

Mental health among primary school students and their teachers in Bangladesh

(A Rapid Need Assessment Survey)



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Executive Summary

Background

According to the World Health Organization (WHO), mental health is a state of mental well-being that enables people to cope with the stresses and is an integral component of health and well-being. An individual's mental health affects his/her thinking, feeling, and day-to-day activities of life. Mental health conditions include mental disorders and psychosocial disabilities as well as other mental states associated with significant distress, impairment in functioning, or risk of self-harm. Evidences suggest that a large proportions of children had been suffering from mental health disturbances during and after the COVID-19 pandemic. Various mental disturbances have also been reported after the recent mass uprising of July-August 2024.

Trauma is a kind of mental state that is created during violence or any other natural calamities such as floods and cyclones. Similarly, if any trauma is inflicted on a child by his or her parent(s) or from any other sources and, if it is not protected with proper means of support (physical, mental, or logical), it creates huge emotional issues for the child.

Well-being is a kind of mental state that defines a good mental condition. It is broadly defined as the state of being comfortable, healthy, and happy and plays a critical role in children's academic, social, and emotional development. It has long been recognized that students' well-being directly influences their learning outcomes, academic success, and personal growth. In school settings, the absence of well-being destroys students' resilience, stress management capacity, and lower essential social skills, which are crucial for both academic challenges and everyday life.

Bangladesh has faced repeated challenges in recent years, including prolonged political unrest, street violence, extreme weather events like flooding and cyclones, and law enforcement agencies' firing on students during anti-discrimination protests. Primary school students are especially vulnerable to such disruptions, which can have harmful effects on their mental health. This is particularly concerning since such events occur during their critical school years; as a result they may experience emotional reactions, cognitive displacement, and social dysfunction, affecting both their minds and behaviors.

In order to demonstrate the impact of these changes on the minds of students of primary schools in Bangladesh, a nationwide study was conducted among the parents, teachers, and community members. Carried out during October-November 2024, the study was undertaken jointly by CAMPE and Brac University IED, with collaboration from CAMPE's partner organizations spread across the country. The study was an attempt to determine the psychosocial reactions in children on the basis of their family members', teachers', and community members' perceptions.

Purpose of the study

The purpose of the study is to understand the present mental health conditions of the primary school students of Bangladesh after the recent political development in the country (the July 2024 uprising), like the social unrest, mass killings on the street, natural calamities like the devastating floods, and a widespread shift in the school curriculum.

Methodology of the study

This study adopted a mixed-methods approach, integrating both quantitative and qualitative methods for comprehensive data collection and analysis. The various methods included questionnaire surveys, Focus Group Discussions (FGDs), and Key Informant Interviews (KIIs). The research process also incorporated national and sub-national consultations, formal and informal discussions, and a literature review. Around 203 partner organizations of CAMPE were selected from eight divisions of Bangladesh to conduct the mental health survey. Respondents included parents of primary school students, teachers, and representatives of community people.

All selected organizations conducted the group survey and FGDs assigned for them. In both the cases (survey and FGD) respondents were taken from the willing groups of parents, teachers, social workers, and other knowledgeable members from the community.

Interviews of key informant (KII) individuals were taken by trained research assistants. Key personnel's were taken from the community of government education officials, knowledgeable teachers, and social workers. Finally a national consultation was done with the relevant experts from different field of health, education and social welfare.

Findings

The survey results underscore the significant mental health challenges faced by children across Bangladesh because of the devastating floods that affected parts of the country during June to September 2024. Key issues include elevated levels of depression, despair, fear, and panic, along with disruptions to daily routines, such as limited opportunities to go outdoors or engage in sports. Additionally, notable regional differences were observed in the severity and types of challenges faced.

The NGO leaders and teachers pointed to the potential roles that institutions can play in improving children's mental health. They suggested interventions and highlighted the extent to which these are currently implemented or planned across different regions in Bangladesh. Such data serves as a guide for policymakers, educators, and other stakeholders to address critical gaps and capitalize on strengths. NGO leaders and teachers suggested that counselling and awareness campaigns should be prioritized, and discussion meetings with students and parents may also be useful in such situation.

It appeared from the focus group discussion (FGD) that most of the students were directly or indirectly affected by the political and natural disturbances. Some students in the big cities have witnessed killings on the streets, firing on unarmed people, beating of protesters, and damaging of civilian properties. Similarly, students also witnessed people's suffering during the floods that took place in their living places. They saw how people were forced to leave their houses to take refuge in shelter homes or highlands where both people and cattle had to stay together.

Many participants in the FGD reported that some kind of restlessness and confusion have developed in the behavior of children. Recent curricular change, school closure during floods, and political unrest created a severe, devastating effect on the behavior of the students. Participants also mentioned that they needed immediate counselling in school and/or outside to cope with these changes. The teachers mentioned that these changes not only created mental

disturbance in students but also produced a important effects on their own professional, personal, and familial lives as well.

Regarding children's mental health, experts in their KI believed that students' psychological well-being and mental health are at stake. They had to pass through a critical pandemic-induced lockdown situation, displacement during recent floods, and street-level bloody clash between people and police during July-August 2024. Those scary events created a huge traumatic effect on the minds of children. Psychologists and social workers believe that such traumatic experiences may cause various negative effects on the students' psychological and social well-being. It was found from the discussions with the KIIs that most of the schools are not attractive places for the students compared to other places outside school. Therefore, it is necessary to make the school a place of interest and fun through various co-curricular activities rather than pushing hard to make them pass exams.

The speakers at the national consultation reviewed the mental health scenarios from different perspectives and mentioned that the government, NGOs, and schools should play a pivotal role in keeping students' sound mental health by reducing their stress and anxiety. Attention should be focused on all recreational activities to overcome trauma. In this regard, the participants emphasized the importance of physical activities, like games, sports, and cultural activities. They also indicated that in this case, the school playground could have been a big help, but many schools, unfortunately, do not have such playgrounds.

Recommendations

The study findings generated a few recommendations for various stakeholders. Category-wise, the recommendations are given in the following:

A. For School

- Mental health education initiatives should be implemented to address and mitigate mental health challenges and reduce stigma among primary school students and their teachers. These initiatives should include regular communication with parents, awareness campaigns to highlight students' mental health needs, and the provision of alternative activities to engage students and minimize their dependency on electronic devices, such as mobile phones and video games.
- To foster a learning-supportive environment in schools, community participation should be actively promoted.
- Schools should cultivate mutually respectful and cordial relationships between students, teachers and parents, emphasizing compassion, empathy, dignity, and positive human interactions.
- Schools should organize and encourage students in sports, cultural, social, and environmental development programs involving teachers, students, and guardians.
- To support students' mental health and well-being, school-based counseling programs such as 'Psychological First Aid' (PFA) should be implemented. A support group may be

formed to address students' mental health concerns promptly. Collaboration with NGOs experienced in counseling can enhance the quality and effectiveness of such programs by leveraging their expertise and resources.

B. *For Government Concerned Agencies*

- Integrate mental health education and services provision into the national primary education curriculum to raise awareness and provide essential support to students.
- Design and pilot school-based counseling activities and gradually expand these services nationwide, ensuring that all students have access to necessary mental health support.
- Train teachers and staff to recognize students' mental health issues and refer them to appropriate mitigation resources.
- Ensure adequate budget allocation for establishing access to mental health services, particularly for primary school students.
- Launch mid-day meal program in all schools to guarantee students receive necessary nutrition, supporting their health and overall well-being.
- Establish supportive relationships with relevant organizations including NGOs to strengthen the network for mental health support for students.
- Conduct research on a priority basis to investigate the root causes of mental health challenges among primary school students and develop strategies to prevent mental health deterioration.
- Seek airtime on both government and private TV channels to broadcast programs that raise awareness about mental health issues, helping to reduce stigma and promote understanding across the population.

C. *For parents*

- Foster a supportive environment at home by positive thinking and behavior to ease children's tension and anxiety. Parents should make dining times a bonding moment, coming together to offer emotional support and connection.
- Create opportunities for children by providing play-materials and allowing them to engage with friends and peers, which promotes mental well-being and social connections.
- Encourage participation in local games and cultural activities to provide children with healthy outlets, preventing involvement in stressful situations and promoting their overall emotional and social growth.

Conclusion

There is an increasing tendency among students to disengage from their studies, leading them to drop-out at various times. This is a concerning issue in Bangladesh, driven by recent political unrest, natural disasters, and social disturbances. The loss of interest in education has significantly impacted students' mental health, causing trauma, fear, and social dysfunction. To address these challenges, it is crucial to integrate mental health education and counseling in schools, foster positive relationships among students, teachers, and parents, and enhance community involvement. Comprehensive support from schools, the government, and communities is essential to help students overcome these issues and thrive. Addressing this issue is vital to building an educated nation.

Table of contents

Executive summary	
Preface	
Background	1-2
Purpose of the study	3
Specific objectives	4
Methodology	4
Questionnaire survey	4
Focus group discussion	4
Key informant interview	4
Formal and informal consultation	4
Survey sample	5
The interviewing process	6
Findings of the study	6
Findings from general survey	6-7
The feeling of mental well-being	8
Children’s reaction to the political unrest	9-10
Effect of flood on the behaviors of children	11
Institutional responsibility	12-13
Government role to handle the problem	14-16
Psychological and behavioral changes taking place among students	17
Effect on students’ academic performance	17
Behavior disruption in students	17
Psychological changes in teachers	18
Views of selected experts (KII)	18-19
Excerpts from the National Consultation	20
Discussion	21-22
Recommendations	23
Conclusion	24
References	25-26
Media Coverage and News Links	27-28
Annexure	29-59

Preface

CAMPE is a national coalition of nearly a thousand NGOs, teacher groups, researchers and education rights activists working for achieving the Sustainable Development Goals (SDGs) particularly SDG4 in Bangladesh. It started its journey in 1990 to achieve the target of quality education for all (EFA).

Mental health of students and teachers is one of the key elements that facilitates achievement of quality education. Bangladesh emphasizes equipping students with good health and nutrition. The purpose of this approach is to help students adjust to teaching learning and emerging challenges that needs to be addressed within the school system and society.

It may be mentioned here that students, teachers and guardians experienced significant mental stress during the recent student movement and subsequence violence by the-then autocratic regime in the country. This situation has subjected many students to psychological stress leading to various forms of trauma that persist even now.

Moreover, severe flooding, immediately after the ouster of the autocratic regime, further unsettled communities including students and teachers in different areas of the country. As a result, many of them are still struggling to continue with regular living where education is getting less and less priority day by day.

Considering this situation, CAMPE and BRAC-IED, BRAC University jointly took the initiative to conduct a "Rapid Need Assessment Survey" to assess the mental health needs of students and teachers affected by the recent crisis. As a part of this, CAMPE, with the help of its partner NGOs, conducted focus group discussions (FGDs), sub-national and national consultations to collect opinions/views of students, guardians, teachers and concerned government and non-government officials/experts on how to mitigate the mental health issues and challenges. We focused on the qualitative survey information for this study.

In addition, a qualitative survey was also undertaken by CAMPE along with its 203 partner organizations and a large number of community members and subject experts based on some important open questions regarding children's psychosocial transformation due to recent political unrest, violence, natural disasters and a shift in curriculum. FGDs & national consultation generated a few recommendations for various stakeholders at the school level, teachers, practitioners and decision makers.

We sincerely hope that the survey findings will be helpful to primary students, teachers, parents, Government officials and non-governmental organizations (NGOs) particularly those who have been dealing with mental health issues.

We gratefully acknowledge the support received from teachers, students, guardians, local administration, education officials, collaborating NGOs and government officials during the survey. We would like to recognize the pragmatic guidance and support provided by experts, phycologists, media persons, high-level Government officials and social activists in this regard.

We are particularly grateful to BRAC-IED, BRAC University for supporting our initiative and helping us in promoting good mental health and quality education for all.

We are also grateful to Dr. Ahmed Mushtaque Raza Chowdhury for kindly reviewing the report and for providing his professional feedback.

Our heartfelt thanks to Prof. Muhammad Nazmul Haq, his team and CAMPE team for helping us conduct the survey and in preparing this report.

We invite all concerned to explore the insights provided in this report and hope to stimulate meaningful discourse and positive transformation in the mental health scenario of primary education.

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Executive Director

Campaign for Popular Education (CAMPE)

Background of the study

According to the World Health Organization (WHO), mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community (WHO, 2022). It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships, and shape the world we live in. Mental health is considered to be basic to human rights, which are crucial to personal, community, and socio-economic development. An individual's mental health affects his/her thinking, feeling, and day-to-day life. It is very crucial to determine how we handle stress, relate to others, and make choices. Mental health contributes to every stage of our life, from childhood and adolescence through adulthood and later life.

Mental health conditions include mental disorders and psychosocial disabilities as well as other mental states associated with significant distress, impairment in functioning, or risk of self-harm. People with mental health conditions are more likely to experience lower levels of mental well-being, but this is not always or necessarily the case (WHO, 2022). In an online cross-sectional study in Bangladesh, conducted in 2020 with 384 parents having at least one child aged between 5 and 15 years, it was found that a large proportions of their children had been suffering from mental health disturbances during the period of the Covid-19 pandemic-induced lockdown (Yeasmina et al., 2020). Another cross-sectional study conducted by Afrina et al. (2022) found that predominantly urban residents (87.27%, n = 281) suffered from various mental disturbances. They indicated that about 67.08% of adolescents suffer from depression, 49.38% manifested anxiety, and 40.68% showed the symptom of stress measured according to the Depression, Anxiety, and Stress Scale-21 (DASS-21) during the COVID-19 pandemic period (Lovibond & Lovibond, 1995).

Another researcher, Ria et al. (2022), assessed the prevalence of depressive symptoms among school-going adolescents (aged 10–19 years) in Bangladesh and found sadness (45.3%) and aggression (40.5%) were the most common depressive symptoms, followed by confusion (27.7%), worthlessness (21.8%), fatigue (21.5%), and insomnia (18.0%). In another study conducted by Khan et al. (2017) in Bangladesh, it was found that about 25% of the 15-16-year-old students had depressive symptoms, which were significantly associated with their low life satisfaction and feeling 'unsafe' at school. In a more recent work, Al-Mamun et al. (2024) assessed the prevalence of emotional and behavioral problems among the adolescents in Bangladesh. These findings are some clear indications of the connection between students' present mental conditions and previous unexpected environmental situations, either in school or in the community.

Trauma is also a state of mental health created after an event that does not correspond with everyday situations and can give rise to feelings of severe stress and unhappiness (Wicks-Nelson & Israel, 1997), which disrupts children's personal and social lives. Emotional struggles as a result of interpersonal trauma could steer emotional vulnerability as feelings of violation and betrayal reside within the sufferer (Lilly & London, 2015). Such feelings can disrupt an individual's emotional response system and lead to internal regulation difficulties at a later stage (Barlow, Goldsmith-Turow, & Gerhart, 2017).

If any trauma is inflicted on a child by his or her parent(s) or from any other sources and if it is not protected with proper means of support (physical, mental, or logical), it creates huge emotional hesitation in the child. Therefore, a sense of safety and support is paramount in the early years to encourage children to explore their environment confidently and independently, despite any possibility of failure (van Rosmalen, van de Horst, & van der Veer, 2016).

