

# **Alternative Report on the Status of Implementation of the Convention on the Rights of Persons with Disabilities in Bangladesh**

Prepared by

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## **LIST OF ACRONYMS**

A21	Access to Information
BBS	Bangladesh Bureau of Statistics
BLAST	Bangladesh Legal Aid and Services Trust
BLI	BlueLaw International LLP
VIPS	Visually Impaired People's Society
BTV	Bangladesh Television
CAT	Convention against Torture and other Cruel, Inhuman & Degrading Treatment or Punishment
CBR	Community Based Rehabilitation
CEDAW	Convention on the Elimination of all forms of Violence against Women
CRC	Convention on the Rights of the Child
CRMW	Convention on the Protection of the Rights of all Migrant Workers & Members of their Families
CRPD	Convention on the Rights of Persons with Disabilities
DGFP	Directorate General of Family Planning
DDS	Disability Detection Survey
DSS	Department of Social Services
DPO	Disabled Peoples' Organization
DWA	Disability Welfare Act, 2001
FGD	Focus Group Discussion
GAPH	Global Autism Public Health Initiative
GOB	Government of Bangladesh
HPNSDP	Health, Population & Nutrition Sector Development Plan
ICCPR	International Covenant on Civil & Political Rights

ICERD	International Convention on the Elimination of all forms of Racial Discrimination
ICESCR	International Covenant on Economic, Social & Cultural Rights
ICT	Information, Communication and Technology
IGA	Income Generating Activities
ILO	International Labour Organization
INGO	International non-governmental organisation
IPNA	Institute for Paediatric Neuro-disorders & Autism
JPUF	Jatiyo Protibondhi Unnayan Foundation [National Disability Development Foundation]
MDG	Millennium Development Goals
MOE	Ministry of Education
MOHFW	Ministry of Health and Family Welfare
MOSW	Ministry of Social Welfare
MOWCA	Ministry of Women and Children Affairs
NCDW	National Council of Women with Disabilities
NCP	National Coalition Project for Producing CRPD Shadow Report in Bangladesh
NDD	Neuro-Developmental Disability
NDDT	Neuro-Developmental Disability Trust
NDDTA	Neuro-Developmental Disability Trust Act
NFDDP	National Foundation for Development of the Disabled People
NFOWD	National Forum of Organizations Working with the Disabled
NGDO	National Grassroots Disabled Organization
NGO	Non-governmental organisation
NSDC	National Skills Development Council
NSSS	National Social Security Strategy

OHCHR	Office of the High Commissioner on Human Rights
OP	Optional Protocol
PPP	Public-Private Partnership
RMG	Ready Made Garments
RPPDA	Rights & Protection of Persons with Disabilities Act 2013
RTI	Right to Information Act 2009
SHG	Self Help Group (of Persons with Disabilities)
SME	Small and Medium Enterprise (Foundation)
SRHR	Sexual and Reproductive Health and Rights
TPF	Turning Point Foundation
UDHR	Universal Declaration of Human Rights
UN	United Nations
UNDP	United Nations Development Program
UNGA	United Nations General Assembly
VSC	Victim Support Centre
WDDF	Women with Disabilities Development Foundation
WHO	World Health Organization

## EXECUTIVE SUMMARY

After becoming a signatory to the CRPD, Rights and Protection of Persons with Disabilities Act 2013 (RPPDA) was enacted in 2013 by Bangladesh. The Act addressed the rights of persons with disabilities to equality, to quality education, to employment, and also provided that they shall not be subjected to any form of discrimination and/or harassment in any sector. Concerns however remain about its ambit. *Firstly*, it is unclear whether the Act prevails over other laws that affect persons with disabilities. *Secondly*, The Act is not all encompassing; it does not address all the articles of the CRPD in separate sections. *Thirdly*, there is no appropriate and efficient monitoring mechanism in place to oversee proper implementation of the Rights and Protection of Persons with Disabilities Act, 2013 (herein after referred as RPPDA).

Disability-based discrimination has adverse effects on many of the rights recognised in the CRPD and the RPPDA including the rights to education, employment, health, housing, accessible transport, and cultural life. It also affects/hampers access to public places and services, and, critically, access to justice. Environmental and attitudinal barriers and accessibility issues are key challenges to establishing and protecting the rights of persons with disabilities. Changes in the understanding of disability have resulted in the adoption of new international standards to comply with the CRPD. This provides for full inclusion of persons with disabilities in society focusing on overcoming social, political, and attitudinal barriers, rather than on ‘fixing’ the disability. This change has involved a shift from a welfare approach to a rights-based approach in responding to disability.

This CRPD shadow report has been prepared in the context of the initial report submitted by the State on the implementation of the CRPD. It discusses most of the key Articles of the UNCRPD in the context of Bangladesh, setting out gaps in national laws and policies, challenges to their implementation and key findings from consultations held across Bangladesh, and concludes with a set of recommendations.

Recommendations in each section relate to the respective situation analysis. A common recommendation is the need for an implementation of the provisions of the RPPDA. Factors responsible for non-implementation of the RPPDA include the general lack of awareness among persons with disabilities, stakeholders and duty bearers about the rights and duties established under each of the Sections and Schedule of the Act. This lack of awareness affects

implementation. For instance, lack of awareness among persons with disabilities means that no one brings legal claims to enforce RPPDA and other legal provisions. Lack of awareness among stakeholders (for example, mainstream human rights organisations, DPOs, journalists, etc) to report violations to authorities means violations by private actors. Lack of awareness among duty-bearers (e.g., district committee members, other government bodies) means that no one follows the RPPDA. The responsibility for ensuring awareness to create a space for discussion and implementation of the CRPD in accordance with Article 8 rests with the government.

## **METHODOLOGY**

***About the National Coalition Project:*** NGDO is an umbrella organisation consisting of DPOs and SHGs. Since its inception, the organisation has been working in national and grassroots level to establish the rights of persons with disabilities across the country. Since 2013, NGDO has been leading the National Coalition Project (NCP) along with its partners – the National Council for Disabled Women (NCDW) and the Bangladesh Legal Aid and Services Trust (BLAST). It has been supported by the Disability Rights Fund (DRF) since 2013 to produce a Shadow Report for the UNCRPD. The NCP had produced a shadow/alternative status report focused on eight selected articles of the CRPD in 2015.

***Formation of CRPD Shadow Report Platform:*** The coalition was converted into a platform of DPOs and NGOs in January 2018. NGDO worked as the secretariat of the platform and BLAST provided technical support. The Visually Impaired People’s Society (VIPS), Women with Disabilities Development Foundation (WDDF) and the Turning Point Foundation (TPF) significantly contributed to this shadow report by analysing the status of implementation of specific articles of the CRPD in Bangladesh.

### ***Preparation of the CRPD Shadow Report:***

Bangladesh submitted the State report on CRPD implementation status in April 2017, though it should have been submitted on or before the 2 May 2010.

A coalition led by a DPO, NGDO along with NCDW, another DPO, and BLAST, a legal services organisation, worked on an alternative/status report focusing on eight provisions of UNCRPD, namely Articles 6, 9, 13, 16, 24, 25, 27 and 29, analysing the status of the implementation of the CRPD in Bangladesh and seeking to advocate for the advancement of the people with disabilities in Bangladesh. Currently, the NCP partners are continuously engaged in advocacy and lobbying with relevant government representatives to encourage submission of the initial State report to the UNCRPD Committee.

Findings and recommendations related to each Article were based on consultations in seven districts (Bogura, Cox’s Bazar, Dhaka, Faridpur, Kushtia , Rangpur and Sylhet,) that involved seven focus group discussions (FGDs); a structured questionnaire-based survey of 14 categories of stakeholders (DPOs, civil society organisations, journalists, lawyers, and government officials among others), and two national consultation meetings including with a ten member Advisory Committee of experts on disability rights.

## **PART-A: GENERAL PROVISIONS OF THE CONVENTION**

### **Articles 1 to 4: Purpose, Definitions, Principles and Obligations of the Convention**

1. The CRPD has been adopted into an enabling legislation (domesticated) titled “Rights and Protection of Persons with Disabilities Act 2013 (RPPDA). RPPDA defines disability as defined in CRPD, except for universal design, which varies from that of the CRPD.
2. Consultation with the persons with disabilities in developing plans, programmes, policies and legal frameworks concerning persons with disabilities has been inadequate. Lack of funding has been mentioned as a cause for inadequate investment for the cause of persons with disabilities.
3. The state reports that all plans, programs, policies and legal frameworks concerning persons with disabilities are formulated in consultation with them.<sup>1</sup> However, it not have a specific mechanism or policy in place to conduct these consultation that are of public knowledge. Civil society organisations can raise concerns to the relevant ministries regarding several different issues, e.g. request for information under the RTI Act; but, there is no process through which the government regularly consults with persons with disabilities through their representative organization. There is a gap in compliance with this regard.
4. Documentation on use and impact of RPPDA is unavailable. Harmonization of laws, policies, strategies and action plans with the CRPD is taking place, but has a long way to go. The policies the government has aligned with CRPD remain weak in implementation.

#### **Proposed question:**

- **Are RPPDA provisions defining ‘disability’, ‘person with disability’ and ‘reasonable accommodation’ aligned with CRPD?**
- **CRPD looks at the rights and protection of women with disabilities and children with disabilities individually. Why is this issue not dealt with similarly in RPPDA?**

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<sup>1</sup> UN Committee on the Rights of Persons with Disabilities, Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010, 18 April 2017, CRPD/C/BGD/1, paragraph 46, p.11

## **PART-B: SPECIFIC RIGHTS (ART. 5, 8-30)**

### **Article 5: Equality and Non-discrimination**

5. Voter Enrolment Act, 2009 and the Contract Act, 1872 exclude persons with intellectual disabilities from their right to vote, to take part in national and local government elections, and to sign and execute any contract or agreements. With regards to Article 4 of the CRPD the government has undertaken no meaningful steps to revise pre-CRPD legislation that is either discriminatory or in conflict with the CRPD. Regardless of the government's resource limitation claims, it definitely should be taking concrete steps to abolish all forms of discrimination under pre-CRPD and RPPDA laws.
6. In compliance with the CRPD, RPPDA was enacted in October 2013. The Act is intended to guarantee for persons with disabilities equal and effective legal protection against all types of discrimination, including the provision of reasonable accommodation. But there are some gaps in its definitions. The duty to ensure reasonable accommodation has been recognized for education and employment issues only. The law has enormous implementation challenges that remain largely unaddressed five years after enactment. The Act has not taken into account the diversity of persons with disabilities based on gender, age, ethnicity, religion, caste, profession and grade/extent/type of disability properly.
7. A Draft Anti-Discrimination Law (ADL), initiated in 2014 remains under consideration, with no remedies available for discrimination by private actors. The ADL prohibits discrimination on basis of disability. ADL is still in draft state, and representatives various groups of persons with disabilities are actively involved in the process. However, the work has not been progressing as expected.

