

Child Labor in Harmful Works: A Case Study on Bangladesh Scenario

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Abstract: *Child labor is considered an absolute truth in Bangladesh and so as to chiefly be denoted as one of the major socio-economic problems of the country. The working children, as a socio-economic group or members of the society are the most disadvantaged on account of their survival of self and family. They are forced to work for living, sacrificing their childhood in addition to their prospect. Studies reveal that one in every six children in Bangladesh is working children doing their jobs in diverse unhygienic environment in their work places across the country. The gravity of the situation led us to study on child labor in harmful or risky works in the working area of children at Dhaka, Khulna and Kurigram. The study looks into one of the key aspects of child protection – prevalence of harmful child labor using the definition of children and harmful labor. The study also generates baseline information on major characteristics of child labor including income and household dependency on work/income from the children.*

Introduction:

Bangladesh is the home of 6.6 million working children, accounting for more than 5% of the world's working child population numbering 120 million. National Sample Survey of Child Labor in Bangladesh defined child laborers as children in the age group of 5-14 years.¹ A large segment

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¹ National Sample Survey of Child Labor in Bangladesh: 1995-96 and 2002-03

of the labor force in Bangladesh is engaged in informal activities, and child labor is a notable feature of the growing informal labor situation. They are found working as garbage pickers, shoeshine boys, electroplates workers, metal workers, leather workers, brick breakers, coolies, porters, motor transport helpers, restaurant boys, domestic workers, vendors on streets or waysides. Those who are fortunate live in some slum and poor residence area, for others, addresses are on the footpath days or night, in rainy season or in winter. Many of them work 48 hours a week on an average, earning less than 500 taka per month. The scenario of child labor are highly affected with these major discrete indicators e.g. duration of work, no wage, irregular wage, minimum daily wage, leave, break for lunch, break for education, medical care, Toilet, safe drinking water, safety measure, physical risks, verbal abuse, physical abuse and sexual abuse. Besides, the study also focuses on other issues of the risky environment of child labor such as distribution of harmful child labor across the major occupations, its relative share with child labor, working children and all children in the households.

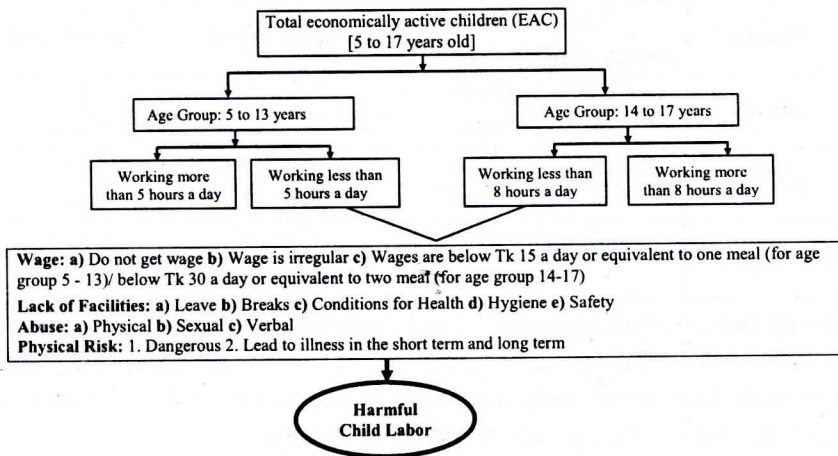
1.1 Meaning of Harmful Child Labor in General

According to ILO Convention defines harmful work as work which, by its nature or the circumstances in which it is carried out, is likely to harm the health, safety or morals of children.² The Government of Bangladesh ratified the ILO Convention on the Worst Forms of Child Labor. The Convention calls for immediate and effective measures to secure the prohibition and elimination of the worst forms of child labor as a matter of urgency. The children work in vulnerable conditions, exposed to hazards including street crime, violence, drugs, sexual abuse, toxic fumes and substances without adequate safety protection, carrying heavy loads and using high speed machinery. Child trafficking, sexual exploitation, physical torture, low payment for work are common among poor children³. Inconvenient atmospheres of children in workplace harm their physical and mental health thereby, taking them in vulnerable and susceptible conditions in living place or outside.

