



Impacting Lives:

Inclusion and Access
for all in Development Including
Persons with Disabilities

ANNUAL REPORT

JULY 2023 TO JUNE 2024



**Centre for
Disability in
Development**

Bringing hope, dignity and meaning to life

FRONT INNER
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OUR VISION

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





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.

WHERE WE WORK

CDD operates extensively across Bangladesh, engaging with urban, rural, and climate-vulnerable communities. We are actively involved in inclusive humanitarian actions within Rohingya camps and host communities. Our geographical reach covers several districts and sub-districts, where we work directly and in partnership with mainstream development organizations and Organizations of Persons with Disabilities (OPDs).

Districts and Sub-Districts:

- **Districts:** Bagerhat, Bagura, Barguna, Barishal, Bhola, Chattogram, Chuadanga, Cox's Bazar, Dhaka, Dinajpur, Faridpur, Gazipur, Jamalpur, Jashore, Jhenaidah, Khulna, Kurigram, Madaripur, Manikganj, Moulvibazar, Mymensingh, Narsingdi, Nilphamari, Noakhali, Patuakhali, Rajshahi, Rangpur, Satkhira, Sirajganj,
- **Field Offices:** Ukhiya-Cox's Bazar, Ramu-Cox's Bazar, Teknaf-Cox's Bazar, Bhasan Char-Hatiya-Noakhali, Fultola-Khulna, Soronkhola-Bagerhat, Debhata-Satkhira, Monohordi-Narsingdi, Kurigram Sadar, Jamalpur Sadar, Dhobaura-Mymensingh, Mehendiganj-Barishal, Char Bhadrashan-Faridpur, Pirgacha-Rangpur, Rowmari-Kurigram.



WHO WE ARE

The Centre for Disability in Development (CDD) is a distinguished national non-governmental organization (NGO) in Bangladesh, founded in 1996.

CDD stands at the forefront of promoting an inclusive and rights-based society for persons with disabilities. Our commitment is grounded in the principles of dignity, equality, and inclusion, ensuring that individuals with disabilities can participate fully and equally in the development process. CDD's initiatives span across a broad spectrum of areas, addressing the barriers faced by persons with disabilities while simultaneously empowering them to assert their rights and contribute meaningfully to society.

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OUR WORKING APPROACH

CDD employs a twin-track approach to fulfil its mission:

1. **Addressing Barriers in Mainstream Society:** We work to sensitize and strengthen the capacity of communities and mainstream actors, creating an environment that enables the inclusion of persons with disabilities.
2. **Addressing Specific Needs of Persons with Disabilities:** We provide therapeutic services, mobilization, and leadership capacity strengthening to empower persons with disabilities and their organizations, enabling them to play a crucial role in society.

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ABBREVIATIONS

ADL	Activities of Daily Living
CIC	Camp-In Charge
COPD	Chronic Obstructive Pulmonary Disease
CCA	Climate Change Adaptation
CoC	Code of Conduct
CF	Community Facilitators
CRC	Community Resource Centre
CRA	Community Risk Assessment
CBR	Community-Based Rehabilitation
DMC	Disaster Management Committee
DRR	Disaster Risk Reduction
EC	Executive Council
FDMN	Forcibly Displaced Myanmar Nationals
FA	Functional Assessment
GC	General Council
HBE	Home-Based Education
HBEF	Home-Based Education Facilitator
HBR	Home-Based Rehabilitation
ICA	Impact Chain Analysis
IEH	Inclusive Eye Health
IEP)	Individual Education Plan
LGI	Local Government Institutions
MCP	Master Craft Person
NRCAT	National Resource Centre on Assistive Technology
NSPD	National Survey on Persons with Disabilities
NCD	Non-Communicable Diseases
OSSC	One Stop Service Centre
OPD	Organization of Persons with Disabilities
PPP	Public Private Partnership
RID	Risk Informed Decision
SMC	School Management Committee
SHG	Self-Help Group
SDG	Sustainable Development Goals
VSLA	Village Savings and Loan Association
WASH	Water, Sanitation, and Hygiene

MESSAGE FROM THE Chairman

It is with profound humility and deep respect that I serve as the Chairman of the Centre for Disability in Development (CDD). The journey that CDD has undertaken is nothing short of extraordinary.

Overcoming numerous challenges, the organization has successfully woven disability concerns into the fabric of mainstream development—a feat that deserves the highest praise.

As I have the privilege of presenting CDD's **Annual Report**, which spans from July 2023 to June 2024,

I am once again filled with immense pride. This report illuminates the transformative impact CDD has had on the lives of persons with disabilities and their families. It proves the organization's tireless efforts to introduce innovative, inclusive initiatives while generously sharing its wealth of expertise with both governmental and non-governmental partners. Though committed to its core thematic areas, CDD continues to seek new opportunities, enriching existing endeavors and exploring fresh horizons. These efforts have left a lasting imprint, profoundly uplifting the lives of those it serves.

The **Aziz-UI Haq Rural Development Medal 2024** award, conferred to CDD, testifies how this organization is contributing to the society.

Before concluding, I must express my heartfelt admiration for the firm dedication, generosity, and hard work demonstrated by every member of CDD. It is through their collective passion and perseverance that these achievements have been made possible.

To each of you, I extend my deepest gratitude.

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

MESSAGE FROM THE Executive Director

With a deep sense of privilege and joy, I present the **Annual Report** of the Centre for Disability in Development (CDD). This report offers a detailed and insightful account of CDD's initiatives and achievements during the period from July 2023 to June 2024. Through a wide array of projects, CDD has steadfastly pursued its mission to safeguard the rights of persons with disabilities across Bangladesh. One of the biggest achievements we had this reporting period was, being one of the organizers of the **ICEVI West Asia Regional Conference, 2024**.

Our heartfelt gratitude goes out to the local and national government entities whose collaboration and support have been vital during this time. We also extend sincere thanks to our donors and local partners for their firm commitment to our shared vision.

Above all, we acknowledge with deep appreciation the cooperation of the persons with disabilities we have been fortunate enough to work alongside. CDD remains unwavering in its mission to ensure full and equal participation of persons with disabilities in their communities, thereby enriching society as a whole.

As you delve into this Annual Report, we trust you will find it both enlightening and informative. Your ongoing interest and support for our work mean the world to us.

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 main governing bodies of CDD, essential for ensuring the organization operates smoothly and effectively.

The GC serves as the highest authority within the organization, responsible for approving the annual plan, budget, and activity reports of CDD at its annual meeting. The General Council meeting is held once a year.

The Executive Council (EC) of CDD consists of 9 members: the Chairman, Vice-Chairman, Treasurer, Member Secretary, and five other members elected from the General Council. The EC holds authority for policy approval and provides technical support and guidance for policy implementation. It also engages auditors to review CDD's financial accounts. The Executive Council meeting holds quarterly to discuss operational matters.

Executive Council Members	
	Jowaherul Islam Mamun Secretary General, SWID Bangladesh, NIID Bhaban, 4/A Eskaton Garden, Dhaka
	Adv. Md. Mosherraf Hossain Mazumder Law practitioner
	Serajul Islam Ex. Director, Field Operation, Proshika, Mirpur, Dhaka
	Dr. Nafeesur Rahman Disability Development Consultant
	Advocate Nazrul Islam Lawyer, Secretary General Human Rights Development Centre
	Mohua Paul Vice Chair Person, Access Bangladesh Foundation
	Sufia Haque Lecturer, Teachers Training College for Special Education, NCSE
	Maj. Md. Zahirul Islam Retired of Bangladesh Army.
	A.H.M. Noman Khan Executive Director, Centre for Disability in Development (CDD) Board Member of CSID

General Council Members

Khandaker Jahurul Alam	Development consultant Executive Director, Center for Services and Information on Disability (CSID)
Muhammad Osman Khaled	CAD Engineer (Design Deptt), Advanced Development Technologies Ltd.
Shah Md. Anowar Kamal	Executive Director, UST (Unnyan Shahojogy Team)
Md. Shafiq-ul Islam	Executive Director (Ex,) Centre for the Rehabilitation of the Paralyzed (CRP)
Md. Golam Ahia	Executive Director, Bandhu Kallyan Foundation (BKF)
Md. Shafiqul Islam	Country Director, ADD International, Bangladesh
Saidul Haque	Executive Director, BERDO
Shashanka Saadi	Head of Emergency Response Programme BRAC International
Dr. A.H.M. Nurul Hakim	Doctor, New Deep Clinic & Diagnostic Center
Prof. Dipak Kumar Roy	Retired professor of English Literature, Social Worker and Cultural Activists
Dr. Helal Uddin Ahmed	Associate Professor, Child Adolescent & Family Psychiatry NIMH, Bangladesh, Secretary General, BACAMH, Bangladesh
Ashfaque-ul-Kabir	Executive Director, Tauri Foundation
Vashkar Bhattacharjee	National Consultant for Accessibility in the Access to Information (a2i) Program of ICT Division, Bangladesh Government,

Contribution of CDD in Inclusive and Integrated Rural Development in Bangladesh

15.6% of the global population are persons with disabilities¹. In Bangladesh disability statistics vary. The Household Income and Expenditure Survey of 2016 of Bangladesh states that 6.94% are persons with disabilities. As per the National Survey of Persons with Disabilities 2021, the percentage of persons with disabilities with at least one functional difficulty is 7.07%. This constitutes a significant number of 12.6 million who experience disability in Bangladesh. Most of them reside in rural areas of Bangladesh. The impact of their disability is exacerbated by poverty and a myriad of societal barriers. These barriers largely exclude them from health & rehabilitation, education, livelihood, information, community life and other services and opportunities.

In 1996, when CDD was established the situation of persons with disabilities in rural areas of Bangladesh was much worse than present day. Disability issues were not a priority for development agencies and persons with disabilities were addressed more from charity and welfare perspective rather than as human rights².

CDD came into existence as a Non-Profit Organization to work towards an inclusive society, where persons with disabilities will enjoy equal rights and opportunities. CDD initiated and promoted the rights-based concept of “Community Approached to Handicap (Disability) in Development (CAHD)” supported by International Organizations to address needs of persons with disabilities in the rural areas.

Since 1997, CDD has trained and worked with over 300³ development organizations and has engaged them to address disability issues within their work. While addressing disability inclusive integrated rural development CDD has sincerely promoted and strengthened dignified and meaningful participation and inclusion of persons with disabilities, so that they are not only recipients of the benefits of economic and social development.

Since, 1996, 250 + community based groups of persons with disabilities/ self help groups have been nurtured and supported for their active participation and constructive engagement in the local community development process.

CDD has worked with local government institutes active in the rural areas of Bangladesh to strengthen capacity of local government functionaries. As a member of the Horizontal Learning Platform (HLP) implemented by National Institute of Local Government (NILG) & funded by the Swiss Development Cooperation Agency under the leadership of Local Government Division (LGD)⁴, CDD played a leading role in facilitating the advocacy process for issuing of a government circular for Union Councils, with guidance notes on inclusion of persons with disabilities. <https://www.calameo.com/read/004259878a583bdfdf04af>

¹ World Report on Disability 2011

² <https://www.thedailystar.net/news-detail-98393>

³ https://asksource.info/sites/default/files/mapping_report_physical_rehabilitation_services_south_asia_web.pdf (Page 61)

⁴ https://hlp.portal.gov.bd/sites/default/files/files/hlp.portal.gov.bd/page/c249fc5e_753f_489c_b809_3a7eddeb56cd/2021-01-14-09-53-9cb784bb95778a568a6d80829393db57.pdf

The circulars stipulate that Union Parishads and Municipalities at the rural areas should prioritize the needs of persons with disabilities in the process of development planning, allocate sufficient budgetary resources to meet their needs, undertake community awareness activities to protect their rights, preserve and collect information on them, ensure their participation in public meetings and create special facilities for them. CDD has been working with health, education, livelihood focused organizations and institutions in rural areas to create more access for persons with disabilities.

When there were no rehabilitation workers, CDD had stepped into the rural community to start rehabilitation services and disability awareness for the persons with disabilities amongst the rural communities of Bangladesh. CDD has trained nearly 1,000 community-based rehabilitation workers to extend much needed therapeutic interventions to persons with disabilities in rural communities. CDD has produced and delivered customized assistive devices to persons with disabilities located in rural communities all over Bangladesh. CDD has trained teachers⁵, health workers, livelihood workers engaged in rural development to include persons with disabilities. As a result of CDD's initiatives many schools in rural Bangladesh are including children with disabilities, where they are having opportunities learn in the same education setting as like their peers.

There is an increased number of persons with disabilities who are accessing Community clinics and other health facilities. CDD has created examples of integrated health and rehabilitation services at government upazila health complexes.



The examples of CDD's Decentralized Disability and Resource Centre (DDRC) were considered by the government to introduce One Stop Service Centres all over the country by Jatiyo Protibondhi Unnayan Foundation (JPUF). CDD has also introduced Rehabilitation Mobile Vans, which travelled into rural communities to provide services to persons with disabilities.

CDD has created employment opportunities through individual income generating activities and through group based financial support systems in rural areas. Persons with disabilities have also accessed financial opportunities to initiate or scaling up of their livelihood.

CDD has intensively worked on the inclusion of persons with disabilities in disaster risk management in rural areas, which has contributed to safeguarding their assets and resources as well as their lives^{6,7}. CDD has worked extensively on emergency responses in rural Bangladesh and created good practices^{8,9}.

After the international conference on 'Disability and Disaster Risk Management' jointly organized by the Government of Bangladesh, where CDD was also one of the organizers, a circular was issued in 2016 by the Ministry of Disaster Management & Relief to include a person with disability in all committees on disaster management at sub-national level.

⁵ <https://www.tbsnews.net/thoughts/inclusive-education-ensuring-accessibility-children-disabilities-661934>

⁶ https://www.cbm.org/fileadmin/user_upload/DRR_Booklet_FINAL_-_Online_10MB.pdf

⁷ <https://reliefweb.int/report/bangladesh/including-persons-disability-disaster-management-and-climate-change-adaptation>

⁸ https://cbm-global.org/wp-content/uploads/2021/08/CBM-Global_DisabilityInclusiveCashAssistance.pdf

⁹ https://www.cbm.org/fileadmin/user_upload/DIDRR_Critical_Insights_Best_Practices.pdf

As a result of CDD's work, in 2010, its founding Executive Director, AHM Noman Khan, had the honor of being awarded the Ramon Magsaysay Award (the Asia region's Nobel Prize equivalent) in recognition of CDD's pioneering role and dedication for mainstreaming disability to build a society that is truly inclusive and barrier-free¹⁰. In 2018, CDD was recognized by the Ministry of Social Welfare, Government of Bangladesh as one of the leading organizations on disability issues.

Technical Partnership with Centre on Integrated Rural Development for Asia and the Pacific



The Centre for Disability in Development (CDD) is one of the development partners of The Centre on Integrated Rural Development for Asia and the Pacific (CIRDAP) in Bangladesh from 2017 through a Memorandum of Understanding.

As a partner organization of CIRDAP, CDD brought its expertise and insights on disability and inclusion.

