



Hardheaded appraisal of Sustainable Development in the Social Arena in Bangladesh

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Abstract:

Sustainable development has been pointed out as a life-sustaining condition to ensure a felicitous life for future generations in developing countries of the world. Also, it has been closely appertained to social arena of those countries. Despite its significance, the issue cannot be done with solved easily as there are many factors that tend to retard its progress. In this regard, this document provides policy guidance on good practice in developing and implementing strategies for sustainable development. The guidance focuses on the social arena of Bangladesh, but many of the issues covered and lessons drawn are of equal relevance to developed countries-the other two arenas being economic and environmental. For this purpose, it examines the current scenario in the social arena in Bangladesh, assesses the factors that influence the situation and comments on the strategies and tactics necessary to help development in Bangladesh become recurrent. Through the above analysis, the paper clarifies the structures and tasks, as a whole in the issue of sustainable development in the social sector.

Keywords : Sustainable development, population, health, education, gender parity, human development index

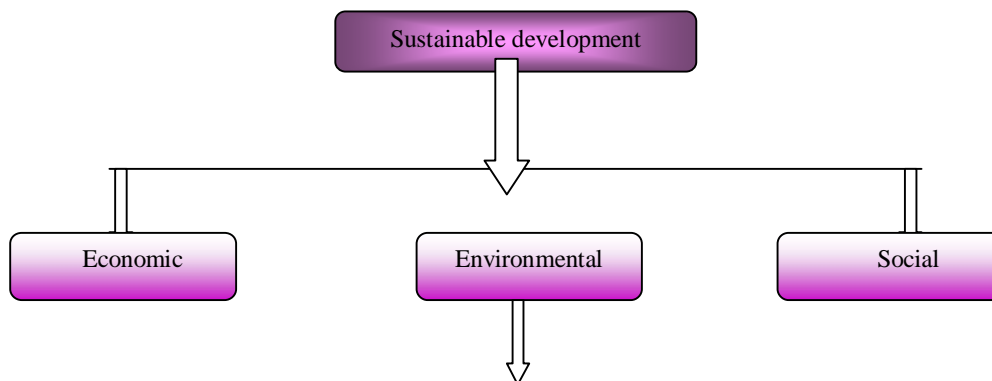
1.Introduction

Bangladesh has seen major improvement in tackling population growth rates whilst drastically decreasing child mortality and increasing overall life expectancy for the population through various long-term programmes as well as improvements in gender equity and norms. The micro-credit revolution continues to boost women’s solidarity groups and earning potential and vast numbers of young women are leaving their villages to work in garment factories. But there exit still most crucial for reducing the incidence of disease which still presents a big problem for many of Bangladesh’s rural poor. Moreover, continued emphasis in improving overall education, gender equity and cultural and religious diversity are all key priority areas for Bangladesh to arrive at a sustainable society.

2.Methodology

Main objective of this study is to draw a credible connection between overall development progress in social arena and strategy options to the achievement. The emphasis on higher level results is intended to improve understanding of the outcome, its status, and the factors that contribute to change. There are also important lessons to be learned about how policy makers operate, opportunities and constraints they face, and effectiveness of the policy. This country evaluation, therefore, also includes “bottom-up” analyses of a sample of the most important factors. The main evaluation was undertaken in two parts. The first mission was to evaluate current scenario and the second mission was to identify the future direction .Secondary data by several sources have been employed in this study.

