

# SUSTAINABLE DEVELOPMENT GOALS AND DISABILITY

A Baseline of Bangladesh



**Disability Alliance  
on SDGs  
Bangladesh**

# **Sustainable Development Goals And Disability A Baseline of Bangladesh**

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**Published in September 2019 by**

The Disability Alliance on SDGs, Bangladesh

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**Acknowledgements:**

This study publication has been possible with the technical and financial assistance from Sightsavers.

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**September 2019**



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## MESSAGE FROM THE DIRECTOR GENERAL NGO AFFAIRS BUREAU

It pleases me greatly to know that the Disability Alliance on SDGs, Bangladesh has conducted a baseline on Sustainable Development Goals and Disability which is a good guideline to implement inclusive development in the country in line with the Sustainable Development Goals.

This is a right time initiative as the Government of Bangladesh has given priority to 'Disability' and inclusion of the persons with disabilities in development agenda. To ensure Sustainable Development Goals in Bangladesh by leaving no one behind in most possible short time, a set of 39 indicators has been selected under the instructions of SDG Working Committee of The Prime Minister's Office. Under these indicators, some of the indicators are selected from the global Sustainable Development Goals and some of the indicators are selected after modification on Bangladesh perspective. All relevant ministries are connected with this process. However, these indicators did not further identify needs from the disability aspects. Thus, this report will be an important supplementary document to understand the demand and gaps by the Government authorities and other stakeholders, and to create an opportunity for the Public, Private, and NGOs to work together towards achieving targets and goals within defined time.

Despite challenges, Bangladesh is on the right track to achieve the United Nations' Sustainable Development Goals (SDGs) by 2030. According to the government's "SDG Bangladesh Progress Report 2018", the country is performing well in various aspects including poverty reduction, gender equality, electricity, sanitation and economic growth. It has to place emphasis on youth employment, health, increasing remittance, technology and industrialization. Following the positive developments on SDGs over the last three years, Bangladesh has a good platform for attaining the goals.

This baseline report addresses the key issues in changes and opportunities to include the persons with disabilities in every sphere of the development as their human rights. I am confident that all the concerned will be benefitted from this report and will promote inclusive development in true sense.

I wish this endeavor a great success,

A handwritten signature in black ink, appearing to read 'K. M. Abdus Salam'.

**K. M. Abdus Salam**  
Director General  
NGO Affairs Bureau  
Prime Minister's Office  
Government of the People's Republic of Bangladesh

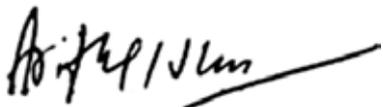
## FOREWORD

It gives me immense pleasure to present this publication on behalf of the Disability Alliance on SDGs in Bangladesh! While it is common knowledge that disability is both a cause and consequence of poverty, and that the Sustainable Development Goals (SDGs) very rightly addressed disability both directly and indirectly in several of the targets and indicators, it remains a pity that mainstream development actors including governments are yet to give due importance to the issue in mainstream development planning and programming. This is therefore our effort to look into almost all the goals that affect day to day human lives, but with a disability lens.

The Alliance had taken this initiative to try and document what each of the goals means to persons with disabilities in Bangladesh today. Our aim was to try and prepare a baseline, such that any development or any positive change that takes place over the years till 2030 could be measured against this baseline. But the greatest challenge we faced was the lack of information, most notably, a lack of authentic, reliable, credible and comparable data on persons with disabilities. The indicators that are used nationally, or the statistics that is available from national sources, do not provide disability segregated information. Therefore, we had to depend on firsthand information available from persons with disabilities living in and working across the country, from their organizations, and from prominent and credible NGOs that work with persons with disabilities. Information has been gathered through a series of workshops, focus group discussions and key informant interviews. As a result, this is more a qualitative analysis rather than a quantitative description of the existing situation.

The Alliance tried to look for examples of similar exercises in other countries with the view to learning how they have coped with challenges. Unfortunately, we could not find another report in any country whatsoever. So even though we understand that this does not give a truly nationally representative quantitative analysis of the baseline situation in Bangladesh, we still believe it gives a fairly good picture of where people with disabilities of Bangladesh stand today, against each of the sustainable development goals. We also hope this could inspire stakeholders in different countries to conduct similar or more in-depth analytical studies in their respective contexts. We also hope, the relevant stakeholders in the Government of Bangladesh will take necessary measures to develop specific indicators (and/or sub-indicators), such that the true picture of persons with disabilities can be ascertained during the periodic national review processes.

I take this opportunity to thank all the members of the Alliance for their most sincere cooperation during the documentation process. Special thanks are due to all the people with disabilities, caregivers and professionals who actively participated in the discussions and interviews. And I convey our heartiest thanks to Dr Nafeesur Rahman, who took the arduous task of compiling all the information and drafting of this report. Finally, I thank all readers and seek your constructive inputs, so that we can secure reliable quantitative information in our future efforts.



**Khondoker Ariful Islam**  
Country Director, Sightsavers  
Convener, Disability Alliance on SDGs, Bangladesh



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# ABBREVIATIONS & ACRONYMS

BASIS	Bangladesh Association of Software and Information Services
BBS	Bangladesh Bureau of Statistics
BBDN	Bangladesh Business Disability Network
BDT	Bangladesh Taka
BIDS	Bangladesh Institute of Development Studies
BTTB	Bangladesh Telegraph and Telephone Board
DPO	Organizations of Persons with Disabilities (formerly, Disabled Peoples' Organizations)
DSS	Department of Social Services
ESCAP	Economic & Social Commission for Asia and the Pacific
FDI	Foreign Direct Investments
GED	General Economics Division, Ministry of Planning, Bangladesh
HIES	Household Income and Expenditure Survey (2010)
HFA	Hyogo Framework for Action
HLPF	High Level Political Forum
ICDDR	International Center for Diarrheal Diseases Research, Bangladesh
ICT	Information and Communications Technology
ILO	International Labor Organization
IMF	International Monetary Fund
IT	Information Technology
JPUF	Jatiyo Protibondhi Unnayan Foundation
MDG	Millennium Development Goals
MoDMR	Ministry of Disaster Management and Relief
MoSW	Ministry of Social Welfare
NCD	Non Communicable Diseases
NGO	Non Government Organizations
PEDP	Primary Education Development Program
PKSF	Palli Karma Shohayak Foundation
PPP	Purchasing Power Parity
RMG	Readymade Garments
RPPD Act	Rights & Protection of Persons with Disabilities Act, 2013
SDG	Sustainable Development Goals
SFDRR	Sendai Framework for Disaster Risk reduction (2016-2030)
SOD	Standing Orders on Disasters
UN	United Nations
UNICEF	United Nations Children's Fund
USD	United States Dollars
VNR	Voluntary National Review
WHO	World Health Organization

# EXECUTIVE SUMMARY

The Sustainable Development Goals (SDGs) were adopted in 2015 with the spirit “leaving no one behind”, meaning that all people living in all countries under all differing circumstances and conditions would be addressed by the 17 goals. That includes over 1 billion persons with disabilities worldwide, who have historically been left out from all mainstream development agenda, either deliberately, or due to negligence. The SDGs also come with an in-built regular monitoring system to measure progress against the 169 targets. While there are a set of minimum 232 indicators, countries are at liberty to add more, to help measure actual progress against the targets.

In Bangladesh, a country that performed exceptionally well with the earlier Millennium Development Goals (MDGs), both the government and the civil society have taken the SDGs very seriously. Besides the state level, platforms have been created within the thriving NGO sector, to align their activities and monitor progress against the SDGs. Within this non-government sector, there is also a large number of NGOs working in the disability and development sector. There also are a large number of organizations created and operated by persons with disabilities themselves (DPOs). Several of these NGOs and DPOs have also attuned their work with the SDGs, and a platform was launched in March 2017 to assist in the coordination of this work – the Disability Alliance on SDGs, hereinafter referred to as the Alliance. 2017 was also the year that Bangladesh volunteered to report on the stipulated goals under the Voluntary National Review (VNR) process. The Alliance took the opportunity to review the prevailing scenario in the country on those particular goals, but with the disability inclusion lens. The report drew much acclaim.

Following that, the Alliance realized it was also necessary to look into the scenario against all the goals of the SDGs, and how disability inclusion/exclusion existed in the country. At the pace that Bangladesh is advancing as a nation, it is most likely that we will attain almost all the development targets by 2030. But it was important to see if persons with disabilities also benefitted, on an equal basis with others. The Alliance believed, if we could come up with a report now, even though two years have passed since the initiation of the SDG timeframe, we still could have a baseline, against which future review processes can measure progress. This could be a unique report for Bangladesh. And also a unique example for many other countries, where such baseline reports on disability inclusiveness within SDGs are not generally measured.

But the challenges were overwhelming. Firstly, there are very few indicators specifically addressing the concerns of persons with disabilities. Secondly, there is very little information available, especially in documented format. So the report had to be prepared based on little available documentation, but greatly upon discussion with people with disabilities, caregivers, professionals in the field, NGO and DPO officials, government officials and people’s representatives. These were gathered through workshops, consultations and key informant interviews.



## Goal 1: No Poverty

Poverty and disability form a vicious cycle. According to the World Bank, 20% of the World's poorest are persons with disabilities. But in most cases, they are left out of all development agenda. Policies and program manuals may prioritize them, but they remain out of the program reaches in actuality. Even the statistics on disability is confusing, as different authorities use different methodology, which are often not comparable.

For people with disabilities poverty cannot and should not be calculated by the scarcity of their income only. They also face a handicap in converting their income into good living, due to the additional costs they need to incur because of their impairments while living in societies that are not disability-friendly. But that is not calculated in this country, where the national poverty line is calculated at USD 3.1 per day. So the government has a fairly large safety-net program, with 143 schemes and a budget of BDT 542 billion in the 2017-18 fiscal year. Under this program, through 10 schemes targeting almost 2 million people, the government has allocated only 1.75% of the entire safety-net budget for persons with disabilities. If access of persons with disabilities is not ensured in all development spheres, they will continue to remain in poverty.

## Goal 2: Zero Hunger

Through schemes under different ministries, the Government of Bangladesh has successfully tackled hunger from some pockets of the country that had suffered drought and starvation perennially. Death from hunger has been abolished, though malnutrition remains a cause for concern. Stunting of children and wasting have been reduced through several programs taken by the government, especially promoting community based programs. However, there are no programs specifically focused at persons with disabilities.

## Goal 3: Good Health and Well-being

Bangladesh has done remarkably well in terms of its health indicators. Life expectancy has gone up to 71.8 years in 2015. Immunization coverage is almost 100%. Infant mortality and under 5 mortality rates have been reduced. However, even though adolescent pregnancies

have been reduced over the last few years, at 113 per 1,000 adolescents, it is still one of the highest in the world, and way beyond the global average of 44.1 per 1,000 adolescents. Moreover, 60% of deliveries are conducted by unskilled personnel with no health knowledge whatsoever. As a result, behind the ever improving health indicators, incidence of disabilities in children, especially conditions like cerebral palsy and intellectual disabilities is on the rise.

A considerable stress is being given on non communicable diseases (NCDs), but road traffic accidents are on the rise. Violence against women and children also are on the rise. And arsenic contamination of ground water remains a huge public health challenge. Mental health, with all the taboo and social stigma attached to it, remains a serious concern also. A study by ICDDRDB shows mental disorders in Bangladesh are between 6.5-31% among adults, with disorders such as depression, anxiety and neurosis most commonly reported. The prevalence of mental disorders was much higher in overcrowded urban communities than rural ones, and among the poor. Women were vulnerable across all settings.

For persons with disabilities, mainstream health infrastructure and service remains inaccessible. The professionals that are required for their physical and social rehabilitation and daily well-being, such as physiotherapists, occupational therapists, speech & language therapists, clinical psychologists, orthotics and prosthetics technicians, audiologists etc are not recognized under the mainstream health workforce. Inter-ministerial coordination also does not exist; as such the one-stop-service centers operated under the Ministry of Social Welfare have no referral mechanism with the mainstream health system.

## Goal 4: Quality Education

The Primary Education Development Program (PEDP) has continued to stress on inclusive education, and thus enrolment of children with disabilities has shown a steady rise in regular primary schools. But the teachers are yet to be fully equipped to handle the special needs of such children, especially those with severe visual impairments, hearing & speech impairments, or the children with autism & other neuro-developmental impairments. As such these children are still dependent on special education centers. But such schools are also very limited. There is a severe scarcity of trained teachers and therapists to cope with the need across the country.

Especially for girls with visual disabilities, access to education is an even greater challenge. There was only one school in the country catering to this group of children, and it also has residential facilities. But it is also increasing its costs in recent years, making it difficult for girls from poorer communities to avail its services. Fortunately, the government is extending its integrated education program to mainstream girls' schools now, and one school per administrative division will cater to girls with visual impairments.

At the higher education level, inaccessibility to built infrastructure remains a huge barrier. So does the attitude of teachers and peers. There is an instance where a medical college

student committed suicide, failing to cope with the bullying he faced on a daily basis due to his disability even from a teacher.

The National Education Policy adopted in 2010 promotes that students with disabilities should enjoy the pursuit of education within the mainstream education system. But it also recognizes that some students with severe grades of disabilities may not be able to cope there, and may require pursuing either integrated or special education options. Under Section 18A (Education for challenged learners: Special education), the policy outlines 13 strategic directives to ensure that such students can acquire education to the best quality possible.

## Goal 5: Gender Equality

Bangladesh has strived and come a long way to curtail, if not end discrimination against women and girls in all spheres of life. Not only has gender parity been addressed in school enrolment, the girls have started outperforming their male peers in public examinations. In terms of employment, both in the public and private sectors, women are being encouraged through quotas and other incentives. Besides human resource policies, almost all organizations (public and private) have gender policies with special provisions for women. The major labor force of the business sectors of Bangladesh, especially the export-oriented sectors now comprise mostly of women. Women are climbing their way up to top management levels, both in the public and private sectors, besides taking leadership roles in the political arena also, from grassroots to national level.

However, for women with disabilities the gap still is too wide. Even within organizations of persons with disabilities the women do not have a very strong voice. And they continue to remain as easy victims of abuse and violence. The Rights & Protection of Persons with Disabilities Act, 2013 has created provisions of committees from the national till the upazilla level and there are also town committees prescribed. However, ensuring inclusion of women with disabilities in these committees is yet to be guaranteed.

## Goal 6: Clean Water & Sanitation

In Bangladesh, even though about 97% of the population has access to water throughout the year, only about 40% has access to safe drinking water. Ground water, which is used by nearly 90% of the people, is also contaminated with arsenic, affecting almost 30-35 million people in Bangladesh. Arsenic has been shown to be the cause of death for 1 out of every 5 people in Bangladesh.

For persons with disabilities however, water sources are still largely inaccessible. Though NGOs have began making a handful of tubewells and their surrounding platforms accessible to persons with physical disabilities, the majority of other sources still remain highly inaccessible.

Platforms of the tube wells rarely can accommodate wheelchair users, while the pumping mechanism becomes challenging for people without arms or those with weakness in their arms. Even in urban areas where supplied water is available and fitted with taps and faucets, these are rarely designed to accommodate the needs of people with weakness in hands or fingers. As a result, persons with disabilities have to be dependent on others, even to collect a glass of water.

Similarly, sanitation, especially in rural areas remains a huge challenge for persons with disabilities.

### **Goal 7: Affordable & Clean Energy**

The country-wide increase of electricity generation and coverage has benefitted all. While this increase has supported establishment of several large industries across the country promoting employment opportunities, power supply in the households has also supported small and cottage industries flourish. Similarly, a steady advancement in ICT services has promoted many people into outsourcing businesses. Where accessibility of transportation and infrastructure still remains a major challenge in the country, persons with disabilities have also benefitted from these initiatives.

### **Goal 8: Decent Work & Economic Growth**

Bangladesh cherishes to give highest importance to turn our youth into competent manpower through vocational and technical education with emphasis on science, technology and especially on information technology. It is noteworthy that at present, in the rural areas of Bangladesh, expansion of science and technology is reaching out very fast from agriculture and farming to technology. But, where the mere access to education is a still an obstacle, even though the National Constitution categorically prohibits discrimination in employment in any form, employment of people with disabilities in Bangladesh has been quite a farfetched dream. The government had declared a 10% quota for people with disabilities along with orphans in the lower grade jobs about three decades back and 1% quota in the highest level jobs over a decade back. But due to in-sensitization of employers about the potentialities of persons with disabilities, due to contradictory employment policies, and due to several loopholes in the system and a lack of proper monitoring, the declared quota for the people with disabilities had never been implemented with due intensity.

In recent years, some progress has been seen in the employment within the education and health sectors of the government, but the number of persons with disabilities finding jobs is still not adequate. There was an instance where a person with physical disabilities (weakness in one arm) went through the written and viva exams, was selected and provided an appointment letter, but was still barred from joining his post. It was found that during the

final days of his recruitment process, a new official had joined as the head of the office, and this gentleman was not convinced that an employee with only one functional arm could perform the tasks required from the positions. The applicant therefore had to pursue a legal battle and finally was able to join at his workplace.

Studies show that even when persons with disabilities find employment, inaccessibility to infrastructure or transportation often creates a barrier for them to work at par with their non-disabled peers. While the laws have promoted reasonable accommodation practices, such measures are rarely adopted. But things are also changing for the better.

On the demand side, a substantially important step is the establishment of the Bangladesh Business Disability Network (BBDN), a forum of large corporate houses keen on promoting disability inclusive policies and practices within their respective business houses. Although there are a few NGOs within this forum, mostly aimed to provide the required technical knowledge and services, the majority of the stakeholders are the large and prominent corporate entities.

In the recent years, a large number of readymade garment (RMG) factories have begun opening doors to employ persons with disabilities. NGOs that were providing training to women with disabilities focusing on employment in the RMG sector are now expanding the training programs. Also, some large training centers operated by the government itself have also been made disability inclusive. With accessibility features in place, these are also attracting higher numbers of women with disabilities in their programs, which is maintaining the supply chain.

