

# Centre for Disability in Development (CDD)



Bringing hope, dignity and meaning to life



## ANNUAL REPORT

July 2022 - June 2023

## OUR VISION

**An inclusive  
world where  
all persons  
with  
disabilities  
live with  
dignity**



Rahat (03), a child with disability from Manikganj, is in a jovial mood with his mother at his home.

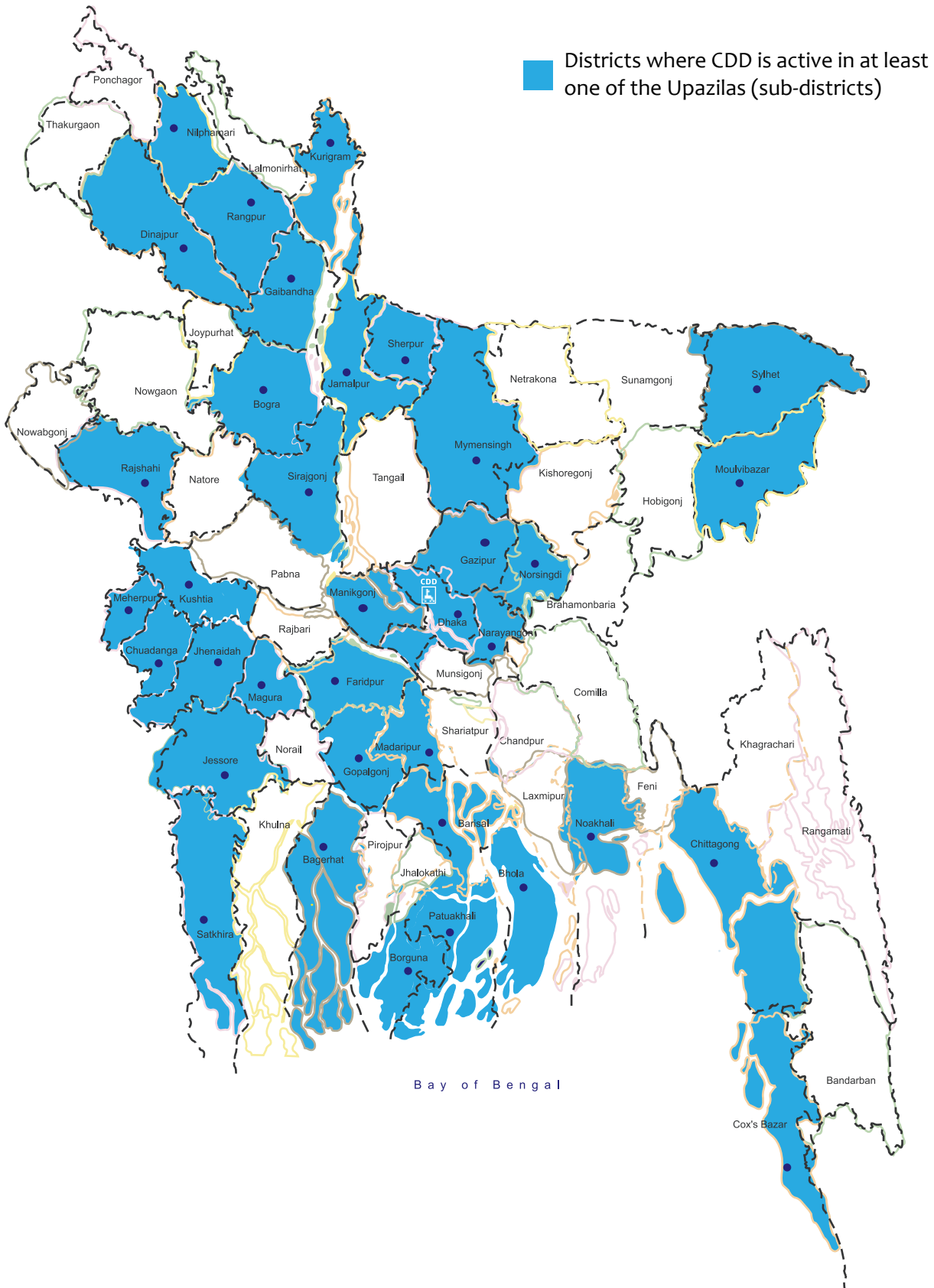
## OUR MISSION

**To contribute to creating a sustainable inclusive environment where persons with disabilities are meaningfully participating in the mainstream development process, on an equal basis with others**



Ward level community gathering prior to organizing public dialouge at Juarianala Union of Ramu Sub-district, Cox's Bazar.

# WHERE WE WORK



## WHO WE ARE

The Centre for Disability in Development (CDD) is a not-for-profit organization established in 1996 to contribute towards the development of a more inclusive society for persons with disabilities

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Panna Tudu is with her floor-mat weaving machine that she uses to produce floor mats at home (Kaharole, Dinajpur).

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Executive Director  
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Bringing hope, dignity and meaning to life



## Message from the Chairman

I am deeply honoured to be the Chairman at the Centre for Disability in Development (CDD).

CDD's remarkable journey, overcoming various obstacles to integrate Disability-concerns into mainstream development, is truly praise-worthy.

I am once again thrilled to witness the publication of CDD's Annual Report, covering the period from July 2022 to June 2023. This report takes us on an illuminating journey into the positive impacts that CDD has had on the lives of persons with disabilities and their families. It vividly demonstrates how CDD continues to implement innovative and inclusive interventions while sharing its invaluable expertise with both governmental and non-governmental partners. While remaining committed to its focus on the current thematic areas, I wholeheartedly applaud CDD's efforts to explore new avenues and enhance existing ones. All these initiatives have made a lasting impact, significantly improving the lives of persons with disabilities.

Before I conclude, I must express my profound admiration for the firm dedication, generosity, and hard work exhibited by every member of CDD. It is their collective effort that has made these remarkable accomplishments achievable.

My heartfelt gratitude extends to each and every one of you.



**Jowaherul Islam Mamun**  
Chairman  
Centre for Disability in Development (CDD)

## Message from the Executive Director

It is with a profound sense of privilege and great pleasure, I present the Annual Report of the Centre for Disability in Development (CDD). This report provides a comprehensive overview of CDD's initiatives and achievements spanning from July 2022 to June 2023. Through a diverse range of projects, CDD has firmly pursued its mission to ensuring the protection of the rights of persons with disabilities throughout Bangladesh.

We wholeheartedly express our gratitude for the extensive collaboration and support received from both local and national government entities during this period. We also extend our sincere appreciation to our invaluable donors and local partners for their steadfast commitment to our mission.

Last but certainly not least, we acknowledge the invaluable cooperation of the persons with disabilities with whom we have had the privilege to work with.

CDD remains resolute in its mission to ensure the full and equal participation of persons with disabilities in their communities, benefiting society as a whole.

As you explore the contents of this Annual Report, we hope you not only find it enlightening but also informative. Your support and interest in our work are deeply appreciated.



**A.H.M. Noman Khan**  
Executive Director  
Centre for Disability in Development (CDD)

## Information about Executive & General Council Members

The Executive Council (EC) and the General Council (GC) are the two dynamic governing bodies of CDD that have the required excellence and expertise at every sector for the smooth and effective operation of the organization. The GC is the supreme authoritative body of the organization. The GC approves the annual plan and budget along with annual activity reports of CDD. The General Council meeting is held once a year.

The Executive Council (EC) of CDD comprises of 9 members - the Chairman, the Vice-Chairman, the Treasures, the Member Secretary and five (05) other members who are elected from and by the General Council. The EC is the authoritative body for policy approval and it also provides technical support and guidance for proper implementation of policy framework. It employs auditors for reviewing CDD's accounts. The Executive Council meeting is held after every three months.

### Executive Council Members:



**Mr. Jowaherul Islam Mamun**  
Chairman



**Adv. Md. Musherraf Hossain  
Mazumder**  
Vice Chairman



**Mr. Serajul Islam**  
Treasurer



**Adv. Nazrul Islam**  
EC member



**Dr. Nafeesur Rahman**  
EC member



**Ms. Sufia Haque**  
EC member



**Ms. Mohua Paul**  
EC member



**Mjor (Retd) Md. Zahirul Islam**  
EC member



**Mr. A.H.M. Noman Khan**  
Member Secretary  
&  
Executive Director

### General Council Members:

Professor Dipak Kumar Roy	Member
M. Osman Khaled	Member
Mr. Khandakar Jahurul Alam	Member
Shah Md. Anowar Kamal	Member
Md. Shafiq-ul Islam	Member
Mr. Md. Golam Ahia	Member
Mr. Shafiqul Islam	Member
Mr. Saidul Haque	Member
Mr. Shashanka Saadi	Member
Dr. A.H.M. Nurul Hakim	Member
Ms. Tahmina Rahman	Member
Ms. Hasne Ara Dalia	Member
Dr. Helal Uddin Ahmed	Member
Mr. Vashkar Bhattacharjee	Member
Mr. Ashfaque-ul-Kabir	Member

## EXECUTIVE SUMMARY

The Centre for Disability in Development (CDD) has implemented a total of 31 projects from July 2022 – June 2023. This Executive Summary provides an overview of CDD's interventions and impacts to promote its mission and vision in line with Sustainable Development Goals (SDGs).

A special focus of CDD this year was on eye-health. Through community out-reach eye-health interventions, a good number of people received eye-care support.

CDD's year-wise interventions has been presented according to its thematic areas. Relevant human stories and features have been included to showcase the impacts of the interventions.

A total of 1521 persons with disabilities received general health services. Additionally, the sensitization of 534 mainstream health actors (by CDD) on disability issues was a vital step towards creating a more inclusive healthcare environment.

During this period, Handicap International Federation and Centre for Disability in Development (CDD) signed a memorandum of understanding for better strategic collaboration. In addition, CDD started its journey as the Strategic Partner Organization (SPO) of Liliane Fonds (LF) to facilitate the Child Empowerment Programme (CEP) in Bangladesh. Through Liliane Fonds, we also connected with MIVA, which supports both disability specific and mainstreaming projects in the country.

A total of 1112 children with disabilities enrolled in schools. CDD distributed Braille materials, Braille Slate, and Abacus to 872 children with disabilities and supported 578 children with disabilities with academic skills. A total 1120 mainstream education-actors were involved in advocacy campaigns and awareness workshops.

Around 1373 persons with disabilities were connected through Self-Help Groups (SHGs) in the community. Furthermore, 429 persons with disabilities integrated into government and private services.

Total 438 persons with disabilities were provided with IGA and entrepreneurship skill development support. CDD-projects also provided financial support for economic activities.

Around 200 LGI functionaries participated in workshops, exposure visits, and sensitization events while 720 persons with disabilities were involved in social accountability engagements.

Initiatives were taken from grass-root to national level to promote Inclusive Disaster Risk Reduction and Climate Change Adaptation (CCA) actions. Around 630 persons with disabilities were mobilized through activation of Disaster Management Committees and urban volunteer groups. Training was provided to 2289 persons with disabilities on disability-inclusive disaster risk reduction. While a total of 885 persons with disabilities received training on climate change adaptation and mitigation.

This reporting year marks the sixth year of the Rohingya exodus. It has become a protracted crisis now. CDD has taken into account the needs of both Forcibly Displaced Myanmar Nationals (FDMNs) and the host communities at the onset of the displacements. CDD has facilitated strategies to connect humanitarian and development actions in its humanitarian response programme in Cox's Bazar, Bangladesh. In this reporting period, CDD provided direct support to 11793 persons with disabilities and indirectly supported 34353 persons residing in Rohingya Camps and host communities.

