

# EXPLORING PSYCHO-SOCIAL CHALLENGES AND COPING MECHANISMS AMONG ADOLESCENTS IN BANGLADESH: A QUALITATIVE APPROACH



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## ABSTRACT

**Purpose:** The purpose of this study was to explore the major psychosocial challenges faced by adolescents in Bangladesh and to identify the coping strategies they adopt to manage these challenges. Recognizing adolescence as a critical period of psychological, emotional, and social development, the study aims to provide insight into how family dynamics, social environments, and cultural expectations influence adolescent mental health and well-being. **Methodology:** A qualitative research design was adopted to gain an in-depth understanding of adolescents' lived experiences. Data were collected through four individual in-depth interviews (IDIs) and five focus group discussions (FGD) with adolescents aged 13–18 years from schools in Dhaka City. Participants were selected purposively to ensure diversity of experiences. Thematic and content analysis techniques were applied to identify recurring psychosocial patterns, emotional struggles, and coping mechanisms. **Findings:** The findings reveal that Bangladeshi adolescents frequently experience stress, anxiety, and depressive symptoms resulting from restrictive parenting, excessive academic pressure, limited personal freedom, and lack of emotional support. Communication barriers between parents and children, gender-based restrictions, and social stigma further exacerbate these challenges. Despite these difficulties, adolescents adopt a range of coping mechanisms, including seeking social support, engaging in extracurricular and religious activities, and problem-focused coping. However, maladaptive behaviours such as withdrawal and substance use were also observed among those lacking guidance or mental health resources. **Implications:** The study underscores the urgent need for school-based counselling, improved parent–adolescent communication, and community-level mental health initiatives. By framing the psychosocial challenges of Bangladeshi adolescents within a global context, it highlights the importance of integrating mental health awareness into education and family systems to foster resilience and support healthier adolescent development. **Conclusion:** In conclusion, the study highlights that adolescence, though a vulnerable stage, offers significant potential for growth when supported by understanding families and inclusive environments. Strengthening mental health awareness, parental communication, and school-based support can foster resilience and emotional stability among Bangladeshi adolescents.

**KEYWORDS:** Adolescent mental health, psychosocial challenges, coping mechanisms, case study approach, parent–child communication.

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## Introduction

Adolescence is a crucial stage in human psychological development, marked by major physical, emotional, cognitive, and social changes that bridge the gap between childhood and adulthood. Although the timing of adolescence differs across cultures and societies, it is generally linked to the teenage years. During this stage, young people experience rapid brain development, growing cognitive abilities, and heightened emotional awareness, all of which play important roles in shaping their sense of identity and self-concept. It is also a time when adolescents begin to seek greater independence and form deeper social relationships. Because of these complex and rapid changes, they often become more vulnerable to various psychosocial challenges and emotional difficulties.

Adolescence is often regarded as a period for developing a sense of independence and autonomy. During this stage,

adolescents begin to assert their individuality by questioning parental authority and established family rules, which may sometimes result in conflict or rule-breaking behavior. It is not uncommon for previously compliant children to show resistance toward household responsibilities or to respond with irritation when corrected by their parents (Steinberg, 2001). Occasional physical confrontations may also occur, and both the frequency and intensity of such conflicts tend to increase during adolescence. While incidents of school violence often receive significant media attention, research indicates that adolescents are more frequently involved in acts of aggression or violence within the home or community contexts. Several factors—such as developmental challenges, peer or gang involvement, access to weapons, substance use, and

socioeconomic hardship—have been identified as contributing to the heightened risk of violent behavior during this period. Stress and depression have become increasingly serious psychological concerns among adolescents. Young people experience stress for a variety of reasons, including relationship breakups, frequent conflicts with parents or siblings, family instability, financial strain, academic difficulties, and peer-related problems. Adolescents from single-parent or disrupted families are particularly vulnerable, as such environments can create emotional insecurity and chronic stress. In Bangladesh, stress among adolescents is notably widespread due to intense academic pressure, family conflict, and uncertainty about future prospects. A 2022 cross-sectional study conducted in Dhaka reported that 65% of adolescents exhibited moderate symptoms of stress, while 9% showed high levels of stress (Anjum et al., 2022). Adolescents from lower socioeconomic backgrounds appeared especially at risk, often balancing educational responsibilities with financial pressures to support their families.