## Goal 9: Industry, Innovation and Infrastructure

According to the IMF, Bangladesh's economy was the second fastest growing major economy of 2016, with a rate of 7.1%. Bangladeshi industries are also diversifying and finding newer avenues. However the rich-poor divide continues to affect our economy, and so the steadily rising per capita income over the past few years does not give a true picture of people still in poverty. Access to nutrition, health services, especially maternal & child health, water & sanitation, education & employment etc. are all affected by the divide.

This is changing though, as Bangladesh is seeing a massive growth in business and industrialization with thousands of jobs being created every year. In order to ensure availability of skilled human resources, the government has undertaken a national skills development program. Even though the programs are disability inclusive, actual jobs for persons with disabilities is still far below expectation levels.

## Goal 10: Reduced Inequalities

Some laws still are in practice in Bangladesh which create room for discrimination, especially for people with disabilities. However, in pursuit of its commitment under almost all the international human rights conventions that the country has ratified, Bangladesh is heading in the right direction of enacting an Anti Discrimination Act. There are several sector-specific laws in place, such as for the prevention of any forms of discrimination against women, children, ethnic minorities & people with disabilities, however, the overall anti discrimination law would address structural changes and further strengthen the sectoral laws. The drafting has been in process for several years now, and is expected to be enacted soon.

## Goal 11: Sustainable Cities & Communities

In 2007, the Ministry of Housing and Public Works had adopted a policy level decision that all public construction thereafter must adopt accessibility features following universal design principles. Efforts had been taken to update the National Building Code incorporating universal design principles. While such features have not been duly addressed in the low-income group people's housing schemes, almost all other public infrastructure in incorporating accessibility issues.

Basic services in the slums are being increased by collective efforts of the local government, NGOs and relevant utility service authorities providing electricity, gas, water and sanitation. As such, living conditions are improving rapidly. Accessibility of such services for persons with disabilities though still remains a constant challenge.

The communication system in Bangladesh is complex, as there is demand for transportation on rail, motor, and waterways. Major highways have been upgraded from two-lane to four-lane dual carriage-ways, several large bridges have been constructed to reduce dependence on ferries that created traffic bottlenecks, sophisticated buses have been imported to increase comfort of people travelling long distances. Accessibility of persons with disabilities however remains a huge concern. There still is not a single public transport that can accommodate wheelchair users.

Natural disasters remain a perennial challenge for the people and for the overall development of Bangladesh, as the country is highly prone to almost every form of natural calamities, except for tsunamis. But Bangladesh has learned enormously from its experiences and investing in developing its capacities in technical knowledge as well as in human resources in disaster risk management, and by allocating sufficient financial resources in a planned manner, human casualties have been brought down drastically to single digits even in major disasters. But the damage to crop, forestry, infrastructure and livelihood still often remain colossal. Measures are now being taken to address these challenges also.

Interestingly disaster risk management in one area where Bangladesh has demonstrated a very strong instance of disability inclusiveness. After the SFDRR was adopted in March 2015, Bangladesh hosted the first ever international Conference on Disability & Disaster Risk

Management, where a declaration was adopted. MoDMR constituted a national taskforce on DiDRR, revised the SOD to make it more disability inclusive, and has created provision for inclusion of persons with disabilities in all disaster risk management committees from national to grassroots level.

### Goal 13: Climate Action

Bangladesh has taken into full cognizance the fact that it would be one of the foremost countries hit hard by climate change. It is also well recognized that a majority number of people affected most within the climate refugees will be persons with disabilities. Both the government and the non-government entities therefore are preparing to reduce the vulnerabilities. Climate change adaptation measures have featured very strongly in all major national plans.

Bangladesh has given shelter to almost 10 million Rohingya people, who have fled ethnic cleansing in neighboring Myanmar. The sheltering camps have given rise to a number of environmental challenges. It is also a concern that a large number of the refugees are persons with disabilities.

### Goal 16: Peace, Justice & Strong Institutions

The Constitution of Bangladesh guarantees that all citizens of this country, irrespective of their disability status, shall be protected against all forms of exploitation, violence and abuse. Over the years since our independence, several laws have also been enacted towards ensuring such safety and security. However, due to poverty, ignorance and a lack of enforcement of the laws, there are several instances that occur every year, where people including people with disability face situations of exploitation, violence and abuse.

There is very little recorded information of persons with disabilities being subjected to physical torture and/or cruel punishment in Bangladesh. But there instances where people have been subjected to physical torture, even in custody, that have resulted in permanent disability.

Women and girls with disabilities face violence and abuse disproportionately higher than their non-disabled peers. The legal justice system is yet to adopt means to address the special needs of persons with disabilities.

### Goal 17: Partnerships

The greatest challenge for adequate disability programming planning in Bangladesh is the lack of reliable and comparable statistics on disability. The database prepared by the DSS can provide data disaggregated by age, gender, educational status, income, ethnicity, geographic location, type and grade of disability, services received etc. But this is only

available for currently 1.5 million persons with disabilities (which is fewer than 1% of the national population). This project has been extended till 2021. An all out effort should be given to ensure that all people with disabilities are identified and their data entered into the national database by then. Meanwhile, all other national statistics should have data desegregated by disability.

## The Way Forward

The followings are a set of recommendations to find effective ways to move forward with the SDGs, ensuring that issues and concerns of persons with disabilities are meaningfully addressed:

- **Indicators:** Disability specific indicators are not available against all the targets for all the goals. These need to be identified and endorsed by the government. Only then information will be available on the actual progress against the SDGs.
- **Statistics:** No planning can be effectively done without proper statistics. The SDGs have emphasized that data needs to be specific, authentic, reliable and comparable. Without thorough disability disaggregated data, information against indicators will always be inadequate. Thus progress against SDGs will not be truly reflective. Universally accepted methodology, such as the Washington Group questions need to be adopted in all statistical initiatives.
- **Implementing inclusion:** While the SDGs have categorically addressed inclusion of all vulnerable groups of people, with a special emphasis on persons with disabilities, it is expected that all development programs and initiatives undertaken by the government and the other mainstream development actors alike are actually addressing inclusive practices. Unfortunately, this still is not the case. For example, the professionals that provide rehabilitation assistance to persons with disabilities or special education teachers are not under the purview of the mainstream health or education system. Infrastructure, including transportation must become disability friendly. And most importantly, people with disabilities need to be included within the mainstream planning, implementing and review processes.
- **Amendment of laws, policies and program implementation guidelines:** Several laws, policies, plans, program implementation guidelines of several ministries & departments need to be revisited, amended, updated and reformed to duly address inclusion from a human rights perspective.
- **Funding:** It has been five years since the enactment of the RPPD Act 2013. At this stage, need-based budget allocation should be made for its implementation. The committees need to be activated and strengthened with adequate budgets. Moreover, adequate funding for inclusion needs to be allocated within the mainstream national budget against the programs of respective ministries.
- **Advocacy with All:** The Disability Alliance on SDGs recognizes that it needs to form greater alliances with more relevant stakeholders, including DPOs and NGOs working in the field, in order to influence change. It also needs to interact more strongly with the mainstream civil society platforms towards ensuring that all development initiatives truly address inclusive practices across the country.



## INTRODUCTION

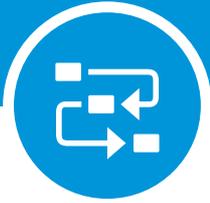
In September 2000, the 8 Millennium Development Goals (MDGs) were adopted by the Heads of States and Heads of Governments at the United Nations, with an aim to reduce global poverty by half by the year 2015. Bangladesh was one the leading countries that had achieved almost all the goals with great success. But while these 8 goals were believed to be inclusive of people with all kinds of vulnerabilities, despite overall successes in many countries, the lack of such specific focus, however, resulted in persons with disabilities being left out of most of the development initiatives. At 2015 therefore the overall situation of persons with disabilities had not really seen demonstrable changes from the past. UN also learned from its omission, and therefore the newer set of goals that came about in 2015, the Sustainable Development Goals (SDGs) were far more focused, far more concrete, and far more specific in its mandate to be inclusive of all vulnerabilities, including specially persons with disabilities. Stringent monitoring systems and processes have also been suggested, so that progress is monitored continuously and also periodically. Countries have been given the opportunity to create their own mechanisms, while progress will also be monitored and updated at the UN on a regular basis. The SDGs has come with a set of 17 goals, 169 targets and 250 indicators. Countries are at liberty to add more specific indicators if so required.

Organizations of and those working with persons with disabilities in Bangladesh were delighted to find the SDGs so categorically address inclusion, especially persons with disabilities. Frustrated from the historical deep rooted neglect in all development sectors, this global framework is the first of its kind that has addressed disability inclusion in such a strategic manner. Therefore, many of the NGOs in this field joined forces and launched the Disability Alliance on SDGs, with an aim to support both the government and the civil society platforms in their pursuit of attaining and monitoring the progress of the SDGs in Bangladesh.

In 2018, Bangladesh decided to become part of the Voluntary National Review (VNR) process. At the Alliance, a decision was taken to look into the six specific goals too, especially from a disability and development perspective. Unfortunately, the process was initiated late, and so the report could not be thoroughly integrated into the National Report. However, the Alliance took the learning and thus decided to look deeper into all the goals. This report, the Alliance believes, will act as a sort of baseline as to where the situation of persons with disabilities stands today, against the goals of the SDGs. If the government or the mainstream civil society wishes to review the progress of persons with disabilities against the SDGs in years to come, the Alliance believes such progress could be measured against this baseline report.

The challenges, however, were manifold. Firstly, a few years has already elapsed since the initiation of the SDGs period. Therefore, calling this a baseline of the SDGs could be debated. Ideally, had the report been prepared in 2016 it could have been unquestionably referred to as the true baseline for the SDGs. In reality though, there have not been many significant changes. So the Alliance believes this still could be considered as a baseline. For academic reasons, if still argued, it can well be considered as a status report of 2018. Secondly, only five goals and only a handful of indicators are specific to persons with disabilities. So the Alliance decided to go by the targets and not by the indicators. Again, while going by the targets, we found many to do not have specific implications that directly concern persons with disabilities in particular. Also, in some cases multiple targets needed to be clustered together to get the essence of the prevailing situation. Several such instances will be found in this report. And thirdly, but most importantly, the Alliance stumbled over and again at the dearth of the availability of published specific information, especially quantitative information. Therefore, the Alliance had to depend on various sources, including primary information compiled during the consultations and workshops, some available research reports, newspaper reports, but mostly the information collected from persons with disabilities and the organizations, based on their years of hands on experience working across the country. While it is certain that availability of quantitative information would have enriched this report manifolds, the data collected from hands on experience of persons with disabilities and their organizations in no way diminishes the overall description of the situation.

In the near future, the Alliance wishes to work together and compile a set of disability specific indicators against all the goals and their respective targets. It will then advocate with policy makers to get these indicators endorsed by the government, such that the mainstream national reports in future, either by the government or the mainstream civil society, can duly address the concerns of persons with disabilities to equal importance.



## METHODOLOGY

### (a) The Disability Alliance on SDG

In order to engage persons with disabilities into the entire process of SDGs implementation progress monitoring and facilitation, a collective platform 'Disability Alliance on SDGs' was formed on 9 March 2017. The Disability Alliance on SDGs is an alliance of prominent national and international DPOs and NGOs working in the field of disability & development in Bangladesh, who are deliberately conducting their respective programs in alignment with at least one of the 17 goals of the SDGs.

As a core criterion for membership, each organization believes in and deliberately practices the principles of promoting full and effective participation of persons with disabilities in decision-making processes.

The Alliance membership currently comprises of the following organizations:

- Access Bangladesh Foundation
- ADD International, Bangladesh
- Blind Education, Rehabilitation & Development Organization (BERDO)
- CBM International
- Center for Disability in Development (CDD)
- Center for Services and Information on Disability (CSID)
- Disabled Child Foundation (DCF)
- Disabled Rehabilitation and Research Association (DRRA)
- Disabled Welfare Society (DWS)
- HelpAge International
- Handicap International - Humanity & Inclusion (HI)
- Leonard Cheshire Disability Bangladesh (LCDB)
- Manusher Jonno Foundation (MJF)

- National Coalition for Disabled Women (NCDW)
- National Forum of Organizations Working with the Disabled (NFOWD) Goals And Disability Sustainable Development Goals And Disability 17
- National Grassroots Disability Organization (NGDO)
- Save the Children
- Sightsavers
- TurningPoint Foundation
- Visually Impaired People’s Organization (VIPS)
- Women with Disabilities Development Foundation (WDDF)

### **(b) Consultations – Dhaka and elsewhere**

Two workshops were held at Dhaka, and three consultations were held with grassroots level DPOs and persons with disabilities. The consultations were held at Tangail, Narsingdi and Kurigram. Over 80 persons with disabilities directly participated and contributed during these consultations. While a majority of them were persons with physical disabilities, there were also participants with visual and hearing & speech disabilities (supported by interpreters). There were also parents and caregivers of children and adults with down syndrome, autism and intellectual disabilities, along with field level staff in the consultations.

Some DPO leaders brought in almost three decades of experience to these consultations, while some were almost new with just over a year’s experience. There were both women and men, young and old, educated and some that were deprived of the opportunity of pursuing education because of their disabilities. Some children with disabilities were also talked with, to understand how they perceive the society around them.



# GOALS & TARGETS



## **A. Goal 1** **End poverty in all its forms everywhere**

Poverty and disability go hand in hand, forming a vicious circle. According to the World Bank, 20% of the poorest people of the world are people with disabilities. In the World Disability Report (2010) the World Health Organization (WHO) estimates a global disability prevalence rate of 15.7%, meaning that there are approximately 1 billion people living with some or other form of disability in the world today, and a majority of them live in the poor and developing countries.

### **Target 1.1**

*By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$1.25 a day*

### **Target 1.2**

*By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions*

The prevalence rate of disability in Bangladesh leaves much room for confusion. The national census (2011) claims this to be 1.41%, while the Household Income and Expenditure Survey (HIES 2010), which is a much more in-depth study following the Washington Group questions, also conducted by the Bangladesh Bureau of Statistics (BBS) found this at 9.07%.

Where the disability prevalence rate leaves so much room for confusion, it is understood that measuring poverty among persons with disabilities also remains vague. The Department of Social Services (DSS) is conducting an identification survey of persons with disabilities in Bangladesh. So far, 1.5 million people with disabilities have been identified and their information has been entered into a national database.

Overall, Bangladesh has succeeded in curtailing the number of people living under the national poverty line (of USD 3.1 per day). Poverty rate dropped to 18.5% in 2010 from 44.2% in 1991. Then in 2016 it had been estimated at 12.9% . Neither the national census nor the HIES study however give any description on how persons with disabilities fare in this situation. Where the national unemployment rate is estimated at 4.4% (2017 estimates) , the HIES study found that, among people without disabilities aged 14 years and older, 44.41% had found some means of income generation, whereas it was 36.07% for people with mild disabilities, and only 24.84% for people with moderate to severe disabilities. Where their access to education was limited, and formal employment opportunities thus strained, income from any valid and legal informal source was not found by 3 out of 4 people with moderate to severe disabilities. There are barriers every step of the way for persons with disabilities.

Moreover, for persons with disabilities, measuring poverty only by calculating the level of their income does not give a true picture, as in most cases, they are not able to convert their income into good living as could be done by their non-disabled peers. In his presentation to the World Bank Conference in 2004 on Disability and Justice, Dr Amartya Sen introduces the theory of conversion handicap, which needs to be calculated in measuring poverty of persons with disabilities. He says,

*“ It is extremely important to distinguish between two types of handicap that tend to go with disability, which may be respectively called 'earning handicap' and 'conversion handicap.' A disabled person may find it harder to get a job or to retain it, and may receive lower compensation for work. This earning handicap will be reflected in the opulence-based theory, since a disabled person may well be seriously disadvantaged in terms of income and wealth. But that is only a part of the problem. To do the same things as an able-bodied person, a person with physical disability may need more income than the able-bodied person. To move easily or at all, a person who happens to be, say, crippled by an accident or by illness may need assistance, or a prosthesis, or both. The conversion handicap refers to the disadvantage that a disabled person has in converting money into good living. It is not sufficient to be concerned only with earning handicap, since disabled persons tend to suffer also from conversion handicaps. ”*

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<sup>1</sup> Wikipedia, Poverty in Bangladesh, quoting the World Bank.

<sup>2</sup> CIA Factsheet on Bangladesh

The barriers that persons with disabilities face are manifold. On the one hand there are institutional and infrastructural barriers, which people with disabilities need to face in their day to day lives. And on the other hand, there are attitudinal barriers that they begin facing from very early childhood, starting from their own families, and continue as they advance with age.

Where denial to their sheer recognition as meaningful contributing members of the family begins at home, it is not surprising that people with disabilities are most commonly left out of almost all kinds of development agenda.

Research papers published by the Bangladesh Institute of Development Studies (BIDS) have shown that poverty acts as both a cause and effect of a lack of education, which in turn adversely affects employment opportunities. Having an unskilled workforce also greatly decreases the productivity of the workforce which decreases the appeal of Foreign Direct Investments (FDIs) and thus impedes sustainable economic growth. In essence, education is an important contribution to the social and economic development of a country.

Bangladesh has done remarkably well in terms of educating its children, with an almost 100% enrolment rate in primary education. However, for most children with disabilities this is yet to become a reality. The Primary Education (Compulsory) Act 1990

*Shonai is a twenty five year old woman from Faridpur. Since her birth she cannot see. Her father is a farmer, and has a very little income. They are six brothers and sisters, and with this limited income, she had to suffer from her very early childhood. She is the only child in the family, who is different from others. While her siblings went out to play with their peers, she was never allowed to leave the house.*

*They live close to a school, and since education was free, all her siblings went to school. They could not afford to buy books, but her mother used to work in a rich man's house in the town nearby. This generous man always gave away the old books of his children to Shonai's mother. Shonai always wanted to go to school too. But her parents always told her that since she was a blind girl, teachers would never take her in. By the time she was ten, two of her younger siblings were in school. She started revolting. So finally her father took her to school one day to talk to the teachers.*

*This was the first time, in all the years that she could recall, that she had accompanied her father to some place outside her home. Her eldest brother also went along. Even though her siblings were in this school, and the teacher knew every one of them, he never knew about the existence of Shonai.*

*Her father and brother tried to explain to the teacher how passionately she wanted to enroll into school. But the teacher kept interrupting throughout the conversation. From the tone in his voice, she could guess that the teacher was gradually getting angry. At one point he stopped her father rudely and said, "Listen you fool, it is good that you have sent all your five children to school. I didn't even know you had this dumb girl. But even my knowing would not help. Do you think I am crazy enough to take her in? Don't you know that there are no rules to admit children like these in schools?"*

had left room for respective schools to deny admission to children if they have a disability. This however has been addressed in the Rights & Protection of Persons with Disabilities Act, 2013, which prohibits discrimination in school enrolment on the grounds of disability. But because of the former law, thousands of children with disabilities have been deprived of their right to education and by now have crossed the school-going age.