In this reporting period, CDD provided training and orientation to 289 persons with and without disabilities on safeguarding issues. CDD has made significant strides in its various initiatives throughout the year, touching the lives of thousands of persons with and without disabilities and their families. These initiatives are indicative of CDD's effectiveness in promoting a more inclusive and equitable society in Bangladesh.

## Community Approach to Eye Care for the People in Rural Areas



Ms. Fahmida Mostafa, Upazilla Nirbahi Officer (UNO), Ramu giving her speech while inaugurating the Eye Screening Camp on March 02, 2023 where local government functionaries and the Director of CDD are present.

Many of them do not access the treatment service. This lack of services could lead them to permanent blindness.

Several factors deter community people from seeking eye care services and surgical interventions. These are, inaccessible venue, lack of knowledge, wrong perceptions, fear of medical interventions, limited to no eye care services in proximity, poverty, related costs, concern of losing daily incomes after surgery of the patients, discrimination based on gender-age-disability, a lack of interest & willingness of some family members.



Women patients, wearing black eye-glasses who undergone eye surgery, showing their discharge certificates of the hospital.

In Bangladesh, quality eye care is not available everywhere. It is not always affordable and accessible. Primary eye care is the essential building block for prevention of blindness in the community. Despite nationwide programme of Bangladesh Government for promoting quality eye care, still community people are not adequately aware of and informed about the eye health services, especially cataracts which can be easily treated if identified and brought under the treatment. Most of the people are not informed that cataracts are the leading preventable cause of blindness in Bangladesh. The community people do not have required information on how to prevent common eye diseases.

**With the support of several projects, CDD implemented the following interventions:**

- I. Conduct outreach eye health events in order to improve eye health conditions of the community by preventing avoidable causes of blindness.
- II. Promote Inclusive Eye Health (IEH) at district locations, including creating provisions for accessibility in the partner hospitals for persons with disabilities and other marginalized groups.

A medicine desk in the outreach eye camp where villagers are standing in a queue with the advice notes to collect their prescribed medicine.



### Eye Care Services Offered by CDD in the Community :

- Identification of possible eye patients from the communities to bring in the eye camps through household surveys and using Washington Group Questions.
- Identify people with cataracts for providing them with required surgery .
- Identify people who need treatment for conditions like blocked tear ducts, Pterygium, cataract.
- Provide free eye medicine for all in need.
- Identify people who need medicine to treat their eyes for allergic conjunctivitis, and other chronic eye infections.
- Identify refractive errors to prescribe correction glasses.
- Providing eyeglasses to correct refractive errors like myopia and presbyopia.
- Providing support to perform necessary surgeries for blocked eye treatment, cataract in partnership with Cox's Bazar Baitush Sharaf Hospital (CBBSH).
- Impart health education to the community on proper care of eyes and vision.
- Capacity building of eye service providers at district level so that eye health facilities would be more disability and gender inclusive
- Conduct accessibility audits and needs assessments at NGO partner hospitals for identifying the gaps in physical infrastructure and addressing gender & disability inclusion.
- Build a bridge with sub-national eye care service providers.
- Provide technical support to the partner hospitals to organize the coordination meeting at district level with organizations working with people with disabilities, women, older people and ethnic



An eye-patient, on a wheelchair, is going through eye-screening at the hospital.

minority groups to mobilize target groups for Inclusive Eye Health (IEH).

### Composition of Outreach Eye Care Team

The eye care team included ophthalmologists, paramedics, counsellors, refractionist and the medical technicians specializing in eye care and surgery.



Selected surgery patients showing their advice notes after 1st eye screening camp just before they leave for the hospital from the camp site.

## CDD provides technical support to the following hospitals for promoting the Inclusive Eye Health (IEH) in the projects' districts.

1. Khulna BNSB Eye Hospital
2. Dr. K Zaman BNSB Eye Hospital Mymensingh
3. Dristidan Eye Hospital Bagerhat
4. Addin Welfare Centre Jashore
5. Dhaka Progressive Lions Eye Hospital Narsinghdi, & Madaripur
6. Prof. M A Matin Memorial BNSB Eye Hospital Sirajganj,
7. Quasem Foundation
8. Community Eye Care & Research Centre Rangpur



All the patients, who have undergone eye-surgery, boarding the eye hospital's bus, commuting from Cox's Bazar eye hospital to Ramu.

## The Struggle of Sonubala that Made Her Way to Eye Camp

Sonubala Barua resides in the Juarianala Union of Ramu Upazila in Cox's Bazar. She is a widow and now in her early seventies, she was afflicted by cataracts, a condition often associated with advancing years. Her eye ailment had progressed to a point where she required assistance for her daily activities, robbing her of both her independence and her eyesight. Life took a distressing turn for this elderly lady when her deteriorating vision caused her to stumble and suffer a physical injury—a broken arm.

Sonubala Barua described her plight, saying, "My eyesight had deteriorated to the point where I couldn't see anything clearly, whether it was near or far."

Unfortunately, Sonubala Barua could not afford the necessary medical treatment for her cataracts due to her family's financial difficulties. Her son, the sole breadwinner of the family working as a rickshaw-puller, found it challenging to allocate both time and money to seek out an eye specialist for his mother. This grim reality underlines the devastating impact of preventable blindness; it doesn't merely rob a person of their vision but also their ability to live independently. Furthermore, Sonubala faced difficulties in accessing government safety-net programs as she did not meet the requirements for eligibility. Despite having four grown-up sons, not all of them were contributing to the family's well-being.

As part of a project's initiative (supported by ASB), she attended the free eye screening camp and was subsequently referred for bilateral cataract surgery. She had no fear for surgery. The surgery successfully removed her cataracts from both eyes, restoring her ability to see clearly. She could now carry out her daily activities without relying on assistance, such as going to the toilet, which previously required the help of her daughter-in-law.

She has proactively been participating in different community engagement events of the project and sharing her experiences to the audience with intense emotions.



Sonubala is pointing to her eye that underwent surgery.

*A joyous Sonubala, wearing a smile on her face, expressed her gratitude, saying, "I am less likely to fall now as I can see things clearly. You, the staff members of CDD, have become like parents to me. While my biological parents gave me life, you have given me a second chance at life by restoring my eyesight"*

## How A Young Mother Benefitted from an Outreach Eye Health Intervention



Arjina, after three days of her surgery. Her scar marks are seen between her left eye and nose after performing DCR eye surgery.

Arjina, a 32-year-old young mother of five children, is among the five Dacryocystorhinostomy (DCR) patients benefitting from eye health support. Arjina and her family members are settlers of the Juarianala Union of Ramu Upazila.

For the past two years, Arjina had been dealing with a blocked tear-duct, a condition that caused her constant discomfort, eye discharge, and pain. Her eyes remained perpetually moist due to the clogged tear-ducts, making it incredibly challenging for her to carry out her daily activities. As a woman member of her family, she had no choice but to continue performing daily household chores, which, unfortunately, exacerbated various other problematic eye-related conditions for both of her eyes.

Despite recognizing the severity of his wife's condition, Belal Hossain, Arjina's husband and the sole breadwinner of their family, struggled to find the time and resources to take her to see a doctor. The demands of earning a livelihood always took precedence over seeking medical treatment for his wife. On one occasion, Arjina managed to consult an eye health professional who recommended a surgery costing around eighteen thousand taka (18,000 BDT). Unfortunately, this amount was far beyond what her family could afford.

In March 2023, Arjina and her husband came to know from community-interns involved in this ASB supported project that CDD was organizing a free eye screening camp. At the eye camp, eye-health professionals identified that she would require a DCR surgery.

Post-surgery, the project continued to support Arjina by covering transport costs for her visits to the eye hospital for follow-ups and collecting free medicines. It was possible to support her through the partnership between the project and the eye hospital. This time, her husband gladly accompanied Arjina to the eye hospital for her post-surgery follow-ups.

Today, Belal and Arjina both are happy and relieved. That burden of wife's health has been lifted off from the shoulder of Belal. Free from irritation and pain, Arjina can efficiently manage her household duties while caring for her children and husband with newfound ease and joy.

***Initially, her husband hesitated to allow Arjina to undergo surgery, as it would entail a three-day stay at the hospital, leaving their two-year-old child at home. However, after thoughtful counseling by the CDD staff members, Arjina's husband gave consent to the surgery. Following the successful surgery, Arjina was liberated from her previously miserable life.***

## Promoting a Disability Inclusive Safeguarding Culture: CDD's Year Review and Future Commitments

The Centre for Disability in Development (CDD) is committed to its safeguarding practices. CDD's aim is to enhance awareness and capacity of all stakeholders, from management and staff to self-help groups, disability-specific organizations, consultants, and volunteers on safeguarding.

CDD's training activities on safeguarding include both online and offline courses ranging from three-day sessions to half-day briefings. The topics covered span from the definition of safeguarding and protection, the importance of safeguarding for children and adults at-risk, identifying safeguarding incidents and signs of abuse, Code of Conduct (CoC), reporting process, where and when to report, and the use of reporting and risk register formats among others.

During this reporting period, a total of 221 out of the 341 staff-members from different sectors and levels have undergone safeguarding orientation/training at least once. CDD's awareness-raising initiatives expanded beyond training sessions to one-on-one sensitization with individuals, families, and communities.

To strengthen safeguarding, CDD introduced tools like Safeguarding Self-Assessment, exercised event-specific risk assessments and development of mitigation plans. It also worked with local partners to strengthen their safeguarding policies and capacities, emphasizing safeguarding of children and adults at-risk as a cross-cutting agenda. CDD believes that Safeguarding is an evolving concept and there's always more that can be done to strengthen the mechanism.



A training on safeguarding and its related policy and practice is being organized by CDD. Israth Jahan Rupa (of CDD) is conducting the session.

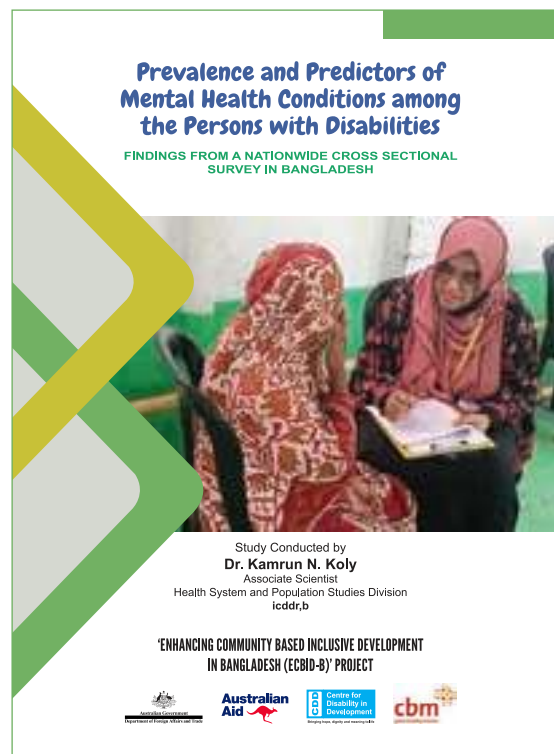
## HEALTH AND REHABILITATION

CDD has been extending comprehensive health and rehabilitation services, specifically targeting enhanced cognitive, sensory, and physical functionalities. Its comprehensive approach encompasses support for mobility, independent life-skills, and overall quality of life. These services involve identification of specific needs, delivering a spectrum of services ranging from clinical assessments such as vision and hearing screening to psychosocial and rehabilitation therapies.