Depression is another major concern during adolescence. A 2023 nationwide study found that more than 26% of Bangladeshi adolescents experienced moderate to severe levels of depression, and approximately 15% reported suicidal ideation (Koly et al., 2023). Family dysfunction, unrealistic academic expectations, and excessive exposure to social media were identified as prominent contributing factors. These findings underscore the urgent need for early psychological intervention and stronger emotional support systems for young people.

Peer influence also plays a significant role in shaping adolescent behaviour and mental health. On the positive side, peer groups can foster academic motivation, emotional growth, and social competence. However, negative peer pressure can encourage experimentation with harmful behaviours such as substance use, vandalism, or theft (Steinberg, 2007). Adolescents who experience bullying or social exclusion are at higher risk of developing mental health problems, including low self-esteem, stress, depression, and anxiety, and may even experience suicidal thoughts. A recent study by Hasan et al. (2023) found that adolescents who frequently engaged in peer-driven social activities were twice as likely to experiment with tobacco or alcohol compared to their less socially active peers. These findings highlight the dual influence of peer relationships—serving as both a source of emotional support and a potential risk factor for maladaptive behaviour.

Substance abuse is widely recognized as a major contributing factor to behavioural and emotional problems during adolescence. It is often both a symptom and a trigger of underlying psychological difficulties such as depression, anxiety, or conduct disorders. Substance misuse among adolescents has been linked to a broad range of negative outcomes, including a heightened risk of progression to more serious drug use in adulthood, academic underachievement, impaired judgment, and engagement in risky behaviours such as unsafe sexual activity, violence, criminal acts, and suicide (Duan, Chou, Andreeva, & Pentz, 2009). Early intervention and targeted therapeutic approaches are therefore essential to address substance use and its associated behavioural consequences.

Media exposure represents another critical influence on adolescent mental and behavioural health. Adolescents are highly impressionable, and exposure to inappropriate or violent

media content can shape attitudes, normalize risky behaviours, and encourage imitation. Once internalized, such influences can be difficult to reverse, often leading young people to experiment with behaviours that may be detrimental to themselves and their peers. In Bangladesh, adolescents—particularly those living in urban slums or under-resourced communities—are frequently exposed to domestic and community violence, as well as bullying, which can have lasting psychological effects. A 2023 study reported that 32% of adolescents experienced physical abuse at home, while 27% were subjected to bullying at school (Yasmin et al., 2023). Exposure to violence and family dysfunction is strongly associated with increased risks of aggression, conduct disorders, depression, and low self-esteem. Adolescents from single-parent or financially distressed households are especially vulnerable. Steinberg (2001) further noted that strained parent-child relationships during adolescence often lead to defiance, academic disengagement, and deteriorating mental health.

The rapid expansion of the digital environment has introduced new challenges to adolescent well-being. Excessive screen time, exposure to inappropriate online content, and cyberbullying have been linked to emotional instability and mental health problems. A recent study found that 75% of Bangladeshi university students who met the criteria for internet addiction also exhibited symptoms of depression and anxiety (Rabby et al., 2023). These findings highlight the growing need for digital literacy education, parental guidance, and preventive interventions to mitigate the negative psychological effects of excessive technology use among adolescents.

Despite the numerous psychological and social challenges, they face, adolescents in Bangladesh employ a range of coping strategies to manage stress and psychosocial adversity. Social support remains one of the most significant protective factors in this regard. Many adolescents seek comfort and guidance from friends, teachers, or family members, and studies have shown that those with strong interpersonal support networks are less likely to experience symptoms of depression (Das & Sajib, 2022). Participation in extracurricular activities such as sports, arts, and cultural programs also serves as an effective means of emotional regulation and self-expression. Adolescents who actively engage in these activities often demonstrate higher levels of self-esteem and improved emotional well-being (UNICEF Bangladesh, 2023).