The Centre on Integrated Rural Development for Asia and the Pacific (CIRDAP) established in 1979 is an Intergovernmental regional organization, which promotes Integrated Rural Development (IRD) in Asia-Pacific region through regional cooperation amongst Member States, Link Institutes and Development Partners. Both CIRDAP and CDD worked together on desk research titled "Disability Inclusion in Rural Development in CIRDAP member Countries".

CDD Receives 'Aziz-UI Haq Rural Development Medal, 2024' from CIRDAP



On 6 June 2024, the CIRDAP Governing Council expressed their greatest appreciation to the Centre for Disability in Development (CDD), Bangladesh in recognition of its contributions on enhancing rural development practices, capacity building of educators, health workers, development practitioners to include persons with disabilities and exemplifying integrated health services at

government facilities of Bangladesh.)

The Aziz-UI Haq Rural Development Medal was awarded to Mr. A.H.M. Noman Khan, Executive Director on behalf of CDD by the Chairperson of the Governing Council of CIRDAP, H.E. Mr. Atthakorn Sirilatthayakorn, the Honorable Deputy Minister, Ministry of Agriculture and



¹⁰ <https://www.rmaward.asia/awardee/khan-a-h-m-noman>

Cooperatives, the Royal Thai Government at Bangkok, Thailand. The recognition of CDD through the award of the medal has placed in the CIRDAP Hall of Fame as the organization having outstanding achievement and contribution to integrated rural development and to CIRDAP.

In his award-acceptance speech, Mr. A. H. M. Noman Khan said, ***"This award is a validation to our firm commitment to advancing rural development and promoting inclusivity within our communities. We dedicate this award to all persons with disabilities who have directly and indirectly contributed to disability-inclusive development in Bangladesh."***

Words of Dr. Cherdask Virapat, Director General 2020 to 2024:



CIRDAP seeks to improve the quality of life of the far-reaching marginalized rural people, the ultimate beneficiaries of CIRDAP are farmers and rural communities. We operate through three interlink and four cross-cutting programmes as outlined in the General Guideline of Activities 2020+ (GGA 2020+). We have incorporated the disability dimension in the GGA 2020+.

CDD has already involved many activities to improve lives of the persons with disabilities and marginalized communities.

There are some possibilities to promote future activities as follows:

1. Networking with relevant organizations who have programmes related to persons with disabilities in other CIRDAP Member Countries to share with them best practices and innovation utilizing innovative technologies to mitigate disability factors (health issues, etc.);

2. As stating in the United Nations Disability and Development Report 2024: Accelerating the realization of the Sustainable Development Goals by, for and with persons with disabilities indicating that persons with disabilities are being left behind. The way things are going, the world will not achieve the SDGs by, for and with persons with disabilities by 2030. Accelerations are needed). CIRDAP can collaborate with CDD to address listed under each SDGs;

3. CIRDAP and CDD can promote active engagements, sharing of knowledge and connectivity of the Asia-Pacific region and other regions organizations working on integrated and inclusive rural development for persons with disabilities and other marginalized communities through the World Rural Development Day to be

established in 2024.

I hope that CIRDAP and CDD will generate synergies between them to implement relevant activities for the benefits of rural communities in the years to come.

Words from Dr. P Chandra Shekara, Incoming Director General



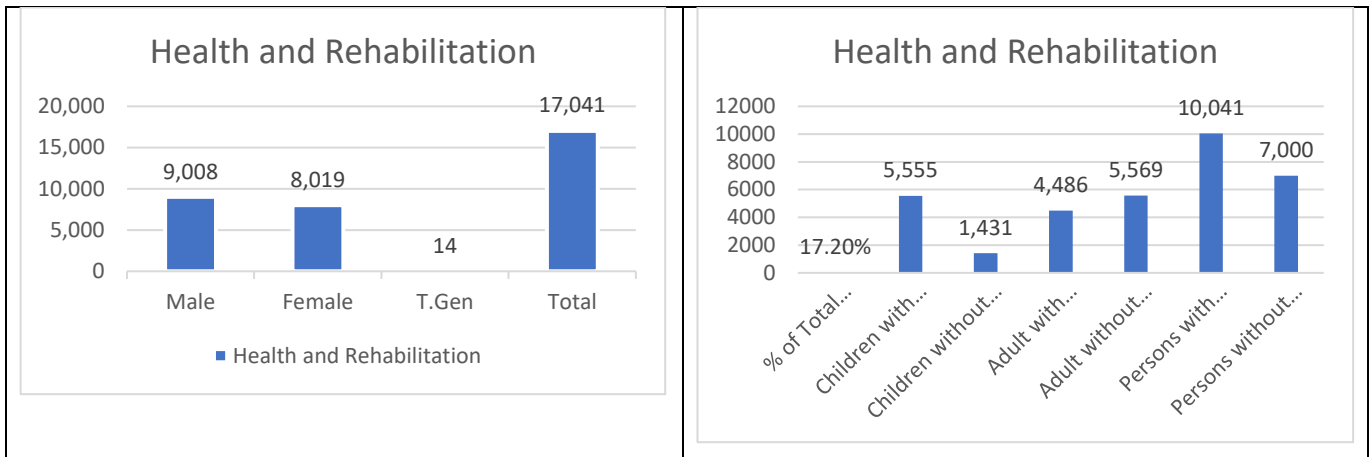
CIRDAP works for rural development. Disability is an integral part of rural development, Persons with disabilities face more challenges & barriers in rural areas than urban areas. In rural areas they face social taboo, several restrictions, negative attitude to such an extent, which is beyond our imagination.

Developing countries have wide rural communities that depend on agriculture. Challenges to obtaining food security, income security, nutritional security, health security, access to basic services etc for persons with disabilities are multiplies then people without disabilities reside in rural areas. It is by default one of the mandates of CIRDAP to address disability issues. As such, I thank Excellency Dr. Cherdasak Virapat for associating with CDD and introducing this important topic as a mainstream activity of CIRDAP.

I strongly believe that CIRDAP and CDD will continue to work on disability inclusion in rural development, even more closely in times ahead.

HEALTH AND REHABILITATION

Enhancing access to health and rehabilitation services for persons with disabilities, focusing on inclusive healthcare and specialized rehabilitation centers. Through initiatives like mobile outreach and assistive technology production, we ensure rehabilitation services reach underserved rural areas.



Addressing Rehabilitation Needs for Underprivileged Child with Disability to Ease the Agony of Carer Mothers of the Host Population

Accessible and Equitable Health Care and enhanced citizen engagement for marginal population at Host Communities in Cox's Bazar, Bangladesh affected by the Rohingya Crisis and Cyclone Mocha Project

The Rohingya humanitarian crisis, as a matter of fact, has affected the poorer members of the host population in Cox's Bazar district of Bangladesh. The males of host population families are main the bread-earners who depend upon daily wages. The protracted phase of the crisis caused increased economic challenges for them to meet the cost of living. The situation is evident based on recent happenings. Everyday misery of these families knows no bounds when they have to deal with cerebral palsy family member like Rafiya (a girl of 9 years), Afifa (a girl of 21 years), and Jahed (a baby-boy of 3 years).

In the beginning of the project intervention, CDD-MI project-staff enlisted these families at Rajarkul Union and Kawerkhop Union of Ramu, who have children with disabilities. They were identified by conducting door-to-door survey using Washington Group Short Set of Questionnaire (WGSSQ) in July 2023.

In the case of Rafiya and Jahed, the symptoms of cerebral palsy appeared since their infancy-years. Due to wrong treatment Afifa had to succumbed in such health condition which resulted in serious physical-growth challenges that affected her movement and posture. Without a wheel chair Rafiya cannot move on her own. Without assistance neither Rafiya nor Afifa can perform toileting, eating, walking, standing, bathing etc.

At just 15 years ,
Afifa faces the
challenges of
Quadriplegic
Cerebral
Palsy. Without a
wheelchair she can
not move
independently



Neither Rafiya and Afifa nor Jahed in Ramu Upazila had opportunity to get physiotherapy from a professional therapist at their door-steps. In the rural setup of Bangladesh, integration of rehabilitation health services into primary health care with community-based approach and effective referral have not yet established. On the other, due to non-availability of professionals and skilled rehabilitation-workers in close proximity as well as, associated costs of getting therapy from the professionals who are mostly based in main-city have not enabled these impoverished-families to seek required treatment to improve the impairment condition of their loved children.



Rafiya, age of 9, has grappled with paraplegic cerebral palsy condition. Without assistance she cannot stand, walk or sit.

Photo: Asmaul Husna, mother of Rafiya, is holding her daughter to support her stand on her feet

On the other, only caregiver mothers are there to support and care their children in the first place but to make sure their children's all needs are met. Hence, sometimes things get really hard to bear for them and the mothers need to numb her pain or sometimes pretend to feel better for the sake of her children.



Photo: Hafsa, in absence of a qualified rehabilitation professional, used to put her son waist-deep into a hole in the yard, hoping it would improve his standing ability,

“I have to go down the hills to fetch water from the community school’s safe water-source as we face acute safe water crisis in our village. I have no one at that time to look after my boy. My husband cannot support either as he leaves early in the morning and returns at night.”

“I am the only carer of my daughter. I have to be always with her to support her in toileting, changing her dress, bathing or feeding, putting her on standing frame etc. Even she cannot speak. Her father cannot spare time with her as he has to pursue daily works to bear our family expenses. At the same time, I have to provide therapy to my daughter beside performing my regular house-hold chores.”

Photo: Mrs Asmaul Husna besides her daughter Rafiya, who is standing with the aid of supporting standing frame, provided as the project contribution.



Hamida Begum (56) burst into tears worrying about the future of her 21 years old daughter who she thinks would find it difficult to manage in absence of her since there is no one in the family to look after as she her husband passed away a year ago. Rafifa did not have the opportunity to be enrolled in school although there are signs that show that she could have been excelled at formal education due to the absence of a supporting family-environment.

“I have to help her to managing her period as due to cerebral palsy condition she can not hold properly any staff using her both hands.”

*Hamida Begum (56),
mother of Afifa mother.*



daughter Afifa in her house entrance at Ramu. This wheelchair support was provided to Afifa as project contribution

CDD-team provided a combination of rehabilitation supports that include assessment of the child, home-based physiotherapy exercises, follow-up sessions at home, assistive devices, transfer skills to the mother, and counselling etc.

The main objective of the home- based rehabilitation service is that child with disability would receive physiotherapy directly from professional therapist at home and the caregivers will learn basic therapeutic skills directly during the home -based sessions.

Hoping the improvement of their children that would allow them time to perform other essential household works, mothers of these children were keen to learn primary therapy skills from the visiting rehabilitation professionals at their own house.

Besides, learning basic therapy skills, mothers have found a safe space to share their challenges to shed hidden stress stemmed from caring their own child for a long time when they discuss with the CDD's rehabilitation staff members.

Jahed was provided with a special chair, Rafiya was provided with a standing frame, and Afifa was provided with a customized wheelchair beside regular therapy.



01



02



03

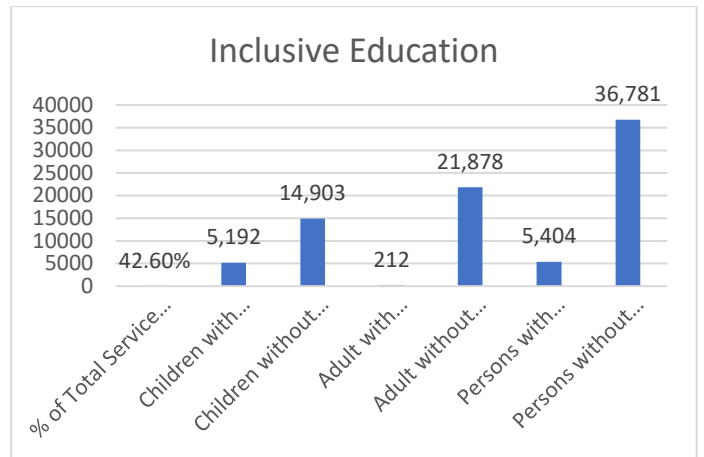
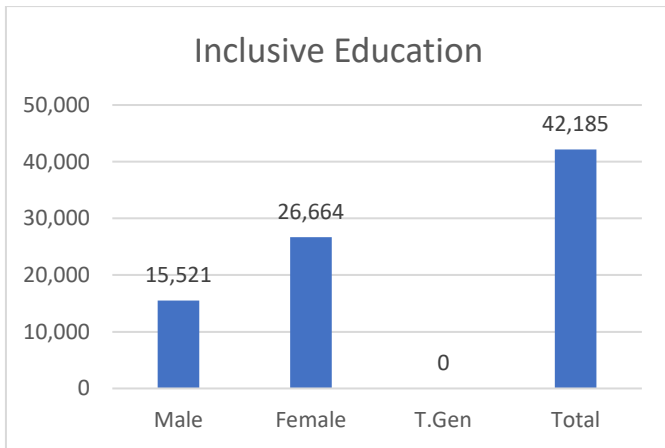
Photo Content 01 & 02: CDD's Physiotherapy Assistant Mr. Nahid is doing therapy, involving mother of baby Jahed during home visit to improve his basic motor skills.

Photo Content 03: Taposhy Rabeya (in the middle)- Physiotherapist -CDD, during her home visit performing therapy with Rafiyya to increase her muscle power and assisting her to sit independently.

On a final note, leaving behind Rafiyya, Afifa, and Jahed with their carer mothers after closing the short-term intervention, notwithstanding the fact, that much needed required time for their visible improvement and change were not given during the period. And which is a saddening part of this episode of this development-humanitarian project.

INCLUSIVE EDUCATION

Promoting disability-inclusive education by developing inclusive curriculums, training teachers, and enhancing school environments. We facilitate the enrollment of children with disabilities, ensuring equal access to quality education for all.



Hadipur Government Primary School, Debhata, Satkhira



Hadipur Government Primary School is one of the best primary schools in Debhata Upazila of Satkhira District. There are about 250 students in Hadipur Government Primary School, among them three learners with disabilities are studying in school. Head Teacher and teachers are very supportive and active towards the school and learners and make sure that all the activities are running on schedule for school. Among the activities arranging SMC meeting is one of the most important tasks. Teacher and SMC committee members discuss various issues in the SMC meeting such as learning outcome and evaluation, learner's attendance rate, various facilities for learners within the school compound, teachers training and improvement plan etc. All these matters are also escalated to UEO and AUEO from the SMC committee.

Moreover, SMC members develop a monthly work plan and track progress of work in accordance with the work plan.

Sharmin Akter a fifth-grade student at Hadipur Government Primary School in Debhata Upazila, faced daunting challenges on her educational journey. The daughter of Md. Johor Ali, a day laborer, and Mst Nurjahan Khatun, a homemaker, Sharmin's life took a drastic turn when she was involved in a severe accident in 2006, leaving her with impaired mobility in both legs and one hand.