These initiatives take place either at local service hubs or directly at individuals' doorsteps, thereby ensuring inclusivity and convenience. The functional assessments conducted by CDD play a pivotal role in supporting the rehabilitation and learning processes of children and young persons with disabilities.

CDD's ongoing provision of year-round therapeutic services, encompassing physiotherapy, occupational therapy, speech therapy, and mental health counselling, is instrumental in improving daily living, communication, and mobility skills. CDD is actively engaged in manufacturing and distributing customized assistive devices developed at the National Resource Centre on Assistive Technology (NRCAT).

By focusing on strengthening the health and well-being of persons with disabilities and their caregivers, CDD embodies the essence of global SDG goal 3.



'Prevalence and predictors of mental health conditions among persons with disabilities: Findings from a nationwide cross-sectional survey in Bangladesh' has been jointly published by CBM Global Disability Inclusion, CDD and icddr,b. The study has been conducted under the Enhancing Community Based Inclusive Development in Bangladesh (ECBID-B) project that is supported by CBM Global Disability Inclusion Bangladesh with the funding from Australian Government through the Australian NGO Cooperation Program (ANCP) and implemented by CDD. A cross-sectional study of adults who have disabilities was conducted from August to October 2022 in eight divisions of Bangladesh. This study aimed to investigate the prevalence and contributing factors of depressive, anxiety symptoms and suicidal behavior among persons with disabilities. These findings reported the vulnerability of persons with disabilities to mental health conditions indicating the importance of addressing mental health and increasing the availability of inclusive services for persons with disabilities in Bangladesh.

## Accessing Government Health Services: Benefits of Outreach Health Programmes



Villagers, who were supported by CDD, showing their NCD registration cards, issued from the NCD corner of Ramu Upazilla Health Complex along with medicines and doctor's advice notes as well.

The Non-Communicable Diseases (NCD) Corner initiative by the Government of Bangladesh, represents a significant step in the country's public health infrastructure. These specialized healthcare services have been established at various sub-national public health facilities, offering a ray of hope to rural patients struggling with non-communicable diseases such as high blood pressure, hypertension, diabetes, and chronic obstructive pulmonary diseases.

However, despite the government's commendable effort in rolling out this initiative, there remained a substantial gap in connecting NCD patients with these specialized healthcare services. One of the major factors was the lack of awareness about the existence and benefits of NCD corners. Many patients lacked appropriate information about the services available to them.

Additionally, the costs associated with transportation to reach the health facilities, especially for those residing in remote corners of the locality, posed a significant barrier. Concerns about the loss of income on the day of a visit to the facility, the absence of family support, and the fear of previous experiences of unsatisfactory treatment due to the overcrowding of NCD corners during working hours also discouraged patients from seeking care.



Upazilla Health and Family Planning Officer (Ramu), Chairman (Juarianala Union) along with the Resident Medical Officer and other medical-officers of Ramu Upazilla Health Complex are attending a consultation meeting with CDD at the health complex, Ramu.

Acknowledging these challenges, the project (supported by ASB) undertook efforts to connect and strengthen collaborations with the existing government health service providers. This was done to bridge the linkage gap between the NCD patients and health service providers. This connectivity ensured that NCD patients could access the much-needed care they deserved from the ongoing government-run health programmes and a functional referral mechanism was established.

In January 2023, a consultation meeting was held at Upazilla Health Complex, Ramu which was attended by Dr. Nobel Barua, the Upazilla Health & Family Planning Officer (UH&FPO) – Chief of the Upazilla Health Complex, along with the Resident Medical Officer (RMO) and other doctors of the hospital. This meeting was organized for the government health authority at the sub-national level to inform them about the project and to seek their support prior to organizing outreach NCD awareness sessions and health camps.

Following these meetings, doctors of the hospitals attended the health camps. In these health events doctors explained about available government health services for the rural people, low income families, economically weaker section of the society and how to obtain them at union level and sub-national levels.

The doctors provided prescriptions and advice notes after screening and the assessment of the patients. Later on the identified NCD patients were sent to the hospital, where they were enlisted as NCD card holders by the hospital. These NCD cards will allow them to obtain free treatment, including medicine, from the hospital.

Besides, the health screening camps, separate awareness sessions were organized only for NCD patients who were suffering from chronic illness due to blood pressure, diabetics, Chronic Obstructive Pulmonary

Disease (COPD), asthma etc. In these sessions, the doctors explained about appropriate lifestyles, food habits, importance of regular and timely medicine intake, maintaining positive attitude while battling such prolonged illness.

Through collaborative efforts with the Ramu Upazilla Health Complex, CDD organized a total of three (3) general health screening camps and three awareness meetings on Non-Communicable Diseases. In these events, 294 persons directly received services from registered doctors from the upazilla health complex. Among these persons, 82 were diagnosed as NCD patients. Thirty of these diagnosed patients were subsequently registered in the NCD corner of the government hospital, ensuring that they could access the essential care and treatment required to manage their conditions effectively. This step marked a significant stride toward improving the accessibility and awareness of NCD services for the local population.

Regarding the health camp, Dr. Md. Nurul Huda Mozumder, a Medical Officer at the Ramu Upazilla Health Complex, expressed his satisfaction with the positive outcomes of the outreach health programme. He stated, "Typically, people come to obtain medicines from local pharmacies without the guidance of medical professionals, which is not a sound practice. But the health camp, organized by CDD, helped community people avail the opportunity to receive prescriptions from registered doctors. Moreover, when people visit the upazilla hospital, we often find ourselves in difficulty to provide them adequate time and services due to our various commitments to the hospital. But in the camp, we were able to provide comprehensive assessments for each person."

In addition to taking the community people to the health camps, the identified patients received continued support and follow-up care from CDD staff members and community interns. These dedicated personnel offered assistance to the patients when they visited the hospital to consult NCD doctors. Among the service recipients from the health camps were persons who have been coping with high blood pressure, dealing with chronic obstructive pulmonary disease.

One of the community-interns of the project had been diagnosed with respiratory complications a year ago. Each of these persons was duly registered as NCD patients at the NCD Corner, receiving identification cards for future service provisions.

These registration cards contain comprehensive medical histories, enabling the service recipients to revisit the



During the health camp, Ripon Choudhury, resident Medical Officer at Ramu Upazila, gave information about available health services in the community.



Mr. Nazmul Bari, Director at CDD, handing-over a crest to Dr. Nobel Barua acknowledging his contribution as a Public Health Official in the smooth implementation of the project.

corner after a month for follow-up consultations, medical advice, and medication collection as needed. Notably, these community people are benefiting from free-of-charge healthcare facilities at the NCD corners. They have undergone screenings, received treatment, and obtained essential lifestyle modification advice, all without any cost.

The collaborative efforts of the ADH-CDD-ASB project interventions have been instrumental in the success of the community outreach health programme. This initiative directly delivered health education and screenings to underserved communities, effectively reducing the indirect costs that previously hindering community people from seeking necessary medical care. Through this initiative, the project aimed to facilitate a meaningful partnership between communities and government health providers, working collectively towards the shared goal of providing accessible healthcare services for all, a goal that would have been challenging to achieve if done independently.

"Without organizing these outreach health camps in our villages, these community people would not have had such convenient access to medical check-ups, information about the NCD corners, and the opportunity to be enlisted as NCD patients in the government's healthcare programme. As a Community Intern, I personally benefited from the camp where I consulted with a doctor, learned about the NCD corner, and received my registration card from the upazilla hospital. I was even able to access medicine for my respiratory condition directly from the hospital."

**Iti Barua (20), Community Intern**

## Increasing Access to Health Facilities in Community through Empowering Self-Help Groups

The Putting Persons with Disabilities at the Centre of Humanitarian Preparedness and Response (PPDCHP&R) project emerges as a light of hope for persons living with disabilities in the remote and disaster-prone Jatrapur Union of Kurigram district.

The One Stop Service Centre (OSSC), a government facility under the Ministry of Social Welfare, offers therapy, counseling, and guidance in all districts of Bangladesh, as well as in Kurigram Sadar (town). Unfortunately, these important services remained out of reach for persons living in remote areas.

The project, together with the Self Help Groups (SHG) of persons with disabilities and the officials of the OSSC at Kurigram have been raising awareness about the barriers faced by persons with disabilities while accessing healthcare at district and sub-district level. They have conducted Cafe dialogues, learning dissemination workshops, and are maintaining regular communication with relevant departments.

Three health camps were held which provided free services to 149 persons with disabilities. In addition, the project provided free medications to 51 people who could not afford medication. The initiative was praised by the Chairman of the Union, who acknowledged its potential to change people's lives.

This is a good example about involving self -help group of person with disabilities to bring health services in the community.



An outreach health camp is being conducted together with Upazila Health Complex and OSSC in Kaharole Upazila, Dinajpur.

## Entering into New Dimension: Addressing Multiple Disabilities with Home-Based Support

Sadia, a seven-year-old girl at Sirajganj attends pre-primary classes at a local government primary school after obtaining year-round Home-Based Education (HBE) and rehabilitative services.

Sadia has been identified as having trouble sitting and standing appropriately, as well as executing basic daily activities such as eating, cleaning, and clothing herself. Fine motor issues made it difficult for her to grasp objects, and she drooled excessively. Sadia's parents were unable to provide for her health care due to financial constraints. And they never considered her schooling.

Based on the functional assessment (FA), an Individual Education Plan (IEP) was developed by the Home-Based Education Facilitator (HBEF) in 2022 as part of CDD's Shikbo Sobai project. The primary goal of the IEP was to teach Sadia how to perform Activities of Daily Living (ADL) and to reduce her saliva production through primary level saliva control therapy.

Sadia received assistance for her vision, hearing, and neurological assessments as part of a health camp organized by the project to help children with severe and multiple disabilities like her. She was provided with a standing frame. The HBEF paid her visits twice a week and provided at least two hours of home-based service. The HBEF has also begun to provide regular support for developing communication, pre-school skills, and essential counseling. The facilitator taught Sadia's mother how to provide timely and tailored care so that she can practice at home.

Sadia's health began to improve gradually as a result of the dedicated treatments she received. The excessive saliva dribbling subsided, and she managed to eat, wash her teeth, use the restroom, and dress herself with assistance. She also improved her standing and walking abilities, albeit with some assistance. Now, Sadia's family is more committed to providing her attention. Sadia is successfully enrolled in a primary school in January 2023. Sadia attends school on a regular basis, accompanied by her mother. Sadia is often invited to play with the children next door, which fosters social contacts and happiness for her.



An outreach health camp is being conducted together with Upazila Health Complex and OSSC in Kaharole Upazila, Dinajpur.

## EDUCATION



Representatives from the USAID, RTI, and CDD along with the staff members of the Shobai Miley Shikhi project gathered for a group-photo after the launching event of the project.

CDD is resolute in its commitment to **SDG 4: Quality Education** through its comprehensive approach to fostering inclusive education.

Through different projects, trained-staff members of CDD formulate Individualized Education Plan (IEP) by conducting needs assessment. In this reporting year, over 1,126 IEPs has been developed. Considering the importance of Home-Based Support (HBS), especially for children with severe disabilities such as deaf-blindness, CDD provided tailored teaching materials to 872 children with disabilities (M- 509, F- 363) to address their sensory and developmental impairments.