Religious and cultural practices further contribute to coping and resilience. In Bangladesh, practices such as prayer, meditation, and attendance at religious gatherings are common mechanisms through which adolescents find emotional stability and a sense of belonging. These spiritual practices provide both individual comfort and a broader sense of community, which can enhance adolescents' emotional resilience (Koly et al., 2023). Additionally, many young people adopt problem-focused coping strategies, such as seeking help from school counsellors, utilizing online resources, or negotiating conflicts within their families. Educational institutions that incorporate life skills training and counselling services have reported lower levels of stress and emotional distress among students (Islam et al., 2024).

However, not all coping mechanisms are adaptive. Some adolescents resort to avoidance behaviours, social withdrawal, or substance use when faced with overwhelming stress, particularly in the absence of accessible mental health

resources. These maladaptive strategies highlight the urgent need for structured mental health interventions, counselling programs, and community-based support systems to promote healthier coping and long-term psychological well-being.

Many of the challenges experienced during adolescence arise from a lack of understanding of the anatomical, physiological, and psychological transformations that occur during this developmental stage. In the context of Bangladesh, identifying the specific psychosocial issues faced by adolescents is particularly important, as it has significant implications for the well-being and future development of the nation's youth. A deeper understanding of these challenges can help parents, educators, and policymakers create more supportive environments for adolescents. Moreover, exploring the coping strategies that adolescents adopt to manage stress and adversity can provide valuable insights for developing targeted psychological guidance and intervention programs. Such efforts can play a vital role in fostering healthier emotional growth and balanced personality development among young people.

Globally, adolescence is increasingly recognized as a critical developmental stage that determines long-term mental health, social competence, and overall well-being (Patton et al., 2018; Sawyer et al., 2019). Studies conducted across different cultural contexts reveal that adolescents face a similar set of psychosocial challenges—ranging from academic stress, peer pressure, and body image issues to family conflict and digital media exposure (Blakemore, 2019; Odgers & Jensen, 2020). The World Health Organization (2023) emphasizes that one in seven adolescents worldwide experiences a diagnosable mental disorder, with depression and anxiety being the most prevalent. Moreover, rapid globalization, urbanization, and technological advancement have reshaped adolescent experiences, often amplifying stress levels and feelings of social isolation (Twenge, 2020). These global patterns suggest that while the specific expressions of psychosocial distress may vary by culture, the underlying emotional struggles of adolescents share remarkable similarities across societies.

In light of this global perspective, understanding the psychosocial realities of Bangladeshi adolescents becomes even more significant. Despite the country's unique sociocultural context, the challenges faced by its youth mirror those identified in other parts of the world—heightened academic competition, restrictive parenting, limited mental health literacy, and growing digital dependence (Islam et al., 2024; Koly et al., 2023; Shek, 2022). Addressing these issues requires a culturally sensitive yet globally informed framework that integrates family-based support, school counselling, and community awareness. As international evidence underscores, early psychological intervention, open communication within families, and structured peer engagement are among the most effective strategies for preventing long-term emotional and behavioural difficulties (Li et al., 2023; United Nations, 2023). Therefore, situating Bangladeshi adolescents' experiences within this broader global discourse not only highlights the universality of their struggles but also reinforces the need for holistic, evidence-based approaches to adolescent mental health promotion.

#### ***Objectives of the Study***

(a) To identify the psychosocial problems commonly faced by adolescents in Bangladesh.

(b) To examine the coping strategies employed by adolescents in response to these challenges.

## **Methods**

### ***Sample***

The study included adolescents aged between 13 and 18 years as participants. The sample was drawn purposively from students enrolled in various schools across Dhaka City. As two distinct data collection methods, In-Depth Interviews (IDIs) and Focus Group Discussions (FGDs), were employed, two separate participant groups were selected for each. The sample size for the IDIs consisted of four participants, while five FGDs were conducted, each comprising approximately five to ten participants.

### ***Research Design***

In alignment with the objectives of the study, a qualitative research design was employed. This approach was appropriate for gaining an in-depth understanding of the psychosocial issues and coping strategies experienced by adolescents.