² Article 32 of ILO Convention 182 on the Worst Forms of Child Labor

³ Hameeda Hossain, Human Right in Bangladesh 2004, *Ain-O-Shalish Kendra (ASK)*, 2005

Figure 1: Harmful Child Labor Scenario



1.2 Objectives of the Study

The key objective of the study is to find out the prevalence of harmful child labor in work places and to quest of the way-forward of harmful child labor through which child may get convenient environment in their respective work places. The specific objectives are: (a) to estimate the prevalence of harmful child work, and (b) to quantify household dependency on the work/income of children.

1.3 Methodology of the Study

This study describes all pertinent methodology and implementation issues.

1.3.1 Study Area: The study covers five sample areas from different places of the country covering 2 City corporations, 1 municipality and 2 rural unions scattered over 3 districts under Dhaka, Khulna and Rajshahi divisions. Among the districts, Khulna and Kurigram has both rural and urban features as opposed to Dhaka having only urban. Of the total 6 study areas, 4 were selected from urban locations and rests from rural locations. Although the study was confined to limited areas, the survey has generated useful information and insights, supported by qualitative data.

The sample wards/unions of respective districts are mentioned in Table 1.

Table 1: Study locations by sample unions/wards

District	Upazila/City corporation/Municipality	Union/ Ward	Urban/rural
Dhaka	City Corporation	Ward 60	Urban
	City corporation	Ward 61	Urban
Khulna	City Corporation	Ward 22, 30	Urban
	Koira	Uttar Bedkashi	Rural
Kurigram	Municipality	Ward 1	Urban
	Sadar	Holokhana	Rural

Study Design: Both quantitative and qualitative techniques were used to collect in-depth/perceptual information on selected indicators related to the study. Qualitative tools were used in the present analysis, to capture the wide range of perspectives and group dynamics.

1.3.2 Sample Design-

1.3.3 Sample Design for Quantitative Study: Two categories of respondents namely, the children and parents were considered for collection of relevant information. Thus, 'household' was taken as a Primary Sampling Unit (PSU) to cover the parents as well as their working and non-working children. Final sample size of households is $n = 345$. Sampling frames in rural and urban areas were provided by our own initiatives while we were the employees of two research institutes.

Table 2: Study location and sample size

Study location	Proportionate share of sample size
Uttar Bedkashi Union, Koira Upazila, Khulna	32
Holokhana Union, Kurigram Sadar, Kurigram	61
Lalbagh, Ward 60, Dhaka City Corporation	107
Lalbagh, Ward 61, Dhaka City Corporation	49
Khulna, Ward 22, Khulna City Corporation	31
Khulna, Ward 30, Khulna City Corporation	51
Kurigram, Ward 1, Kurigram Municipality	14
Total	345

Above allocation has been made on the basis of approximate estimated household per location.

Simple Random Sampling (SRS) Procedure was adopted to select sample households. After proportional allocation among study locations SRS was adopted.

1.3.4 Study Respondents: Parents = 345, Child labor = 154, Total= 499

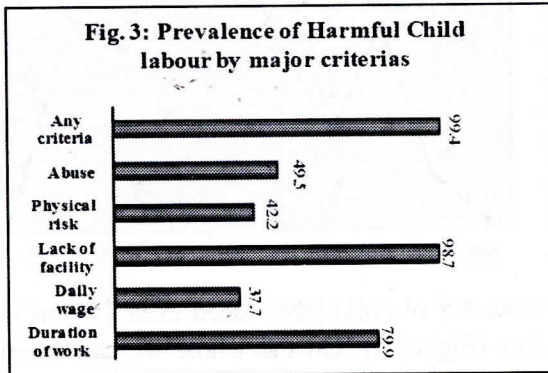
1.3.5 Qualitative Study Design: In Dhaka City, having only urban sample areas, both boys and girls were interviewed in urban locations. In Khulna district, urban location was selected for boys and rural for girls. In Kurigram district, urban was selected for girls and boys for rural locations. The methods were applied for male and female children separately.