A national study conducted in 2001-2002 found a primary school enrolment rate of only 4% for children with disabilities. Over the last decade and a half, significant measures have been taken, but the enrolment rate cannot be estimated over 20% as yet. In 2014, UNICEF published situation analysis of children with disabilities in Bangladesh, where they quoted data from the Bangladesh Primary Education Annual Sector Performance Report-2013 in this regard. Both reports give enrolment figures of children with disabilities in absolute numbers. The 2014 report estimates total number of children with disabilities within the age group of 3-14 at almost 200,000 and calculates the enrolment rate at 59.4%, whereas the 2002 study had estimated the total number of children at approximately 1.6 million.

In a recent move, therefore, the Ministry of Primary & Mass Education has introduced a standalone subject on disability in the curriculum of primary school teachers' training. As such, 11,000 teachers will be trained on disability inclusion in primary schools every year from here onwards in the country. This will positively influence the enrolment and quality of education for children with disabilities in Bangladesh, and thus pave the way for a better life and livelihood of persons with disabilities in the near future.

#### **Target 11.1**

*Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable*

In April 1971, Bangladesh was proclaimed as an independent nation, guaranteeing for every citizen equality, human dignity and social justice. The National Constitution adopted in 1972 thus not only upheld equality of opportunity for every citizen in all spheres of life, but also created additional equitable measures for sections of the population who have been left behind. This provision has created enough room for the Government of Bangladesh to chalk out a massive safety net scheme. The safety net programs or schemes of the government can be divided into four major categories: (a) cash transfer (allowances), (b) food security (social protection), (c) micro-credit programs (social empowerment), and (d) development sector programs (social empowerment). Under these four categories, in the fiscal year 2017-2018, the government has taken a total of 143 programs or schemes with a total budget of BDT 542 billion. For persons with disabilities 10 such schemes have been taken, with a coverage of 1.338 million persons with disabilities and an annual allocation of BDT 9.5 billion. While this apparently looks like a considerable amount, actual direct costs amount to BDT 8.7 billion against 7 schemes, which calculates to only about 1.6% of the national social safety net program, and total allocation amounts to 1.75% of the total allocation. In other words, the planned safety net programs offer each person with disabilities BDT 542 per month, or just BDT 18 (USD 0.15) per day.

<sup>3</sup> Educating Children in Difficult Circumstances: Children with Disabilities, Department of Primary Education, 2002

The largest scheme for persons with disabilities is the allowance for financially insolvent persons with disabilities, where 825,000 persons with disabilities receive an allowance amounting BDT 600 per month. However, under the newly adopted National Social Safetynet Strategy, this will increase over the next five years to BDT 1,600 per month, and coverage will increase to 1 million poor people with disabilities. By 2020, the government plans to have 145 schemes with a coverage of 3.57 crore citizens (almost 20% of the national population) at a cost of BDT 600 billion.

Under the micro-finance scheme, which was initiated more than ten years back, DSS used to provide a loan amounting BDT 10,000 to acid survivors and people with disabilities. A decade later, the loan amount is still BDT 10,000. This is not justified and due to inflation, the economic value of the same amount has gone down significantly.

The social safetynet schemes for persons with disabilities currently in operation are as follows:

	Social safety net scheme	Budget 2016-17		Budget 2017-18	
		Persons	Allocation	Persons	Allocation
	<b>Direct Services</b>				
1	Allowance for insolvent persons with disabilities	750,000	5,400,000,000	825,000	6,930,000,000
2	Monthly education stipend for students with disabilities	70,000	478,800,000	80,000	545,000,000
3	Grants for schools of children with disabilities	25,000	125,000,000	35,000	229,600,000
4	Micro-credit for acid survivors & persons with disabilities	30,000	30,000,000	15,000	15,000,000
5	One-stop Service Centers	307,000	530,800,000	376,000	650,000,000
6	Institute of Pediatric Neuro Disorder	2,000	54,400,000	4,000	144,500,000
7	Establishment of hostels for visually impaired children	1,000	78,900,000	3,000	181,200,000
	<b>Total Direct Services</b>	<b>1,185,000</b>	<b>6,736,900,000</b>	<b>1,338,000</b>	<b>8,695,300,000</b>
	<b>Indirect Services</b>				
1	Neuro-developmental disability protection trust		105,000,000		105,000,000
2	Physical disability protection trust		50,000,000		100,000,000
3	Establishment of Autism Academy		600,000,000		600,000,000
	<b>Total Indirect Services</b>		<b>755,000,000</b>		<b>805,000,000</b>
	<b>Total Allocation on Disability in Year</b>		<b>7,563,600,000</b>		<b>9,500,300,000</b>
	National Social safetynet budget for the year		452,300,000,000		542,060,000,000
	Percentage of total safetynet budget in Disability		1.65%		1.75%

Disability cuts across all different sections of a country's population. As such, within people living in geographically vulnerable areas, or within vulnerable groups because of their ethnicity, religion, place of birth, socio-economic status, or family profession whatsoever, a considerable portion of the population also lives with disability, and thus further aggravates their poverty. Therefore, while planning special support programs or packages for any different vulnerable groups, it also becomes highly imperative to think about disability!

#### **Target 1.4**

*By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance*

The Government of Bangladesh in recent years has shown a keen interest to increase its generation of electricity, to bring the entire country under the network, in order to extend basic services across the nation. This has promoted the growth of micro-industries & entrepreneurs that have paved the way to increase quality of life even at the grassroots level. Besides the government, cell phone operators have also covered almost the entire country, enabling access to information, through the internet within the hands of people. As this has been done without discrimination, persons with disabilities have benefitted equally with others. There still is some room for improvements though, as some services are yet to become fully accessible to persons with visual impairments.

Inheritance and control over land and other forms of property had been a massive concern for persons with disabilities in Bangladesh for long, as they have most commonly been deprived of their rightful share even by close family members. The Rights & Protection of Persons with Disabilities Act, 2013 has put that concern to rest, ensuring these as a right. There still are confusions though, for persons with psychosocial disabilities especially, as the Mental Health Act, though recently enacted, is yet to take full effect, and so discriminatory provisions under the century old Lunacy Act 1912 still prevails, even though it has been abolished.

The government operates a specific micro-finance scheme for persons with disabilities, which is free of any interest, but only at a 5% simple service charge. Within the non-government sectors, several NGOs have opened their respective micro-finance programs for people (especially women) with disabilities. And in almost all cases, persons with disabilities have demonstrated better regularity and efficiency in handling, utilizing and returning their loans. However, if the large players in this arena, such as BRAC, the Grameen Bank or the Palli Karma Shohayak Foundation (PKSF) made it mandatory to ensure a certain percentage of each group are persons with disabilities, access to income would have increased manifolds. The schedule banks have also been instructed to provide loans to persons with disabilities. But in most cases the instruction is not being followed diligently.

Besides the safety net programs, the government also leases out land and ponds or water bodies to poor people, families or clusters to utilize and earn a decent living. The land is generally barren non-agriculture land, and so people set up micro or cottage industries, or farms for chicken or cattle rearing. The ponds are used for fish and/or duck farming etc. Unfortunately though, the proportion of such leases to persons with disabilities is still very negligible.

Where government employees have children with a disability, after their retirement from the service pension is provided throughout the lifespan of the disabled child. This is a major positive measure adopted by the government to ensure their quality of lives.

### **Target 1.5**

*By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters*

Bangladesh is a highly disaster prone country, with almost every form of natural disaster striking some or other part of the country perennially. With time and experience, we have innovated our own ways of dealing with such events of humanitarian conditions effectively. The Standing Order on Disaster is a unique set of documents to deal with major disasters, helping in planning, evacuating and managing response operations. There also is the Disaster Management Act 2012, and several policy documents to deal with different categories of disasters. All these documents have been made disability inclusive. In December 2015, Bangladesh hosted the first international conference on disability & disaster risk management following the Sendai Framework 2016-2030. A comprehensive Dhaka Declaration was adopted, prompting the government and NGOs alike to look into disability inclusion in all situations of environmental and disaster related shocks. A special circular has been issued by the Ministry of Disaster Management & Relief to ensure that all working committees on disaster management, from national to grassroots level, will include persons with disabilities such that they can meaningfully and effectively participate in all decision making processes. Now these grassroots level committees are gradually being formed.



## Goal 2

### End hunger, achieve food security and improved nutrition and promote sustainable agriculture

#### **Target 2.1**

*By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round*

Recognizing the plight of vulnerable people during times of seasonal food scarcity and natural disasters and calamities, the Government of Bangladesh operates ten safety net schemes throughout the year. These are, Open Market Sales, Vulnerable Group Development, Vulnerable Group Feeding, Test Relief Food, Gratuitous relief, Food For Work, Work For Money, Test Relief, Employment Generation Programs for the Poor, and Food Assistance in Chittagong Hill Tracts Areas. A total of 32.5 million people are benefitting from these schemes in the fiscal year 2016-17 at a total cost of BDT 88.5 billion. According to the working procedures of each of the schemes, persons with disabilities and their families are officially prioritized as recipients or participants in the programs.

Besides, the government has also extended the Char Livelihood Program, the One House One Farm Program the Rural Livelihood Program, the Cluster Village (guchchho gram) and some other similar schemes, which also contribute to food security in vulnerable areas.

The beneficiaries for each of the schemes are selected by representatives of the local government. Unfortunately though, as most of these selections are done with political intentions, the people with disabilities and their families have often been left out of the actual lists of beneficiaries. But the situation is changing. In a recent move, the Ministry of Local Government and Rural Development has issued a circular, directing all local government entities to ensure prioritization of persons with disabilities in all their initiatives, including provisions for special allocations in their respective budgets. It is therefore expected that the situation will positively change for persons with disabilities in the near future.

#### **Target 2.2**

*By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons*

The government has introduced Adolescents Clubs across the country to raise awareness of chiefly adolescent girls on several different issues, including nutrition and hygiene. There are also Maternity Allowance Programs for Poor Women and Allowances for Urban Low Income Lactating Mothers to counter stunting and wasting of children under five. These schemes are operated mostly under the purview of the Ministry of Women & Children Affairs, whereas development of persons with disabilities according to the Allocation of Business of different ministries of the Government of Bangladesh, fall under the purview of the Ministry of Social Welfare. Therefore, adolescent girls and women with disabilities have not actually benefited to a great extent from the other schemes as yet, even though the policies in paper have prioritized women with disabilities in the schemes.

For elderly people, the government provides a monthly Old Age Allowance to 3.15 million people aged 60 and over at a cost of BDT 18.9 billion in this fiscal year alone (about 0.1% of the GDP). The elderly people with disabilities have benefited somewhat from this Old Age Allowance scheme<sup>4</sup>.

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<sup>4</sup> <http://www.pension-watch.net/country-fact-file/bangladesh>



## Goal 3

### Ensure healthy lives and promote well-being for all at all ages

#### **Target 3.2**

*By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births*

According to UNICEF (2015), the Under 5 mortality rate in Bangladesh has been drastically reduced from 144 per 1,000 live births in 1990 to 35 in 2015, a drop by 73%. At this rate, the country is well on track to reduce the rate to 25 or below by 2030. The neonatal mortality rate, similarly has fallen from 63 to 23 per 1,000 births during this period, but is still considered moderately high.

On the other hand, Bangladesh has one of the world's highest rates of adolescent motherhood, based on the proportion of women under the age of 20 giving birth every year. For girls between the ages of 15 and 19 years, it was 113 per 1,000 adolescent girls in Bangladesh in 2015, where globally, the rate was 44.1 per 1,000 adolescent girls. The number of deaths among adolescent mothers is double the national average. These high mortality rates are supported by the fact that about 80% of women give birth at home, and 60% are with unskilled attendants or relatives assisting. Therefore, while the infant and neonatal mortality rates have been reduced, children living with conditions such as cerebral palsy and intellectual disabilities are on the steady rise. Without specific measures to curtail such conditions, prevalence of disability is expected to rise in the coming years.

#### **Target 3.4**

*By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being*

As a tropical developing country with a high population density, Bangladesh had historically faced a burden of communicable diseases. But social transition, unhealthy dietary and other habits, rapid urbanization have caused a rapid increase in the burden of non communicable diseases (NCDs) in recent years. According to the World Bank, the share of deaths caused by non communicable diseases of all the deaths that occur in Bangladesh due to ill health has increased from 43% in 2000 to 67% in 2015. The heaviest toll is borne by underprivileged communities. The principal risk factors are the use of tobacco, health conditions like diabetes, obesity and consumption of alcohol. And the major NCDs in Bangladesh are: (a) Diabetes, (b) Cardio Vascular Diseases, (c) Hypertension, (d) Stroke, (e) Chronic Respiratory Diseases and (f) Cancer.

<sup>5</sup> World Health Statistics 2017, WHO

In 2010, The Ministry of Health and WHO jointly conducted a NCD Risk Factor Survey, which found that 99% of the surveyed population had at least one and 29% had at least 3 of the risk factors. Every year, 12.5% of all deaths in Bangladesh occur due to Cardio Vascular Diseases. 9.8% of the males and 15.6% of the females suffer from hypertension. 10% of the urban population and 7% of the rural population have diabetes. Every year 200,000 new cases of cancer are reported, while cancer alone claims 150,000 lives every year.

The Government of Bangladesh has thus chalked out a NCD Operational Plan at the national level, which includes:

- (a) Development and implementation of effective, integrated, sustainable & evidence-based public policies on chronic disease and their public health problems, risk factors and determinants.
- (b) Strengthening country's capacity for better surveillance of chronic diseases, their consequences, risk factors, and the impact of public health interventions
- (c) Foster and promote social and economic conditions that address the determinants of chronic diseases and empower people to increase control over their health and to adopt healthy behaviors.
- (d) Facilitate and support strengthening the capacities of health system for the integrated management of chronic diseases and their risk factors.

The Components of the Operational Plan include:

- (a) Conventional NCDs
  - Cardio Vascular Diseases
  - Diabetes
  - Chronic Respiratory Diseases
  - Cancer
  - Renal Disease
  - Deafness
  - Arsenicosis
  - Osteoporosis
  - Oral Health
  - Thalassemia
- (b) Non-conventional NCDs
  - Road Safety & Injury Prevention including Child Injury,
  - Violence against Women
- (c) Occupational Health & Safety (Industrial & Agriculture)
- (d) Climate Change, Air Pollution, Water Sanitation & Other Environmental Health issues
- (e) Emergency preparedness & Response, Post Disaster Health Management & Emergency Medical Services
- (f) Mental Health, Tobacco, Alcohol & Substance Abuse

The mental health is a highly neglected issue in Bangladesh, with only about 0.5% of the national health budget spent on this area. According to a study (2011) conducted by the National Institute on Mental Health, there are about 14.5 million adults in the country with some or other form of mental health disorders. About 20% of children aged 12-17 years have a mental illness of some degree. A more recent study was conducted by ICDDR, B (2015), which opined that mental disorders in Bangladesh are a serious but overlooked problem, and that better data, awareness and more mental health practitioners are needed to address the unmet needs for mental health care. Mental health disorders, such as depression, anxiety, addiction, schizophrenia and neurosis have a serious impact on the health situation in Bangladesh.

The review found that the overall prevalence of mental disorders in Bangladesh is between 6.5 to 31% among adults, with disorders such as depression, anxiety and neurosis most commonly reported. The prevalence of mental disorders was much higher in overcrowded urban communities than rural ones, and among the poor. Women were vulnerable across all settings. The study also found that data on mental disorders among children are scarce, but prevalence is estimated to be between 13.4 to 22.9%. Behavioral disorders were common among socially disadvantaged children, such as those living in urban slums. The evidences suggest that psychiatric disorders among children are also associated with malnutrition, low education of parents and a family history of mental illness.

However, due to the strong social stigma attached to mental disorders in Bangladesh, prevalence in both children and adults is likely to be disguised or underestimated. At the same time, a lack of knowledge, superstitious beliefs and social stigma prevent individuals with mental health conditions from seeking care. Beliefs that mental disorders are untreatable or the result of evil influences also play a role. Women are both more vulnerable to experiencing mental disorders and less able to access treatment due to their lower social status due to the discrimination they face.

The study stressed the need for more research to better understand the magnitude of the problem in Bangladesh, better access for patients to qualified mental health professionals and mass awareness raising campaigns to reduce misconceptions and stigma about mental health conditions.

### **Target 3.6**

*By 2020, halve the number of global deaths and injuries from road traffic accidents*

According to the World Bank (2015), 8% of all deaths in Bangladesh result from injuries, a majority of which are road traffic accidents. The death rate has remained the same from the year 2000 till 2015. WHO on the other hand opines (2015) that 8 people die every day in the country from road traffic accidents, and the economic cost is between Taka 50-60 billion per year, and between 2-3% of the country's GDP. By 2020, WHO estimates it will become the 3rd leading cause of death and disability. The table below shows the increasing trend in the number of deaths and injuries leading to permanent physical disabilities over a three year period (2013-2015).

Year	Number of Accidents	Number of Deaths	Number of Major injuries
2013	2029	1957	1396
2014	2027	2067	1535
2015	2394	2376	1958

There are human related causes, such as reckless driving, use of drug and/or alcohol by drivers, incompetence of the drivers, and illegal competitions. Then there are road related causes, which include hazardous roads, lack of proper design and construction, curve of the road and a lack of safety measures. Finally, there also are socio-economic and demographic causes, which include lack of roadway maintenance, poor implementation of traffic rules & regulations, poor maintenance of the vehicles and lack of awareness among the general people.