### ***Instruments***

Data were collected primarily through In-Depth Interviews (IDIs) and Focus Group Discussions (FGDs), guided by a pre-designed topic guide developed through a review of relevant literature. The topic guide was designed to explore the key psychosocial concerns and coping mechanisms of adolescents. Additionally, a semi-structured questionnaire was used to collect demographic information, including age, gender, school type, and family background.

### ***Procedure***

Prior to data collection, permission was obtained from the respective school authorities and the parents of the participating students. Participants were informed about the purpose of the study, their voluntary participation, and the confidentiality of their responses. Written informed consent was obtained from all participants before participation. Once the sample had been identified, IDI and FGD sessions were conducted in safe and private settings to ensure participants' comfort and openness.

### ***Data Collection***

Data collection was carried out by trained research assistants who received orientation and instruction on ethical considerations and qualitative interviewing techniques prior to fieldwork. Formal consent was obtained from both school authorities and parents before initiating data collection. All ethical guidelines for research involving human participants were strictly followed. The collected data were recorded, transcribed, and analysed thematically to identify emerging patterns and themes related to adolescents' psychosocial challenges and coping strategies.

### ***Ethical Considerations***

Ethical approval for the study was obtained from the relevant institutional review authority. Informed consent was secured from every participant prior to participation. Participants were clearly informed about the study's objectives, procedures, and their right to withdraw at any stage without penalty. Both interviews and FGDs were conducted in private, secure settings to ensure confidentiality and psychological safety. To protect participants' identities, codes rather than names were used for data recording and reporting.

## Results

Data obtained through In-Depth Interviews (IDIs) and Focus Group Discussions (FGDs) were analysed using qualitative content analysis. This analytical approach allowed for the identification of recurring themes, patterns, and meanings within participants' narratives, providing a deeper understanding of the psychosocial experiences and coping strategies of adolescents.

### Case Study

The case study component of the research was conducted with four adolescent participants. Each participant was interviewed individually using the in-depth interview guide. The following case illustrates key psychological and social dimensions of adolescent experience within the Bangladeshi context.

#### **Case Study 1: Keya – The Silent Struggle for Autonomy and Identity**

##### **Description**

Keya (pseudonym), a 15-year-old girl, is described by her teachers and peers as intelligent and creative. However, she frequently avoids attending school, preferring instead to stay at home listening to music, reading novels, and chatting with friends online. Her mother often criticizes her for her academic disengagement and for spending excessive time on Facebook. Keya reported feeling detached from her studies and lacking motivation to continue regular schooling. She expressed a strong desire for personal freedom and a need to be understood by her parents, particularly regarding her interests and social interactions. Keya's situation reflects the classic adolescent struggle with autonomy, identity formation, and strained family relationships.

##### **Narrative**

During the interview, Keya shared that she no longer feels motivated to attend classes, describing the academic environment as rigid and emotionally exhausting. She feels misunderstood and pressured by her parents, who often equate her social media use with irresponsibility. "I feel like no one is trying to understand what I really want," she said. "I want to do well, but not in the way they want me to." Her statement reflects an internal conflict between conforming to parental expectations and pursuing personal interests. Keya described experiencing persistent frustration, self-doubt, and emotional fatigue, often withdrawing into solitary activities to escape family tension. Her behaviour illustrates a broader developmental challenge common in adolescence—the negotiation between independence and parental authority within a culturally conservative environment.

##### **Analysis**

Keya's narrative highlights a deep tension between her emerging need for autonomy and the restrictive nature of parental control. Her academic disengagement can be interpreted as both a manifestation of emotional burnout and a subtle form of resistance to authoritarian parenting. Psychologically, Keya demonstrates early signs of emotional withdrawal and possible subclinical depressive symptoms, consistent with adolescents who experience low perceived support and limited agency in decision-making. Her chosen coping mechanisms—immersing herself in music, literature, and online communication—serve as temporary means of self-preservation, allowing her to construct a private sense of identity. However, these solitary behaviours may also hinder

her social development and reinforce emotional isolation over time.