Initiatives such as the Community Resource Centre (CRC) equipped caregivers with skills to teach and support their deaf children in communication and education. A total of 124 (M 73, F 51) deaf children and their caregivers received CDD's support through Community Resource Centre (CRC).

Through sensitization and training, 65 schools became disability-inclusive where teachers and school management committees gained disability-knowledge and learned specialized teaching techniques with the support of CDD.

## Sobai Miley Shikhi - Everyone Learns Together: Ensuring Quality Primary Education for all Children Including Those with Disabilities



SCO and SCF Foundation Training for the project staff under the Sobai Miley Shikhi project.

The Sobai Miley Shikhi - Everyone Learns Together project (funded by the United States Agency for International Development - USAID and supported by Research Triangle Park, N.C - RTI International) of CDD has been working to enhance the learning opportunities for children with disabilities in 1,537 government primary schools over five years (May 2022-April 2027).

Through this project around 30 field-staff have been trained and 1,200 school teachers as well as School Management Committee (SMC) members have been oriented.

Shobai Miley Shikhi project aims to strengthen the existing education system while introducing innovations to enhance inclusive school environments and instruction by increasing the ability of parents, caregivers, and communities to support inclusive education and strengthening government capacity to plan, deliver, and manage quality inclusive education programme.

## Dipti Rani: A Mother's Journey from Silence to Empowerment

Dipti Rani, a housewife in a village in Jhenaidah, faced an unexpected challenge when she discovered that her only son, Hrithik Das, was deaf. Her husband is a local barber and their financial situation added to the complexity of their predicament. Initially, they had little knowledge of how to support or communicate with a deaf child, leaving Dipti feeling lost.

Their lives took a turn in 2020 when CDD's community based project team, supported by the Deaf Child Worldwide, reached out to them and enrolled Hrithik as one of its project-participants.



Dipti Rani is assisting her son Hrithik's education at the Community Resource Centre (CRC) in Jhenaidah district.



A teacher is communicating with Hrithik using sign language during school lessons.

Despite having only primary-level education and no prior knowledge of sign language, Dipti embarked on a challenging journey. She received home-based training in communication and literacy as part of the project's activities. Balancing household chores and a restless four-year-old was tough, especially with her husband's fluctuating income due to the COVID-19 pandemic.

Yet, through her patience, hard work, and dedication, Dipti managed to learn sign language and establish meaningful



Dipti Rani and her son Hrithik, their glowing smile and the presence of school bag symbolize the bright dreams and their hopeful future.

communication with her son. Hrithik was admitted to a mainstream primary school at the age of six, just like any other child of his age.

However, challenges persisted. Dipti struggled to support her son with homework due to her limited education, and Hrithik found it hard to grasp concepts.

In 2022, a ray of hope emerged with the establishment of the Community Resource Centre (CRC) under the Comprehensive Education Support for Deaf Children in Bangladesh (CES-DCB) project. Dipti began attending CRC regularly, where she received training and

support from project staff. Here, she met other parents facing similar challenges, realizing that her struggle was not unique. Also whenever she was struck with her son's education, other caregivers and CRC supervisor came to her aid. Drawing from their experiences, she gained newfound confidence.

***When asked about her ability to continue her son's education if project support ceased, Dipti responded confidently, "I may not be highly educated, and our finances may be limited, but with the knowledge, resources, and support I've gained from the project, I'm certain I can find a way."  
- Dipti Rani***

Dipti, once confined to the kitchen, now frequents government offices to secure facilities for her son and other deaf children. She actively participates in events, speaking confidently to various authorities. She knows she is not seeking charity but her son's right.

Today, Hrithik is in second grade and no longer needs coaching to study. Improved communication and the use of deaf friendly teaching methods have transformed his attitude towards learning.

## LIVELIHOOD AND EMPLOYMENT

CDD has initiated various programmes to include persons with disabilities into diverse livelihood options. This involves emphasizing vocational skill development, providing financial support as seed capital, and establishing connections with government and non-government organizations serving persons with disabilities. CDD actively conducted training for persons with disabilities through various projects and facilitated their access to vocational training programmes offered by governmental and non-governmental entities.

Persons with deafblindness were enrolled in motorcycle servicing and tailoring training. After completing the training, 14 persons with disabilities secured jobs or started their own businesses related to the training. Out of 15 participants (8 males and 7 females), 14 completed the skill development training.

Supported by the DAHW German Leprosy and Tuberculosis Relief Association, CDD implemented a project addressing the needs of persons affected by leprosy and persons with disabilities. The project provided nutritional essentials and livelihood support to 260 households, creating income opportunities and supporting nutrition intakes.



### Key Findings of the Baseline Study

A baseline survey was conducted under the 'Resilience strengthening of vulnerable populations in Northern, Western and Eastern Bangladesh through a network approach of 5 partner organizations' project to measure and compare the income level of the project-participants, before and after its successful implementation.

01. At village level, target group members (44.00%) have income of an average BDT 5000 to 10000 taka monthly;
02. The main IGA of the people is non-agro-based occupation, around 44.1%.
03. Those who are depended on agro based livelihood they have other assets for additional income; and
04. 51.1% of the households have two or more sources of income, such as raising small animals or cultivating crops.

## Panna Tudu: Story of a Journey Worth Reading



Panna Tudu (40) is with her floor-mat weaving machine that she uses to produce floor mats at home.

Panna Tudu, a 40-year-old woman, embodies a story of strength and determination. She is married and has a daughter (currently pursuing a nursing education). Hailing from the indigenous Santal community, Panna's early life was marked by poverty and limited educational opportunities. She was married at a tender age, curtailing her education at the fifth grade. Her husband, who had been the family's sole breadwinner as a van-puller, faced unemployment after suffering a stroke, a devastating blow that coincided with the onset of the COVID-19 pandemic.

The pandemic posed an additional challenge in Panna's life, making it even more daunting to secure her family's daily sustenance. However, hope arrived in the form of the Rapid COVID-19 Humanitarian Response project [supported by DAHW German Leprosy and Tuberculosis Relief Association and implemented by Centre for Disability in Development (CDD)] that changed the course of her life.

Amid the COVID-19 humanitarian response, Panna and her family received essential COVID-19 safety kits, sanitation materials, and food support. Furthermore, Panna received materials (of BDT 20,000) to boost her livelihood prospects, particularly in the fields of handicrafts and vermicomposting.

With prior experience in crafting floor-mats using tant fabric and having completed a 10-day training course on floor-mat weaving from a local NGO, Panna was equipped to embark on floor-mat production. Today, she crafts an average of twelve floor-mats each day, retailing them at a price of BDT 30 each. Additionally, she gathered earthworms, bins, rings, and canes to create vermicompost, an organic fertilizer produced through earthworms. Nowadays, she produces 120 kilograms of vermicompost each month, selling each kilogram for BDT 30. Her main clientele comprises of local potato-farmers who use her compost in their fields, resulting in a significant profit. Beyond this, Panna's determination shone through as she combined the support from the project with her personal savings to invest in a cow. With plan and execution, she has been rearing the cow, with hopes of securing a profitable sale in the near future.

## Revealing Opportunities through Computer Literacy: Rakib's Journey to Employment

Rakib, a 22-year-old youth, lives in Rangpur Sadar Upazila of the Rangpur district. Rakib has partial deafblindness which added a layer of complexity to his life.

Amidst this adversity, Rakib developed a deep passion for computer technology. He spent a substantial portion of his daily routine to observe the activities at a nearby computer sales and services shop.

Under the Disability Inclusive Vocational Training and Youth Employment (known as Task Order-12) project, implemented by CDD, Rakib got admission to the Freelancing and Computer Training Institute in Rangpur Sadar Upazila. Recognizing Rakib's aptitude for information and technology, the project selected him for its intervention.

The institute focused on equipping him with fundamental computer skills, including email operations, English and Bangla keyboard typing, printing via computer, internet browsing, and basic Microsoft Word proficiency. This project-intervention followed the Master Craft Person (MCP) model, where Rakib was mentored by a skilled individual of the trade.

Rakib commuted nearly three kilometers daily to reach his MCP's shop. There he underwent training, consisting of a four-month pre-training phase and a six-month main-training phase. During this period, Rakib honed his basic computer skills. Upon completing his training, Rakib became a proficient computer user. He secured employment at a local coaching centre, where he now earns a monthly income of BDT 3000. His remarkable journey to self-sufficiency and economic contribution to his family has gained the admiration of those around him, including his family members and neighbours.



Rakib (22), a person with partial deafblindness from Rangpur is working with his computer at his workplace.

## RIGHTS AND EMPOWERMENT



A meeting of Self-Help group of persons with disabilities in Dinajpur is going on.

Persons living with disabilities in Bangladesh are equally entitled to all the rights and fundamental freedoms as articulated in the national Constitution for all citizens of the country.

CDD's empowerment interventions are designed to equip persons with disabilities with the necessary support and opportunities for their self-determination. A comprehensive range of support-services encompassing communication, awareness, sensitization, mobilization of persons with disabilities, formation of SHG and OPD, building leadership capacity of persons with disabilities and capacity building on different aspects, significantly empowered persons with disabilities, enhancing their ability to assert their rights independently while engaging in the rights realization activities.

In this reporting period, 496 persons with disabilities received various government and non-government entitlements and successful advocacy efforts led 123 persons with disabilities to becoming members of different committees of the local government. CDD established 20 new SHGs this reporting year, comprising a total of 389 members with disabilities. SHGs served as a vital platform for both asserting rights and raising awareness within communities. Currently, 1317 persons with disabilities are active SHG members. CDD has worked to enhance the knowledge and support services for SHG members, providing training on leadership and rights.

## Digital Literacy for Persons with Disabilities



A workshop focusing on the inclusion of people with disabilities in digital services is in progress at the Upazilla Health Complex in Bagha, Rajshahi.

CDD places significant emphasis on digital inclusion for persons with disabilities. The aim is to empower them and their organizations with necessary digital and technological skills. Therefore, they could avail the existing opportunities and contribute towards their social and economic wellbeing through collaboration with state and non-state actors.

Inclusion of People with disability in Digital Services (IPDDS), a project implemented by the Centre for Disability in Development (CDD), with the support of CBM Global Disability Inclusion, aims to contribute to the quality of life of

persons with disability through digital literacy. In this reporting period, 350 persons with disabilities received information and orientation on digital literacy while 150 government officials, local government representatives, and 30 high-ranking officials from Information Communication and Technology (ICT) division, access to information (azi), and Bangladesh Computer Council were sensitized and committed to promoting digital inclusion. Moreover, 82 master-trainers with disabilities have been trained to work within their communities, orienting others on digital inclusion under the IPDDS project.

CDD's commitment to disability rights and empowerment is evident in its inclusive, multifaceted approach, involving collaboration with persons with disabilities, their caregivers, the government, communities, and various stakeholders to create an inclusive and empowered society.