In a recent move however, the government is enacting a new Transportation Act, which is expected to curtail this number considerably. Along with strict implementation of the law, awareness needs to be raised at a massive scale. More trauma centers with basic injury management mechanisms need to be built at strategically important points along the highways. People in general need to be made aware of basic rescue measures, including on how to handle and shift injured persons from the wreckage to safer accommodations.

#### **Target 3.7**

*By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programs*

Sexual and reproductive health issues are still considered quite a taboo subjects in Bangladesh, and is not discussed as widely and openly as the need demands. Where this concerns persons with disabilities, especially women with disabilities it is far more hushed up. Families rarely consider their daughters with disabilities as ‘sexual beings’, and so even when they enter adulthood, rarely plan their marriages. While it is not easy arranging marriages of women with disabilities due to all the superstitions that still exist in the common Bangladeshi society, their sexual and reproductive health issues also remain almost entirely ignored. Young women with neuro-development disabilities are the most ignored victims.

In recent years though, the government has commissioned an inter-ministerial national taskforce on autism & other neuro-development disabilities, and it is being coordinated by the Ministry of Health. Under the non-communicable diseases programs, the health ministry has also chalked out a fairly large program to deal with neuro-developmental disabilities. It is therefore expected that the sexual and reproductive health issues of persons with disabilities will soon become effectively integrated into the mainstream health planning system.

### **Target 3.8**

*Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all*

Bangladesh has done remarkably well in pursuit of universal health coverage and its vaccination and immunization programs over the years, and outshines its neighbors in this area. Diseases like small pox and polio, which has left a long trail of death and disability in the country in the past, have successfully been eradicated. Also, the health service delivery infrastructure of Bangladesh has gradually become quite extensive, even deep into the grassroots level. While there are 128 government hospitals at the secondary and tertiary levels, there are 484 hospitals at the upazilla and union levels . The number of functional hospitals beds is almost 47,000 in government hospitals, and a further 75,000 in almost 5,000 private clinics and hospitals across the country, that are registered with the government. In addition, there are almost 13,000 active community clinics at the grassroots level.

Unfortunately though, few of these mainstream health institutions are fully equipped to handle the special needs of persons with disabilities. Hospitals lack accessibility features, and the personnel are also not fully supportive. Alternative communication systems also remain a challenge for the patients with such communication disorders.

Child Development Centers have been set up in only a few of the 36 medical college hospitals operated by the government. Each hospital has a functional orthopedics unit and there is also a national orthopedic hospital at the capital city, however, provisions for physiotherapists, occupational therapists, speech and language therapists etc. are rare or totally absent. The Jatiyo Protibondhi Unnayan Foundation (JPUF) (under the purview of the Ministry of Social Welfare) however operates 103 one-stop disability service centers, offering these services. Each center also has a specialized corner to deal with children with autism. They also have 32 mobile vans taking the services to the remote rural areas. Besides providing the necessary therapy services, these centers also provide assistive devices free of cost to the poor people with disabilities. But there is no proper coordination or an official referral mechanism between these centers and the mainstream hospitals, as the two systems are operated under two different ministries.

*A few years back, an elderly person with a polio affected leg suffered a road accident on a highway, where he contracted a fracture in his affected leg. The local trauma center had no clue how to treat him, as such issues are not part of the medical education curriculum, and so he was referred to a tertiary level hospital in Dhaka. Here too the attending orthopedic surgeon could not help him. A medical board had to be constituted to finally find a cure, but at a huge suffering and huge cost to the patient. Fortunately, he had the means to cover such costs. The poor people with disabilities with such complications who cannot afford these additional costs, face further complications to their disabilities.*

Under the Vision 2020 program, there is a fairly robust national eye care program to prevent avoidable blindness among both children and adults. In recent years, the government has also chalked out a plan in pursuit of the Sound Hearing 2030 program, and has provided cochlear implants free of cost to poor people with hearing impairments. Providing disability specific care from district and upazilla level hospitals are also being piloted in a few districts in collaboration with NGOs active in the field. The medical education curriculum at the graduation level is also being updated to accommodate some basic disability issues, such that medical doctors are more sensitized to the special needs of persons with disabilities.

### **Target 3.9**

*By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination*

Arsenic contamination of ground water has become a major health concern in Bangladesh. In a report published in April 2016, Human Rights Watch estimates that 20 million people are affected, mostly from rural poor families due to the menace. According to the report, an estimated 43,000 people die each year from arsenic-related illness in Bangladesh. The government identifies people with arsenic-related illnesses primarily via skin lesions, although the vast majority of those with arsenic-related illnesses do not develop them. Those exposed are at significant risk of cancer, cardiovascular disease, lung disease and physical disabilities as a result, but many receive no health care at all. Human Rights Watch interviewed 134 people for the report, including people suspected of having arsenic-related health conditions and caretakers of government wells in five rural villages, as well as government officials and staff of NGOs. It also analyzed data regarding approximately 125,000 government water points installed between 2006 and 2012.

Due to the unplanned growth of industrialization, many industries had sprung up at different corners of the country, including the capital city, which do not have proper mechanisms to handle and destroy the hazardous chemical wastes. This alone has polluted the environment and many water bodies, including some important rivers. These have given rise to diseases and infections, often also resulting in disabling conditions. Measures are now being taken though, by setting up proper and planned industrial zones with scientifically built effluent plants. So with time, the pollution levels are expected to improve.

### **Target 3.c**

*Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States*

In terms of share of allocation, financing of the national health sector seems to lose some of its importance in the national budget. Allocation for health sector in the 1996-97 fiscal year was 8.66% of the entire budget, the highest ever in the history in the country. Over the past

two decades, the average has remained at about 6.5%. In the current fiscal year, it is 5.13% of the national budget. However, actual allocation is about BDT 175 billion, which is 37.74% increase over the allocation of last year. This shows a significant rise in health financing.

The workforce in the formal health structure of Bangladesh includes Physicians, Dental surgeons, Sub-assistant Community Medical Officers, pharmacists, BSc nurses, Diploma nurses, Assistant nursing attendants, family welfare visitors, midwives, community skilled birth attendants, medical technologists (Sanitary inspectors, Dental technologists, Laboratory technologists, Pharmacy technologists, Radiographers and Physical therapists), Community healthcare providers (for the community clinics) and the domiciliary workers (Health inspectors, Assistant health inspectors, and the Health assistants).

Occupational therapist, speech & language therapist, orthotics & prosthetics experts, audiologist, refractionist, clinical psychologist etc positions, so vital for proper identification and/or medical rehabilitation of persons with different types of disabilities are yet to be recognized within the formal health structure workforce in Bangladesh.



## Goal 4

### Ensure inclusive and quality education for all and promote lifelong learning

#### **Target 4.1**

*By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes*

#### **Target 4.2**

*By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education*

Bangladesh has done tremendously well in terms of enrolling children in Primary Education. This was one of the eight millennium development goals which Bangladesh achieved successfully, including very diligently addressing the gender gap. In fact, as it stands today, girls are performing better than boys in their schools. Subsequent phases of the Primary Education Development Program (PEDP) has tried to address any shortcomings found from previous phases, identifying the diversity and needs of the learners, creating enabling environments, hiring new teachers, strengthening them with better training and adopting strong laws and policies have contributed towards this significant change.

#### Policy interventions

- Non-formal Education Policy 2006
- National Education Policy 2010
- National Skills Development Policy 2011
- Non-formal Education Act 2014
- National Social Security Strategy (NSSS) 2015

#### Program/Project Interventions

- PEDP4
- Reaching Out of School Children (ROSC)/second chance education
- Conditional Cash Transfer (Stipend programs at primary and secondary level)
- School feeding/ mid-day meal/ school meal etc.
- Boarding school in CHT among others

While the gross enrolment rate in Primary Education exceeds 100% due to the dropped out children getting admitted again, the Net Enrolment Rate, at the end of 2016 stands at 97.96% (Boys 97.1% and Girls 98.8%). The proportion of pupils starting Grade 1 who reach Grade 5 is 81% (Boys 77.7% and Girls 83.9%)<sup>7</sup>. The goal is to reach 100% by 2030.

Throughout the third phase of the PEDP (2010-2016), the Department of Primary Education (DPE) had published annual sector performance reports (ASPR). The 2017 report summarizes the progress throughout the years. According to this report, whereas only 33%

<sup>7</sup> Bangladesh Primary Education Annual Sector Performance Report (ASPR) 2017, Department of Primary Education.

schools received free textbooks at the start of the academic year in 2010, by the 2016 it climbed to 99%. Percentage of schools with safe water sources rose from 83% to 97.2%, percentage of schools with a separate functioning toilet for girls also rose from 31% to 52.5%. Percentage of Head teachers with professional qualification increased from 83% to 94.3%. Percentage of standard size classrooms also increased from 43% to 75.9% over the years. Percentage of schools with pre-primary classes also increased significantly from only 43% in 2010 to 99.5% in 2016.

For children with disabilities however, the progress has not been as well marked. Due to a number of strict provisions of the RPPD Act 2013, schools can no longer deny enrolment of children with any type of disabilities, but limitation in the appropriate training of teachers to handle children with high grades of disabilities have resulted in low enrolment. Schools mostly enroll children with mild grades of disabilities. Parents are also not quite aware or conscious as expected as yet. According to the ASPR 2017, there is a gradual decline in the number of children with disabilities enrolled in all government primary schools.

	2010	2011	2012	2013	2014	2015	2016
Total	83,023	90,960	89,994	82,708	76,522	67,793	67,022
Boys	47,029	51,248	50,365	45,858	42,523	37,535	37,260
Girls	35,994	39,712	39,629	36,850	33,999	30,298	29,762

One reason for the drop in enrolment into primary schools may be attributed to the fact that there are several special schools now operated by NGOs and CSOs catering to the special needs of children with disabilities. Only one organization named Society for the Welfare of Intellectually Disabled (SWID) Bangladesh, for example, operates 525 schools with branches in even remote communities across Bangladesh. They alone have over 25,000 children with intellectual disabilities and autism enrolled in their institutions.

Special schools catering to children with autism had existed for over two decades, mostly located in the major cities. But from 2012 onwards, there has been a mushrooming of such special schools with hundreds of them now operating across the country. Since only a handful of them are operating with funds from the government, and as the number of qualified teachers and therapists are highly limited, even though literally thousands of children with disabilities are now enrolled in these make-shift schools, the question about quality of education remains a huge concern. The Ministry of Social Welfare has adopted a special policy for operating and funding special schools. Once this policy takes full effect, it is expected that quality of services provided at these schools will be ensured gradually.

Type of Institution/program operated by the government	Number	Seats
Special Schools for boys with hearing impairments	8	400
Special schools for boys with visual impairments	5	200
Special schools for boys & girls with intellectual impairments	2	150
Special schools for boys & girls with autism (non residential)	10	300
Integrated education for boys with visual impairments	66	660
Integrated education for girls with visual impairments	8	80
Total institutions	99	1790

Education of children with disabilities had not been a much prioritized issue until in recent years. It began with setting up a few special schools sporadically across the country, especially for children with visual and hearing impairments. This happened during the 1960s and 70s. Later, an integrated education program for children visual impairment was launched in 1973, covering one regular school in each administration district. But from the outset, these were under the supervision, management and operations of the Department of Social Services, not the education ministries. As a result, as the integrated education program was conducted in regular schools, there were some sort of quality control mechanisms in place, but there was little quality in the special education program. Almost a decade back, when the government introduced a primary education completion examination across the country, this extreme lack of quality became evident. It was then that DSS authorities brought in some changes in the management system, fresh recruitments, teachers' training, better monitoring mechanisms etc.

All the special schools and some of the integrated education programs had residential facilities. Over the years, hostels have been set up for all the facilities. For girls with visual impairments, there was not a single special school or integrated education program operated by the government until recent years. A lone non-government entity historically catered to their needs from their residential school in Dhaka. Over the last two decades just a handful of other NGOs also began operating special school and residential facilities for such girls. In a recent move, the government has extended its integrated education program in 8 regular girls' schools, one in each of the administrative divisions.

#### **Target 4.3**

*By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university*

#### **Target 4.4**

*By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship*

#### **Target 4.5**

*By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations*

#### **Target 4.a**

*Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all*

At the tertiary level, enrolment in public universities is a highly competitive challenge, as very large number of students are passing secondary & higher secondary education with high grades and as the education costs are far inexpensive. In some of these universities, applicants are even twenty times the intake capacity. In many cases, students with disabilities qualify for admission at these public institutions at par with their non-disabled peers. In addition, most of these public universities now also have special reserved seats for enrolling persons with disabilities who have successfully completed higher secondary education. In some cases however, there are ambiguities in the process, especially because the guidelines are not clear about what type of disabilities of the student can avail these admission quotas. During the annual intake of 2018, a student with physical disabilities drew much media attention while appearing in the admission tests of Dhaka University. With paralyzed lower limbs, the student arrived for the tests riding on the lap of his mother. After some national dailies covered the plight of the student, also showing the inaccessibility of the academic buildings, even though he secured qualifying marks, the authorities at first denied him admission. The reason cited was, the quota was for students with either visual or hearing disabilities, and not for those with physical impairments. This news went viral on both national and social media. Human rights organizations and DPOs protested by organizing human chains and press conferences, as the university was creating a clear case in discrimination even within a positive action for a marginalized group. Later on, the authorities were forced to back-track on their decision. This one case has now created an instance, whereby such confusion will not be created any more in future.

Almost all public universities now have measures to enroll students with visual disabilities, but such students generally prefer a handful of subjects in Humanities or Social Sciences, and not in the more promising and lucrative Science subjects. The Science subjects mostly have practical classes in the laboratory, and visually impaired students find it difficult to cope there. Moreover, the curriculum in Social Sciences or in Humanities subjects are not generally changed frequently, so the Braille notes availed from the senior students can be used over and over again by fresher students. Whereas, the curriculum of the Science courses is regularly updated, and notes in Braille are not readily available. The Dhaka University Central Library has been operating a special section for students with visual impairments, where they can access study materials in accessible formats. But it is still difficult to find material for Science Subjects.

For students with hearing & speech impairments, the challenges are greater. There are only a small number of schools that cater to the education of children with such impairments. Besides the special schools operated by the government, some NGOs are operating a handful of special schools, and some others are providing sign language training to both the children with the impairment, and also some of the peers and some of the teachers in mainstream schools. But this number is highly limited and exists in only a handful of locations. Sign language training is yet to become an integral part of the mainstream training of primary school teachers. In any case, up until now, whatever special support exists for such children, it is available up until school level, and not higher secondary school level. Therefore, finding such students at the university level is extremely rare.

Theoretically, there is no bar for students with physical disabilities enrolling in public universities, if they fulfill other educational qualifications. But practically, the institutions severely lack accessibility in infrastructure, discouraging such students to pursue higher education. Very few students can take the humiliation from peers when crawling up and down steep the stairs on a day to day basis, and usually drop out even after going through the stringent admission process.

The specialized institutions, such as engineering universities or medical colleges are still not disability friendly. Some teachers in such institutions still strongly believe that students with impairments just cannot become good engineers or doctors. A few years back, a student with a mild speech disability (stammering) in a public medical college was so ridiculed by a teacher on a regular basis, that out of humiliation, he committed suicide . The case is still hanging around in a court of law, but no peer of the boy would testify against the teacher out of fear of repercussions.

The government recognizes that not every child who completes primary or secondary education will go ahead and pursue tertiary level education. Due to limitations in various areas, many children are forced to drop out, while many others have to find shorter ways to develop a skill to start earning to support their families. Therefore, the government has set up a number of technical and vocational institutions across the country. While some of the centers are exclusively for women, by policy 5% of the seats in all such technical training institutions are reserved for persons with disabilities. The policy is now gradually being put into practice.

The National Education Policy adopted in 2010 promotes that students with disabilities should enjoy the pursuit of education within the mainstream education system. But it also recognizes that some students with severe grades of disabilities may not be able to cope there, and may require pursuing either integrated or special education options. Under Section 18A (Education for challenged learners: Special education), the policy outlines 13 strategic directives to ensure that such students can acquire education to the best quality possible. These are as follows:

1. Survey will be conducted to find out the exact number, type of challenges and to categorize the handicapped population as per the degree of their disabilities.
2. As per necessity, a coordinated education system will be initiated in some selected schools for the education of the challenged children so that they can quickly receive it in company with the normal children.
3. Under the integrated education program, at least one teacher of each school will be trained properly to instruct the challenged children.

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<sup>7</sup> The case has been described later in this report under Goal 16.

4. A properly trained teacher will be recruited to look after physical education and sports for these children.
5. 64 Secondary schools are now under Social Welfare Directorate where integrated education program is in place for the visually handicapped children. Delivery system of these schools has to be improved. Similar measures will be taken for the deaf and dumb and physically and mentally handicapped children.
6. Integrated education program at the primary level will be started at the district and upazila levels for the blind, deaf and dumb and mentally and physically handicapped children.
7. Separate schools will be established according to special needs and in view of the differential nature of disabilities of the challenged children.
8. Challenged children, unable to cope up with one or more than one subject, will be allowed to follow a flexible curriculum
9. Steps will be taken to distribute education materials free or at a low cost for the challenged children.
10. PTIs will arrange training for teachers of the school for disabled children about the integrated education program and for the teachers delivering special education. Steps will be taken to establish training colleges/institutes.
11. In order to initiate the proposed integrated education program in the general schools, the teachers training colleges will include lessons relevant to special education for the challenged children. This will encourage teachers to admit such children in the general class.
12. Issues related to handicapped children can be incorporated in the syllabus from primary level in order to increase knowledge and create awareness among the people.
13. Eligible handicapped candidates will enjoy equal opportunity in the job market.



## Goal 5

### Achieve gender equality and empower all women and girls

#### **Target 5.1**

*End all forms of discrimination against all women and girls everywhere*

Bangladesh has strived and come a long way to curtail, if not end discrimination against women and girls in all spheres of life. Not only has gender parity been addressed in school enrolment, the girls have started outperforming their male peers in public examinations. In terms of employment, both in the public and private sectors, women are being encouraged through quotas and other incentives. Besides human resource policies, almost all organizations (public and private) have gender policies with special provisions for women. The major labor force of the business sectors of Bangladesh, especially the export oriented sectors now comprise mostly of women. Women are climbing their way up to top management levels, both in the public and private sectors, besides taking leadership roles in the political arena also.

