

**WOMEN WITH DISABILITIES  
RELIGION BASED COMMUNITY INTEGRATIVE PROGRAMS**

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## **Abstract**

In a third world developing country like Bangladesh it is estimated 3.4 million children and 10 million adults living presently with disabilities amongst which a large proportion of them are children and adolescents. They mostly reside in rural areas, where they face serious discrimination for being female, disabled and poor. They are stereotyped from both a gender and disability perspective which perpetuates and legitimizes not only multiple forms of violence perpetrated against them, but a failure of the government at all levels to recognize and take action on the issue. The neglect of them are severely reflected in their participation in their public and private lives. They are a social embarrassment and considered a liability to their families and therefore, are often psychologically and physically abused and sometimes they are targets of social stigmatization and discrimination.

It is a fact that one of the social groups that have been most dynamic in using technology innovatively for social progress has been the disabled. With the growing importance of new movements - such as the disability movement, or those concerned with independent living- information technology has become an important part of envisioning and realizing change to daily life for individuals , as well as the architecture and systems of community and society. Social implications of technology now plays an indispensable role in social and political organization ,online around welfare issues, in state and private administration of welfare, in processes of identity-formation concerning welfare.

The objective of this paper is to develop a comprehensive socio-economic analysis of the status of adolescent girls with disabilities in Bangladesh and propose to initiate information technology based programs for them with disabilities which will help them to integrate in mainstream society whilst also establishing their basic human rights. Furthermore it will discuss the universality of these rights and illustrate that even the Holy Quran had been revealed 1400 years ago, its divine laws are applicable even in this era of modernity.



## **1. Physical Disability: a global concern the disability concept**

The development of the WHO International Classification of Impairments, Disabilities, and Handicaps (ICIDH) was an important & critical step in better understanding the concept of disability. However, since its first publication in 1980, there has been considerable debate over its formulation & about its practical application in a world, which refuses to fit into neat and definitive classifications.

By and large the ICIDH had paid little attention to some of the very important sociological and political aspects of disability. Consequently, it appeared to lack the sensitivity to some of the real issues faced by disabled people – for it gave credence to viewing disabled people as the problem – helpless and dependent, sick and needing medical treatment, and as tragic victims of fate.

It needs to be recognized that disability, in part, is an experience of oppression and of difference. Without an acknowledgement of this experience, no definition or concept of disability will ever fully reflect the real issues faced by people with disabilities.

After nine years of international revision efforts coordinated by the WHO, the World Health Assembly in May 2001, approved the International Classification of Functioning, Disability and Health (ICF). ICF is a classification of health & health related domains that describe: (a) body functions & structures; (b) activities & participation; and (c) environmental factors. The domains are classified from body, individual and societal perspectives.

## **2. Global Situation**

There are approximately 650 million persons with disabilities in the world, or 10 per cent of the global population. An estimated 80 per cent of these persons live in developing countries, many in conditions of poverty.

In both developed and developing countries, evidence suggests that persons with disabilities (PWD) are disproportionately represented amongst the world's poor and tend to be poorer than their counterparts without disabilities.

It is estimated that of the world's poorest people, meaning those who live on less than one dollar a day and who lack access to basic necessities such as food, clean water, clothing and shelter, 1 in 5 is a person with disabilities.

[ Ann Elwan, "Poverty and disability: a survey of the literature"(World Bank, 1999) <http://siteresources.worldbank.org/INTPOVERTY/Resources/WDR/Background/elwan.pdf>.]

According to UNDP estimates, an average of 8.5 million severely or moderately disabled people are added each year to the total global figure, which approximately amount to 23,200 people a day. Such figures point to the urgency of finding answers how best to provide services and to promote integration, equal opportunities & human rights for people with disabilities.

Given that persons with disabilities represent such a significant portion of the population, and are more likely to live in poverty than their peers without disabilities, ensuring that they are integrated into all development activities is essential in order to achieve international development goals.

There is a strong bidirectional link between poverty and disability. Poverty may cause disability through malnutrition, poor health care, and dangerous living conditions. Case studies in developing countries show that higher disability rates are associated with higher rates of illiteracy, poor nutritional status, lower immunization coverage, lower birth weight, higher rates of unemployment and underemployment, and lower occupational mobility.

Disability can cause poverty by preventing the full participation of persons with disabilities in the economic and social life of their communities, especially if the appropriate supports and accommodations are not available.

In addition to representing a key target group under Millennium Development Goal 1 ("Eradicate extreme poverty and hunger"), persons with disabilities are also key targets when considering each of the other Goals.

The United Nations Educational, Scientific and Cultural Organization (UNESCO) estimates that 98 per cent of children with disabilities in developing countries do not attend school. Women with disabilities experience twice the amount of discrimination as women and as persons with disabilities. Children with disabilities in poor developing countries often have little or no access to health care. Many maternal health facilities around the world lack staff with knowledge for providing care to pregnant women with disabilities, and information on the topic is scarce. Effective strategies to combat diseases such as HIV/AIDS and malaria include the provision of health education, prevention and promotion; however, this information is often not available in formats accessible to persons with varying types of disabilities. Issues of environmental sustainability are particularly relevant to persons with disabilities who may have less capacity to adapt to environmental changes in their surroundings.

Among the persons with disabilities, a large number of people are visually impaired. According to UN Economic and Social Council, Over 40 million people in the world are blind, and over 120 million people have significant Low Vision conditions that cannot be



corrected, cured or treated by conventional refraction, medicine or surgery. This number is expected to double by the year 2020.