### **Recommendations**

- a) Ensure equal capacity for signing and executing contracts, voting rights of persons with neurodevelopmental, psycho-social and/or mental illness leading to disabilities through necessary legal and political reform.
- b) Enact the Anti-Discrimination Law as soon as possible.

### **Article 8: Awareness-raising**

8. Given the limited publicity of the government's awareness raising initiatives, including observance of key days, holding art and cultural competitions and organising Disability Development fairs, in ways that are inaccessible to persons with disabilities, and which are held mostly in urban areas, people with disabilities in rural areas are excluded. There is a lot yet to be done to increase general awareness of disability issues and existing programmes.

### **Recommendations:**

- a) Appropriate programmes to raise general awareness and positive image about disability and persons with disability using print, billboards, electronic, and digital media should be implemented with greater intensity. Local government should be entrusted to reach out persons with disabilities and their families through awareness events like street drama, folk songs etc.
- b) School text books from the primary level should have adequate contents to raise general awareness, positive image, and about rights of persons with disabilities.
- c) Legal information and awareness materials should be disseminated in accessible formats i.e braille, large print, simple language, sign language and accessible websites.
- d) Government should encourage private sectors to contribute to disability related programmes as a fulfilment of their social responsibility.

### **Proposed questions:**

- **What initiatives has government undertaken to increase awareness and sensitisation of government officials on disability rights and issues and inclusive practices?**
- **In what ways is television and mass media being used by the government to raise awareness of disability issues?**

## **Article 9: Accessibility**

9. Despite existing guidelines<sup>2</sup> to ensure accessibility, only a small number of public buildings in Dhaka have pavements and ramps for persons with disabilities. Situation in transport sector is even worse. Progress in physical accessibility has been very slow.
10. Copyright Act 2000 is not supportive of access to print materials for persons with disabilities.
11. No guidelines have been formulated to ensure accessibility of public transport.

## **Recommendations:**

- a) Revise the Copyright Act 2000 to include an exemption clause allowing for books and publications to be printed in accessible formats (braille, audio), and the ICT Policy to ensure inclusiveness of persons with disabilities.
- b) Sign and ratify Marrakesh VIP treaty to ensure accessibility of reading materials for visually impaired and print disabled persons.
- c) Ensure effective implementation of existing policies and rules, and develop monitoring mechanisms to measure progress.

## **Proposed question:**

- **Are persons with disabilities being able to practically use the RTI Act to seek information through a process that is accessible?**
- **Are government websites actually accessible to individuals with visual impairments?**

## **Article 10: Right to Life**

12. No data is available on infanticide and/or feticide among persons with disabilities, thus it is unknown whether infants with disabilities have been subject to denial of right to life (as stated in initial report).

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<sup>2</sup> Such as the Dhaka Metropolitan Building Construction (Construction, Development, Protection and Removal) Rules 2008, and the Bangladesh National Building Code 2008

13. Due to their disabilities persons, especially children with disabilities face life risk and challenges within their family and community<sup>3</sup>. They are considered burden or disgrace of families.

**Recommendation:**

- Develop appropriate monitoring mechanisms to generate data regarding infanticide/feticide of children with disabilities/in person with disabilities.

**Proposed question:**

- What steps has the government taken to ‘break’ the culture of infanticide surrounding detection of disabilities at birth/during pregnancy?

**Article 11: Situations of Risks and Humanitarian Emergencies**

14. Disaster risk reduction programmes are in many cases not disability inclusive. Accessibility becomes an issue during disaster and risk management activities due to lack of resources and the government has not done much work in this sector that has addressed all of Bangladesh. There is a disparity in urban and rural disaster management initiatives.

15. Bangladesh is a country susceptible to natural calamities. There are areas in the country where cyclones and, severe flooding cause mass destruction, requiring people living in such areas to rebuild their homes. Often, rivers overflow, causing land to collapse into the water along with any structures on it. No priority financial aid is available from the government for persons with disabilities areas affected by climate disasters to rebuild and repair their houses.

**Recommendations:**

- a) Attention to be given to ensure equal and safe access of persons with disabilities in disaster centres.

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<sup>3</sup> Manual on Rights and Protection of Persons with Disabilities Act, 2013, Published in 2018, by Blue Law International LLP and BLAST, p. 65

- b) Ensure physical accessibility and train rescue persons on how to help people with disabilities.

**Proposed question:**

- What kind of disaster risk management and rescue mechanisms currently exist? – Are emergency responders trained on the particular needs of different persons with disabilities? Are rescue initiatives accessible?

**Article 12: Equal recognition before law**

16. Though the *Constitution of Bangladesh* affirms that unless restrictions have been placed by any laws, every citizen shall have the right to acquire, hold, transfer or otherwise dispose of property and no property shall be compulsorily acquired, nationalised or requisitioned save by authority of law.<sup>4</sup>
17. However, most laws deny equal legal capacity of persons with intellectual disabilities to enter into a contract or inherit (for few religious and indigenous groups) or own property. These laws include the **Contract Act 1872**<sup>5</sup> and **Transfer of Property Act, 1882**.<sup>6</sup>
18. The right to inheritance is governed by personal laws based on religion. This makes it difficult to apply Uniform Code for persons of all the religion due to the social barriers. Furthermore, even though the personal family matters are left to be dealt privately with families, unless brought to the Family Court, the scope of abandoning the children with disabilities as well as depriving them of their right to property may exist.

**Recommendations:**

- a) Reform of the **Contract Act** to not disqualify the persons with disabilities as not having the legal capacity.
- b) Establish provision of penalising/prohibiting abandonment of children with disabilities.

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<sup>4</sup> Article 42, Constitution.

<sup>5</sup> Section 11, Contract Act, 1872.

<sup>6</sup> Section 7, Transfer of Property Act, 1882.

### Article 13: Access to Justice

19. Para 77 of the Initial Report mentions ‘instances where interpreters have been invited in the Court to assist the people with hearing and speech disabilities’, and it addresses the need for standardised sign language. However, other than such instances where interpreters were invited in the court, the initial report fails to mention instances where neither interpreter were invited in the police station or the prison to communicate with the persons with disabilities, nor the prison staff or the police were trained to understand such sign language of those with hearing and speech impairment.<sup>7</sup>
20. Although people with disabilities are eligible to apply for funds managed by the Deputy Commissioner to cover all legal and procedural costs for the poorer sections of society as and where necessary,<sup>8</sup> there is a lack of awareness regarding this and it is unclear where they may apply to receive such funds or whom they should approach.
21. Although police stations are gradually being made accessible, with facilities for people with visual/hearing/speech impairments, and disability issues are a part of police training,<sup>9</sup> in most cases, courts remain inaccessible for people with physical disabilities. The justice system is inaccessible for people with intellectual and sensory disabilities, and especially so for women with disabilities who are victims of sexual and/or domestic violence and also suffer from the above disabilities.<sup>10</sup> However, there is no information on making courts more accessible, nor on any targeted timeline to make such facilities available and accessible to persons with disabilities.
22. According to a survey<sup>11</sup> on UNCRPD Articles 13 and 16:
- 40% of persons with disabilities responding to the survey stated that they are unaware of their rights under RPPDA.
  - 73% of respondents reported that cases of persons with disabilities are settled outside of court through *shalish*. Persons with disabilities are driven to out-of-court remedies because the formal justice system is inaccessible.

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<sup>8</sup> UN Committee on the Rights of Persons with Disabilities, Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010, 18 April 2017, CRPD/C/BGD/1, paragraph 78, p.16

<sup>9</sup> Ibid, para. 79, pg. 16

<sup>10</sup>[https://lib.ohchr.org/HRBodies/UPR/Documents/Session16/BD/JS9\\_UPR\\_BGD\\_S16\\_2013\\_Jointsubmission9\\_E.pdf](https://lib.ohchr.org/HRBodies/UPR/Documents/Session16/BD/JS9_UPR_BGD_S16_2013_Jointsubmission9_E.pdf)

<sup>11</sup> Survey conducted by NGDO, NCDW and BLAST [2016]

- 93% of persons with disabilities among respondents agreed that they faced pressure or were coerced by fear to settle disputes out of court.
- 78% of respondents agreed that women with disabilities faced more violence due to their gender and disability.
- 41% of respondents said that investigating police officers did not interview women and girls with disabilities in violence cases.
- All respondents noted that justice service providers were inaccessible.
- 78% of the survey respondents said no sign language interpreters were available during trial process.

**Recommendations:**

- a) Implement Schedules 5, 6 and 12 of RPPDA to ensure accessibility in all spheres of the justice system, particularly including legal/medical/emergency service providers and institutions such as courts, police stations, victim support centers and one-stop crisis centers.
- b) Raise public awareness of rights of persons with disabilities to access justice by encouraging NGOs, CSOs, DPOs, the national media and mobile telephone service providers to run public information campaigns and disseminate information on rights under various laws.<sup>12</sup>
- c) Ensure participation of persons with disabilities in trials through implementation of Schedule 6 (ka) and (kha) of RPPDA by utilizing technology to share legal information with persons with disabilities and implementation of Schedule 12, especially (gha), of RPPDA and Chapter XXV of the CrPC, to mitigate the practical barriers to participation in trials for persons with disabilities.
- d) To tackle the difficulties faced by persons with disabilities with speech and hearing difficulties, Section 119 of the Evidence Act, 1872 needs to be followed. Adherence to rules contained in Chapter XVIII of the CPC (hearing of suit and examination of witnesses) would alleviate the practical barriers faced by persons with disabilities in civil suits.
- e) Amend Section 118 of the Evidence Act to allow people with intellectual disabilities to testify in court. Amendments could address separate arrangements for such victims and

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<sup>12</sup> Such as the Legal Aid and Services Act 2000; provisions of the Penal Code, Suppression of Violence against Women and Children Act, 2000; the Domestic Violence (Prevention and Protection) Act, 2010

the appointment of a counsellor to enable persons with disabilities to give evidence in a less intimidating environment.