NGOs have played a major role in Bangladesh, especially through micro-finance, to make women an earning member of the family, and thus giving them a voice in the family's decision making process. While this gave them the confidence and the sense of freedom & independence, simultaneously, the readymade garments industry also boomed in the country, requiring women workers at a very large scale. It therefore has become a win-win situation all around.

For the women living in extreme poverty, who continue to face significant barriers to accessing formal employment, including lack of education and training, the government covers their protection through safety net schemes. There are also Allowances for Widows and for Deserted & Destitute Women besides the other general development programs that the government operates for persons with disabilities.

In Bangladesh, besides the development programs catered by the government, there is a massive development program operated across the nation by literally thousands of NGOs. However, women with disabilities are rarely integrated in these mainstream development programs. Even within small to large NGOs working with persons with disabilities, women with disabilities had historically been left out. The scenario is changing with DPOs being established and expanded across the county, and even federating bodies of women with disabilities gradually encouraging them to take leadership roles. At the grassroots level also changes are taking place with both male and female persons with disabilities alike, actively taking part in local decision making circles.

Violence against women unfortunately remains widespread across Bangladesh. Undue influence, to some extent administrative failures, a lack of social resistance and weak implementation of laws are the top reasons that lead to the perpetrators going free. Dowry violence, rape, acid violence and stalking (sexual harassment) are the most common forms of violence against women in Bangladesh. Victims of rape face severe social stigma where in majority cases victims are treated as the guilty party by the police. As a result a majority of victims/their families do not seek justice and try to hide the incident. Due to a weak criminal justice system, insensitivity, corruption, wrong postmortem reports the judicial procedure is often hindered. Though a deep rooted patriarchal mindset and lack of awareness is behind such violence, however, non implementation of laws are also instigating such violence. The inaction and corruption of law enforcement agencies and their reluctance to investigate or arrest the accused also contribute to the continuing crime of violence against women. According to Ain o Shalish Kendra, there were 724 reported cases of rape in the country in the year 2016 alone, with another 65 reported rape attempts. 37 of the victims were killed after the rape, 16 victims later committed suicide.

For women with disabilities the situation is worse. They face emotional abuse in addition to physical and sexual abuse. A study conducted over 310 adolescent girls and adult women with disabilities in 21 districts of Bangladesh found that 75% of the women faced emotional abuse, 82% faced physical abuse and 37% faced gender based violence. These figures are disproportionately higher than their non-disabled peers.

Evidence in courts are accepted following age old laws and rules, which do not have provisions for integrating special needs of persons with disabilities. Therefore, after raping a disabled woman, even if the perpetrator is caught and taken to court, just because visually impaired women cannot identify the person definitively, hearing & speech impaired women cannot communicate with the judge or the lawyers effectively, and women with intellectual impairments would not possibly even understand the implications of the situation, women with disabilities become easy targets. As disability multiplies a woman's vulnerability, they are often dependent on comparatively better off or influential families. More often than not, the people who should have been their protectors find them easy victims of abuse.

Provisions protecting the rights of women with disabilities must be included in the Dowry Prohibition Act 1980, the Domestic Violence (Prevention and Protection) Act 2010, the Family Court Ordinance 1984, Victim Witness Protections Law and other pending law reform initiatives. Moreover in cases of violence, exploitation and torture on disabled women, legal provisions related to summons of persons, trial in absentia, adjournment and appeals (Sections in Chapter VI, Section 339 B, Section 344 and Sections contained in the Code of Criminal Procedure) should be strictly complied with.

#### **Target 5.4**

*Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate*

Not too long ago, torture of household workers was too common a feature in Bangladesh. But the situation is gradually changing as in recent years, the Government of Bangladesh is gradually giving due stress for the recognition of household work. A policy for the care and protection of household workers has been created. For families with adults or children with disabilities however, unpaid care and domestic work calls for quite a different dimension, especially where the impairment is of moderate to severe grade.

Only a handful of families can afford professionals with very specific different skill sets coming to their houses frequently and regularly for therapy services. It is mostly the family members who take over the responsibility of almost all care and support. Not only do these volunteers not get paid, they also are generally ignored when the person is taken to formal therapists.

A rehabilitation council is in its conceptual stages within the Government of Bangladesh. When this will be established, standardization of care and care providers, including both formal and informal ancillary caregivers are expected to be outlined.

#### **Target 5.5**

*Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life*

The non formal adult education that was introduced in this country several years back, and operated hand in hand by the government and NGOs created a silent revolution. Poor rural women who never had the opportunity to enroll in schools now learned to read, write and calculate small amounts, which they needed in their day to day lives. Coupled with micro-finance, these women began contributing to the family income and thus also in decision making processes within the households. From the grassroots level, these women got into leadership positions and into the decision making processes.

At a higher level, the change has also come gradually. With positive discriminatory processes, women got into education, employment opportunities and also into political leadership. Now it is not surprising that many women get elected directly into the parliament, besides those who come in later through the quota. There are now women in leading positions in all the three wings of the government – the legislative, the judiciary and the executive. Within the corporate sector too there are women entrepreneurs in leading positions in business houses – the RMG industries, the cell phone operating companies, the pharmaceuticals and all. Within media houses, civil society leaders also women are holding important positions.

In all, however, the full and effective participation of women with disabilities still lags behind in the decision making positions. The Rights & Protection of Persons with Disabilities Act, 2013 has created provisions of committees from the national till the upazilla level and there are also town committees prescribed. However, ensuring inclusion of women with disabilities in these committees is yet to be guaranteed.



## Goal 6

### Ensure access to water and sanitation for all

#### **Target 6.1**

*By 2030, achieve universal and equitable access to safe and affordable drinking water for all*

Bangladesh is a small country crisscrossed by a few hundred rivers and rivulets, and the country also enjoys a fair share of rainfall every year, as such, almost 97% of the population (WHO estimates) has access to water throughout the year. This means, over 4 million people lack access to even basic water. By other estimates, only 40% of the population has access to safe drinking water<sup>10</sup>. Receding river levels due to dams being built upstream, rising salinity and indiscriminate dumping of waste in rivers, especially around the major cities and townships is reducing use of river water for drinking purposes. Ground water, which is used by nearly 90% of the population, is also contaminated with arsenic. According to the WHO, the levels of arsenic have contributed to the largest mass poisoning in history, affecting an estimated 30-35 million people in Bangladesh. Exposure to arsenic can cause cancer and severely damage many integral systems in the human body. Arsenic has been shown to be the cause of death for 1 out of every 5 people in Bangladesh.

In most of the urban areas, water is available through piped water supplies. Though in most cases supply coverage of the entire city or town population is inadequate, the supplied water also is not fit for drinking unless boiled or filtered. In almost all other areas, like the rural areas, people generally depend on shallow tubewells, supplied and installed either by NGOs, or the local government, or by people's own initiatives. These tubewells have drastically reduced the distances that the womenfolk had to travel to collect water for household consumption from rivers or large ponds in earlier days.

For persons with disabilities however, water sources are still largely inaccessible. Though INGOs like Oxfam, WaterAid and a few others have began making a handful of tubewells and their surrounding platforms accessible to persons with physical disabilities, the majority of other sources still remain highly inaccessible. The platforms of the tubewells rarely can accommodate wheelchair users, while the pumping mechanism becomes challenging for people without arms or those with weakness in their arms.

Even in urban areas where supplied water is available, and where water sources are fitted with taps and faucets, these are rarely designed to accommodate the needs of people with weakness in hands or fingers. As a result, persons with disabilities have to be dependent on others, even to collect a glass of water.

#### **Target 6.2**

*By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations*

<sup>10</sup> Hedric S., Water in Crisis – Spotlight on Bangladesh, The Water Project. Accessed from: <https://thewaterproject.org/water-crisis/water-in-crisis-bangladesh>

Over the past few decades, Bangladesh has done well to significantly reduce open defecation. But unsafe sanitation and poor hygiene behavior, including widespread stigma surrounding menstrual hygiene still persists in many parts of the country. Even a couple of decades back, finding a toilet in a rural community besides a mosque or a school would be a far cry. Nearby almost every homestead there would be a thicket of bushes, and people used to go to the nearby bushes for defecation. For the womenfolk, a lack of privacy would generally bar them from using the bushes during day time. As a result, they suffered from various types of illnesses. Moreover, during the monsoon seasons, feces washed away by the rains would spill over the roads and homesteads. So diarrhea and similar diseases were perennial problems. For persons with disabilities also, this was a major concern. Even adults with disabilities had to defecate in their rooms, and a family member had to help clean them.

During the last two decades especially, NGOs and the local government have brought about a major change. Low cost pit latrines made of 2 to 3 concrete rings topped with a concrete slab with a pan has been set up in most households. The shelters have been made up of corrugated iron sheets. With water available at home, sanitation health has increased considerably in the rural areas. But the persons with disabilities, especially those with mobility restrictions, these are generally not user-friendly. A few years back, a few INGOs began installing English commodes in a few households of persons with disabilities. For water supply, a small overhead tank was also installed, where water was pumped from a hand pumped tube well fitted with a special contraption. But pumping water into the tank became a physically demanding task for other people of the household, and soon these commodes became inoperative. Several NGOs & DPOs have thus tried to find solutions by innovating contraptions that are easy to install over the pan, user-friendly, as well as low-cost.

Sanitation in urban situations is far more complex, especially in large cities, where a large section of the population lives in overcrowded slums. Some of these slums are fairly well organized, with almost adequate water supply and bare minimum sanitation facilities. Some others are not even so fortunate, where sanitation health remains a major challenge. In these situations, sanitation facilities for people with disabilities living in the slums is a severe problem. Even in the capital city, finding a usable public toilet was a hurdle. A WaterAid study in 2012 found only 47 functional public toilets for 5.5 million commuters of Dhaka city. None had accessibility features for persons with disabilities. And not a single one was user friendly for women. In partnership with WaterAid, the two Dhaka City Corporations have begun setting up public toilets that are clean and user friendly for all. While these have accessible toilets, there are also separate arrangements for women, and even for addressing menstrual hygiene.

This is a remarkable beginning in Dhaka city, but needs scaling up to cover the entire city and also other major cities. But beyond Dhaka, the situation in other urban areas remains extremely difficult for persons with disabilities. Especially for those who travel frequently, as finding a usable toilet with accessibility feature in bus or launch terminals outside Dhaka is still a far cry. In recent months, the Bangladesh Railway has started demonstrating signs on the doors of their compartments where they have allocated the reserved seats for persons with disabilities. However, for a wheelchair user, climbing into the compartment, moving inside a train, or finding an accessible toilet are still almost impossible.

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<sup>11</sup> A Water Aid documentary, available at: <https://www.youtube.com/watch?v=sdm4rCkqQhE>



## Goal 7

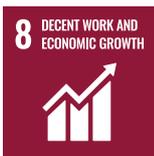
**Ensure access to affordable, reliable, sustainable and modern energy for all**

### *Target 7.1*

*By 2030, ensure universal access to affordable, reliable and modern energy services*

Among all the sectors that Bangladesh has seen significant improvements over the last ten years, one of the most prominent has been the power sector. The country has one national grid and through its distribution channels is covering almost 90% of the country, and the installed capacity as of July 2018 stood at an excess of 16,000 Mega Watts (MW). In 2009, this stood at about 4,200 MW. The government recognizes that by 2030 the demand will rise significantly. To prepare for the future, the government has thus began installing a few large power plants. The country's first and so far only nuclear power plant (2,400 MW) is currently under construction, and scheduled to become operational by 2023. Bangladesh is also installing large coal fired power plants of 1200 and 1,320 MW capacities. The government plans about 10% of the power will be generated from renewable energy, including solar power and wind power.

The country-wide coverage has benefitted all. While this increase has supported establishment of several large industries across the country promoting employment opportunities, power supply in the households has supported small and cottage industries flourish. On the other hand, a steady advancement in ICT services has promoted many people into the outsourcing businesses. Where accessibility of transportation and infrastructure is still a major challenge in the country, persons with disabilities have also benefitted from these initiatives.



## Goal 8

### Promote inclusive & sustainable economic growth, employment and decent work for all

#### **Target 8.5**

*By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value*

#### **Target 8.6**

*By 2020, substantially reduce the proportion of youth not in employment, education or training*

#### **Target 8.9**

*By 2030, devise and implement policies to promote sustainable tourism that creates jobs and promotes local culture and products*

#### **Target 8.10**

*Strengthen the capacity of domestic financial institutions to encourage and expand access to banking, insurance and financial services for all*

Bangladesh cherishes to give highest importance to turn our youth into competent manpower through vocational and technical education with emphasis on science, technology and especially on information technology. It is noteworthy that at present, in the rural areas of Bangladesh, expansion of science and technology is reaching out very fast from agriculture and farming to sugarcane threshing machines, rice-mills, communication sector, supply of electricity, power looms, etc. The country needs to develop in these sectors including Information and Communication Technology (ICT). It needs competent manpower to meet up internal needs. Moreover, there is a high demand of skilled manpower abroad and this will gradually increase over the coming years. And export of skilled manpower can increase our foreign currency earning also .

It is also well understood that employment and/or self-income generation activities are essential towards economic self-reliance of people with disabilities. But, where the mere access to education is a still an obstacle, even though the National Constitution categorically prohibits discrimination in employment in any form , employment of people with disabilities in Bangladesh has been quite a farfetched dream. The government had declared a 10% quota for people with disabilities along with orphans in the lower grade jobs about three decades back and 1% quota in the highest level jobs over a decade back. But due to in-sensitization of employers about the potentialities of persons with disabilities, due to contradictory employment policies, and due to several loopholes in the system and a lack of

<sup>12</sup> The National Education Policy, 2010.

<sup>13</sup> The Constitution of the People's Republic of Bangladesh, in Article 29(2) states: "No citizen shall, on grounds only of religion, race, caste, sex or place of birth, be ineligible for, or discriminated against in respect of, any employment or office in the service of the Republic."

proper monitoring, the declared quota for the people with disabilities had never been implemented with due intensity.

As per the Recruitment Rules under the Government of Bangladesh, a candidate may be recruited for a post if he/she is certified as medically fit. On this ground candidates with disabilities otherwise qualified were not being effectively considered for government, autonomous or statutory body's employment until recently. The scenario is changing though. In recent years, some progress has been seen in the employment within the education and health sectors of the government, but the number of persons with disabilities finding jobs is still not adequate. There was an instance where a person with physical disabilities (weakness in one arm) went through the written and viva exams, was selected and provided an appointment letter, but was still barred from joining his post. It was found that during the final days of his recruitment process, a new official had joined as the head of the office, and this gentleman was not convinced that an employee with only one functional arm could perform the tasks required from the positions. The applicant therefore had to pursue a legal battle and finally was able to join at his designated workplace.

A study conducted in 2002 by an NGO on disabled people who had found at least some form of employment or self-income-generation scheme found that, only 5% of the respondents were in government jobs, 17% in NGOs and 66% were self employed. Only 22% had been able to find some source of credit (or micro-credit) support. Amongst all the respondents, 68% were not at all capable of saving any of their respective income, as all the income needed to be spent on their daily needs. In most cases, when an institution hires people with disabilities for the first time, it becomes necessary to make some adaptations in the working environment to better accommodate the new staff with a disability. Unfortunately, in 94% cases any such change whatsoever never took place. In most cases, the respondents did not get a job in the line of their education and/or expertise. As such 70% of the respondents were not satisfied with their jobs, but they did not want to change the jobs fearing that the same situations would prevail also in the new workplaces. So they preferred to stay on and rather add on to their seniority, rather than take a chance for possible better employment conditions.

Another micro study conducted in 2017 by another NGO on 101 women with disabilities living in Dhaka city found 78% were out of employment, where only about 30% were had access to some or other income generation activities. This study testifies that not much had really changed within the formal employment situation of persons with disabilities, or especially women in the last several years.

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<sup>14</sup> Vide Article 29(3) of the Constitution: "Nothing in this article shall prevent the State from - (a) making special provision in favor of any backward section of citizens for the purpose of securing their adequate representation in the service of the Republic;"

<sup>15</sup> Bidhiboddho protisthan shomuhe chakurir jonno adarsha probidhanmala): Chapter 2 Clause 3 section 3 subsection A

<sup>15</sup> Employment Situation of People with Disabilities in Bangladesh, Center for Services & Information on Disability (CSID), December 2002.

<sup>15</sup> Situation Analysis of Women with disabilities in Dhaka Metropolitan Area, Women with Disabilities Development Foundation (WDDF), 2016-2017.

But there are reasons to believe that there are going to be substantive changes in the near future. In the recent years, a large number of readymade garment (RMG) factories, the leading export earning sector of Bangladesh has begun opening its doors to employ persons with disabilities. Those who were a little hesitant or reluctant in the early years of providing employment to both men and women with disabilities have found that these employees perform no lesser, while they are far more attentive to the duties than their non-disabled peers. So the employers have not only retained these workers, but have also begun employing more workers with disabilities. NGOs that were providing training to women with disabilities focusing on employment in the RMG sector are now expanding the training programs. Also, some large training centers operated by the government itself have also been made disability inclusive. With accessibility features in place, these are also attracting higher numbers of women with disabilities in their programs, which is maintaining the supply chain.

On the demand side, a substantially important step is the establishment of the Bangladesh Business Disability Network (BBDN), a forum of large corporate houses keen on promoting disability inclusive policies and practices within their respective business houses. Although there are a few NGOs within this forum, mostly aimed to provide the required technical knowledge and services, the majority of the stakeholders are the large and prominent corporate entities.

In recent years a number of attempts have been taken to increase the number of skilled human resources in the country, especially targeting the youth. Possibly the largest of them all is the Skills for Employment Investment Program (SEIP) commissioned directly by the Ministry of Finance, to not only provide skills training to over 500,000 youths, but to ensure employment of at least 20% of the trainees. The trainees can choose their skills support from 30+ different trades, including the tourism and hospitality sector. A section of the seats have been reserved for persons with disabilities.

