaders.	There were six types of interventions in experimental sites: sensitizing gatekeepers; training teachers, facilitators, health ambassadors (peers) and service providers; imparting SRH information; providing adolescent-friendly services; promoting awareness through behavioural change communication (BCC); and linking schools, community, and health facilities.	The evaluation used mixed methods. Quantitative data was collected using a quasi- experimental design with pre- and post-test surveys. Pabna was selected to be Site A and received community reproductive health education along with community support activities and adolescent-friendly services at the clinic. Dinajpur was selected to be Site B and received the community reproductive health education programme along with community support activities, the school-based reproductive health education programme, and adolescent-friendly services at the clinic. Rangpur, selected as Site C, served as the control area and received no special intervention.	Using bivariate and multivariate analyses, the evaluation, which took place after 18 months of interventions, found a significant increase in HIV and AIDS knowledge in all intervention sites compared to the control sites, with greater improvement in Site B, which had the additional school-based intervention; this finding indicates that teachers can be effective in providing reproductive health information to adolescents. Knowledge of the fertile period and health risks of child marriage also improved, with the greatest improvement again recorded in Site B. Knowledge of contraceptives improved in all sites, but the greatest improvement was seen in Site A. With the exception of knowledge of a girl's fertile period, girls were less likely than boys to have knowledge of reproductive health attitudes, adolescents in Site B were more likely to support use of contraceptives, including use of condoms, by unmarried and married adolescents than those in Site A. Overall, more boys than girls approved of unmarried


The study population included a total of 29,487 adolescents aged 13-19 in all three sites. Qualitative data was collected through FGDs and IDIs. The baseline took place in 2000 and the endline in 2002. The endline provides sex- and agedisaggregated data about each intervention (Bhuiya et al., 2004; Bhuiya et al., 2006). adolescents' use of contraceptives. There was also a more positive attitude towards using health facilities for contraception and STI services than pharmacies. The use of condoms also increased in the intervention sites and especially in Site B. On the other hand, the proportion of unmarried males reported ever having had sex increased significantly in the control area, but it did not change in the intervention sites.

Service utilisation data revealed that compared to Site C, use of health services in Site B increased ten-fold while it doubled in Site A. Nearly one-fourth of adolescents in the
intervention catchment areas visited the
adolescent-friendly health facilities and 87%,
mostly girls, obtained relevant services. Girls
sought mainly tetanus toxoid vaccines (52%),
but also antenatal and postnatal care (22%),
family planning (14%), reproductive tract
infection or STI services (15%), and help with
menstruation related problems (for which data
was unavailable). The evaluation concluded
that a combination of reproductive health
interventions at school, health and community
levels appears to be more effective, as
demonstrated by the fact that Site B, with its
inclusion of the school-based activity, proved to
have better effects than the other two (Bhuiya et al., 2004).

Growing Up Safe and Healthy
(SAFE) programme

SAFE ran for 20 months between 2012 and 2013.

Adolescent girls and young women aged 10-29 in Dhaka slums and young men aged 18-35 years. It also involved community leaders and other stakeholders The 20-month programme aimed to improve sexual and reproductive health and reduce intimate partner violence. It thus used an integrated multisectoral intervention, which combined several established The evaluation used qualitative and quantitative techniques, including a multi-cluster RCT. The RCT had three arms with a randomly selected sample of over 9,000 ever-married women aged 15-29 and 3,000 men aged The programme considerably increased menstrual regulation awareness, particularly in Arm B where group sessions were held among the female group. The evaluation also showed increased awareness of service delivery points for sexual health problems as well as



The Embassy of the Kingdom of the Netherlands provided funding.

SAFE was implemented in Dhaka slums; group sessions reached nearly 17,000 men, women and girls. such as NGOs and police.

strategies of prevention and service delivery, including access to health and legal services, awareness raising sessions with men, young women and girls, community mobilisation campaigns, and networking and advocacy activities. 18-35 living in the community. Arm A included community awareness raising activities, access to one-stop service centres and separate group sessions with female and male participants. Arm B had the same activities but for female participants only. Arm C included community awareness raising and access to one-stop service centres, but no group sessions (Naved and Amin, 2014).

