

Statement from Indigenous group of Children

I am Ishmita, a member of the National Children's Task Force (NCTF). NCTF is a children's organization consisting of children from all backgrounds of the society including indigenous children. NCTF is supported by Save the Children and Plan International Bangladesh.

I am presenting the situation of the children from the Shantal, Garo, Marma, Tripura, Chakma, and Khasia indigenous groups of Bangladesh. We are gradually losing our own culture and not getting any opportunity to learn our language. What we need most are education, health and protection services, opportunities to exercise our own culture and language, and improvement of the communication and transportation systems.

As the hilly areas are isolated and remote, Indigenous girls are at risk of violence and insecurity. Many girls are not able to study due to poverty. In the hilly area, girls are facing sexual harassment by Bengali and tribal men and boys. As a result, most girls are getting married early by their family. Indigenous girls are not aware of their reproductive health and do not have the opportunity to use a sanitary napkin. Also, there is no hygienic toilet facility for them.

Although primary schools are near to our area, high school and college are far away. It takes 24 hours to reach the Upazila or district town from many villages, especially in hilly areas. So many children cannot continue their education after finishing primary school. Many schools discriminate against Shantal children and do not want to admit them. As there are inadequate indigenous teachers in schools, it gets difficult for children to understand their studies. Teachers do not come to school regularly as the transportation system is not good. Amid this ongoing pandemic situation, Indigenous children in hilly and plain lands are not able to continue their studies because of not having smartphones or access to the internet. Most of the Indigenous children at the hilly area and plain lands are engaged in child labor includes Jhum cultivation, farming, day labor, fishing, etc.

There are not enough healthcare facilities for indigenous children in the hilly and plain areas. People living in the hills travel 3 to 5 hours to access health services. Besides, they face difficulties to come to the hospital for emergency treatment from remote areas. Pregnant mothers in particular face a higher risk of death in these situations. There is insufficient pure drinking water in hilly areas. The only source of water in the hills is fountains and wells. But at present, the use of pesticides in agriculture is contaminating the water of the fountains and wells.

Our recommendations: the local government and administration can establish health facilities and higher secondary schools with adequate manpower, raise awareness on reproductive health and provide sanitary napkins, establish deep tube wells, and improve our communication and transportation systems. Thanks a lot.