The COVID-19 pandemic and other natural calamities like cyclones, floods, and river erosions severely disrupt education systems around the world. These natural events forced closing down of schools and displace people from their own residences to other places. This creates students to switch from traditional in-person learning to remote or hybrid learning environments. This shift not only affected academic achievement but also brought unprecedented stress to both students, parents, and teachers. Research indicates that younger students, particularly those from low socioeconomic backgrounds, experienced greater academic setbacks, while both students and teachers reported increased stress due to the challenges of adapting to remote learning and the uncertainties caused by the pandemic (Hammerstein et al., 2021). Another researcher found that students globally experienced heightened levels of anxiety, stress, and depression due to the uncertainties surrounding the pandemic and disruptions in their daily lives (O'Brien et al., 2022). In Bangladesh, the shift to online learning due to natural calamities and other socio-economic difficulties led learning to a crisis emphasizing the importance of addressing mental health and well-being in adapting to the new educational demands (Bodrud-Doza et al., 2020).

Well-being is a mental state that defines a good mental condition. It is broadly defined as the state of being comfortable, healthy, and happy and plays a critical role in children's academic, social, and emotional development. It has long been recognized that students' well-being directly influences their learning outcomes, academic success, and personal growth (Bird & Markle, 2012). In school settings, absence of well-being destroys students' resilience, stress management capacity, and lower essential social skills, which are crucial for both academic challenges and everyday life. Furthermore, students' well-being has been strongly linked to academic success and is now a significant focus of educational research, indicating that fostering emotional health is necessary for overall development (Vesely et al., 2018). Children and adolescents, especially during critical developmental periods, are particularly vulnerable to stress and emotional challenges. Schools, as one of the most influential environments in children's lives, are ideally positioned to provide emotional support and foster positive mental health. Well-being initiatives in schools not only improve academic outcomes but also contribute to the overall emotional and psychological health of students, ensuring their holistic development (López et al., 2022).

Bangladesh has faced repeated challenges in recent years, including prolonged political unrest, outbreaks of violence, and extreme weather events like flooding and cyclones (Save the Children, 2024). These crises have disrupted people's lives, sparked nationwide political violence, resulted in a significant loss of life, displaced families, and destabilized essential services, including schooling and health facilities (UNHCR, 2024). Primary school students are always susceptible to such unusual situations, and these disruptions exert harmful effects on their mental health.

When such events take place particularly during their critical ages in school, conditions like emotional reactions, cognitive displacement, and social malfunction may appear in their minds and behaviors.

The political unrest and violence associated with these events has exposed children to direct and indirect trauma, including witnessing violent incidents or experiencing the loss of safety and security in their communities (Daily Star, 2024). Similarly, the floods, among the worst in recent time, displaced families and destroyed homes, schools, and livelihoods (UN news, 2024). These disasters compounded the stress levels of students and their families, intensifying the emotional toll on children.

The effects of these changes are largely reflected in children's mental health situations. These facts are revealed through the National Mental Health Survey in Bangladesh (NMHS, 2019) that a large number of children, about 13.6%, are suffering from some kind of mental disorders, which is somewhat closer to that of the adult population (16.8%). Besides, more than 1% of severe mental disorders, such as depression and psychoneurosis, have been the most diagnosed mental disorders (Bangladesh Bureau of Statistics, Housing and Population Census, 2011). Examples include anxiety disorders, attention deficit hyperactivity disorder (ADHD), depression and other mood disorders, eating disorders, and post-traumatic stress disorder (PTSD). Early treatment can help children manage their symptoms and support their social and emotional well-being.

These mental conditions are largely a function of children's earlier mental traumatic situations they came across in their early and late childhood years, i.e., their life during the primary school years (Merrick et al., 2017). Researchers found that about one-third of mental trauma occurs during this primary age group of the children and creates a long-lasting effect on their mental health, which is reflected through their adolescent and youth lives (Klitzing et al., 2015).

In order to demonstrate the impact of these changes on the minds of the students of primary schools in Bangladesh, a nationwide study was conducted among the parents, teachers, and community members during October and November 2024. This study was undertaken jointly by CAMPE and Brac University IED with the collaborations from CAMPE's partner organizations spread across Bangladesh. The survey was a modest attempt to determine the psychosocial reactions in children on the basis of their family members', teachers', and community members' perceptions.

Purpose of the study

The purpose of the study is to understand the present mental health condition of the primary school students of Bangladesh after the recent historical development in the country (around 5th August 2024), like the recent political unrests, mass killings on the street, natural calamities like devastating floods, and a large-scale shift in the school curriculum. All the above incidents took place during 2024. These incidents created a huge impact on the minds of the children, which is reflected through physical and psychological reactions in their behavior and emotions. These emotional and behavioral reactions are observed by their parents, family members, teacher, and other associated community members as well. Therefore, it was decided to explore the nature of emotional and behavioral reactions as expressed through the perception of their parents, teachers, and neighboring community members.

Specific objectives

The specific objectives of this study were:

- a. To identify the types of psychological or mental changes observed among the students of the primary schools in Bangladesh.
- b. To examine the reactions of the selected NGO leaders about the traumatized behavior of children.
- c. To prepare a list of actions that may be undertaken by the government and school authorities for handling traumatized behaviors of children.
- d. To suggest an action plan for the parents, teachers, and government authorities.

Methodology

This study adopted a mixed-methods approach, integrating both quantitative and qualitative methods for comprehensive data collection and analysis. Various methods utilized included questionnaire surveys, Focus Group Discussions (FGDs), and Key Informant Interviews (KIIs). The research process also incorporated national and sub-national consultations, formal and informal discussions, and a literature review.

Questionnaire Survey

A quantitative survey was conducted using an open-ended questionnaire facilitated by partner organizations of CAMPE. Questionnaires were distributed among purposively selected 203 respondents, allowing them to provide self-initiated responses. The respondents included parents of primary school students, teachers, community members, and journalists.

Focus Group Discussions (FGDs)

Selected CAMPE partner organizations organized 12 FGDs with primary school students and teachers. These discussions provided valuable insights into the experiences and perspectives of the participants.

Key Informant Interviews (KIIs)

Thirty Key Informant Interviews were conducted following a guideline. The interviews covered government officials from relevant departments and education researchers, ensuring diverse perspectives on the study's focus areas.

Formal and Informal Consultation

Issues related to children's mental health were explored through both formal and informal discussions, meetings, dialogues and consultations facilitated by CAMPE. The study included two national-level and two sub-national-level consultations. These events engaged policymakers, high-level education officials, education researchers, psychologists, teachers' association leaders, teachers, and student guides. The consultations resulted in a set of findings and

recommendations aimed at addressing the identified issues. Insights and experiences shared during these interactions were incorporated into the study's findings.

Survey sample

A total of 203 partner organizations of CAMPE were selected from eight divisions of Bangladesh to conduct the mental health survey. Respondents belonged to parents of primary school students, teachers, different levels of community people along with some journalists available in the locality. Details of the selected sample are given in Table 1.

Table 1. Division wise distribution of local organizations that took part in the survey.

Division	# of organization	# of FGD	# of KII	# of national consultations
Dhaka	52	12 FGD	30 individuals	4 consultations with about 800 participants
Chattagram	38			
Rajshahi	24			
Khulna	31			
Barishal	10			
Rangpur	22			
Sylhet	14			
Mymensing	12			

All 203 organizations conducted the survey and FGDs assigned to them. The data collectors of the organizations were given appropriate training by CAMPE study team. All of the participating organizations arranged group survey and FGD sessions at their local offices. In both the cases (survey and FGD), respondents were taken from the willing groups of parents, teachers, social workers, and other knowledgeable members from the community.

Interviews of key informants (KII) were done by a research assistant from each of the selected organization. Key persons were taken from the community of government education officials, knowledgeable teachers and social workers.

After collection of data from group surveys and FGDs, they were analyzed and thematic report were prepared and sent to the study team. Then the study team consolidated the data into a national data base and finalized them for the current report.

The interviewing process

The main interview schedule was a seven-item questionnaire containing necessary qualitative/descriptive questions (open) like, dealing with students' psychological state, their feeling, behavioral changes, mental health issues and policy related questions. Questions were presented to a representative group of respondents gathered in the organizations' offices and their responses were recorded. All the responses from each organization was clustered, counted and submitted to the research team. The research team finally consolidated the clustered response from each division and prepared the final output.

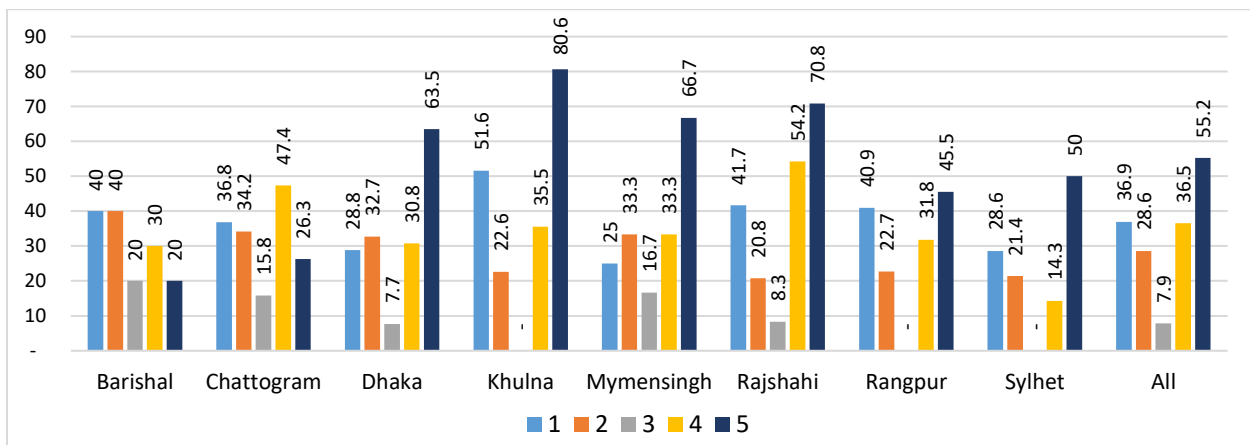
Findings of the Study

The findings of the study is presented in four sections, viz., A. response to the survey questionnaire, B. views of the respondents collected through FGD, C. views of the KIIs and finally D. national consultations. The findings are presented in the following.

A. Findings from the survey

To demonstrate the parents and teachers' perception of students' mental state they were asked to mention their views regarding changes that took place among the children after the recent political change. The survey result is shown in Figure 1. The readers are reminded of the limitations of these analyses.

Fig. 1. Observed changes in mental states taking place among the primary school children after the recent political change as mentioned by the respondents (in %).



Note: 1. Tendency to avoid attending school, 2. Emotional and psychological distress in children, 3. Increased irritability in children, 4. Inattentive to studies, 5. Experience panic sometime.

The above figure reveals that the key psychological impacts observed during and after political turmoil, violence, and devastating flood created a huge change in the mental state of the school-going children. Division wise results are elaborated in the following section.

1. Avoidance Behaviors: A significant percentage of children have shown tendencies to avoid school. In divisions such as Khulna (51.6%), Rajshahi (41.7%), and Rangpur (40.9%), the rate of school avoidance surpassed 40 percent. Meanwhile, in Mymensingh (25.0%) and Sylhet (28.6%), more than one-fourth of the respondents from these divisions reported to have similar behavioral reactions.

2. Emotional and psychological Distress: Avoidance behaviors not only impede academic progress but also isolate children from social interactions, which are essential for emotional recovery and progress. Nearly one-fourth of respondents nationwide reported signs of emotional and psychological distress in children, including sadness, hopelessness, and anxiety. For example, divisions like Barishal and Mymensingh reported emotional distress rates of 40 percent and 33.3 percent, respectively. Meanwhile, around one-fifth of respondents from Rajshahi (20.8%) and Sylhet (21.4%) indicated that their children were experiencing emotional and psychological distress.

3. Increased Irritability: Prolonged exposure to crises without adequate psychosocial support exacerbates these conditions, increasing the risk of long-term mental health disorders. Although less common compared to other impacts, irritability was observed in a smaller but notable proportion of children, particularly in Barishal (20%) and Mymensingh (16.7%).

4. Cognitive Impairments: Crises have had a profound impact on children's cognitive functions, especially their ability to concentrate and focus on studies. In regions like Rajshahi (54.2%) and Chattogram (47.4%), nearly half of the respondents reported that their children are inattentive to studies and classes, highlighting the disruptive effect of trauma on learning.

5. Fear and Panic: Among primary school students, fear and panic have been the most commonly reported psychological impacts of these crises. According to survey findings, over half of the students (55.2%) displayed symptoms of fear or panic, with rates soaring to 80.6 percent in the Khulna division and 70.8 percent in the Rajshahi division. This heightened fear is attributed to repeated exposure to traumatic experiences, including witnessing flood destruction, street violence, or political turmoil.

Effect on the feeling of mental well-being

How the recent political change and contemporary nationwide flood affected children’s mental wellbeing is given in Table 2.

Table 2. Effect of mental well-being as observed by their parents and teachers (in %) after the political unrest and devastating floods in the area.

Division	<i>Opinion on NGO leader and teachers</i>							
	1	2	3	4	5	6	7	8
Barishal	70	30	-	-	10	-	30	10
Chattogram	52.6	15.8	21.1	2.6	21.1	15.8	18.4	18.4
Dhaka	57.7	25	19.2	1.9	9.6	3.8	21.2	19.2
Khulna	32.3	25.8	6.5	3.2	16.1	3.2	19.4	32.3
Mymensingh	16.7	8.3	16.7	16.7	-	16.7	16.7	8.3
Rajshahi	45.8	12.5	8.8	8.5	12.5	8.3	41.7	16.7
Rangpur	36.4	9.1	18.2	4.5	18.2	4.5	22.7	22.7
Sylhet	35.7	21.4	21.4	7.1	14.3	-	21.4	14.3
All	45.8	19.2	15.3	4.4	13.8	6.9	23.2	19.7

Note: 1. Being traumatized, 2. Inattentive to studies, 3. Exuberant behavior, 4. Reaction to new curriculum, 5. Mobile phone addiction, 6. Remain scary all the time, 7. Expressed scary reaction, and 8. Seem unsecured all the time.

Above figure shows the situation of mental well-being among the children. The survey respondents, comprising NGO leaders and teachers, provided insights into the mental well-being of children, highlighting various psychological and behavioral impacts observed during periods of political turmoil marked by widespread violence and devastating floods in their regions.

1. Being traumatized: The survey revealed that, on average, 45.8% of children across divisions experienced trauma, making it the most prevalent psychological impact. The highest rates were reported in Barishal (70.0%), followed by Dhaka (57.7%) and Chattogram (52.6%), indicating significant levels of trauma among primary school-aged children in these divisions.

2. Inattentive to studies: About 19.2 percent of children struggled with attentiveness in their classes, with Barishal (30%) and Khulna division (25.8%) showing notable impacts.

3. Exuberant behavior: According to the survey respondents such as NGO leaders and teachers, an average of 15.3 percent of primary school-aged children exhibited exuberant or hyperactive behavior, possibly as a coping mechanism. The highest rates were observed in Sylhet (21.4%) and Chattogram (21.1%), indicating notable behavioral shifts among children in these divisions. In contrast, regions such as Khulna (6.5%) and Rajshahi (8.8%) reported lower levels of hyperactivity, reflecting potential differences in coping strategies across divisions.