3.Arena Of Sustainable Development



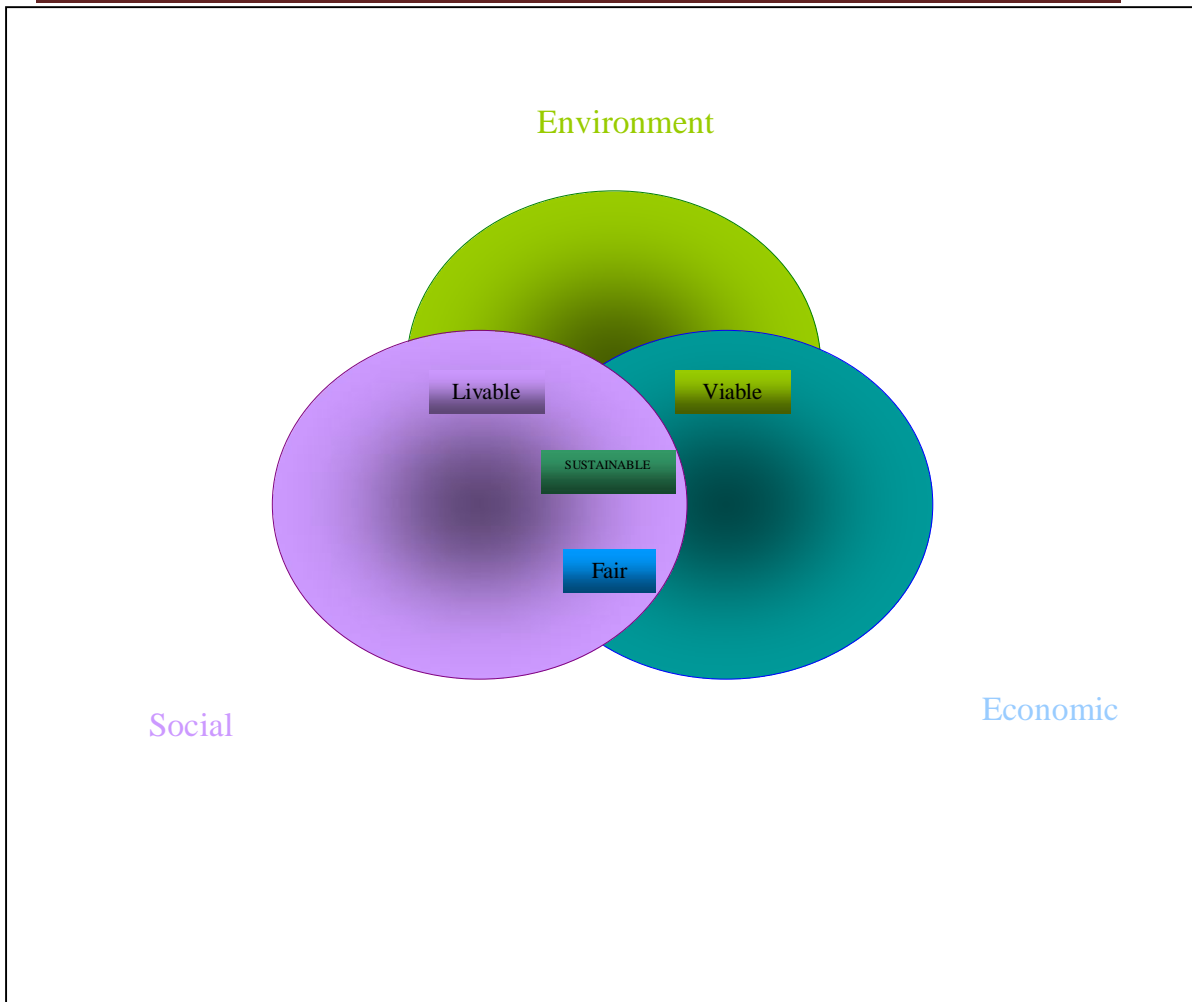


Figure 1: Result of development in the arena of environmental, social and economic

Sustainable development is defined as “development that meets the needs of the present without compromising the ability of future generations to meet their own needs.” In the extensive discussion and use of the concept since then, there has generally been recognition of three aspects of sustainable development:

- **Economic:** An economically sustainable system must be able to produce goods and services on a continuing basis, to maintain manageable levels of government and external debt, and to avoid extreme sectoral imbalances which damage agricultural or industrial production.
- **Environmental:** An environmentally sustainable system must maintain a stable resource base, avoiding over-exploitation of renewable resource systems or environmental sink functions, and depleting non-renewable resources only to the extent that investment is made in adequate substitutes. This includes maintenance of biodiversity, atmospheric stability, and other ecosystem functions not ordinarily classed as economic resources.

- Social: A socially sustainable system must achieve distributional equity, adequate provision of social services including health and education, gender equity, and political accountability and participation. Clearly, these three elements of sustainability introduce many potential complications to the original simple definition. Today, the sustainable development "movement" is multidisciplinary and cross-sectoral. The movement brings together specialists from the physical and environmental sciences along with experts in development economics, political science, appropriate technology, human and women's rights, and others. (11)

Sustainable development involves the equal development of social, economic and environmental areas. Only the social arena of sustainable development in Bangladesh has been assessed here.