Several years back, the government had instructed the scheduled banks to provide credit to persons with disabilities who wish to initiate small businesses. Interest rates of these loans were drastically reduced and repayment processes were simplified. However, even though the intentions were good, in most cases the banks did not respond positively, as they could not perceive these loans to be risk-free. In some districts across Bangladesh, groups of persons with disabilities joined hands to secure these loans, as NGOs acted as the guarantors. But the overall response was very negligible. There is a micro-finance scheme operated by the Department of Social Services (DSS), through which persons with disabilities can secure interest-free loans up to an amount of Taka 10,000 at a time. A total of 15,000 persons with disabilities had been provided these loans in the 2017-2018 fiscal year. Besides, the Palli Karma Shohayak Foundation (PKSF) has also encouraged the NGOs receiving their funds to prioritize persons with disabilities while allocating micro loans amongst beneficiaries.

A massive challenge remains though for elderly people with disabilities, who possess certain sets of marketable skills and still can pursue a self employment career, but have limited access to funding that would support them in utilizing the skills.



## Goal 9

### Build resilient infrastructure, promote inclusive & sustainable industrialization and foster innovation

#### **Target 9.1**

*Develop quality, reliable, sustainable and resilient infrastructure, including regional and trans-border infrastructure, to support economic development and human well-being, with a focus on affordable and equitable access for all*

In the area of communication infrastructure, the Government of Bangladesh has embarked on a number of massive projects. Roads are being widened into 4-lane carriageways, large bridges and flyovers, elevated expressways and elevated train services are being built. The railway system is gradually being upgraded with new tracks and renovated or newly constructed rail stations. However, almost all built infrastructure in the country is unfriendly to persons with disabilities. In recent years the Ministry of Housing and Public Works has issued a circular compelling all new public buildings to accommodate principles of universal design. As such, 10,000 newly constructed schools have built a ramp and made provisions for accessible toilets. But due to a lack of proper monitoring, most of the ramps have failed to meet the accepted standards in their slopes and lengths. Also, in most cases, the toilets have been relocated behind the school building, without ensuring continuity of the corridors, and thus they have lost their accessibility features. Almost all public offices across the country lack accessibility features. There is still not a single public transport that is suitable for use by persons with disabilities.

#### **Target 9.2**

*Promote inclusive and sustainable industrialization and, by 2030, significantly raise industry's share of employment and gross domestic product, in line with national circumstances, and double its share in least developed countries*

#### **Target 9.3**

*Promote inclusive and sustainable industrialization and, by 2030, significantly raise industry's share of employment and gross domestic product, in line with national circumstances, and double its share in least developed countries*

In 2016, the per-capita income in Bangladesh was estimated as per IMF data at USD 3,840 (PPP) and USD 1466 (Nominal). Therefore, the market-based economy of Bangladesh is the 41th largest in the world in nominal terms, and 29th largest by purchasing power parity; and it is classified among the Next Eleven emerging market economies and a Frontier market. According to the IMF, Bangladesh's economy was the second fastest growing major economy of 2016, with a rate of 7.1% . Besides the well known RMG and pharmaceutical sectors, ship building is becoming a growing industry in Bangladesh, the potentials of which place the country at par with countries like China, Japan and South Korea. However the

<sup>18</sup> [https://en.wikipedia.org/wiki/Economy\\_of\\_Bangladesh](https://en.wikipedia.org/wiki/Economy_of_Bangladesh)

rich-poor divide continues to affect our economy, and so the steadily rising per capita income over the past few years does not give a true picture of people still in poverty. Access to nutrition, health services, especially maternal & child health, water & sanitation, education & employment etc. are all affected by the divide. This is changing though, with rapid growth of industries, both at large and small scale.

Bangladesh is seeing a massive growth in business and industrialization with thousands of jobs being created newly also every year in the private sector. In order to ensure availability of skilled human resources, the government has undertaken a national skills development program, which is under the direct patronization from the Prime Minister's Office. Besides making the mainstream national skills development policy disability inclusive, a standalone national policy for skills development of persons with disabilities has been developed. Certain quotas in seats are also being reserved for people with disabilities in vocational and technical education centers.

But generally the industries are not yet fully inclusive, more especially for persons with disabilities. There are a few sporadic cases though, such as in the case of Keya Group, which employs thousands of people with disabilities. NGOs and DPOs working closely with business houses have ensured that a few hundred factories have been systematically employing persons with disabilities over the last few years. Factory buildings are being made accessible, changes are also brought about in their respective human resource policies, and other reasonable accommodation measures are being taken. But the overall number of persons with disabilities finding such employment is still very low. Communication still remains a massive barrier of persons with hearing impairments. Availability of accessible transportation to and from the factories remains a huge challenge for people with physical disabilities. Scopes for people with visual impairments also remain very limited.

A major change is being expected though, as the Bangladesh Business Disability Network (BBDN) has officially been launched by the Honorable Prime Minister at the Dhaka Skills Summit in December 2016. This alone will create more sensitivity towards people with different types of disabilities within the business community and pave the way for far more employment opportunities. The Bangladesh Employers' Federation and the ILO are playing significant supportive roles to make this a reality in Bangladesh.

#### **Target 9.c**

*Significantly increase access to information and communications technology and strive to provide universal and affordable access to the Internet in least developed countries by 2020*

The Information & Communications Technology (ICT) sector in Bangladesh has a long history and heritage. The Telegraph branch under the Posts and Telegraph Department of the British India was first set up in this country in 1853. After the liberation of Bangladesh, the Bangladesh Telegraph and Telephone Board (BTTB) was the sole player for long, until cellular

phones were introduced in 1989. The country now enjoys almost 99% geographical coverage in voice and data connectivity, and has over 95 million active cell phone users.

All India Radio began its operations in this region by setting up a center in Dhaka in 1939. However, a fully functional studio was set up under Radio Pakistan only in 1960. During the liberation war of Bangladesh, the Swadheen Bangla Betar Kendra became the official mouthpiece of the Government in Exile. After liberation, it became known as Bangladesh Betar. As of 2015, the Ministry of Information had licensed 28 private organizations for FM broadcasting, 25 of them have so far been allocated broadcasting spectrum. There also is a strong network of community radios beginning an official journey in 2008, and so far 16 such operators have been provided license.

Television services were introduced in this country in 1964, and after liberation, it became known as Bangladesh Television. This enjoyed monopoly until the mid 1990s when privately owned channels entered the market. Currently over 40 private channels have been provided license, but only two (the state owned Bangladesh Television and the Sangsad Television) have terrestrial broadcasting licenses.

The first connectivity in Bangladesh with the internet was in 1995-96, through dial up services. But the user base is growing fast, especially after internet was made available through the mobile phone network. As of February 2017, internet subscribers in Bangladesh have reached 67.245 million users, and a staggering 63.120 million are using through cell phones .

The first computer to be installed in this country was at the Atomic Energy Center in 1964. Personal Computers began gaining popularity since the late 1980s. With Dhaka emerging as a freelance IT and IT-enabled services outsourcing center, and with a consistent GDP growth rate of around six percent for the last few years, the ICT sector in Bangladesh is poised for continued expansion. With over 95 million mobile phone users, over seven million Facebook users, and 99 percent geographical coverage in connectivity, the country is ready for service delivery using ICTs. The IT sub-sector in Bangladesh has the potential to become an attractive ICT outsourcing destination. According to the Bangladesh Association of Software and Information Services (BASIS), around 800 software and IT-related companies have registered in Bangladesh as of December 2014. The size of the ICT market, excluding telecommunications, is estimated to be worth USD 300 million. The software and IT industries share 39 percent of the market and approximately 50,000 professionals are now employed in the sector. According to BASIS, over 100 IT companies currently export to over 30 countries with North America being the main destination.

However, in spite of this, according to the Bangladesh Computer Samity, quite understandably owing to our late entrance in the ICT field, our PC penetration is one of lowest in the world (4.5 units per 1000 population). Furthermore its growth has been limited to the capital city and only a few of the large metropolitan cities in our country.

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<sup>19</sup> Bangladesh Telecommunication Regulatory Commission, March 2017

For persons with disabilities, ICT is an enormous boon, as it is the technology that could create a level playing field for them, alongside their non-disabled peers. Where mobility is a huge concern, they could have used ICT for a decent income even from the comfort and the security of their own homes. However, the available hardware or software is not yet fully disability friendly. For people with physical impairments, or with gross motor function disorders, the hardware is hardly friendly! For visually impaired people, the required software is always not available. It is difficult for them to use cell phones also, as most of the new phones that are available now are smart phones!

Only some television channels in only some news bulletins use simultaneous sign interpretation services. As such, for persons with hearing impairments, it is impossible to follow the news or gain any kind of new information.

Websites of almost all ministries and departments of the government have uploaded PDF versions of scanned documents (laws, policies, programs etc.) on their websites. For visually impaired people, even with screen reading software would find it impossible to read through these documents.

There is very little opportunity in this country for innovations, customization and/or adaptation of ICT related hardware. Creating such provisions could make a big difference in the lives & livelihoods of persons with disabilities. In terms of software, there already are some examples of good practices, where the Bangladesh Computer Council and the Ministry on ICT have worked closely with NGOs to provide training to young people with disabilities and provide jobs across the country. Programs like these need to be scaled up both in terms of geographical coverage and also in terms of number of youths with disabilities.



## Goal 10

### Reduce inequality within and among countries

#### **Target 10.2**

*By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status*

The first few self-help organizations of persons with disabilities in Bangladesh were formed around the early 1960s. Up until the 1990s the growth was limited to only a handful of initiatives. But over the past two decades, Bangladesh has seen a steady growth in the number of DPOs getting formed even at the grassroots level. Initiatives for strengthening their capacities are also gradually increasing steadily. There are federating bodies from grassroots to national level, and there are networks at the national level. There are also a couple of federations and networks specifically of women with disabilities. While the earliest organizations were formed by people with visual and hearing & speech impairments, associations are also being formed now of parents, or persons with cerebral palsy and Down syndrome.

These organizations have significantly contributed towards people with disabilities raising their voice in matters related to them. Moreover, the National Disability Card provided by the Ministry of Social Welfare has given a national recognition of identity, and thus has boosted their self esteem and self confidence manifolds.

During the 9th Parliamentary Elections in December 2008, the National Election Commission for the first time took country-wide specific measures to promote accessibility, so that the voters with disabilities can cast their votes at ease. It is expected that the standards will only improve further during the election scheduled at the end of 2018. However, in local government elections over the years, several people with disabilities have contested and even won membership in their respective local bodies.

The Rights & Protection of Persons with Disabilities Act, 2013 has mandated the formation of several hundred committees, from national to sub-district (Upazilla) level, and has mandated inclusion of persons with disabilities in the committees. Unfortunately though, in most places the committees have yet not been formed even after five years have elapsed since the enactment of the law. This inclusion could have facilitated active participation of persons with disabilities in the decision making processes on matters under the legislation. However, a different ministry, the Ministry of Disaster Management & Relief has constituted disaster risk management committees down to the Union level, and has prescribed that every committee must include at least two persons with disabilities. This mechanism is up and running, therefore they can participate in and contribute into the disaster response initiatives.

The Government has launched a national database of persons with disabilities. Information of about 1.5 million persons with disabilities have so far been included, and all those registered

have been provided the national disability card. A large number of persons with disabilities are however yet to register. The process, which is still quite complicated, is being simplified.

**Target 10.3**

*Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard*

**Target 10.4**

*Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality*

Whatever may be mentioned in the national constitution, this is an area where there is much room for improvement in the context of Bangladesh for establishing rights and fundamental freedoms of persons with disabilities, as a plethora of highly discriminatory and derogatory legislation prevails and is in practice in the country. A few examples are cited below. One law has been revoked.

The Hindu Inheritance (Removal of Disabilities) Act, 1928 (Act no. XII of 1928) in the article-2 states that “Notwithstanding any rule of Hindu Law or custom to the contrary, no person governed by the Hindu Law, other than a person who is and has been from birth a lunatic or idiot, shall be excluded from inheritance or from any right or share in joint-family property by reason only of any disease, deformity, or physical or mental defect.” This Act is still enforced in Bangladesh. This law is absolutely against the interest of persons with intellectual disabilities and persons with psycho-social disabilities.

The Lunacy Act 1912 (Act no. IV of 1912) prevailed in Bangladesh until recently. This law provided the health system to institutionalize and arbitrarily treat people with mental illnesses, with or without informed consent. In many instances intellectually disabled persons and persons with psycho-social disabilities became victim by this act when there is co-sharer or in absence of their legal guardians, the court interpreted the law and these persons were considered as ‘lunatics’ or mentally not sound to manage their property interests. Similarly, in many Muslim families persons with intellectual disabilities failed to claim genuine share of inheritance since there was no special legislative measure to protect their interest. It was more applicable in case of persons with autism spectrum disorders in Bangladesh. This law was finally abolished in 2014 in the national parliament. It was expected though that the Mental Health Act, which had been going through a drafting process for over three decades would be adopted immediately. However, it has taken almost four years and finally the new law has been adopted in the parliament in recent weeks in November 2018. It is now expected that the new Mental Health Act 2018 will duly address all the discriminatory practices that exist in the country. The Rights & Protection of Persons with Disabilities Act, 2013 has also created specific provisions to protect the rightful share of persons with disabilities to inheritance. However, how strongly it can stand over the Hindu Inheritance Law is yet to be tested in a court.

The War Injuries (Compensation Insurance) Act, 1943 was enacted to provide compensation to be payable by an employer, in respect of a war injury sustained by a gainfully occupied person who is a workman to whom this Act applies, compensation, in addition to any relief provided under the War Injuries Ordinance, 1941. According to this Act workmen to whom the Act

applies are (a) workmen employed in any employment or class of employment to which the Essential Services (Maintenance) Act, 1952, has been declared under section 3 thereof, whether such declaration is or is not subsequently revoked; (b) workmen employed in any factory as defined in clause (j) of section 2 of the Factories Act, 1965; (c) workmen employed in any mine within the meaning of the Mines Act, 1923; (d) workmen employed in any major port; (e) workmen employed on any estate which is maintained for the purpose of growing cinchona, coffee, rubber or tea, and on which on any one day in the preceding twelve months, twenty-five or more persons have been employed as workmen; (f) workmen employed in any employment specified in this behalf by the Government by notification in the official Gazette. The First Schedule of this act defines the percentage (from 100% to 10%) of disability in accordance with the type of injury (26 types).

The Parents Care Act 2013 makes it mandatory upon adult and working people to care for their elderly parents irrespective of social class and/or economic strata. As per the law, elderly parents cannot be shifted to old homes against their will, rather the law prescribes care and protection within the home and community. For elderly persons with disabilities, besides the RPPD Act 2013, this law gives supplementary support to ensure prolonged care within their own homesteads. The rules of the, however, are yet to be adopted. Therefore due implementation of the law is yet to take place.

In pursuit of its commitment under almost all the international human rights conventions that the country has ratified, Bangladesh is heading in the right direction of enacting an Anti Discrimination Act. There are several sector-specific laws in place, such as for the prevention of any forms of discrimination against women, children, ethnic minorities or even persons with disabilities, however, the overall anti discrimination law would address structural changes and further strengthen the sectoral laws. The drafting has been in process for several years now, and is expected to be enacted soon.

The Local Government Division under the Ministry of Local Government and Rural Development has issued a circular in 2016, whereby all local government institutions must adopt specific actions to ensure meaningful inclusion of persons with disabilities in all their functions, as well as allocate specific funds within respective annual budgets to finance such schemes. As the local government machinery at the remote community level is playing a significant role for mainstream community development, inclusion within their functions has begun to reduce discrimination faced by persons with disabilities to a great level. The union councils are far more sensitized and responsive towards persons with disabilities and their DPOs. In several areas across the country, DPOs have been welcome to use the council office premises for holding their regular weekly/fortnightly/monthly meetings. Even in some cases, the chairperson has allocated a separate room to the DPOs so that they can operate their programs from the council offices. On the one hand, this has helped raise public awareness on disability related matters, and on the other hand, persons with disabilities also feel it has contributed enormously towards raising their dignity.

At the national level, the government has given a massive stress on social protection of the poor and vulnerable. A large scale National Social Safety Net Strategy has been adopted, under which monthly allowance for persons with disabilities are gradually increasing both in amount and coverage.



## Goal 11

### Make cities inclusive, safe, resilient and sustainable

#### **Target 11.1**

*By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums*

Dhaka, the capital city of Bangladesh is home to over 15 million people, with an annual growth rate of about 4.2%, one of the highest rates in Asian cities . According to the Far Eastern Economic Review, the city will be home to 25 million people by the end of 2025. Hawkers, peddlers, small shops, rickshaw transport, roadside vendors and stalls employ a large segment of the population – rickshaw-drivers alone number as many as 400,000. Half the workforce is employed in household and unorganized labor, while about 800,000 work in the textile industry. In order to tackle this rising congestion and inadequate infrastructure; the national government has recently implemented a policy for rapid urbanization of surrounding areas and beyond by the introduction of a ten-year relief on income tax for new construction of facilities and buildings outside Dhaka. Within the city, however, the government itself has started constructing multi-storied buildings for low income groups, with an aim to drastically reduce slums by 2030. There are plans to replicate the initiative in other major cities.

#### **Target 9.2**

*Promote inclusive and sustainable industrialization and, by 2030, significantly raise industry's share of employment and gross domestic product, in line with national circumstances, and double its share in least developed countries*

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In 2007, the Ministry of Housing and Public Works had adopted a policy level decision that all public construction thereafter must adopt accessibility features following universal design principles. Efforts had been taken to update the National Building Code incorporating universal design principles. While such features have not been duly addressed in the low-income group people's housing schemes, almost all other public infrastructure is incorporating accessibility issues.

Basic services in the slums are being increased by collective efforts of the local government, NGOs and relevant utility service authorities providing electricity, gas, water and sanitation. As such, living conditions are improving rapidly. Accessibility of such services for persons with disabilities however remains a constant challenge.