(World Health Organization, 2004)

Over ninety percent of visually impaired people live in developing countries like Bangladesh. Less than fifteen percent of these visually impaired people in developing countries have access to vision enhancement or vision rehabilitation services that could help to change their lives.

There are over 1.4 million visually impaired children between the ages of 0-14 years. The vast majority of visually impaired children with low vision conditions in developing countries like Bangladesh are sent to schools for the blind despite having usable vision because they don't have access to or cannot afford vision enhancement or vision rehabilitation services that could help them integrate into regular schools.

A visually impaired adult or child can be trained, with the help of Vision Enhancement, Vision Rehabilitation and Assistive Technology and low vision aids to perform most daily tasks more confidently at home, in school, in the playground, in the kitchen and at the work place, in a safe and independent manner, if only they were aware and could easily access and afford such services.

### **3. Policy Support**

Persons with disabilities continue to be largely absent from international development efforts, and there is an urgent need for existing and future partnerships for development, addressed by the eighth Goal, to include them in all activities.

The Millennium Development Goals, in fact, cannot be achieved if persons with disabilities are not included in these efforts. We are now at the halfway point to the target date of 2015, yet in The Millennium Development Goals Report 2007, persons with disabilities as a group are not mentioned, and the issue of disability is briefly mentioned twice.

The Human Development Report 2006 discusses persons with disabilities within the development context of sanitation. It is hoped that current efforts to integrate disability within the United Nations system will increase the importance of persons with disabilities in such reports in the future.

Meanwhile, efforts to incorporate and include persons with disabilities into the development activities have been gaining momentum over the past several decades. For example, in 1997, the United Nations, in collaboration with the National Research and

partner at the Washington, D.C.-based law firm of Powers Pyles Sutter & Verville PC (<http://www.ppsv.com/>), said “The Digital Accessibility and Inclusion Index for Persons with Disabilities will offer a unique benchmarking tool and document laws, policies, and programs pertaining to ICT accessibility for policy makers around the globe. This is a much needed resource as digital accessibility becomes a central issue for all persons with disabilities worldwide.”

## **5. Disability Situation in Bangladesh**

Statistics on the prevalence of disability in the country has always been a matter of debate. Till date there is no data on disability matters that is widely accepted by all concerned. Government findings based on surveys conducted in 1982, 1986 and 1998, estimated a national prevalence rate of 0.64%, 0.5% and 1.60%.

Incidentally, sample surveys conducted by national and international NGOs in the country found prevalence rates to be much higher than Government findings. Bangladesh Protibandhi Kallayan Samity (BPKS) records disability prevalence rate at 7.8%, Action-Aid Bangladesh and Social Assistance and Rehabilitation for the Physically Vulnerable put the figure at 8.8%.

A recently conducted Prevalence study of Handicap International (HI) and The National Forum of Organizations Working with the Disabled (NFOWD) on a sample population of 13,205 people all over Bangladesh found 5.6% as prevalence rate of disability. ([www.worldenable.net/cbr2005](http://www.worldenable.net/cbr2005)) Some international statistics that are considered while calculating the prevalence rate of disability in the country are UN estimations that states that 5% of world population is people with disabilities and WHO's estimation that this figure is 10%. If these figures are calculated for Bangladesh, the number of people with disabilities should range from a minimum of 7 million to a maximum of 14 million, based on the country's population of 140 million.

People with disabilities are amongst the most vulnerable of the disadvantaged groups of people in Bangladesh. Most of them receive little or no development assistance. Therapeutic services and availability of assistive devices are also extremely limited. The people with disabilities are left out of the development process mainly due to lack of awareness of people who design and implement development programs, negative attitudes amongst the general population prevalent towards people with disabilities, scarcity of resources and lack of knowledge and skills on how to address the needs of people with disabilities inside development programs.

The limitation of resources restrains many organizations to initiate and expand rehabilitation and other services for people with disabilities. Government initiatives in this area are also inadequate. Training organizations have inadequate capacity to train and



develop rehabilitation workers in the country. Assistive devices are not available at the community level. Most of the assistive device centres are city based and the cost is too high. Due to poverty many of the people with disabilities cannot afford to travel long distances to reach the service providers and receive their services. Professionals like physiotherapists and occupational therapists are few in number in the country. Most of them are able to find employment in the big cities. As a result almost none exist at the local level. Principal caregivers mainly mothers and other female members of people with disabilities lack the very basic skills required in caring for their family member(s) who are people with disabilities.

Very few people with disabilities are involved in mainstream employment activities. One of the reasons is that a limited number of people with disabilities have the essential professional skills to be involved in economic activities. Vocational training centres hardly provide adapted skill training to the people with disabilities. The development organizations also lack the knowledge or skills to include people with disabilities in their skill development training and initiatives. Besides, insufficient specialist services like Braille, sign, speech therapy, etc, limit their inclusion scopes. Many employers are also reluctant in employing people with disabilities into their work force, mostly due to their ignorance about the potentialities of people with disabilities, negative attitude, the work environment not being accessible, and their lack of interest to renovate or adapt the working environment befitting to people with disabilities.

People with disabilities have limited opportunities to study at educational institutes. Absences of adapted environments like accessible environment, teaching curriculum, methodologies, etc are acting as obstacles in this regard. The teachers lack fundamental training on teaching children with disabilities. The government policies and legislation of disability issues are not properly implemented.