4.Social Arena Of Sustainable Development

4.1.Population

With an estimated population of 162 million in 2009, Bangladesh is the seventh most populous country in the world (23). A total land area of mere 147,500 sq. kms accommodating the above population size makes it by far the most densely populated among the populous countries. The per capita GNI PPP is around 1440 dollar which is still among the lowest in the world (15). Even after a considerable rise in adult literacy in recent years reaching 56 percent of male and 49 percent of female population 15 years and above, nearly half the people still cannot read and write (5). Since the 1970s, Bangladesh has experienced negative demographic forces. The dependency ratio indicates whether a country is struggling to generate growth in income and output with a high dependency ratio or is poised for economic boom with a low dependency ratio. The dependency ratio, or the ratio of population below working age (18 years) and population above working age (about 65 years) in Bangladesh was very high with almost one dependent for every worker until recent years. This caused a drag on the economy. Recently the trend has started to reverse and hence it is expected that the future will have positive demographic forces at play. The distribution of the population by broad age and sex is shown in table 1. It may be noted that most of the women-men population on the country is concentrated in the '15-49' age group.

Women							
Age group (years)	2001	2002	2003	2004	2005	2006	2007
<15	38.6	38.1	37.8	37.5	37.0	36.1	34.3
15-49	51.0	51.2	51.4	51.6	51.4	52.3	53.1
50+	10.4	10.7	10.8	10.9	11.9	11.9	12.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Men							
Age group (years)	2001	2002	2003	2004	2005	2006	2007
<15	40.1	38.6	38.4	38.2	38.1	37.2	35.6
15-49	48.1	48.9	49.0	49.4	49.5	50.3	50.9
50+	11.8	12.5	12.6	12.7	12.5	13.2	13.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table 1: Distribution of the population by broad age and sex, 2001-2007

Source: Report on sample vital registration system, 2007

(Gender statistics of Bangladesh 2008, BBS)

It is evident from the table that women population of the age group <15 has decreased from 38.6 in census 2001 to 34.3 in 2007. It was same for men population in the same age group. It has over the year for both men and women over the year for both men and women. For women it increased from 10.4% to 12.6% during 2001-2007 and for men it increased from 11.8% to 13.5% during 2001 to 2007. Percentage of women population in the age group 15-49 increased from 51.0% to 53.1% during 2001-2007.

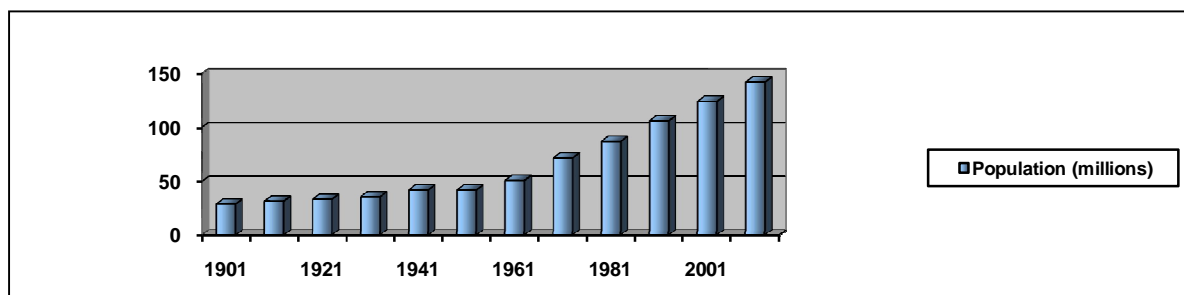


Figure 2: Population figure of the territory now forming Bangladesh, since 1901

Source: POPULATION & HOUSING CENSUS 2011, BBS

Rapid increase in urban population resulting in heavy traffic movement on roads in cities and towns, shortage of housing, poor water supply and sanitation facilities, air pollution etc are constantly affecting environment. Many of these problems are due to influx of rural population to urban areas. In addition, unplanned housing in the villages are being developed destroying agricultural land. Rural Bangladesh has a relatively high population density of 755 per sq km. This is sparse compared to the urban population densities from the latest slum-mapping. (10)

Even with a growth rate of less than 2 per cent the size of the population grew by one third between 1981 and 1995. This built in growth momentum, termed by an economist the “macro inertia” of population (6), is aggravated by the existing pattern of family building, namely a very early start to childbearing and relatively short spacing between subsequent births, which results in a very small generational gap.