- f) Fast track cases by persons with disabilities through strict compliance of provisions related to summons, trial in absentia, adjournment and appeals<sup>13</sup>, and require Case Coordination Committees to prioritise cases involving persons with disabilities.

**Proposed question:**

**What steps are being taken by government to ensure:** availability of interpreters and psychosocial counsellors in court, availability of experts in disability issues in court; increased capacity of investigating officers in police stations regarding recording complaints and evidence from individuals with speech impairments; sensitization and training on disability for court officials; mitigation of barriers for persons with disabilities towards accessing legal services, remedies and justice mechanisms are accessible; and the presence of a disability expert in court, as necessary?

**Article 14: Liberty and Security of Person** (see relevant case study in Annex 1)

23. Under section 54 of the Code of Criminal Procedure 1898, the Metropolitan Police Ordinances, and the Vagrant and Shelter-less People (Rehabilitation) Act 2011, persons with disabilities, including women with disabilities, are frequently harassed, arrested, detained or confined at the whim of law enforcement agencies. While the unlawful restraint and confinement of any individual is prohibited by laws including the Penal Code 1860 and the Domestic Violence (Prevention and Protection) Act 2010, this often does not apply equally to persons with disabilities as they are chained and confined by family members. There are no visible initiatives to protect the liberty and security of persons with disabilities, despite this being recognised as fundamental rights under Articles 32 and 33 of the Constitution (**see case study in Annex 1**).
24. Due to law enforcement agencies' lack of awareness on disability issues, persons with disabilities, especially women with disabilities, who are involved in begging are often arrested without being informed of the reason for arrest, and kept in vagrant shelter homes.

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<sup>13</sup> CrPC, Sections in Chapter VI, Section 339 B, Section 344 and Sections contained in Part VII respectively

25. The term ‘woman with disability’ is not mentioned in RPPDA; consequently, it fails to include special initiatives regarding security for women with disabilities, or their needs. The law also lacks implementation in many cases. Committees to be set up under RPPDA have either not been formed in most districts or are inactive.
26. The Initial Report notes that the 1912 “Lunacy Act” provides for the healthcare system to institutionalize and treat people with mental illnesses, with or without their informed consent. Here, the phrase ‘with or without consent’ could be interpreted as though the state endorses involuntary commitments of persons with psychosocial disabilities to psychiatric facilities. Attaining clarity and consensus on assuming the identity of persons with intellectual disabilities is a long process, as identity questions often are. Activists had emerged as ‘users and survivors’ from commonwealth countries (India, Bangladesh, Pakistan, Singapore, Malaysia, Myanmar, etc.), which depended on coercive institutionalization in place of ‘care’.<sup>14</sup>
27. MOSW is solely responsible for improving the situation of persons with disabilities, including their health and education, which is challenging for this ministry, as the MoHFW and MoE are better suited to more appropriately deal with these aspects. This is a barrier to addressing the rights of persons with disabilities.
28. The only national survey conducted between 2003 and 2005 illustrated the high burden of mental disorders in Bangladesh. As there is no similar nationally representative mental health survey carried out in recent time, it is not possible to assess the change and to estimate overall need for resources to address the mental health burden. In general, tools for screening and cut-off values used in the reported studies contributed to the variation in the prevalence reported in different articles. However, the problems of underreporting and under-diagnosis of mental disorders are major challenges for the future of psychiatric epidemiology in Bangladesh.<sup>15</sup> There are only a handful of child mental health professionals with specialised training in Bangladesh, the vast gap between actual need and available services requires special and immediate attention.<sup>16</sup>

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<sup>14</sup> <https://madinasia.org/2018/07/from-user-survivor-to-person-with-psychosocial-disability-why-we-are-tci-asia/>; see also: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4149198/>

<sup>15</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4149198/>

<sup>16</sup> Mullick MSI, Goodman R. The prevalence of psychiatric disorders among 5–10 year old in rural, urban and slum areas in Bangladesh: an exploratory study. *Soc Psychiatry Psychiatric Epidemiol.* 2005;40(8):663–671

## **Article 15: Freedom from Torture or Cruel, Inhuman or Degrading Treatment or Punishment**

[Please see Article 16 for situation and recommendation]

## **Article 16: Freedom from exploitation, violence and abuse** (see relevant case studies in Annexes 3, 4 and 5)

29. In most cases, incidents of violence and torture against persons with disabilities are not published widely and whether very minimum number is being published, the victim on ground of disability has deprived from getting proper judgment ultimately rather the degree of inhuman treatment, torture and punishment against his/her is being increased immensely.
30. State-run Victim Support Centres (VSCs) provide protection to women and children survivors of violence or exploitation. However, concerns remain as to whether the authorities and staff of VSCs have sufficient training in communicating with persons with disabilities, or whether or not such centres are physically accessible to persons with disabilities.
31. It is a cause for concern that despite having a national law that protects their rights, persons with disabilities themselves refrain from approaching justice mechanisms, and do not utilise them, due to continuing physical and attitudinal barriers within such institutions. This is due to lack of knowledge, limited access to quality legal services, inaccessible procedural law and the fear of discrimination that they may face and thus, they must be given assurance from the state that their grievances will be redressed. Police fails to duly investigate and prosecute incidents of VAW.

Traditional superstition, poverty, illiteracy of Women with disabilities family and existing social barriers.

- Lack of appropriate information about laws, government and non-Government legal aid services and lack of circulation in accessible manner for all including Women with Disabilities.
- Law implementing and justice related institutions, i.e police stations, court premises, counseling centres and legal aid centres have no infrastructural and informational accessibility for Women with disabilities.

- Witness protection Act and Women and children repression prevention act 2000 aren't disability inclusive and no article about Women with disabilities has been included in these legislations.
- Law enforcement related officers and staffs aren't trained to handle Persons especially Women with Disabilities.

**Recommendations:**

- a) Information about relevant laws, government and non-government legal aid services should be available and circulated in accessible format for all including women with disabilities.
- b) Law implementing and justice institutions, i.e police stations, courts, counseling centres and legal aid centres should have infrastructural and informational accessible facilities for women with disabilities. For example, all of mentioned institutions should have a permanent position of sign language interpreter.
- c) Witness Protection Act and Women and children repression prevention act 2000 should be amended and separate article about Persons especially Women with Disabilities considering their special requirement should be included in these legislations.
- d) Disability issues should be included in the training curriculum for law enforcement related officers and staff and they should be trained to handle cases of persons especially women with disabilities.
- e) Persons with Disabilities from DPOs should be given membership of District Legal Aid Committees (DLAC).
- f) RPPDA should be amended to include a provision women with disabilities and all the committees mentioned in this Act should be formed or activated through its proper implementation.
- g) Victim protection measures for victims with disabilities and their family should be adopted in order to protect them from unexpected threats and risks.
- h) All costs for conducting litigation for persons with disabilities/women with disabilities should be approved by the DLACs and proper counseling services should be available for all persons with disabilities/women with disabilities.
- i) Though according to media there are many incidents of torture and/or custodial deaths of persons with disabilities, there is no information/data on these. Ensure monitoring of this issue and develop a database recording such information.

### **Article 17: Protecting the Integrity of the Person**

32. Article 32 of the Constitution guarantees, “No person shall be deprived of life or personal liberties save in accordance with law.” Article 16 (1) (K) of the RPPDA 2013 specifically protects the personal integrity of persons with disabilities.

33. There is a lack of data on numbers of systematic forced sterilization/forced abortions of women with disabilities. There is almost no data available on issues of forced medical intervention and/or psychiatric interventions and involuntary psychiatric admissions.

### **Article 18: Liberty of Movement and Nationality**

34. The Directorate of Social Services issues national disability identity cards for persons with disabilities, but a very small portion of disabled people have acquired the card as most are not aware of the process of getting one issued. The lengthy process of registration is another reason for non-acquisition of ID card.

### **Recommendation:**

- Take steps to ensure greater promotion of the disability identity cards and make available information on the registration process.

### **Article 19: Living independently and being included in the Community**

35. Paragraphs 93 and 94 of the initial report state that the RRPDA guarantees the right of Persons with disabilities to be included in the community through ensuring all services and facilities. However, only a limited number of Persons with disabilities receive government services or facilities. For example, the disability allowance now amounts to BDT 700 and currently, a limited number of Persons with disabilities are covered by this safety net program, while a very limited number of assistive devices, without any system in place to ensure accurate specifications according to the particular needs of a person with disability, and a minimum level of therapeutic services, are provided. In most cases, persons with severe disabilities not only face various challenges in obtaining these services and facilities but are also deprived of them due to corruption, bureaucratic complexities and inaccessibility. Hence, it is very difficult for all Persons with disabilities to be included in the community through these inadequate services and facilities.

36. Persons with severe deaf-blindness, Down's syndrome, cerebral palsy, intellectual disabilities, speech and hearing impairments, autism spectrum disorders, or multiple disabilities, and who live in underdeveloped and remote areas, are often completely isolated, socially excluded and leading inactive. On some rare occasions, parents of children with disabilities have reportedly killed their children<sup>17</sup>, and a number of families have broken apart because of children with autism spectrum disorders, cerebral palsy, intellectual disabilities, or having multiple disabilities. Often parents of children with severe disabilities look for shelter homes but there are no safe, secure and appropriate/accessible shelter homes committed to caring for children with disabilities. There are also no govt. care or shelter homes specifically for shelter-less or orphaned Women with disabilities.
37. Challenges: Insufficient financial support and social security, and inadequate government facilities and services; Inaccessible infrastructure, unacceptability and discriminatory attitudes and practices in the community and society; Lack of self-confidence, knowledge, training and capacity of Persons with disabilities.

**Article 20: Personal Mobility** (see relevant case study in Annex 2)

38. Persons with disabilities especially women with disabilities, are deprived of the infrastructural and informational accessible facilities in all public and private infrastructures.<sup>18</sup> The same scenario exists in case of transport and no visible initiative has been adopted to ensure accessibility in public transports. The existing scenario in terms of mobility is one of the most significant barriers, preventing persons/women/children with disabilities from enjoying their right to personal mobility, which is a form of violation of human rights and in most cases, is the biggest barrier to improvement of the lives of persons with disabilities.