4. Insecurity/scary situation: Insecurity was reported by an average of 23.2% of survey respondents, with the highest levels observed in Rajshahi (41.7%) and Khulna (32.3%) divisions. In contrast, Mymensingh recorded the lowest level of insecurity among primary school-aged children, at 8.3%. Fear, on the other hand, was reported in 6.9% of cases overall, with moderate levels noted in regions such as Chattogram (15.8%) and Mymensingh (16.7%).

5. Mobile phone addiction: Social media addiction was reported in 13.8 percent of cases, with Chattogram (21.1%) and Sylhet (14.3%) showing the highest rates of mobile phone and social media use among primary school-aged children. Barishal (10.0%) and Khulna (16.1%) also demonstrated moderate levels of usage, possibly as a means for children to cope with stress. Meanwhile, the lower rate in Dhaka (9.6%) may reflect efforts by urban families to regulate screen time during the crises.

Survey results reveal substantial regional variations in responses among NGO leaders and teachers. For instance, trauma and insecurity were identified as the most pressing challenges in Barishal, Dhaka, and Rajshahi divisions. In contrast, behavioral issues and mobile phone or social media addiction were more prevalent in Chattogram and Sylhet divisions. Additionally, inattentiveness and curriculum-related stress emerged as key concerns, particularly in Barishal and Mymensingh.

Children’s reaction to the political unrest

Recent political unrest in the country created a severe impact on the minds of children, particularly children in the primary schools. Parents, teachers and significant others mentioned the reaction that they express through various reactions. Details of their responses are given in Table 3.

Table 3. Effect of political unrest on the minds of school going children as observed by their parents and teachers (in %).

Division	<i>Opinion on NGO leader and teachers</i>								
	1	2	3	4	5	6	7	8	9
Barishal	50	90	30	30	20	20	10	30	30
Chattogram	42.1	65.8	10.5	42.1	21.1	10.5	23.7	18.4	18.4
Dhaka	25	48.1	19.2	30.8	13.5	15.4	9.6	32.7	17.3
Khulna	19.4	45.2	19.4	32.3	16.1	19.4	12.9	22.6	12.9
Mymensingh	16.7	33.3	8.3	41.7	-	16.7	16.7	16.7	8.3
Rajshahi	20.8	54.2	20.8	20.8	33.3	12.5	16.7	33.3	29.2
Rangpur	13.6	54.5	27.3	36.4	27.3	18.2	9.1	18.2	18.2
Sylhet	14.3	50	14.3	21.4	-	7.1	7.1	14.3	7.1
All	25.6	53.7	18.2	32.5	17.7	14.8	13.8	24.6	17.7

Note: 1. Creating negative perceptions about society, 2. Experiencing fear or apprehension, 3. Changes in their typical behaviour, 4. Anxiety about study, 5. Social media addiction, 6. School absenteeism, 7. Mood swing, 8. Violence with peer, 9. Sleep disturbance.

The survey responses from NGO leaders and teachers shed light on the varied mental health challenges faced by children due to political unrest and violence across different divisions in Bangladesh. These insights reflect the depth of psychological, behavioral, and academic impacts on children, shaped by their environments and exposure to crises.

1. Fear and apprehension: Over half of the respondents (53.7%) reported that fear stood out as the most significant issue affecting children, with Barishal leading at 90.0% of reported cases. Substantial levels were also observed in Chattogram (65.8%) and Rangpur (54.5%), highlighting a pervasive sense of insecurity and uncertainty among children in these regions.

2. Academic anxiety: Nearly one-third of respondents (32.5%) expressed concern about academic lag, with the issue particularly pronounced in Mymensingh (41.7%) and Chattogram (42.1%), where political unrest and school closures caused by devastating floods have significantly disrupted learning.

3. Negative perceptions of society/community: One in four respondents (25.6%) reported that children were developing negative perceptions of society or their community, with the issue being particularly prominent in Barishal (50%) and Chattogram (42.1%). In contrast, regions like Sylhet (14.3%) show lower rates, potentially reflecting localized differences in societal stability.

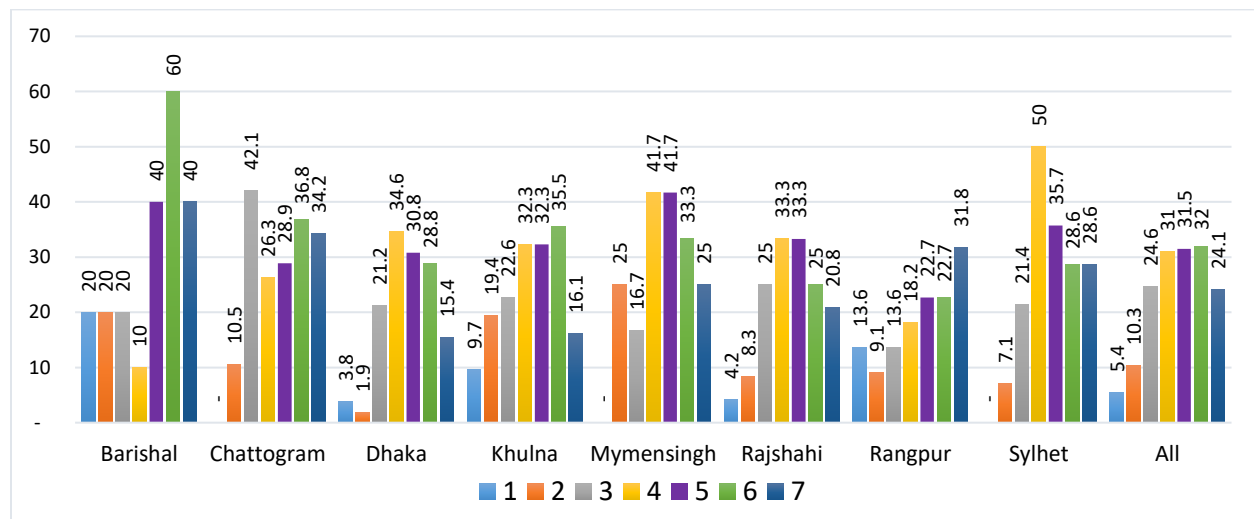
4. Violent behavior toward peers: A significant concern among the respondents (NGO leaders and teachers) was violent behavior toward friends and peers, reported in 24.6% of cases. Such tendencies are most prevalent in the Dhaka (32.7%) and Rajshahi (33.3%) divisions.

The survey results revealed that Barishal division faced the most severe impacts, with 90 percent of children experiencing fear, 50.0 percent developing negative societal perceptions, and 30.0 percent exhibiting altered behavior and sleep disturbances. In Dhaka, urban challenges are prominent, with significant levels of violent behavior (32.7%) and fear (48.1%). Academic anxiety (30.8%) and altered behavior (19.2%) further highlight the stress caused by urban unrest and disrupted routines among the primary school going children's. Similarly, in Khulna, fear (65.8%) and academic anxiety (42.1%) are dominant concerns, accompanied by noticeable mood irritability (23.7%) and violent behavior (18.4%).

Effect of flood on children’s behaviors

Recent flood in Bangladesh created much devastation in many places. Large areas were submerged, houses and corn field went deep under water and people had to push out of their residence and even had to live the area as well. This displacement created a serious impact on the minds of the minor children in school. Parents and other citizens associated to children were asked to report the changes took place among children due to such flood. Their responses are indicated in the following Figure 2.

Fig. 2. Effects of flood on the mind and body of the children as reported by their parents, teachers and significant others (in %).



Note: 1. Fear of death, 2. Lack interest in study, 3. Became panicked, 4. Stuck at home, 5. Stop playing outside, 6. Feel depressed.

The survey results underscored the significant mental health challenges faced by children across Bangladesh because of the devastating floods from June to September 2024. Key issues included elevated levels of depression, despair, fear, and panic, along with disruptions to daily routines, such as limited opportunities to go outdoors or engage in sports. Additionally, notable regional disparities were observed in the severity and types of challenges faced.

1. Depression and despair: Overall, 32.0 percent of respondents observed signs of depression or despair among primary school-aged children due to the devastating flood situations. Barishal reported the highest prevalence at 60%, followed by Khulna (35.5%) and Chattogram (36.8%).

2. Inability to go out and play: Overall, 31.5 percent of respondents noted significant disruptions in recreational activities, such as playing sports, while 31.0 percent reported restrictions on outdoor mobility for primary school children. These challenges are most pronounced in Sylhet (50%) and Mymensingh (41.7%). Furthermore, Barishal (40.0%), Mymensingh (41.7%), and Sylhet (35.7%) specifically report high levels of disruption to children's ability to play sports.

3. Fear or panic: Fear and panic were observed in 24.6 percent of primary school children, according to responses from NGO leaders and teachers. Chattogram reported the highest levels of fear and panic (42.1%), followed by Rajshahi (25.0%) and Barishal (20.0%).

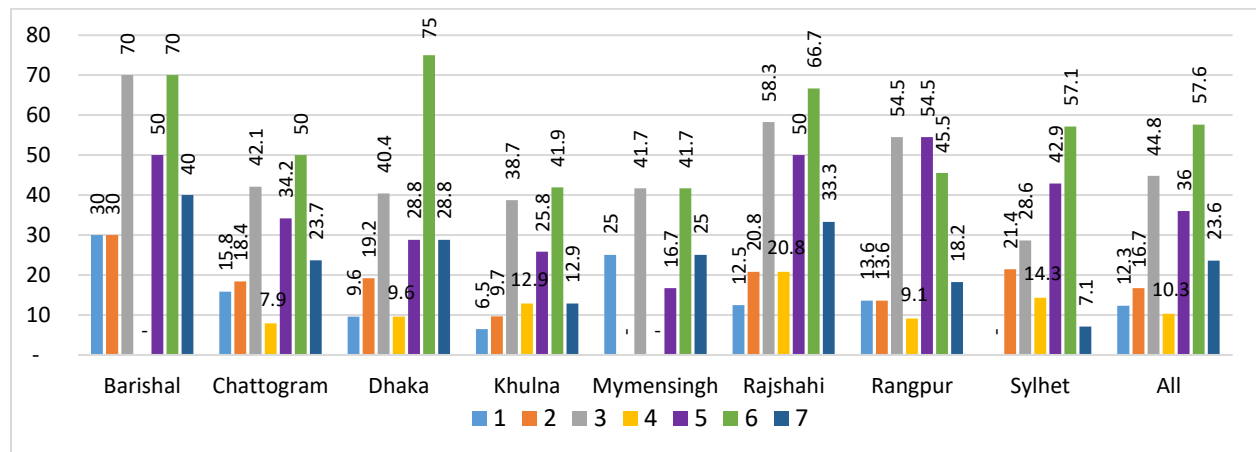
4. Reluctance to study: Overall, 10.3 percent of respondents reported that primary school children are reluctant to study. Mymensingh (25.0%) and Barishal (20.0%) showed the highest rates, while Sylhet (7.1%) and Rajshahi (8.3%) reported lower levels.

Regional variations in responses revealed significant mental health challenges faced by children due to floods. In Chattogram, 42.1% of respondents reported experiencing fear, reflecting the immediate psychological impact of the floods. Depression and despair (36.8%) and the inability to go out (26.3%) were also prominent issues among children, as noted by NGO leaders and teachers. Barishal reported the highest levels of depression and despair (60.0%) among all divisions, emphasizing the profound emotional toll of the floods on children in the region. In Dhaka, restrictions on mobility and recreational activities were significant, with 34.6% reporting an inability to go out and 30.8% unable to play sports, highlighting the impact of urban challenges, as reported by respondents.

Institutional responsibility

Teachers’ and parents’ survey enquired about the institutional responsibility during the natural or manmade situation. The question was, “What kind of role can institutions play in improving children's mental health/condition?” In response to this question participants gave various responses that are given in Figure 3.

Fig. 3. Parental and teachers’ suggestion regarding the role of school to handle the evolved mental and behavioral problems (in %).



Note: 1. undertaking projects related to child health, 2. Organize discussion meetings with children, 3. Raise awareness through seminars, 4. Organize workshop for children, 5. creating an entertaining environment in the classroom, 6. Taking initiatives for counseling, 7. Procure fund for mental healing programme.

The survey findings reported the recommendations of NGO leaders and teachers regarding the roles institutions could play in improving children's mental health. It categorized the suggested interventions and highlighted the extent to which these are currently implemented or planned across different regions in Bangladesh. This data serves as a guide for policymakers, educators, and stakeholders to address critical gaps and capitalize on strengths. Here is a detailed interpretation and analysis of these recommendations:

1. **Undertaking projects related to child health:** NGO leaders and teachers recommended that institutions prioritize projects focusing on child health, serving as a foundation for addressing both physical and psychological well-being (12.3%). Respondents from Barishal (30%) and Mymensingh (25%) strongly emphasize the importance of such initiatives. In contrast, Khulna (6.5%) and Dhaka (9.6%) report the lowest emphasis, highlighting regional variations in priorities for health-related projects.
2. **Organizing discussion meetings with children:** Discussion meetings, highlighted by 16.7% of respondents, were considered a valuable approach for engaging children and addressing their concerns. Sylhet (21.4%) leads in prioritizing these meetings, reflecting a strong preference for direct interaction to tackle mental health challenges among children.
3. **Raising awareness through courtyard meetings:** Raising awareness through courtyard meetings was identified as a significant institutional role, with 44.8% of respondents (NGO leaders and teachers) highlighting its importance. Barishal leads with 70% of responses, while Sylhet (28.6%) and Khulna (38.7%) report comparatively lower emphasis on these initiatives.
4. **Organizing workshops:** Workshops were minimally emphasized overall, with only 10.3% of respondents highlighting their importance. Rajshahi (20.8%) and Sylhet (14.3%) report the highest interest, while NGO leaders and teachers from divisions like Barishal and Mymensingh do not prioritize workshops at all.
5. **Creating entertaining classrooms:** Creating an entertaining classroom environment to reduce children's depression and frustration was a frequently mentioned role, emphasized by 36% of respondents. NGO leaders and teachers from Rangpur (54.5%) and Rajshahi (50%) show the highest demand for this initiative, while Mymensingh (16.7%) and Khulna (25.8%) reflect comparatively lower interest.
6. **Providing counseling from families and schools:** Overall, 57.6% of respondents (NGO leaders and teachers) identified family and school counseling as the most effective approach to reducing children's mental depression. This was the most emphasized role across divisions, underscoring its importance in addressing children's mental health challenges. Dhaka (75%), Barishal (70%), and Rajshahi (66.7%) lead in prioritizing counseling, while Khulna (41.9%) and Mymensingh (41.7%) show comparatively lower demand.
7. **Plans exist, but funding constraints hinder implementation:** Funding constraints, cited by 23.6% of respondents, remained a significant barrier to implementing mental health initiatives. Barishal (40%) and Rajshahi (33.3%) report the greatest challenges, whereas Sylhet (7.1%) experiences minimal funding limitations.

NGO leaders and teachers identified that, while counseling and awareness campaigns were often prioritized, discussion meetings are highly valued for their potential to foster open

communication. Examining regional variations, Sylhet and Rajshahi place greater emphasis on this role, highlighting the significance of dialogue-based interventions in these areas. In contrast, Khulna and Rangpur show less interest, indicating that alternative strategies may be more appropriate. From an urban versus rural perspective, urban areas like Dhaka moderately prioritize discussion meetings, whereas rural divisions such as Barishal demonstrate a stronger emphasis, potentially reflecting differences in community engagement practices.