Despite her physical limitations, Sharmin remained dedicated to her studies, attending school regularly since her admission in 2016. However, her determination was tested when she became a target of bullying on her way to school, perpetrated by students from an adjacent secondary school. The harassment became so unbearable that Sharmin stopped attending school altogether.

Fortunately, the School Management Committee (SMC) of Hadipur Government Primary School, which included representatives from the Centre for Disability in Development (CDD) USAID Shobai Miley Shikhi project, recognized the gravity of Sharmin's situation during their regular meetings. Determined to address the issue, the SMC members, along with the head teacher of Sharmin's school and teachers from the adjacent secondary school, devised an action plan.

Their first step was a visit to Sharmin's home, where they empathetically discussed the bullying issue with her parents and assured them of their commitment to resolve it. Also the SMC committee arranged a formal meeting with the teachers, head teacher and Secondary School committee member of that adjacent secondary school. As part of their corrective measures, the teachers from the adjacent secondary school organized awareness sessions on bullying for their students.

Thanks to the collaborative efforts of the SMC and the commitment of the school staff, Sharmin triumphantly returned to school, once again attending her classes regularly. Her family's gratitude towards the SMC knows no bounds, as Sharmin's resilience and determination to continue her education shine brightly amidst adversity.

Issuance of a Government Order by Upazila Education Office

গণপ্রজাতন্ত্রী বাংলাদেশ সরকার
উপজেলা শিক্ষা অফিসার কার্যালয়
নারসিংদী সদর, নারসিংদী
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স্মারক নং: উপশা/নস/সমা/২০২৩/২৬ তারিখ: ১২/০৯/২০২৩খ্রি
বিষয়: প্রতিবেদী শিক্ষার্থীদের উচ্চশেখা উদ্যোগে গ্রহণ গ্রহণক।

উপর্যুক্ত বিষয়ের আলোকে জানানো যাচ্ছে যে, নারসিংদী জেলার সদর উপজেলার সকল সরকারি প্রাথমিক বিদ্যালয়ের ত্রিশ বাজেট হতে প্রতিবেদী শিক্ষার্থীদের জন্য উপযোগী শিখন সামগ্রী, খেলাধুলার উপকরণ, সহায়ক উপকরণ ও তাদের শিক্ষা ক্ষেত্রে উৎসাহ প্রদানের লক্ষ্যে উদ্যোগ গ্রহণের জন্য বঙ্গ হইলো। এ ক্ষেত্রে কারিগরি পরামর্শ গ্রহণে প্রয়োজনে প্রতিবেদী ব্যক্তিবর্গের নিচে কর্মরত প্রতিষ্ঠান নির্ভরিত সাথে যোগাযোগ করবেন।

প্রদান শিক্ষক
.....
নারসিংদী সদর, নারসিংদী

মেঃ হাফিজা ইসলাম
উপজেলা শিক্ষা অফিসার
নারসিংদী সদর, নারসিংদী

স্মারক নং: উপশা/নস/সমা/২০২৩/২৬
তারিখ: ১২/০৯/২০২৩খ্রি
অনুলিপি: সমর অবগতি ও কার্যার্থে

১. চেয়ারম্যান, উপজেলা পরিষদ, নারসিংদী সদর, নারসিংদী।
২. উপজেলা নির্বাহী অফিসার, নারসিংদী সদর, নারসিংদী।
৩. জেলা প্রাথমিক শিক্ষা অফিসার, নারসিংদী।
৪. সরকারী উপজেলা শিক্ষা অফিসার, নারসিংদী সদর, নারসিংদী।
৫. একীভূত শিক্ষা অফিসার, নির্ভরিত, নারসিংদী।
৬. অফিস কপি

মেঃ হাফিজা ইসলাম
উপজেলা শিক্ষা অফিসার
নারসিংদী সদর, নারসিংদী

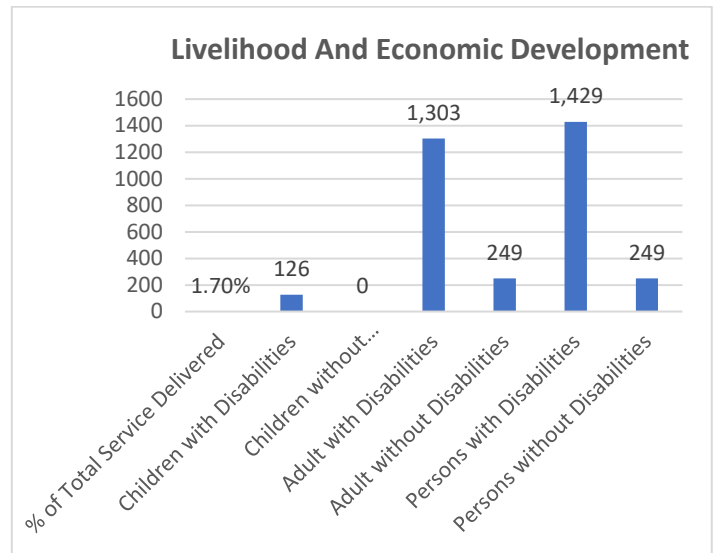
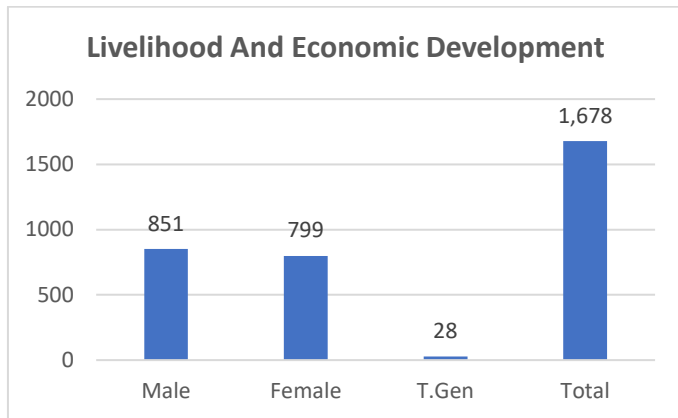
The Upazila Education Office in Narsingdi has taken a landmark step towards promoting inclusive education by issuing a Government Order mandating that all Government Primary Schools (GPS) in the Sadar Upazila must allocate a portion of their SLIP budget to promote inclusive education. This development is a significant achievement, reflecting the success of sustained advocacy efforts by our project. By mandating that a portion of the SLIP budget be dedicated to inclusive education, the Upazila Education Office is institutionalizing practices that promote the integration of children with disabilities into mainstream education.

With a dedicated budget, schools can implement strategies such as modifying classrooms to be more accessible, providing inclusive learning materials or offering additional support services. These changes will help create a more inclusive and supportive learning environment, where children with disabilities can thrive alongside their peers.

This advocacy effort began with rapport building with key stakeholders including government officials, school authorities and community leaders, followed by highlighting the challenges faced by children with disabilities. Workshops and one-to-one meetings were conducted to sensitize stakeholders to the importance and benefits of inclusive education. Regular engagement with the Upazila Education Office, through meetings was critical in advocating for the necessary budget allocations.

LIVELIHOOD AND EMPLOYMENT

Supporting the economic empowerment of persons with disabilities by facilitating vocational training, financial assistance, and inclusive employment practices. We advocate for accessible work environments and collaborates with industries to promote disability-inclusive employment.



Aminul Islam:



A person with physical disability is living his life with determination in a remote village of Jatrapur Union in Kurigram District. He has been running his tailor shop in a local market based in a disaster-prone area. 35-year-old Aminul is the sole breadwinner in his family. He lives together with his wife, daughter, and mother. In 2001, in a road

traffic accident, he lost one leg and became a person with disability. Returning home from the Rangpur Medical College, he found nothing to do as walking was his most difficult task. He worked as an apprentice in different tailoring shops in the local market to manage his family. In 2018, he took the bold step of opening his tailoring shop. At that time, he did not have a digital electric sewing machine, as a result, he had to use a manual tailoring machine and it was very difficult for him to sew by pressing through his amputated leg. Aminul also had to take a loan of BDT 50,000 from an NGO to purchase goods for his shop. However, repaying this loan with interest had been an arduous task for him. In 2021, there was a turning point in Aminul's life as he joined a Self-Help Group (SHG) through the intervention of the Putting Persons with Disabilities at the Centre of Humanitarian Preparedness and Response (PPDCHP&R) Project implemented by the Centre for Disability in Development (CDD). After spending so many years in his working life, it was like starting afresh for learning again. Through regular meetings, he learned about the rights and protection of persons with disabilities, and the safety of persons with disabilities and other vulnerable groups before, during, and after a disaster. In December 2022, Aminul received one-time unconditional support amounting to BDT 16,000/- for his livelihood through the PPDCHP&R project. With his partial support of BDT 7000/- he bought an electronic sewing machine. This new machine drastically reduced his work time and increased his monthly income. Aminul's dedication and hard work, combined with this financial assistance, have brought about positive changes in his life. Aminul's story is evidence of the human spirit and resilience in the face of adversity. For persons with disabilities who are living in disaster-prone areas, like Aminul, such financial support plays crucial role in improving their livelihoods. Despite the uncertainties posed by annual disasters, Aminul dares to dream of expanding his business.



Story of Lalita:



Lalita is member of carers self-help group. She take care of her daughter Sumaiya. She is children with intellectual disability. She is an active member of the group. Maximum time she arranges the meeting and encourage other carers to attend the meeting. Now she is able to conduct the meeting if needed. Lalita has received training on agriculture and cattle rearing. After getting the training she started to goat rearing. At first she has started with 1 goat. After 1

years she has 4 goats. Then Lalita sold 2 kids after they grew up. From there he got 12 thousand taka and refund the money which was received from group. Lalita's husband was unemployed. Lalita brought up her problem in the carer group. Lalita tells the group that if her husband is engaged in some work then his husband will better for her family.

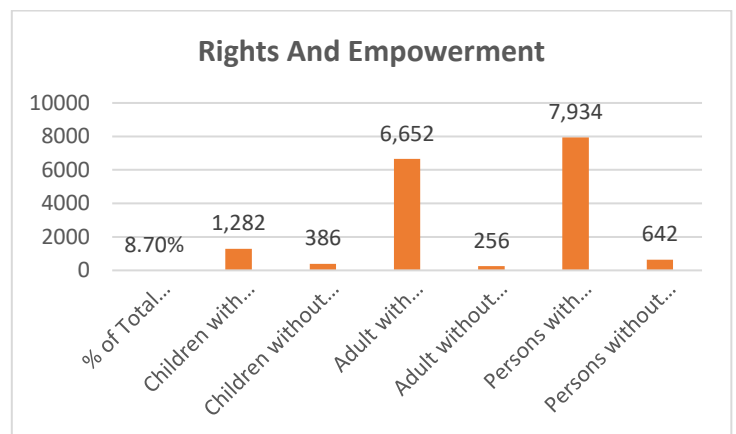
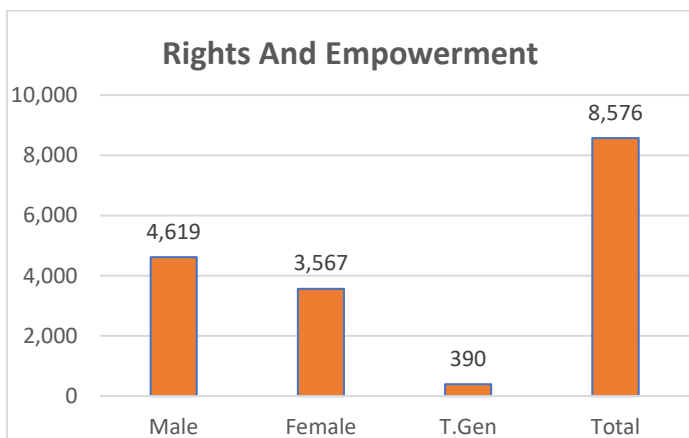
So she thinks of starting vegetable farming with her husband along with goat rearing. Lalita applied to the group for financial assistance. The members of the group gave her financial assistance considering her need. Lalita had training but no practical experience in farming, so she approached the Livelihood Officer of the CDD and asked how she could get better yields. Later Livelihood Officer visited Lalit at field level and followed up regularly. Lalita gets an unexpected harvest and every month she helps the group financially. Lalita's goats and farming work earns 12-15 thousand taka every month. Lalita actively participated in the advocacy of Union Parishad. And she focuses on the rights of union carers. Lalita talks about the various trainings coming to the Union Parishad. So that the carers can improve financially by getting these trainings. He requested that the carers should be given priority in those places where food aid comes from different times in the council.

She hope that all the carers are get the carer pension. Carers are get respect from all over the world. I feel no more alone after joining the carer project. I hope the carer project will always be by our side Now Lalita support to other carers for the livelihood activities and carers now motivated to see change and how Lalita`s financially contribution to the family.

RIGHTS AND EMPOWERMENT



Empowering persons with disabilities by advocating for their rights, supporting self-help groups, and promoting their participation in decision-making processes. We strengthen capacity in governance, leadership, and advocacy to ensure the inclusion and dignity of persons with disabilities.



Journey of Oyikko:

Oyikko, SHG for the Rights and Empowerment of Persons with Disabilities Cox's Bazar is a disaster-prone area, frequently hit by cyclones and floods. It also hosts nearly 1 million Rohingya refugees, straining its infrastructure and social systems. In this context, a significant number of persons with disabilities also live in the host community of Ukhiya who are often deprived of basic rights. Recognizing this situation, the Centre for Disability in Development (CDD) took the initiative to encourage people with disabilities to unite and advocate for their rights and development. This led to the formation of two Self-Help Groups (SHGs) in Ratna Palang Union, with Oyikko being one of them. The primary goal of Oyikko is to empower persons with disabilities to overcome neglect, deprivation, and discrimination, and to actively pursue their rights. After its establishment, Oyikko received comprehensive training on rights and advocacy from CDD, which helped develop the competencies of its members. Since then, Oyikko has been actively engaged in various initiatives aimed at promoting the rights and empowerment of people with disabilities, with continuous support and guidance from CDD.



A significant aspect of Oyikko's journey has been the establishment of strong relationships with the Union Parishad, the local government body responsible for carrying out development and welfare activities. Recognizing the importance of local governance in advancing the rights of persons with disabilities, Oyikko has consistently advocated for their inclusion in various services. As a result of these efforts, the Union Parishad now provides crucial support for the easy registration of births of children with disabilities and assists in obtaining disability identity cards. Oyikko's advocacy extends beyond the Union Parishad to other local administrative bodies, including the Social Service Department, Youth and Development Department, and Women Affairs

Department. Moreover, Oyikko has built effective relationships with local representatives, teachers, religious leaders, and other community members. They regularly conduct community awareness meetings on disability and assist persons with disabilities in accessing government safety net programs. Oyikko's impactful activities have attracted the attention of non-governmental organizations, some of which have started to collaborate with them.