Overall, Keya's case exemplifies the delicate balance adolescents attempt to maintain between personal freedom and familial expectations, a balance that, when unmet, can contribute to emotional distress, disengagement, and identity confusion.

#### **Case Study 2: Sumon – Conflicted Emotions and the Burden of Parental Control**

##### **Description**

Sumon (pseudonym), a fourteen-year-old boy, is described as an intelligent and high-achieving student. Despite his academic success, he struggles with emotional turmoil arising from his relationship with a classmate. His parents disapproved of this relationship and instructed him to end it immediately. In an attempt to enforce compliance, they imposed several restrictions, including limiting his use of the mobile phone, prohibiting him from socializing with friends, and reducing his outdoor activities. These strict measures led to frequent arguments between Sumon and his parents. Although he continued to perform well academically, he reported feelings of sadness and emotional exhaustion, describing life as increasingly burdensome and devoid of joy.

##### **Narrative**

Sumon explained that his romantic relationship, though innocent in nature, became a major source of conflict within his family. Once his parents discovered it, they reacted harshly—confiscating his phone and closely monitoring his movements both inside and outside the home. "They just want me to stop talking to her, but they don't ask how I feel," he said. "I'm doing well in exams; isn't that enough?" His words reveal a longing for understanding and recognition that extends beyond academic achievement. Sumon's emotional distress stems not only from the loss of his relationship but also from his parents' lack of empathy and trust. The absence of open communication left him feeling isolated, leading to episodes of low mood and frustration. Despite his continued academic diligence, he described feeling "tired of trying to make everyone happy."

##### **Analysis**

Sumon's case exemplifies the clash between traditional parental authority and the growing emotional independence of adolescents in modern Bangladeshi society. His experience highlights the psychological tension between filial obedience and personal emotional fulfilment. The parental disapproval of his romantic involvement represents a broader cultural pattern in which adolescent emotional expression is often suppressed in favour of conformity and discipline.

From a psychological perspective, Sumon's behaviour reflects emotional suppression, identity confusion, and internalized conflict. While he continues to pursue academic excellence—possibly as a compensatory strategy to gain parental approval—his emotional needs remain largely unacknowledged. This imbalance between cognitive success and emotional deprivation may predispose him to depressive symptoms or chronic stress. Research supports that authoritarian parenting styles often contribute to adolescent depression, low self-esteem, and emotional detachment (Islam et al., 2024).

Sumon's story underscores the importance of empathetic communication and emotional validation within families. His coping mechanism—channelling distress into academic effort—demonstrates resilience but also indicates an unmet

psychological need for understanding, affection, and emotional autonomy. Without appropriate emotional support, adolescents like Sumon risk developing long-term psychological vulnerabilities despite apparent external success.

#### ***Case Study 3: Jerin – The Complexity of Body Image and Social Judgment***

##### ***Description***

Jerin (pseudonym), a fifteen-year-old girl, described her mother as highly supportive, trusting, and understanding. She emphasized that her mother's confidence in her provided emotional security and freedom within the family context. However, Jerin reported facing significant social challenges outside the home. She expressed frustration with what she perceived as a general lack of open-mindedness among her peers and within Bangladeshi society at large. She noted that forming friendships with male classmates was particularly difficult, as many of them tended to view her primarily through a romantic lens rather than as a platonic friend. Furthermore, Jerin shared that she was often subjected to bullying and negative comments about her body size, which deeply affected her self-esteem and social confidence. Despite these difficulties, she considered herself fortunate to have strong familial support and greater personal freedom than many of her peers.

##### ***Narrative***

During her interview, Jerin expressed gratitude for her mother's consistent emotional support but described feeling socially isolated and misunderstood among her peers. She reported that most male classmates treated her as a potential romantic partner rather than a genuine friend, limiting her ability to form healthy cross-gender relationships. "They don't see me as a person. They see me as a body," she said. "I'm not even that fat, but they make me feel ugly." Jerin also described being fat-shamed by strangers and peers, leading to feelings of embarrassment and lowered self-worth. She shared that her female friends often dismissed her opinions or choices, which left her feeling intellectually and emotionally excluded. Despite these social challenges, Jerin viewed her family—especially her mother—as her main source of comfort, understanding, and strength.