There is lack of self-organization amongst people with disabilities. Different factors are responsible for this situation. Majority of people with disabilities are unaware of their fundamental rights. They are not empowered partially due to their low self-confidence and esteem, lack of education and other inclusion opportunities. Most of them have limited communication, advocacy and leadership skills.

Poverty has a strong influence on the disability situation in the country. About 80% of people with disabilities are living in the rural areas, where poverty is much more intense. For a country like Bangladesh, poor nutrition, dangerous working and living conditions, limited access to health care, poor hygiene, bad sanitation, inadequate information about causes of impairment, and natural disasters contribute to the creation of disabilities, half of which could be preventable as DFID estimates that more than 50% of the impairments that result in people being included in current disability prevalence rates “are preventable



and directly linked to poverty". Poverty, impairment and disability also have impacts on families. For every person who has an impairment and/or disability, 4 to 5 other family members are also affected. These statements indicate that a large section of people in Bangladesh are directly linked to disability as a result of poverty and vice-versa. The poverty situation and scarcity of resources also limits creation of rehabilitation opportunities for people with disabilities and their capacity to access and attain much needed services. DIB study reflects that 68.9% of people with disability cannot seek medical or rehabilitation assistance due to economic hardships. The same study also found that 96.7% of people with disabilities did not get any help from organizations. All these are suggestive of the millions of people with disabilities in Bangladesh who are not receiving much needed support mainly due to poverty conditions.

In 1998, the Bangladesh Bureau of Statistics estimated that the 13,000,000 people with disabilities in Bangladesh had the following disabilities:

- Visual 31%
- Physical 28%
- Hearing and speech 28%
- Leprosy and goiters 8%
- Mental 5%

The Bangladesh Bureau of Statistics also found that the major causes of disability in Bangladesh are congenital, from unknown causes, caused by wrong treatment or maltreatment, from accidents or disease, resulting from malnutrition or poverty and compounded by a lack of awareness about health and causes of disability.

As Bangladesh makes progress, through its health policies on its infant mortality rate, immunization coverage & general health care, we are likely to experience lower incidences of impairments. However, the gains due to improved health care is likely to be outweighed by the triple effects of increased numbers of impaired children surviving; increased numbers of people incurring impairments due to old age (e.g. cataracts & arthritis) and widespread malnutrition. This compounded with the natural calamities and a constant occurrence of road traffic accidents implies that the prevalence of impairments in Bangladesh is likely to continually rise over-time, although the nature and distribution of impairments are also likely to change considerably.

## **6. CSID study on disability among women and girls**

Centre for Services and Information on Disability (CSID), jointly with the Grameen Trust, recently conducted an intensive study on situation of disabled women and adolescent girls with disability. The study team after compilation of all data received through questionnaires, focus group discussions and conversations with relevant individuals and review of case studies came up with the following findings. These reflect situations of disabled girls and women shown in different areas of concern.

### **a. Types and Degrees of Disability**

The findings as per the breakup of disability among girls with disabilities and women with disabilities appear broadly the same. The major group has physical disability, 37.33% among adolescence, and 40% among women. Speech and hearing, visual and intellectual follow this. Multiple disability were seen the least at a compiled figure of 10%. One of the significant reasons for identification of such high percentage of physical disability might be the increased visibility of the physically disabled in comparison to other disabilities. This means that the other disabilities tend to be more invisible in society.

In the compiled figures on degree of disability, the highest figure was seen at 'moderate', at 36.13%. The lowest was at 'profound', at 9.35%. The interesting point to note in comparison was at 'severe', where the increase in percentage from a girl with disabilities to a woman with disabilities is eye-catching. Reasons for this could be that due to lack of proper care and services a steady deterioration of the state of disability occurs for girls and women with the passage of time. As the figure shows that the percentage of multiple and profoundly disabled are much lower than moderate, it reflects the scope of inclusion in the development process of a larger percentage of adolescent girls and women with disabilities.

### **b. Treatment**

93.33% of girls with disabilities and 97.50% of women with disabilities have at some stage of their lives received some kind of treatment due to their impairment and disability. In time as it unveils that no cure is possible, most families become hopeless and refrain from seeking essential services for girls and women with disabilities. This disillusionment pays a heavy toll on the girls and women with disabilities. The families of the interviewed girls and women with disabilities have sought treatment from a varied range of sources. The family members paid 89% of the treatment costs.



### **c. Education**

Disability is a barrier to education. Only 3.75% have proceeded on to university education in the women with disabilities group. The highest enrollment can be seen in primary school at 21.25% for women with disabilities and 30.67% for girls with disabilities.

A massive 64% (average figures of girls with disabilities and women with disabilities combined) dropout rate occurs from the primary to secondary level. 36.06% of the women with disabilities and 36.58% of the girls with disabilities were either teased or their ventures to study were not supported by other members of their surrounding environment. The study did not have much scope to find out the reasons for such high rate in dropouts. It demands further in-depth study on the particular issue.

People concerned with education management and family members are the basic factors for isolation of disabled persons as a whole in the prevailing system of education. Most of the girls and women with disabilities who are receiving education attend in formal educational facilities with the provision of free primary education. The second largest group attends non-formal educational facilities because of the low cost, flexible environment, convenient time, relaxation of age limit, use of appropriate teaching materials/ curriculum, and continuous assessment systems. Enrolments in special education facilities are much lower, it being expensive, not fully accessible due to far distances and being urban based. Persons with hearing, visual, intellectual and multiple disabilities have to face various problems for enrollment in such facilities.