*“Digital literacy and digital accessibility can reduce the barrier of persons with disabilities. And, it enables them to enjoy all services and entitlement independently which promote their empowerment.”*

**- Mohammed Mosharef  
Hossain Bhuiyan  
Project Manager, CDD**

## Empowering Carers through Self-Help Groups: A Platform of Carers



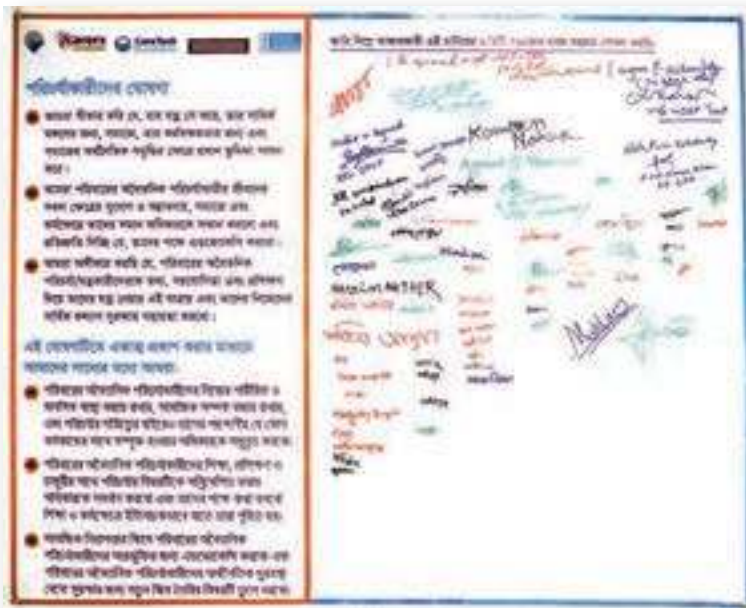
CDD along with Carers Worldwide celebrating International Carers Day 2022 in Dhaka on October 19, 2022.

With the support of Carers Worldwide, the Carers Project has been facilitating social and economic inclusion of carers (a person who takes care of a person with disability in the family) in the Savar Upazila (in the outskirts of Dhaka, Bangladesh).

The project's initiatives are designed to empower caregivers, equipping them with the necessary resources and support to establish sustainable livelihoods alongside their caregiving responsibilities. The project provides essential physical and mental health assistance to the carers.

During the period spanning from July 2022 to June 2023, a total of 1008 caregivers and 1008 persons with disabilities received critical medical, mental health, and therapy services. One hundred and fifty-two carers attended livelihood trainings on cattle rearing, poultry rearing, and small business management, along with income-generating support for 205 carers who collectivized through forming 50 carers Self Help Group.

In an effort to advocate for carers' rights on various policy levels, a Carers Association was formed, uniting representatives from the 50 SHGs. This initiative led to the creation of the first Carers Association in Bangladesh, with 21 carers elected to represent their peers. Today, these 1,008 carers from 50 groups collaborate and convey their collective voice to the Carers Association, supporting the rights and recognition of all carers of persons with disabilities.



Participants of the International Carers Day 2022 signed on the Carers Charter to express their solidarity with the rights and entitlements of the carers on October 19, 2022.

An inspiring transformation has taken place within these SHGs, where approximately 40% of carers are now directly involved in livelihood activities which is made possible through the groups' collective funds. Now, these carers have become contributors to their families' well-being and economic stability. Carers SHGs are passionately championing the rights of all carers of persons with disabilities. It is an effective platform of the carers.

## Blossoming Beyond Challenges: The Journey of Rehana Begum

Rehana Begum's journey is a shining example of human strength and overcoming tough times. She was born in 1986 and had a happy childhood. However, at the age of two, a sudden illness left her with a paralyzed hand, presenting an immense challenge.

Having a disability made life tough for Rehana. Simple things were difficult and she could not do things she wanted to like playing sports or going to social events. Her own family did not treat her well and even forced her into a child marriage. But she did not give up on her dreams. She worked hard and finished her Higher Secondary Certificate (HSC) examination.

Life has its ups and downs for everyone. She found a group called Barishal DPOD that helps people with disabilities. Though her initial involvement was brief due to financial constraints, Rehana's determination endured, even in the face of personal tragedy when her supportive husband passed away.

Since 2022 as a staff member of CDD and CBM supported project in Barishal, Rehana got better opportunity to advocate for more power and access of persons with disabilities in the society. She had contributed to mobilize persons with disabilities in the community in order to form Self-Help Groups.

Rehana's efforts bore fruit as she sent five individuals for sewing training and facilitated the enrolment of 16 children with disabilities in primary school.

Her community looks up to her as a role model. Recognized for her tireless work, Rehana received the "Joyeeta Award" in December 2022 from Bangladesh Government's Department of Women and Children Affairs. This prestigious award not only filled Rehana with pride but also ignited her dedication to equality.

In Rehana's own words, **"This is your life – make your own choices. Keep looking forward, and you'll reach your goals."** Her story embodies the transformative potential of empowerment and determination.



Rehana Begum with her 'Joyeeta Award' which she received on December 2022 from Bangladesh Government's Department of Women and Children Affairs.



Rehana Begum is facilitating a courtyard meeting with her community people to raise awareness.

## LOCAL GOVERNANCE



A meeting with the representatives of different committees for the inclusion of persons with disabilities at Jamalpur is being presided by Litus Lawrence Chiran, UNO, Jamalpur Sadar Upazilla, Jamalpur.

Parishads, the smallest rural administrative units, to Upazilla, district and divisional administration levels.

The National Survey of Persons with Disabilities 2021, Bangladesh informs, 7.07% of the population have at least one functional difficulty. Therefore, around 12.6 million people experienced disability in Bangladesh. Most of them reside in rural areas. The impact of their disability is exacerbated by poverty and a myriad of societal barriers to access health & rehabilitation, education, livelihood, information, community life and other services and opportunities.

One of CDD's interventions is to strengthen the capacity of the local government institutes at sub-national level that is the nearest service providers for the rural community. This extensive initiative spans from Union



To make meaningful engagement with LG functionaries and create access for persons with disabilities in UP Standing Committees, the 'Access to justice through gender equality, disability and social inclusion in Bangladesh' project supported by Manusher Jonno Foundation and the United States Agency for International Development USAID, organized sensitization workshop in Jamalpur Sadar Upazila and Islampur Upazila of Jamalpur district.

In this reporting year, a total of 200 LGI personnel underwent training on disability-inclusive development, participated in workshops, exposure visits, and sensitization events. Additionally, three validation workshops were conducted last year under two projects of CDD. These workshops gathered Union Parishad members, Ward Councillors, and the Mayor of Savar Municipality to validate feedback and make recommendations for including persons with disabilities in Disaster Risk Reduction (DRR), emphasizing

gender equality and intersectionality.

In this reporting period, CDD supported various LGIs in organizing disability-inclusive meetings and events. In collaboration with CDD, 35 Ward-level meetings took place across four Unions in Ramu and Teknaf sub-districts, involving 1,976 community members.

On the other, the success of these interventions is evident in LGIs as they are increasingly adopting a more disability-inclusive approach and encouraging greater representation of persons with disabilities.

*“I am well aware of the activities of CDD. Sometimes I had opportunity to attend events organized by CDD.*

*Government of Bangladesh has introduced free legal aids for the vulnerable rural community people to protect and defend their rights. Despite the fact, people do not know the information about available free legal aid facilities or how to access legal aid.*

*CDD is making community aware specially persons with disabilities and their family members about these legal aids facilities.*



*As this area is surrounded by Brahmaputra and Jamuna rivers, people live in char. Activities of community based workers of CDD are creating awareness amongst rural community on Disability Rights & Protection Act 2013, available legal services and other safety nets programme at Union and Upazilla Level.*

*CDD is also influencing Union Parishads to be more disability and gender inclusive. As a result, 9 No. Goalerchar Union has allocated 1 lac BDT in their 2023-2024 Union Parishad budget for development activities of persons with disabilities.”*

**Md. Ruhul Amin**

Upzilla Social Welfare Officer  
Islampur, Jamalpur

## Inclusive Disaster Risk Reduction, Climate Change Adaptation and Humanitarian Actions

CDD has been working towards ensuring disability inclusion in Disaster Risk Reduction (DRR) and Climate Change Adaptation (CCA). Applying the twin-track approach, CDD collaborates with both the community and decision-makers to develop plans, policies, and coordinated actions for disability-inclusive DRR, climate change adaptation, and humanitarian action. CDD supports groups of persons with disabilities by strengthening their resilience capacities and providing training to representatives of Disaster Management Committees at various levels.

During this reporting period, CDD continued to provide technical support to Disaster Management Committees (DMC) for inclusive Community Risk Assessments (CRA), Risk Reduction Action Plans (RRAP), and Contingency Plans using inclusive guidelines. Additionally, CDD conducted numerous trainings and orientations to enhance the capacities of persons with disabilities and representatives of DMC in Disability Inclusive DRR and CCA. Furthermore, CDD organized outreach events such as mock drills, simulations, pot songs, street dramas, and classroom awareness campaigns on disability-inclusive DRR and CCA to raise awareness among local communities.

CDD demonstrated proficiency in influencing policymakers to adopt inclusive DRR mechanisms, including organizing significant events and conducting studies such as accessibility audits. CDD was also engaged with various DRR and CCA organizations through formal discussions and knowledge-sharing events. During the reporting period, CDD reached out to 4108 persons at-risk, including 1267 persons with disabilities, activating and supporting DRR-based structures and committees. Aside from that, CDD oriented a total of 3174 community members on disability-inclusive DRR and CCA adaptation through diverse outreach events.

Recognizing climate vulnerabilities and specific risks faced by groups such as persons with disabilities, CDD provided Climate Mitigation Tools to households headed by persons with disabilities, disadvantaged women,

and ultra-poor people. Rainwater Harvesting Systems and Solar Panels were distributed in Sarankhola Upazila to mitigate vulnerabilities. CDD supported high-risk households in implementing Disaster and Climate Resilient Homestead Gardening practices and facilitated engagement in climate-smart alternative livelihood options.

CDD also provided technical support to the Disaster Response Team, specifically the Cyclone Preparedness Program, on disability-inclusive search, rescue, and evacuation. Enhanced capacities resulted in the successful evacuation of 385 persons with disabilities during Cyclone Sitrang. In the aftermath, CDD promptly provided dry food to over 300 affected households.



Kohinur Begum is watering her climate resilient vegetable-garden at her home.

CDD aligns its DRR & CCA efforts with Sustainable Development Goals (SDGs), particularly SDG 11: Sustainable Cities and Communities and SDG 13: Climate Action, by prioritizing disability inclusion in disaster risk reduction (DRR), climate change adaptation, and humanitarian response.

## Kohinur Begum: Overcoming Adversity and Empowering Community Resilience

With a sack slung over her back, Kohinur Begum feeds her goats, balancing on two crutches. Moments later, she is seen in her homestead garden, resilient in the face of challenging climates. Despite never surrendering to physical disabilities, the impact of climate change has affected her abilities. Kohinur lives in the Rayenda Union of Sharankhola Upazila, a coastal district in Bangladesh prone to natural disasters.

In this region, the increase in land salinity and water scarcity are all attributed to climate change. Declining agricultural productivity has led to a rise in the population of impoverished individuals, including Kohinur. However, she refuses to give up. Instead, she has turned her adversity into strength, moving forward.

Under the South and Southeast Asia Integrating Resilience in Risk Management, Social Inclusion and Socio-economic Development project implemented by CDD, Kohinur has been provided with financial assistance for alternative livelihoods.

Kohinur utilized the funds to purchase four goats and with the births of baby goats, she now has ten in total. Additionally, she cultivates her homestead garden using resilient seeds obtained from the project which can withstand the changing climate.

This not only provides her with extra income from goat farming and gardening but also supplements her family's nutrition.

To ensure safe source of drinking water, the project has provided water tanks for rainwater harvesting. Additionally, Kohinur received solar panels from the project to use during power outages, further enhancing her family's resilience.