##### ***Analysis***

Jerin's case illustrates the intersection of gender bias, body image dissatisfaction, and social judgment in the lives of Bangladeshi adolescents. Her experiences reveal how societal expectations surrounding physical appearance and gender roles contribute to psychological distress and self-consciousness among young girls. The lack of open-mindedness and gender sensitivity within peer groups reinforces harmful stereotypes and limits opportunities for authentic interpersonal connections.

From a psychological perspective, Jerin's narrative highlights both risk and protective factors. While she experiences bullying, peer rejection, and objectification—each of which may contribute to diminished self-esteem—her strong maternal relationship serves as a major protective influence, promoting resilience and emotional stability. Existing literature supports that supportive family environments can mitigate the negative effects of peer victimization and foster adaptive coping strategies in adolescents (Koly et al., 2023).

Jerin's experience underscores the urgent need for body-positive awareness and gender-sensitivity education within schools. Encouraging acceptance of diversity in appearance and

promoting respectful cross-gender friendships could significantly improve adolescents' social adjustment and mental well-being. Her story exemplifies how familial support can serve as a psychological buffer against the damaging effects of social stigma and peer-based exclusion.

#### ***Case Study 4: Arif – Dreams Under Pressure***

##### ***Description***

Arif (pseudonym), a sixteen-year-old boy from a low-income family, lives with his parents and two younger siblings in a small rented home. His father, a day labourer, places immense pressure on him to succeed academically, viewing education as the family's only path out of poverty. Arif, however, harbours a deep passion for football and dreams of becoming a professional athlete. Despite his aspirations, his father dismisses sports as a distraction and repeatedly urges him to focus solely on academics. This constant pressure has led Arif to experience chronic stress, sleep disturbances, headaches during examinations, and moments of emotional despair. He admitted to occasionally having suicidal thoughts when overwhelmed by the weight of expectations and feelings of inadequacy.

##### ***Narrative***

Arif described his love for football as an escape from daily pressures and a source of genuine joy. "I just want to be on the field," he said. "That's the only place I feel free. But every time I pick up the ball, I hear my father's voice saying, 'You are wasting your life.'" His statement reveals a profound internal struggle between personal fulfilment and filial duty. Arif expressed fear of disappointing his family, particularly his father, whose sacrifices he deeply acknowledges. Nevertheless, the lack of emotional understanding and communication within his home environment leaves him feeling isolated. He reported heightened anxiety before exams and frequent physical symptoms such as headaches and insomnia, reflecting somatization of psychological distress. His passion for sports remains a silent dream, repressed by familial and economic realities.

##### ***Analysis***

Arif's experience exemplifies the conflict between individual aspiration and familial expectation—a common psychosocial dilemma among adolescents in economically constrained households. His case highlights how financial hardship amplifies parental pressure, transforming academic success into a moral and emotional obligation rather than a personal pursuit. The resulting psychological tension manifests in symptoms of stress, anxiety, and emotional exhaustion, as well as occasional suicidal ideation, which warrants serious clinical concern.

From a coping perspective, Arif exhibits silent compliance—suppressing his emotions and desires to maintain family harmony. Although this strategy allows temporary avoidance of conflict, it risks long-term emotional suppression and diminished self-esteem. His unfulfilled need for autonomy and validation underscores the importance of career counselling, mental health support, and family-based psychoeducation, particularly for adolescents from low-income backgrounds.

Arif's narrative encapsulates the broader societal challenge faced by many Bangladeshi youths—balancing personal dreams against the economic and emotional weight of familial expectations. His story reinforces the need for policies and school-based programs that promote vocational guidance, emotional support, and mental health awareness to foster

healthier development and resilience among adolescents under socio-economic stress.

### **Focus Group Discussion**

5 Focus Group Discussions (FGD) were conducted where each group was consists of five adolescents, comprising three girls and two boys. All participants were students of Class 10, aged between 13 and 18 years. Through qualitative content analysis of the FGD transcript, several key themes emerged that reflect the psychosocial challenges and perceptions of adolescents in contemporary Bangladeshi society.