The school authorities refuse disabled learners to enroll into their educational institutions because of doubts on their potentials and the lack of proper policies.

Accessibility to educational institutions is one of the major problems for girls and women with physical disabilities. Disabled girls residing in hostels face problems due to absence of female house parents which limits sharing of feminine and other essential needs. The most humiliating thing is that the teachers are also involved in teasing their disabled learners. Community people and even the school teachers do not have proper knowledge, training or understanding about disabilities, as there are no such scope for giving orientations on disability issues.

In spite of all these inconveniences and handicapping environments, girls and women with disabilities have potential to be in mainstream education. Some are in educational processes where their disability is not visibly identified.

#### **d. Employment**

It was discouraging to note that hardly any (3.21%) from the two groups were involved in full time income generating professions. 64.52% were sitting idle with no work. However some of them, especially the women with disabilities (21.88%) were still earning some through different activities. Although the number is not mentionable, women with disabilities are involved in multi-sectoral jobs like official jobs, teaching, small businesses, day laborers, housemaids, handicraft workers, dairy & poultry workers, sewing, house-hold works etc. In most of the cases they managed to perform the jobs themselves.

There is still disparity in the rate of wages and salaries in comparison with the non-disabled employees working with similar capacities of output. Terminations from employment without showing any reasons happen quite often. Educated women with disabilities, even after attaining university degrees could not manage jobs. They were in many cases refused the job.

Some instances provide a good environment of mutual respect to the women with disabilities. The employing organizations are very considerate about the evaluation of the employee regardless of their disability and non-disability. But such instances are very few. There are many instances that disabled people have stronger commitments and dedication to their responsibilities as they have the determination to overcome their limitations.

The girls and women with disabilities are some times considered as an extra burden to their colleagues and employers. They are often teased and blamed for the simplest of issues. Physically disabled workers are facing problems due to inaccessible physical environments. Communication problems occur severely for the hearing impaired workers. Mobility is one of the major limitations for the visually impaired workers. This is due to the absence of proper building plans and also mobility orientation.

The income of the disabled women or girls is mostly spent in meeting the family needs but their family and society do not always encourage professions for disabled girls or women.

#### **e. Marriage, Conjugal Relationship and Dowry**

The establishments of romantic relationships rank very high in life's priorities for most women. The study looked at personal factors, such as attitudes toward marriage, behavioral aspects, the effect of disability on the partner's behavior; environmental factors, social attitudes and family expectations. Situations are reversed in cases of disabled women or adolescents. Arranged marriage is still customary in Bangladesh



society. The percentage of adolescent marriage is 48% (ref. Afrin R, 2000). This is discouraging, yet the family can find a spouse. The rate of marriages of adolescents with disabilities is only 2%. One of the major causes of the frustration in disabled women and their families is, people are hesitant to marry a disabled girl. There are superstitions that the presence of a disabled person in the family will bring misfortune to the whole family. There is a common belief that disabled women are not contributing to the family and are a burden instead.

Most of the marriages of disabled women took place due to providing big amounts of cash, or kind, even land as dowry. There are psychological influences on women with disabilities in regards to marriage. Women and girls with disabilities in overprotective families are usually discouraged not to be involved in activities where they could learn social skills. This could be considered as a barrier for disabled women to expose their potentialities that in turn limit their scope of marriage.

#### **f. Community and Family Attitudes**

Overall development of a disabled girl or woman depends on surrounding attitudes. Mothers are mainly blamed for giving birth to a disabled child. Disabled children, the girls or women in particular are not equally treated as other non-disabled members in the family. In many cases the girls or women with disabilities do not have access to family decisions, even in the case of their own children.

In cases of positive attitudes from the family, and others concerned in society, the disabled girls or women seem to be more confident and have success in life while the negative attitudes made the disabled girls or women depressed, dependant and with low self-esteem.

It was recorded that only 7.10% participated in games and sports. A larger, yet still negligible 26.13% participated in social activities. Even though figures state that actual participation is low by women and girls with disabilities, but in terms of their intention to participate, the response is satisfactorily high. 53.5% reported that they were interested to participate, while only 7.5% commented that they would never like to participate.

In the adolescence group, the families with members in between 6 to 10 number highest with figures of 80 (53.33%). Families followed this with members in between 1 to 5, numbering 65 (43.33%). For a larger family it is possible to share the care-time required for the disabled family member. We cannot be overprotective about our disabled family member and yet also not careless. All the family members have equal responsibility and role towards all other family members inclusive of the member with disability. It is essential that all family members understand the disability of their family member and the situations.

## **g. Abuse**

The thematic aspect of abuse has been defined in this study as i. Emotional abuse: Being threatened, terrorized, or verbally assaulted, ii. Physical abuse: In any form of violence, iii. Sexual abuse: Being forced, threatened, or deceived into sexual activities or rape. Women with disabilities appear to be at high risk for emotional, physical, and sexual abuse. The prevalence of any abuse of girls and women with disabilities was 92% for both. About the same proportion of women with disabilities compared to girls with disabilities reported emotional abuse (78% and 75%), physical abuse (82% for both), and sexual abuse (32% and 37%). (The following figures have been derived from case studies and peer group discussions).