Government role to handle the problem

The discussion group discussed the question like, “What policy initiatives do you think the government needs to take to improve the mental health/condition of children?” Details of the discussion and participants responses are given in Table 4.

Table 4. NGO leaders, parents and teachers’ responses in the matter of government’s responsibility to develop necessary policies (in %).

Division	<i>Opinion on NGO leader and teachers</i>								
	1	2	3	4	5	6	7	8	9
Barishal	10	20	10	20	-	10	30	70	30
Chattogram	18.4	15.8	5.3	26.3	13.2	5.3	13.2	57.9	2.6
Dhaka	19.2	30.8	5.8	7.7	17.3	11.5	17.3	69.2	11.5
Khulna	3.2	19.4	16.1	25.8	6.5	9.7	9.7	48.4	6.5
Mymensingh	8.3	16.7	-	25	8.3	25	8.3	50	-
Rajshahi	12.5	25	-	4.2	20.8	4.2	20.8	45.8	8.3
Rangpur	27.3	27.3	13.6	13.6	9.1	13.6	27.3	40.9	4.5
Sylhet	-	7.1	14.3	14.3	-	14.3	7.1	42.9	7.1
All	14.3	22.2	7.9	16.3	11.8	10.3	16.3	55.2	7.9

Note: 1. Providing playgrounds and sports equipment for children, 2. Taking initiatives for children's recreational activities at school, 3. Enforcing child protection laws, 4. Arrange medical care, 5. Broadcasting television programs focused on children's mental health, 6. Keeping schools and teachers free from politics, 7. Enhancing co-curricular and cultural activities in schools, 8. Providing mental health counseling for children, 9. Take up programs to instill morality and values in children.

The survey findings provided insights from NGO leaders and teachers across various divisions, outlining their recommendations for government policy initiatives aimed at improving children's mental health. The proposed initiatives included providing playgrounds, enhancing recreational activities, enforcing child protection laws, offering medical care, broadcasting mental health programs, reducing political influence in education, promoting co-curricular activities, offering mental health counseling, and fostering morality and values in educational programs.

1. **Providing mental health counseling:** Mental health counseling emerged as the most emphasized initiative, with 55.2% of NGO leaders and teachers identifying it as essential for addressing children’s mental health challenges. Barishal (70%) and Dhaka (69.2%) showed the highest demand for counseling as a key policy priority in this context.
2. **Initiatives for recreational activities in schools:** Among the respondents, 22.2% highlighted the need for policy initiatives promoting recreational activities in schools, such as picnics, day observances, and tournaments. These activities are seen as crucial for reducing stress and fostering social skills, with Dhaka (30.8%) and Rangpur (27.3%) showing the highest demand for such programs.
3. **Arranging medical care:** A total of 16.3% of respondents underscored the importance of arranging medical care to address children’s physical and mental health as a key policy priority. This initiative received the strongest emphasis in Chattogram (26.3%) and Mymensingh (25%) divisions.
4. **Enhancing co-curricular and cultural activities:** Overall, 16.3% of respondents highlighted the enhancement of co-curricular and cultural activities as a crucial initiative for holistic child development. This initiative received the strongest support in Rajshahi (20.8%) and Dhaka (17.3%), while Sylhet (7.1%) and Khulna (9.7%) placed less emphasis on it.
5. **Providing playgrounds and sports equipment:** Overall, 14.3% of NGO leaders and teachers emphasized the importance of providing playgrounds and adequate sports equipment to improve children’s mental health in the aftermath of floods and political unrest. Playgrounds are regarded as vital for children’s physical and mental well-being, with Rangpur (27.3%) and Dhaka (19.2%) reporting the highest demand, highlighting the scarcity of such facilities in these regions.
6. **Broadcasting television programs focused on children’s mental health:** Broadcasting mental health-focused television programs was highlighted by 11.8% of respondents as a crucial initiative for raising awareness and supporting children. Rajshahi (20.8%) and Dhaka (17.3%) divisions prioritized this policy measure the most.
7. **Reducing political influence in education:** Among the respondents, 10.3% emphasized the need to reduce political influence in education to establish a safer and more supportive learning environment for children. Mymensingh (25%) and Dhaka (11.5%) showed the strongest support for this initiative compared to other divisions.
8. **Enforcing child protection laws:** Overall, 7.9% of respondents highlighted the importance of strengthening child protection laws to safeguard children’s rights and mental well-being. Khulna (16.1%) and Rangpur (13.6%) showed the strongest support for this initiative.
9. **Promoting morality and values in educational programs:** Promoting morality and values in educational programs was highlighted by 7.9% of respondents as a significant long-term strategy to enhance children’s mental well-being. Barishal (30%) demonstrated the strongest support for this initiative.

In the survey findings, the highest number of NGO leaders and teachers (55.2%) emphasized on Mental Health Counseling playing a critical role to improve children’s health across all divisions.

The regional priorities varied, Barishal and Dhaka focused on counseling and morality programs. On the other hand, Chattogram and Mymensingh prioritized medical care and counseling and Rangpur emphasized playgrounds and recreational activities. The importance of counseling, recreational activities, and medical care highlighted the need for multi-dimensional interventions tailored to regional needs.

B. Findings based on FGDs

Recent political unrest in the country during July-August 2024 and natural calamities in the year like floods, and drought affected children's mental condition in various ways. This mental state of children was assessed based on their verbal responses regarding feelings, emotions, and behavioral changes. How far their verbal reactions were correct was determined through their parents' and teachers' observations as well. All 12 focus group discussions (FGD) with 360 participants (all together) were conducted in nine different districts of all divisions of Bangladesh. All the FGDs were organized by local NGO partners of CAMPE.

The FGDs were undertaken with the students, teachers, and parents together in each group. The rationale of mixing all three divergent groups together was to cross-check the feelings and reactions of the students in family, school, and community. Initially, a trained moderator acclimatized students with the session through open discussion and little fun, ensuring their psychological safety and assuring no fear from their parents and teachers for being truthful. After settling the students mentally and emotionally in the group, the moderator placed each question to the group and sought the participants' responses. However, these FGDs were more informal discussion sessions than FGDs in a strict sense because minor children are not the proper sample for such a research technique as FGD.

The moderator raised some issues in the group, and in that connection, he/she put five relevant open questions to the students. Nearly all participants who attended the sessions tried to respond to the questions, and teachers and parents also endorsed students' answers to the questions. Students' responses were recorded, and a thematic analysis was done.

It appeared from the responses of students that all of them were directly or indirectly affected by the political or natural events. Some students in the big cities witnessed the killing of people on the street, firing on people, beating protesters, and damaging civilian property. Similarly, students also witnessed people's suffering in cyclones or floods that took place in their living places. They saw how people were forced to leave their houses to take refuge in shelter homes or highlands where both people and cattle had to stay together.

The overall responses of the FGD participants were categorized under five thematic areas; these are:

- (i) What psychological and behavioral changes took place among the students because of mentioned traumatic events,

- (ii) How these psychological and behavioral changes affected students' academic exercises,
- (iii) What behavioral reactions were found among students due to various traumatic events in recent years,
- (iv) What were the behavioral changes that took place among teachers due to the political and climatic change,
- (v) And finally, what were their recommendations for remedying the conditions.

Psychological and behavioral changes that took place among students

In response to this question regarding behavioral and psychological change among students during July-August political change, the following reactions were reported among students: students came on the street as protest, observed street fights, firing, and big procession, and observed or heard about firing and killing of students. Many students mentioned in the session that, "We saw some people wearing helmets shot at the students, and they fell down." After 5th August, students saw many revolutionary graffiti on the street walls. As the curfew broke out, students had to stay home and felt bored without anything to do. During floods, students observed many dead animals floating on water and people were displaced to shelter homes.

As the mental and traumatic changes were reflected in the behavior, therefore, participants were asked to mention those behavioral changes. In response to that question, quite a few such changes were reported. Those behavioral changes included more involvement in play rather than study, screen-time increases than before, fighting and protest, becoming more arrogant about their demands, and still they expressed panick or traumatic behavior in case of any stressful situation.

Effect on students' academic performance

In response to the question, "What changes took place on students' academic performance?" The FGD participants indicated that the effect of recent political or natural disasters was pretty devastating. The biggest effect on students was an increase in school absenteeism, disinterest in study, lack of care about their academic performances, and teachers' helplessness in the matters of resolving these issues. School leaving increased despite parents' continuous pressure to attend school. Students' arrogance toward their parents and teacher also increased than previous days. Teachers and parents do not have any explanation regarding this behaviour among their children. It indicates that some psychological or counseling treatment is needed for these actions.

Behavior disruption in students

In general, the overall behavior of students was largely changed towards negativism. They tended to negate everything at home and school. One parent mentioned that, "Previously my son was very polite, but now he has become very arrogant and does not listen to my advice." A similar response was echoed by many other parents. Many discussants in the FGD reported that some

kind of restlessness and confusion have developed in their behavior. Recent curricular change, school closer during flood and political unrest created a severe devastating effect on the behavior of the students. Participants also mentioned that they need immediate counseling in school or outside for these changes.

Psychological changes in teachers

Recent nation-wise changes in the political climate in Bangladesh created psychosocial disturbance in the teacher community as well. Teachers mentioned that these changes not only created disturbance in students but also produced a diversified effect on their professional, personal, and familial lives as well. According to their response, it appeared that bringing the school closer for various reasons created tremendous pressure on their teaching career. Recently, the school curriculum transformed twice without much preparation among the teachers and students. Due to frequent curriculum changes, teachers face difficulty coping with that. They have to finish a large amount of curriculum in a short period of time and teach a group of demotivated students. Students' absenteeism and inattention complicate their teaching exercise that is not available in their training.

C. Views of selected experts (KII)

About 30 selected local educational and social experts were interviewed as key respondents. These participants were experienced teachers, education officers, doctors, political leaders, and community heads with sufficient knowledge regarding children's recent behavioral changes that might occur as a result of recent political, natural, and social changes. These people were interviewed by experienced field workers of different partner organizations of CAMPE. These in-depth interviews revealed various issues that affected children due to the recent upsurge in the political situation and a few natural climatic changes like floods, droughts, cyclones, etc. Findings from these people are thematically analyzed as follows:

In response to a question regarding children's mental health, these survey respondents unanimously mentioned that their psychological wellbeing and mental health were at stake. They had to pass through a critical lockdown situation during the COVID-19 epidemic, displacement during a recent flood and cyclone, and a bloody fight between people and police on the street during July 2024. Those scary events created a huge traumatic effect in the minds of children. Their mental and social wellbeing are now seriously affected in various ways. Respondents believe that during any crisis period, children experience measurable life without any alternative solution. Psychologists and social workers believe that such traumatic experiences may cause various effects on psychological and social wellbeing.

While explaining the situation, experts mentioned that those events and odds within and outside the home made children mentally sick and traumatized. These traumas made themselves restless, demotivated in study, and expressed negativism in their behaviors. They also hunched that some children's dropout from school may have some relation with the previous traumatic experiences. They also mentioned that recent changes in school curriculum were done without

the necessary preparation of the teachers and parents. This created a huge unrest among them; they are now confused with the syllabus and other curricular activities. This confusion among teachers and parents also contaminated the students as well.

Some respondents in the KII, however, mentioned that they tried to counsel teachers and students to overcome those traumatic experiences through practical advice. As one of the respondents, a teacher, mentioned, "I sat with the students in school and tried to counsel them to reduce their trauma that they had developed in the earlier days." Another education officer expressed that "every school should have a well-trained school psychologist or counselor to provide mental support to the students."

It was found from the discussions of the KIIs that most of the schools were not attractive places for the students compared to other places outside school. Therefore, it is necessary to make the school a place of interest through various co-curricular activities rather than pushing hard to make them pass exams. Since a large number of parents of primary school students were not educated, it is mandatory for the school to provide appropriate guidance to the children from school. However, it appeared from the KIIs that the majority of the teachers are now busy with their personal and familial matters rather than spending time with students in school. In order to improve students' mental health, they need teachers' company in school in many respects, which is largely found absent in modern schools.

Considering the present psychosocial conditions among students, it was asked of the KII participants to indicate the responsibility of the Education Directorate and its offices in the locality. Responding to this question, several suggestions were given by the experts. These were to provide appropriate directives to run the school and improve the school environment to attract students. Provide necessary training to school teachers to combat such traumatic experiences of the students. Respondents' indicate something like providing 'Psychological First Aid' (PFA) type of activities in school so that students with severe problematic behavior may get necessary psychological service.

Based on the responses from the KIIs, the following activities may be undertaken from different quarters, such as:

- School should be made more attractive for the students
- Emphasis should be given on co-curricular activities
- Parent-teacher cooperation should be enhanced through monthly meetings
- Community should be increasingly involved in various educational activities in school
- School should provide more psychological services to students
- Regular monitoring from the authority is needed to enhance teacher-student relationship
- Interschool social and cultural activities may be undertaken to enhance students' motivation in education
- And finally, to maintain short term and long term education plan for every school to enhance the quality of education.

D. Excerpts from the National Consultation

Present status of students' and teachers' mental health as studied by the teachers and parents in different parts of the country was synthesized and presented in a national consultation meeting in Dhaka. Campaign for Popular Education (CAMPE), in cooperation with BRAC Institute of Educational Development (BRAC-IED), BRAC University organized this National level consultation titled, **"Mental Health of Students at the Primary Level": Our Actions** on Sunday, 20 October 2024. Purpose of this consultation was sharing the preliminary findings of the opinion survey and to collect feedback from the participants on "Mental Health of Students at the Primary level" for improving the mental health of primary students across the country for better future. This meeting was attended by experts from different organizations like, development partners, government officials, non-government organizations, mental health professionals, media representatives, teachers, students, and parents.

Main speakers of the consultation reviewed the mental health scenarios from different perspectives and mentioned that, the government, NGOs, and schools should play the vital role in keeping students' sound mental health by reducing stress and anxiety among students. They discussed about various causes of trauma in children both in families and schools and suggested that care should be taken towards them. Health experts also mentioned about supportive environment for children to grow up with the protection of mental health. Attention should be focused towards all recreational activities to overcome trauma. In this regards participants emphasized the importance of physical activity like, games, sports, and other cultural activities. They also indicated that in this case, the school field could have been a big help but many schools do not have playgrounds.

One of the senior level Psychiatrist stressed on friendly communicating with students as a part of improving their mental health. He also said, first we have to talk to the students softly and then improve their self-confidence through appreciating their creative works. Besides, controlling the use of mobile devices is also important to direct their attention to study and other creative work.

Executive Director of BRAC Institute of Educational Development (BIED) urged that parents and teachers should allow students to participate in play and various cultural programs as much as possible for their socialization. She also emphasized the need for developing good relations between teachers and the students and create opportunity of training for parents and teachers for better understanding of children's mental health and means of recovery from any traumatic experiences that the students may develop from manmade or natural disasters.

One of the child psychologists urged the guardians not to expect much beyond the capacity of the students. He emphasized to reviewing the curriculum and organized counseling workshops at school. He also indicated that lack of sleep and unhealthy food habits may also help develop behaviour problems in children which should be taken care of. One of the high official in the Ministry of Primary and Mass Education (MOPME) urged to incorporate the issues of mental health in the curriculum so that these issues can be well understood by teachers and student for

improving students' mental health. Other than the speakers of the consultation many parents, teachers, students and social workers also spoke on the occasion and underscored the importance of improving students' mental health for the purpose of delivering quality of education.