2.0 Analytic Approaches to Child Labor and Harmful Child Labor:

The following steps were followed to analyze prevalence of child labor and practices of harmful child labor. First, the Prevalence of Child Labor (PCL) has been defined as follows:

$$PCL = \frac{\text{Number of child labor (5-17 yrs) observed in the sample}}{\text{Total number of observed sample children (5-17 yrs)}} \%$$

95% Confidence Interval (CI) has been constructed for this indicator. In order to study the scenarios of harmful child labor, the following strategy was adopted:



2.1 Prevalence of Harmful Child Labor by Major Criteria

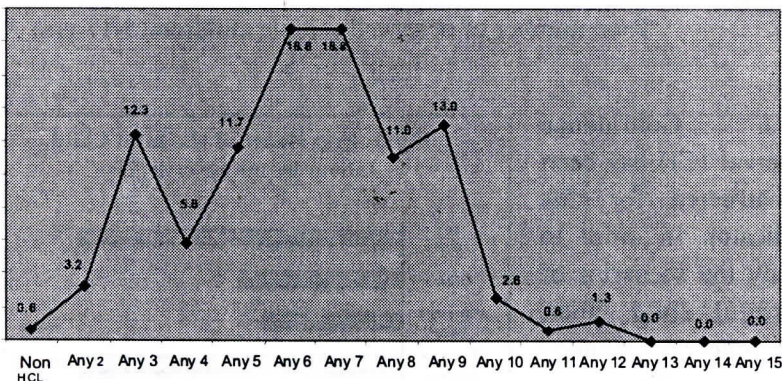
The study has made an attempt to estimate the prevalence of child labor in harmful work as well its distribution across the various categories related to harmful work. Almost all the child labors (99.4%) were reported as harmful in the study areas (Figure 3). Substantial variation has also been noticed across the major categories. The highest proportion of

child labor, (little less than 99%) was identified harmful in terms of a major category labeled as ‘lack of basic facilities’, which includes leave/holiday, break for lunch and recreation, health and hygiene, protective measures, education. This was followed by ‘prolonged working hours’ at work places (80%). The stated proportion of harmful labor in terms of other major categories like ‘abuse’, ‘physical risk’ and ‘daily wage’ were also high with 50%, 42% and 38% respectively. The extremely high prevalence of harmful child labor may be attributed to two factors, (1) child labor *per se* is harmful, and (2) the definition (indicator) of harmfulness may be much liberal in the context of Bangladesh (e.g. lack of health facility, lack of safety measures, etc).

2.2 Degree of Harmful Child Labor among the Working Children

Among child labor there was acute prevalence of harmful child labor. As we notice in Figure 3, about 37% child labor had to undergo 6 or 7 types (components) of harmful child labor. Even, 13% child labor faced 9 different types of harmful labor. We also noticed in Figure 4 that 47% of child labor regularly faced at least 6 different types of harmful works.

Fig. 4: Percentage distribution by degree of harmful child labour

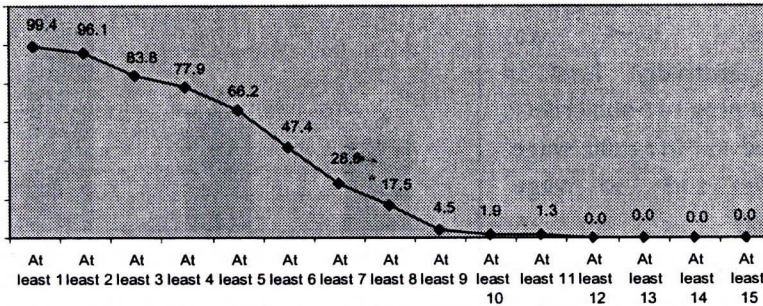


About 8% of child labor faced even 75% of indicators of harmful child labor (Figure 5). On the whole we can assert that among child labor, substantial proportions were doing harmful labor regularly. In order to have some idea about the extent of harmful child labor in the target population we have constructed few 95% Confidence Intervals (CI) as shown below.