In many cases parents abused the girls and women with disabilities. Most of the sexual abuses turned out among the girls and women with intellectual disabilities. In the second frequency of sexual abuse towards girls and women with disabilities comes to hearing impairment. People take this advantage meaning that the hearing and speech-impaired people would not be able to communicate to others. This is surprising to note that the traditional healers sexually abused disabled girls and women in the name of therapy or treatment. The abused girls and women even their family members do not feel comfortable to express any abuse because of social aspects.

## **h. Reproductive health**

Most of the girls or women are not very aware of the issues or phases of reproductive health. People identified disability particularly of the women with disability as a risk factor for reproductive health. Society is conservative to discuss reproductive health issues. The parents do not share any sexual and reproductive health issues with their daughters. Most of the adolescent girls get ideas about the phases of physical development and transitional period from peers, elder sisters, sister-in-laws, grandmothers etc. Majority of the girls with disabilities had serious problems of shock, phobia, depression, and embarrassment while facing periods. Especially the girls with speech and hearing impairments face difficulty to pass through this menstrual cycle due to limited communication.

## **i. Physical growth**

Natural physical growth is a normal development process in the human body due to hormonal changes. The physical change also occurs with changes in behavior and attitudes, but in cases of the intellectually disabled, the family did not expect such physical changes and became worried. The psychology of girls and women with disabilities is dependent on many emotional, environmental and social factors such as, self-assessment, personal acceptance, family and social attitude, isolation, etc.



## **j. Psychological Phenomenon**

The psychology of girls and women with disabilities is dependent on many emotional, environmental and social factors such as, self-assessment, personal acceptance, family and social attitude, isolation, etc... Many girls and women even with minor disabilities are facing problems of acceptance in their families.

Segregation from the society and family were common features for girls and women with disabilities in many cases. In many cases the girls and women with disabilities were segregated from their work places.

It is evident that the girls and women with disabilities are deprived of their basic human rights like food, clothes, education, treatment etc that creates negative influence to the overall psychology of disabled women and girls. Sexual abuses, in many cases have created stressful situations on disabled girls and women, which ultimately made them isolated and frustrated.

## **k. Human Rights issues**

The rights of security of human life has been violated in many situations related to the girls and women with disabilities. They were sexually abused, physically tortured, became disabled due to violence, verbally abused etc. They did not even get the opportunity to demand justice. Moreover, they were blamed as the guilty party because of handicapping environments.

The girls and women with disabilities are usually deprived of getting access to treatment and health facilities. Social beliefs and superstitions in many cases caused such deprivation. They have been deprived of the rights of basic education. The school authorities in many cases refused to enroll the disabled girls although they had potential, which is the violation of rights of education defined in the Declaration of Education for All and the national disability policy.

Communication is the basic human right but there is no such recognized communication mechanism for the speech and hearing impaired persons in the country.

## **l. Ability, Dignity and Self-esteem**

Majority of the girls and women with disabilities including severe levels of disabilities has the confidence to be educated and engage in contributing activities. Many of them have skills in trades like sewing, cooking, painting, handicrafts, tailoring, dairy and poultry raising etc. There are evidences of extra-ordinary achievements by severely disabled women. Some of the girls and women with disabilities who had access to

employment established romantic relationships and are living happily married lives. The self-esteem concerning the girls and women with disabilities is more strongly influenced by social and environmental factors.

### **m. Recommendations**

Based on the findings the study team recommends the following broad areas of actions to be taken by all concerned agencies and individuals:

Facilitation should be made to the development organizations working at community level to initiate counseling and awareness raising programs for attitudinal changes of a community on disability issues. The development organization both government and non-government involved in job creation and skill development should consider the women with disability as priority target beneficiaries.

Organization concerned with mass education on various development issues should initiate general sensitization to create a favorable working environment for persons with disabilities particularly the adolescent girls and women. The development organizations working with disability and the self-help group of disabled people should initiate systematic intervention for such persuasion.

Provision for screening and referral services should be initiated in primary health care services at community levels. This requires systematic inclusion of inclusive education concepts in the curriculum. Developmental organizations concerned with education should take initiatives to motivate local education authorities for inclusion of girls and women with disabilities in regular education programs.

Community sensitization on abuse of girls and women with disabilities should be systematically integrated in general sensitization programs.

[www.worldenable.net/wadbangkok2003/paperbangladesh2](http://www.worldenable.net/wadbangkok2003/paperbangladesh2)

## **7. Visual Impaired in Bangladesh**

According to the 'WHO (World Health Organization)' 10% of the people are physically handicapped. According to this report, about 13 million are physically handicapped in Bangladesh. 50% of this number is visually impaired.

Because of various diseases and different incidents the people are losing their eyesight, such as various problems in the time of pregnancy, illiteracy, superstitions, diseases, incidents and different kinds of causes after birth. Early marriage is the significant



problem of the other causes. Most of the girls become pregnant early. As a result, the mother and the new born baby lose their vision due to the lack of vitamin A.

[Source: Disabled Peoples International < <http://v1.dpi.org/lang-en/resources/details?page=89>>]

According to Dr Gopal P. Pokharel, Sight First Technical Advisor of the Lions Clubs International, Bangladesh, as much as 75 per cent of the world's blind people live in Asia, biggest burden on the earth's largest continent while one percent of them live in Bangladesh. Dr Gopal estimates that 40 to 70 percent blindness in Bangladesh is caused by cataract problems. Diabetes is more dangerous for sight problems in urban life, he says. ( The New Age April 25, 2009)

Shamampti Roy, a promising singer who is visually challenged was known nationally through a singer-searching program organized by a satellite TV channel of Bangladesh. Considering her appeal, Titu Chowdhury started to translate Geetobitan into Braille version. He completed a huge task as the songbook has five volumes containing two thousand and two hundred nice creations of Rabindranath Tagore.