This national level consultation however, put forward the following recommendations:

- Attempt should be taken to prevail good mental health in primary school.
- Challenges to mental health such as academic stress, bullying, etc. should be reduced.
- Early intervention to the mental health should be ensured.
- Comprehensive programme of mental health e.g., teacher training, counseling, etc. be taken.
- Collaboration among schools, healthcare providers, mental health professionals, and community organizations need to be focused.

Discussion

Mental health is considered to be a basic human right, and it contributes to every stage of our lives, from childhood and adolescence through adulthood. Without sound mental health, no health is good health. Any disturbance in mental health at any age can cause behavioral malfunctioning as well as emotional and cognitive dysfunction. Causing disruption in the mental health of primary-age group children through violence or natural calamities produces a harmful effect on their immediate or later functioning of behavior. These harmful effects are known as trauma, which cannot be seen or measured during its being but can be ascertained through behavioral and cognitive manifestation at some later stage in life. This study has attempted to derive such a connection between children's current behavioral disruption and previous traumatic experiences developed a few years back in their lives.

The presence of psychological and behavioral changes among many primary school students is high because their behaviors are now more arrogant than ever before; they tend to disobey their parents and teachers, suffer from indecisions, and become addicted to devises and unproductive deeds. We generally know that children at certain stages, like in the beginning of adolescence, manifest somewhat similar behavior, but this study suggests that even before adolescence, children demonstrate many unexpected reactions that are not acceptable to their family or the community they live in. Parents, teachers, and community members expressed their concerns over the abrupt changes in students' arrogant behavior and their disinterest in education. However, many parents and educational experts believe that the current distortion in children's behavior and psychological well-being has some connection with the previous political turmoil during July-August and the natural disasters like floods, cyclones, and mass displacement due to these events.

Other than natural or political causes, disaster may also happen due to wrong systemic or policy planning as well. This problem emerged from the recent frequent changes in national curriculum. Recently, in 2021, the old curriculum was abruptly changed to experiential curriculum from the traditional content-based curriculum. The change was made without any consultation with the parents or teachers, so it was a shock to them, and this shock ultimately transferred to the students. However, after August 2024, the curriculum again returned to the previous one with some changes without any logical preparation. All these modifications were made without taking cognizance into the students' psychological and competency level or background.

Research has shown that mental conditions like severe stress, trauma, or anxiety that took place in early childhood have a close link with mental disorders and other psychosocial disabilities found in late childhood or adulthood. There is every possibility of some link between present problematic behaviours of children and their early life traumas arouse from previous political violence and/or natural calamities. Children had to see killings of people on the street, deaths due to diseases like COVID-19, mass transit from their residence to temporary shelter homes for floods, and cyclones torn out their houses, etc. These traumatic experiences made children confused, restless, and stubborn. However, one cannot be certain whether these problematic behaviours in children are the result of previous trauma or some other organic reasons like neurodevelopmental disorders. It is required to be certain about this connection through various psychometric assessments. This study was done only to identify the existence of such psychosocial problems in children through the eyes of their parents and teachers. Therefore, it is necessary to confirm the link between the past event and present behaviour through some psychiatric measures. However, besides these measures, various programmatic measures may be taken to resolve many of those problems through engaging children in age-appropriate play, involving them in various cultural activities, making the school more attractive through teaching-learning activities, etc.

Parents and teachers have rightly indicated that ample scope of reading and play should be created in school and at home so that they can neutralize the traumatic experience that happened in their life. As there are students who have become traumatized, they should be brought under the treatment of psychosocial counseling or play therapy. In this regard, every school should have created the provision of *psychological first aid* (PFA) for children already traumatized in school.

This study of estimating the condition of mental health among primary school students done through the perception of their teachers, parents, and relevant community people is a timely one and discovered various issues related to students' mental health. This is a nationwide perceptual survey conducted through CAMPE's partner organizations in collaboration with the Brac University Institute of Education Development (BUIED). Reflecting the findings of this study, it is necessary to conduct further empirical research on the issue so that more practical educational steps can be taken to improve the mental health of the students in school and in communities.

Recommendations

The study findings generated a few recommendations for various stakeholders. Category-wise, the recommendations are given in the following sections.

D. For School

- Mental health education initiatives should be implemented to address and mitigate mental health challenges and reduce stigma among primary school students and their teachers. These initiatives should include regular communication with parents, awareness campaigns to highlight students' mental health needs, and the provision of alternative activities to engage students and minimize their dependency on electronic devices, such as mobile phones and video games.
- To foster a learning-supportive environment in schools, community participation should be actively promoted.
- Schools should cultivate mutually respectful and cordial relationships between students, teachers and parents, emphasizing compassion, empathy, dignity, and positive human interactions.
- Schools should organize and encourage students in sports, cultural, social, and environmental development programs involving teachers, students, and guardians.
- To support students' mental health and well-being, school-based counseling programs such as 'Psychological First Aid' (PFA) should be implemented. A support group may be formed to address students' mental health concerns promptly. Collaboration with NGOs experienced in counseling can enhance the quality and effectiveness of such programs by leveraging their expertise and resources.

E. For Government Concerned Agencies

- Integrate mental health education and services provision into the national primary education curriculum to raise awareness and provide essential support to students.
- Design and pilot school-based counseling activities and gradually expand these services nationwide, ensuring that all students have access to necessary mental health support.
- Train teachers and staff to recognize students' mental health issues and refer them to appropriate mitigation resources.
- Ensure adequate budget allocation for establishing access to mental health services, particularly for primary school students.
- Launch mid-day meal program in all schools to guarantee students receive necessary nutrition, supporting their health and overall well-being.
- Establish supportive relationships with relevant organizations including NGOs to strengthen the network for mental health support for students.

- Conduct research on a priority basis to investigate the root causes of mental health challenges among primary school students and develop strategies to prevent mental health deterioration.
- Seek airtime on both government and private TV channels to broadcast programs that raise awareness about mental health issues, helping to reduce stigma and promote understanding across the population.

F. For parents

- Foster a supportive environment at home by positive thinking and behavior to ease children's tension and anxiety. Parents should make dining times a bonding moment, coming together to offer emotional support and connection.
- Create opportunities for children by providing play-materials and allowing them to engage with friends and peers, which promotes mental well-being and social connections.
- Encourage participation in local games and cultural activities to provide children with healthy outlets, preventing involvement in stressful situations and promoting their overall emotional and social growth.

Conclusions

There is an increasing tendency among students to disengage from their studies, leading them to leave school at various times. This is an issue of concern in Bangladesh, driven by recent political unrest, natural disasters, and social disturbances. The loss of interest in education has significantly impacted students' mental health, causing trauma, fear, and social dysfunction. To address these challenges, it is crucial to integrate mental health education and counseling in schools, foster positive relationships among students, teachers, and parents, and enhance community involvement. Comprehensive support from schools, the government, and communities is essential to help students overcome these issues and thrive. Addressing this issue is vital to building an educated nation.

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List of Annexes:

Annex	Item	Page#
Annex 1:	Media news link of mental health consultation	28-29
Annex 2:	Survey Questioner & Guideline	30
Annex 3:	Key Informant Interview (KII) & Guideline	31-33
Annex 4:	Analysis Report	34-39
Annex 5:	Presentation of the National Consultation	40-47
Annex 6:	Photographs	48-49

Media Coverage and News Links from the consultation of mental health

SI #	Name of Media	News Link
1	The New Age	https://www.newagebd.net/post/country/248271/improvement-of-mental-health-stressed#google_vignette
2	Prothom Alo	https://epaper.prothomalo.com/Home/ShareArticle?OrgId=2110be12cd7d&eid=1&imageview=0&epedate=21/10/2024&sedId=1
2.1	Prothom Alo Editorial	https://epaper.prothomalo.com/Home/ShareArticle?OrgId=231007a22735&eid=1&imageview=0&epedate=23/10/2024&sedId=1
3	Protidiner Bangladesh	https://protidinerbangladesh.com/capital/116384/%E0%A6%B6%E0%A6%BF%E0%A6%95%E0%A7%8D%E0%A6%B7%E0%A6%BE%E0%A6%B0%E0%A7%8D%E0%A6%A5%E0%A7%80%E0%A6%A6%E0%A7%87%E0%A6%B0-%E0%A6%AE%E0%A6%BE%E0%A6%A8%E0%A6%B8%E0%A6%BF%E0%A6%95-%E0%A6%B8%E0%A7%8D%E0%A6%AC%E0%A6%BE%E0%A6%B8%E0%A7%8D%E0%A6%A5%E0%A7%8D%E0%A6%AF%E0%A7%87%E0%A6%B0-%E0%A6%89%E0%A6%A8%E0%A7%8D%E0%A6%A8%E0%A7%9F%E0%A6%A8%E0%A7%87-%E0%A6%B8%E0%A6%B0%E0%A6%95%E0%A6%BE%E0%A6%B0%E0%A6%95%E0%A7%87-%E0%A6%89%E0%A6%A6%E0%A7%8D%E0%A6%AF%E0%A7%8B%E0%A6%97-%E0%A6%A8%E0%A6%BF%E0%A6%A4%E0%A7%87-%E0%A6%B9%E0%A6%AC%E0%A7%87
4	thedailycampus	https://thedailycampus.com/national/157148/%E0
5	Ajker Tanore	https://ajkertanore.com/44710/%E0%A6%AA%E0%A7%8D%E0%A6%B0%E0%A6%BE%E0%A6%A5%E0%A6%AE%E0%A6%BF%E0%A6%95-%E0%A6%B8%E0%A7%8D%E0%A6%A4%E0%A6%B0%E0%A7%87%E0%A6%B0-%E0%A6%B6%E0%A6%BF%E0%A6%95%E0%A7%8D%E0%A6%B7%E0%A6%BE%E0%A6%B0/
6	Odekhobishwo	https://www.odekhobishwo.com/2024/10/21/%e0%a6%aa%e0%a7%8d%e0%a6%b0%e0%a6%be%e0%a6%a5%e0%a6%ae%e0%a6%bf%e0%a6%95-%e0%a6%b8%e0%a7%8d%e0%a6%a4%e0%a6%b0%e0%a7%87%e0%a6%b0-%e0%a6%b6%e0%a6%bf%e0%a6%95%e0%a7%8d%e0%a6%b7%e0%a6%be%e0%a6%b0%e0%a7%8d/
7	Kalbela	https://www.kalbela.com/dainikshiksha/others/131724
8	Amar Bangla	https://epaper.amarbanglabd.com/
9	Banglatribune	https://www.banglatribune.com/educations/868962/%E0%A6%B6%E0%A6%BF%E0%A6%95%E0%A7%8D%E0%A6%B7%E0%A6%BE%E0%A6%B0%E0%A7%8D%E0%A6%A5%E0%A7%80%E0%A6%A6%E0%A7%87%E0%A6%B0-%E0%A6%9F%E0%A7%8D%E0%A6%B0%E0%A6%AE%E0%A6%BE-%E0%A6%A8%E0%A6%BF%E0%A6%B0%E0%A6%B8%E0%A6%A8%E0%A7%87%E0%A6%B0-%E0%A6%9A%E0%A7%8D%E0%A6%AF%E0%A6%BE%E0%A6%B2%E0%A7%87%E0%A6%9E%E0%A7%8D%E0%A6%9C-

		%E0%A6%9A%E0%A6%BF%E0%A6%B9%E0%A7%8D%E0%A6%A8%E0%A6%BF%E0%A6%A4-%E0%A6%95%E0%A6%B0%E0%A6%BE%E0%A6%B0
10	Amader shomoy	https://www.dainikamadershomoy.com/details/0192ab2c1baa13
11	Alokito Bangladesh	https://epaper.alokitobangladesh.com/
11	Manabzamin	https://mzamin.com/news.php?news=132449
12	Sylhet News	https://sylnewsbd.com/news/582295/
13	Bogurabarta	https://bogurabarta24.com/%E0%A6%aa%E0%A7%8d%E0%A6%B0%E0%A6%be%E0%A6%A5%E0%A6%ae%E0%A6%bf%E0%A6%95-%E0%A6%B8%E0%A7%8d%E0%A6%A4%E0%A6%B0%E0%A7%87%E0%A6%B0-%E0%A6%B6%E0%A6%bf%E0%A6%95%E0%A7%8d%E0%A6%B7%E0%A6%be%E0%A6%B0/
14	South Asian Times	https://www.facebook.com/watch/?v=1117416546628498&rdid=dnVFq9qrW8dluVM4
15	Deepto TV	https://www.youtube.com/watch?v=2dUhyd8v5dl



সাম্প্রতিক সময়ে রাজনৈতিক অস্থিরতা/সহিংসতা ও প্রলয়ংকরী বন্যাজনিত কারণে প্রাথমিক স্তরের
শিক্ষার্থীদের মানসিক স্বাস্থ্য বিষয়ক মতামত জরিপের

প্রশ্নপত্র

আমরা সবাই অবগত আছি যে, সাম্প্রতিক সময়ে দেশে রাজনৈতিক অস্থিরতা ও সহিংস পরিষ্টিতিতে সবচেয়ে উধেগের মধ্যে সময় কেটেছে শিক্ষা প্রতিষ্ঠান, শিক্ষার্থী ও অভিভাবকদের। এ পরিষ্টিতিতে অনেক শিক্ষার্থী মানসিক অস্থিরতা ও যন্ত্রণার শিকার হয়েছে এবং এক ধরনের ট্রমায় আক্রান্ত হয়েছে, যা এখনও বিদ্যমান। এর সঙ্গে অনেক এলাকায় দেখা দিয়েছে প্রলয়ংকরী বন্যা। এতে করেও বিচলিত ও বিপর্যস্ত হয়েছে শিক্ষার্থীরা। তাদের অনেকে হতাশা ও দুশ্চিন্তার মধ্যে দিনাতিপাত করছে।

এ অবস্থায় প্রাথমিক পর্যায়ের শিক্ষার্থীদের মানসিক অবস্থা সম্পর্কে অবগত হওয়া এবং এর ফলে সৃষ্ট অসুবিধাসমূহের প্রকৃত অবস্থা সম্পর্কে জানার জন্য আপনার কাছে একটি প্রশ্নপত্র/ফরমেট প্রেরণ করা হলো। আপনার তথ্যভিত্তিক জ্ঞান ও সু-বিবেচনা প্রসূত মতামত দিয়ে এ ফরমেটটি পূরণ করে ০৩ অক্টোবর ২০২৪-এর মধ্যে আমাদের কাছে পাঠানোর জন্য বিশেষভাবে অনুরোধ জানাচ্ছি।

প্রশ্নপত্র/ফরমেট

জরিপের প্রশ্নপত্রটি সংগঠনের নির্বাহী প্রধান অথবা তার দায়িত্বভার একজন উন্নততম কর্মকর্তার
দ্বারা পূরণ করার জন্য বিশেষভাবে অনুরোধ করা হচ্ছে।