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<sup>17</sup> Rights and Protection of Persons with Disabilities, 2013 : Advocacy Handbook for DPOS [Dhaka: BLAST and BLI] p. 42

<sup>18</sup> For example: almost all residential buildings, educational, employment and health institutions, law enforcement related institutions, places of worship, marriage and community centres, restaurants, shopping centres and bazaars, parks, historical monuments, public gathering places, visiting places, cultural, historical and recreational institutions, and stadiums. On the other hand, roads, footpaths, underpasses, over bridges, and bus and launch terminals/counters are almost completely inaccessible

39. Despite State initiatives to ensure personal mobility of persons with disabilities,<sup>19</sup> excluding two-three accessible buildings (which only have ramps and rarely lifts), most schools, colleges, universities, court buildings and prisons remain inaccessible, as does public transport, including off-road transport, which lack of accessible seating arrangements<sup>20</sup> and separate facilities for persons with disabilities. Neither public nor private buses comply with the requirement to reserve seats for persons with disabilities.
40. For air travelers, there is limited availability of wheelchairs in international airports. Cabins in aircrafts flying the domestic routes are not wheelchair-accessible. Often domestic carriers deny to issue tickets to persons with visual disabilities without assistant/guide.
41. Though very limited, a number of institutions are now producing assistive devices, including prosthetic limbs, but these are very difficult for persons with disabilities to afford due to high prices.

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<sup>19</sup> UN Committee on the Rights of Persons with Disabilities, Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010, 18 April 2017, CRPD/C/BGD/1, paragraphs 96-102, p.19

<sup>20</sup> Seating arrangements in buses, launches, boats, ships or train compartments are inaccessible for persons/women/children with disabilities. Ticket counters in bus or train stations are also not accessible for persons with disabilities and they have to book their seats two-three days in advance by using disability identification papers. However, in most cases, people with visual impairments travel free of cost by being issued standing tickets.

## **Article 21: Freedom of Expression and Opinion, and Access to Information**

42. The practice and enjoyment of rights under Article 21 is simultaneously dependent upon existing social and environmental circumstances, the gender of the individual and diversity of disability, its type and severity. Persons with disabilities have limited access to information regarding their rights, relevant laws and policies or government facilities and services, further compounded by a lack of awareness based initiatives for persons with disabilities in remote, rural areas. In urban areas, persons/children/women with severe disabilities<sup>21</sup> and/or multiple disabilities, who are illiterate, are also deprived of exercising these rights, irrespective of their socio-economic and family backgrounds.
43. Persons with disabilities are yet to be considered on the basis of individual rights. The lack of awareness of laws, policies and services, adequate, accessible knowledge and information, self-confidence, safety and security, and needs-based support, coupled with poverty and discrimination from family and society, act as significant barriers to their freedom of expression and opinion, and access to information.
44. Under the Right to Information Act 2009, persons with disabilities now have more access to information on policies, services and programmes under different ministries and government departments and functionaries;<sup>22</sup> however, this claim remains unsupported by any statistical data.
45. Under RPPDA, government has the responsibility to undertake initiatives<sup>23</sup> to ensure equal rights for persons with disabilities, including recognising, and promoting use of, Bangla sign language and braille.<sup>24</sup> However, such initiatives, if undertaken, have failed to ensure access to sign language as this is used by individuals with hearing and speech impairments mostly in the capital city, while at divisional level, people lack sufficient awareness of its usage, thus preventing persons with disabilities from being benefited by government's initiatives to integrate them in the mainstream development process. Bangla sign language is also yet to receive official recognition.

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<sup>21</sup> Individuals with severe disabilities include persons who are deaf-blind, have Down's syndrome, cerebral palsy, intellectual disability, speech and hearing impairments, or autism spectrum disorders.

<sup>22</sup> Ibid, para. 104, p.20

<sup>23</sup> Rights & Protection of Persons with Disabilities Act 2013, Section 29 (2). Available [here](#) in Bangla; Women With Disabilities Foundation, Asia-Pacific Development Centre on Disability, *Persons with Disabilities Rights and Protection Act in Bangladesh, User-friendly Booklet*, p. 17 [2015]. Available [here](#).

<sup>24</sup> Rights & Protection of Persons with Disabilities Act 2013, Schedule IV-Language and Communication, (ka). Available [here](#) in Bangla.

46. Although the government reports that accessibility features for people with visual impairments are now being incorporated into digital technology,<sup>25</sup> the official websites of most ministries still remain inaccessible for them, and lack simplified content to aid individuals with intellectual disabilities. The state report also mentions that the process of installing speech software on computers in 5,000 community-based information centres<sup>26</sup> has begun, but contains no specific information about the areas in which these centres have been established, the number of computers available, or the number of persons receiving these services. There is inadequate circulation of information regarding these centres in remote areas, which are also not built considering infrastructural and informational accessibility for persons with disabilities. Staff at these centres also lack sufficient training or responsiveness to interact with persons with disabilities.

**Recommendations:**

- a) Ensure wider dissemination of information of laws, policies and government facilities and services that are disability inclusive.
- b) Ensure equal and effective participation in consultations and decision-making processes, of persons with disabilities and their family members in rural, hard-to-reach and urban areas, and DPOs.
- c) Ensure community based information centers in remote areas have infrastructural and informational accessibility for persons with disabilities and train relevant staff on disability issues and responsiveness towards persons with disabilities.
- d) Ensure websites of all ministries and NGOs are accessible for all persons with disabilities.
- e) Mandate awareness of sign language and its proper utilization as compulsory at all levels for inclusion of persons with speech and hearing disabilities.
- f) Allocate national budget to improve ICT related sectors considering the specific requirement of persons with disabilities.

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<sup>25</sup> UN Committee on the Rights of Persons with Disabilities, Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010, 18 April 2017, CRPD/C/BGD/1, para. 105, p.20

<sup>26</sup> These centres have been set up across the country under the government's Access to Information (A2i) project to enable access to information at grassroots level for people with visual impairments and for those who are unable to read.

- g) Sign and ratify the Marrakesh Treaty to ensure persons with visual impairments or other print disabilities have access to published works.

## **Article 22: Respect for privacy**

47. Far from being protected under the Constitution and RPPDA, as asserted by the state,<sup>27</sup> the right of persons with disabilities to respect for and protection of privacy, is being violated due to various stigma associated with traditional beliefs and practices, gaps in the law, discrimination from family and society, and bureaucratic complexities, and also their dependency upon others to fulfill minimum and basic needs due to lack of facilities, information, accessibility and infrastructure that allow them to be self-sufficient.
48. No support service or facility has been operated by the government, NGOs and INGOs to provide volunteers/care-givers to persons with disabilities in order to meet their minimum requirements, e.g. healthcare, performing economical/banking activities, personal issues and so on.
49. Government and NGOs have no accessible and disability inclusive data protection policies.

## **Recommendations:**

- a) Ensure support services or facilities (through government or NGOS) to provide volunteers/care givers for persons with disabilities to assist them to meet their minimum requirements.
- b) Establish accessible and disability inclusive data protection policies (for government, NGOs, and business).
- c) Ensure all disability related and other relevant laws, policies and guidelines expressly mention the right to privacy of persons with disabilities, and cover privacy of personal, health and rehabilitation information.
- d) Ensure training curricula for rehabilitation and medical professionals includes the right to privacy of the client.

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<sup>27</sup> UN Committee on the Rights of Persons with Disabilities, *Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010*, 18 April 2017, CRPD/C/BGD/1, paragraphs 106-107, p. 20

- e) Review process of declaring the nature of disability in documents in concerned offices to protect an individual's privacy as much as possible. A suitable code of ethics should be formulated in this regard.

### **Article 23: Respect for home and the family**

50. While the government reports that RPPDA grants persons with disabilities the right to “to live in the society with parents or legal guardians, children and family, to marry and have families”,<sup>28</sup> and the right of “access to reasonably secure housing and rehabilitation, especially for persons with disabilities who are dependent on their parents or family, or where they are separated from the families, or where they have no access to such services on their own”,<sup>29</sup> not enough evidence of the proper implementation of these provisions of the Act exists.
51. The scope of government initiatives on sexual and reproductive health and rights (SRHR) hardly extends to persons with disabilities, as no effective and appropriate measures have been taken to eliminate discrimination regarding their exercise of and access to SRHR. RPPDA does not address the SRHR of persons with disabilities. While the Directorate General of Family Planning (DGFP) has included adolescents with disabilities in its recent National Strategy for Adolescent Health 2017-2030, active participation of adolescents, women and persons with disabilities has not been ensured yet.
52. Women with disabilities are particularly threatened by the lack of access to SRHR information and services, and are deprived of a marriage, family, parenthood and relationships, since, in the current social context, disability is considered a threat to the premise of marriage and raising a family.<sup>30</sup> Their right to consent and their choice of a partner are often not taken into account,<sup>31</sup> irrespective of the law seeking to establish equal rights for persons with disabilities in terms of marriage, family, parenthood and

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<sup>28</sup> Ibid, para. 111, p.20

<sup>29</sup> Ibid, paragraph 111, p.20-21

<sup>30</sup> For example, women with disabilities are usually considered asexual, or unable to have children, and it is also believed that any child born to women with disabilities will inherit the disability. A large number of women with disabilities do not get married and have no family of their own.

<sup>31</sup> For example, parents of an individual with hearing and speech impairments may insist that they marry a person without any disabilities, when they will usually prefer to have a partner with similar impairments. As a result, many individuals with hearing impairments are either unmarried, divorced or unhappily married.

relationships.<sup>32</sup> Often, women with disabilities have to pay a substantial dowry, and domestic violence is a very common feature in their marital lives.<sup>33</sup> There is also a practice of divorcing women with disabilities without complying with existing personal laws and rules.<sup>34</sup>

53. The state report mentions that laws related to marriage are equally applicable to persons with disabilities but does not elaborate further. Under Muslim personal laws, which apply to the majority of people in Bangladesh, marriage is considered a contract; this means that persons with disabilities may be denied their right to marry, at least for those who have the intellectual disabilities that disqualify a person from being treated as legally competent to sign or execute contracts.
54. The Vulnerable Group Feeding programme<sup>35</sup> prioritises women with disabilities and women who have children with disabilities.<sup>36</sup> However, the state report provides no statistical data as to how many, or what percentage of such persons with disabilities, or what percentage of the beneficiaries, enjoy such benefits.
55. In low or lower middle income families, children with disabilities are often separated from their parents and raised by grandmothers or family members.<sup>37</sup> Hiding the disability and children with disabilities is usually practiced in higher and middle income families, where not only children but elderly people with disabilities are also separated from their families or left by themselves.
56. State-run safe custody homes and rehabilitation centres, where persons with disabilities may sometimes be required to reside under court orders, or where individuals who have severe disabilities and no home or family members often live, are over populated and not a single centre can ensure accessibility for persons with disabilities or appropriate and adequate and services; excepting one such centre for children with intellectual disabilities, which is over populated and actually houses people of different ages with other types of disabilities, these centres are not equipped to shelter persons with disabilities as they are inaccessible and severely understaffed with personnel lacking

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<sup>32</sup> Rights & Protection of Persons with Disabilities Act 2013, Section 16 (1) (e). Available [here](#) in Bangla

<sup>33</sup> Focus group discussions with persons with disabilities, conducted by BLAST, NGDO and NCDW.

