Invisible to the Law: COVID-19 and the legal consciousness of persons with disabilities in Bangladesh

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Despite disability rights being recognized through formal legislation in Bangladesh, the rights of persons with disabilities are still not effectively ensured. State interventions during the pandemic have not sufficiently accommodated the rights of Persons with Disabilities. Pre-existing social prejudices have added to their plight. Due to social prejudice and myriad access to justice challenges, persons with disabilities in Bangladesh face negative attitudes when it comes to exercising their legal rights. The article uses primary data obtained through qualitative interviews and secondary sources to illustrate how the Covid19 pandemic has reinforced structural discriminations and increased the vulnerability of persons with disabilities.

Keywords: Disability rights, Bangladesh, legal consciousness, COVID-19, social model of disability

Introduction: Marginalizing the marginalized during the pandemic

Persons with Disabilities are already marginalized in the larger society, but socio-cultural neglect adds on to their plight, which can be best described with the famous quote from Manik Bandopadhyay: ‘...poor within the poor, low lives amongst the low-lives’ (Bandopadhyay, 1936).

The government of Bangladesh has formed a national Needs Assessment Working Group (NAWG) to provide the humanitarian intervention for COVID-19 uniting government and non-governmental humanitarian agencies and managed by Care Bangladesh’s ‘Supporting Bangladesh Rapid Needs Assessment (SUBARNA) Project’ (NAWG, 2020: 2).

The NAWG identified vulnerable groups that include persons with disabilities. Field reports show how the multi-sectorial interventions need targeted flows of services (NAWG, 2020: 2), because having persons with disabilities listed as target groups is not enough unless agencies ensure basic human rights principles of enhancing respect, ensuring accessibility, ensuring
equality and non-discrimination and participation, and strengthening accountability (Worm, 2012:16).

All these principles are hampered during Covid-19. It starts with the incomplete identification of persons with disabilities. As per the latest national database, the numbers of persons with disabilities registered for the social safety net is 15,09,716 (DSS, 2016), but only 95,000 have received an ID card (NAWG, 2020). This means that a significant number is out of the service network (Hussain, 2020). Persons with disabilities understand the laws to be non-functional when it comes to enforcing their rights. This perception has a lot to do with the existing bureaucracy and malpractices. In the COVID-19 context, challenges to the rights of persons with disabilities stem mostly from the inaccessibility (due to discrimination) and unavailability of safety measures and services. This lack of access is further reinforced by the myriad challenges faced by persons with disabilities in accessing the justice system and in using the law.

Methodology

For the purpose of this paper, we examined the personal and professional experiences of persons with disabilities in Bangladesh through qualitative interviews with four Disability Rights Activists, three of whom are persons with disabilities: Advocate Joardar (pseudonym), Mohammad Tanim (pseudonym) ¹, Shormy Roy ² and Ali Tanvir ³. Each interview lasted around 90 minutes long and was conducted virtually due to pandemic restrictions. They were semi-structured to allow for personal narratives through which we tried to explore the dimensions of discrimination faced by these individuals who have been marginalized in society because they speak in different ways (sign language) or use wheelchairs or white colored sticks instead of walking the ‘normal’ (!) way. These interview samples provide the pandemic stories that signify the perceived conflict between rights and social relationships, help us understand how they choose to mobilize the law when their life intersects with the law through denial of their recognition as persons with disabilities and the rights that come with it (Engle and Munger, 1996:7).

We also conducted a qualitative purposive sampling survey in Bengali with 20 volunteers who themselves or whose family member(s) have disabilities. The survey was designed to receive individual feedback on the Covid19 experience in respondent’s own words. The survey respondent profiles are summarized below:
These individual observations by ordinary people are important to see their struggles in everyday lives and choices in terms of fighting or simply accepting their deprivation. Therefore, ‘by drawing selectively on elements of the remembered past’ (Engle and Munger, 1996: 8), these narratives show how persons of disability think about their identity as a user of the legal system. This helps distinguish between the rights discourse and rights realizations: while disability rights activism has a strong presence in Bangladesh, the realization of rights has miles to go. Secondary sources were also reviewed, including study reports, scholarly articles and news to see how persons with disabilities develop a negative perception towards the law as a tool of protection. We used the theoretical frameworks of Legal Consciousness and the Human Rights Based Approach.