- সাম্প্রতিক রাজনৈতিক অস্থিরতা/সহিংসতা ও প্রলয়ংকরী বন্যাজনিত কারণে আপনার এলাকার প্রাথমিক স্তরের শিক্ষার্থীদের মানসিক স্বাস্থ্যের কোনো পরিবর্তন লক্ষ্য করেছেন? 1 হ্যাঁ 2 না
- উক্ত “হ্যাঁ” হলে, কী ধরনের পরিবর্তন লক্ষ্য করেছেন তা নিচে উল্লেখ করুন।
- বিগত এক মাসে আপনার এলাকার শিশুদের মনে প্রভাব ফেলেছে এমন ২/৩টি ঘটনা উল্লেখ করুন ৪
- রাজনৈতিক অস্থিরতা/সহিংসতাজনিত কারণে শিশুদের মধ্যে কী কী ধরনের অসুবিধা বা মানসিক সমস্যা হচ্ছে বলে আপনার মনে হয়েছে? (প্রয়োজনে আশা দা কাগজ সংযুক্ত করুন)
- বন্যাজনিত কারণে শিশুদের ধাককা-খাওয়া ছাড়াও কী কী ধরনের মানসিক সমস্যা হচ্ছে বলে আপনার মনে হয়েছে? (প্রয়োজনে আশা দা কাগজ সংযুক্ত করুন)।
- এসব সমস্যা মোকাবেলা করতে গিয়ে শিশুদের মধ্যে সু-নির্দিষ্টভাবে কোনো ক্ষতিকর দিক বা অস্বাভাবিক আচরণ লক্ষ্য করেছেন? 1 হ্যাঁ 2 না



গণসাক্ষরতা অভিযান

প্রাথমিক বিদ্যালয়ের শিশুদের মানসিক স্বাস্থ্য

সাম্প্রতিক পরিষ্কৃতিতে শিশুদের মানসিক স্বাস্থ্যগত সমস্যার প্রকৃতি ও ধরন সম্পর্কে জানার লক্ষ্যে

ফোকাস দল আলোচনা (এফজিডি)

শিক্ষার্থীদের কনস ও শ্রেণী নির্দিষ্ট করে আলাদা দলে এফজিডি পরিচালনা করা যেতে পারে

প্রাথমিক স্তরের শিশুদের সঙ্গে দলীয় আলোচনার মাধ্যমে তাদের মনের অবস্থা জানতে হলে প্রথমেই তাদেরকে আলোচনার জন্য প্রস্তুত করে নিতে হবে। এজন্য মূল বিষয়ে আসার আগেই শিশুদের সঙ্গে গল্প করা, ছড়া-গান-কবিতা বলা এবং তাদের কাছ থেকে শোনা, বারবার হাততালি দিয়ে তাদের প্রশংসা করা, মৃদু ব্যায়াম বা নড়াচড়া করা ইত্যাদি কৌশল অবলম্বন করতে হয়। তারপর ধীরে ধীরে মূল আলোচনায় আসতে হয়। এ জন্য কোনো কোনো ফেসিলিটের নির্দিষ্ট প্রশ্নপত্র ব্যবহার করেন না। তবে তার কাছে একটি চেকলিস্ট থাকে। সে অনুসারে তিনি ধীরে ধীরে শিশুদের সঙ্গে কথাবার্তা বলেন এবং নানা বিষয়ে শিশুদের মতামত জেনে নেন।

এজন্য ফেসিলিটের-এর সঙ্গে একজন রিপোর্টার থাকলে সবচেয়ে ভালো হয়, যিনি আলোচনা চলাকালে নোট নিবেন এবং আলোচনার অব্যবহিত পরেই একটি রিপোর্ট প্রণয়ন করবেন।

চেকলিস্ট:

১. বিদ্যালয় কেমন লাগে? ভালো লাগে? কেন ভালো লাগে? বিদ্যালয়ে কি আনন্দ পাই?
 - বিদ্যালয়ে আমরা লেখাপড়া ছাড়া আর কী কী কাজ করি? খেলাধুলা ও ছড়া-কবিতা-গল্প বলা, গান-বাজনা করি কি? আমরা সব শিক্ষার্থী কি এতে অংশগ্রহণ করি? কোন সময়ে আমরা এসব কাজ করি? শিক্ষকরা কি এসব কাজে আমাদের সহায়তা দেন?
২. আমাদের দেশে বিগত এক মাসে কিছু কিছু ঘটনা ঘটেছে। এগুলো কি আমরা জানি? কী কী ধরনের ঘটনা ঘটেছে? এই ঘটনাগুলো তাঁরা কীভাবে জেনেছে?
৩. এসব ঘটনায় আমাদের কেমন লেগেছে? এ সময়ে আমাদের কী কী অসুবিধা হয়েছে? এখনও কি আমাদের মন খারাপ হচ্ছে? কী কী অসুবিধার কারণে মন খারাপ হচ্ছে? মন খারাপ হলে আমরা কী কী করি?
 - বিগত এক মাসে কি শিক্ষার্থীরা বিদ্যালয়ে খেলাধুলা, গান-বাজনা, গল্প-ছড়া-কবিতা পাঠ ইত্যাদি করতে পেরেছে? কেন পারেনি? আমরা বাড়িতে কি এসব কাজ করার সুযোগ পেয়েছি?
৪. সব শিক্ষার্থী কি বিদ্যালয়ে হাসি-খুশী থাকে? শিক্ষকরা কি শিক্ষার্থীদের সঙ্গে খেলাধুলা করে? একসঙ্গে গান-বাজনা করেন গল্প-ছড়া-কবিতা বলেন? শিশুদের মন ভালো রাখার জন্য বিদ্যালয়ে আর কী কী কাজ করা হয়?
 - বিদ্যালয়ে খেলাধুলা করতে চাইলে শিক্ষকরা কি বাধা দেন? বকা দেন? বাড়িতে কি মা-বাবা বকাঝকা করেন? বাড়িতে কি খেলাধুলার সুযোগ আছে?
৫. কী কী ব্যবস্থা নিলে বা সুযোগ থাকলে বিদ্যালয় সবার কাছেই ভালো লাগবে বা নিরাপদ মনে হবে? এ জন্য শিক্ষার্থীরা সবাই মিলে কী কী ব্যবস্থা নিতে পারে?
৬. বাড়িতে বা পরিবারে শিশুদের বিনোদনের জন্য বা হাসিখুশি থাকার জন্য কী কী ব্যবস্থা নিতে পারে? টিভি দেখা ছাড়া আর কীভাবে পরিবারে মা-বাবা শিশুদের সঙ্গে সময় কাটাতে পারে?

আমাদের মূল আলোচনা হলো: শিশুদের কী ধরনের মানসিক সমস্যা হচ্ছে বা হয়, এর ক্ষতিকারক দিকগুলো কী কী এ দুটি বিষয়েই শিশুদের মতামত জানা গুরুত্বপূর্ণ। এজন্য ৩নং প্রশ্নের আলোকে সহিংসতার সময়ে ও সহিংসতা পরবর্তী সময়ে যে সব অসুবিধা হয়েছে তার একটি তালিকা প্রণয়ন করা যেতে পারে।



গণসাক্ষরতা অভিযান

প্রাথমিক বিদ্যালয়ের শিক্ষার্থী ও শিক্ষকদের মানসিক স্বাস্থ্য
সম্পর্কে শিক্ষকদের ধারণা/মতামত জানার জন্য
ফোকাস দল আলোচনা (এফজিডি)

প্রশ্নসমূহ

১. সাম্প্রতিক সহিংসতা/বন্যা আপনার শিক্ষার্থীদের আচরণ ও মানসিক সুস্থতাকে কীভাবে প্রভাবিত করেছে?
 - আপনি কি তাদের অংশগ্রহণ, মেজাজ বা সমবয়সীদের সঙ্গে মেলামেশায় পরিবর্তন লক্ষ্য করেছেন?
২. বর্তমান সময়ে শিক্ষার্থীরা কী কী ধরনের মানসিক সমস্যার মধ্য দিয়ে যাচ্ছে বলে আপনি মনে করেন?
 - এ সময়ে শিক্ষক ও শিক্ষার্থীদের কী কী অসুবিধা হয়েছে?
৩. আপনার শিক্ষার্থীদের মানসিক স্বাস্থ্যের চাহিদা মেটাতে কী কী কৌশল নেওয়া যেতে পারে?
 - আপনি কি কোনো নির্দিষ্ট কার্যক্রম বা কাউন্সিলিং পদ্ধতি ব্যবহার করেছেন?
৪. আপনার শিক্ষার্থীরা যেসব মানসিক স্বাস্থ্য সম্পর্কিত চ্যালেঞ্জে মুখোমুখি হয় তা মোকাবেলা করতে শিক্ষক হিসেবে শিক্ষার্থীরা আপনি কতটা সহায়তা প্রস্তুত বলে আপনি মনে করেন?
 - আপনি এ বিষয়ে কোনো সহায়তা বা প্রশিক্ষণ পেয়েছেন?
 - আপনার কি আরও প্রশিক্ষণ প্রয়োজন?
৫. আপনার শিক্ষার্থীদের সহায়তা করার সময় আপনি কীভাবে নিজের মানসিক সুস্থতার জন্যে ভারসাম্য বজায় রাখেন বা নিজেকে সামলে রাখেন?
 - শিক্ষকদের জন্য কি কোনো অনুশীলন বা সহায়তার ব্যবস্থা আছে?
৬. সাম্প্রতিক সহিংসতা এবং সহিংসতা পরবর্তী ঘটনাসমূহ কীভাবে আপনার শিক্ষাদান এবং শিক্ষার্থীদের শিক্ষাগ্রহণকে প্রভাবিত করেছে?
 - সে সম্পর্কে আপনি কি আপনার মানসিক কষ্ট বা অভিজ্ঞতা শেয়ার করতে পারেন?
 - আপনি কী কী চ্যালেঞ্জ মোকাবেলা করেছেন?
৭. আপনার মতে, এই ঘটনাগুলো কীভাবে আপনার নিজের এবং আপনার সহকর্মীদের মানসিক স্বাস্থ্যকে প্রভাবিত করেছে?
 - শিক্ষকদের জন্য বর্তমানে কি কোনো সহায়তা পাওয়া যায়?
 - আর কী ধরনের সহায়তা প্রয়োজন?
৮. আপনি শিক্ষার্থীদের ক্লাসে মনোযোগ দেওয়ার এবং শিক্ষণ-শিখন প্রক্রিয়ায় অংশগ্রহণ করার ক্ষমতার মধ্যে কি পরিবর্তন লক্ষ্য করেছেন?
 - আপনি কি ট্রমা বা মানসিক চাপের নির্দিষ্ট লক্ষণগুলো লক্ষ্য করেছেন?

ক্রমিক নম্বর:.....

গণসাক্ষরতা অভিযান
প্রাথমিক স্তরের শিক্ষার্থী ও শিক্ষকদের মানসিক স্বাস্থ্য উন্নয়ন
(সকল তথ্য শুধু গবেষণার কাজে ব্যবহারের জন্য)
সাক্ষাৎকারে প্রস্তুত

(পশিসি স্কেলে: ডিপিই-র সংশ্লিষ্ট কর্মকর্তা, প্র্যাকটিশনার: জেলা ও উপজেলা পর্যায়ের শিক্ষা কর্মকর্তা, ইউআরসি ও শিক্ষা গবেষক)

নাম :	শিক্ষ :	পুরুষ	নারী
প্রতিষ্ঠানের নাম:	ঠিকানা :		
পদবী :	কত বছর যাবত কর্মরত আছেন :		

১. শিক্ষক ও শিক্ষার্থীদের মানসিক স্বাস্থ্য ও ভালো থাকা সম্পর্কে আপনার ধারণা কী ?
২. সাম্প্রতিক রাজনৈতিক অস্থিরতা/সহিংসতা প্রশংসক বন্যাজনিত কারণে প্রাথমিক স্তরের শিক্ষার্থী ও শিক্ষকদের মানসিক স্বাস্থ্যও কোনো পরিবর্তন/সমস্যা হয়েছে বলে আপনি মনে করেন ?
উত্তর হ্যাঁ হলে, শিক্ষার্থী ও শিক্ষকদের সমস্যাগুলো সম্পর্কে নিচে উল্লেখ করুন।
 - ২.১ শিক্ষার্থী :
 - ২.২ শিক্ষক :
৩. এ সব সমস্যার কারণে শিক্ষার্থী ও শিক্ষকদের মধ্যে আচরণগত কোনো পরিবর্তন লক্ষ্য করেছেন ? হ্যাঁ না
উত্তর হ্যাঁ হলে, কী ধরনের আচরণগত পরিবর্তন হয়েছে বলে আপনি মনে করেন ?
 - ৩.১ শিক্ষার্থী :
 - ৩.২ শিক্ষক :
৪. সাম্প্রতিক রাজনৈতিক অস্থিরতা/ সহিংসতা পরবর্তী সময়ে শিক্ষার্থীদের এক নিজের মানসিক সুস্থতায় আপনি কি কি পদক্ষেপ নিয়েছিলেন ?
৫. এসব সমস্যা মোকাবেলায় প্রাথমিক শিক্ষা অধিদপ্তর, জেলা/উপজেলা প্রাথমিক শিক্ষা কার্যালয়, শিক্ষা প্রতিষ্ঠান, শিক্ষক ও অভিভাবকগণ কী কী উদ্যোগ নিতে পারে বলে মনে করেন ?
 - ৫.১ প্রাথমিক শিক্ষা অধিদপ্তর :
 - ৫.২ জেলা /উপজেলা প্রাথমিক শিক্ষা কার্যালয় :
 - ৫.৩ শিক্ষা প্রতিষ্ঠান :
 - ৫.৪ শিক্ষক :
 - ৫.৫ অভিভাবক :
৬. এসব সমস্যা প্রশমনে/নিরসনে সরকারের পশিসি স্কেলে স্বল্প, মধ্য ও দীর্ঘ মেয়াদি কি কি উদ্যোগ নেওয়া দরকার বলে আপনি মনে করেন ?
 - ৬.১ স্বল্প মেয়াদি :
 - ৬.২ মধ্য মেয়াদি :
 - ৬.৩ দীর্ঘ মেয়াদি :

উত্তরদাতার কোন নম্বর :

তথ্য সংগ্রহকারীর নাম :

তারিখ:



গণসাক্ষরতা অভিযান

Campaign for Popular Education (CAMPE)
www.campebd.org

‘প্রাথমিক পর্যায়ের শিক্ষার্থীদের মানসিক স্বাস্থ্য’ বিষয়ক বিভাগীয় মতবিনিময়
সভা

ধারণাপত্র



ইউকে বাংলাদেশ এডুকেশন ট্রাস্ট (আকবেট)

গণসাক্ষরতা অভিযান

যোগাযোগ: বাড়ি নং-২/৪, ব্লক সি, শাহজাহান রোড, মোহাম্মদপুর, ঢাকা-
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ওয়েবসাইট: www.campebd.org

মতবিনিময় সভা
প্রাথমিক পর্যায়ের শিক্ষার্থীদের মানসিক স্বাস্থ্য
৬ অক্টোবর ২০২৪, সিলেট বিভাগ
আয়োজনে: গণসাক্ষরতা অভিযান ও আকবেট-সিলেট
ধারণাপত্র

প্রেক্ষাপট

গণসাক্ষরতা অভিযান প্রতিষ্ঠালগ্ন থেকে শিক্ষক, গবেষক, শিক্ষাবিদ ও সহযোগী সংগঠনসমূহের সহায়তায় সরকারকে সহায়তা করার উদ্দেশ্যে শিক্ষা ও সাক্ষরতা উন্নয়ন এবং শতভাগ শিশুকে মানসম্মত শিক্ষার আওতায় নিয়ে আসার জন্য নীতিনির্ধারণী পর্যায়ে তথ্যভিত্তিক এডভোকেসি-সহ নানাবিধ কার্যক্রম পরিচালনা করে আসছে। 'সবার জন্য শিক্ষা'র আওতা বা পরিধি, বিশেষ করে প্রাক-প্রাথমিক, প্রাথমিক, মাধ্যমিক ও কারিগরি শিক্ষার প্রসার ও মান উন্নয়নই অভিযান কর্তৃক গৃহীত এসব কার্যক্রমের অন্যতম উদ্দেশ্য।