Qualitative data was collected via 11 KIIs, 98 IDIs, and 8 FGDs between February 2013 and June 2014 (the intervention ran until October 2013) (Naved and Amin, 2014; Hossain et al., 2015). knowledge of sexual health problems, STIs and HIV and AIDS, particularly in Arms A and B. In terms of improving sexual and reproductive health practices, the programme increased the use of modern family planning methods, notably only among women in Arm A, where both men and women received sessions. Arm A also showed the largest increase in condom use, although change was small. Yet the overall use of male condoms reported by participants was almost double the rates reported in national surveys (11% at endline compared to 5.5%). Use of menstrual regulation declined, especially in Arm A.

The evaluation also found substantial changes in the uptake of ante- and post-natal services, but only small changes in institutional delivery and use of services for sexual health problems. Overall, the evaluation revealed that SAFE produced mixed results (Naved and Amin, 2014). However, it was understood that it is important to involve men in interventions aiming to improve women's reproductive health. Modern contraceptive use increased and the need for abortion services declined more where men were also engaged compared to where only women were involved in group sessions (Hossain et al., 2015).

Adolescent Reproductive Health Education (ARHE) programme

#### BRAC

ARHE was created in 1995. It included classes provided

Adolescent girls and boys over the age of 12 who never enrolled in school and were from very poor socioeconomic backgrounds. The aim was to provide information about reproductive health to vulnerable adolescents in rural areas and break the silence and shame about sensitive issues. Female teachers from within the same community taught ARHE classes. They were also provided in One study used qualitative methodology with FGDs, participant observation, and semi-structured interviews with adolescents, mothers and aunts, teachers, and BRAC staff (Rashid, 2000). Adolescent girls reported that menstruation was the most significant topic discussed at the classes, given that it is often considered a shameful and hidden subject and girls typically get very little information about what it is and how to deal with it. A number of girls said they were now using their newly acquired knowledge of hygienic menstruation practices and discussing it with other girls in the village



through BRAC's Basic Education for Older Children (BEOC) or Kishor Kishori schools, which ran for three years. Currently it is linked to ADP.

Within its first 5 years of implementation, ARHE was taught in 803 institutions with over 27,000 students. BRAC's community libraries, and government secondary schools. Classes lasted for an hour every fortnight in the schools, and once a month in the community libraries. They covered education on a range of topics, from physical and mental changes experienced during adolescence to STIs, family planning and disease prevention. and in some cases with their mothers. The interviewed BRAC staff confirmed the adoption of hygienic practices by adolescent girls during menstruation.

Family planning methods were also a popular topic with girls who typically could not discuss this with mothers or older female relatives. Yet most girls were unclear about the causes and symptoms of STIs and HIV and AIDS. On the other hand, boys were more interested in sexrelated information, including AIDS, STIs and family planning methods. They were also keen to disseminate this knowledge to peer networks in the villages. Some boys mentioned spending time with friends watching pornographic films. In general, adolescent boys appeared to be aware that compared to girls they had access to more sexual freedom and rights, and could openly talk about masturbation and satisfying their sexual desires.

Participants also learnt and spoke about their bodies and sex and thus contributed to breaking the taboo and the shame surrounding such issues. However, some female teachers were embarrassed to discuss sexual and reproductive health issues with boys and thus failed to do so. Adolescents reported that teachers preferred to focus mainly on menstruation, early marriage and family planning topics, and skimmed over the topic of STIs, including HIV and AIDS, resulting in several misconceptions about this topic among interviewees. Finally, ARHE classes apparently provided an opportunity for some adolescent girls and boys to speak and share their feelings about love and 'romance' (Rashid, 2000).



Adolescent Development Programme (ADP)

# Adolescent girls and boys aged 10-19.

#### BRAC

In 1993, BRAC first set up reading centres for Bangladeshi girls aged 10-19 to come together, socialise and retain their literacy skills after primary school. Since then the ADP has evolved, and apart from life skills and livelihood training, gradually incorporated other components. ADP's key components include the adolescent clubs that provide safe spaces where girls can read, socialize, play games, participate in cultural activities and have open discussions on personal and social issues with their peers. One adolescent leader is responsible for the operation of each club. There is also the Adolescent Peer Organized Network (APON), which provides fivemonth life skills training. Areas taught can be classified into four broad categories: health, environment, legal and social issues. The health section includes reproductive health, family planning, birth registration, STIs, maternity and childcare, and consequences of iodine deficiency. Girls are also offered livelihood

training courses to empower them financially through training in areas such as tailoring, journalism and beauty care. Duration of each class is two hours and classes take place twice a week. Participants are encouraged to disseminate their learning among family members and other adolescents who do not participate in the course. On completion of the course, ideasharing meetings are arranged