**Legal Consciousness**

The concept of legal consciousness is used to name analytically the understandings and meanings of law circulating in social relations. Legal consciousness studies ‘the ways in which law is experienced and interpreted by specific individuals as they engage, avoid, or resist the law and legal meanings’, as well as what people do not think of the law (Silbey, 2001). By studying how individual members of a society perceive its laws, it analyses what people do as well as say about the law, and is understood to be part of a reciprocal process in which the meanings given by individuals to their world become patterned, stabilized, and objectified (Silbey, 2008). Trubek (1984) maintains that legal consciousness addresses legal hegemony, for example how the law sustains its institutional power and how a society may explain/justifies its legalities despite a noticeable gap between the law on paper and the law in action. According to Salle Engle Merry (1996:5), it embodies:
the ways law is experienced and understood by ordinary citizens…the ways people understand and use the law… the way people conceive of the ‘natural’ and normal way of doing things, their habitual patterns of talk and action and their commonsense understandings of the world…

Legal consciousness has been categorized in different ways by different scholars. For this paper, Silbey and Ewick’s (1998) categorization of ‘against the law’ legal consciousness is of relevance, and which refers to a perception where the law appears as a vilified power, alien to people’s existence, unfair; and so people try to subvert the law if they cannot directly oppose it.

COVID-19 voices from Bangladesh

Three stories shared by the interviewees show what the pandemic meant for persons with disabilities in Bangladesh. The stories are not just about poverty or helplessness; they show how the existing structural system does not see the invisible persons with disabilities. Each story connects to human rights violations that RBA seeks to redress:

Romi’s auto rickshaw brings him food

Romi (pseudonym) is a mobility impaired auto-rickshaw driver. The state relief did not reach him. He learned about Mohammad Tanim’s food drive during the pandemic. He used his auto-rickshaw to reach the relief distribution center and received a week’s ration.

The Amputee Footballer

An amputee football team player in the town of Tongi stood in the queue for 72 hours to get a covid-19 test and was repeatedly denied it. The cashier demanded a bribe from him. He was too afraid to make any complaint, and sought the help of a local disability rights activist to contact the local councilor. The councilor ignored the case. Later, the football player visited a different missionary-run hospital where the activist had a friend doctor.

When impairment enchains

Hailing from Chokoria, Cox’s Bazar, Jannatul is a 2-year-old child with a mobility impairment who suffers from extreme malnutrition. A local benefactor agreed to pay for the medical treatment, the wheelchair, and the costs of treating the malnutrition at the local children’s hospital. Jannatul’s father also suffers from mental health problems. On the day of her
appointment, her father became unstable, so her mother chained the father so that she could take Jannatul to hospital:

The benefactor agreed to help, but what if they withdrew the help if Jannatul didn’t keep the appointment on time? (Ali).

Overall, the stories above demonstrate inaccessibility to services, lack of equality, transparency and accountability that persons with disabilities face in every step of their everyday life, more so when they interact with the law. The following section will discuss the extent of disability rights under the legal system of Bangladesh, and then through further narratives, the paper will address how people’s attitudes towards the law affected their rights in terms of the covid19 experience.

Legal framework for the rights of persons with disabilities in Bangladesh

The Constitution of the People’s Republic of Bangladesh pledges equality for all citizens, and affirmative actions for the systemically discriminated and historically backward sections of the community (Art.27, 28(4), 29(3). It is also the State’s responsibility to gradually ensure social security arising out of disablement (Art.15).

The first State initiative towards recognizing the rights of the persons with disabilities was in 1993 by establishing the National Coordination Committee on Disability under the Ministry of Social Welfare, followed by the National Policy on Disability 1995, the Action Plan on Disability 1996, and the 2000 National Foundation for the Development of Disabled Persons (NFDD). The Disability Welfare Act 2001 was the first ever legislation on the issue. However, the 2001 Act failed to recognize the diverse needs of persons with disabilities, and lacked sufficient redress mechanisms (Sec. 22). In 2005-06, the Department of Social Service introduced the disability allowance, provided for the Disability Detection Survey, and also employment for persons with disabilities (Hussain, 2020, 15).

After becoming a party to the UN Convention on the Rights of Persons with Disabilities (CRPD) in 2007, Bangladesh (a dualist state) was obliged to enact domestic legislations. In 2013, Parliament enacted the Rights and Protection of the Persons with Disabilities Act 2013 (RPPD Act), replacing the 2001 Act, and the Neuro-Development Disability Protection Trust Act, 2013 to addresses the protection of the persons with neuro-developmental disabilities i.e. autism, cerebral palsy, down syndrome, intellectual handicaps et al. The RPPD Act (supplemented by the Rights and Protection of the Persons with Disabilities Rules, 2015) is the key instrument in ensuring disability rights in Bangladesh.
Main features of the RPPD Act

The Act defines a Person with Disabilities as a person having any of the types of disabilities listed, and defined as the reciprocal impact of physical, psychological, intellectual, developmental or sensorial and environmental and perceptual impediment or damages caused either temporarily or permanently for any reasons whatsoever, which inhibits full and effective participation of the person in the society (sec.3. translated from Bangla). The definition includes any disability that hinders a person in pursuing normal life (sec.15). The Act especially recognizes all human rights, thereby expanding the availability of economic, social and cultural rights which are unenforceable under the Constitution of Bangladesh.