### **Target 11.2**

*By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons*

The communication system in Bangladesh is complex, as there is demand for transportation on rail, motor, and waterways. The rail network covers approximately 2,500 kilometers, the road network approximately 22,000 kilometers and the waterways spread across 8,500 kilometers, which gets reduced to about 5,000 kilometers during the dry seasons. The largest investment in recent years is however in the road network. Major highways have been upgraded from two-lane to four-lane dual carriageways, several large bridges have been constructed to reduce dependence on ferries that created traffic bottlenecks, sophisticated buses have been imported to increase comfort of people travelling long distances. Accessibility of persons with disabilities however remains a huge concern. There still is not a single public transport that can accommodate wheelchair users.

Considering the plight of persons with disabilities, the State operated Bangladesh Railways has created a provision of reserving seats on every inter-city route, also giving a 50% commission on the ticket price. Except for wheelchair users, persons with disabilities are benefiting from this service. But in almost all cases, the height of the platforms are not adequate, often 3 to 4 feet lower than that of the train, making it difficult to climb in or out for all passengers, especially the elderly people, women and children. Though people with visual impairments can somehow manage the climb, it is almost impossible for crutch-users or those with weaknesses in upper limbs.

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Almost all major cities have large networks of public transports, but even though they have reserved seats for women, children and persons with disabilities, the numbers of buses plying the routes are not adequate and none are accessible to wheelchair users. In a major move in the last few years, the two city corporations have begun installing pavements with slopes, curb-cuts and blind tracks. But due to inadequate drainage system, to tackle with water logging that results in monsoon seasons, the height of the pavements vary from place to place from a few inches to even a foot and a half. Moreover, buses rarely stop at exactly

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<sup>20</sup> McGee, Terry (27 September 2006). "Urbanization Takes on New Dimensions in Asia's Population Giants". Population Reference Bureau

designated bus stops. So even though commuters mostly board buses from queues, it remains extremely difficult for people with mobility restrictions and/or visual impairments. In Dhaka city, the government is installing an elevated rail service, which when completed in the next couple of years, is expected to curtail the challenges to a great extent.

A few years back, Center for Disability in Development (CDD), a prominent NGO in Bangladesh in the disability development sector, had commissioned a floating comprehensive disability service center to extend rehabilitation services to remote communities, especially which are accessible by river routes. The ship was accompanied by a country boat, fitted with accessibility features, to help transport persons with disabilities including wheelchair users between the ship and their respective communities. In following years, when floods had devoured most of these low lying communities, this accessible boat became the lifeline for evacuating persons with disabilities to safer and higher grounds. This success drew the attention of the Ministry of Disaster Management & Relief, and now the ministry has planned to construct several of similar boats for each district where floods are a perennial problem. This scaling up will go a long way in transporting persons with disabilities and their families to safer shelters in the events of floods across the country.

#### **Target 11.5**

*By 2030, significantly reduce the number of deaths and the number of people affected and substantially decrease the direct economic losses relative to global gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations*

Natural disasters remain a perennial challenge for the people and for the overall development of Bangladesh, as the country is highly prone to almost every form of natural calamities, except for tsunamis. During the first thirty five years since its independence, the country was devastated by thirty eight severe cyclones of varying intensities, the fiercest one being on 29 April 1991, when material damage was to the tune of about 2.4 billion US dollars and human casualty of about 140,000 lives. On a previous occasion of a similar catastrophe in 1970, about half a million lives were lost in a matter of just hours. Historical records of floods in Bangladesh dating back to 1781, suggest that a major flood could be expected every seven years and a catastrophic one every 33-50 years. More detailed records since 1954 show the worst flooding since then occurred in 1974, 1987, 1988 and 1998, when 70 percent of the country was submerged in the most serious flood Bangladesh had ever seen. But Bangladesh has learned enormously from these experiences and investing in developing its capacities in technical knowledge as well as in human resources in disaster risk management, and by allocating sufficient financial resources in a planned manner, human casualties have been brought down drastically to single digits even in major disasters.

Bangladesh has developed a unique cyclone warning system, which has been popularized in the coastal areas cautioning people of impending disasters. A strong mechanism of evacuating people from vulnerable areas has also been developed and is practiced stringently in times of need. In partnership with the Fire Services and the Rover Scouts, the Ministry of Disaster Management and Relief (MoDMR) has trained over 100,000 community level volunteers across the country who keep raising awareness regarding community risk

management throughout the year, and swing into direct and actual management in times of disasters. Moreover, under the supervision and coordination of the ministry, a set of inter-ministerial Standing Orders on Disasters (SOD) has been prepared, which is updated on a regular basis. This keeps the entire government administration on its toes to prepare for and respond to every kind of natural disaster. Every time a natural disaster is predicted, a coordinated mechanism is initiated in every district that is expected to be affected, headed by the respective deputy commissioners. A national monitoring system has been created, with the setting up of a central monitoring center within the MoDMR, with video conferencing mechanisms installed in every district. At times of major disasters, senior level officials of the ministry take up station at the center to monitor the situation round the clock, and respond accordingly.

All these collective measures have drastically reduced human casualties, but the damage to crop, forestry, infrastructure and livelihood still often remain colossal. Measures are now being taken to address these challenges also.

Bangladesh took up the Hyogo Framework for Action, 2005-2015 especially in its later half, and then played a significant role in the run up to the formulation and adoption of the Sendai Framework for Disaster Risk Reduction, 2016-2030 (SFDRR). Besides the government, Bangladeshi NGOs also took part in the SFDRR preparation process. Special emphasis was also given by the global network of NGOs focused on disability inclusive disaster risk reduction to make the SFDRR disability inclusive.

After the disability inclusive SFDRR was adopted in March 2015, Bangladesh became the first country to host an international Conference on Disability & Disaster Risk Management. This was jointly hosted by three ministries of the government and NGOs in collaboration with UNISDR in December 2015. Representatives from 20 countries attended the three day meet, including government officials from a few countries. At the closing ceremony of the conference, the Dhaka Declaration on DiDRR 2015 was adopted. It was also decided that the 2nd conference will also be hosted in Dhaka in three years.

In pursuit of the declaration, MoDMR constituted a national taskforce on DiDRR, revised the SOD to make it more disability inclusive, and has created provision for inclusion of persons with disabilities in all disaster risk management committees from national to grassroots level. All disaster risk management interventions are also gradually being made disability inclusive.

Meanwhile, UNISDR had taken full ownership of the declaration, circulated it worldwide, included it as one of the base papers for the Asian Ministers' Conference on DRR, and made it mandatory upon countries to address its provisions when reporting on national progresses in 2019.

The 2nd international Conference on Disability & Disaster Risk Management as committed

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<sup>21</sup> <http://dkconf18.modmr.gov.bd/wp-content/uploads/2018/03/The-Dhaka-Declaration-on-Disability-and-DRM.pdf>

<sup>22</sup> <http://dkconf18.modmr.gov.bd/wp-content/uploads/2018/05/Dhaka-Declaration-2018.pdf>

### **Target 11.7**

*By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities*

was held in May 2018 in Dhaka, hosted by the Ministry of Disaster Management & Relief. Here, the Dhaka Declaration 2018 was adopted.

Rapid urbanization has attracted people from rural areas to migrate to almost all cities and towns, and unplanned growth in most cities, including the capital city has meant that open spaces are now gradually vanishing, being replaced by concrete infrastructure. Ponds and low-lying areas have been filled up, river banks have been encroached upon and small playgrounds have been divided into residential plots. Open spaces are gradually decreasing. What remained had been converted into slums. The large playgrounds have been allocated to influential sports clubs, who in recent years have begun restricting entry to common people, unless they are paying members. So for people in general, finding green open spaces were becoming a challenge. In recent years though things are seeing some change for the better. In Dhaka for example, some old parks have been freed from the grasp of encroachers; and walkways, rain-shelters and rest areas have been constructed. The banks of the lakes and parks in Dhanmondi and Gulshan are two examples. But the most significant change in Dhaka is the 300 acre Hatirjheel area, where an old lake that was almost filled up and encroached upon by a massive slum has been completely restored and a large park has been created around it. This has given new life to Dhaka citizens by creating an alternative road network to ease the daily traffic congestion, and also a fairly large open green space. These new projects have taken into account accessibility issues to a basic level. But these are not open playgrounds.

People with disabilities of Bangladesh have been doing quite well in sports and games. People with intellectual disabilities in particular have excelled even at the international arena for almost three decades. In recent years, cricket for people with visual impairments and for wheelchair users are gaining popularity, with national teams playing well even at international meets. In recognition of such improvements in sports and games, the government has also decided to invest in and increase financial allocation in this area. A fairly large ground has been allocated for promotion of sports and games of persons with disabilities in the heart of the capital city. But being immediately next to the National Parliament, no construction will be allowed on this ground. However, on the outskirts of the capital city, a dedicated sports complex for persons with disabilities is being constructed on an area of 12 acres. Besides having playgrounds for different types of sports and games, there will be a sports training academy, dormitories for the athletes and residential facilities for overseas coaches. It has been designed to host international events of different types of sports and games of persons with disabilities.



## Goal 13

### Take urgent action to combat climate change and its impacts

#### **Target 13.3**

*By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status*

#### **Target 13.b**

*Promote mechanisms for raising capacity for effective climate change-related planning and management in least developed countries and small island developing States, including focusing on women, youth and local and marginalized communities*

Bangladesh has taken into full cognizance the fact that it would be one of the foremost countries hit hard by climate change. Over the last decade, fortunately there have not been many category 5 cyclones affecting Bangladesh, however, with gradual rise in sea level, several low level storm surges were enough to push in sea water and increase salinity in the low lying coastal belt of the country, thereby affecting fertility of the soil of the vast majority area of rice cultivation.

Moreover, Bangladesh has given shelter to almost 10 million Rohingya people, who have fled ethnic cleansing in neighboring Myanmar. The sheltering camps set up over an area of about 2,500 hectors, has given rise to a number of environmental challenges. At the initial stages, almost 50 tons of wood collected from the forests were being burned as firewood on a daily basis, until stoves and kerosene oil was supplied. Almost 4,000 acres of forest land has been denuded in just a year, creating massive environmental changes in nearby areas.

It is also well recognized that a majority number of people affected most within the climate refugees will be persons with disabilities. Both the government and the non-government entities therefore are preparing to reduce the vulnerabilities. Climate change adaptation measures have featured very strongly in all major national plans. A ministry and a department have been assigned specific tasks & responsibilities and budget is being allocated accordingly. NGOs have also been brought into the fold to raise awareness and promote forestation. Research is being promoted to develop high salinity resistant food crops. Housing and shelters are also being experimented to cope with disasters that result from climate change. Persons with disabilities are being actively involved in some of these planning and experimentation phases.



## Goal 16

### Make cities inclusive, safe, resilient and sustainable

#### Target 16.2

*End abuse, exploitation, trafficking and all forms of violence against and torture of children*

There is very little recorded information of persons with disabilities being subjected to physical torture and/or cruel punishment in Bangladesh. But there instances where people have been subjected to physical torture, even in custody, that have resulted in permanent disability.

In March 2011, a teenaged Limon Hossain from a coastal district of Bangladesh was shot at close range, suspecting him as a criminal. A meritorious student in a local school, he was on his way back from the fields, leading his cattle home, when he was confronted by the elite law enforcement agency personnel. He later needed to be transferred to a premium hospital in Dhaka, and his infected leg needed to be amputated. The elite force lodged criminal cases against him and his family, including both of his elderly parents, while his mother also filed lawsuits against the elite force for torturing her son into disability. The force created confusion by confessing once that this was a mistake, but later on, not only keeping silent on the issue of this confession, but also pursuing the criminal case against him. The entire human rights defending community across the country, and many international human rights defenders rose up and protested against this case. However, the harassment continued, as did frequent visits from local law enforcement agency personnel to his home, community, the institution where he was pursuing his education, trying to implicate him and his close family members in other criminal cases. However, the government withdrew the cases two years later, having found no merit in them. The National Human Rights Commission and Ain O Salish Kendra (ASK) provided him with consistent legal assistance and support. Currently, there is a trial underway against six personnel of the elite force, which was filed by Limon's mother.

Modhusudan Chokroborty, a brilliant student from a poor family in Mirer Shorai, Chittagong qualified for admission in Bogra Medical College. But from the outset, faced humiliation from friends, peers and even teachers due to a mild disability – stammering. Humiliated, he decided to discontinue studies, and wrote a sad letter to his father, who had sold everything he owned hoping to raise his only son as a doctor. When Modhu came home and decided against returning to college, his father convinced him otherwise, accompanied him to Bogra, and met his teachers. They assured him that there would be no further problems. But teachers even challenged him, how he dared to enter medical education carrying such a disability! He was intentionally not given good grades. On 11th December 2010, he was again reportedly humiliated in front of the class. Unable to take this humiliation any longer, he left his hostel room, rented a room in a hotel under a pseudonym, and ingested poison. In his suicide note, he blamed the humiliation he had faced compelling him towards this fatal decision. But he blamed no one in particular. The hotel management rushed him to a clinic,

which shifted him to the medical hospital the next morning, where he lay uncared for and unattended for a few precious hours. Finally, when his identity as a medical student was known, comprehensive measures were taken. But still, on 12th December evening Modhu passed away! At his funeral two days later, his peers refrained from describing what happened in the classroom, even off the record, fearing backlash from teachers.

Limon's case is just one example of a continued mental harassment and torture, even after creating a new unnecessary case of disability. But in general, mental torture and ridiculing of persons with disabilities as in the case of Modhu goes on unabated.

The Constitution of Bangladesh guarantees that all citizens of this country, irrespective of their disability status, shall be protected against all forms of exploitation, violence and abuse. Over the years since our independence, several laws have also been enacted towards ensuring such safety and security. However, due to poverty, ignorance and a lack of enforcement of the laws, there are several instances that occur every year, where people including people with disability face situations of exploitation, violence and abuse.

The Bangladesh Women & Child Repression Prevention Act (2000) is one such law, which strongly protects women and children irrespective of their disability status, against violence and abuse, especially gender based violence. The Children's Act (1974) (amended 2013) also safeguards children against various forms of neglect, violence, exploitation and abuse. Several issues are addressed in this Act, such as, Penalties for Cruelty to child, Employing children for begging, Being drunk while in charge of child, Giving intoxicating liquor or dangerous drug to child, Inciting child to bet or borrow, Allowing child to be in brothel, Causing or encouraging seduction, Publication of report or pictures relating to child etc. However, neither the Juvenile Court (under the Children's Act) nor the Women & Children Repression Prevention Tribunal and their functions could put a complete stop to the repression faced by women and children.

Rural Bangladesh is a patriarchal society, where religion plays a major role in governance, and while elected local representatives have a lot of influence, the religious leaders, often poorly educated, still dominate most of the local level arbitrations. The Women & Children Repression Prevention Act clearly pronounces that gender based violence shall not be dealt by the local level informal arbitrators, but the formal tribunals. However, perpetrators or their families, who in most cases are of influence at the local level, help to convene a local arbitration. In most cases, the culprit, even if identified, goes unpunished, or through a nominal punishment. Had the victim (or the family of the victim) pursued formal legal measures, the perpetrator would be facing a non-bailable arrest, and severe punishment. According to this law, the Tribunal is expected to deliver the verdict within 180 days of commencement of trial. But due to large number of pending cases, or cases on trial, delivery of justice gets delayed.

Poverty and dependence on others for survival often limits the scope of the family to seek justice, when the protector turns violator. The stigma of having a daughter with a disability in itself is a barrier and an issue of shame, when that daughter is raped, it adds further fuel to the presumed "curse" on the family! Locally influential goons often take this as an advantage,

also presuming a sense of indemnity. The victim and her family often fear further repercussions on them, if they pursue the formal legal process.

The general understanding of the law and its processes in rural Bangladesh is poor. There is a lack of knowledge that an immediate reporting and medical examination in the case of a rape is vital to the course of the legal process. As a result, even if the victim and her family can sum up their courage to pursue legal measures, it takes some time to come out of the initial shock, and then pursue the matter. By this time, most of the obvious signs are lost. The police report on the primary investigation or the medical examiner's report often turns out as inconclusive. The perpetrators also try and influence these reports on several occasions. The fund allocated to each police station for such investigation is extremely scanty. It therefore becomes an issue for the family to pay for such costs. Naturally, the party which pays more, the investigation report tilts towards their favor. When the case finally goes for trial, finding eye witnesses becomes a further barrier.

Type of disability of the victim can also complicate the proceedings of the case. Where the victim is a woman with visual disability, the opponent lawyer tries to establish that she cannot identify her victim on the stand. Where she has a hearing and/or speech impairment, the court finds it difficult communicating with her. Bangladesh still does not have a standardized Bangla sign language. Moreover, most of these people growing up in rural communities also use informal signs, which even a trained interpreter, if called in by the judge, cannot often entirely translate. There have been a few cases now in Bangladesh where the presiding judge has called for sign language interpreters, though there is no strict rule asking for it as yet. It is still at the discretion of the judge. Such miscommunication also favors the perpetrator. Where the victim is a woman with intellectual disability, she would in many cases not even grasp the gravity of the situation at all.

There have been cases where a woman with severe intellectual disability has been subjected to rape on a regular basis by a close family member, without the knowledge of the family. When such a woman was brutally raped by an external person, and the family took her for medical examination, the examiner inferred that the victim was a case of "habitual sexual act". This in turn raised a huge issue in the community on the moral character of the woman. The defense lawyer tried to make a big issue out of this. Fortunately, the judge took into consideration the intellectual disability of the woman, the level of her ability to grasp the consequences of the issue at hand, and decided against taking into consideration any act that may have happened in the past. The case is still in progress at the end of the year.

Where the victim family is poor, it becomes difficult to pursue the legal procedures, as on any date of hearing, they need to attend the court far away from home. Considering the plight of such families, the Government of Bangladesh has created a special fund, available at the district level, under the custody of the respective Deputy Commissioner, to meet such legal procedural costs. Accessing this fund is not a lengthy process either. Besides freelance practicing lawyers, there are also human rights and women's rights organizations, with branches across the entire country, which respond to the unfortunate families with lawyers and legal advice. Ain O Shalish Kendra (ASK), Bangladesh Legal Aid Services Trust (BLAST), Bangladesh National Women Lawyers Association (BNWLA) are a few such examples. While

the services of these lawyers are free, some procedural costs need to be borne by the families. In such cases, these lawyers help the families access the government funds.