- a) 95% CI for at least 2 Indicators: Upper Limit (UL) = 99%, Lower Limit (LL) = 97%

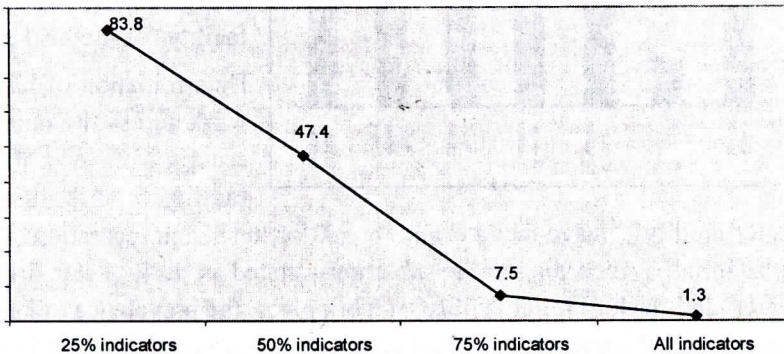
b) 95% CI for at least 7 Indicators: Upper Limit (UL) = 55%, Lower Limit (LL) = 39%

Fig. 5: Percentage distribution by lower bound (degree) of harmful child labour



Above two 95% Confidence Intervals convey a signal of severe scenario of harmful child labor. In the population it can be expected that 97%-99% child labor faced at least two types of harmful labor. It is also clear that in the target population there is high chance that among 39%-55% of child labor there are at least 7 different types (50%) of harmful labor.

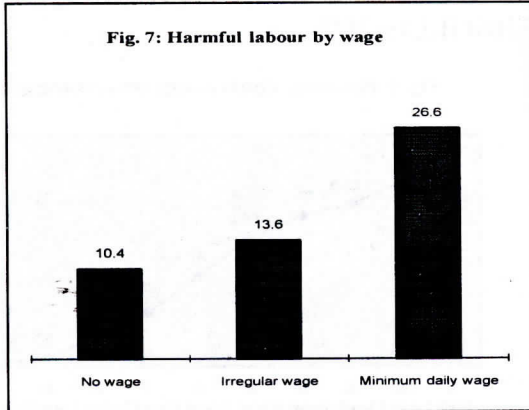
Fig. 6: Relative weight of indicators of harmful works as possessed by child labor



2.3 Distribution of Harmful Work across the Sub-criteria

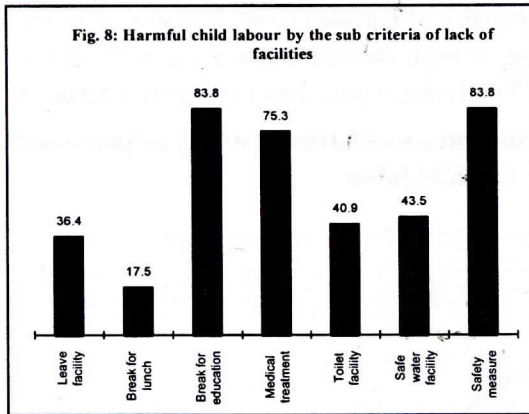
For the convenience of description, some of the major criteria like daily wage, physical risks and abuse were further broken down into several sub-criteria as illustrated in Figures 7, 8 and 9 respectively. Under the major category like daily wage, it appeared that relatively higher proportions of works (27%) were marked harmful due to low wage lies

with the sub-criteria termed as 'minimum daily wage'. The information in support of harmful work was comparatively less in remaining two sub criteria stated as 'irregular wage' (14%) and 'no wage' (10%)



As regard to another

major criterion – 'lack of basic facility' at work place, the finding of higher frequency of harmful work (84%) was largely detected in terms of each of the sub criteria stated as 'no break for education' and 'lack of



safety measure' at work places. Second most appearance (75%) of harmful work was identified in accordance to the sub criterion identified as 'lack of facility for medical care'.