<sup>34</sup> Ibid.

<sup>35</sup> The Vulnerable Group Feeding Program is one of the largest safety net programs in the country, operated mostly through the Ministry of Women and Children Affairs' Department of Women Affairs.

<sup>36</sup> UN Committee on the Rights of Persons with Disabilities, *Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010*, 18 April 2017, CRPD/C/BGD/1, paragraph 64, p. 14

<sup>37</sup> There are reports from slum areas, of children with disabilities being found chained at home while their mother is out at work.

the knowledge and skill to provide services to persons with disabilities. persons with disabilities

57. The State has yet to ensure access to information on disability issues and existing services for persons with disabilities, their families and communities, which creates a lack of awareness around and sensitivity to disability issues and rights of persons with disabilities. Despite 103 disability intervention centres being set up under MoSW, these are not yet fully functioning with the whole range of services and access to information. Any initiatives undertaken to address the needs of persons with disabilities are undertaken without involving equal, meaningful and active participation of persons with disabilities and DPOs in the process, and these initiatives fail to apply a needs-based approach when dealing with disability issues, opting instead to follow the medical model of disability.
58. There is a lack of initiatives to harmonise relevant laws and policies with the CRPD and RPPDA, and also the lack of implementation of RPPDA provisions.
59. The State report mentions that an expert committee has been formed to prepare a concept paper to introduce family foster services for homeless/parentless children with autism and other neuro-developmental disorders.<sup>38</sup> Communities of people with disabilities have not been provided adequate information about this initiative, and these services are yet to be activated. The eight VSCs under the Bangladesh Police receive traceless, homeless/orphaned children with disabilities. After being produced before the Magistrate's Court, VSCs hand them over to safe custody homes where they are exposed to further vulnerability caused by inaccessibility, humiliation and unfair behavior by staff members and fellow detainees.

**Recommendations:**

- a) Adopt effective and appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on equal basis with others.
- b) Strengthen intervention centres to provide early and comprehensive information, services and support to children with disabilities and their families.
- c) Ensures inclusiveness in custodial settings, including safe custody homes, rehabilitation centres for vagrants and beggars, centres for orphaned children, and adolescent

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<sup>38</sup> UN Committee on the Rights of Persons with Disabilities, *Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010*, 18 April 2017, CRPD/C/BGD/1, paragraph 109, p. 20

development centres with full accessibility, adequate and skilled staff, and appropriate services.

- d) Introduce programmes on foster care or foster parenting of children with disabilities in compliance with CRPD and RPPDA.
- e) Provide day care facilities for children with disabilities who have working mothers, in compliance with CRPD and RPPDA.
- f) Include children, adolescents, women and persons with disabilities in the policies and programmes of the Ministry of Health and Family Welfare (MoHFW).
- g) Ensure access to information on disability and SRHR in DGFP's initiatives for SRHR.
- h) Introduce legal reforms to remove discrimination on ground of disability in relation to marriage, family life and parenthood, in light of CRPD, irrespective of personal laws.

#### **Article 24: Education**

62. A study<sup>39</sup> conducted by NGDO, NCDW and BLAST highlights the following findings: no statistics are available on the number of children with disabilities attending primary schools; 19% of the respondents opined that children with visual impairments could not study in schools due to schools not being disability-friendly; 21% said that braille was not used in schools; 41% were of the opinion that there was a lack of accessible educational materials in schools; 57% of respondents felt that teachers were not given appropriate training to help them deal with children with disabilities and speech and hearing difficulties; accessibility and distance of schools remain an obstacle for students with disabilities; most educational institutions lack ramps and wheelchair-accessible toilets; and students with disabilities face discrimination and are more than often denied admission on the basis of their disability.

63. No books or materials in braille are available at the higher secondary education level for students with visual impairments. The cost of printing books in braille for higher secondary level studies is very high and most students are unable to afford them.

64. Students with visual impairments and physical impairments, if informed earlier, are allowed scribes. However, since there is no approved policy on scribes, schools, colleges and universities have their individual systems, which is often confusing for students with disabilities. Special schools for children with visual impairment and hearing and speech disabilities have poor infrastructure and lack teachers with sufficient training and capacity. Buildings of educational

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<sup>39</sup> Grassroots recommendations: Rights of Persons with Disabilities [2017]

institutions are also not accessible for persons with physical disabilities.<sup>40</sup> It is necessary for any type of special and integrated education to reach children with disabilities at the root level, particularly children with neuro-developmental disabilities, but this is currently lacking.

## **Recommendations**

- a) Provide textbooks and material in braille and other accessible formats.
- b) Ensure accessibility of infrastructure in mainstream schools, colleges and universities and also flexibility in curriculum, examinations and assessment procedures, including allowing reasonable adjustments.
- c) Provide orientation on disability to teachers and staff in schools, colleges and universities.
- d) Include a course on disability issues in the curricula of government and non-government Teachers' Training Institutes.
- e) Establish special and integrated schools for secondary education of children with disabilities, particularly girls.
- f) Modify the infrastructure and curricula in existing schools to include accessible educational materials and assistive technology to support students with disabilities.

## **Article 25: Right to Health<sup>41</sup>**

65. A survey conducted by NGDO, NCDW and BLAST found that 94% of persons with disabilities surveyed said that their family homes did not have a disability-friendly toilet; 70% of the disabled population with special needs for medical rehabilitation and social integration cannot access these from existing health care service delivery systems;<sup>42</sup> most hospitals lack an adapted ward or separate counter for persons with disabilities;<sup>43</sup> the supply of medicine and

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<sup>40</sup> For example, recently Sima Sarkar, mother of a student with physical disability, had to physically carry her son to the exam hall at the University of Dhaka so he could sit for the admission test. Reported here: [Bangladesh Post, Staff Correspondent \(2018\), "Disabled children are blessings from heaven", 09 December 2018](#) (accessed 20 January 2019)

<sup>41</sup> See Annex 6 for a summary of RPPDA provisions in relation to access to healthcare for persons with disabilities.

<sup>42</sup> Public health centers, such as Upazila Health Complexes and district general hospitals, lack the expertise required for early identification of disabilities, fitting of prosthetic limbs, handling aids and appliances, and knowledge on educational or therapeutic services or vocational rehabilitation.

<sup>43</sup> Faridpur Town Hospital is the only known hospital in Bangladesh that has a separate counter and five beds reserved for persons with disabilities.

services is very inadequate in the Social Welfare Branch of government hospitals dedicated to poor, destitute and disabled people;

### **Recommendations:**

- (a) MoHFW should ensure strict compliance of RPPDA provisions and develop monitoring systems to maintain quality health services for persons with disabilities.
- (b) Ensure compliance with the National Building Code 2008 and Schedule 3 of RPPDA to make all hospitals, maternity and diagnostic centres, and medical institutions accessible for patients with disabilities.<sup>44</sup>
- (c) Engage audio and use of braille in hospitals, and where necessary, engage adequate number of sign language interpreters.
- (d) Monitor access of poor persons with disabilities to free healthcare.
- (e) Provide specialised training to doctors, hospital employees, ward boys, and nurses and other staff members on treating people with disabilities. Include disability issues in training curricula and syllabi of programmes teaching medical practitioners. Train more sign language experts to communicate with people with hearing and speech difficulties. Train all concerned persons on their legal obligations to treat people with disabilities, and to build empathetic behaviour and positive attitudes.
- (f) Build the capacity of medical professionals to provide services to pregnant women with disabilities and to treat patients with certain injuries (especially a spinal cord injury) with extra care and precaution to prevent the occurrence of disability.
- (g) Undertake extensive awareness programmes about district health centres and entitlements of persons with disabilities under national policies.<sup>45</sup>

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<sup>44</sup> Institutions providing such healthcare services can be made structurally inclusive and accessible by arranging separate facilities for persons with disabilities and displaying signs with directions to these disability-friendly facilities, building ramps to enable wheelchair access at every building entrance and on each floor, equipping multi-storied buildings with lifts, installing automatic doors, and employing assistants to help patients with disabilities and setting up separate counters for them, to avoid their being made to stand in long queues.

<sup>45</sup> For example, ensuring wider circulation of information regarding the facilities of the eighty One-Stop Service Centres under the MoSW's Jatiyo Protibondhi Unnayan Foundation (National Foundation for Disability Development) to enable persons with disabilities to access these facilities.

- (h) Ensure dissemination of information of nutrition, health risks, diseases and preventive behaviours among persons with disabilities, and of their right to access health care services.

**Proposed question:**

- **What kind of initiatives does the government have regarding working with at-risk children to identify disabilities and address needs?**

**Article 27: Work and Employment**

66. FGDs conducted by NGDO, NCDW and BLAST reflect the following:

- Employees with disabilities commonly face bullying, harassment and misbehaviour at work and tend to get paid less than others, particularly in manual or field based jobs.
- Certain jobs which have advanced educational eligibility requirements often have quotas for persons with disabilities. However, persons with disabilities applying for such jobs may not be offered the position even when they meet the criteria.
- Most factories and offices are physically inaccessible to persons with disabilities.
- Workers who become disabled due to workplace injuries are rarely rehabilitated or provided training adapted to their needs. The compensation package offered under the Labour Act 2006 for workplace injuries is inadequate to cover the actual medical or maintenance costs of dependents.

67. Entrepreneurship is not easy for persons with disabilities as banks, especially those run by the state, refuse to open accounts for persons with visual impairments. Furthermore, persons with disabilities entitled to receive loans of 5,00,000 taka from SME Foundation on account of being eligible to start small businesses, hardly receive such loans.

68. Grants from the National Foundation for Disability Development to organisations working for persons with disabilities are insufficient and irregular. Loans for persons with disabilities from the Directorate of Social Services are very small in amount and inadequate for a startup.