Story of Fahima Khatun:

Fahima Khatun is a person with physical disability. She lived in Chakaria Upazilla and her residence is located in the nearby area of Chakaria Upazilla complex. She is 35 years old and run a home base tailoring shop. Fahima lost her father many years ago and her elder brother was also died few years ago. As a result she and her family become guardian less. Fahima lived along with her mom and sister in law in the same house. For life and livelihood she select tailoring profession. She collect order from the neighboring houses and mainly prepare the women dresses. She used to prepare traditional dresses and depend on the traditional design. She had to visit the markets physically and collects capital items such as cloths and accessories by herself. In 2023 Fahima attend a training in CDD on digital literacy by the assistance of SARPV. Then she come to know about the digital contents and digital marketing issues. Coming back Fahima purchased a smart phone and start using Youtube, Facebook and other apps.

Now she follow different modern design of dresses from online sites such as YouTube and prepare her dress according to this online designs. She also become familiar with online shopping. So, she can buy her desire cloths and accessories from online, which make her life a bit easier. In an average now she is earning 6 to seven thousand taka per month. On the other hand, her customer satisfaction also improved and number of order gradually increasing day by day. Fahima coated that training of digital literacy significantly contributed in her personal and professional wellbeing.



Physically challenged Md. Reazul Islam's 22 (twenty-two) decimal ancestral property is recovered



Md. Reazul Islam (35), a resident of 4 No. Tulsirchar Union, is physically challenged. In March 2024, Md. Reazul Islam's 22 decimal of the ancestral property was forcibly occupied by the influential rioter, land grabber Md. Shanto Mia (45), and his four other brothers. Reazul Islam is a calm, innocent, and physically challenged individual. Even after a number of meetings with local government representatives and the dignitaries, and numerous requests to release the land, Shanto Mia did not return the land. Md. Reazul Islam was the treasurer of the

"Alor Dishari Disabled People's Development Organization." At the Alor Dishari Disabled People's Development Organization (DPO) quarterly meeting, when the topic of his land's forced occupancy was raised, the group resolved to file a complaint with the Jamalpur Legal Aid Office

Md. Reazul Islam lodged a complaint at the Jamalpur District Legal Aid Office on March 24, 2024, complaining the forced occupation of land. Subsequently, on the basis of the plaintiff's complaint, the District Legal Aid Office twice served notice to the defendant Shanto Mia. However, the defendant failed to show up for the appointments, and on the third occasion, the defendant did show up for an urgent notice at the Legal Aid Office. After reviewing the parties' documentation, the District Legal Aid Officer gave the defendant an order to release the land. But when the defendant refused to relinquish the occupied land, the District Legal Aid Office brought a case against him in the learned court. C.R. Case No. 463 (1) 2024. Defendant Sumon Mia and his four other brothers were among the five persons the court gripped when the defendant showed up for his hearing on June 11, 2024. The defendant in this instance acknowledged their mistake and informed the court in writing, saying, "We are accused in this particular case. The land specified in the litigation schedule is not ours, and we intend to return possession of it. We will not take any further action, and the defendant agrees not to meddle in any way with the plaintiff's land, to take custody of it, or to break any laws pertaining to it. Ultimately, following four months of court proceedings, 22 (twenty-two) decimals of the land that the defendant had been occupying were returned to its original owner, Md. Reazul Islam, thanks to judicial intervention.



জনাব মোহাম্মদ আল মামুন (সিনিয়র সহকারী জজ) জেলা লিগ্যাল এইড অফিস, জামালপুর। আইনগত সহায়তা আইন-২০০০ এবং প্রতিবন্ধী ব্যক্তির অধিকার ও সুরক্ষা আইন ২০১৩, সম্পর্কে বেশির ভাগ মানুষই জানেন না। এই আইনগত সেবা সমূহ জনগনের মাঝে ছড়িয়ে দিতে হবে। আইনের দৃষ্টিতে সকলেই সমান। প্রতিবন্ধী ব্যক্তি এবং অসহায় মানুষের মধ্যে এই আইনের বার্তা পৌঁছে দিলে তারা আইনগত সহায়তা পাবে এবং হয়রানির স্বীকার হবেন না। সরকারী খরচে মামলায় আইনগত সহায়তা প্রাপ্তির জন্য যোগ্য যারা-বীর মুক্তিযোদ্ধা, প্রতিবন্ধী ব্যক্তি, শ্রমিক যার বার্ষিক আয় কর মুক্ত, নির্যাতনের স্বীকার নারী ও শিশু, বয়স্ক ভাতা ও ভিজিডি কার্ডধারী ব্যক্তি, বিনা বিচারে কারাগারে আটক ব্যক্তি, প্রাকৃতিক দুর্যোগে ক্ষতিগ্রস্ত ব্যক্তি, ক্ষুদ্র জাতিসত্তা এবং প্রান্তিক জনগোষ্ঠী যে কোন বিচার প্রার্থীর জন্য আইনি পরামর্শ ও তথ্য সহায়তা ও আপস- মিমাম্‌সার মাধ্যমে বিরোধ নিষ্পত্তি করা হয়। যদি কোন ব্যক্তি সরাসরি উপস্থিত থেকে সেবা নিতে না পারেন সে ক্ষেত্রে জাতীয় আইনগত সহায়তা পাওয়ার হেল্পলাইন টোল ফ্রি নম্বর- ১৬৪৩০ এ ছুটির দিন ব্যতীত সকাল ০৯ থেকে বিকাল ৫ টা পর্যন্ত কল করে আইনি সেবা নিতে পারবেন। লিগ্যাল এইড এর সেবা মানুষের দ্বার প্রান্তে পৌঁছে দেয়া প্রয়োজন।

Transforming Lives: Harun's Journey to Empowerment



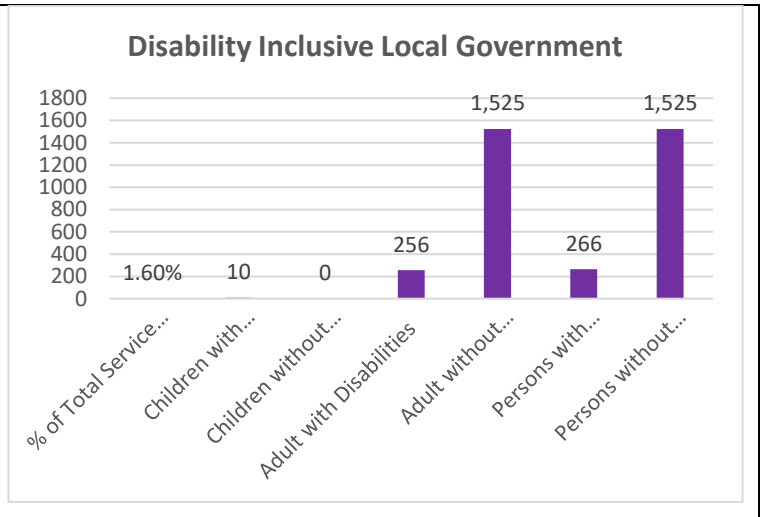
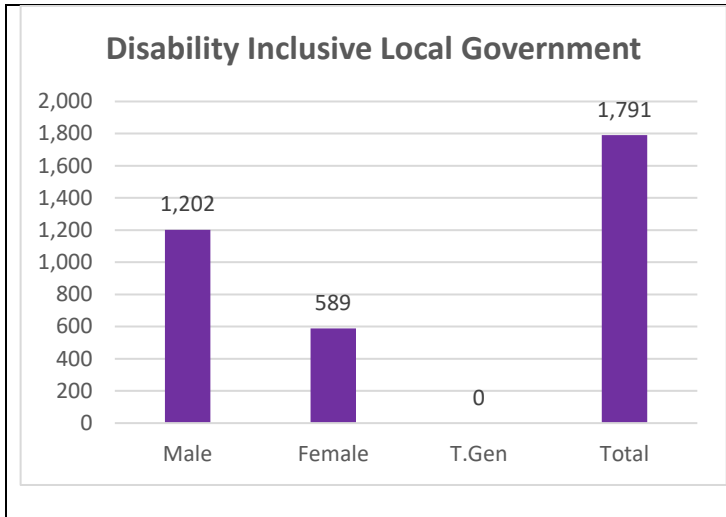
Md. Harun is a 22-year-old, who has been diagnosed with Cerebral Palsy since birth. He lost his father when he was only three years old and was raised by his stepfather. Due to financial difficulties and lack of support, he had to discontinue his studies for a long time. However, in the Ramu and Chakaria upazilas, under the CDD-HI-GFFO project, six self-help groups were formed to

support persons with disabilities in six unions. Harun is one of the executive members of the Ashar Alo self-help group at Joarianala Union. After participating in this group, Harun received various training from CDD, among which the methods and content of SHG management, what is disability, types of disability, barriers to inclusion of persons with disability in society, rights of persons with disability, etc. Harun attends lots of advocacy meetings with different stakeholders. After being involved in various training's, meetings, and activities, Harun realizes that people with disabilities can also get job opportunities in various government and private offices and become socially and financially independent.

After that, the CDD inclusion team motivated him to prepare his CV. Then Harun prepared his CV with the support of the inclusion team and submitted this to a few offices. After Harun and the CDD representatives put in their best efforts, one day Harun gets a call from a private organization to attend a job interview. He went there and gave the interview very well and was selected there for work. Presently, Harun serves as an ICU assistant at the Cox's Bazar branch of the same organization. His monthly salary enables him to support his family financially and also set aside some savings for future needs. Harun believes that persons with disabilities have the potential to become established members of their families and society, provided they receive the necessary support. He envisions a world where people with disabilities have equal opportunities to work in both government and private organizations, enabling them to become self-reliant and contribute to the betterment of society.

LOCAL GOVERNANCE

Working to make local governance inclusive by strengthening the capacity of local government institutions to address disability issues. We promote active citizen engagement, inclusive development planning, and budget allocation for disability-related initiatives.



Union Parishad Allocates & Implements Funds for People with Disabilities



Local governments play a key role in the inclusion of people with disabilities.

After one year of CDD conducted workshops, advocacy events, union-level pre-budget meetings, and ward-level open budget meetings for local government representatives on disability awareness and rights. As a result of different efforts and ongoing support from CDD Jouarianala Union Parishad allotted 50,000 Taka for the fiscal year 2023-2024 to improve the conditions of people with disabilities. This

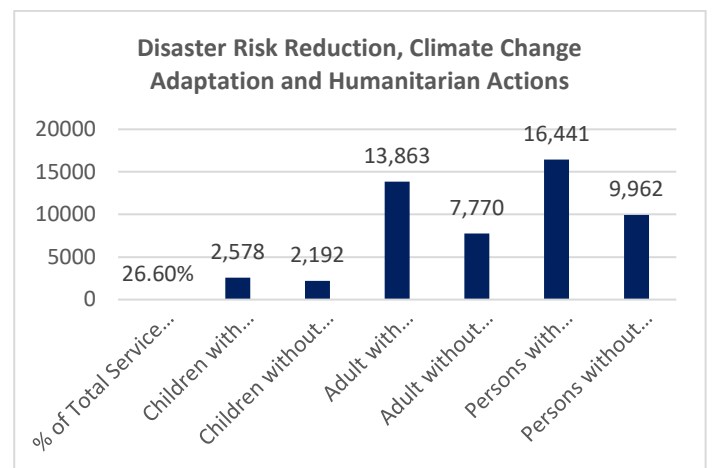
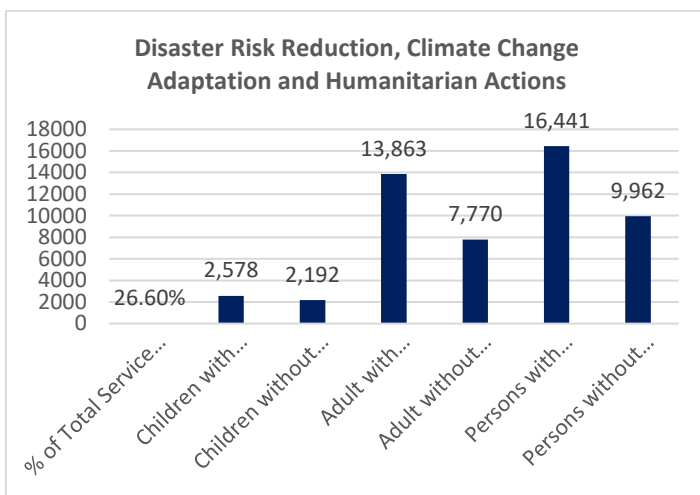
money was handed to the president of the Ashar Alo self-help group for the development of people with disabilities. The Inclusion Team regularly visits schools and different wards to identify needs. They prepared a list of 14 people with disabilities and discussed it with Union Parishad member Mizan Ullah Sikder.

On June 9, 2024, CDD provided technical support to the SHG group and Union counsel in distributing funds in the presence of all UP representatives and community people; they distributed educational materials to ten children with disabilities; and three goats and shop items were distributed to four people with disabilities to support income-generating activities. Local people and persons with disabilities are very happy with implementing the budget allocated by the Union Parishad to improve the quality of life of people with disabilities.



DISASTER RISK REDUCTION, CLIMATE CHANGE ADAPTATION AND HUMANITARIAN ACTIONS

CDD integrates disability inclusion into disaster risk reduction (DRR) and climate change adaptation by prioritizing inclusive community risk assessments, accessible early warning systems, and inclusive planning. Our focus is on ensuring the safety and active participation of persons with disabilities in all aspects of humanitarian response. By strengthening the resilience of disability groups and providing targeted training to representatives of Disaster Management Committees, CDD empowers communities to better address the needs of persons with disabilities during disasters and climate-related emergencies.



Instilling Hope for a Widow Woman Living with Disability



Delowara in front of her newly built simple house of two-rooms.

Delowara's husband succumbed to death after being hit by a falling tree several years back.

Delowara (35), a woman living with disability, chose to remain single and lived on her own since then. She did not marry again, unlike male members in the community in the existing social context.

The one-room dwelling she had been living was a cheap corrugated tin and bamboo-walled made house with thatched roof, a non-durable house, which is a common type of house for the low-income households in rural areas and which is most vulnerable to natural hazards. Delowara has owned this shelter from her late husband. So, when cyclone Mocha hit it with high winds in May 2023, the walls collapsed and the roof was blown away

as well as the foundation became weaker.

Under the Cyclone Mocha response component of the ASB assistance, the damaged household of Delowara got selected accordingly. She received support to repair her old shelter house and now she is a proud owner of the newly built simple house of two-rooms.

On the other hand, as a single woman living with disability, to bear the cost of everyday meals, medicines etc for them mother & son, it gets difficult without having regular income.

Although, she gets very nominal government disability allowance which is not enough. Her 11-year-old son is a student of local Madrasa, an educational institution runs by the Mosque.

As she knew sewing, it used to be a source of income for her. But with her old sewing machine she could not sew items like kids' dress or ladies' wear. Upon her request and after needful assessment under Mocha response Delowara was provided a sewing machine.

Now, Delowara is getting work-order from the women of her community to make different women-wear and earning a moderate income.