The Human Rights Journalists' Forum with its branches across the country also plays quite a commendable role in raising the opinion of the local public in cases of such repression. They ensure that local and prominent national dailies and television channels broadcast the news with updates, to keep a pressure on the local administration.

The Bangladeshi general population is not well conversant on human rights laws. People also fear opting for the formal legal route, expecting it to be lengthy, complicated and expensive. Sometimes even the small local NGOs, not having the relevant legal knowledge, try to get the issue solved through the local level arbitrations. Judgment in such cases are often a few lashes of cane and a nominal fine, which is far lighter than the formal procedural judgment, which could be 7-10 years of rigorous imprisonment and a hefty fine. It is not uncommon that the local religious leader has found the victim guilty of instigating the rape, and thus also subjected to a few cane lashings. There have also been instances where the perpetrator has been ordered to marry the victim. The family already burdened with debt, and fearing a huge dowry to marry off their daughter, they often give in to this idea. They do not consider the mental anguish that the daughter would face getting and being married to the very brute who violated her! Dowry though banned, is still a reality across rural Bangladesh, and a very large cause of inhuman physical and mental torture on a woman. A perpetrator in such a case may agree to marry the victim, as this way he will get off the hook at a small price, but soon will demand the dowry and start torturing the woman. This is not something the uneducated parents foresee. This goes equally for victims with and without disability.

The Rights & Protection of Persons with Disabilities Act, 2013 has created strong provisions against such practices. Once this law gets into due implementation, the bad practices are bound to change.

### **Target 16.3**

*Promote the rule of law at the national and international levels and ensure equal access to justice for all*

The access of people with disabilities to legal and justice is highly limited in Bangladesh due to a number of factors. Firstly, there is a general lack of awareness even amongst persons with disabilities and their families on their own rights & entitlements. Secondly, proactive laws to protect the rights to their specific needs are inadequate. Thirdly, the legal system is fairly complex, complicated and time consuming, and to a great extent also beyond affordability. Fourthly, there is a lack of proper knowledge and understanding of the special needs issues of persons with different types of disabilities amongst the law enforcing agencies and legal service providers. A system is also absent in the country to disseminate appropriate information to the families of persons with disabilities. On top of all that, abject poverty often ensures that they are dependent on the rights perpetrators, against whom they have no voice, or means to put up a fight. Developing an inclusive process to address specific demands of the persons with disabilities is therefore an important demand of the time.

People with disabilities have limitation in movement and stagnancy in expanding their knowledge in the existing socio cultural phenomenon. Almost all of them have been dealing with poverty, hunger, social discrimination for ages. The result ends up in major drawbacks in their personal and social life.

Legal opportunities are not aware or even open for persons with disabilities regarding their faced obstructions in the disability ground. In judgment, courts hardly respond to victims' voices, especially for the people with hearing and intellectual disabilities. For instance, a rights-based lawyer's organization, the Bangladesh Environment Lawyer's Association (BELA) was able to take one case on violation of a disabled person's right to Court a few years back, but petition was not offered to the victim.

The discriminative position of people with disabilities in education, working environment, public communication & support, awareness raising and accessibility in society has to be taken up to the different tiers of the state and addressed together. People with disabilities are supposed to receive legal knowledge, access to justice and stay updated and educated by State on the other hand.

Lack of awareness is to be addressed through awareness raising, training on different laws like the Rights & Protection of Persons with Disabilities Act, 2013, or human rights laws like the CRPD, disability inclusive laws and so on.

As per the Recruitment Rules under the Government of Bangladesh (Bidhiboddho Protisthan shomuhe chakurir jonno adarsha probidhanmala): Chapter 2 Clause 3 section 3 subsection A (ka) a candidate may be recruited for a post if he/she is certified as medically fit. On this ground candidates with disabilities otherwise qualified are not effectively considered till now for government, autonomous, statutory body's employment. Similar rules apply to the Judicial Service. Even though there are a number of qualified advocates practicing in the Supreme Court for years together, and where according to the provisions of the national constitution vide Article 95 section 2 subsection (a) a person serving as an advocate in the Supreme Court for over 10 years qualifies appointment as a judge, there are no instances in the country as yet where a person with visual disability has been appointed as a judge.

The Adversary Trial system is followed in the proceedings of Bangladesh Courts, as such there is no provision of a jury. Therefore, the question of eligibility of jurors by persons with disabilities does not arise. On the issue of witness, Article 118 & Article 119 of the Evidence Act of 1872 concerns persons with disabilities.

#### **Target 11.5**

*By 2030, significantly reduce the number of deaths and the number of people affected and substantially decrease the direct economic losses relative to global gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations*

### ***The Evidence Act, 1872:***

#### ***Article 118: Who may testify?***

*All persons shall be competent to testify unless the Court considers that they are prevented from understanding the question put to them, or from giving rational answer to those questions, by tender years, extreme old age, disease, whether of body and mind, or any other cause of the same kind.*

*Explanation - A lunatic is not incompetent to testify, unless he is prevented by his lunacy from understanding the question put to him and giving rational answers to him.*

#### ***Article 119: Dumb witnesses***

*A witness who is unable to speak may give his evidence in any other manner in which he can make it intelligible, as by writing or by signs; but such writing must be written and the signs made in open Court. Evidence so given shall be deemed to be oral evidence.*

No court in Bangladesh has an infrastructure that is accessible or is possible through retro-fitting, to be made accessible to persons with physical disabilities, more specifically wheelchair users. The documentation that is used and/or produced is not also in any sort of accessible format. The overall environment is generally not conducive to people with psychosocial and/or intellectual disabilities either.

Over the last few years though, there have been a few examples where sign interpreters have been invited to assist in better communication with people with hearing and speech disabilities in different courts of Bangladesh. But in the absence of specific rules, and where the hearing impaired person is unable to read and write, it has solely been upon the willingness of the concerned judge to allow interpreters. Sign language is now extensively used both informally and formally. But the country is yet to have a standardized Bangla sign language. A process was once initiated in this regard, but it lacked serious commitment from the government, as a result the standardization never took place. Once that is done, such practices will hopefully become an integral part of the judicial system of the country.

The Government has taken an initiative by which all police stations across the country are gradually being made accessible to persons with disabilities. Ramps and accessible toilets are being installed as the first step. Gradually there will be provisions for people with visual and hearing/speech disabilities also. Disability related information has recently been included into the basic training courses of the police forces also. So the police forces have somewhat knowledge and understanding on dealing with and/or assisting persons with disabilities in times of need.

In all the 64 districts of the country, under the jurisdiction of the respective Deputy Commissioner (the administrative head of the district) a substantial fund has been created

aimed at disbursing to the poorer section of the communities for covering all legal procedural costs, as and where necessary. In any cases whatsoever, people with disabilities are eligible to apply and receive those funds to cover costs for any legal and/or judicial matters. But persons with disabilities and their families hardly know about this fund and thus rarely access it in times of need. With a little more awareness, especially amongst the grassroots level DPOs, this is expected to change considerably.

**Target 16.7**

*Ensure responsive, inclusive, participatory and representative decision-making at all levels*

The Rights and Protection of Persons with Disabilities Act, 2013 has mandated the constitution of committees at national, district, upazilla and town levels to implement the law in its entirety. All the committees have been made inclusive of persons with disabilities, as such empowering persons with disabilities and putting them in decision making processes. The committees are being formed. Up until now there has been no financial allocation towards the functioning of these committees. But once the allocation arrives, these committees will begin playing a crucial role towards protecting persons with disabilities and establishing their rights and freedoms on an equal basis with others.

**Target 16.9**

*By 2030, provide legal identity for all, including birth registration*

The nationality law of Bangladesh, entitled as the Bangladesh Citizenship Order, governs the issues of citizenship and nationality of the People's Republic of Bangladesh and thus legal identity of the person, irrespective of any disability. The law was first issued by the President of Bangladesh on 15 December 1972 and has subsequently been amended over the years by the Parliament.

The law grants citizenship to a person (with or without disability) whose father or grandfather was born in the territories now comprised in Bangladesh and who was a permanent resident of such territories on 25 March 1971 and continues to reside there. Citizenship is also granted to a person(s) who was a permanent resident of the territories now comprised in Bangladesh on 25 March 1971, and continues to be a resident. The law also describes Bengalis who were in the erstwhile West Pakistan during the 1971 liberation war and facing obstacles over returning as permanent residents eligible for Bangladeshi citizenship.

**Jus sanguinis**

Bangladeshi citizenship is provided primarily jus sanguinis, or through bloodline, irrespective of the place or legitimacy of the birth. Therefore, any person born to a Bangladeshi woman even illegitimately outside Bangladeshi soil would still be a Bangladeshi citizen, whereas a person born to two non-nationals in Bangladesh would not.

**Jus soli**

Citizenship is acquired at birth when the identity and/or nationality of the parents is unknown. In this regard, the child is assumed to be born to Bangladeshi national(s), and hence, given citizenship upon birth. Jus soli citizenship is also conferred upon Urdu-speaking people of Bangladesh (more popularly referred to as the stranded Pakistanis) in May 2008 by a High Court verdict.

**Naturalization**

Naturalization is not a right of any long-term resident. It is held at the discretion of the Government of Bangladesh, and may be conferred categorically or by withholding certain rights and privileges. Any adult of good character residing in Bangladesh for a period of five years (two, if married to a Bangladeshi), having resided in Bangladesh continuously for 12 months, competent in Bengali language and intending to reside in Bangladesh can apply for naturalization. The person must forfeit any other nationalities held if naturalized. Any person who is a citizen of a nation where Bangladeshis are not allowed to naturalize (for instance, Saudi Arabia) is not eligible for naturalization.

If denied, a person can appeal against the decision in thirty days, where s/he will be heard; s/he cannot appeal if citizenship is conferred by withholding certain rights. If accepted, a naturalized citizen must take an oath of allegiance within thirty days of the grant. A person is considered naturalized only after the oath.

Naturalization of an alien does not automatically extend to his spouse and children, but they may apply as soon as the naturalized alien has taken oath.

**Birth Registration**

Every child upon birth in Bangladesh is entitled to a registration, and a registration certificate, issued by the concerned local government authority. This was formalized in early 2007, through a five year project ending in December 2011. All children registered under this project would be free of any cost, and adults would need to pay a nominal fee. While this was a very successful nationwide program, it did not separately mention the disability status of a child/person.

During 2007 and 2008, for the first time in the history of Bangladesh, a nationwide National Identification & Voter Registration process had also been conducted. Principally led by the National Election commission and supported by the Bangladesh Army, this was also a hugely successful program, which identified almost all adults (18 and above) and inserted all the data into a national database. The information included a photograph and finger prints. An identity card with a national identity number has also been provided to all adult citizens. While the card does not provide any information regarding disability status, the database has retained all the necessary information. This program will be extended and updated in coming years in order to accommodate all young adults crossing the age of 18, such that they too can participate in the upcoming national elections.

### **Target 16.10**

*Ensure public access to information and protect fundamental freedoms, in accordance with national legislation and international agreements*

#### **Disability Registration**

In 2013 the Department of Social Services (DSS) under the Ministry of Social Welfare began a house to house nationwide survey to identify persons with disabilities. All information is stored in a central database, and disability cards have been issued to persons with disabilities. So far, information of just over 1.5 million persons with disabilities has been compiled in the database. Steps are being taken to expedite the process such that no one remains unregistered.

Bangladesh enacted the Right to Information Act, 2009 which has specific provisions to make public information accessible to persons with disabilities. There is a high powered Access to Information project operated under the Prime Minister's Office, which is made it mandatory upon all ministries and departments to launch official websites. Now a process is on to make all the website accessible, and all information in the websites available in accessible formats.

The government has also decided to ratify the 2013 Marrakesh Treaty to Facilitate Access to Published Works by Visually Impaired Persons and Persons with Print Disabilities.



## Goal 17

### Strengthen the means of implementation & revitalize the global partnership for sustainable development

#### Target 18

*By 2020, enhance capacity-building support to developing countries, including for least developed countries and small island developing States, to increase significantly the availability of high-quality, timely and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location and other characteristics relevant in national contexts*

The prevalence rate of disability in Bangladesh leaves much room for confusion. The national census (2011) claims this to be 1.41%, while the Household Income and Expenditure Survey (HIES 2010), a more in-depth study using Washington Group questions, and also conducted by the Bangladesh Bureau of Statistics (BBS) found this at 9.07%.

BBS makes an effort to justify this difference in its report “Disability in Bangladesh: Prevalence and Pattern” (November 2015) as follows:

*“The marked difference in the two estimates could be attributed to the differences in the criteria for identifying disabled persons and methods of data collection in the two studies. The HEIS 2010 data scales the intensity of different types of disabilities as ‘Some’, ‘Severe’ and ‘Fully unable’. Thus, persons with minor disabilities are likely to be reported under the category ‘Some’. In contrast, the Census 2011 questionnaire only records whether a person is disabled or not and thus it seems more likely that only the persons who are seriously disabled have been reported. Thus, underreporting could be one of the reasons for the lower overall disability prevalence of the census estimate. Interestingly, the prevalence of overall disability of intensity ‘severe’ and ‘fully unable’ equals 1.51%, which is close to the census estimate.”*

Fundamentally, both these studies had prepared their respective survey instruments based on the Washington Group classification, though the final questions varied considerably. As such, the effort to finding a data that is both reliable and also comparable failed to take place. While the HIES 2010 data seems to be closer to reality, it classified people with disabilities in six broad functional areas, which fall short with the disability classification suggested in the Rights & Protection of Persons with Disabilities Act, 2013. The law classifies disability (based on impairments) into ten categories. Any combination of these would be classified under the Multiple category, while there is also another called others, accommodating people with any other disabling conditions that cannot be classified under the abovementioned ten categories, but who still may enjoy the protection and rights that are enshrined in the law.

Under the purview of the Ministry of Social Welfare, the Department of Social Services (DSS) has been conducting a disability identification survey of persons with disabilities in Bangladesh over the last three years. In its first phase so far, 1.5 million people with disabilities have been identified and their information has been entered into a national database. The database will be opened to public sometime later this year. This survey was aimed at house to house disability identification only, not at all to find a prevalence rate.

Disaggregated data by age, gender, educational status, income, ethnicity, geographic location, type and grade of disability, services received etc shall be available about persons with disabilities from this database. So except for prevalence rate, this database could be an interesting and important tool from planning purposes. The initiative has been expanded till 2021, hoping that by that year, all persons with disabilities of the country will be reached and their information will be included into the database.

# THE WAY FORWARD

The followings are a set of recommendations to find effective ways to move forward with the SDGs, ensuring that issues and concerns of persons with disabilities are meaningfully addressed:

## **Indicators:**

Disability specific indicators are not available against all the targets for all the goals. These need to be identified and endorsed by the government. Only then information will be available on the actual progress against the SDGs.

## **Statistics:**

No planning can be effectively done without proper statistics. The SDGs have emphasized that data needs to be specific, authentic, reliable and comparable. Without thorough disability disaggregated data, information against indicators will always be inadequate. Thus progress against SDGs will not be truly reflective. Universally accepted methodology, such as the Washington Group questions need to be adopted in all statistical initiatives.

## **Implementing inclusion:**

While the SDGs have categorically addressed inclusion of all vulnerable groups of people, with a special emphasis on persons with disabilities, it is expected that all development programs and initiatives undertaken by the government and the other mainstream development actors alike are actually addressing inclusive practices. Unfortunately this still is not the case. For example, the professionals that provide rehabilitation assistance to persons with disabilities (physiotherapists, occupational therapists, speech & language therapists etc.) are still not accepted or recognized as part of the mainstream health work force. Similarly, special education and the special education teachers are not under the purview of the mainstream education system. All development initiatives must address inclusive practices through respective mainstream systems. Infrastructure, including transportation must become disability friendly.

However, even more important steps towards implementing inclusion are actually including people with disabilities within the mainstream planning, implementing and review processes, and believing that their voices matter.

## **Amendment of laws, policies and program implementation guidelines:**

Several laws, policies, plans, program implementation guidelines of several ministries & departments need to be revisited, amended, updated and reformed to duly address inclusion from a human rights perspective.

## **Funding:**

It has been five years since the enactment of the RPPD Act 2013, yet not a single Taka has been allocated so far towards its implementation. The committees need to be activated and strengthened with adequate budgets. Moreover, adequate funding for inclusion needs to be allocated within the mainstream national budget against the programs of respective ministries.

## **Advocacy with All:**

The Disability Alliance on SDGs recognizes that it needs to form greater alliances with more relevant stakeholders, including DPOs and NGOs working in the field, in order to influence change. It also needs to interact more strongly with the mainstream civil society platforms towards ensuring that all development initiatives truly address inclusive practices across the country.

## CONCLUSION

Disability has, and always will remain in our society, with some amount of social stigma attached to it. But in the backdrop of all these problems, the silver lining is that, the government is showing an increasing interest in the Disability sector, and at the same time, due to the SDGs, a keen interest to work hand in hand with the non-government development and private sectors. The government has all the best intentions in heart, and therefore it is necessary to develop further technical knowledge and skill as per changed situation. NGOs on the other hand have the technical knowledge & skills, but neither the power, nor the required financial resources. So to make some real progress in this field in a fast developing country like Bangladesh, an all out effort from all quarters is mandatory.

People with disabilities themselves, their organizations, other organizations working in this field and all the advocacy platforms now need to be engaged in all the steps for establishing their rights & privileges, as equal citizens of the country.

Measures should be taken to ensure that every child with a disability gets access to basic & quality education, every disabled person has an opportunity for a respectable employment and/or income, every built infrastructure & transportation system is equally accessible to people with disabilities, every disabled person has equal access to the legal system & basic public utilities, and that every disabled person can live a life with dignity & freedom.

Like gender development issues, Disability must also be recognized as a crosscutting mainstream development agenda for all.

Only then this country will ever practically come a step closer to achieving the SDGs and other national & international commitments, and we shall collectively bring about some positive changes in the lives and livelihoods of the people with disabilities in this country – and any other country in this world.



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