বাংলাদেশে ইতোমধ্যে শিক্ষাক্ষেত্রে দৃশ্যমান উন্নতি সাধিত হয়েছে। তবে সমতার ভিত্তিতে গুণগতমানের শিক্ষা নিশ্চিত করতে এখনো বড় ধরনের চ্যালেঞ্জ মোকাবেলা করতে হচ্ছে। কোভিড-১৯ মহামারি, ঝড়, বন্যা এবং খরা-সহ নানা ধরনের প্রাকৃতিক দুর্যোগ প্রায়ই বাংলাদেশের শিক্ষা ব্যবস্থাকে ক্ষতিগ্রস্ত করেছে। এর ফলে শিক্ষার্থী, অভিভাবক ও শিক্ষকদের মধ্যে মানসিক চাপের নেতিবাচক প্রভাবও দেখা যাচ্ছে।

সাম্প্রতিক (জুলাই-আগস্ট ২০২৪) রাজনৈতিক অস্থিরতার কারণে বিদ্যালয়গুলো বন্ধ হয়ে যাওয়া এবং সহিংসতার মধ্যে পড়া শিশুদের মানসিক স্বাস্থ্যে গুরুতর প্রভাব ফেলেছে। এমন কি কোথাও কোথাও সহিংসতার সময় শিক্ষার্থীরা নিজ চোখেই তার সহপাঠী অথবা পরিবারের কারো নিহত হওয়া এবং আহত হওয়া প্রত্যক্ষ করেছে। এসব কারণে কোথাও কোথাও শিশুদের মধ্যে এক ধরনের অস্থিরতা, ট্রমা সৃষ্টি হয়েছে। অনেক ক্ষেত্রেই শিক্ষার্থী ও শিক্ষকরা শিক্ষার প্রতি আগ্রহ হারিয়ে ফেলার শংকা তৈরী হয়েছে এবং দীর্ঘদিনের অনুপস্থিতির কারণে শ্রেণিকক্ষে শিখন-শিক্ষণের ধারাবাহিকতা বাধাগ্রস্ত হয়েছে। শিক্ষকদের বাধ্যতামূলক পদত্যাগ বা হয়রানির মতো ঘটনাও তাদের উপর চাপ সৃষ্টি করেছে। এমন কি কোন কোন ক্ষেত্রে শিক্ষার্থীরাও এ ঘটনায় বিচলিত হয়েছে, হতবাক হয়েছে।

অন্যদিকে, ভৌগলিক অবস্থানের কারণে এবারের প্রাকৃতিক দুর্যোগে বেশ ক্ষতিগ্রস্ত হয়েছে বাংলাদেশ। ২০২৪ সালের এ প্রলয়ংকরী বন্যা দেশের অনেক এলাকায় মানুষকে গৃহহীন করেছে, সম্পত্তির ক্ষতি করেছে এবং মানসিক চাপ বাড়িয়েছে। এসব প্রাকৃতিক দুর্যোগে বেশ কিছু এলাকায় মানুষের বসতবাড়ী, বিদ্যালয় ক্ষতিগ্রস্ত হয়েছে এবং শিক্ষার্থীরা তাদের শিক্ষা উপকরণ হারিয়েছে। এর ফলেও, শিক্ষার্থীদের মানসিক স্বাস্থ্য ক্ষতিগ্রস্ত হয়েছে, আরও ঝুঁকিপূর্ণ হয়েছে।

উপর্যুক্ত পরিস্থিতিতে শিক্ষা উন্নয়ন ইনস্টিটিউট-ব্র্যাক বিশ্ববিদ্যালয় (বিইউআইডি) ও গণসাক্ষরতা অভিযান যৌথভাবে প্রাথমিক পর্যায়ের শিক্ষার্থীদের মানসিক স্বাস্থ্য বা ট্রমা সম্পর্কে ধারণা অর্জন এবং এর প্রকৃতি ও

ধরণ নির্ণয়ের উদ্যোগ গ্রহণ করেছে এবং এ লক্ষ্যে নির্বাচিত এলাকায় সংশ্লিষ্টদের কাছ থেকে তথ্য সংগ্রহের উদ্যোগ গ্রহণ করেছে।

এ উদ্যোগের আওতায় প্রাথমিক স্তরের শিক্ষার্থীদের মানসিক অস্থিরতা বা ট্রমার প্রকৃতি ও ধরণ নির্ণয়/বোঝা এবং এ অবস্থা থেকে উত্তরণে মতামত প্রাপ্তির লক্ষ্যে সংশ্লিষ্ট শিক্ষার্থী, শিক্ষক ও অভিভাবকদের নিয়ে আগামী ০৬ অক্টোবর ২০২৪ সিলেটে বিভাগীয় পর্যায়ে ১টি মতবিনিময় সভা আয়োজনের উদ্যোগ গ্রহণ করা হয়েছে।

উদ্দেশ্য

প্রস্তাবিত কার্যক্রম আয়োজনের সুনির্দিষ্ট উদ্দেশ্যসমূহ হলো-

- শিক্ষক ও শিক্ষার্থীদের মানসিক স্বাস্থ্যের সমস্যা বা ট্রমার প্রকৃতি ও ধরণ নির্ণয়;
- মানসিক স্বাস্থ্য সেবা এবং নীতি প্রভাবিত করার জন্য সুপারিশ তৈরি এবং তথ্য বিস্তরণের কৌশল সম্পর্কে মতামত গ্রহণ করা;

সম্ভাব্য অংশগ্রহণকারী ও সংখ্যা:

মতবিনিময় সভায় অংশগ্রহণকারী নির্বাচনের ক্ষেত্রে প্রাথমিকের শিক্ষার্থী, শিক্ষক, অভিভাবক, এসএমসি সদস্য, উন্নয়ন কর্মী, গণমাধ্যম কর্মী এবং জেলা/উপজেলা পর্যায়ে প্রাথমিক ও মাধ্যমিক শিক্ষা কর্মকর্তাগণদের অংশগ্রহণকে গুরুত্ব দিতে হবে। এ বিষয়ে সম্ভাব্য অংশগ্রহণকারী সংক্রান্ত একটি প্রস্তাবনা নিম্নে উপস্থাপন করা হলো:

অংশগ্রহণকারীর ধরণ ও সংখ্যা (প্রস্তাবিত)

ক্রম	অংশগ্রহণকারীর ধরণ		সংখ্যা
১	বিভাগীয়/জেলা/উপজেলা পর্যায়ের সরকারি কর্মকর্তা	বিভাগীয়/জেলা/উপজেলা প্রাথমিক শিক্ষা কর্মকর্তা এবং স্বাস্থ্য কর্মকর্তা	১০ জন
২	শিক্ষার্থী	প্রাথমিক পর্যায়ের	১৫ জন
৩	শিক্ষক প্রতিনিধি	শিশু শিক্ষাসহ বিভিন্ন ধরনের প্রতিষ্ঠানের প্রধান শিক্ষক ও সহকারী শিক্ষক	১৫ জন
৪	অভিভাবক প্রতিনিধি	প্রাক-প্রাথমিক, প্রাথমিক স্কুল, পুরুষ ও নারী প্রতিনিধি	১৫ জন
৫	গণমাধ্যম প্রতিনিধি	সাংবাদিক ও অন্যান্য গণমাধ্যম কর্মী	১০ জন
৬	সংগঠন প্রতিনিধি	পেশাজীবী সংগঠন, নারী ও শিশু অধিকার সংগঠন, শিক্ষক সংগঠন (যেখানে যেখানে সম্ভব সেখানে আদিবাসী ও প্রতিবন্ধীদের অংশগ্রহণ থাকা বাঞ্ছনীয়)	১০ জন
৭	এনজিও প্রতিনিধি	শিক্ষা ও স্বাস্থ্য নিয়ে কর্মরত এনজিও প্রতিনিধি	৫ জন
৮	অন্যান্য	বিদ্যালয় ব্যবস্থাপনা কমিটির প্রতিনিধি (প্রাথমিক)	১০ জন
৯		আয়োজক সংস্থার প্রতিনিধি (আকবেট ও গণসাক্ষরতা অভিযান)	১০ জন
মোট			১০০ জন

প্রস্তাবিত কর্মসূচি

সকাল ১১:০০টা থেকে দুপুর ১:৩০টা পর্যন্ত মতবিনিময় সভাটি আয়োজন করা যেতে পারে। নিম্নে একটি সম্ভাব্য অনুষ্ঠানসূচির ছক দেওয়া হলো-

কর্মসূচির বিবরণ ও সময়

সময়	বিবরণ
১০:৩০ মি.	রেজিস্ট্রেশন
১১:০০ টা	শুভেচ্ছা বক্তব্য এবং কর্মসূচির উদ্দেশ্য বর্ণনা
১১:১০ মি.	মানসিক স্বাস্থ্যের বর্তমান অবস্থা ও সমস্যাটির পর্যালোচনামূলক মূল উপস্থাপনা
১১:৩০ মি.	শিক্ষার্থী, শিক্ষক, অভিভাবক, এনজিও/সিএসও, মিডিয়া এবং উন্নয়নকর্মীদের অংশগ্রহণে মুক্ত আলোচনা
১২:৪৫ মি.	অতিথিদের বক্তব্য
০১:০০ টা	সভাপ্রধান/মডারেটরের বক্তব্য
০১:১৫ মি.	ধন্যবাদ জ্ঞাপন ও সমাপ্তি
০১:৩০ মি.	আপ্যায়ন

বিভাগীয় পর্যায়ে মতবিনিময় সভার সহযোগী সংস্থা

কর্মশালা/মতবিনিময় আয়োজনের জন্য স্থানীয় পর্যায়ে কর্মরত গণসাক্ষরতা অভিযান-এর সহযোগী সংস্থা/সংগঠন-কে দায়িত্ব দেয়া যেতে পারে। স্থানীয় সহযোগী সংস্থা/আয়োজক নির্বাচনে অভিযানের মেম্বারশীপ কমিটির মতামত অনুযায়ী বিবেচনা নেওয়া যেতে পারে। প্রস্তাবিত আয়োজক/সহযোগী সংস্থাসমূহের নাম ও ঠিকানা নিম্নরূপ

মতবিনিময় সভা আয়োজনে স্থানীয় সহযোগী সংস্থার তালিকা (প্রস্তাবিত)

ক্রম	জেলা	সহযোগী এনজিও
১	সিলেট (বিভাগীয় মতবিনিময় সভা)	আকবেট

১. সহযোগী সংস্থার দায়িত্ব ও কর্তব্য

- মতবিনিময় সভার আয়োজন ও বাস্তবায়নের আনুষঙ্গিক দায়িত্ব;
 - (অংশগ্রহনকারী ও অতিথিবৃন্দের ধারণ ও সংখ্যা বিবেচনায় সভার স্থান, ব্যানার, সাজ-সজ্জা, বসার ব্যবস্থা, আপ্যায়ন, লজিস্টিক ইত্যাদি নিশ্চিত করা)।
- অংশীজনের ধারণ ও অবস্থান অনুযায়ী অংশগ্রহনকারী নির্বাচন, নির্ধারিত প্রক্রিয়ায় আমন্ত্রণ জানানো (ই-মেইল/চিঠি/টেলিফোন) এবং সম্ভাব্য অংশগ্রহনকারীদের সঙ্গে যোগাযোগ ও ফলো-আপ করা;
- সর্বোচ্চ সংখ্যক (১০০ জন) প্রতিনিধির অংশগ্রহণ নিশ্চিত করা;
- মতবিনিময় সভার আলোকচিত্র/ছবি ধারণ, সরবরাহ ও সংরক্ষণ করা;

৫. মতবিনিময় সভার ওপর একটি বিস্তারিত প্রতিবেদন অভিযানে প্রদান করা;
৬. কর্মসূচি আয়োজনের বিভিন্ন ধরনের বিল-ভাউচার অভিযানের আর্থিক ব্যবস্থাপনা গাইডলাইন অনুযায়ী সংরক্ষণ ও সরবরাহ করা;
৭. কর্মসূচি আয়োজনের প্রাথমিক ব্যয় বহন করা, যা পরে গণসাক্ষরতা অভিযান কর্তৃক সমন্বয় করা হবে।

গণসাক্ষরতা অভিযানের দায়িত্ব ও কর্তব্য

১. মতবিনিময় সভা আয়োজনের লক্ষ্যে সহযোগী সংগঠনের সঙ্গে সমঝোতা স্মারক তৈরি ও স্বাক্ষর করা
২. সুষ্ঠুভাবে মতবিনিময় সভা আয়োজনের লক্ষ্যে সহযোগী সংগঠনের সঙ্গে বিস্তারিত আলোচনা ও প্রয়োজনীয় সহযোগিতা প্রদান করা;
৩. নির্ধারিত বিষয়ে একটি ‘উপস্থাপনা’ প্রদান করা
৪. সভা মোডারেটর/পরিচালনায় অংশগ্রহণ করা
৫. গণসাক্ষরতা অভিযান থেকে মতবিনিময় সভার ব্যয় বহন করা;
৬. মতবিনিময় সভায় অভিযান ও বিইউআইইডি থেকে একজন/প্রতিনিধি দল অংশগ্রহণ করবেন;
৭. বিল ও সভার প্রতিবেদন দাখিলের পর ব্যয়ের হিসাব অনুযায়ী আয়োজনকারী সংগঠনকে ব্যাংক ট্রান্সফার/একাউন্ট পেয়ী চেকের মাধ্যমে প্রাপ্য অর্থ প্রদান করবে।

কর্মশালার প্রাক্কলিত বাজেট

ক্রম	বিবরণ	টাকার পরিমাণ
১	ভেন্যু, ব্যানার, সাউন্ড সিস্টেম ও মাল্টিমিডিয়া ভাড়া	৭,৮০০
২	ফোল্ডার, প্যাড ও কলম (৯০ জন X ৮০ টাকা)	৭,২০০
৩	অংশগ্রহণকারীদের সঙ্গে যোগাযোগ, দাওয়াত কার্ড/চিঠি তৈরি ও বিতরণ	৪,০০০
৪	ফটোকপি, ফটোগ্রাফ	৩,০০০
৫	নাস্তা ও দুপুরের খাবার (১০০ জন X ৩২৫ টাকা)	৩২,৫০০
৬	সংশ্লিষ্ট জেলার অংশগ্রহণকারীদের জন্য (৯০ জন X ৫০০ টাকা)	৪৫,০০০
৭	প্রতিবেদন তৈরি	২,০০০
৮	বিশেষ অতিথি ও প্রধান অতিথিদের সম্মানী (৮ জন X ১,০০০ টাকা)	৮,০০০
৯	স্বাস্থ্য সুরক্ষা সামগ্রী - মাস্ক, স্যানিটাইজার, টিস্যু	৫,০০
মোট		১,১০,০০০
	মোট ব্যয়ের ১০% ওভারহেড কস্ট	১১,০০০
	সর্বমোটঃ এক লক্ষ একশ হাজার টাকা (ভ্যাট, ট্যাক্সসহ)	১,২১,০০০