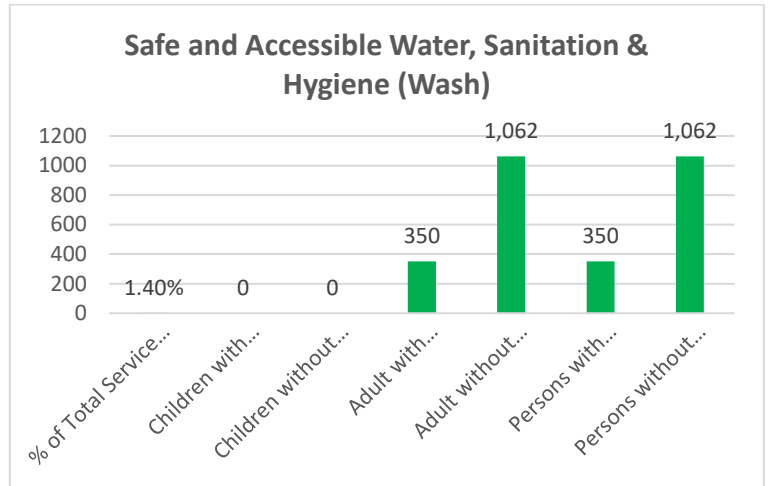
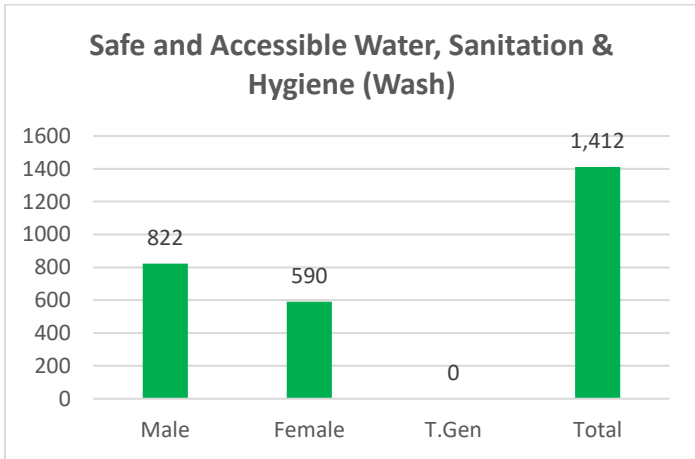
This is how, a humanitarian response support instilled hope in a rural woman to support in her journey.



Delowara with her sewing machine.

SAFE AND ACCESSIBLE WATER, SANITATION & HYGIENE (WASH)

Promoting safe and accessible WASH facilities for persons with disabilities, especially during disasters. We advocate for inclusive WASH practices, ensuring that facilities are user-friendly and accessible to all.



CDD'S ADVOCACY INITIATIVES UPDATES

Centre for Disability in Development (CDD) focuses its advocacy efforts on addressing policy gaps that affect the lives of persons with disabilities and marginalized communities. By engaging grassroots individuals with disabilities, local groups, committees, self-help groups, and organizations of persons with disabilities (OPDs), CDD actively identifies issues that need urgent policy action. These efforts are supported by comprehensive research and studies conducted by CDD to define strategic advocacy actions.

Advocacy is a cornerstone of CDD's Strategic Plan 2022-2025, focusing on three key areas: inclusive education, employment for persons with disabilities, and disability-inclusive governance. Through advocacy and networking, CDD aims to promote inclusive education by addressing barriers faced by children and youths with disabilities. In terms of livelihoods and economic development, CDD has launched initiatives that advocate for increased employment opportunities in public, private, and I/NGO sectors, focusing on sensitization, networking, internships, and job referrals for persons with disabilities. Additionally, CDD works on documenting inclusive governance practices at project locations and uses these examples as advocacy tools to influence government agencies and local policymakers.

From July 2023 to June 2024, CDD achieved significant advocacy and capacity-building milestones. One of the highlights includes providing 15,000 persons with disabilities with information and orientation on digital inclusion. These sessions equipped participants with knowledge on digital accessibility, fostering their active participation in the digital world. In addition, over 500 government officials, including local government representatives, have been sensitized to the importance of digital inclusion. This resulted in commitments from officials to promote digital accessibility in their respective regions and departments.

In a major policy breakthrough, the Bangladesh government has signed and ratified the Marrakesh Treaty, a key international agreement that enhances digital accessibility for persons with disabilities. This achievement is a testament to CDD's sustained advocacy efforts. Furthermore, CDD has successfully trained 82 persons with disabilities in digital literacy, empowering them to act as digital champions in their communities. These individuals now work to orient other group members and local residents, further extending the impact of CDD's advocacy on digital inclusion.

CDD's holistic approach to advocacy—targeting education, employment, governance, and digital inclusion—continues to shape policies and foster an inclusive environment for persons with disabilities in Bangladesh. Through its sustained efforts, CDD remains a key player in driving systemic changes that benefit marginalized communities.

In the spotlight of a world stage:



The Empowerment journey of two ICEVI panelists with Deafblindness At the ICEVI West Asia Regional Conference 2024 in Dhaka, Mariam and Jubayer, two youth with deafblindness acted as panelists and shared their stories with the world. This moment was a milestone in their long and challenging journey towards empowerment with CDD. Mariam (Narshingdi) and Jubayer (Jossore) both came from remote areas and underprivileged families. Although they live 200 miles away, their stories are similar. When CDD's - NRCDB

identified them, both were school dropouts, isolated, and struggling with communication, mobility, and daily living activities.

NRCDB provided Home-Based pre-schooling, rehabilitation, and therapeutic support to prepare them for mainstream education. They were also provided with assistive devices after screening. Though they made significant progress, the schools hesitated to admit them. CDD sensitized and trained the teachers, and provided ongoing support, which eventually led to their successful enrollment and participation in school. Mariam and Jubayer continued receiving HBE. They got disability ID cards and allowances, their carers received training and IGA support. They both passed SSC, began to understand their rights and barriers. They soon became active participants in advocacy initiatives, eager to contribute to the community, particularly those with deafblindness. In 2019, NRCDB team visited India and learnt about the youth deafblind network. Later that year, they participated in the National Conclave of Deafblind Network in Bangalore. Inspired, they played key roles in forming youth groups for persons with deafblindness in 2020, in Bangladesh. These groups became platforms for local and regional advocacy, where Mariam and Jubayer honed their leadership and digital literacy skills through CDD's training programs.

Mariam, now a successful tailor with her own home-based business, recently married and began a family—a dream that once seemed impossible. Jubayer, a 3rd year honors student at the National University, now tutors local children, earns his own income and is looking forward to a bright future. By February 2024, these two who once struggled to communicate within their families stood on ICEVI's stage confidently as panelists, voicing their journeys and epitomizing empowerment, demonstrating how with the right support, one can become stronger and more confident, especially in voicing opinions and claiming rights.

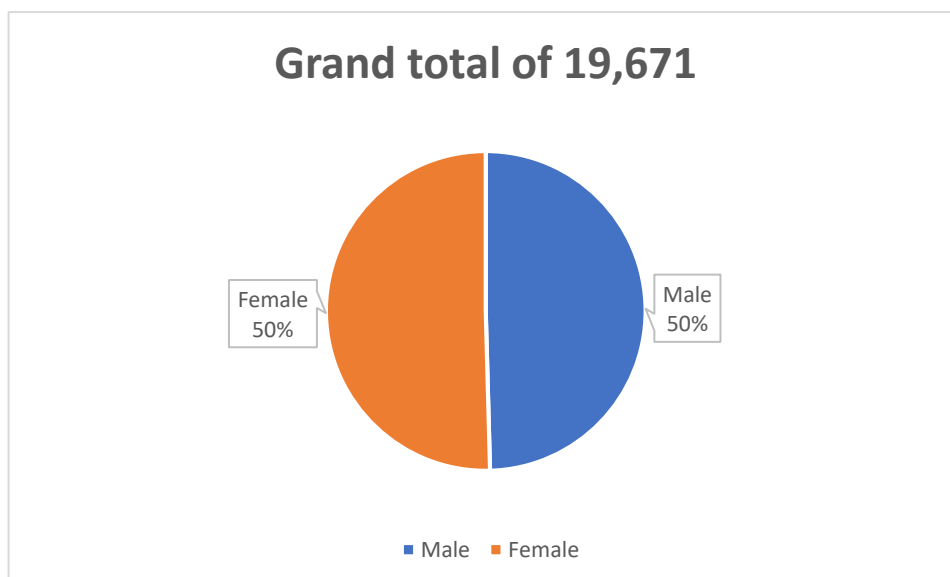
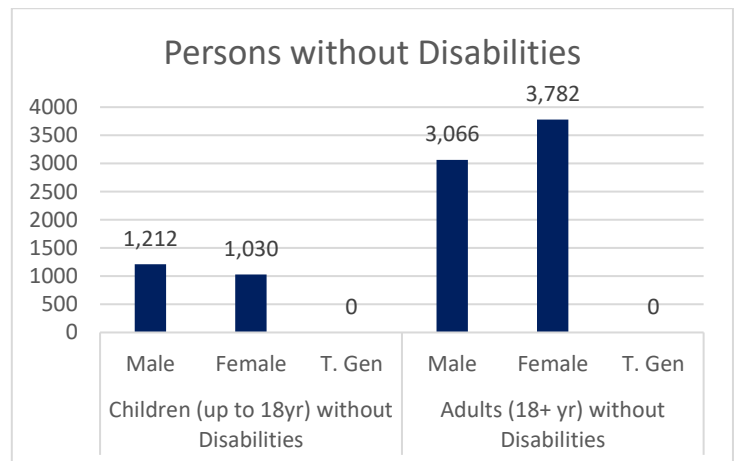
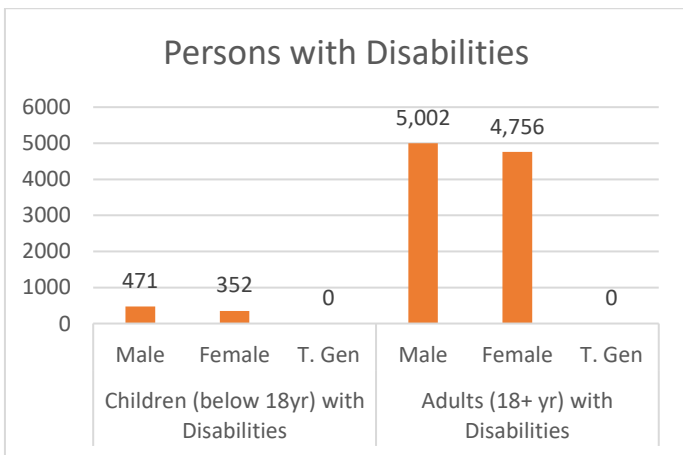
PROTRACTED CRISIS:

Humanitarian Response for FDMNS and Host Community in Cox's Bazar

Addressing the needs of Forcibly Displaced Myanmar Nationals (FDMNs) and host communities in Cox's Bazar, including Bhasan Char. We deliver inclusive humanitarian assistance, focusing on health, education, livelihoods, and WASH, ensuring the dignity and rights of all affected individuals.

Over time, CDD expanded its reach to Ukhiya, Teknaf, and Ramu, offering comprehensive, multidisciplinary rehabilitation services both at static centers and through door-to-door service outreach.

These efforts provided support to persons with disabilities, enabling them to access physiotherapy, occupational therapy, and psychosocial counseling directly in their communities. In collaboration with local health systems, CDD integrated rehabilitation services into two upazila health complexes, promoting a more inclusive health service delivery model. This integration helped bridge the gap between emergency response and long-term development, ensuring continuous care for those affected.



Besides, direct service provision, CDD has engaged local government bodies and mainstream organizations in disability inclusion initiatives. By collaborating with these entities, CDD ensures that the needs of people with disabilities are recognized and addressed across various sectors. These partnerships have been crucial in promoting a culture of inclusivity, where the responsibility of supporting individuals with disabilities is shared by all.

Through its comprehensive and inclusive approach, CDD has not only improved the quality of life for people with disabilities in Cox's Bazar but has also acted to promote an inclusive society, capable of withstanding future challenges and ensuring that no one is left behind.

Protracted Crisis: Rohingya Camp & CDD's Interventions

As of January 2024, approximately 975,350 Rohingya and FDMNs are living in various camps in the Cox's Bazar district of Bangladesh, including those who came in the 1990s. , the Rohingya refugee crisis in Bangladesh has evolved into a prolonged humanitarian emergency (protracted crisis). It has strained Bangladesh's resources, leading to local tensions.

CDD made necessary changes and adjustments to its services, shifting its focus from center-based to home-based approaches. Currently, under different funding partner support, including Humanity & Inclusion (HI), CBM Global, and Save the Children International, CDD provides multi-disciplinary rehabilitation, including hearing, visual, protection, and SRH services in 11 Rohingya camps. Besides the rehabilitation services, CDD is also working with different humanitarian actors and has formed Disability Support Committees to promote disability mainstreaming in the Rohingya response.

CDD's Milestones in the Rohingya Response and Host Communities (2017-2024)

2017: Laying the Foundation

1. Conducted a comprehensive needs assessment under ASB.
2. Initiated vital services through a mobile van in the Community.
3. Distributed essential Non-Food Items (NFIs), including blankets, to those in need.
4. Launched a one-stop center offering rehabilitation, health, and Mental Health and Psychosocial Support (MHPSS) services, with support from CBM.
5. Established a Child-Friendly Space (CFS) in Camp 18 to support children's well-being.

Funding Partners: HI, ASB, and CBM.

2018: Expanding Reach and Resources

1. Extended services to the host community, broadening the impact through mobile van.
2. Conducted Real-Time Evaluation
3. Conducted life-changing cataract surgeries, restoring sight to many.
4. Started home-based rehabilitation services, ensuring care reached those who needed it most.
5. Established a new office in Cox's Bazar to enhance operations.
6. Undertook strategic planning within the Age and Disability Working Group (ADWG).
7. Initiated disability-inclusive education activities, with support from UNICEF.
8. Initiated project for tortured victim supported by UNOHCHR
9. Increased human resources from 50 to 175, strengthening CDD's capacity.

Funding Partners: CBM, IOM, HI, UNOHCHR, and UNICEF.

2019: Strengthening Advocacy and Inclusion

1. Activated Disability Inclusion (Di)
2. Promoted inclusive education in emergencies, supported by UNICEF.
3. Formed the Age & Disability Working Group (ADWG) to amplify voices.
4. Inclusive WASH Project supported by Arche-Nova.
5. Established Self-Help Groups (SHGs) to empower the community.
6. Underwent an external evaluation conducted by Rooted Impact.

Donor agencies: HI, CBM, Arche nova, UN-OHCHR, IOM.

2020: Adapting to Global Challenges

1. Relocated the office from Cox's Bazar to Ukhiya to optimize operations.
2. Completed 100,000 service sessions, marking a significant milestone.
3. Implemented tele-medicine, tele-rehabilitation, and tele-counseling services.
4. Revised operational strategies for greater effectiveness.
5. Phased out Basic medical services, adapting to new needs.
6. Conducted cochlear implantations to restore hearing through referral process.
7. Started activities with AHP consortium project
8. Formed SHGs in host communities and Disability Support Committees (DSC) in camps.
9. Participated in government-led visits to Bhasan Char during the initial Rohingya relocation.