#### **1) Parents Are Not Considerate Toward Us**

All participants expressed the view that their parents were often inconsiderate of their emotional needs and personal perspectives. Their complaints centred on excessive academic pressure, lack of freedom, limited support, and poor communication within the family.

##### **a) Excessive Academic Pressure and Lack of Recreational Freedom**

Participants consistently reported that their parents prioritized academic achievement above all else, often discouraging leisure activities. Many shared that any attempt to relax—such as watching television, playing games, or using the internet—was met with scolding.

One participant stated,

“Most of the time my father is not at home. If I finish my study and then watch TV or browse the internet, he still rebukes me. He doesn’t notice that I have already completed my study.”

Another participant added,

“My mother warns me that if I don’t study properly, she will stop my education and marry me off early.”

##### **b) Unrealistic Expectations of Academic Performance**

Several participants mentioned feeling overwhelmed by their parents’ constant expectations for high grades. Even when they performed reasonably well, they were often criticized rather than encouraged.

One respondent said,

“One can’t be first all the time. There are ups and downs. If my performance is low in one exam, my father assumes I’m distracted or not interested in studying.”

##### **c) Lack of Support and Encouragement**

The three female participants, in particular, reported insufficient emotional support from their parents, both academically and in terms of safety. One noted,

“If I get a good result in one exam, my mother says it means nothing and that I must do even better next time. Instead of encouraging me, she pressures me more.”

Another added,

“My parents never help me with my study but still scold me when I don’t do well.”

A third participant shared,

“If I face harassment on the road and tell my mother, she just tells me to stay home instead of supporting me.”

##### **d) Parents Never Listen to Us**

All participants agreed that their parents rarely give them the opportunity to explain their side of the story. Some reported receiving corporal punishment for minor infractions. They also described having limited personal freedom. Examples include:

“My parents don’t give me time to explain who my friend is. I can’t make them understand that he’s just a friend.”

“My father scolds me for coming home late, but he doesn’t understand that sometimes I stay late with my friends.”

“When I cut my hair the way I liked, my mother didn’t talk to me for three days. But when I cut it her way, she became friendly again.”

##### **e) Fathers Are Less Considerate Than Mothers**

Most participants felt that their mothers were more understanding and emotionally available than their fathers. One participant remarked,

“My mother can understand my relationship with someone, but my father always scolds me and tells me to break it.”

#### **2) Complaints from Teachers**

Several participants expressed frustration about being criticized by teachers for poor academic performance. They felt that teachers’ harsh comments often worsened their stress. One student recalled,

“Teachers say, ‘Is your mind not on study? Are you doing something else?’ It makes me feel humiliated.”

#### **3) Experiences of Eve Teasing**

Female participants reported being victims of eve teasing on multiple occasions. These experiences caused emotional distress and fear, reinforcing their parents’ overprotective attitudes and restricting their mobility.

#### **4) Lack of Understanding from Relatives**

Participants also mentioned that relatives often misjudged their behaviour and made negative comments to their parents. One participant reported being labelled as “moody” by relatives for not visiting them, despite having limited time due to schoolwork.

#### **5) Reluctance to Discuss Sexual or Reproductive Health Issues**

Most participants noted that discussions about sexual or reproductive health were considered taboo within their families.

One sixteen-year-old participant explained,

“There’s no trend in my family to talk about sex. It’s a cultural taboo.”

Others said they preferred discussing such topics with peers rather than parents, citing embarrassment, lack of parental knowledge, and fear of negative reactions.

## **Discussion**

### **Summary of Findings**

The primary aim of this study was to explore the major psychosocial challenges faced by adolescents in Bangladesh and to understand the coping strategies they adopt in response to these challenges. Data were collected through four in-depth individual interviews and one focus group discussion involving both male and female participants.