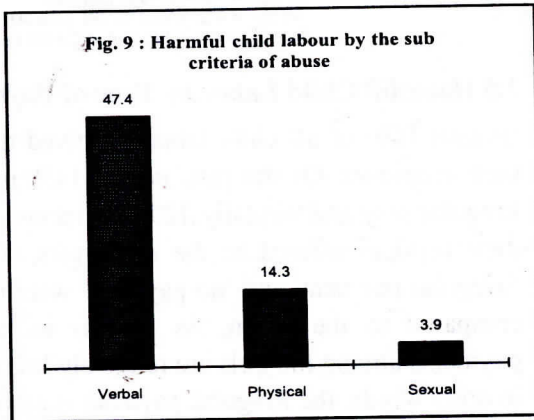
Determination of harmful work across the other sub criteria like 'lack of toilet facility', 'safe drinking

water facility', 'leave facility' and 'break for lunch and recreation' varied substantially. According to the sub criteria stated as 'lack of safe drinking water' and 'lack of toilet facility' at work place, the prevalence of harmful work was 44% and 40% respectively. Least prevalence of harmful work was noticed under the sub category of lack of break for lunch and recreation, merely stand as 18%.

To describe by region, distribution of those few work places having the facility of break for education were mostly located at Dhaka city and least were at Khulna City. No work place was reported to have break for education at Kurigram district. By gender composition, it was 16% among the female child laborer and as low as 2% among the male

counterpart who have enjoyed the opportunity. In contrast, qualitative information could not find any such break that can be termed exclusively as break for education. According to case study, “No extra time was allocated to us for education other than 1 hour break at lunch time. Moreover, we had to compensate the employer for the time lost for education by working extra time.”

While, almost two-third of the child labor reported to have the access to leave according to their need but to speak about the benefit of holiday (weekly & govt.), half of child laborer stated that they could not avail holiday to their need. Regarding medical care at work place, reported information showed that hardly have the access to such facility at work place for more than one-fourth of the child laborer. As regard to safety measure, it is virtually nonexistent in most (84%) of the work places. Location wise, the provision of this facility was exclusively limited to a few work places in Dhaka city. The situation of work places having facility for education and skill training was noted quite low, stated as 8% in each. On the whole it indicate that the provision of such basic facilities were not a common practice at the work places located at the study areas.



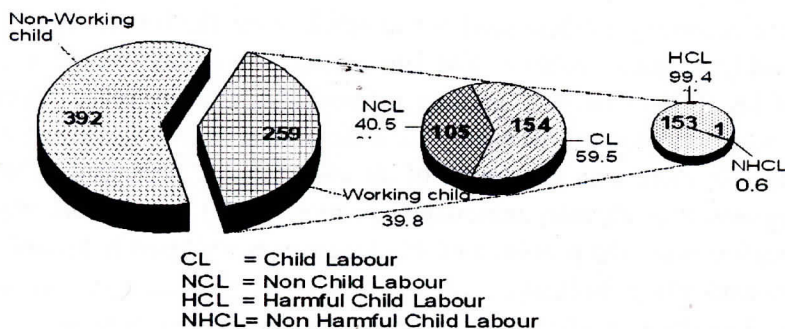
With respect to the major category like ‘abuse’, the identification of harmful work was largely acknowledged due to frequent occurrence of the sub criterion denoted by verbal abuse (47.4%) in work places. The exposure to other stated forms of abuses at work places were relatively less reported and denoted by sub criteria like physical and sexual abuse. Abuse of any form, be it verbal, physical and sexual were considered, as harmful child labor and demonstrated proportions of physical abuse and sexual abuse were 14% and 4% respectively (Figure 9).