BRAC has been constantly evaluating ADP components using mixed methods and also assessing spill-over effects. A study by Alim et al. (2012) assessed the reproductive health knowledge level and understanding of participating girls and boys, and how they applied it in their own lives. The study used mixed methods to explore two themes: gender discrimination and sexual and reproductive health knowledge. It focused on participants in ADP clubs formed in 2008 that continued into 2009, that is, clubs which ran for two years and compared them to adolescents in non-ADP areas. Two more studies focused on APON participants (Khan et al., 2003; Kabir et al., 2007).

The first study (Khan et al., 2003) used mixed methods. Two hundred adolescent girls were interviewed through a structured questionnaire to measure their knowledge, attitude and extent of knowledge dissemination. In addition, five FGDs were held with course participants and four with their mothers. In total, 46 adolescents and 39 mothers attended the discussions.

Significant difference was observed in respondents' sexual and reproductive health knowledge between ADP and non-ADP areas. In particular, adolescent girls from ADP areas had complete knowledge of adolescent reproductive health. They were also aware of personal health and hygiene and had a good understanding of menstruation and the need to maintain good hygienic conditions. On the other hand, boys from ADP areas were well informed about wet dreams, their causes and how to deal with them contrary to boys in non-ADP areas. In addition, both girls and boys had good knowledge of family planning methods; the problems of child marriage; pregnancy, preand postnatal care; and danger signs for pregnant mothers. They also increased their knowledge of HIV and STIs and even discussed sharing their knowledge about HIV and family planning with their relatives and neighbours (Alim et al., 2012).

The first APON assessment (Khan et al., 2003) compared two batches of APON participants to a non-APON sub-group. The percentages answering correctly about female and male contraception were significantly greater than those of non-APON participants. However, the percentage correctly answering items about oral birth control pills was not significantly greater than the non-APON participants for the first APON batch but was significantly greater for the second APON batch. The percentage correctly answering items about the spread of AIDS was significantly greater than the non-APON participants. The percentage correctly answering items about iodine deficiency was not significantly greater than the non-APON



once a month for the next 13 months.

In addition, there are communication, awareness and advocacy activities, which promote the interaction and dialogue among adolescents, their parents and influential persons in the community. The second study (Kabir et al 2007) used a quantitative survey to interview 3,175 adolescents. Respondents were selected from APON course participants who graduated between 2003 and 2005. In addition, the evaluation included case studies — eight female and seven males. Comparative analysis was conducted against the 2005 Bangladesh Adolescent Survey. participants for the first APON batch, but was significantly greater for the second APON batch. The mean age of respondents was 16. Their attitude on some issues was positively different from that of non-participants. They also disseminated their knowledge to others, especially among peer adolescents, as they found difficulty talking to parents about sexual health issues.

The second study (Kabir et al. 2007) found that in terms of reproductive health and HIV and AIDS, male respondents were more knowledgeable than female respondents about permanent family planning methods. Most of the APON/ADP respondents thought that both husband and wife should discuss and take decisions about family planning matters. Both male and female APON/ADP and Bangladesh Adolescent Survey respondents suggested that 35 should be the maximum age suitable for first childbearing. ADP male and female suggested that the minimum ages could be 15 and 13 years respectively. BAS respondents indicated 11 or 12 as the maximum number of desired children, while ADP respondents desired a maximum of four or five. When asked about health-seeking behaviour most adolescents (36% for ADP and 35% for BAS) went to allopathic medicine centres. The majority of participants had heard of HIV and AIDS but of no other STIs. All girls found that APON was useful in terms of teaching them personal health and hygiene, especially how to deal with menstruation, which they did not know before. This knowledge was widely disseminated and well received by their friends, neighbours and other female family members.