মতবিনিময় সভা আয়োজনের জন্য আয়োজনকারী সংগঠন প্রতি ভ্যাট, ট্যাক্সসহ মোট ১,২১,০০০/- (এক লক্ষ একুশ হাজার) টাকা প্রাক্কলন করা হয়েছে। আয়োজক সংগঠন ও গণসাক্ষরতা অভিযানের মধ্যে এই বিষয়ে সমঝোতা স্মারক স্বাক্ষরিত হবে। অভিযানের পক্ষ থেকে প্রাক্কলিত বাজেট অনুযায়ী কর্মসূচি আয়োজনের ব্যয় নির্বাহ করা হবে। তবে আয়োজক সংস্থা মতবিনিময় সভা আয়োজনের প্রাথমিক ব্যয় বহন করবে। গণসাক্ষরতা অভিযান-এর প্রেরিত গাইডলাইন অনুযায়ী প্রতিবেদনসহ বিল দাখিলের সাত দিনের মধ্যে অভিযান থেকে একাউন্ট পেয়ী চেক অথবা online transfer এর মাধ্যমে বর্ণিত অর্থ প্রদান করা হবে।

যোগাযোগ

মতবিনিময় সভা আয়োজন বিষয়ে যেকোনো প্রয়োজনে নিম্নে উল্লেখিত ব্যক্তিগণের সঙ্গে যোগাযোগ করা যেতে পারে।

- মোঃ আব্দুর রউফ, কার্যক্রম ব্যবস্থাপক, গণসাক্ষরতা অভিযান, মোবাইল: ০১৭১২-৬০২৫৩৪
- মোঃ সিজুল ইসলাম, কার্যক্রম কর্মকর্তা, গণসাক্ষরতা অভিযান, মোবাইল: ০১৭৩৮-১৬২১৫৬

Final Presentation for the Consultation:



মতবিনিময় সভা

প্রাথমিক স্তরের শিক্ষার্থীদের মানসিক স্বাস্থ্য উন্নয়ন: আমাদের করণীয়

সোমবার, ৯ ডিসেম্বর ২০২৪, বিআইসিসি, ঢাকা

যৌথ আয়োজনে: গণসাক্ষরতা অভিযান ও ব্র্যাক শিক্ষা উন্নয়ন ইনস্টিটিউট

সহযোগিতায়: সকল সহযোগী সংগঠন, গণসাক্ষরতা অভিযান



মতবিনিময়ের প্রেক্ষাপট

শিশুদের মানসিক স্বাস্থ্যের উপর নিম্নোক্ত ঘটনাবলীর প্রভাব:

- ❖ দেশের সাম্প্রতিক রাজনৈতিক অস্থিরতা ও সহিংস অবস্থা
- ❖ প্রাকৃতিক দুর্যোগ যেমন জলোচ্ছাস বন্যা
- ❖ করোনার দীর্ঘমেয়াদী নেতিবাচক প্রভাব
- ❖ শিশুমনে এসব ঘটনাবলীর প্রভাব

মতামত সংগ্রহের প্রক্রিয়া

- দেশের ৮টি বিভাগে সর্বমোট ২০৩টি সংগঠনের সহায়তার একটি সাধারণ প্রশ্নপত্রের মাধ্যমে বিভিন্ন স্তরের মানুষের মতামত সংগ্রহ করা হয়
- ১২টি ফোকাসগ্রুপ আলোচনা (উপস্থিতি ৩৬০জন)
- ৩০জন তথ্যাভিজ্ঞ ব্যক্তির মতামত সংগ্রহ এবং
- ২টি বিভাগীয় এবং ২টি জাতীয় পর্যায়ে সভার মাধ্যমে এই গবেষণার উপাত্ত সংগ্রহ করা হয় (উপস্থিতি প্রায় ৬০০জন)

৩

শিশুদের মনে প্রভাব ফেলেছে এমন কিছু ঘটনা

- শিক্ষার্থীরা স্কুল ছেড়ে রাস্তায় নেমে এসেছে
- মিছিল, সহিংসতা, ভাঙচুর, অগ্নিসংযোগ, মারামারি দেখেছে
- রাজপথে শিক্ষার্থীদের ওপর গুলি ছোড়া দেখেছে বা শুনেছে যা তাদের মনে আতঙ্কের জন্ম দেয়
- স্কুল বন্ধ হয়ে যাওয়া এবং কারফিউ ও অবরোধ কর্মসূচির কারণে ঘরে থাকতে হয়েছে
- দেওয়াল লিখন ও আঁকা ছবিতে সাম্প্রতিক ঘটনা দেখে প্রভাবিত হয়েছে
- পরিবারে বা আশেপাশে শিক্ষার্থীদের গুরুতর আহত হওয়া বা মৃত্যু দেখেছে
- বন্যায় ঘরবাড়ি, গবাদিপশু ও শিক্ষা উপকরণ ভেসে গেছে
- শিক্ষার্থীদের মধ্যে যে কোনো বিষয় নিয়ে আন্দোলন করার প্রবণতা বেড়ে গেছে

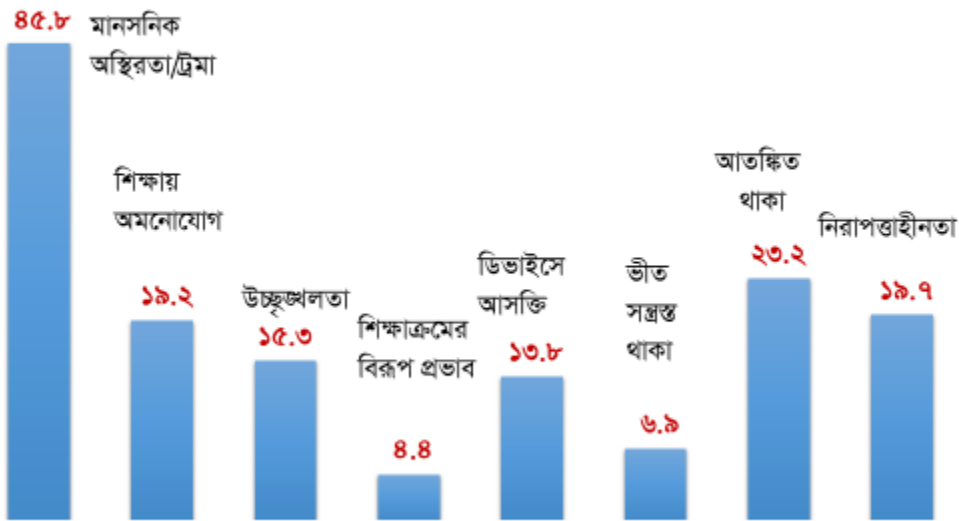
৪

জরিপে অংশগ্রহণকারীদের মতামত অনুযায়ী পাওয়া শিশুদের মধ্যে দৃশ্যমান মানসিক পরিবর্তন



5

শিশুদের মধ্যে সৃষ্ট মানসিক পরিবর্তন



6

শিশুদের মধ্যে আচরণিক পরিবর্তন সম্পর্কে সূধীজনের মতামত

- সমাজ সম্পর্কে নেতিবাচক আচরণ প্রকাশ ২৫.৬%
- ভীত-সন্ত্রস্ত অবস্থার প্রকাশ ৫৩.৭%
- অগ্রহণযোগ্য আচরণ প্রকাশ ১৮.২%
- পড়ালোখায় পিছিয়ে পড়া ৩২.৫%
- সোশাল মিডিয়ায় আসক্তি ১৭.৭%
- বিদ্যালয়ে অনুপস্থিতি ১৪.৮%
- মেজাজ দেখানো ১৩.৮%
- সহিংস আচরণ ২৪.৬%
- ঘুমের ব্যাঘাত ১৭.৭%

7

জরিপে অংশগ্রহণকারীদের মতে শিশুদের সহায়তা করার জন্য শিক্ষা প্রতিষ্ঠানের করণীয়

- শিশুস্বাস্থ্য বিষয়ক প্রকল্প গ্রহণ ১২.৩%
- শিশুদের নিয়ে আলোচনা সভা করা ১৭.৭%
- উঠান বৈঠকের মাধ্যমে সচেতনতা তৈরি ৪৪.৮%
- শিশুদের জন্য কর্মশালার আয়োজন করা ১০.৩%
- শ্রেণিতে বিনোদনমূলক অবস্থা তৈরি ৩৬.০%
- শিশুদের নিয়মিত কাউন্সেলিং-এর ব্যবস্থা করা ৪৭.৬%
- এ লক্ষ্যে প্রয়োজনীয় বিনিয়োগ করা ২৩.৬%

8

জরিপে অংশগ্রহণকারীদের মতে সরকারের করণীয়

- শিশুদের জন্য খেলার মাঠ ও খেলাধুলার সরঞ্জামের ব্যবস্থা করা ১৪.৩%
- শিশুদের জন্য বিনোদনমূলক কার্যক্রম গ্রহণ করা ২২.২%
- শিশু সুরক্ষা আইন (২০১৩) বাস্তবায়ন করা ৭.৯%
- চিকিৎসা সেবার ব্যবস্থা করা ১৬.৩%
- টিভিতে মানসিক স্বাস্থ্য বিষয়ক অনুষ্ঠানের নিয়মিত আয়োজন করা ১১.৮%
- শিক্ষকদের দলীয় রাজনৈতিক কার্যক্রম থেকে বিরত রাখা ১০.৩%
- বিদ্যালয়ে সাংস্কৃতিক কার্যক্রম বাড়ানো ১৬.৩%
- শিশুদের নিয়মিত কাউন্সেলিং-এর ব্যবস্থা করা ৫৫.২%
- শিশুদের নৈতিক মূল্যবোধ বিকাশী কার্যক্রম হাতে নেওয়া ৭.৯%

৯

শিক্ষার্থীদের মানসিক স্বাস্থ্যের উন্নয়নে আরো কিছু সুপারিশ

১০

বাড়িতে অভিভাবকগণের জন্য সুপারিশ

- শিক্ষার্থীদের সঙ্গে বন্ধুসুলভ আচরণ করা
- পরিবারের সবাই একসঙ্গে বসে খাওয়া
- যখন যেভাবে সম্ভব খেলাধুলার উপকরণ সরবরাহ করা
- অন্যান্য শিশু বা বন্ধুদের সঙ্গে মিশতে দেওয়া
- মোবাইল আসক্তি থেকে দূরে রাখার ব্যবস্থা করা, বিশেষ করে মারামারি ও হিংস্রতা সম্পর্কিত গেইম খেলা থেকে বিরত রাখা
- স্থানীয়ভাবে অনুষ্ঠিত খেলাধুলা ও সংস্কৃতি চর্চায় অংশগ্রহণে উৎসাহিত করা

11

বিদ্যালয়ের জন্য সুপারিশ

- বিদ্যালয়ে সাংস্কৃতিক কার্যক্রম জোরদার করা
- বিদ্যালয়ে শিখন-সহায়ক পরিবেশ সৃষ্টির লক্ষ্যে কমিউনিটির অংশগ্রহণ বৃদ্ধি করা
- শিশুদের জন্য খেলার মাঠ ও খেলাধুলার সরঞ্জাম দেওয়া
- বিদ্যালয়ে বিভিন্ন ক্লাব সংস্কৃতি গড়ে তোলা
- অভিভাবকদের সঙ্গে নিয়মিত যোগাযোগ রক্ষা করা
- শিক্ষার্থীদের মানসিক স্বাস্থ্য ও চাহিদা সম্পর্কে সচেতনতা বৃদ্ধি করা
- শিশুদের মানসিক স্বাস্থ্য বিষয়ক নিয়মিত কাউন্সেলিংয়ের ব্যবস্থা করা
- শিক্ষক-শিক্ষার্থীর মধ্যে সুসম্পর্ক বজায় রাখা

12

এনজিও বা সেবামূলক প্রতিষ্ঠানগুলোর জন্য সুপারিশ

- শিশু স্বাস্থ্য উন্নয়নে বিশেষ কার্যক্রম গ্রহণ
- শিশুদের সঙ্গে মতবিনিময় করা
- উঠান বৈঠকের মাধ্যমে অভিভাবক ও নাগরিক সমাজের মধ্যে সচেতনতা তৈরি করা
- শিক্ষকদের জন্য প্রশিক্ষণ কর্মশালা আয়োজন করা
- শিশুদের বিষণ্ণতা, হতাশা কাটানোর জন্য বিনোদনমূলক পরিবেশ তৈরি করতে সহায়তা করা
- শিক্ষা প্রতিষ্ঠানগুলোতে নিয়মিত কাউন্সেলিং করার উদ্যোগ জোরদার করা
- শিশুদের সুরক্ষিত রাখার জন্য কর্মসূচি নেওয়া
- শিশুদের স্কুলমুখী করার লক্ষ্যে প্রণোদনামূলক উদ্যোগ জোরদার করা
- প্রাক-প্রাথমিক পর্যায়ে কর্মরত এনজিসমূহের কর্মসূচিতে মানসিক স্বাস্থ্যকে গুরুত্ব দেওয়া

13

শিশুদের মানসিক স্বাস্থ্য সুরক্ষায় সরকারের জন্য সুপারিশ

- মানসিক স্বাস্থ্য বিষয়ে সচেতনতা বৃদ্ধির লক্ষ্যে রেডিও টিভিতে প্রয়োজনীয় সম্প্রচারের ব্যবস্থা করা
- শিক্ষাক্রম প্রণয়নসহ যে কোনো নতুন কিছু চালু করার আগে এ ব্যাপারে অভিভাবকদের অবহিত করা
- শিক্ষার্থীদের পুষ্টি, সুস্বাস্থ্য ও সার্বিক সুরক্ষা নিশ্চিত করার জন্য প্রয়োজনীয় সহায়তা প্রদানের লক্ষ্যে মিড-ডে মিল কর্মসূচি চালু করা
- শিক্ষা প্রতিষ্ঠান ও শিক্ষকদের দলীয় রাজনীতির প্রভাব মুক্ত রাখার উদ্যোগ নেওয়া
- শিক্ষা প্রতিষ্ঠানে ন্যূনতম চিকিৎসা সেবা বিশেষ করে First Aid-এর ব্যবস্থা রাখা

14

সরকারের জন্য সুপারিশ . . .

- শিশু সুরক্ষা আইন (২০১৩) যথাযথভাবে বাস্তবায়ন করা
- শিক্ষক-প্রশিক্ষণের পাঠ্যক্রমে মানসিক স্বাস্থ্য বিষয় অন্তর্ভুক্ত করা
- শিক্ষা প্রতিষ্ঠানে ট্রমা কাউন্সেলিং কর্মসূচি আয়োজন করা
- শিক্ষার্থীদের মানসিক স্বাস্থ্যসমস্যা নিরূপণের লক্ষ্যে শিক্ষকদের দক্ষতা বৃদ্ধি করা
- শিক্ষার্থীদের জন্য খেলাধুলা ও অন্যান্য কর্মসূচি পালনের লক্ষ্যে বিদ্যালয়ের খেলার মাঠ ব্যবহারের সুযোগ উন্মুক্ত রাখা
- শিক্ষার্থীদের মানসিক স্বাস্থ্যসেবায় পর্যাপ্ত সম্পদ ও বাজেট বরাদ্দ নিশ্চিত করা

15



16

Photographs of the Consultation