## Recommendations:

- a) Amend the Labour Act 2006, in particular section 22(1), to ensure consistency with the RPPDA, and to include provisions setting out the requirement for an effective quota system and make it applicable to all government and non-governmental organisations to ensure that employees with disabilities are not paid less due to their disability; clarify the legal consequences that an employer may face for breach; and increase the currently inadequate compensation package of only 1,25,000 Taka.<sup>46</sup>
- b) Amend Schedule III of the BCS and JSC Rules to remove discrimination related to employment of persons with disabilities in the public sector and judiciary.
- c) Tailor the workplace environment to the needs of persons with disabilities. Provide staff orientation and training on disability issues at workplaces to ensure empathy and sensitivity towards colleagues with disabilities.
- d) Increase employment opportunities for people with disabilities by:
  - i. Establishing a monitoring mechanism engaging civil society to identify if the 5% quota for 1st and 2nd class government jobs is being fulfilled, and to ensure reasonable accommodation at recruitment;
  - ii. Establishing quotas for people with disabilities applying for 3rd and 4th class government jobs;
  - iii. Arranging reasonable adjustments<sup>47</sup> for persons with disabilities during exams, recruitment and all stages of employment, including questionnaires that are inclusive and that cater to the needs of individuals with disabilities.
  - iv. Offering free/subsidised training including technical and vocational training to persons with disabilities and involving private sector organisations. Trainees, who are persons with disabilities, should be allowed to access loans at affordable interest rates and to secure 0% down payment from state and privately owned banks.
  - v. Providing access to loans on easy terms through institutions such as PKSF, SME Foundation, and state and privately owned banks to facilitate small businesses /entrepreneurship among persons with disabilities.

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<sup>46</sup> Equivalent to 1,600 USD (approx.)

<sup>47</sup> For example, special seating arrangements, allowing additional time in examinations, making available the option to appoint a writer/scribe, etc.

## Article 28: Adequate standard of living and social protection

69. Government is providing a monthly allowance of 700 taka to 1 million persons with disabilities who are living in poverty, for the fiscal year 2018-19. This amount is insufficient to maintain an adequate standard of living.
70. Insurance companies do not provide services to persons with disabilities, even though RPPDA encourages them to adopt special insurance policies for persons with disabilities.
71. Safe homes, old age homes, orphanages, and government shelters for the homeless do not want to accommodate persons with disabilities.
72. Benefits offered by the government<sup>48</sup> in relation to ensuring an adequate standard of living and social protection for persons with disabilities are insufficient, and persons with disabilities are deprived of these due to lack of accessibility and procedural complexities.
73. The Bangladesh Bank has issued a circular allowing persons with disabilities to open bank accounts with only 10 taka,<sup>49</sup> for loan transactions and allowance payback, which would also aid persons with disabilities in purchasing a house; banks do not have it in practice.

### Recommendations:

- a) Provide training to persons with disabilities to enable their effective participation as members of the workforce.
- b) Frame a guideline on entrepreneurship for persons with disabilities and develop a policy to prioritise B2G<sup>50</sup> with such entrepreneurs.
- c) Bangladesh Bank should ensure that every bank complies with the rules and provides services to persons with disabilities.
- d) Ensure accessibility in safe homes, old age homes, orphanages, and government shelters for the homeless to persons with disabilities. Train staff to be responsive to persons with disabilities special needs.

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<sup>48</sup> UN Committee on the Rights of Persons with Disabilities, *Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010*, 18 April 2017, CRPD/C/BGD/1, paragraphs 152-156, p. 27

<sup>49</sup> Green Banking and CSR Department, Bangladesh Bank Circular No. 01: Ensuring banking services for physically challenged persons, 20 January 2015. Available [here](#) in Bangla; [New Age, Staff Correspondent \(2015\), 'Banks asked to give special service to clients with disabilities', 22 January 2015.](#)

<sup>50</sup> Business-to-Government model.

- e) Reform the law to ensure all persons with disabilities, have the opportunity to receive disability allowances, not only those who are financially insolvent.
- f) Expand the grant limit under the National Foundation for Disability Development to provide grants every year, which should be allocated only to DPOs and NGOs working for persons with disabilities.
- g) Increase the limit of loans provided under the Directorate of Social Services to persons with disabilities and organisations working for their rights.

### **Article 29: Participation in Political and Public Life**

74. According to findings of FGDs conducted by NGDO, NCDW and BLAST:

- Voting centres are physically inaccessible as most lack ramps and many polling booths are located on the second or third floor. There is no separate queue or priority voting for persons with disabilities, who have to wait in line for hours to cast their vote.
- persons with disabilities and their family members are often not aware of their voting rights.
- Although Part 12 of the voters' registration form requires an entry regarding the nature of an individual's disability, this information is seldom recorded correctly. There are no statistics on the number of people with disabilities who vote, which makes it harder to advocate for proper voting rights, or to make arrangements for disabled voters.
- Information regarding the voting and registration process is not communicated in a way that would be understood by people with disabilities. 16% of persons with disabilities surveyed said that they were not included in the voters' list, which prevented them from casting their votes.
- Due to inaccessible polling booths, the presiding officer often brings the ballot paper to persons with disabilities wishing to vote, which leaves an individual with no option but to cast his/her vote in the presence of many onlookers, which infringes one's right to secrecy when voting.

### **Recommendations:**

- a) Record the number of persons with disabilities voting in every general election, including data on the nature of their disabilities derived from information given on National ID cards and voter registration forms per existing laws.

- b) Reserve seats for persons with disabilities in Parliament and local government to create awareness about their political rights, encourage persons with disabilities to put themselves forward as candidates, and encourage political parties to nominate them.
- c) Amend Article 122 (2) (c) of the Constitution to ensure that persons within intellectual disabilities may register and be included in the voters' list.
- d) Amend Section 44 E. 1 of the Representation of the People Order, 1972 [9] and the 'Code of Conduct for Parliament Elections' to ensure that persons with disabilities are not discriminated against when voting, on the basis of disability, and that the Election Commission maintains the anonymity, privacy and autonomy of voters with disabilities.

**Article 30: Participation in cultural life, recreation, leisure and sport<sup>51</sup>**

- 75. Museums, cultural centres, recreational centres, stadiums and tourist attractions are largely not accessible to persons with disabilities, and lack information in accessible formats for visitors with visual impairments, which is also applicable in case of public libraries lacking accessible print material.
- 76. Contact with artefacts in museums and other heritage sites is usually prohibited. Providing replicas for could help visitors with visual impairment.
- 77. There are no domestic manufacturers for sports, educational and recreational equipment for persons with disabilities, especially for persons with visual impairments. These have to be imported and are not readily available within a reasonable price range.
- 78. The National Sports Council provides limited funding for DPOs and NGOs to organise sports and games for persons with disabilities. Bangladesh Shishu Academy provides tutorials on art for children with disabilities.
- 79. Although the Initial Report suggests that cultural events and theatre shows involving persons with disabilities are organised across Bangladesh and are open to all,<sup>52</sup> such programmes and competitions mostly take place in the capital, excluding persons with disabilities living in remote areas.

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<sup>51</sup> Section 16(1) (p), RPPDA recognises the right of persons with disabilities to "participate in cultural, recreational, tourism, leisure and sports activities". Article 14 (Sports, Cultural Activities and Recreation) of the Schedule to RPPDA describes the provisions in further detail.

<sup>52</sup> UN Committee on the Rights of Persons with Disabilities, *Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010*, 18 April 2017, CRPD/C/BGD/1, paragraph 164, p. 28-29

80. The Government has yet to ratify the Marrakesh VIP Treaty, which would impose an obligation to provide people with visual impairments access to published works in an accessible format.
81. The National Disability Sports Complex<sup>53</sup> is not yet established.

## PART-C: SPECIFIC SITUATION OF BOYS, GIRLS AND WOMEN WITH DISABILITIES (ART. 6-7)

### Article 6: Women with disabilities

82. Given widespread gender-based violence, women with disabilities women with disabilities suffer the compound effects of disability-based discrimination and are also more prone to emotional, physical and sexual abuse.<sup>54</sup> Women not only suffer gender-based violence but are also subjected to other forms of violence.<sup>55</sup>
83. Persons with disabilities, especially women, are subjected to torture or cruel, inhuman treatment or punishment due to their disability and/or gender. Constitutional guarantees on equal rights and treatment hardly extend to individuals with disabilities, and women particularly are subjected to cruel, inhuman or degrading treatment from friends, family, neighbours and society due to their disability. Women with disabilities They are subjected to different forms of violence, including to physical, mental, emotional and sexual violence, have no security and are also deprived of all types of government services and facilities. Furthermore, acts of age-based violence against women with disabilities result in the violation of rights of minor girls.
84. The *Nari o Shishu Nirjaton Daman Ain 2000*, states that the concerned Tribunal will not release an accused on bail if the person, being a woman or a child or a person with disabilities, unless the Tribunal is satisfied that justice will be impeded if the individual is not released on bail.<sup>56</sup> This way, persons with disabilities are not discriminated against per

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<sup>53</sup> Reported as being built in the outskirts of the capital city to promote sports and games for children with disabilities, in paragraph 168, p.29 of the Initial Report, CRPD/C/BGD/1

<sup>54</sup> BLAST, National Council for Women with Disabilities and National Grassroots and Disabilities Organisation, 'Current status of rights of persons with disabilities in Bangladesh: Legal and grassroots perspectives'. [2016]

<sup>55</sup> Gender-based, age-based, work-based, education-based, religion-based, ethnicity-based, and many more.

<sup>56</sup> নারী ও শিশু নির্যাতন দমন আইন, ২০০০. Available at: <[http://bdlaws.minlaw.gov.bd/bangla\\_all\\_sections.php?id=835](http://bdlaws.minlaw.gov.bd/bangla_all_sections.php?id=835)>

se, but rather treated equally to other offenders and not given special treatment only on the ground of their disability.