Adolescent Development Programme (ADP) in Border Regions BRAC The programme started in 2008 and continued at the time of the evaluation in 2010. It has been implemented in remote villages at six border districts neglected by NGOs.	Adolescents aged 10- 19 in border districts, their parents, and the community.	There are a few main differences between ADP and Border ADP. In border areas there was no BRAC education programme or ADP activities. The Border ADP provided only life skills and not livelihood training. In addition, audio-visual materials on HIV and AIDS, gender equality, and girls' education were developed for the first time as they were not part of the conventional ADP.	The evaluation by Ara and Das (2010) used mostly quantitative methodology. It was based on two rounds of survey data on the same adolescents collected in 2008 (baseline) and 2010 (follow-up). The sample size for the baseline survey was 1,534 adolescents (767 girls and 767 boys). Of them, 616 were in the intervention group and 918 were in the control group. Of these, 797 were successfully revisited in 2010, of whom 352 were from the intervention group and 445 were from control group (attrition rate was 42%). The study also conducted a few case studies involving interviews.	The evaluation found that respondents' awareness regarding any problem faced during periods increased among both groups but was more pronounced (from 38% to 46%) among the intervention group. The proportion of adolescent girls being restricted for any activities during menstruation decreased from 47% to 41% among the intervention group but decreased only by 1% (from 38% to 37%) among the control group. Finally, respondents' awareness regarding transmission of HIV and AIDS, such as unprotected sex, non-hygienic injection and unprotected sex with sex workers, increased significantly among the intervention group (Ara and Das, 2010).
Kishori Abhijan With funding from the European Commission, the project was implemented between 2001-2010 in collaboration with BRAC, the Centre for Mass Education and Science (CMES), Save the Children and the Ministry of Women and Children Affairs. It targeted 600,000 adolescents aged 13-19, including 50,000 boys, in 27 rural districts.	Adolescent girls aged 13-22.	It provided life skills, leadership and livelihood training, including vocational skills such as poultry care, handicrafts, sewing, photography and teacher training.	The Population Council and the Bangladesh Institute of Development Studies (BIDS) evaluated the project, focusing on three of the 14 districts. The evaluation used mixed methods – a longitudinal quasi- experimental approach and qualitative techniques. The baseline was conducted in 2001 and a follow-up survey in 2003. The former included 5,024 respondents aged 13-22, and the latter, 2,214 girls and young women from the baseline. In addition, 476 migrated baseline respondents were also interviewed. Qualitative data	In terms of the project health-related outcomes, the percentage of respondents with knowledge of STIs increased from 23% in 2001 to 45% in 2003, with programme members exhibiting a greater increase (Amin and Suran, 2005). Participants were more likely to give accurate answers to questions about transmission of HIV and about aspects of female reproductive biology. All participants demonstrated increased knowledge about health, family planning, nutrition, and the causes of disease (Amin, 2011).



			was collected throughout the three-year study period in the form of detailed case studies in which 47 selected respondents were contacted at various points in time (Amin and Suran, 2005).	
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents (BALIKA) BALIKA ran between 2012 and 2016. It was implemented by the Population Council, the Population Services and Training Center (PSTC), mPower Social Enterprises (mPower), and the Center for International Development Issues Nijmegen (CIDIN) in three districts - Khulna, Narail and Satkhira – in Southwest Bangladesh.	Girls aged 12-18.	BALIKA's key aim was to empower girls and delay their marriage. Three key interventions were used: provision of educational support; awareness raising training about gender rights; and livelihood training. In addition, the programme included community mobilisation, establishment of safe spaces, and provision of basic SRH information.	In 2013 a mixed methods baseline study was conducted in 96 villages in three districts on issues of education, livelihood, sexual and reproductive health, and social life. The final impact evaluation was carried out by the Population Council at the end of the programme. This evaluation combined qualitative and quantitative methodology. In order to assess the impact of the three distinct interventions relative to each other and relative to a control population, BALIKA included an RCT with four arms. Girls in Arm 1 received tutoring in mathematics and English (in- school girls) and computing or	In terms of its sexual and reproductive health effects, girls in participating communities showed that such knowledge and related practices improved significantly compared to girls in the control communities. Girls who participated in all three interventions had higher indicators than those in control communities. BALIKA's RCT found that girls in Arm 1 (education) showed a 65% increase in their family planning knowledge, those in Arm 2 (gender training) a 33% increase, and those in Arm 3 (livelihood training) a 42% increase compared to the control group. Girls in Arm 2 showed the largest increase in their HIV knowledge (89%) followed by girls in Arm 1 (69%) and Arm 3 (56%) compared to the control group. In addition, girls in Arm 1 showed a 122% increase in receiving treatment for reproductive health problems and girls in Arms 2 and 3 a 76% increase. Girls in Arm 2
Funding was provided by the Embassy of the Kingdom of the Netherlands.			school girls). Girls in Arm 2 received life skills training, including information about gender rights and negotiation,	about menstruation, girls in Arm 3 a 123% increase, and girls in Arm 1, a 67% increase compared to the control group. Finally, girls in Arms 2 and 3 showed an increase of 36% in use
It targeted more than 9,000 adolescent girls in 72 intervention communities and 24 control communities.			critical thinking, and decision- making skills. Girls in Arm 3 received livelihood training in computers, mobile phone repair, photography, or conducting financial transactions via mobile	of menstrual hygiene products compared to the control group (Amin et al., 2016).