Kohinur has not only focused on her personal development but has also actively engaged in the training provided by CDD to empower persons with disabilities. Through this support, she has undergone training on various topics, including disability rights, disaster response, shelter management, climate change impacts, and climate-resilient practices. Taking on the role of chairperson in the SHGs established under this project, she diligently fulfills her duties.

As self-sufficient as she is, Kohinur has tirelessly worked to empower local women and persons with disabilities. With the backing of this group, she strives to integrate persons with disabilities into mainstream society. She raises awareness about the importance of clean water usage and encourages others to adopt eco-friendly practices, such as using Bandhu Cula (friendly stoves).

Additionally, Kohinur plays a vital role in using the extra profits gained from the Village Savings Loan Approach (VSLA) to support the education, health, and medical needs of underprivileged children, including those with disabilities. She actively advocates for environmental conservation and urges others to adopt clean energy sources



Kohinur from Sharonkhola is collecting clean water from the water tank she received for rainwater harvesting.

## Validation Workshop of DRR & CCA Related Policy Review in the Lens of Disability and Gender Inclusion with National Level Government Officials

The Centre for Disability in Development (CDD) and the Centre for People and Environment (CPE) collaborated on a comprehensive review of the policies related to Disaster Risk Reduction (DRR) and Climate Change Adaptation (CCA) in Bangladesh, with a specific focus on gender and disability inclusion. To validate the findings of the study, a workshop was organized by CDD and CPE on May 08, 2023, at the conference room of the Department of Disaster Management (DDM). The workshop was graced by the presence of Mr. Mijanur Rahman, the Director General of DDM, who attended the event as the Chief Guest.



Validation Workshop on DRR & CCA Related Policy Review in the Lens of Disability and Gender Inclusion with National Level Government Officials organized by CDD and CPE on May 08, 2023.

Cyclone Shelter Construction, Maintenance, and Management Policy 2011 were elaborately discussed referring the significant challenges of women and persons with disabilities.

During the workshop, the study's findings were formally presented where it was emphasized that while Bangladesh is globally recognized as a role model in climate change adaptation and disaster risk reduction, there is still much work to be done in terms of disability and gender inclusion. Despite the debate about disability-statistics in Bangladesh, efforts by the government through the Bangladesh Bureau of Statistics (BBS) and the National Survey on Persons with Disabilities (NSPD) were also highlighted. The existing gaps in policy and practice levels regarding disability and gender inclusion, particularly in the

## Strategic partnership: Handicap International Federation-Humanity and Inclusion and Centre for Disability in Development (CDD)



The Country Director of HI and the Executive Director of CDD exchange the signed MoU on their Strategic Partnership.

On 15 June, 2023, Handicap International Federation and Centre for Disability in Development (CDD) signed a memorandum of understanding for better strategic collaboration in delivering quality and inclusive services for the persons with disabilities and people who are most at risks, in Bangladesh.

Country Director Mr. Rajesh Chandra, Handicap International Federation-Humanity and Inclusion and Mr. AHM Noman Khan, Executive Director, CDD signed this agreement on behalf of the respective organization.

## Safe and Accessible Water, Sanitation & Hygiene (WASH)



Women of Ramu, Cox's Bazar, a rural area, are collecting clean water from a tubewell to meet their families' daily WASH needs.

Access to Water, Sanitation, and Hygiene (WASH) is a fundamental human right, as recognized in the 2010 United Nations General Assembly Resolution 64/292 and the Sustainable Development Goals (SDGs). As with all SDGs, Goal 6: Clean water and sanitation, follows the guiding principle of "leave no one behind". Barriers to accessing WASH services & facilities disproportionately affect people with disabilities, which impacts their health, livelihood, and education opportunities.

During this reporting year, CDD has given particular attention to the use of WADI device within its WASH programme. Through this initiative, persons with disabilities and the users were educated on the importance of safe water and sanitation by Community Facilitators (CFs).

Union-based WADI Apex Body has been established, comprising members from Self-Help Groups of WADI users. This body served as a platform for knowledge sharing and learning. To facilitate this learning-exchange, selected SHG members went for exposure visits that allowed them to interact with established groups in various locations and gain valuable insights on the WADI initiative.

The commitment of CDD to SDGs, particularly SDG 6: Clean Water and Sanitation and SDG 10: Reduced Inequalities, is evident in its dedicated efforts to address the limited access of persons with disabilities who often face barriers to Water, Sanitation, and Hygiene (WASH) services.

## Transforming Lives through WADI



*Asma Begum, a WADI device user from Sarankhola, Bagerhat, holding the WADI device in one hand and a bottle of clean water in the other, purified using the WADI device.*

According to the World Health Organization (WHO) 663 million people still lack access to drinking water sources that are protected from external contamination. The absence of proper water disinfection triggers health and environmental issues that translate into worldwide economic problems. People in rural areas of Least Developed Countries (LDCs) are the most affected and have poor access to safe drinking water.

Asma Begum, is one of the 7,110 persons benefitting from the WADI project of Centre for Disability in Development (CDD). She is a resident of Razapur village of Dhansagor Union in Saronkhola upazila, Bagerhat. Asma's daily struggle revolved around securing safe drinking water for her family of seven members. Each day, Asma had to go into the nearby forest to gather firewood for boiling water. She had to go to a distant river to collect water, despite its salinity, as there were no alternatives for obtaining drinkable water.

One day, while collecting firewood in the forest, Asma was bitten by a venomous insect. As there was no government hospital nearby, Asma had no choice but to seek the treatment of a local kobiraj (quack doctor). This is just one incident of many of Asma in pursuit of her safe drinking water. Later on, her husband, urged her to use chemical methods like 'Fitkiri' to purify drinking water. Asma followed this advice, but it failed to prevent waterborne diseases from affecting her family, especially her children. Having failed in this, her husband decided to purchase firewood with their limited income. Her husband earns from fishing for six months and remain unemployed for the remaining six months. A ray of hope emerged when a community-facilitator (under the WADI project) included her in the WADI-user Self-Help Group (SHG). She was provided with a WADI device.

Asma started to use the WADI device with a lot of satisfaction. Asma says, "Initially, its effectiveness was met with scepticism by my neighbours. However, as we started using it and saw our children free from waterborne diseases, we became firm believers in the effectiveness of this device." The WADI device not only reduced the burden of managing safe water and the expenses associated with firewood but also afforded Asma more time to devote to her domestic responsibilities. Besides, she and many thousands more like her also received WADI devices who no longer used firewoods to boil water. Hence, they all contributed to the reduction of carbon emission.

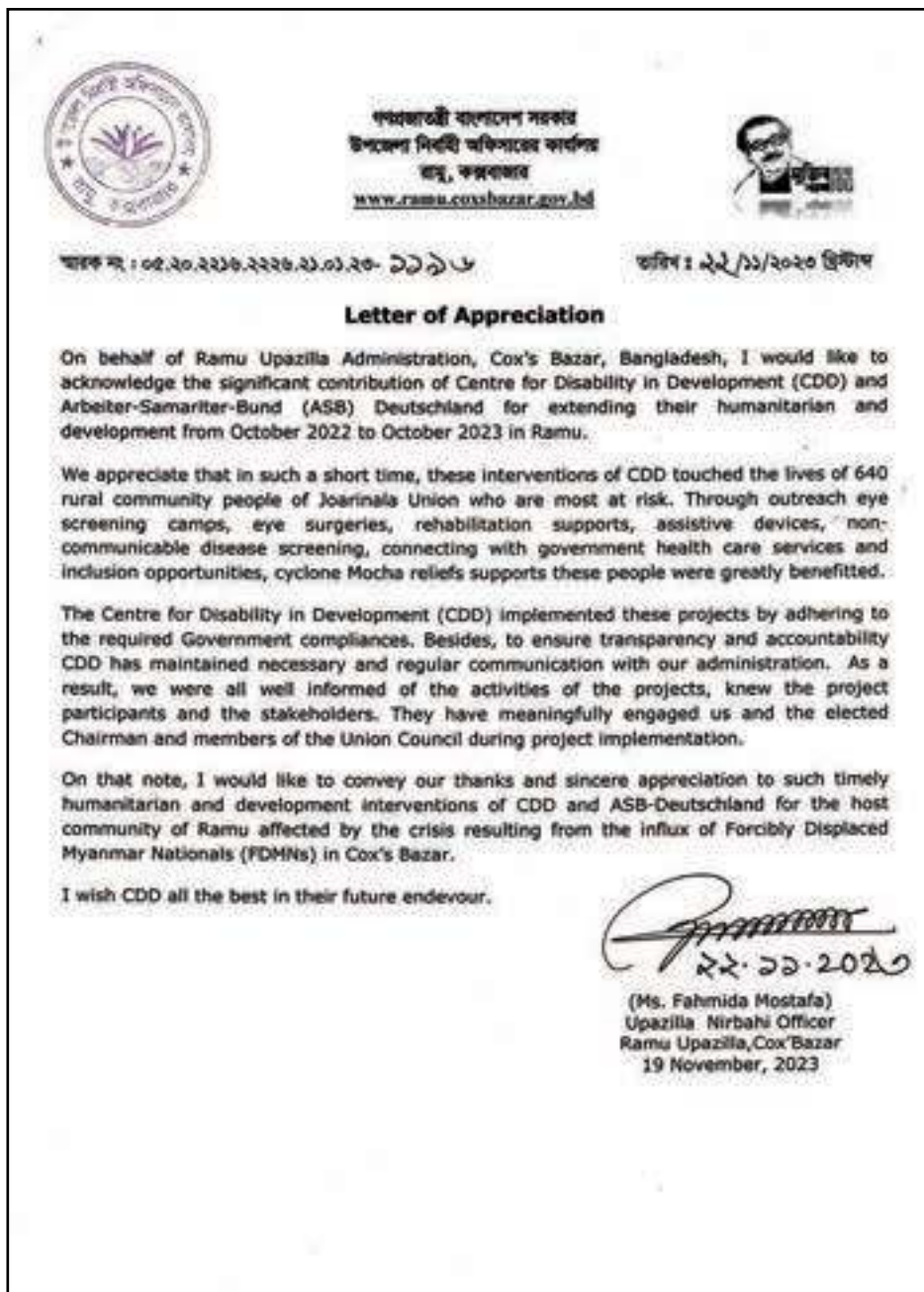
### WADI

WADI is a solar-powered UV measurement device that visualizes the process of solar water disinfection in a simple manner. Obtaining safe drinking water with WADI can be achieved through five simple steps. The solution is tested and endorsed by the World Health Organisation, meeting its microbiological performance criteria and is classified for providing targeted protection. WADI is simple, reliable, and easy-to-use. It requires no spare parts, consumables, and is the first water disinfection product without accumulating running costs for the user.

(Source: <https://solarimpulse.com/solutions-explorer/wadi>)



## Protracted Crisis: Humanitarian Response Programme for the Forcibly Displaced Myanmar Nationals (FDMN) and the Host Community in Cox's Bazar, Bangladesh



This reporting year marks the 6th year of the Rohingya exodus to Bangladesh. It has now become a protracted crisis. Since, 2017, the Rohingya influx created a severe humanitarian crisis in Bangladesh, with the largest refugee camp in the world in the Cox's Bazar district becoming the temporary home to hundreds of thousands of Rohingya people.

In Cox's Bazar, the negative impacts have been borne by the poorer segments of the local host community. The influx of the FDMNs has hugely impacted on the living standards of these residents, leading to a series of adverse consequences.