Titu Chowdhury has not done something for Shamampti Roy only, but also done a great job for a number of visually challenged people who were deprived to have the taste of Tagore, the great writer of bangla literature. Admiring the initiative of Titu chowdhury NFOWD, Handicap International and Answer Brand Smith Ltd. jointly sponsored the publication of the book.

Meanwhile, NGOs working for the visually impaired persons have taken initiatives for skill development in Information and communication technology (ICT) which has become, within a very short time, one of the basic building blocks of modern society. The main component of this program is to acquaint students to Computer Screen reading software, speech synthesizers, self-voicing software, using JAWS (Job Access with Speech) for learning Microsoft office program and using DAISY (Digital Accessible Information System) Talking Book, Visually impairment friendly Electronic Books, Novels, Stories and different Policy and Legislations of the country.

## **8. Government and NGO efforts in Bangladesh**

1993 National Coordination Committee on Disability established under the Ministry of Social Welfare

1995 National Policy on Disability approved outlining guidelines for prevention, identification, education, rehabilitation, research and management of the national program

A very recent development however is the introduction of a new monthly allowance scheme from the 2005-2006 fiscal year specifically for people with severe disabilities, under which a total of 160,000 people will receive a monthly allowance of BDT 200 from the DSS.

Apart from the government, approximately 40,000 large to small NGOs are working hand in hand and sharing the responsibility of development in Bangladesh. The major program in which almost all of these NGOs are involved in is Micro-credit, which is also the principal step adopted by the NGOs for their own sustainability. Education programs possibly come in second, and health (with water & sanitation) programs are very common. Gender and development is gradually being recognized widely as a crosscutting development agenda. In this playground, only about 400 NGOs are claiming to work with people with disabilities. But only about 275 NGOs have adequately trained human resources to cater to the rehabilitative needs of disabled people. Most of the others simply have either awareness raising programs on disability, or have casually included disabled people (mostly women) in their respective mainstream micro-credit programs.

Meanwhile, the government has set up "Protibondhi Unnayan Foundation" with an objective to help and accelerate the programs of non-government organizations by giving monetary assistance. Although compared to the gigantic problem the assistance is too meager. However the NGOs are trying their best to develop programs for the disabled in the country. The National Forum of Organizations Working for the Disabled (NFOWD) tries to co-ordinate the activities of the NGOs, provide help to them in some ways, conduct research and organize conferences for bringing awareness amongst the public.

In fact the NGOs are trying their utmost to develop and provide services to the disabled in a country where they are totally ignored and neglected. Many NGOs have established programs for the disabled. Today the NGOs rather than the Government are taking the disability movement forward in Bangladesh. There are a few hundred NGOs who are working for the disabled. However only a handful of them are active, mainly due to lack of finance and knowledge about treatment and care of the disabled.

Bangladesh Government runs a handful of organizations for the disabled girls and boys and adults, along with a vocational training centre in Tongi. Government has established schools for the blind and deaf, one in each district. Each school has a hostel for the blind. Employment Rehabilitation Centre in Tongi has vocational training for both blind and deaf adults. In addition there is a "Hearing Centre" in Tongi catering for various types of services for the hearing impaired individuals. Audiologists and speech therapists from Sweden have trained Bangladeshi technicians to do all the work at the "Hearing Centre" which is equipped with modern facilities for this purpose.



Rehabilitation Institute and Hospital for the Disabled (RIHD) was established in Dhaka by Professor R J Gurst, an orthopedic surgeon, in June 1972, to treat the freedom fighters injured during the Liberation War, on a private capacity. In 1973 RIHD was taken over by the government. It is however very sad that all the government programs at present are totally neglected as the funding has been gradually decreased.

Few hundred non-government programs have been developed by organizations working for the blind, deaf, orthopedically and physically disabled, intellectually disabled, cerebral palsied and others. Some of the programs have been running very well under the guidance of dedicated individuals. Worth mentioning are Centre for the Rehabilitation of the Paralyzed (CRP), Bangladesh Protibondhi Foundation (BPF), HI-CARE, Bangladesh National Society for the Blind (BNSB), Bangladesh Association for the Deaf, SARPV (Social Assistance for Rehabilitation of the Physically Vulnerable), Shishu Bikash Kendro in Dhaka Shishu Hospital are doing commendable job. They are also involved in research.

Some organizations are involved with advocacy and awareness campaign such as ADD (Action in Development and Disability), CDD (Centre for Disability and Development) and Bangladesh Protibondhi Kalyan Samity (BPKS). Most of these organizations are funded by foreign donors. However the non-government organizations are doing far better in assisting the disabled then the government organizations. NFOWD (National Forum for Organizations Working for the Disabled) co-ordinates and financially helps the NGOs. In spite of so many government and non-government organizations working for the disabled thousands of poor disabled children and adults are left out. Due to poverty and malnutrition the disabled infant mortality rate is very high.

Action on Disability and Development (ADD) is a right based development international organization supporting organization of disabled people to campaign for equal rights and to ensure social justice. ADD views disability as a human rights or social issue related to attitude and access to equal opportunities and resists definitions which relates to impairment of an individual .i.e, the social model of disability and opposed to the medical model. ADD works in 13 countries throughout Asia and Africa.