			were the control group with no services (Amin et al., 2016).	
Shonglap Education Project Shonglap	Girls aged 12-19 who have dropped out of school.	Shonglap is a 12-month programme consisting of nine months of literacy, basic education and life skills training,	A mid-term assessment (Sigvaldsen and Shahjahan, 2012) used mixed methodology. The baseline was conducted in	The project prioritises vocational development, but its holistic approach has effects on several areas. Compared to a baseline of 27%, almost all participating girls were aware of HIV and
It started in 2006, but in 2009, Operations Day's Work became involved, thus providing most of the funding.		followed by three months of training in income-generating activities. REFLECT methodology is used which promotes teacher- student interaction, and self- awareness and confidence building. It is also possible for	2009 and the mid-term review in October 2011. Participating and non-participating girls, animators, supervisors and stakeholders were included. The study also provides some information on what happens	AIDS and how it is contracted. On the contrary, non-participants (50%) remained uninformed about the matter. Participants also improved their knowledge around basic health care, hygiene and sanitation. Although only 8% at baseline could name all seven main diseases, a significant number could name more than
Shonglap has aimed to reach around 100,000 girls.		some girls to take a loan for chosen activities. Girls participate in groups. Each group is led by an animator, a young woman from the same village with higher levels of education and interest in community work (normally aged 20-25). There is also a Shonglap Support Team made up of village leaders, guardians and other external stakeholders to provide guidance to the group.	after the completion of the programme.	three or at least two names (48% and 40%) in 2011. More than half (64%) also named all the vaccines to preventable diseases ((Sigvaldsen and Shahjahan, 2012).

phone. Finally, girls in Arm 4



# **Annex II: Methodology**

# Search grids for Google and Google Scholar search

Population	Theme	Intervention Type	Thematic Terms	Research Terms
Girl	Bangladesh	Girls club	Attitude	Impact
Adolescent	Empowerment	Peer support	Gender norm	Evaluation
Youth	Norm change	Mentor	Social norm/norm change	Assessment
'Young women'		Adolescent/Youth development programme	Expectation	Analysis
		Social network	Perception	Research
		Life skills	Physical violence	Results
		Rights	Sexual violence	Programme/Project
		'Soft skills' 'interpersonal skills'	Harassment/Eve teasing	Intervention
		'Behaviour Change Communication'	Rape	Interview
		Media	Workplace violence	Participatory
		Campaign	Transactional sex	Study
		Marketing/social marketing	Age of marriage	
		Youth group	Empowerment	
		Community dialogue/discussion	Early/child/forced marriage	
		Positive deviance	Negotiation skills	
		Soap opera	Decision making	
		Radio/TV	Leadership	
		Magazine	Voice/speaking out	
		School material	Confidence	
		Theatre/drama/skit/puppet	Friends/social network	
		Cell phone/SMS/ internet/ICT/computer	Dowry/dowry related violence	
		Safe Spaces	Participation	
		Masculinity	Mobility/freedom of movement	
			Discrimination	
			Self-esteem	