Upholding the UNCRPD principles

The Act incorporates the UNCRPD principles of Accessibilityy (right to equal treatment and opportunity in infrastructures, vehicles and internet and communication technologies), Reasonable Accommodation (providing alternative mediums of sign languages, brail, screen reader, text to speech, large print etc.); equal participation in unified mediums of education; and calls for Community Based Rehabilitation so as not to exclude persons with disabilities from complete participation in society (sec.33).

The Schedule to this Act further provides for social safety net allowances (500 BDT/month), district-wise registry of Persons with Disabilities, health services with due regard to food and nutrition, appropriate reduction of medical expense and training of health service providers to meet specific disability needs. Protection Committees from the National to the Upazilla (lowest tier of local governance/administration) level are formed to ensure smooth implementation of the law. Offences under the Act (i.e. denying the listed rights) are non-cognizable, compoundable and bailable. Any person with disability or their parents, legal guardian or any institution for disability rights can file cases under this Act.

Is the law enough?

Any legislative framework works in conjunction with social and cultural contexts. The ‘social model of disability suggests that much of the disadvantage experienced by persons with disabilities is ‘socially imposed’ (Reeve, 2004, 84-85), meaning the disability is not just a product of their physical or psychological impairment, but emanates from various socio-economic structures, cultural attitudes, prejudices and discriminations directed at persons with disabilities (Onyango, 2012; Terzi, 2004). The following section shows how the law falls short in application.
Inaccessibility of safety measures and services

Employment

As per the Household Income and Expenditure Survey 2016, nearly 6.94% of the population in Bangladesh are persons with disabilities (BBS, 2016). Covid19 has brought multiple layers of deprivation, particularly in terms of income and sustenance. It is estimated that 74% of persons with disabilities have lost income (Innovision, 2020). The readymade garments industry is a major sector of employment for persons with disabilities (SACDIR, 2016). The pandemic significantly affected European and North American economies (Alderman and Stevis-Gridneff, 2020), and an early response was to cancel shipment orders from Bangladesh (Leitheiser et al, 2020: 4) and refusal to pay for the already procured costs by the Bangladeshi garments industry owners (Kabir et al., 2020). Approximate loss for cancelled/future loss of supply of apparels is estimated to be worth US$3billion (Ahmed, 2020; FairWear, 2020). This had affected around 2.26 million workers by June 2020, and who had to adopt negative coping strategies such as going hungry, selling household goods to purchase foods and essentials. No step has been taken to ensure skill-enhancing and educational courses for these persons online. Loss of employment is likely increasing the risk of malnutrition and correlated sickness (Sightsavers, 2020):

If the poverty due to Covid19 unemployment compels a family to cut down their food budget, the member most likely to receive no food first will be the disabled one. (Ali)

Access to Information

A major challenge is access to information about social distancing, personal hygiene and other measures implemented:

I personally think staying home and social distancing is important, but I don’t know how to take care of a child with autism if a family member is affected with Covid, nobody gave us guidelines. Many people don’t understand what is Corona, what can we do? (respondent 20)

Some persons with hearing impairment use lip reading as one of the most common ways of communication which cannot be used while wearing a mask. People with physical disabilities including cerebral palsy and spinal cord injury may not be able to follow general safety precautions independently (interview with Joardar, 2020). There has been no targeted free distribution of masks, gloves, and hand sanitisers for disabled citizens (NAWG, 2020, 51).
Water, Sanitation and Health (WASH) Facilities

Approximately 42% people do not have access to hygiene materials such as soap, a wash basin, hand sanitizer etc. (NAWG, 2020). The local wash basins and hand sanitizing booths set up by government were inaccessible for wheelchair users because the design and height wasn’t user-friendly (UNB, 2020). The authorities seem to be indifferent to the needs of persons with disabilities:

As a wheelchair user we can’t use these basins. I called the Mayor on a live TV show to ask him about it, he did not answer. Neither did the councilor in my ward respond to my inquiries. (Tanim)

Shormy Roy expressed her concern over maintenance of hygiene and safety. People like her would need presence of care givers in order to survive:

I face challenges in maintaining the safety guidelines formulated for combating covid-19 myself being a person with disability. (Shormy)