2.4 Percentage Share of Harmful Child Labor

Figure 10 portrays the harmful child labor in terms of its relative share with ‘all children’, ‘working children’ and ‘child labor’. The proportion

of harmful child labor against the total child population, working children and child labor were estimated and the projected share asserted as 24%, 59% and little higher than 99% respectively. The proportions of boys engaged in harmful works were almost double compared to the corresponding girls working at different places.

Figure 10 : Relative share of harmful works



2.5 Harmful Child Labor by Type of Payment

Overall 76% of all child labors received their payment regularly from their employer. Of the rest, nearly 14% received their payment at an irregular way and virtually 10% not received any payment at all against their services offered to the employers (Table 4). The prevalence of 'irregular payment' and 'no payment' were noted more in rural locations compared to the urban. As regards to gender composition, regular payments among the girls are relatively less than that among the boys, or in other words, the irregular payment is comparatively higher among the girls than their counterpart boys.

Table 4: Harmful Child labor by type of payment

Type of payment	Boys			Girls			Both		
	Urban	Rural	All	Urban	Rural	All	Urban	Rural	All
Regular	79.3	68.42	77.2	76.6	50.00	73.6	78.3	64.0	76.0
Irregular	9.8	21.05	11.9	17.0	16.67	17.0	12.4	20.0	13.6
No salary	11.0	10.53	10.9	6.4	33.33	9.4	9.3	16.0	10.4
N	82	19	101	47	6	53	129	25	154

2.6 Harmful Child Labor by Amount of Payment per Day

As regards to daily wage, it appeared that almost 20% of the children working for less than 5 hours received payment less than Taka 15 or the equivalent of one meal and 17% of the children working over 8 hours received payment less than Taka 30 or equivalent of two meals considered harmful. In both the age groups, prevalence of such harmful work was fairly high among the female child labor (53%) compared to their male counterpart (31%). By region, overall distribution of harmful child labor was somewhat higher in urban areas within the age group of 5 -13 and in rural areas within the age group of 14 -17 years of ages.

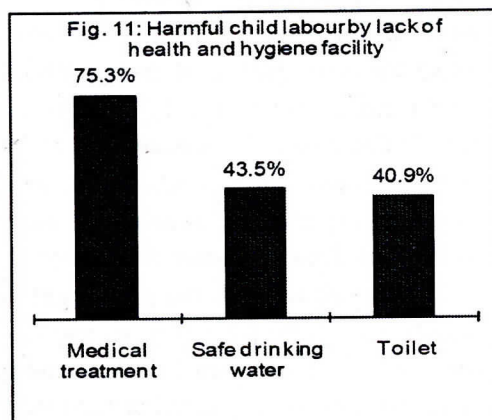
Table 5: Harmful Child labor by amount of payment per day

Amount of payment per day in Taka	Boys			Girls			Both		
	Urban	Rural	All	Urban	Rural	All	Urban	Rural	All
Working < 5 hrs									
< 15 Tk.	25.5	12.5	22.5	46.2	66.7	48.3	32.1	21.1	19.5
≥ 15 Tk.	74.5	87.5	77.5	53.8	33.3	51.7	67.9	78.9	45.5
Working > 8 hrs									
< 30 Tk.	33.3	100.0	40.0	61.9	33.3	58.3	45.8	66.7	16.9
≥ 30 Tk.	66.7	—	60.0	38.1	66.7	41.7	54.2	33.3	18.2

2.7 Harmful Child Labor by Presence of Facility for Medical Treatment at Work Place

On the whole, more than 75% of child laborer expressed that there was no facility for medical care at their work places. Similarly, on an average there was no facility for safe drinking water (44%) and toilet (41%) facility at work places (Figure 11) as stated by the respondents at the time of interview.

Region wise, it was evident from data that 21% of the child labor working at Dhaka informed to have medical care in their work place. Whereas the proportion of child laborer reported to have medical care in their work place at Khulna and Kurigram were observed low at 3% and 1%



respectively. Of the work places having facility for basic medical care, other than Dhaka, existence of such facility was mainly reported at rural locations.