### Table 1: Gender and empowerment



Table 2	: Education	and	learning
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Population	Theme	Intervention Type	Thematic Terms	Research Terms
Girl	Bangladesh	Education	Enrolment	Impact
Adolescent	Education	Literacy	Attendance	Evaluation
Youth		Cash transfer/in-kind transfer	Exam results/grades/ qualifications	Assessment
'Young women'		School building	Learning outcomes	Analysis
		School	Vocational skills	Research
		Primary school	Staff attitudes	Results
		Secondary school	Violence	Programme/Project
		Quality	Attitudes towards violence	Intervention
		Teachers	Physical violence	Interview
		New schools	Sexual violence	Participatory
		'Girl friendly'	Harassment/Eve teasing	Study
		Non formal	Rape	
		Informal	Transactional sex	
		Second chance	Early/child/forced marriage	
		Catch up	Corporal punishment	
		Bridge	Social network	
		Ration	Confidence	
		Girls clubs	Friends	
		Club	Decision making	
		After school club	Expectation	
		School feeding	Negotiation	
		Scholarship	Retention	
		Mobile school	Transition	
		Radio/newspaper	Completion	
		Computer/internet	Distance	
		Mobile/cell phone/SMS	Accessible service	
			Household/domestic chores	
			Time use	
			Menstruation	



## Table 3: Economic empowerment

Population	Theme	Intervention Type	Thematic Terms	Research Terms
Girl	Bangladesh	Economic empowerment	Assets	Impact
Adolescent	Economic empowerment	Skill	Income	Evaluation
Youth		Business	Savings	Assessment
'Young women'		Entrepreneurship	Livelihoods	Analysis
		Grant	Labour force participation/ employment	Research
		Start-up capital	Ownership	Results
		Financial literacy	Inheritance	Programme/Project
		Microfinance	Social network	Intervention
		Savings	Confidence	Interview
		Bank	Friends	Participatory
		Loan	Decision making	Study
		Cash transfer/In-kind transfer	Expectation	
		Work experience/ apprenticeship	Negotiation	
		Training	Transactional sex	
		Economic opportunities	Migration	
		Vocational skills	Child labour	
		Mobile/SMS/cell phone/ ICT/computer/ internet	Domestic work	
		Informal economy	Sex work	
			Street children	
			Trafficking	
			Workplace harassment/violence	
			Unemplyment/underem ployment	
			Land	
			Agriculture	
			Garment industry	
			Work	
			Public works	



## Table 4: Physical and psychosocial wellbeing

Population	Theme	Intervention Type	Thematic Terms	Research Terms
Girl	Bangladesh	Youth friendly service	Weight	Impact
Adolescent	Health	Sexual health service	Nutritional status	Evaluation
Youth		Reproductive health	Micronutrient deficiency	Assessment
'Young women'		HIV/AIDS	BMI	
		Nutrition	Contraception/birth spacing	Analysis
		Supplement	Fertility	Research
		Staff training	Maternal health	Results
		Counselling	Pregnancy	Programme/Project
		Support	Antenatal/Postnatal	Intervention
		Helpline	Abortion	Interview
		Mental health	Anaemia	Participatory
		Psychosocial /psychological wellbeing	STI	Study
		(Sex) health education/ information/training	HIV/AIDS	
		Health insurance	Malaria	
		Fee waiver	ТВ	
			Menstruation	
			Emotional wellbeing	
			Anxiety	
			Depression	
			Friends	
			Social network	
			Relationship	
			Confidence	
			Life satisfaction	
			Happiness	
			Service access/use	
			Height	
			Obesity	
			Tobacco	
			Substance	



## Table 5: Databases and websites searched

Academic databases searched
Econlit
ERIC
PubMed
Web of Science
PsycINFO
Online libraries
3ie evaluation Database
Innovations for Poverty Action/JPAL Database
International organisation websites
Asian Development Bank
DFID Development Tracker
ILO
Independent Evaluation Group
OECD/ SIGI
UNAIDS
UNDP
UNESCO
UNICEF
UN Women
USAID
World Bank
International NGO websites
Aga Khan Foundation
BRAC Evaluation Database
CARE International
Girl Guides
International Center for Research on Women – ICRW
International Planned Parenthood Federation
Marie Stopes
Plan International
Population Council
Save the Children Evaluation Database
World Vision
National and regional NGO websites
Asia Child Marriage Initiative