85. It is the responsibility of both governmental and non-governmental organisations to implement laws relating to women with disabilities. There are a few NGOs that provide support to persons with disabilities, such as Assistance for Women Advancement and Rural Disabled (AWARD), Women with Disabilities Development Foundation (WDDF) and the Bangladesh National Blind Women Welfare Organization (BNBWWO), but very few state organisations work on these issues.
86. As there is no definition of ‘disability’ and ‘person/woman with disability’ in the Constitution, most initiatives, laws and policies are not disability inclusive. Family and social customs and norms are in many cases discriminatory to persons/women with disabilities. The National Women’s Advancement Policy 2011 has incorporated a chapter on women with disabilities, their special needs and instructions for prohibiting violence against them and the Domestic Violence (Prevention and Protection) Rules 2013 has also incorporated the issue of women with disabilities as a result of the strong and continuous advocacy and involvement of Women with Disabilities right based organisations.
87. According to the Household Income and Expenditure Survey (HIES) 2016, in comparison to their male counterparts, women with disabilities are more vulnerable as members of the society, and there are more women than men with disabilities, with approximately 7.59 % of the total population of women in Bangladesh having physical and/or intellectual disabilities, compared to 6.27 % of men.<sup>57</sup>
88. While seats are reserved for women with disabilities in all committees, starting from national coordination to grassroots level, to oversee the implementation of RPPDA,<sup>58</sup> no information as to whether women with disabilities are actually given such positions in the committees was found.<sup>59</sup>
89. It also be recognised that the poorer the individual, the more victimised s/he may feel. Even though legal aid is provided to those in need, people with disabilities living in rural areas

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<sup>57</sup> ‘Women with disabilities facing rehabilitation problems’ (*The Independent*, 30 December 2017) <<http://www.theindependentbd.com/printversion/details/130368>> accessed on 23 July 2018

<sup>58</sup> UN Committee on the Rights of Persons with Disabilities, Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010, 18 April 2017, CRPD/C/BGD/1, para. 172, p.29

<sup>59</sup> Khandakar Kohinur Akter, ‘Ensuring Rights of the Women with Disability’ (*The Daily Star*, 18 October, 2018) <<https://www.thedailystar.net/law-our-rights/ensuring-rights-the-women-disability-1300387>>

are mostly not aware of their specific rights that they have due to having disabilities, due to the lack of access to information as media coverage is poor in the rural areas.

**Recommendation:**

- a) The National Women Advancement Policy 2011 should be implemented properly and MOSW, MOWCA and the Department for Women's Affairs should adopt special and inclusive programmes to ensure the rights of women with disabilities.
- b) The population census should record the differences between disabilities of every form. This can be ensured through conducting in-depth surveys allowing individuals the option to describe their disability, rather than limiting it to disabilities that are more commonly recognised.

**Proposed questions:**

- What initiatives have MoSW, MOWCA, MoHFW taken for the protection and advancement of the rights of women with disabilities? What kind of monitoring mechanism is in place to oversee their implementation?
- Can there be a separate ministry focusing particularly on the issues of people with disabilities?
- What is the government doing to address negative attitudes towards disability which hinder the implementation of laws and policies?

**Article 7: Children with Disabilities**

90. Paragraphs 174 and 175 of the initial report state that the government has adopted a National Children Policy in 2011 and enacted the Children Act 2013 with special provisions for children with disabilities. However, due to insufficient awareness programmes, lack of accessibility and implementation gaps, children with disabilities are unable to enjoy the rights and benefits guaranteed by these instruments.

### **Recommendations:**

- a) The justice system and court procedures should be made accessible to children with disabilities.
- b) Law enforcement agencies and court officials should be sensitised on the rights of children with disabilities.

### **Proposed questions:**

- **Are children with disabilities being equally benefited by initiatives undertaken by the government under its National Children Policy 2011, the Children Act 2013, and programmes protecting the rights of children?**
- **Has the government taken any measures to ensure specific protection of children with disabilities and affirmative action to include them under existing initiatives?**

## **PART-D: SPECIFIC OBLIGATION (ART.31-33)**

### **Article 31: Statistics and data collection**

91. Around 24 million people, out of the total population of 160 million in Bangladesh, have disabilities, but any existing data on disability or persons with disabilities is not adequate, reliable or comprehensive. Reported data on disability rights is based on sample surveys or micro-level initiatives generally undertaken by NGOs in their individual working areas. The Bangladesh Bureau of Statistics (BBS) and the Bangladesh Institute of Development Studies have yet to conduct any comprehensive mapping of persons with disabilities in Bangladesh.

92. MoSW has been conducting the Disability Detection Survey (DDS) since 2013. As of 15 December 2016, 0.94% i.e.1.51 million out of the total population of 160 million Bangladeshis, have been identified by doctors as having disabilities. However, BBS studies reflect contradictory data: the 5th Bangladesh Population and Housing Census 2011<sup>60</sup> presents only 1.4% of the total population as persons with disabilities, while the HIES

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<sup>60</sup> [BBS and Statistics and Informatics Division \(SID\), Ministry of Planning, 'Population and Housing Census 2011: Socio-Economic and Demographic Report', National Series, Volume 4 \(December 2012\).](#)

2010<sup>61</sup> reports 9.07 per cent of the total population as living with disabilities; the Education Household Survey 2014<sup>62</sup> reports this at figure 1.33 per cent.

93. The DDS 2013, which is not complete yet and is a continuous process, covered a very small area and is full of errors regarding identification. Reportedly, it failed to reach people in slums, geographically remote areas, the Chittagong Hill Tracts, and even people in middle and high income groups in Dhaka.
94. According to the Initial Report,<sup>63</sup> government is obtaining information through local government, using the nation-wide birth registration process. However, the form lacks any provisions regarding disability.
95. Primary schools are entrusted with the responsibility of identifying children with disabilities within respective catchments areas,<sup>64</sup> but there is no effective system in place for such identification, nor are identification questionnaire templates followed up regularly. There is an e-chart for identifying visual impairment but relevant personnel lack expertise in using this tool and misidentify the categories of disability. In spite of DPE enhancing capacity through PEDP, schools have no significant initiatives for identifying children with disabilities.
96. The “Developing Model of Inclusive Primary Education Project in Bangladesh” is implemented in only 50 schools where the tools of identification available are not adequate and authorities lack expertise.
97. The doctors and staff of 103 disability intervention centres are not well trained on appropriate identification of disabilities. As a result, a large number of persons with disabilities have received ID cards and certificates with the wrong category of disability.

### **Recommendations:**

- a) Enhance the capacity of DDS 2013, by eliminating errors, and engaging skilled staff to conduct the survey, who are equipped with proper data collection tools and are able to comply with a process of identification that is aligned with internationally accepted norms.

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<sup>61</sup> [BBS and SID, Ministry of Planning, ‘Report of the Household Income and Expenditure Survey’ \(2010\)](#)

<sup>62</sup> [http://bbs.portal.gov.bd/sites/default/files/files/bbs.portal.gov.bd/page/7b7b171a\\_731a\\_4854\\_8e0a\\_f8f7dede4a4a/Educatin%20Household%20Survey%202014.pdf](http://bbs.portal.gov.bd/sites/default/files/files/bbs.portal.gov.bd/page/7b7b171a_731a_4854_8e0a_f8f7dede4a4a/Educatin%20Household%20Survey%202014.pdf)

<sup>63</sup> UN Committee on the Rights of Persons with Disabilities, Initial Report submitted by Bangladesh under article 35 of the Constitution, due in 2010, 18 April 2017, CRPD/C/BGD/1, paragraph 178, p. 30

<sup>64</sup> Ibid.

- b) Enhance capacity of 103 disability intervention centers, community clinics, and Upazila and district hospitals to identify persons with disabilities.
- c) Engage DPOs in technical cooperation with government disability rights initiatives.
- d) Replace medical and welfare models and address derogatory attitudes against persons with disabilities.
- e) Disseminate information through accessible formats and in hard-to-reach areas.

### **Article 32: International cooperation**

98. Although the government has a few initiatives that apply a rights-based approach, duty bearers largely follow a charity/welfare/medical model when providing services to persons with disabilities. Duty bearers consider persons with disabilities to be beneficiaries and initiatives implemented with international cooperation are focusing on the “disability” itself and not the person who has the disability.

99. Development Indicators usually do not consider the active and meaningful participation of persons with disabilities at the planning, implementing and monitoring levels.

100. The government is clearly committed to highlighting the prevention of disabilities as development for persons with disabilities. The government has developed 103 Prothibondhi Sahajjyo o Seba Kendra (centres for help and services for persons with disabilities), partially funded by World Bank, but these centres are not well equipped.

101. State and international agencies consider DPOs and persons with disabilities as lacking capacity. DPOs are not well recognised and do not have sufficient expertise to coordinate efforts and initiatives; as a result, they are often regarded as beneficiaries rather than change agents.

102. The state report does not reflect the actual situation of persons with disabilities in Bangladesh. Persons with disabilities lack information on government initiatives regarding children and persons with autism and neuro-developmental disabilities. While the state party report speaks about Public-Private-Partnership on disability,<sup>65</sup> there is no evidence or documentation of such a partnership being successful.

### **Recommendations:**

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<sup>65</sup> Ibid, para. 182, p. 32

- a) State should make mandatory directions on inclusion for donor agencies/international organisations, prioritising active, meaningful participation of persons with disabilities at all levels.
- b) Donor agencies should prioritise persons with disabilities, and not only the disabilities.
- c) The expertise of DPOs should be recognised nationally and internationally, and donor agencies should emphasize on this.
- d) Capacity building should be prioritised.

### **Article 33: National Implementation and Monitoring**

103. After ratification of CRPD, government has assigned focal points from 46 ministries and departments, but persons with disabilities are generally not aware of their Terms of Reference (ToR), duties and responsibilities. The focal points prefer to communicate with NGO professionals instead of DPOs or persons with disabilities.
104. Until 2015, the National Monitoring Committee of CRPD had only one member who was a person with disability, from NFOWD. Following advocacy by DPOs, the Committee is more inclusive, now comprising persons with different types of disabilities and DPO representatives. However, the Committee does not hold regular meetings and there is a lack of coordination between relevant bodies.

### **Recommendations:**

- a) Specify ToR for focal points and ensure that they report regularly.
- b) Activate the National Monitoring Committee, organise meetings regularly with active participation of persons with disabilities, including women with disabilities.
- c) Involve persons with disabilities in planning.
- d) Prioritise DPOs during decision making regarding persons with disabilities.
- e) Budgetary allocation for implementation of CRPD and monitoring.

## Annexure

### **Annex 1: Case Study under Article 14**

Rabiul, a boy with Intellectual Disability lived with his mother at Chatgaon slum area of Chattogram division. Rabiul's mother, Fatima, is a domestic worker and she went to work, restraining Rabiul with chains in their room every morning. In the morning of 11 August 2018, Rabiul's mother had habitually gone to work restraining her intellectually disabled son with chains, as per usual. Unfortunately, on that day there was a fire in the slum and their house caught on fire. All slum habitants went out of the slum in panic as soon as possible but Rabiul couldn't go out as he was restrained with steel chains, so he burned to death.