In Bangladesh ADD started working in 1995. At Present ADD is implementing its program in 12 districts of Bangladesh. ADD organizes disabled people in the grassroots level, support disabled peoples organizations and encourage mainstream NGOs to work with disabled people. ADD played important roles in Bangladesh to strengthen the disability movement.

On April 23, 29009, the National Forum for Organizations Working for the Disabled( NFOWD) jointly with the Actionaid, organized a discussion session to create public

opinion in favour of the welfare agenda for the physically impaired persons including an allocation of taka 6.13 lakh in the coming budget.

They also stressed for the establishment of the Disability Intervention Centre under the ministry of health and family welfare.

Referring to the increase in number of school children with disabilities, the NFOWD demanded increases in budgetary allocation in primary education sector at least by another nine crore takas to grant stipend to physically impaired children. An amount of taka 30 lakhs was proposed as a lump sum amount for the promotion of cultural talents among the disabled persons and another 50 lakhs taka for the construction of special facilities at the entrances of all public establishments for easy access of disabled persons.

Campaign for Popular Education (CAMPE) has published a disability orientation booklet on disability 'Karuna Noi Odhikar' in simple Bangla language under Continuing Education (CE) programs.

In order to improve the literacy situation in Bangladesh, government and non-government agencies have adopted large-scale program interventions. As a result, literacy rates have been increasing. However, due to the lack of opportunities to utilize the newly acquired skills, people often relapse into illiteracy. The Directorate of Non-formal Education (DNFE) and NGOs are launching continuing education programs to face this challenge. Publication of this booklet will contribute towards a disability inclusive society from a grassroot level. This publication includes general introductions to disability, types and causes, challenges and potentials of people with disabilities, socio-cultural and political participation, issues of people with disabilities at workplaces, roles and responsibilities of the family and society. It also includes some success stories of people with disabilities as well as some highlights of the Disability Welfare Act 2001. Otherwise known as the Royal Commonwealth Society for the Blind (RCSB), the UK based Sight Savers International (SSI) has been working in Bangladesh since 1973. SSI supports a large number of NGOs for CBR initiatives across the country (focused only on visual impairments), and has recently launched a large national campaign for the prevention of childhood blindness under the global Vision 2020 campaign. SSI is now on the brink of getting involved in the overall national disability development scenario.

## **9. Disability and the religion**

Every religion asks mankind to take the utmost care to those people living in hardship and disadvantageous conditions, either physical, economic or social.



The Holy Quran specifically enjoins the believers to treat the visually impaired with respect and dignity. There is a complete Surah in the Holy Quran that stresses on the importance of treating the visually impaired with admiration and decency.

In the Holy Quran (Surah Abasa Verses 1 to 11) highlights an incident between our Holy Prophet (SAW) and a dedicated sahabah Ibn Um-Maktoom who was also visually impaired .

Hence we need to remember that the creator has attached utmost importance to the visually impaired. He has dedicated a Surah to uphold the rights and dignity of the visually impaired and attached special significance to them.

In his Hadith, our Prophet, peace and blessings be upon him, said: “You are given sustenance and victory for the virtue of those who are weak amongst you.” We, should show mercy and care to the disabled out of both human and religious motives. In Islam, we are commanded to show mercy to everything in this world. In the Hadith: “Show mercy to those on earth so that He Who is in the heavens (i.e. Allah) bestow mercy to you.”

[Source:<http://www.ukim.org/imam.asp?CatID=17>.]

Imbued with the spirit of Islamic guidance, The Institute of Hazrat Muhammad (SAW), a non-governmental organization in Bangladesh, has launched special skill development programs for persons with disabilities.

Persons with disabilities in Bangladesh lag far behind the mainstream development because of their disability as well as of our socio-economic and cultural realities. Hence, ICT can be a significant means of bridging this gap. ICT can be compared to a magic stick that will help our disabled people to leap frog if utilized in a coordinated, planned and appropriate manner, said Abu Sayed Chowdhury, a program coordinator of the Institute. In order to create optimum ICT accessibility for our people with disabilities, a well-coordinated and collaborative effort is inevitable.

With a view to introducing Information Communication Technology (ICT) to the Visually Impaired, students and staff in University of Dhaka organized a three month long training program at Resource Centre of Central Library, Dhaka University in November 2008. The program was initiated by Sightsavers International along with Dhaka University Central Library. The program was conducted by Sightsaver's partner Young Power for Social Action (YPSA), a voluntary organization working for the Visually Impaired persons at national and international levels.

Due to the continuous work in the ICT section, YPSA has become expert on ICT promotion for visually impaired person. This training program is one of the major initiatives of ICT activities in our country. The main objective of this training program is to empower Visually Impaired Student through ICT as well as encouraging them to fight against the forthcoming challenges in the future. These days, ICT has become one of the best solutions to empowering the VI people. Due to unavailability of resources, most of the students are deprived of getting the benefits of ICT.

The main component of this program is to acquaint VI students to Computer Screen reading software, speech synthesizers, self-voicing software, using Microsoft Word, Excel, PowerPoint with JAWS (Job Access with Speech), using DAISY (Digital Accessible Information System) Talking Book, Visually impairment friendly Electronic Books, Novels, Stories and different Policy and Legislations of Bangladesh.