Bangladesh Population Health Consortium - CWFP
Bangladesh Institute of Development Studies - BIDS
Campaign for Popular Education - CAMPE
Center for Mass Education in Science - CMES
Concerned Women for Family Development - CWFD
Family Planning Association of Bangladesh
Grameen
Manusher Jonnya Foundation – MJF
Nari Maitree
Noakhali Rural Development Society – NRDS
Plan Bangladesh
Promoting Human Rights and Education in Bangladesh - PHREB
Rangpur Dinajpur Rural Services - RDRS
Reproductive Health Services, Training and Education
Save the Children Bangladesh
South Asia Partnership Bangladesh -SAP
Steps Towards Development – STD
Thengamara Mohila Sabuj Sangha - TMSS
Urban Family Health Partnership – UFHP
Voluntary Services Overseas Bangladesh
Hand-searched programmes
Hand-searched programmes Adolescent Development Programme – ADP
Hand-searched programmes         Adolescent Development Programme – ADP         Adolescent Development Sponsorship Programme
Hand-searched programmes         Adolescent Development Programme – ADP         Adolescent Development Sponsorship Programme         Adolescent Peer Organised Network – APON
Hand-searched programmes         Adolescent Development Programme – ADP         Adolescent Development Sponsorship Programme         Adolescent Peer Organised Network – APON         Bangladeshi Association for Life Skills, Income and Knowledge for Adolescents – BALIKA
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Hand-searched programmes         Adolescent Development Programme – ADP         Adolescent Development Sponsorship Programme         Adolescent Peer Organised Network – APON         Bangladeshi Association for Life Skills, Income and Knowledge for Adolescents – BALIKA         BRAC Mentoring Programme         Chars Livelihoods Programme         Developing Aspirations and Livelihoods for Adolescents – DALA         DFID Programme to Accelerate Improved Nutrition for the Extreme Poor in Bangladesh         Economic Empowerment of the Poorest Programme         Empowering adolescents through education and vocational skills training to become agents of social transformation         Employment and Livelihoods for Adolescents – ELA         Female Secondary School Stipend Programme – FSP/FSSP         Girl Power Programme         Growing Up Safe and Healthy - SAFE         Happy Homes Initiative
Hand-searched programmesAdolescent Development Programme – ADPAdolescent Development Sponsorship ProgrammeAdolescent Peer Organised Network – APONBangladeshi Association for Life Skills, Income and Knowledge for Adolescents – BALIKABRAC Mentoring ProgrammeChars Livelihoods ProgrammeDeveloping Aspirations and Livelihoods for Adolescents – DALADFID Programme to Accelerate Improved Nutrition for the Extreme Poor in BangladeshEconomic Empowerment of the Poorest ProgrammeEmpowering adolescents through education and vocational skills training to become agents of social transformationEmployment and Livelihoods for Adolescents – ELAFemale Secondary School Stipend Programme – FSP/FSSPGirl Power ProgrammeGrowing Up Safe and Healthy - SAFEHappy Homes InitiativeILO and EU TVET Reform Project
Hand-searched programmes         Adolescent Development Programme – ADP         Adolescent Development Sponsorship Programme         Adolescent Peer Organised Network – APON         Bangladeshi Association for Life Skills, Income and Knowledge for Adolescents – BALIKA         BRAC Mentoring Programme         Chars Livelihoods Programme         Developing Aspirations and Livelihoods for Adolescents – DALA         DFID Programme to Accelerate Improved Nutrition for the Extreme Poor in Bangladesh         Economic Empowerment of the Poorest Programme         Empowering adolescents through education and vocational skills training to become agents of social transformation         Employment and Livelihoods for Adolescents – ELA         Female Secondary School Stipend Programme – FSP/FSSP         Girl Power Programme         Growing Up Safe and Healthy - SAFE         Happy Homes Initiative         ILO and EU TVET Reform Project         Innovation through Sport: Promoting Leaders Empowering Youth – ITSPLEY



Kishoree Kontha - KK
Meena Communication Initiative - MCI
Meyeder Janna Nirapad Nagorikatta - MEJNIN
Padakhep Savings Programme
Post-Literacy and Contuinuing Education Project - PLCE
Shishuder Jonno
Skills and Training Enhancement Project – STEP
Social and Financial Empowerment of Adolescents – SoFEA
Tanisha
Tipping Point
Underprivileged Children's Education Programme – UCEP
United Nations Universal Access Project
Urban Partnership for Poverty Reduction Programme
Vulnerable Group Development Programme
We Can Campaign

### **About GAGE**

Gender and Adolescence: Global Evidence (GAGE) is a nine-year longitudinal research programme generating evidence on what works to transform the lives of adolescent girls in the Global South. Visit www. gage.odi.org.uk for more information.

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