A total of 13.3 million young men and women were between the ages of 20 and 24 in 2000; 6.3 million among them were young males and another 6.9 million were young women. By 2025, this number will grow to 17.2 million—a robust growth of 3.9 million people representing an estimated increase of 29.3%. Males will grow by 1.9 million, i.e., a rise of 30%—from 6.3 million in 2000 to 8.2 million in 2025; and females will grow by 2 million, from 6.9 million in 2000 to 8.9 million in 2025, also a growth of 29%. In 2000, 11.7 million adults belonged to the age-group 25-29; among them, 5.6 million were males and 6.1 million were females. In 2025 this number is expected to grow spectacularly to 16.1 million people—4.4 million additional adults. Within this population, 7.5 million would be males—an increase of 1.9 million potential students, and 8.5 million women—an additional 2.4 million adult women representing a growth of 39.3%. (8).

5. Health

The primary objective of avail quality of health and sanitation services for all is to ensure that existing achievement will sustain in future and provision will be made to cover the growing needs of the society. Bangladesh with her 153.3 million people has only 1,683 hospitals as of 2006 (4). Present status of health sector is given in below:

5.1. Child Mortality Rate

The data on child mortality rate by sex and are is shown in table 2. It is apparent from the table that the child mortality rate for both girls and boys has declined since 2000 with

some ups and downs between consecutive years. In case of girls at the national level, the child mortality rate has declined from 4.7 in 2000 to 3.6 in 2007 and that in the case of boys, it was 4.0 in 2000 and declined to 3.6 in 2007. Child mortality rate for the urban girls decreased from 4.4 in 2000 to 2.7 in 2007, it has decreased from 3.6 in 2000 to 1.9 in the case of urban boys. In rural area, girls' child mortality rate has declined from 5.0 in 2000 to 3.9 in 2007 and that of men decreased from 4.2 in 2000 to 4.1 in 2007. Ups and downs in the trend for both boys and girls are also observed in both urban and rural areas.

Year	National		Rural		Urban	
	Girls	Boys	Girls	Boys	Girls	Boys
2000	4.7	4.0	5.0	4.2	4.4	3.5
2001	4.6	3.9	4.9	4.2	3.9	3.3
2002	4.4	4.7	4.6	4.8	3.3	4.4
2003	4.3	5.1	4.6	5.0	3.4	5.4
2004	4.5	4.4	4.5	4.7	4.3	3.4
2005	4.0	4.1	4.6	4.4	2.0	3.2
2006	3.7	4.0	3.8	4.3	3.5	3.0
2007	3.6	3.6	3.9	4.1	2.7	1.9

Table 2: Child mortality rate (1-4 years) by sex and locality, 2000-2007

Source: Report on SVRS-2007, BBS

A recent study finding that infant mortality can be reduced by 15 percent if 1,500 i.u. of Vitamin A is given to newborns opens another intervention opportunity to improve child survival (2)

5.2. Maternal Mortality Rate

Maternal mortality ratio is a very important mortality index of mothers who are exposed to the risk of death during child birth or within 42 days after birth. The data on maternal mortality ratio by area are shown in the table 3.

Year	National	Rural	Urban
2000	3.18	3.29	2.61
2001	3.15	3.26	2.58
2002	3.91	4.17	2.73
2003	3.76	4.02	2.70
2004	3.65	3.87	2.53
2005	3.41	3.58	2.75
2006	3.37	3.75	1.96
2007	3.51	3.86	2.19

Table 3: Maternal mortality rate (MMR) by locality, 2000-2007

Note: MMR includes deaths due to abortion from 2002

Source: Report on SVRS, 2007, BBS

It is observed from the table 3 that at the national level the maternal mortality ratio has decreased from 3.91 in 2002 to 3.51 in 2007. The ratio has decreased from 2.73 in 2002 to 2.19 in 2007 in the urban area as compared to a decline from 4.17 to 3.86 in the rural areas.

5.3.Life Expectancy

Expectation of life is the average remaining lifetime or the average number of years of life remaining at the beginning of life age. Or simply can say expectation of life at birth or average years of life at death. Expectation of life is a measure of longevity. It is computed on the basis of the assumption on age specific mortality experience. Table 4 shows the expectation of life at birth by sex and locality for the year 1985 to 2007.