Source of information: <https://disability-memorial.org/category/location/bangladesh;>

<https://bdnews24.com/bangladesh/2018/08/12/bound-man-with-mental-disability-burns-to-death-in-chattogram-fire>

### **Annex 2: Case Study under Article 20**

On 28 February 2018, Kawser, who had speech and hearing disability, while walking home, was hit by a bus travelling in the same direction. Kawser could not hear the horn and was unable to retreat to safety, and the bus rammed into him. He fell and received a serious injury to the back of his head. He was hospitalized, and later died. Hasu Member, of Baropara Union of Daudkandi Upazila, Cumilla, who had gone to visit Kawser, helped his family to collect Kawser's corpse and his death certificate, and later gave this account.

### **Annex 3: Case study under Article 16**

Lamiya, a 14-year-old girl with intellectual disabilities, was raped and impregnated by her 60-year-old neighbor, Abdul Barek Mollah. The second child of a poor family, Lamiya grew up with her parents and siblings in a house consisting of one room with a tin roof and a straw-thatched separate kitchen at Khulna. Her father is a day labourer, earning between BDT 250-300 a day.

The parents, shell-shocked, returned with Lamiya to their village and informed the local Union Parishad chairman. A shalish, or traditional village arbitration, was set up in their house with the alleged rapist's family present. Lamiya's family believes that Mollah paid a significant sum of money to the Chairman in order to support his demand that she perform an abortion. He convinced the chairman to pay a lump sum of money from that amount to Lamiya's family to ensure their silence after.

Lamiya's parents refused. The Chairman and his local supporters began to harass the family. The Chairman however claimed, "I was 100 percent in support of the disabled victim in that case and any victim of rape." When pressed as to whether he pushed the family to consider abortion in exchange for money, he stated that these claims were made up by the family.

Lamiya's parents, distraught at the failure of local village arbitration and constant harassment and daunted by the prospect of going to court directly, were told by an acquaintance about the One-Stop Crisis Centre (OCC) at Khulna Medical College Hospital. The Khulna OCC is one of eight established in major cities to provide healthcare, police assistance, legal advice, and psychosocial counseling to women and children affected by violence.

The case came to light when the Women with Disabilities Development Foundation (WDDF), on a routine visit to the Khulna OCC in April 2016, met Lamiya (by then five months pregnant) and her mother. The organisation, which provides non-legal support to women with disabilities, assured their assistance together with the OCC. However, at this point, there was little to do but wait for Lamiya to deliver the baby. Pregnant at such a tender age, Lamiya was at risk but her pregnancy was also too advanced for an abortion, according to the doctors. Lamiya gave birth to a baby boy, who was placed in a government child shelter, but died aged 10 months from heart complications and Down's syndrome.

Meanwhile, back in the village, Lamiya's father filed a case at the police station with the help of the Khulna OCC. The Thana was initially uncooperative, according to WDDF. The investigation was being delayed and the charge sheet (the police investigation report) was not being filed. WDDF reached out to the Khulna office of the Bangladesh Legal Aid and Services Trust (BLAST), an organisation providing free legal services countrywide, to take on Lamiya's case. The accused rapist was eventually arrested in June 2016. Denied bail, he remains in jail. Rape survivor Lamiya's case, despite the local challenges, stands a chance at court. "We pushed strongly for the DNA test of the child because it would prove the accused guilty and speed up the case," says Shirin Akhter, chairman of WDDF. Facilitated by WDDF and the lawyers, the DNA test was conducted and proved a match with that of the rapist.

Meanwhile on 12 March 2018, the accused was released on bail. Threats to the rape survivor's family have reportedly started again; the witnesses did not go to the court as they were frightened of the accused and Union Parishad Chairman. The victim and her family members are facing threats of kidnap, death and still waiting for justice.

According to the report, police officers and medical officers - the first point of contact for any victim of violence — need to be trained to sensitively interview victims with speech, hearing and intellectual impairments and explain their options fully. Persons with disabilities face discrimination at court. Despite the lawyers' arrangements, Lamiya may have to face further challenges when giving evidence given her speech impairments.

#### **Annex 4: Case Study under Article 16**

The situation is particularly harrowing for hearing and speech impaired victims of violence, for whom many courts do not have arrangements for interpreters. Ariful Islam, sign language mute presenter of BTV, is part of the Society of the Deaf and Sign Language Users (SDSL), which gets called on by courts around the country in order to interpret for deaf and sign language users. However, another barrier exists. Many people with disabilities in rural areas in particular do not understand or use Bangla sign language which has become the standard in urban areas.

They use what is called “home sign”, a language developed — as its name suggests — at home and is used with their parents alone. What is the scope for interpretation then?

Islam, one of only three interpreters in the country capable of interpreting home sign, says it is a process. “First, I spend time with the victim's parents in order to better understand their common signs and then with the victim. I have to put her [most victims in his experience have been young girls] at ease, so that she won't be scared in court when giving testimony.” Sometimes, parents need to provide testimony for their hearing and speech impaired children when even highly trained interpreters are unable to get through to the victims.

However, lawyers and court officials alike often refuse to recognise that such assistance is necessary and a right of disabled victims and raise objections to such testimony. Such appeals and lack of logistics cause trials to lag and evolve into lengthy proceedings. Islam says in his experience of interpreting at court hearings for around 20 cases so far, only one case was resolved, that too in 2016, with the perpetrator getting life imprisonment for raping a deaf young woman in Gazipur in 2013.

Courts are reluctant to listen to testimonies of those with hearing, speech and intellectual disabilities. Even when interpreters are available, evidence presented by PWDs is often dismissed as non-credible. This is more common than we think, says AHM Forhad, an interpreter and trainer of sign language at Turning Point Foundation, an advocacy and capacity building organisation for and by PWDs. “Due to the communication barrier, many lawyers and others in court believe that disabled victims and witnesses are not capable of giving evidence in court,” says Forhad.

When interpreting for disabled victims of violence, Forhad notes that changes in their sign patterns can occur due to the trauma experienced. In these cases, even if victims use Bangla sign language, experts are needed to recognise and interpret trauma-affected signs of the victim.

### **Annex 5: Case study under Article 16**

*(This is a direct account from one paralegal)*

Early morning, on 28th February 2018, I came to know from Masuma Akter, Vice-Chairperson of WDDF that, a woman named Hosne Ara Akter (Nayan), father's name Bachhu Mia of Kanora Village, Baropara Union, Daudkandi, has become victim of severe violence by her husband Mohammad Ali (Father's name Bachhu Mia) and lost one eye. After some times, just before organizing grassroots Women with Disabilities committee meeting, the woman with her mother, grandmother and two girl children came to us.

We were extremely shocked and confounded to see her; she was seriously ill with one injured eye, hungry along with mentally devastated. She was crying continuously and I couldn't understand what initiative I should take in this moment.

Relatives including mother of victim woman also informed that, this in humanitarian torture and oppression to their daughter has been going on for long period; Number of village slashes couldn't stop this violence rather she lost one eyed. So, strong legal initiative and inflexible punishment of the offender is required now.

After having heard series of cruel incidents of violence and on the basis of their written complain to WDDF, I made a phone call to the national police help line (999), the authority received my complaint with importance and sent Sohel Ahammed, Sub Inspector of Police, accompanied with a police officer of Daudkandi Thana in our meeting venue.

He investigated the incident through talking with victim woman and her relatives directly and filed a litigation against offender with his responsibility. In order to arrest the offender, the police force also arrested offender's sister and sister in-law at that night. Subsequently, we invited her along with her family members in our office and we organized a discussion meeting with the reporters of National Daily Newspapers. Reporters expressed their commitment to support this victim and a leading newspaper, the Prothom Alo published an online report on this incident (Page 3 of Pathita News) on 5th March 2018.

Subsequently, the alleged offender's sister and sister in-law were released on bail but the police did not arrest the alleged offender. The Investigation Officer was transferred to another area and the alleged offender's relatives are reportedly trying to withdraw the case. In these circumstances, firstly, the victim after having lost one eye and her two girl children have been suffering from poverty and deprivation due to lack of physical, mental and financial support and counseling and secondly, the victim has to face threats, scarcity and mental harassment to pressure her to withdraw the case.

#### **Annex 6: RPPDA provisions provisions in relation to access to healthcare for persons with disabilities.**

The RPPDA establishes the right of PWDs to live in a healthy environment, and that depending on the type of disability, quality medical services and health care facilities must be provided to PWDs. It prohibits discrimination against PWDs, and also empowers them to make complaints to the District Committee against any discrimination faced while availing health care services, and also to claim compensation. The Act addresses aspects of food security and nutrition for children and adults with disabilities. It requires the state to take preventive measures to lower the risk of factors responsible for causing disabilities among children and women, and to reduce their medical expenses. It also calls for use of accessible modes of communication in all hospitals and medical institutions, including sign language interpretation or employment of speech language therapists where deemed necessary. Under the Act all aspects of accessibility

and mobility is to be ensured for PWDs in medical and health care institutions. Lastly, Schedule 11(kha) of the Act specifies that the State should encourage insurance companies to set up separate insurance for disabled PWDs to increase their social security. Under the National Health Policy 2011, the State is committed to providing unrestricted access to health care services and other medical services without discrimination and to raise widespread awareness on nutrition, health hazards, and available health care services to ensure a healthy and balanced lifestyle for PWDs. It also provides that free healthcare and services shall be provided for the poor and the disadvantaged members of the society, which especially benefits financially disadvantaged PWDs. The Sixth Five Year Plan (FY 2011 – FY 2015) requires that relevant authorities shall make early detection of symptoms of disability, primary medical rehabilitation, undertake a nutrition programme for pregnant women, appoint trainee doctors, nurses and other caregivers to deal with disability issues and introduce support services for use of assistive devices and equipment at health centres. The National Food Policy 2006 expressly refers to achieving food security for all including PWDs (Strategy 2.3.1). The National ICT Policy 2009 refers to ensuring quality healthcare to all citizens by innovative application of ICT (Clause D. 7) and improving management of healthcare delivery system using telemedicine and modern technologies benefitting PWDs in the long run. It also refers to the goals of improved community awareness, access to health care facilities, quality assurance of health care services, and enhancement of the capacity of the National Health Service delivery system (Clause E.7.1 – E7. 4).