Donor agencies: HI, CBM, UNOHCHR, AHP, ASB.

2021: Enhancing Inclusive

1. Launched the Outreach Rehabilitation Model initiative ("Flying Team") for wider reach.
2. Conducted the REACH study, assessing inclusion needs and assistive technology.
3. Developed a Rohingya sign language video with 200 words, promoting communication.
4. Established a strategic partnership with the Bangladesh Red Crescent Society (BDRCS).

5. Implemented an Inclusive Feedback Reporting Mechanism (IFRM) to ensure accountability.
6. Started disability-inclusive Disaster Risk Reduction (DRR) initiatives to build resilience.
7. Strengthened the capacity of government officers to better serve the community.
8. Provided disability inclusion expertise as a peer reviewer in the Joint Response Plan (JRP).
9. Formed and strengthened 16 Self-Help Groups (SHGs), fostering community empowerment.
10. Provided critical support during a fire incident, demonstrating crisis readiness.
11. Implemented disability-inclusive Local Government Initiatives (LGI) for broader impact.
12. Provided insurance support for staff, ensuring their well-being.

Donor agencies: HI, CBM, AHP.

2022: Scaling Up and Deepening Impact

1. Introduced home-based inclusive protection and nursing services for personalized care.
2. Introduced DCR-Pterygium and other eye surgeries, expanding health services.
3. Started project in Ramu & Bhasan Char.
4. Expanded the team to over 200 staff members, increasing capacity.
5. Formed 6 new SHGs in Ramu and Chakaria, strengthening local support networks.
6. Conducted a needs assessment at Bhasan Char to inform future interventions.
7. Started a project on inclusive Impact-Chain-Analysis (ICA) at Baharchara, broadening CDD's reach.
8. Expanded collaboration with HI in both the host community and Rohingya response.
9. Launched the ASB project in the host community, enhancing local govt. engagement.
10. Celebrated 5 years of successful operations, reflecting on achievements.
11. Established and maintained 2 Apex Bodies for sustained leadership.

Donor agencies: HI (BPRM, GFFO & UNHCR), CBMG, GIZ, AHP, & ASB.

2023: Innovating and Leading

1. Hosted an international webinar on World Humanitarian Day 2023, sharing insights globally.
2. Released the first printed publication, "Coping with Adversity," detailing CDD's interventions.
3. Started hospital-based physical and functional rehabilitation services in Ramu, Chakaria, and Bhasan Char.
4. ISCG took over the Advocacy Working Group (ADWG), reforming it into the Advocacy Technical Working Group (ADTWG).
5. Conducted an accessibility assessment at the UNHCR office to improve inclusivity.
6. Launched an Accessibility Project funded by UK Guernsey, advancing infrastructure.
7. Supported institutional modifications with UK Guernsey funding for better services.
8. Included recreational MHPSS intervention techniques and creative therapy for holistic care.
9. Made significant amendments to staff service contracts, ensuring fair treatment.
10. Responded to cyclone incidents in Teknaf and Ukhiya, demonstrating disaster resilience.
11. Installed multipurpose SHG offices to support community-led initiatives.
12. Employed paid community interns from the host community, fostering local employment.
13. Formed partnerships with Malteser International and Aktion Deutschland Hilft (ADH) for host community interventions.
14. Provided Income-Generating Activity (IGA) support to 50 host community members, promoting self-reliance.
15. Initiated a community outreach eye program, expanding healthcare access.
16. Formed a partnership with Save the Children, enhancing collaborative efforts.
17. Established a training archive management system for better resource utilization.

18. Launched IGA interventions as part of the MOCHA response, supporting livelihoods.
19. Marked the first presence in Bhasan Char, extending CDD's reach.
20. Signed a data protection agreement with HI and UNHCR, ensuring data security.
21. Conducted house and toilet repairs as part of the MOCHA cyclone response, improving living conditions.
22. Held a public dialogue to ensure service provider accountability.
23. Enhanced security-related data recording and systems, bolstering safety.
24. Conducted advocacy with the Upazila Health Complex, raising awareness and conducting health camps.
25. Provided Prosthetics and Orthotics (P&O) and hearing aids in Bhasan Char, improving quality of life.
26. Managed a UNHCR-funded project in the Rohingya response, delivering critical services.
27. Managed data collection using KOBO Toolbox, improving data accuracy.

Donor agencies: GIZ, HI, CBMG, AHP, GFFO, UNHCR, UK Guernsey & UNOHCHR

2024: Pioneering Disability Inclusion

1. Initiated the Disability Inclusion Working Group in Bhasan Char, leading efforts in the region.
2. Formed an ASB-ADH-CDD partnership for both the host community and FDMN (Forcibly Displaced Myanmar Nationals).
3. Secured budget allocation and implementation for persons with disabilities through a Union Parishad advocacy initiative.
4. Revised Human Resource (HR) policy for the Cox's Bazar operation, enhancing organizational effectiveness.
5. Introduced and linked an adolescent corner at the Upazila Health Complex, addressing youth needs.
6. Mobilized over BDT 85 crore funds to date, reflecting sustained financial success.
7. Developed Joint Project with IRC

Donor agencies: HI (BPRM, GFFO, UNHCR), CBMG, AHP, UK Guernsey, IRC (BHA)

Journey of a Tortured Rohingya Survivor



Ali (alias), a 63-year-old Rohingya man from Buthidaung, Myanmar, suffered unimaginable hardship following the persecution of the Rohingya in Myanmar in August 2017. One night, while he and his family slept, the military attacked their village, setting fire to houses. In an attempt to save their lives, the man and his family fled their burning home but were caught by the army and beaten mercilessly. Eventually, the family managed to escape into

the jungle and, after a harrowing journey, made their way to Bangladesh in search of safety. Later on, he and his family took shelter in Rohingya camp 8W, Cox's Bazar. As a result of inhuman torture, he sustained severe injuries to his left leg and hand, which restricted him from performing activities of daily living and made him dependent on his family members. The CDD Home-Based Rehabilitation team, under the United Nations Voluntary Fund for Victims of Torture (UNVFVT) supported project, identified him in a bedridden situation. The Rehabilitation Officer (Physiotherapist) conducted a clinical assessment and prepared a therapeutic plan based on the assessment. After that, they started providing regular therapy to improve his physical strength, mobility, and functional capacity.

The Physiotherapist also involved his wife in the process and taught her some basic home exercises so that she could continue the exercise at home. Additionally, appropriate assistive devices such as a toilet chair, lumbar corset, and walking aids were provided to improve his functional independence. He also received Mental Health and Psycho-Social Support from the project to enhance his mental well-being and help him recover from the severe mental trauma and memories of his torture. After completing his rehabilitation process, the man experienced significant improvements. His pain reduced, and his mobility and independence increased, allowing him to reengage with his community. This story reflects the resilience of a man who has survived severe adversity and now strives to rebuild his life.

Illuminate the Path:

When Jomil, a children from Rohingya Community visited CDD for a visual screening, the refractionist identified that he had a severe refractive error. As a result, spectacles were planned and later provided to him to address the vision concern. Initially, Jomil faced some challenges adapting to its, but with continuous use, it became easy and helpful. Now, the spectacles are an essential part of his daily life, making it much easier for him to navigate and move around. Moreover, after using the spectacles, studying became less challenging.

Understanding the importance of a supportive learning environment, the CDD team also visited his learning center and engaged with his classmates, sensitized the teacher, and advocated for Jomil's needs. Adjustments were made to his seating arrangements, and the teacher was asked to use larger letters on the board to enhance visibility. With the improved vision, Jamil gained confidence and excelled in his studies, ranking third among 31 students. The positive change was not confined to the classroom; Jomil now confidently participates in sports, attends mosque prayers, plays with friends, and contributes to everyday activities.



It is Possible to Live a Better Life with Down Syndrome:



A Story of Inclusivity and Triumph Asma Bibi, a five-year-old girl from one of the world's largest refugee camps, was diagnosed with Down syndrome and speech delay at a young age. Initially, Asma could only say basic words like “Ma” and “Baba,” and she faced significant challenges communicating her needs and interacting with others, including her siblings. Life in the refugee camp, already difficult, was made even harder by these limitations.

However, thanks to the Centre for Disability in Development (CDD) at Camp 16, her life began to change. With several sessions under the guidance of Speech and Language Therapist (SLT) Mrs. Jumera Rahman and unwavering support from her family, Asma began to show remarkable progress. She gained the ability to express her essential needs, started communicating with her younger brother, and even initiated social interactions with her peers—things that seemed impossible just a short time before. Asma’s mother expressed her immense gratitude to CDD, stating that she never imagined her daughter would be able to talk, play, and move like other children in the camp. She described the experience as life-changing for her family, and her gratitude often moved her to tears.

Asma’s story stands as a testament to the transformative power of therapeutic intervention and parental dedication. CDD’s work in the refugee camps, in collaboration with UNHCR and Handicap International, focuses on providing specialized services for people with disabilities. Their programming includes physiotherapy, occupational therapy, speech and language therapy, and various recreational activities aimed at integrating individuals into society. CDD operates across several camps, including Camps 5, 6, 15, and 16, as well as Bhasan Char, utilizing a home-based approach for the most vulnerable individuals. The organization has been active in the Rohingya crisis response since 2017 and has become one of the most significant early responders in the disability sector.

As of July 31, 2023, CDD’s SLT section has provided services to 167 individuals, transforming lives like Asma’s and pushing forward their mission of inclusivity in the harshest conditions.



Advancing Disability Inclusion along with Humanitarian Actors: Experience with IOM

As part of collaborative Efforts to create more inclusion of persons with disabilities by the other humanitarian actors at Rohingya Response initiatives at Cox's Bazar., CDD provided training on inclusive humanitarian action, disability sensitization, and accessibility to various mainstream humanitarian actors in Cox's Bazar. Among the organizations participating in these training sessions, the International Organization for Migration (IOM) played a significant role due to its active involvement in the response efforts. Through ongoing capacity-building efforts and IOM's commitment to disability inclusion, the organization integrated these principles into their activities. IOM, engaged in site management, site development, and other activities, arranged Accessibility Audits to assess service access for diverse groups at various service centers in the Rohingya camps. With the support of CBM, CDD provided orientation on the audit process, involving Disability Support Committee (DSCs) members who are persons with disabilities, sector focal points, and conducted accessibility audits across various camp facilities, including distribution points, child and women-friendly spaces, health facilities, learning centers etc. including those operated by IOM.

Following the audits, IOM organized a workshop in Cox's Bazar to present the findings and recommendations from the accessibility audits. These recommendations aimed to enhance access to facilities and services for persons with disabilities. The collaborative efforts between CDD and IOM have led to significant advancements in disability inclusion and accessibility in the humanitarian response. As different organizations began to adopt these modifications, persons with disabilities now have improved access to services tailored to their needs, and caregivers. This positive outcome signifies the importance of continuous improvement and collaboration in creating inclusive environments where everyone can live with dignity.

INTERVIEW

01. CDD's colleagues with disabilities: Interviewed by George Sarkar



SK Golam Mohiuddin, Disability Inclusion Officer, Ukhiya, Cox's Bazar, conducting training session

Question1: Could you please share your career journey and experiences with CDD? What a Journey from an Admin Assistant to Disability inclusion Officer

SK Golam Mohiuddin: "I joined CDD on July 1, 2003, as an Admin Assistant after completing computer and PABX operating training at the "Vocational Training centre for the Blind" (VTCB). An internship at CDD led to a permanent role at their Savar headquarters. Although the executive director believed I was overqualified for the position, he encouraged me to stay and promised future growth. In 2005, I transitioned to the Training Department as a Training Assistant, was promoted to Assistant Coordinator

in 2007, and then to Associate Coordinator in 2015. Throughout my career at CDD, I have worked on numerous projects, focusing mainly on training, rights-based initiatives, and education,. From 2019 to 2022, I was a Training Officer for the "Innovation to Inclusion (I-2-I)" project, collaborating with various industries, business centers, technical training institutes, and disability organizations. Currently, I serve as an Inclusion Officer in the Rohingya Response Program, to promote disability inclusion. Another important aspect of my role involves working with student brigades, teachers, and school management committees on disability awareness to promote inclusive education.."

Question 2: Could you please describe your experience with CDD's disability-inclusive work environment?

SK Golam Mohiuddin: "CDD offers an exceptional work environment for people with disabilities, setting it apart from many national organizations. While I haven't worked elsewhere, I've learned from colleagues in other organizations that such a disability-friendly atmosphere is rare. At CDD, inclusion is not just a policy but a practice embedded in our daily operations. The organization goes to great lengths to accommodate the unique needs and limitations of individuals with disabilities taking affirmative actions. As a member of the inclusion team, we focus on collaborative support. While we prioritize our project work, the team's commitment to inclusion is equally important. If a colleague has a limitation, others step in to provide support, creating a balanced and supportive work environment. This culture of mutual support ensures that everyone can contribute to their fullest potential. CDD's management is highly attentive to fostering an inclusive atmosphere, actively engaging with staff to address any needs. Their dedication to inclusivity is evident, and I am deeply appreciative of their efforts. I am grateful to be part of an organization that truly values and promotes inclusivity at all levels."

Question 3: Could you please share your contributions to CDD's ongoing initiatives?

SK Golam Mohiuddin: "I spoke from my workplace about our efforts in disability inclusion and my role in capacity building. Many people, including staff from other organizations and educators, can benefit from this knowledge to better support disability inclusion. Not everyone understands the skills needed for effective inclusion, and that's where we make a significant impact. Even when I'm not directly involved in a project, my presence as a person with a disability in various settings sends a powerful message to society. It challenges the misconception that people with disabilities are unable to contribute or work effectively... I'm proud to play a part in changing attitudes and demonstrating that people with disabilities can make meaningful contributions. This shift in mindset is a testament to the growing recognition of the capabilities of people with disabilities. It brings me immense satisfaction to be part of this change."

02. CDD's colleagues with disabilities: Interviewed by George Sarkar

Question 1: Could you walk me through your career journey with the Centre for Disability in Development?

Md. Abdul Hai: “My career with CDD began on May 2, 2021, as a "DPO Consultant" for the Rohingya Response Program, after being selected through a competitive interview process. DPO, or Disabled People's Organization, now known as the Organization of Persons with Disabilities (OPD), focuses on empowering persons with disabilities. In this role, I worked closely with Self-Help Groups (SHGs) and Disability Support Committees (DSCs) in both the host community and the Rohingya camps... From January 2022 to March 2023, I served as the OPD Focal Point, where I continued my focus on capacity building for SHGs and DSCs. Since March 12, 2023, I have been working as a "Disability Inclusion Officer" on the MFAT-Five Phase project, funded by the New Zealand Government. As a Disability Inclusion Officer, I also conduct training for humanitarian actors. Since the beginning, I have been a member of the accessibility audit team and work closely with the Age and Disability Technical Working Group (AD-TWG) and the Protection Sector.”