The development and humanitarian nexus in Cox's Bazar recognize the interconnected nature of prolonged crises, frequent natural disasters, and conflicts that blur the line between immediate assistance and long-term development, necessitating an integrated approach. This shift is driven by shared goals, such as promoting community well-being, emphasizing resilience building, facilitating local

ownership, and ensuring equal and meaningful participation for all, aligning with various SDGs.

CDD has taken into account the needs of both FDMNs and host communities at the onset of the displacement and hence, facilitated strategies to connect humanitarian and development actions from its own experience. Thus, to support the host communities, CDD-implemented projects contributed to enhance social cohesion amongst different population groups in the community.

For the Forcibly Displaced Myanmar Nationals (FDMNs), CDD's services included multi-disciplinary rehabilitation services provided by professional therapists aimed at assisting people regain physical and mental functions affected by various impairments. It also offered hearing and visual screening services, metal and wooden assistive devices, spectacles, hearing aids, artificial limb provision, mental health and psychosocial support services, protection services, and conducted shelter adaptations to improve accessibility.

A significant achievement during this period was the launching of services on Bhasan Char, extending vital support to FDMNs in this new location.



Mr. Rajesh Chandra, the Country Director of Handicap International (HI) along with colleagues met with the representatives of Self-Help Group (SHG) of persons with disabilities in Chakaria, Cox's Bazar.

For the host communities, efforts have focused on improving the lives of individuals with disabilities and vulnerable groups through various initiatives like comprehensive health and rehabilitation services, outreach eye health services, create linkages and support for Non-communicable diseases (NCD) through Upazilla Health facilities, strengthening local governance institutions for creating more access for persons with disabilities, increased citizen engagement etc. In this reporting period, CDD provided direct support to 11793 persons with disabilities and indirectly supported 34353 persons residing in the Rohingya Camps and host communities.

## Jahangir Kabir, a Rohingya person served

Mr. Jahangir Kabir (34) a Rohingya-community person has four family members. His legs gradually weakened due to typhoid fever. Because of his physical condition he was carried by the other people when crossing into Bangladesh from Myanmar.



A member of CDD's Home-Based Rehabilitation (HBR) team assisting Mr. Jahangir Kabir with his therapeutic exercises in the Rohingya camp, Cox's Bazar.

His health status was deteriorating day by day after coming to Bangladesh. He had several consultations with different health professionals but his condition did not seem to improve. During a regular household survey, CDDs' home-based rehabilitation team identified and assessed him. After a detailed assessment, the rehabilitation team provided him with therapeutic exercise, assistive devices, and trained his caregiver. Moreover, to reduce his existing barrier to mobility, the rehab team coordinated with site development and the WASH sector and later modified his shelter and pathway.

At present, Jahangir Alam can perform his daily living activities and visit his neighbors with the supervision of a caregiver, whereas previously he needed maximum support from his wife. He also accompanies his wife in receiving humanitarian assistance.

***He is now leading a more meaningful family life. "I thought that my journey through life was ending and I wouldn't survive like others. Now, I am getting new hope and hoping for a better future."***

## Integrating Rehabilitation into Government Health Services



Mr. Rajesh Chandra, the Bangladesh Country Director of Handicap International (HI), along with other HI colleague and staff-members of CDD, during their visit to the Functional Rehabilitation Service Center at Chakaria Health Complex, Cox's Bazar.

Supported by the Handicap International- Humanity & Inclusion (HI), Bangladesh, CDD has undertaken an initiative of providing rehabilitation services by establishing Functional Rehabilitation Service Centers at the Ramu and Chakaria Upazila Health Complex in Cox's Bazar in collaboration with Ramu Upazilla Health Complex, Chakaria Upazila Health Complex. Memorandum of Understanding has been signed between CDD and the Civil Surgeon Offices of Cox's Bazar and Noakhali to initiate the operation of three functional rehabilitation centres.

At these locations, CDD operates hospital-based functional rehabilitation centers staffed by dedicated rehabilitation professionals. The doctors of these health complexes refer patients with need of rehabilitation services to these rehabilitation centers.



A host community project-participant is receiving therapeutic services from the Functional Rehabilitation Center established by CDD.

*“It is important to have rehabilitation services in the health complexes at sub-national level. I have seen how people can benefit from these services made available at the same location. I appreciate CDD and Handicap International- Humanity & Inclusion (HI), Bangladesh for their substantial contributions.”*

**Dr. Nobel Kumar Barua**

Upazila Health and Family Planning Officer  
Ramu Upazilla Health Complex

## Meeting Critical Service Needs in Bhasan Char, Noakhali

The Government of Bangladesh plans to relocate around 100,000 Forcibly Displaced Myanmar Nationals (FDMN) to Bhasan Char, with the goal of reducing camp congestion and alleviating pressure on local Bangladeshi communities. Currently, around 30,000 people reside in Bhasan Char. During the initial relocation of FDMNs to Bhasan Char in December 2020, CDD was one of the 22 NGOs that responded to the government's initiative and at that time supported the process. In January 2022, CDD conducted an initial needs assessment in Bhasan Char, which identified a significant lack of essential services, including specialized medical care, rehabilitation services, psychosocial counselling, assistive devices, and necessary home modifications to enhance accessibility.

In October 2022, CDD finally expanded its services in Bhasan Char by introducing facility-based rehabilitation services and subsequently to ensure inclusivity, CDD initiated Home-Based Rehabilitation, Protection, and Mental Health services for FDMNs living in Bhasan Char. CDD's Bhasanchar operation is supported by the Handicap International- Humanity & Inclusion (HI), Bangladesh through the back donor support of United Nations High Commissioner for Refugees (UNHCR) and German Federal Foreign Office (GFFO).

Within Bhasan Char, CDD is part of the Protection and Health, Nutrition, WASH (Water, Sanitation and Hygiene), and MHPSS sectors. CDD also maintains a strong working relationship with relevant government organizations, including but not limited to the Office of RRRC, Camp In-Charge (CiC) Office, Office of the Civil Surgeon, the Bangladesh Navy, and relevant security agencies.

CDD's Prosthetic team providing support to a project participant (child) in Bhasan Char, Noakhali.



An MHPSS Officer of CDD offers Psychological First Aid (PFA) and emotional support to Rohingya Children at the Cyclone Center, Bhasanchar.



## Walk the Talk: Youth Community Interns from the Host Community



Two community interns are conducting an interview with a project-participant.

Employment opportunities in the development and humanitarian sectors for local young people are limited, especially for the ones without experience in terms of education, work experience, skills etc. This opportunity is even narrower if they are persons with disabilities, women and from other minority communities.

In the ongoing humanitarian interventions, most of the time, the experienced youths from outside the local areas are employed by the development and humanitarian organisations, leaving the local marginalised youths unemployed, as they lack the required experience. This adds to another form of local tension between the host community and people from outside the district who receive better employment opportunities from I/NGOs.

This is why, CDD took a pilot initiative at Ramu where a total of nine rural youths were given the unique opportunity to engage in humanitarian-development work, carefully considering a wide range of criteria including educational background, disability, gender, and ethnic identity. This approach aimed to create a more inclusive and equitable employment environment, allowing marginalized local youths from the host community to contribute to the humanitarian-development efforts in their community. The engagement of youths from different communities has created a good example of inclusion.

They were trained, coached and mentored by the project team. Engaging in the project, these community interns were given the opportunity to do community work by the staff-members of the project. They gained practical experience in various areas, including meeting facilitation, negotiation, survey questionnaire preparation, conducting surveys, advocacy etc. under the guidance of the project team.

The project, supported by Arbeiter-Samariter-Bund Deutschland e.V., also benefited by engaging them. The community interns were locals, and they possess adequate knowledge about the community, as well as, they provided invaluable knowledge of the local context, and most importantly they worked their hearts out as they were working for their own community. The engagement of community interns proved to be an asset for the project, given that they all came from the same community. Their presence significantly eased the project team's efforts in implementing interventions within the community.

The community engagement aspect of this intervention has become strengthened due to their presence while carrying out project activities, enhancing credibility of the project amongst the different local stakeholders. Their presence strongly conveys the message to the community that CDD is contributing to the lives of the community people.

This arrangement of deploying Community Intern has been praised by the local government authority and the elected functionaries. And the need of the host community have not been forgotten. Here CDD walks the talk.

## Recognitions:

### The Prestigious Zero Project Award (on Accessibility)

Centre for Disability in Development (CDD) is honored to be the recipient of the prestigious, Zero Project Award: Innovative Solution 2022 by the Zero Project's global network of renowned disability and accessibility experts.

CDD received the Zero Project Award for its innovative and low-cost accessibility interventions in the Inclusive Rohingya Response Programme. Through its outstanding innovation, impact,

potential of long-term growth, success, and scalability, "Inclusive Rohingya Response Programme" is recognized for removing barriers and improving accessibility for all persons with disabilities. The experience and learning shared is from the projects supported by CBM-G in Ukhiya, Cox's Bazaar.

The vision of Zero Project Award is: "A world without barriers." It wants to improve the rights of people with disabilities all over the world which is based on the United Nations Convention on the Rights of Persons with Disabilities.

In 2022, there were a total of 381 nominations from 93 countries. A group of experts reviewed the nominations and finally awarded 76 best solutions.



A scanned-copy of the main certificate of the Zero Project Award: Innovative Solution 2022.

## Highlighted Event

### International Carers Day, 2022



Participants of the International Carers Day 2022, on 19th October, stand together in front of NGO Affairs Bureau, Dhaka to express solidarity with the call of the day.

With the support of Carers Worldwide, Centre for Disability in Development (CDD) has been implementing the Carers Project in Bangladesh. The Carers Project has been facilitating social and economic inclusion of carers (a person who takes care of a person with disability in the family) in the Savar Upazila (in the outskirts of Dhaka, Bangladesh).

CDD observed the International Carers Day on 19th October 2022. As a part of the celebration, the participants of the programme stood in front of the NGO Affairs Bureau building in order to demonstrate a human-chain for expressing solidarity of the rights of the carers of persons with disabilities and to celebrate the International Carers' Day. After the demonstration of the human-chain, all the carers and other participants of the programme signed on Carers Charter. Professor Dr. Md. Golam Rabbani, Chairperson, NDDPT, was the Chief-Guest of the event.

## Workshop on Finalizing the ICA Methodology with the Experts and the Policy Makers

Centre for Disability in Development (CDD), within the Global Initiative on Disaster Risk Management (GIDRM), an initiative commissioned by the German Federal Ministry for Economic Cooperation and Development (BMZ) and implemented by the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), carried out a research project titled Inclusive Impact Chain Analysis (ICA) for Risk-Informed Development Planning (RID) for Healthcare Sector in Bangladesh (ilCA & RID) at the Teknaf Municipality and Baharchara Union of Teknaf Upazila of Cox's Bazar District in Bangladesh. The project's main objective is to strengthen the resilience of critical (Health) infrastructure by enabling communities to take better and risk-informed decisions.



The workshop to finalize the ICA Methodology with experts and policymakers, with Ms. Habibun Nahar M.P., Honorable Deputy Minister of the Ministry of Environment, Forest, and Climate Change (MoEFCC), serving as the chief guest.

recommendations and feedback on the draft methodology for finalizing it and to collect data for ICA locally through participatory workshops. Representatives from the Department of Environment (DoE), Department of Disaster Management (DDM), Climate Change and Health Promotion Unit (CCHPU) of Ministry of Health and Family Welfare (MoHFW), Ministry of Environment, Forest, and Climate Change (MoEFCC), Bangladesh Climate Change Trust (BCCT), Center for Participatory Research and Development (CPRD), Disabled Child Foundation (DCF), and the team members of CDD and C3ER attended the workshop.