Year	National		Rural		Urban	
	Women	Men	Women	Men	Women	Men
1985	54.6	55.7	54.1	55.3	60.5	59.9
1990	55.6	56.6	54.9	56.0	59.7	60.3
1995	58.1	58.4	57.7	57.3	60.9	61.5
1997	59.7	60.3	59.2	59.6	62.0	62.7
1998	61.2	61.7	60.3	60.2	63.1	63.5
1999	62.4	63.0	61.5	60.9	64.2	64.3
2001	64.5	64.0	64.1	62.5	66.7	66.2
2003	65.4	64.3	65.5	63.4	67.9	67.3
2004	65.7	64.4	65.5	63.4	68.1	67.5
2005	65.8	64.4	65.6	63.5	68.1	67.6
2006	67.8	65.4	67.3	64.7	68.6	67.6
2007	67.9	65.5	67.6	64.7	68.7	67.7

Table 4: Expectation of life at birth by sex and locality, 1985-2007

Source: Report on sample vital registration system, 2007, BBS

It is evident from the table that expectation of life at birth for women was slightly higher than that of men by 2.4 percentage points in 2007 whereas, in 1985 men was slightly high by 1.1 percentage points. Expectation of life at birth for men and women were also higher over the years in the urban area as compared to rural area. It is also observed from the table that expectation of life at birth with the current mortality experience of 2007 has increased by 13.3 percentage points for women and by 9.8 percentage points for men as compared to those of 1985. Similar increasing trend in expectation of lives had taken place in rural and urban areas for both men and women.

5.4. Sanitation

There has been a strong campaign as well as activities to improve the sanitation system of the country. Success record is very encouraging, nearly 81% of the families in the country have modern sanitary system (24). The sanitation program is implemented by the Government along with UNICEF. NGOs are supplying material for sanitary latrine at a very cheap rate (US\$7.0) in installments. Consider the progress and level of intervention from different stakeholders, it may be concluded that in a very short time all families of

the country will be using sanitary latrine. The only thing that has to be done is to continue the present activities in this sector (24)

Health experts around the world warn that with rise in temperature, due to global warming, the vector-borne diseases will increase. Therefore, climate change poses a big health risk for the population. Although it is too early to predict the nature and extent of increase in infectious diseases, experts believe that malaria, kalajar, influenza, various skin diseases, and other new or emerging diseases may affect the health of the population, bringing immense sufferings and increasing the economic burden of health cost. More emphasis on research and research- based adaptation programming and action should be in place (19).

6.Education

Getting access to basic education has been a key to sustainable development for every citizen of a country. This fundamental right has been denied to a large section of the population lying particularly below the poverty line in many developing countries of the world including Bangladesh. The country has made significant progress in the areas of increasing literacy rates both for girls and boys and greater enrolment of girls in primary schools and secondary schools. The literacy rate for 7 years and above was 44.3%, the female literacy rate was 28.5% and male was 50.4% and adult literacy was 35.3%.

Gender parity has been achieved in primary and secondary levels of education in the country making it a significant achievement for Bangladesh. As of 2010, the ratios are in favor of girls at 1.02:1 and 1.14:1 at primary and secondary levels respectively. Free education for girls is now extended to intermediate level (12th grade).

Primary level enrolment has reached 94.7% in 2010 against MDG target of 100% by 2015. The school drop out rate has also significantly decreased. It is expected that by 2015 all primary age children will be enrolled in schools. School feeding (i.e. mid-day meal) programme has been introduced in selected parts of the country to check school drop-out rate and increase child nutrition. The programme will be expanded throughout the country, but contribution by individuals, private and voluntary organizations and others concerned in addition to governmental efforts are necessary for successfully implementing the programme nation-wide.(Rio + 20:National Report on Sustainable Development)

Gross enrolment rate, completion rate and dropout rate at the secondary level for the period 2002-2005 are presented in following table. The table 5 shows that the gross enrolment rate for girls was 48.16% in 2002 and 47.17% in 2005, for boys it was 41.28% and 38.62% respectively. At the same year the completion rate for girls was respectively 19.23% and 16.71% as against 30.87% and 23.46% for boys showing slow decline over time.