Md. Abdul Hai, Disability Inclusion Officer, Ukhiya, Cox's Bazar, conducting training session

Question 2: Could you please share your experience with CDD's disability-friendly work environment?

Md. Abdul Hai: “As a person with a disability, working at CDD is incredibly fulfilling due to their commitment to creating an inclusive environment. CDD understands the unique challenges faced by people with disabilities, whether in the workplace or during field visits, and ensures we have the necessary support. This level of understanding and support is rare in other organizations. For instance, all our office facilities, including restrooms, are fully accessible, addressing a significant challenge that people with disabilities often face in our country. From accessible desks to inclusive infrastructure, every aspect of the office is designed to accommodate our needs. Working at CDD means being in an environment where I feel valued and supported. This thoughtful approach not only makes my job easier but also makes me proud to be part of such a progressive organization. It is this environment that truly enables people with disabilities to thrive, and I am grateful to CDD for providing it.”

Question 3: Could you please share what you have been contributing to at work?

Md. Abdul Hai: “Since my student days, I have been deeply involved in the disability rights movement, advocating for the rights of people with disabilities. As a person with a disability myself, I find great fulfillment in my work. As a Disability Inclusion Officer, I organize various training sessions, and it's rewarding to see people's reactions when I speak about disability inclusion. They often listen with surprise, realizing that change is possible. My own experiences navigating and overcoming barriers provide a unique perspective that resonates with others. When I share my story, it reassures them that the challenges I faced won't be the same for the next generation. People see me as an example—someone who, despite facing physical challenges, completed university and now works as a Disability Inclusion Officer. This shifts their mindset, helping them realize that with the right support, their children can achieve the same. Families often relate to our experiences, seeing that if we could overcome obstacles, their children could too. It's about changing perceptions and demonstrating that with support and opportunities, people with disabilities can thrive.”

FEATURE ARTICLE

Strengthening Disability-Inclusive SRHR: A Collaborative Training Initiative between CDD and RHSTEP

In order to ensure that persons with disabilities have access to inclusive Sexual and Reproductive Health and Rights (SRHR), CDD and Reproductive Health Services Training and Education Program (RHSTEP) have been working together to mainstream disability in SRHR initiatives. This partnership has focused on developing mutual capacities while CDD provides support to RHSTEP in disability inclusion within their existing programmes and RHSTEP provides their years of knowledge and expertise of SRHR to CDD to strengthen its SRHR capacities.

As a part of this collaboration, RHSTEP hosted two batches of training for CDD's staff and partners. The first training session took place from June 24 to 25, 2024, followed by the second batch from July 15 to 16, 2024. These trainings were thoughtfully designed to provide participants with a comprehensive understanding of SRHR, particularly from a disability-inclusive lens. In addition, a significant portion of the training focused on Gender-Based Violence (GBV), with a particular emphasis on the heightened risks faced by women with disabilities. The discussions highlighted many barriers that still exist in addressing GBV for this vulnerable group and the need for targeted interventions.

Overall, the trainings helped to increase awareness, knowledge, and skills among CDD staff, OPDs and partners, equipping them with the tools needed to advocate for and implement disability-inclusive SRHR services.

Gender Equity in **SIGHT**

According to a cross-sectional survey conducted in 2013, the female population and the rural population had higher rates of blindness in Bangladesh, as it lacks adequate community-based eye care facilities (IAPB, 2022). Quality and affordable eye care services to preserve sight for people of all income groups, including patients, mainly women, are excluded from the mainstream health care remains missing in the rural community. Women have less access to eye care facilities, which are typically located at the district level, due to social restrictions on their mobility and the reliance on male family members for health care decisions and finances (Orbis, 2023). The experience of Malteser-CDD humanitarian response project, has strong evidences and learning in this regard.



Women are in a queue to enter into the dark-room for their eye-test in the free outreach eye-screen camp at the project location.

The project-participants were provided a lumpsum amount of transportation support to travel to the camp-spot where they accessed free eye-screening at their proximity. This intervention significantly increased the uptake of eye-care services by women. It is seen, this project's contribution for the impoverished females of the host-communities directly advances United Nations Sustainable Development Goal #5 Gender Equality.

With project support we were able to help **1430** people get their eyesight checked at the proximity, required treatment and eye glasses and medicines, transcending barriers to vision care

This project contributed in reaching a good number of female (in the project location) who were facing avoidable blindness and other associated eye-health issues.



Total Eye-Sight Checked

1430



Total Cataract Surgery Patient

127



Total Prescription Glasses Distributed

634



Total Persons Received Eye Medication

1127

The **box** illustrates the supports received by the women and men in the project location.



948 - 482



74 - 63



412 - 222



680 - 447

Note: The following icon represents



Male (M) and Female (F)



CDD's Inclusion Officer is encouraging mental courage to the women who were selected for eye-surgery before undergoing the



Women who had underwent surgery listening eye care advices after dressing in the morning from CDD volunteer in the

Rotna Barua (33-year-old) has been married for 16 years and a mother of a 14-year-old son and a 10-year-old daughter. She is the only bread-winner of her family of four members. Rotna has been working to make a living to support her family by doing community-work.

As a worker of the Local Government (LG)-facilitated Rural Employment and Road Maintenance Programme-3, she works in the maintenance of rural road from where she earns BDT 5,000 per month. She leads a team of 8 women who provide their day-labour to maintenance the road through the hilly areas.

Her husband has no regular income rather he depends on Rotna's income. She is not fortunate either to be looked after and cared by her husband as she is regularly tortured by her alcoholic husband who takes her money to buy local alcohol.

Rotna Barua has been suffering from eye-health issues for last two (02) years. As she works in the field, it becomes difficult for her to cut soil under the sun because of the Pterygium growth on her left-eye. Rotna has difficulty in cooking using firewood since the smokes that come out of the stove causes burning in her eyes. As the community-worker, it is difficult for her to use spade to cut soil for road maintenance under the scorching sunlight amidst wind and dust.



Rotna Barua (33)



A consultation meeting with Rotna along with her fellow community public female-workers.

"My vision started to deteriorate but having treatment was not an option for me because I could not afford it. Then, in August 2023, I learned about a free eye-screening camp at our village. My eyes were examined and my Pterygium growth was identified. I had my surgery done at the Cox's Bazar eye hospital. I am very thankful for this support to help me to cure my eye-ailment. This is huge for me. Now, I am able to perform my road-maintenance job with ease which is my only way to bear my family expenses."

- Rotna Barua (33)



"I am able to perform my road-maintenance job with ease which is my only way to bear my family expenses."

Rotna returned to her work with her cured eyes.

Nilima Chakrobarty, an educated 75 years old woman. She had to leave her homeland (Bangladesh) during the liberation war of 1971. But she returned to the independent Bangladesh after the war. Due to this, she could not complete her Matriculation Examination. She dwells in a bamboo-made house with her only son and his family on top of a hilly area at Rankut, Rajarkul, Ramu. Her only son who is a priest and subsists through alms and charitable offerings by the neighbor Hindu community.

Nilima is being eye-screened through an autorefractor by a doctor at the eye hospital.





Ms. Rakhi Barua, Project Focal, is in a conversation with Nilima Chakrabarty to listen her personal stories at her home after her visual recovery.

Cataract had blurred Nilima's vision in her both eyes for many years and it caused troubles in her daily-life chores. Being a Brahmin Hindu-widow woman, she follows strict vegetarian meal since her husband had passed away. She was reluctant to perform eye-surgery as she would have to take meal from the hospital, as would require her to compromise her rituals. It is one of the reasons for her to be living with blurred vision. Another reason for her deteriorated eye-health condition, she was unable to arrange incurred cost for her eye treatment.



After surgery, the son (on left) and daughter-in law (on right) came to visit Nilima at hospital (in the middle, with a white bandage over her eye) with cooked meal from home for their mother.

But, coming at the eye camp, seeing many other same people, the counselling of CDD staff, as well as knowing all the arrangements offered by CDD, at last, this elderly woman agreed to undergo the much needed bilateral-surgery. After the successful surgery, she took meal in the hospital that was brought by her son and daughter-in law from her home.

"I received eye glasses and I am now able to help again my granddaughter with her studies after regaining my clear vision."



'Finally, I had my surgery. I received eye glasses and I am now able to help by granddaughter in her studies. I can cook my own meal too without support of my daughter-in law. My son is happy to see me independent again. I am happy and I bless you all from the bottom of my heart.'

- Nilima

Noni-Bala Barua (70), Anowara Begum (65), Anita Sharma (68), Aysha Begum (60)– all these destitute females are employed under Government's public works, giving them income opportunity and they receive per day cash-wage for each working day. Each of them is widow, without any asset of their own and has to work hard at this age to meet every day needs and meal. With this small hard-earning income, they are supporting their dependents such as their daughters and grandchildren.

Anowara Begum with new eye glass (on the left) and



All of them, struggled to make their living due to declining eye sights that made their everyday work harder. Cataract, presbyopia, or pterygium in their eyes makes their seeing difficult and as such, reducing their work ability. After cutting soil using a spade, while carrying the baskets full of soils on the head to fill the road, they used to stumble in the broad day light many times and that made their work hard and harder each day.

Protracted phase of the Rohingya Crisis has brought another layer of crisis in their everyday lives to meet the cost of living. They have to compromise their daily comforts let alone eye health until cataract creates serious impediment to perform her “Cash for Work” labour. Visiting eye doctors from their village to the city was too expensive. They were more inclined to traditional healings.



Anita Sharma



Aysha Begum

However, they were learned one day by the community worker that CDD and MI supported project organizing free-eye screening and required eye treatment in combination with transportation support for travelling to hospital from village. Owing to MI-CDD project intervention, in September and October 2023 they underwent free cataract surgeries at Cox’s Bazar Bytush Saraf Hospital and received prescription eye glasses as well. Now, life becomes much easier for them to be engaged in daily income activities. Community-based outreach eye screening programmes brought them unexpected blessings in true sense.

For women in low- and middle-income countries like Rotna Barua, Noni Bala Barua, Anowara Begum, Anita Sharma, Nilima Chakraborty, Ayesha many of whom are living on less than \$2 a

day, the ability to see clearly (with their eyes) is a lifeline to increased productivity and the ability to earn an income, advancing SDG#5: Gender.

Here, in the backdrop of protracted Refugee crisis, positive impact of such project intervention to cope with growing economic challenges for the women in the host community is significant and meaningful. It is more than just correcting vision; it is about restoring dignity, independence, and the ability to fully participate in daily activities.



After recovering from eye surgery, Anita Sharma (in the middle with a pair of new eye glasses) and Ayesha Begum (on left, with a pair of new eye glasses) along with Archona Dhor (Mocha support recipient) returned to Cash for Work programme on 28 December at Ramu, Cox's Bazar.

SIGNIFICANT EVENTS

01. 'National Dissemination Workshop on Sharing and Review of the Findings of Impact Chain Analysis of Critical Infrastructures of Health':

This event was organized on September 30, 2023 at the auditorium of BRAC Centre Inn, Mohakhali, Dhaka by iICA & RID) project. The Centre for Climate Change & Environmental Research (C3ER), BRAC University, presented the key note findings of the research. While the Additional Secretary (Development Wing), Ministry of Environment, Forest and Climate Change (MoEFCC) and other distinguished guests from ministries of Government of Bangladesh were present at the event.



02. National Conference on People-First Impact Method (P-FIM):



The event held from October 30-31, 2023, that aimed at enhancing the use of P-FIM across the communities in Bangladesh. Under the ToGETHER project, with the support of Malteser International and German Humanitarian Assistance, the conference took place at Hotel Bengal Blueberry in Dhaka, bringing together 50 participants from 14 organizations in Bangladesh.

03. International Carers Day:

On October 19, 2023, CDD observed this event under the Carers project. The participants (700 carers) of the programme stood in front of the BIAM Auditorium, Dhaka in order to demonstrate a human-chain to celebrate the day and for expressing solidarity of the rights of the carers of persons with disabilities. The objective of the event was to create awareness on the role of carers of persons with disabilities and the challenges they face.



04. South-South Exchange Workshop:



This event was organized in Thailand by ToGETHER project. The event held on November 21 2023. This workshop brought together 45 participants from four countries (of the project) including representatives from five Local Humanitarian Partners (LHPs). The workshop aimed to share good practices and learnings in humanitarian action. Mr. Nazmul Bari moderated a session in the workshop where he led a productive discussions and knowledge exchange among participants.

05. Building Effective Network (BEN)

Building Effective Network (BEN) is a strategic partnership model by Liliane Fonds aimed at creating an equitable and effective network of partners through a holistic, multi-year programme. The goal is to address the root causes of exclusion by implementing a community-based rehabilitation approach that fosters stronger relationships between different institutions and actors surrounding the child. BEN leverages complementary expertise from various organizations and aims to empower children, youth, families, communities, and organizations for persons with disabilities (OPDs). The program begins with a comprehensive context analysis and the development of a

Theory of Change to inform the Multi-Annual Plan. This plan outlines the network's governance structure and the expertise needed to successfully implement BEN. To advance the development of the MAPP, Liliane Fonds and CDD held a three-day workshop from May 27 to May 29, 2024. The workshop aimed to define the goals and key activities of the 5-year program.



06. Liliane Fonds Partner Meeting:



Liliane Fonds, convened a successful partner meeting in Kampala, Uganda, from June 17 to June 21, 2024. The gathering aimed to strengthen collaborative efforts across borders in advancing their mission. Mr. Erik Ackerman, Director of Liliane Fonds, inaugurated the event on June 17, emphasizing the importance of collective action and partnership. Key attendees included Mr. Nazmul Bari, Director of CDD, and S M Ali Has Nain Fatme, Program Manager at Liliane Fonds, who actively contributed to discussions throughout the week. The agenda covered a diverse array of topics, including Building Effective Networks

(BEN), Community Based Rehabilitation (CBR), and Advocacy Strategies.

DONOR AND DELEGATE VISIT

01. ASB Nicaragua team visit CDD Bangladesh



Under DiDRRN project, a learning-sharing visit took place where the ASB Nicaragua team came to visit CDD Bangladesh (Jatrapur Union, Kurigram, Bangladesh) from November 12 – 17, 2023. This this learning-sharing visit presented a unique opportunity for each country to learn from each other. It also gave opportunities to test and reflect on what worked and what did not in different contexts.

02. Ruth Patil, Development Director at Carers Worldwide:

Ruth Patil, Development Director at Carers Worldwide, made a visit to the Carers project of CDD from February 12-19, 2024. She visited all the elements of carers model being implemented through the Carers project and meet the carers of different platforms. Aside from that, Ruth Patil attended a research project launching ceremony event which is being conducted in collaboration with the Queen University in Kingston, Canada and Carers worldwide.



03. Senior team members from USAID Bangladesh visit CDD



Senior team members from USAID Bangladesh, Dipti Das, Sonjai Reynolds-Cooper, Tanzila Tasnuva, Sudeb Kumar Biswas, and Barry Gill visited USAID Shobai Miley Shikhi project activities in Khulna division. RTI International Representative and CDD project team members were also present in the same visit. The visit was from February 27-29, 2024 and the specific visit locations were Phultola, Khulna and Debhata, Satkhira.