Of the children working as child labour at Dhaka, little higher than 50% reported the existence of facility for drinking water at their work place. Around half of the children working in Dhaka areas had no facility for drinking water at their work place. A more critical situation was unveiled in Khulna and Kurigram districts where hardly 21-23% of the children working at different places had the facility for drinking water at their work places.

In order to have a look into the matter of whether the work places of the children at different regions were provided with toilet facility or not, about 84% of children working at Dhaka affirmed the presence of toilet at their work place. To other end, the overall situation of the work place having toilet facility at Khulna (9%) and Kurigram (7%) districts were reported miserable. No substantial variation was noticed in gender composition regarding its use by sex.

2.8 Child Labor by Source of Safe Drinking Water at their Work Places

Of the interviewed parents and child laborer, majority (52%) mentioned about supplied tap water as a source of safe drinking water at their work places. Mentioning tap water as a source of safe drinking water demonstrated their deficiency of idea about safe drinking water. However, the most alarming finding revealed regarding safe drinking water was that about 29% of child laborers use arsenic contaminated tube-well as a source of drinking water. No precise explanation could be made in this regard on basis of collected data/information. Ignorance about the consequence of arsenic toxicity or lack of alternate source of safe drinking water nearby may be the possible reason. The motive behind this type of life threatening unhealthy practice should be explored and immediate measure should be taken by the concerned authority to stop drinking arsenic contaminated water. The remaining less stated main sources of drinking water were filtered water, boiled water and arsenic free tube-well water at the proportion of 12%, 8% and 5% respectively. Location wise, the filtered water and tap water were primarily reported at the work place of urban locations and tube-wells irrespective of arsenic contamination were located at rural locations

Table 6: Child labor by source of drinking water at their work place

Source of drinking water	Boys			Girls			Both		
	Urban	Rural	All	Urban	Rural	All	Urban	Rural	All
Filter water	15.9	4.5	13.5	8.5	—	8.0	13.2	4.0	11.7
Tap water	57.3	27.3	51.0	57.4	—	54.0	57.4	24.0	51.9
Boiled water	7.3		5.8	10.6	66.7	14.0	8.5	8.0	8.4
Tube well (arsenic safe)	4.9	18.2	7.7	—	—	—	3.1	16.0	5.2
Tube well (arsenic contaminated)	18.3	72.7	29.8	27.7	33.3	28.0	21.7	68.0	29.2
Well	1.2	—	1.0	—	—	—	.8	—	.6
River	3.7	—	2.9	—	—	—	2.3	—	1.9
N	82	22	104	47	3	50	129	25	154

2.9 Perceived View of the Working Children regarding Harmful Works

While the questionnaire interview was administered to collect quantitative data valuable qualitative information were also collected using FGD, CPM and case study. The FGDs and CPMs were conducted in groups while case studies by personal approach/interviews with the child laborers found within the sample households. Based on the views of aforementioned children, the qualitative information revealed the following criteria as a key determinant of harmful work. Discussion with the child laborers further explored their understanding and perception towards harmful and non-harmful work as follows:

Table 7: Key indicators of harmful work as perceived by the working children

01. Working with electricity	12. Works require excessive physical strength
02. Works associated with physical contact to acid, chemical and/or corrosive	13. Works with fragile sharpened materials
03. Works related to exposure of persistent smoke and/or fumes	14. Long working hours
04. Works with sharp and pointed instrument	15. Works create barrier to attend school
05. Works lead to physical injury	16. Works related to abuse of any kind
06. Works lead to short or long term illness	17. Works without salary or payment
07. Forced to work during illness	18. Inadequate salary or payment
08. Cooking or working with fire	19. Irregular salary or payment
09. Working without protective measure	20. Continuous work without adequate rest
10. Operation of heavy machine	21. Works related to excessive load
11. Works require excessive physical strength	

3.0 Recommendations

Child labor is a sheer reality in Bangladesh. They are involved in harmful work and also under most unhygienic and risky conditions that the study reveals. Based on the analysis of the findings the following recommendations having policy and programmatic implications have emerged-

3.1 Use of protective equipment, regulations concerning procedures and safety practices can control occupational health hazard as well as lessen extent of harmfulness.