Year	Gross enrolment rate (%)		Completion rate (%)		Dropout rate (%)	
	Girls	Boys	Girls	Boys	Girls	Boys
2002	48.16	41.28	19.23	30.87	80.77	69.13
2003	48.48	41.96	13.74	19.53	86.26	80.47
2004	48.41	39.58	13.79	20.12	86.21	79.88
2005	47.17	38.62	16.71	23.46	83.29	76.54

Table 5: Gross enrolment rate, completion rate and dropout rate at the secondary level, 2002-2005

Sources: BANBEIS- 2006

A University Grants Commission (UGC) report projects that the total higher education enrollment might grow from 1.0 million in 2005 (this number includes degree colleges, but does not include the non-teaching public universities, i.e., National University and Open University) to between 1.3 and 3.5 million in 2025 (21). But teaching quality is generally unsatisfactory. Logistics and facilities are also poor. In Bangladesh, the higher educational institution and the programmes they offer largely operate without any sustained and periodic critical review that is needed for quality maintenance and enhancement (22)

A total of 192 NGOs were involved in the implementation of the non-formal education that includes adult literacy programs. Some of the important achievements of this program were creation of huge inspiration among people in different parts of the country and a spirit of volunteerism among local community; necessary skills and experience in undertaking and implementing NFE at a wider scale; developing areas to extend cooperation between the government and NGOs; experience and skills in implementing post literacy programs and material development (16). Some NGOs distribute food to students daily; others use it as a surprise or a treat. Other strategies used by NGOs to attract students are awarding pupils for good scores and attendance, providing basic

necessities such as clothing and shoes, and offering health care services (12). Government schools have also offered incentives in the form of demand-side interventions such as the Food for Education program and the Female Stipend program, but these have not been nearly as far-reaching or effective as the NGO programs (9).

7. Gender Parity

There is increasing awareness at both global and national levels of the existence of gender discrimination and inequality and the need for individuals, organizations and governments to take an active role in their elimination. A recent World Bank study reveals that a mother's marginal control over resources increases the chances of a baby's survival by 20% in the country. The Bank's World Development Report 2012: Gender Equality and Development mentions that in Bangladesh, a woman earns only 12 cent for every dollar that a man earns, one of the lowest wages earned by women compared to other countries of the world. On the positive side, the report mentions that women's life expectancy has increased to 68.9 years in 2009 from 46.7 years in 1960. (Rio + 20: National Report on Sustainable Development)

UCEP has historically addressed issues related to women's equality through its services within the organization. However, in recent years there has been a loud and growing recognition of the need to address gender issues in a more systematic way. As such a well-designed gender Policy has become a demand of the day. With this in mind, the process of drafting a Gender Policy began with participation and contributions from all quarters. (7)

Employed person 15 years and over by gender and broad economic sectors, 2002-03 and 2005-06 has been shown in table. From the table it is observed that of the total employed women the highest 68.13% were engaged in agriculture sector followed by 31.87% were non-agriculture and 19.35% were service sector 11.51% were engaged in manufacturing sector and the rest were in other industries. On the other hand, for men as high as 58.19% were engaged in non-agriculture followed by 43.05% were service sector and 41.81% were in the agriculture sector. Besides 10.88% were engaged in manufacturing sector and the rest (4.26 %) were in other industry in the year 2005-2006.

Broad economic sector	2002-2003					
	Both sex		Women		Men	
	Number (Million)	Percent (%)	Number (Million)	Percent (%)	Number (Million)	Percent (%)
Total	44322	100	9844	100	34478	100
Agriculture	22931	51.7	5771	58.6	17159	49.8
Non-agriculture	21392	48.3	4073	41.4	17319	50.2
Service	15328	34.6	2261	23.0	13067	37.9
Industry	6064	13.7	1812	18.4	4252	12.3
2005-2006						
Total	47356	100	11278	100	36080	100
Agriculture	22767	48.07	7683	68.13	15084	41.81
Non-agriculture	24859	51.92	3595	31.87	20996	58.19
Service	17714	37.40	2183	19.35	15532	43.05
Other Industry	1651	3.49	114	1.01	1538	4.26
Manufacturing	5224	11.03	1298	11.51	3926	10.88

Table 6: Employed person 15 years and over by gender and economic sectors, 2002-2003 and 2005-06
(In percentage)