Findings from both the IDIs and the FGD revealed that adolescents experience limited opportunities for open and meaningful communication with their parents. Most participants described their parents as strict, traditional, and often unaware of their emotional and psychological needs. These findings align with previous national and international studies showing that poor parent-adolescent communication is a significant predictor of emotional distress among young people (Steinberg, 2001; Islam et al., 2024; Katsantonis et al., 2023). A recent global systematic review further demonstrated

that the quality of parent-child communication is directly associated with adolescent mental health outcomes across diverse cultural settings (Li et al., 2023). Participants in the current study reported that it was difficult to discuss personal or sensitive matters, as parents frequently discouraged such conversations and prioritized academic achievement over emotional well-being. This finding is consistent with UNICEF Bangladesh (2023), which identified academic overpressure as a major source of adolescent stress in the country.

Verbal aggression—such as scolding—and, in some cases, corporal punishment, were commonly reported as parental disciplinary practices. Parents rarely offered explanations for their behaviour or encouraged open dialogue, favouring strict obedience instead. These findings echo international evidence suggesting that harsh or authoritarian parenting styles are associated with increased risks of depression, anxiety, and behavioural problems among adolescents (Anjum et al., 2022; Katsantonis et al., 2023; Li et al., 2023).

The study also revealed that discussions related to sexual and reproductive health are exceedingly rare between parents and adolescents. Cultural taboos, limited parental knowledge, and fear of embarrassment prevent open communication on these issues, prompting adolescents to seek information from peers instead. This observation aligns with earlier findings that sociocultural barriers continue to inhibit open family discussions about sexuality and health across many Asian contexts (Koly et al., 2023; World Health Organization, 2022). In summary, the data indicate that adolescents in Bangladesh often face a lack of supportive family environments, excessive academic pressure, limited personal freedom, and exposure to gender-based discrimination, harassment, and body-shaming. These psychosocial stressors collectively contribute to elevated levels of anxiety, depression, and emotional distress among adolescents. Similar patterns have been observed globally, where rapid social change and academic competitiveness exacerbate mental health risks among youth (Steinberg, 2001; United Nations, 2023; Li et al., 2023). The findings underscore the urgent need for family-based interventions, school counselling, and community awareness programs to foster adolescent mental health and resilience both in Bangladesh and worldwide.

## Limitations

This study's small, purposively selected sample limits the generalizability of findings beyond adolescents in Dhaka City. Self-reported data may include personal bias or underreporting of sensitive issues, while the cross-sectional design restricts causal interpretation. Cultural sensitivities around topics such as sexuality, family conflict, and mental health may also have influenced openness during interviews. Future studies should adopt mixed-method, longitudinal designs with larger and more diverse samples to enhance validity and deepen understanding of adolescent psychosocial experiences.

## Implications

The findings of this study emphasize the need for greater attention to adolescent mental health in Bangladesh. Schools should integrate counseling services and life-skills education to help students manage stress and emotional challenges effectively. Parents require awareness programs to improve communication and foster supportive home environments. Community-based initiatives can further reduce stigma

surrounding mental health and promote positive youth development. Policymakers should incorporate these insights into national education and health strategies to build resilience and ensure healthier transitions into adulthood.

## Conclusion

The study concludes that adolescents in Bangladesh experience significant psychosocial challenges that stem largely from restrictive parenting styles, poor communication within families, and pervasive societal pressures. These factors collectively contribute to heightened levels of stress, anxiety, and emotional distress among young people. To address these issues effectively, a coordinated effort involving parents, educators, policymakers, and community stakeholders is essential.

Governmental and non-governmental organizations should consider integrating adolescent mental health components into existing youth development initiatives. Such interventions need to emphasize the promotion of positive parenting practices and open channels of communication between parents and their children. Moreover, schools should play a central role by providing counselling services and stress management programs that can help adolescents navigate academic and social pressures more effectively. In addition, raising awareness about gender sensitivity and reproductive health is crucial in fostering a more informed and empathetic social environment. Encouraging adolescents to participate in constructive recreational and extracurricular activities can further support their emotional growth, creativity, and social competence. Collectively, these initiatives can foster psychological resilience, emotional well-being, and holistic personal growth among Bangladeshi adolescents, ultimately enabling a smooth transition into adulthood as confident, balanced, and socially responsible individuals.

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