Ms. Habibun Nahar M.P., Honorable Deputy Minister, Ministry of Environment, Forest and Climate Change (MoEFCC), graced the workshop as its Chief Guest.

Centre for Climate Change & Environmental research (C3ER), BRAC University was commissioned (by CDD) to conduct the study for the project. The main objective of the research was to add value to strengthening the resilience of critical (Health) infrastructure by empowering the local communities to take better and risk-informed decisions.

Under this project a national-level event was organized on Finalizing the ICA Methodology with the Experts and the Policy Makers. The objectives of the workshop were to share the methodological concept to conduct the Impact Chain Analysis (ICA) in a participative manner and establish a common understanding of terminologies, and to gather

## Child Empowerment Programme (CEP)

*The Liliane Fonds works to empower children with disabilities and their parents. In collaboration with its local partners in Africa, Asia, and Latin America, they provide children with the best and tailor-made care. They work to create a more accessible and inclusive environment for them (children with disabilities) and support them in their development. The Liliane Fonds uses the Community Based Rehabilitation (CBR) approach. This holistic approach creates an enabling and empowering environment in which the well-being of the children and youth is always the focal point. Two supporting strategies strengthen their core strategy to ensure their activities' impact: Capacity Development of their local partners and Lobby and Advocacy. They join forces with like-minded organisations, actors, and authorities to fight for common goals and beliefs.*



The Centre for Disability in Development (CDD) is the Strategic Partner Organization (SPO) of the Child Empowerment Programme (CEP) project that is supported by Liliane Fonds (LF). This programme is being implemented through eighteen Partner Organizations (PO) in thirteen districts of Bangladesh. The project works to ensure that children with disabilities have improved environments in primary and secondary schools to continue their education. And,

A management-meeting between CDD and Liliane Fonds (LF) at CDD Head-Office.

that have improved health conditions by accessing general health and rehabilitation services. The project also works for increased-income of youths with disabilities by acquiring skills, financial resources and income generation activities. There are actions to increase awareness of their right to participation, inclusion, and contributions.



*Lillian Fonds (LF) representatives are having a conversation with Romzan, a project-participant of the CEP project.*

**This project also intends to support capacity development process of its 18 partner organizations.**



**Representatives from the partner organizations of Child Empowerment Programme (CEP) project holding their certificates after the completion of a training on Accounts, Finance, and Compliance at CDD.**

## List of Partner-NGOs that CDD worked with during July 2022-June 2023

- Access Bangladesh Foundation
  - AID Foundation
  - Amra Kaj Kori (AKK)
  - Ashraf Foundation
  - Association for Women Empowerment and Child Rights (AWAC)
  - Association of Voluntary Actions for Society (AVAS)
  - BANCHTE SHEKHA
  - Bangladesh Protibandhi Unnayan Sangstha (BPUS)
  - Barinagar Samaj Kallyan Sangstha (BSKS)
  - Barishal Disabled People's Organization to Development (Barishal-DPOD)
  - Bondhu Kallyan Foundation (BKF)
  - Come to Work (CTW)
  - Community Eye Care & Research Centre
  - Dhobaura Upazila Protibondhi Unnayan Parishad (DUPUP)
  - Dip Unnayan Society (DUS)
  - DIPSHIKHA
  - Dristy Sangstha (DS)
  - Gram Bikash Sangstha (GBS)
  - IDEAL (Institute of Development Education)
  - Jugantar Samaj Unnayan Sangstha (JSUS)
  - Kamarkhand Palli Unnayan Sangstha (KPUS)
  - Manikganj Disabled People's Organization to Development (MDPOD)
  - Manobadhikar Jonokallyan Foundation (MJF)
  - Nazrul Smriti Sangsad (NSS)
  - NOWZUWAN
  - Organization for the Poor Community Advancement (OPCA)
  - Poverty Alleviation through Participatory Rural Initiatives (PAPRI)
  - Prattasha Samazik Unnayan Sangstha (PSUS)
  - Prothibondi Community Center (PCC)
  - SANGRAM
  - Self-Help and Rehabilitation Programme (SHARP)
  - SONGSHOPTAQUE
-

## Name of Existing Projects

01. Comprehensive Education Support for Deaf Children in Bangladesh (CES-DCB),
02. Putting Persons with Disabilities at the Centre of Humanitarian Preparedness and Response (PPDCHP&R),
03. Resilience strengthening of vulnerable population in North, West and East Bangladesh through a network approach of 5 partner organisations,
04. Strengthening Resilience in South and South-East Asia by Integrating Risk Management, Social Inclusion and Socio-Economic Development (SRSSEAIRMSISED),
05. Education, Learning And Skills for people with Deafblindness in Bangladesh,
06. DID TO 45 (Inclusive Education/ Shikhbo Sobai) : Strengthening Systems for the enrolment, retention, and support of Children with Disabilities at primary education of Bangladesh,
07. Disability Inclusive Resilience Livelihood (DiRL),
08. Strengthened Capacities of local state and non-state actors on disability-inclusive services in Cox's Bazar,
09. Inclusive specialized services for vulnerable persons including persons with disabilities in Cox's Bazar Rohingya camps and host communities (Phase II) Ukhiya and Teknaf,
10. Upscaling and expanding of socio- economic condition and improving physical and mental health wellbeing of 1002 family carers of persons with disabilities in Savar sub-district Bangladesh,
11. Promoting the health and wellbeing of unpaid family carers and their loved ones /disabled relatives in Bangladesh,
12. A balancing act: Learning from global examples of effective community support for people with disabilities (A Research project),
13. WADI for reduction of CO2 emissions in Bangladesh,
14. District Inclusive Eye Care Programme (DIECP),
15. Inclusive Humanitarian Actions for 'Forcibly Displaced Myanmar Nationals' (FDMN) and Host Community in Cox's Bazar Bangladesh (01 Jan 2022 - 31 Dec 2023),
16. Inclusive Humanitarian Response. Access to Rehabilitation Services and Disability Mainstreaming for the Rohingya Crisis,
17. Mental and Physical wellbeing of Rohingya victim of Torture,
18. DFAT AHP Bangladesh Multiyear Rohingya refugee and COVID-19 response,
19. Enhancing Community Based Inclusive Development in Bangladesh (ECBID-B),
20. Inclusive Impact Chain Analysis for Risk-Informed Development Planning for Healthcare Sector in Bangladesh (iICA & RID),
21. Resilience Strengthening of Vulnerable Populations (RSVP-BD) in Northern, Western and Eastern Bangladesh through a Network Approach of 5 Partner Organizations,
22. Child Empowerment Programme,
23. MIVA Disability Specific,
24. MIVA Mainstreaming,
25. Participation of Persons with Disabilities in Disaster Risk Reduction: developing a theoretical model for gender responsive resilience and intersectionality (GRRIPP South Asia, IDMV-S-CDD partnership project),
26. Pool Fund by BRAC,
27. Improved health for people with Disabilities living in Cox's Bazar,
28. Disability inclusive humanitarian assistance for Vulnerable FDMN's and Host community population in Cox Bazar.

# CDD Media Reach

Bangonews24.com



**সিডিসি'র উদ্যোগে প্রতিবন্ধিতা অগ্রদূতিমূলক দুর্ঘর্ষিগ কুঁকি ট্রাস বিষয়ক বিমূলনশ অনুষ্ঠিত**

12 December 12, 2022

কুঁকি ট্রাস প্রতিবন্ধি কুঁকি ট্রাসের একটি উদ্যোগে প্রতিবন্ধি অগ্রদূতিমূলক দুর্ঘর্ষিগ কুঁকি ট্রাস বিষয়ক বিমূলনশ অনুষ্ঠিত হয়েছে।

Bangonews24.com



**কুঁকি ট্রাসে দুর্ঘর্ষিগ কুঁকি ট্রাস স্থাপনকার প্রতিবন্ধী ব্যক্তিদের অগ্রদূতিমূলক প্রশিক্ষণমূলক বিষয়ক কর্মশালা**

12 December 12, 2022

কুঁকি ট্রাসে দুর্ঘর্ষিগ কুঁকি ট্রাস স্থাপনকার প্রতিবন্ধী ব্যক্তিদের অগ্রদূতিমূলক প্রশিক্ষণমূলক বিষয়ক কর্মশালা অনুষ্ঠিত হয়েছে।

দৈনিক **আজকের জামালপুর**  
The Daily Aker Jamalpur



**জামালপুরে একতা প্রকল্পের কার্যক্রম সম্পর্কে অবহিতকরণ সভা অনুষ্ঠিত**

জামালপুরে একতা প্রকল্পের কার্যক্রম সম্পর্কে অবহিতকরণ সভা অনুষ্ঠিত হয়েছে।

**প্রথম আলো**

**প্রতিবন্ধী ব্যক্তিদের সহজতা উন্নয়ন প্রকল্প ও অগ্রদূতিমূলক কর্মসূচি**



প্রতিবন্ধী ব্যক্তিদের সহজতা উন্নয়ন প্রকল্প ও অগ্রদূতিমূলক কর্মসূচি

The Daily Star

**Opportunities and Challenges to Inclusive Education for Children with Disabilities in Bangladesh**



Opportunities and Challenges to Inclusive Education for Children with Disabilities in Bangladesh

# Working Together



This project is supported by the Disability-Inclusive Disaster Risk Reduction Network (DIDRRN) of which ASB, CBM, CDD, and MI are members.



# Financial Statement

## Centre for Disability in Development (CDD)

A-18/6, Genda, Savar, Dhaka

### General Fund Account

### Statement of Financial Position

As at June 30, 2023

Particulars	Notes	Amount in Taka	
		30-Jun-23	30-Jun-22
<b>PROPERTY &amp; ASSETS:</b>			
<b>Fixed Assets (at cost)</b>	<b>3.00</b>	<b>135,978,462</b>	<b>135,458,777</b>
Less: Accumulated depreciation		77,045,467	72,805,783
		<b>58,932,995</b>	<b>62,652,994</b>
<b>Current Assets:</b>			
		<b>14,528,165</b>	<b>9,084,685</b>
Advance	4.00	4,529,237	1,854,309
Advance Income Tax	14.00	977,855	-
Security Deposit	5.00	10,795	10,795
Cash and Bank balances General Fund	6.01	9,010,278	7,219,582
Cash and Bank balances Projects	6.02	48,318,397	48,732,578
<b>Total</b>		<b>121,779,557</b>	<b>120,470,257</b>
<b>FUND &amp; LIABILITIES:</b>			
<b>Fund Account</b>	<b>7.00</b>	<b>42,591,892</b>	<b>44,779,532</b>
<b>Current Liabilities:</b>			
		<b>30,869,268</b>	<b>26,958,147</b>
Loan	8.00	20,659,417	20,169,221
Provision for Income Tax		977,855	-
Liabilities	9.00	9,231,996	6,788,926
Balance of Projects Grant		48,318,397	48,732,578
<b>Total</b>		<b>121,779,557</b>	<b>120,470,257</b>

The accompanying notes form an integral part of the financial statements

  
**Md. Mahbub Karim**  
 Accounts and Finance Incharge  
 CDD

  
**A. H. M. Noman Khan**  
 Executive Director  
 CDD

This is the Statement of Financial Position referred to in our report of same date.

Date: Dhaka  
 October 25, 2023

  
**Ahsan Zamir FCA (269)**  
 Principal  
**Ahsan Zamir & Co.**  
 Chartered Accountants