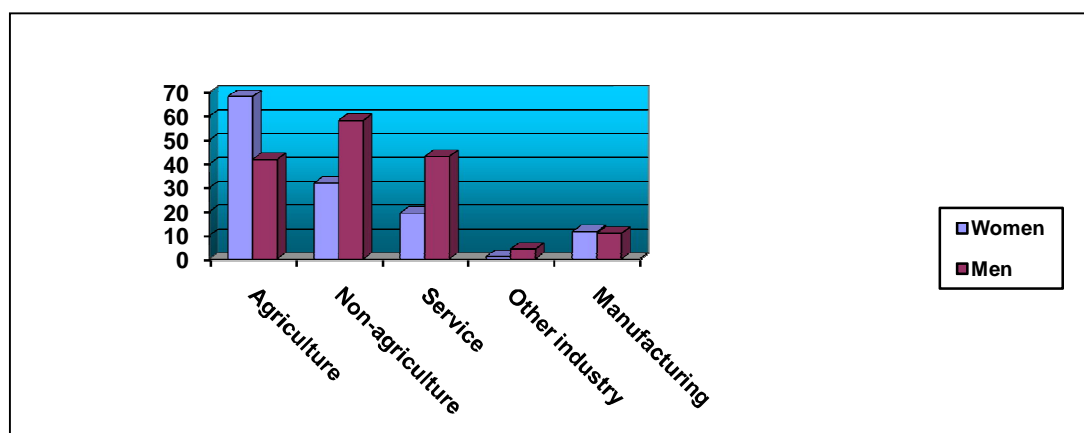


Figure 2: Percentage of employed person 15 years and over by gender and broad economic sector, 2005-2006

The same pattern was observed during the year of 2002-03 for women, the highest 58.6% were engaged in agriculture sector followed by 41.4% were non-agriculture sector 23.0% were in service sector. But there were some variation in the pattern for men, as

high as 50.2% were engaged in non-agriculture sector followed by 49.8% were agriculture and 37.9% were service sector.

The sex ratios in education, also called gender parity index or ratio of girls to boys in education, have yielded peculiar results. In Bangladesh the gender parity index in primary education is already 103 and in secondary education a very high 117. (1)

8.Human Development Index

Human Development report (HDR) is published each year from 1990 by the UN. It indicates the state of the nation in relation to human development by Human development Index-HDI. HDI indicates a composite measure of 3 dimension of human development:

- Living a long healthy life (measured by life expectancy)
- Being educated (measured by adult education and enrolment at primary, secondary and tertiary level)
- Having a decent standard of living (measured by purchasing power parity)

Bangladesh ranked 146 out of 187 countries in the human development progress in the world, said the Human Development Report (HDR)-2013. The report titled 'The Rise of the South: Human Progress in a Diverse World' identified Bangladesh as belonging to a group of highlighted 18 countries in the world which have seen rapid progress in human development (13).

According to Human Development Index (HDI), there are four types of human development index group:

- i) Very high human development
- ii) High human development
- iii) Medium human development
- iv) Low human development

8.1.Very High Human Development Group

Norway , Australia , United States , Netherlands , Germany ,New Zealand , Ireland, Sweden ,Switzerland ,Japan , Canada , Korea, Republic of , Hong Kong, China , Iceland , Denmark ,Israel, Belgium , Austria, Singapore, France ,Finland , Slovenia , Spain ,Liechtenstein ,Italy , Luxembourg ,United Kingdom, Czech Republic, Greece , Brunei Darussalam, Cyprus ,Malta, Andorra, Estonia , Slovakia ,Qatar , Hungary , Barbados ,Poland , Chile , Lithuania ,United Arab Emirates ,Portugal , Latvia , Argentina , Seychelles ,Croatia are in very high human development group.

8.2.High Human Development Group

Bahrain , Bahamas , Belarus , Uruguay , Montenegro ,Palau, Kuwait , Russian Federation , Romania, Bulgaria, Saudi Arabia , Cuba, Panama ,Mexico , Costa Rica, Grenada , Libya ,Malaysia , Serbia , Antigua and Barbuda , Trinidad and Tobago , Kazakhstan , Albania , Venezuela, Bolivarian Republic of , Dominica , Georgia , Lebanon , Saint Kitts and Nevis , Iran, Islamic Republic of, Peru , The former Yugoslav Republic of Macedonia , Ukraine , Mauritius , Bosnia and Herzegovina ,Azerbaijan , Saint Vincent and the Grenadines , Oman, Brazil , Jamaica , Armenia , Saint Lucia, Ecuador , Turkey , Colombia, Sri Lanka ,Algeria, Tunisia are included in high human development group.