04. Visit of the Country Director, CBM Bangladesh

Mr. Mohammed Zahidur Rahman, the incoming Country Director at CBM Bangladesh Coordination Office, made a visit to Camp 8W and Rajapalong of Ukhiya upazila, Cox's Bazar on March 10, 2024 under the CBM Own Fund project. During this visit, CBM Bangladesh Coordination Office's outgoing Country Director, Mr. Wara and Rohingya Response Manager, Mr. Shajjat Hossain were also present. During the visit, the visitors oversaw the centre-based and home-based rehabilitation services in Rohingya camp and discussed about the challenges and future scope of work. Mr. Mohammed Zahidur Rahman spoke with a project participant and observed a hearing and visual screening camp where he discussed with the service providers as well.



05. MFAT team visited MFAT project activities in the host community of Ukhiya



To observe the New Zealand government-supported programmes in the Rohingya Response, two members of the humanitarian team from the Ministry of Foreign Affairs and Trade (MFAT), New Zealand visited Bangladesh On May 16, 2024. Visiting members were Mr. James Marsh, Policy Adviser, Humanitarian and Disaster Management, Ministry of Foreign Affairs and Trade in Wellington, New Zealand and Mr. Richard Hannah, Lead Adviser - Humanitarian and Disaster Management, Ministry of Foreign Affairs and Trade in Wellington, New Zealand.

06. Visit of Mr. Thierry Aqagliate, one the friends of CDD

On May 08, 2024 Mr. Thierry Agagliate, Executive Director of InZone visit CDD headquarters. InZone is a hybrid academic and humanitarian program of the University of Geneva, offering both online and on-site courses to refugees. He is a good friend and well-wisher of CDD. Mr. Thierry has vast working experience in humanitarian response. Previously, he worked as Regional Director of Handicap International. Mr. Thierry visited Bangladesh on a scoping mission to explore opportunities to expand InZone's learning activities for Rohingya youth, particularly in advanced courses on Community Health in Cox's Bazar. During his visit, he met with several major humanitarian organizations and visited the Rohingya camps. CDD coordinated and organized various meetings and the camp visit for him.



07. Lucy Reeve, Program Manager for Disability Inclusive Development (DID) at Sightsavers, UK, visit to the DID TO45 project



On August 27, 2023, Lucy Reeve, the Program Manager for Disability Inclusive Development (DID) at Sightsavers, UK, made a visit to the DID TO45 project site in Narsingdi. Lucy Reeve visited and attended a meeting with a government primary school involved in the DID TO45 project. The meeting highlighted the real-world impact of the project, showcasing the progress being made towards more inclusive and accessible education. The final part of the visit was her participation in a coordination meeting with key government officials, including the Assistant Director of the Department of Social Welfare and

Upazila Education officers.

08. Senior-leadership team of the Bangladesh country office of HI visited CDD:

Senior leaders from Handicap International Federation-Humanity and Inclusion visited the static centre, operated by CDD, in Camp-6 under the 'Inclusive Emergency Assistance to the Crisis-affected Rohingya Population in Cox's Bazar and Bhasan Char' project on August 21, 2023. The team consisted of Rajesh Chandra (Country Director), Sibghatullah Ahmed, (Operations Manager), Ram Prakash (Ukhiya Area Manager), and Afrida Hoque (Team Leader, Camp-16). The objective of the visit was standard monitoring & quality check by HI.



RESEARCH WORKS AND KNOWLEDGE PRODUCTS

01. Disability Inclusive Resilient Livelihood (DiRL) project



The DiRL project, in partnership with CBM Global Disability Inclusion, conducted a feasibility study in Dhobaura of Mymensingh and Mehendiganj of Barishal. The title of the study was, 'Livelihood Feasibility Study to Find out the Gaps of Livelihoods Services for the Persons with Disabilities in 2 Districts (Mymensingh & Barishal).' The study identified potential pathways for economic empowerment for persons with disabilities. The study's recommendations focus on tailored livelihood programmes, financial inclusion, vocational training, and community-based support systems.

02. Impact Chain Analysis for Risk-Informed Development Planning for Healthcare Sector in Bangladesh (ICA & RID).

In partnership with GIZ, this project was implemented in Teknaf Municipality and Baharchara Union of Teknaf Upazila, Cox's Bazar District, Bangladesh. Under this project, Centre for Climate Change & Environmental Research (C3ER) of BRAC University conducted a study with the title, 'Inclusive Impact Chain Analysis for Risk-Informed Development Planning for Healthcare Sector in Bangladesh (ICA & RID).' The C3ER of BRAC University produced a knowledge document titled, 'Final Report: Inclusive Impact Chain Analysis for Risk-Informed Development Planning for Healthcare Sector in Bangladesh, (ICA & RID).'



03. Resilience Strengthening of Vulnerable Populations in Northern, Western & Eastern Bangladesh through a Network Approach of 5 Partners Organizations (BMZ-PT & MI) project,



A land capability and crop suitability study were conducted between December 2023 to January 2024 with the title, 'A Study to Conduct Research on the Soil to Identify the Land Capability and Crop Suitability (Khontkata Union, Sarankhola, Coastal Region Sundarbans areas in Khulna).' The study was undertaken in three specific locations; Golbunia, Rajoire and Baniakhali which are part of the Khontakata union in the Sarankhola upazila of the Bagerhat district in Khulna, Bangladesh. The study sought out to measure the physiochemical properties of the soil, land characteristics, and identify the main barriers to cultivating different types of crops and to identify the most suitable crops for cultivation and determine the optimal cultivation methods for this land. The study was carried out in collaboration with Khulna Agricultural University, Khulna.

04. Outreach Rehabilitation Team: Expanding Rehabilitation Reach in Underserved Areas

CBM Global Disability Inclusion, Bangladesh (CBMG) and the CDD implemented a pilot model aimed at bringing much-needed rehabilitation services to communities that lack access to rehabilitation services. This model was designed to fill significant gaps in healthcare by integrating outreach rehabilitation teams with existing primary healthcare providers, ensuring that persons with disabilities receive the care they need. Based on the success of the model, a group practice documentation has been published with the title, 'Outreach Rehabilitation Team: Expanding Rehabilitation Reach in Underserved Areas.' The document highlights one of the key lessons learned from this pilot such as working together with primary healthcare providers greatly improves the quality of care for persons with chronic, complex, or severe health conditions.



CDD Assistive Device Centre



Since 2008, CDD has started to produce different types of high-quality assistive devices for persons with disabilities through its production center at CDD headquarters. On average, yearly, 1,000 assistive devices are produced by a skilled and experienced group of technicians trained at home and abroad. Among its Metal and Wood (M&W) and Prosthesis and Orthosis (P&O) units, the M&W unit can produce more than 70 types of assistive devices,

including wheelchairs, tricycles, trolleys, walking frames or walkers, crutches, walking sticks, toilet chairs, special seating chairs, corner chairs, standing frames and tables, balance boards, puzzle sets, wedges, and pillows. Mattress, therapy bed and stair, parallel bar, lumber roll, lumber corset, cervical pillow and collar, low vision kit, and BEKAS box with teaching and learning materials. In addition, P&O devices include ankle foot orthosis AFO, knee ankle foot orthosis KAFO, knee orthosis KO, foot orthosis FO, spinal orthosis, different types of braces and splints, Trans Femoral or Above Knee (TF/AK) Prosthesis, Knee Disarticulation KD Prosthesis, Trans Tibial or Below Knee (TT/BK) Prosthesis, Symes or Partial Foot PF Prosthesis, Trans Radial or Below Elbow BE Prosthesis (functional and cosmetic).

CDD established a country-wide network with different stakeholders to ensure quality assistive device service and continues creating awareness on assistive devices. Through the network, AD Center produced and distributed 706 different types of assistive devices among the persons with disabilities in this reporting year. Various NGOs and INGOs, private companies, a government organization—Jatiyo Protibondhi Unnyan Foundation (JPUF), the National Social Welfare Council, and wealthy individuals were the clients and users of these devices. These assistive devices transform the lives of persons with disabilities countrywide



CDD Training Institute (CTI): Commitment to Deliver Quality Services



The CDD Training Institute (CTI) is dedicated to delivering high-quality training services aimed at promoting disability inclusion across mainstream development organizations. CTI offers tailored training courses in both online and offline formats, covering a wide range of topics such as rights and empowerment of persons with disabilities, inclusive education, disability-inclusive disaster management, and project management for NGO professionals. With expert facilitators leading the sessions, CTI has earned recognition for developing

training manuals and IEC materials for government and non-governmental organizations. In the reporting year, CTI conducted 51 physical training batches, engaging 850 participants, including 211 persons with disabilities. Additionally, 10 online training batches were completed with 94 participants. CTI's capacity allows it to host two residential training batches simultaneously and organize non-residential sessions for larger groups. CTI's services extend to organizations like the British Council, BRAC, and The Asia Foundation, providing outreach training and accessibility assessments. CTI remains a central hub for advancing disability-inclusive practices in development initiatives.

The topics that CTI can organize and facilitate training courses are as following:

- Rights, Empowerment, Formation and operation of Self-Help Groups of Persons with Disabilities
- Provision of Rehabilitation Services and Assistive Devices
- Communication (sign language and Braille)
- Disability Inclusion in Mainstream Development Organization
- Inclusive Education (pedagogy, teaching learning methods, school and classroom adaptation)
- Disability Inclusive Disaster Management, Climate Change Adaptation and Humanitarian Actions; Search, Rescue and Evacuation for the first responder and volunteers
- Disability Inclusion in Local Government Institutions (elected members)
- Disability Inclusive Livelihood
- Disability Inclusive Project/Program MEAL
- Comprehensive Accessibility
- Disability mapping and identification (WGQs and designing tools)
- Awareness Raising through Social Communication
- Peer responders for persons with mental health needs
- Advocacy for Policy Implementation, Amendment and Development
- Soft skills for Increasing Employability
- ToT on facilitation skills & Presentation and public speaking skills
- Project Management for the NGO Professionals
- Job Preparation for the Private Sector.



LIST OF PROJECT

General projects:

01. Child Empowerment Programme (CEP),
02. Supporting Meaningful Inclusive Learning Environments for Deaf Children in Bangladesh (SMiLE),
03. Disability Inclusive Resilience Livelihood (DiRL),
04. 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 (Carers Project),
05. Strengthening local climate-sensitive and universal WASH capacities using and disseminating the Green Humanitarian Aid approach,
06. Resilience Strengthening of Vulnerable Populations in Northern, Western & Eastern Bangladesh through a Network Approach of 5 Partners Organizations (BMZ-PT & MI Project also known as RSVP-BD)),
07. Inclusion of People with Disabilities in Digital Services (IPDDS),
08. Education, Learning and Skills for People with Deafblindness in Bangladesh,
09. District Inclusive Eye Care Program (DIECP),
10. Strengthening systems for the enrolment, retention and support of children with disabilities at primary level of mainstream education of Bangladesh (Shikhbo Sobai),
11. Disability Inclusive Development TO45- Shikhbo Sobai,
12. Shobai Miley Shikhi Activities (SMSA),
13. MIVA Additional Grant 2023 (SPO – Strategic Partner Organization),
14. MIVA Block Grant Mainstream 2023- Bangladesh,
15. MIVA Project Disability Specific 2023- Bangladesh,
16. Strengthening Resilience in South and South-East Asia by Integrating Risk Management, Social Inclusion and Socio-Economic Development,
17. Putting Person with Disabilities at the Centre of Humanitarian Preparedness and Response implementing Bridge-Putting Persons with Disabilities at the Centre of Humanitarian Preparedness and Response (B-PPDCHP&R),
18. Humanitarian Operation and Innovation Facility (HOIFA)

Rohingya Response and Host Community projects:

01. Provision of integrated comprehensive support to persons with disabilities and other vulnerable people while strengthening the capacities of humanitarian actors through inclusive humanitarian action and coordination. (HI-GFFO),
02. Inclusive Humanitarian action for the protracted crisis of the Rohingya and the host community in Cox's Bazar (CBM Own Fund Project),
03. Access to Rehabilitation Services and Disability Mainstreaming for the Rohingya Crisis (MFAT-6),
04. Ensuring the overall well-being and resilience of Rohingya and host community in a protected environment where children can learn and thrive (AHP-4),
05. CDD-HI-UNHCR(Cox's Bazar Ukhiya&BC),
06. Inclusive specialized services for vulnerable persons including persons with disabilities in Cox's Bazar Rohingya camps and host communities (Phase II Y-2),
07. Advancing social dignity and self-reliance of Rohingya Population and Host community affected by the refugee crisis through improved health, rehabilitation, wellbeing, and economic opportunities,
08. Improved health for People with Disabilities living in Cox's Bazaar,
09. Functional wellbeing of Rohingya Victims of Torture,
10. Accessible and Equitable Health Care and enhanced citizen engagement for 1500 marginal population, including Person with Disabilities at Host Communities in Cox's Bazar, Bangladesh impacted by the Rohingya Crisis and Cyclone Mocha,
11. Increased Access to health facilities & rehabilitation services as well as development opportunities to the host communities in Bangladesh Affected by the Displacement of the Rohingya Population,

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

Statement of Financial Position
As at June 30, 2024

Particulars	Notes	Amount in Taka	
		30-06-2024	30-06-2023
PROPERTY & ASSETS:			
Fixed Assets (At Cost)	3.00	137,753,817	135,978,462
Less: Accumulated Depreciation		81,005,704	77,045,467
		<u>56,748,113</u>	<u>58,932,995</u>
Current Assets:			
Advance	4.00	1,531,018	4,529,237
Advance Income Tax	14.00	-	977,855
Security Deposit	5.00	10,795	10,795
Cash and Bank Balances General Fund	6.01	17,995,164	9,010,278
Cash and Bank balances Projects	6.02	54,534,273	48,318,397
		<u>74,071,250</u>	<u>62,846,562</u>
Total Asset:		<u>130,819,362</u>	<u>121,779,557</u>
FUND & LIABILITIES:			
Fund Account	7.00	42,581,444	42,591,891
Current Liabilities:			
Loan	8.00	22,077,199	20,659,417
Provision for Income Tax		-	977,855
Liabilities	9.00	8,637,301	9,231,996
Balance of Projects Grant		54,534,275	48,318,397
Transferable Project Fund		2,989,143	-
		<u>88,237,918</u>	<u>79,187,665</u>
Total Fund and Liabilities:		<u>130,819,362</u>	<u>121,779,556</u>

1.00 Figures have been rounded off to the nearest taka.
2.00 Annexed notes form part of the accounts.

Md. Mahbub Karim
Accounts and Finance Incharge
CDD

Signed in terms of our separate report of even annexed.

A. H. M. Noman Khan
Executive Director
CDD

Toha Khan Zaman & Co.
Chartered Accountants
Registration No.4/52/ICAB-72

(Md. Kamal Uddin, FCA)
Senior Partner
Enrolment No.164

DVC.....

Date: Dhaka
17-September-2024