It is to be mentioned that Sightsavers International is working significantly towards empowering the VI people in Bangladesh for long time. In order to establish a Resource Centre in Central Library of University of Dhaka, Sightsavers has taken several steps for the last few years. At last in 2007, their dream has become reality and is now equipped with computers with necessary software, Plectalk (DAISY Book Reader), Perkins Braille, Braille Printer, Braille Display and internet facility. With a view to help the VI student for study and operating computer, the authority of Central Library recruited two disabled personnel.

This training program can be the turning stage of the students if they can practice more and include it in their daily lives. It is expected that more people and organizations will come forward to work for the Visually Impaired persons in our country through which we can go ahead as a developed country.

## **10. Conclusion**

Disability has, and will always remain in our society, with the entire social stigma attached to it. But in the backdrop of all these problems, the silver lining is that the government is showing an increasing interest in the Disability sector, and at the same time, a keen interest to work hand in hand with the non-government sector. But to make some real progress in this field in a developing country like Bangladesh, an all out effort from all quarters is mandatory.

It is the duty of the whole society to establish schools for those persons with disabilities and secure them due care so that they become good members of the society and that they benefit themselves and their families. In the West, great care is shown to the disabled. It is duty of us Muslims to shoulder the responsibility of showing the utmost care to those



people, for, according to the teachings of our religion, those persons are sources of Divine mercy and blessings being showered on us now and then.

## **Case Study : One**

### **Story of a blind girl**

She is different and determined to rise above others

Seema can not see with her eyes, but feels the world around with better sense and sensibility. She always feels that she is different and can do much better than a normal girl. She is now appearing O-level examination under the British Council. She has already completed her Bengali paper obtaining A-grade marks and taking preparation for the English examination in 2010. She wants to study law and become a lawyer in future.

In spite of her visual imparity, a persevering Seema, now in her twenties, can operate computer with self-voicing software and using her talking mobile phone to communicate with the outside world and enhance her horizon of knowledge.

An adorable and cute baby, Seema Iqbal, was diagnosed with damaged retina in her childhood. Her parients tried their best to get their daughter cured but in vein. She remained visually impaired.

However, she was determined to illuminate her life with inner sights. She was admitted to a normal English medium school and after facing many difficulties completed study up to standard seven.

In 2005 she was admitted to a course at the Institute of Hazrat Muhammad (SM), Banani to learn speaking English and reciting the Holy Quran in Braille technique. She also completed a six month course offered for the blind persons at the same institute to operate computer.

Now, Seema can browse the internet, sent and receive email and use Microsoft Word, Excel and PowerPoint with the help of JAWS (Job Access With Synthesizer) a self-voicing software. She is grateful to her computer teacher Khairul Azam, who is also a visually blind person.

“Seema was the lone female student in our second batch of computer training programme but she was the first to complete the course well ahead of the boys’ said Abu Sayeed Chowdhury, training coordinator of the Institute. Girls with visual impairment are found to be more attentive in learning the courses, he added.

“I would like to convey a message to all disabled people around the globe that, we, whom the world thinks as disabled, actually are not disabled, in fact, we are much better than the normal people; but in a different way” , an inspiring Seema wrote in her real life story.

## **Case study: two**

### **ICT opens new opportunities for Visually Impaired persons**

Khairul Azam is a handsome 32 year old graduate and employed as a telephone operator like many others. But he is different. He is blind and used Braille technique to read, write and carry on his study. He is a brave man and firmly believes that given the opportunity, and of course, necessary training he can do anything.

Third among his six brothers and sisters, Khairul was unfortunate to have a retina detachment problem from his boyhood. It required a couple of surgical operations but in vain. This resulted in total blindness for Khairul in 1995.

At that time he was a science student of higher secondary class in a city college, Dhaka. He had to abandon his final examinations and suffered a mental break-down that took almost a couple of years to overcome.

He learnt Braille technique to read, write and carry on his study. With a strong will-force, Khairul went back to college. He pursued humanities course and completed the higher secondary education in 1998 and graduation in the year 2001 from Abu Jar Gefary College, Dhaka.

Then Khairul availed skill development training from the Tongi Centre of Social Welfare Department and telephone PABX operation from an NGO. Then he attended a training course in computer operation specially designed for the visually impaired persons.

“The skills provided me the opportunity in seeing my life with a new light of learning” Khairul said adding that it also created job opportunity to sustain himself.

“Before my employment, I used to consider myself a burden for the family . Now I can contribute to my family” said Khairul.

He is also engaged in a part time job as computer trainer for the visually impaired persons at the Institute of Hazrat Mohammad (SM) at Banani. .



Khairul's vision is to share his knowledge and skill with other persons having visual impairment. He said that blindness was no more a problem for computer learning. Appropriate software is available there and there is a job opportunity for them

Meanwhile, NGos working for the visually impaired persons have taken initiatives for skill development in Information and communication technology (ICT) which has become, within a very short time, one of the basic building blocks of modern society. The main component of this programme is to acquaint students to Computer Screen reading software, speech synthesizers, self-voicing software, using JAWS (Job Access with Speech) for learning Microsoft office programme and using DAISY (Digital Accessible Information System) Talking Book, Visually impairment friendly Electronic Books, Novels, Stories and different Policy and Legislations of the country.

"ICT learning has not only helped provide us job, but also given an opportunity to contribute effectively towards the development of a digital Bangladesh" Khairul said .

Khairul expects that the jobs suitable for the persons with visual impairment should be kept reserved for them and such persons with proper skills should be given priority for the ICT jobs.