8.3.Medium Human Development Group

Tonga , Belize , Dominican Republic , Fiji , Samoa , Jordan , China , Turkmenistan , Thailand , Maldives , Suriname ,Gabon , El Salvador , Bolivia, Plurinational State of , Mongolia , Palestine, State of , Paraguay , Egypt , Moldova, Republic of , Philippines , Uzbekistan , Syrian Arab Republic , Micronesia, Federated States of , Guyana , Botswana , Honduras , Indonesia , Kiribati , South Africa, Vanuatu, Kyrgyzstan , Tajikistan , Viet Nam , Namibia , Nicaragua , Morocco , Iraq , Cape Verde , Guatemala , Timor-Leste , Ghana , Equatorial Guinea , India , Cambodia , Lao People's Democratic Republic , Bhutan, Swaziland are included in medium human development group.

8.4.Low Human Development Group

Congo , Solomon Islands , Sao Tome and Principe , Kenya , Bangladesh , Pakistan , Angola , Myanmar , Cameroon , Madagascar , Tanzania, United Republic of , Nigeria , Senegal , Mauritania , Papua New Guinea , Nepal , Lesotho , Togo , Yemen , Haiti , Uganda, Zambia , Djibouti , Gambia , Benin , Rwanda, Côte d'Ivoire , Comoros , Malawi , Sudan , Zimbabwe, Ethiopia , Liberia , Afghanistan , Guinea-Bissau , Sierra Leone , Burundi , Guinea, Central African Republic , Eritrea , Mali , Burkina Faso , Chad , Mozambique , Congo, Democratic Republic of the , Niger are included in low human development group.(20)

Country	rank	change	Type of change	Human development index	HDI rank
Norway	1			0.955	Very high
United States	3	-1	↓	0.937	Very high
Malaysia	64	1	↑	0.769	high
Sri Lanka	92			0.715	high
China	101			0.699	Medium
India	136			0.554	Medium
Bangladesh	146	1	↑	0.515	Low
Pakistan	146			0.515	Low

Table 7: 2012 HDI ranks of some selected countries and changes in rank from 2011 to 2012

Source: Human Development Report 2013

9.Recommendation

The challenges that Bangladesh faced on the path to Sustainable Development are numerous. It includes the goals stated in the Millennium Development Goals (MDGs). In order to bring about sustainable development the following general strategies in social arena should be set out:

- Child & Mother Health Institute Law should be moderated.
- Safe Blood Transfusion Law should be implemented properly.
- National Sanitation Strategy should be taken in rural area.
- The Smoking and Using of Tobacco Products (Control) Act should be taken strictly.
- The Drugs (Control) (Amendment) Act, Ordinance should be implemented strictly.
- An economy should be created that will have continued growth and benefit will penetrate at all level to ensure sustainable development;
- Institutional capacity should be enhanced and necessary changes should be brought at institutional at institutional level as appropriate for sustainable development;

- Policy and regulatory framework should be implemented to create an enabling condition and support sustainable development
- Knowledge base for sustainable development should be created.
- Quality education should be ensured.
- Active labor market policies support employment generation. So, active labor market policies should be formulated or implemented.
- Development of special initiatives to raise awareness of gender issues and the Gender Policy at all levels of the organization. This will require developing indicators for organizational awareness and monitoring progress.
- Laws and procedures and design an implementation strategy should be reformed to ensure compulsory registration of birth, death, marriage and divorce.
- Education Policy may ensure improved quality and completion of primary and secondary education levels.
- Efficiency in the use of health sector resources should be improved.
- The curricula should be upgraded and teaching-learning methods should be improved for quality outcomes to meet 21st century challenges.
- Population control policy should be reformed.

10. Conclusion

Rights of the citizens to quality health and sanitation services, minimum shelters for all including access to services and utilities, quality education, creating social safety net, gender equity and empowerment of women, child rights and special services for children, aged and people needs special assistance are key areas addressed by government of Bangladesh under social arena. These are the critical indicators for demonstrating growth of social development. Creating provisions, ensuring access and maintaining quality services are key challenges to meet growing demand of large population at present and future.

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