3.2 Working children experience health problems such as fever, cough, headache/backache, as well as serious problems from factory materials causing skin problems, respiratory infections. An improved primary health care system, such UPHCP, NSDP, should make services available to various categories of working children. This system can be either work place or household based. Moreover, NGOs can explore different health services for working children in semi-urban and rural areas.

3.3. The study findings show that in most of the children's occupations, whether in agriculture, factories, shops, domestic services or even in own house, the working hours are quite long. Seven days a week becomes a standard for some factories, although usually garment workers get one day off (sometimes they are trapped into emergency order and overtime which leads to seven days work). Save the Children (UK) with its alliance, government, other NGOs, local institutions, ward commissioners, media can play active role in advocacy to lessen the working hours without any negative effect on their wages.

3.4 Although they work as much as an adult does, they are ill-paid. There should be an attempt to determine and implement wage-scale for the children who are compelled to work both in rural and urban areas so that they should not be discriminated.

3.5 According to principle of universal compulsory primary education children should all be in schools, and not in the factories, shops and other workplaces. Education is 'free' and the students get stipends.

3.6 A number of NGOs take initiatives to provide basic learning which deserves appreciation. Several factors should be kept in mind regarding this initiative. Firstly, hours spent for the learning should be longer to be properly educated. Secondly, the employers may get incentives if they

allow their employees to be educated at the NGO-run or privately initiated education institutions.

3.7 Working children at harmful work face most severe form of child abuse and exploitation. Save the Children alliance has prepared Child Protection Policy (CPP) to raise awareness of the problem of child abuse and protect children from this. The alliance along with government and other rights-based organizations can take initiatives for social awareness, rehabilitation promotion, and prevention among different factories as well as other work places, both in urban and rural area.

3.8 Another in-depth comprehensive study needs to be conducted to get the employers perspective (also a list of incentives) on child labor, harmful work, ensuring basic facility at work place, skill development of working children.

4.0 Conclusion

Determinants of Child labor in Bangladesh are multifarious. Two factors are the major determinants of child labor in Bangladesh. *One* is supply factor in which poverty is the most important factor for the prevalence of child labor in the country. They contribute around 20-25% of family income. Since poor households spend most of their income on food, the earnings of working children are crucial for their survival. Usually, poor parents fail to appreciate the long-term value of education, instead of for the short-term economic gains of child labor. It is often argued that where the alternative to child work is starvation, perhaps, child's rights might include the right to feed oneself and one's family, be it through paid work. In poor families, parents as well as children consider employment in certain occupations (work in engineering workshop, metal factory) as a rare opportunity to learn employable skills. In this way, work becomes an alternative to them with more practical value than the traditional primary education. In the face of poverty, child labor is regarded as a 'necessary evil'⁴. Every year, natural calamities such as floods, cyclones, river erosion causes many people homeless and helpless. Poor families can hardly cope with these. Moreover, abandonment or divorce, illness or death of parents (or adult members of a family) trap children of such family early entry in the world of work. *Second* one is demand factor.

⁴ Scott, S.P. 1997: Education of Garment Workers in Bangladesh: A case study of the MOU Involving the ILO, UNICEF, BGMEA and Ontario Institute for Studies in Education of the University of Toronto, Canada.

The lower cost of employing child workers is often cited to explain the demand for child labor. Employers are also tempted to hire children because they are much less aware of their rights and less likely to organize against exploitation. As compared to the adults, they have weak bargaining power, and can easily be punished physically, and dismissed. To the employers, they are trustworthy, moreover, they can do monotonous work and are less likely to be absent from work.

These two factors of child labor urge them to engage various activities which ultimately become the harmful work for child. Our suggestions mentioned above in this regard could be the magnet in easing the harms of child in the working places. In fact, concerned authorities and organizations (national and international organizations) who are working on child have to come forward for making place convenient in the working place of child by which child or child labor could be free from all types harmful works in Bangladesh.

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