Relief distribution

Although the law mandates priority treatment and reasonable accommodation for persons with disabilities, most relief activities by the government fail to cater to need-specific distribution. Most announcements for relief are made through loudspeakers in main roads. Lack of use of sign language and braille materials, and focus on main streets meant that the announcements often did not reach the persons with disabilities (especially with hearing and visual disability). As per the survey conducted by Bridge Foundation (2020), an NGO working for disability rights, many persons with disabilities could not access the relief packages as they could not stand in queues or compete with crowds. Many distribution committee members failed to make the list disability inclusive and ignored any complaints filed regarding corruption in relief provision (Interview with Tanim and Joardar, 2020):

A person with disability at some point becomes a burden on the family especially if there is no earning member or someone to take care in family. If government gave some allowance then I might have been able to buy medicine and bear personal expenses. I studied up to class 8 with the help of private tutor, but could not continue due to various family reasons and insolvency. Buying neuro-medicines and other medicines every month is costly. (Respondent 6)

It was private initiatives by NGOs like Identity Inclusion and activists like Advocate Joardar and Tanim who searched for deprived persons with disabilities living in alleys and shanties to provide them with food. Only people with registered cards get on relief distribution lists, which means an overwhelming 1,414,716 are not visible on paper, and are at risk of not receiving state relief service (NAWG, 2020, 83). It will therefore not be an exaggeration to say
that these people are ‘invisible’. With private interventions, there has been no follow up, so many persons with disabilities might have received food for one week, and then left hungry for the next few weeks. Moreover, state reports have a negative view as ‘sporadic relief distribution by amateur individuals and organizations are increasing risks of virus transmission along with violation of rights and dignity of affected people ’(NAWG, 2020: 56).

Medical services

During the early phase of the pandemic, many hospitals/health centers shut their doors to people, fearing COVID infection. While some hospitals have been designated as COVID treatment centers, these hospitals often denied other services including emergency care. Non-COVID i.e. ordinary hospitals denied admitting patients without a COVID-negative report, and COVID-designated hospitals refused to do blood tests unless patients showed visible symptoms (Ahmed, 2020):

He was infected by covid 19. He was at home the entire time but still got infected. He was in ICU but doctor and nurses didn’t treat him well. As a result, he developed very bad bedsores and still suffering badly. He lost his ability to sit on his own. (Respondent 11)

Many people requiring regular services like dialysis, physiotherapy etc. have been left untreated. Indigent families could not arrange home based special treatment. Many persons with disabilities were deprived of caregivers due to the restricted movement during lockdown. There have been no steps to make counseling available for persons with disabilities to reduce their anxiety and stress during the pandemic (Sarker, 2020).

I have heard that the families of some care-givers who are not family members, have persuaded the care-givers to give up their work for fear of infection from Covid-19 because “social distancing” cannot be maintained. This is a nightmare for a person with a disability who needs someone to physically assist them. (Julian Francis, 2020)

Education

As part of the SDG realization goal, the government developed open source Bangla “Text to Speech (TTS)”, and textbooks from class 1 to 12 are reportedly converted into DAISY (Digital Accessible Information System) standard. Government also has a Bangla Braille software (VNRs, 2020, 26). During the pandemic, the government has facilitated distance learning via telecasting school lessons on TV and online (Sightsavers, 2020). But most lessons don’t have sign language instructors, and no special provisions have been made for children on the autism spectrum who can’t keep up with the speed of general instruction (Zarrin, 2020). Very few institutions such as IPNA schools and Brac are running online education programmes with
specialized modules for persons with disabilities (IPNA, 2020; OECD, 2020). Our survey data also reflects the same, where people gave individual responses such as:

Table 1: educational challenges of persons with disabilities during Covid19

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<td>Expensive to buy internet for online learning</td>
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<td>Children can’t follow lessons on mobile phones or TV as the teaching speed is too fast</td>
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<td>They don’t have smart devices such as a TV, computer or phone</td>
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<td>The special school where their children went was shut down during covid 19</td>
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Unavailability of safety nets and services

No special stipend

Under the National Social Security Strategy (NSSS), 1 million Persons with Disabilities (1–59 years) are supposed to receive a stipend of 750BDT (approx. US$9) per month. Persons with disabilities above 60 years would receive a pension amounting to BDT3,000 (approx. US$36) per month (NAWG, 2020, 47). At the onset of the pandemic, the government of Bangladesh announced a safety package of 1250 crore BDT at 2500 BDT (approx. US$147.5 Million at US$29.5) per family for 5 million destitute families affected by Covid19 through mobile financial services (MFS) (TBS, 2020). As per the official press note, the beneficiaries included vulnerable communities like rickshaw pullers, daily-wage workers, construction workers, farm labourers, salespersons, employees of small businesses, poultry workers, transport workers, and hawkers, while the regular allowances for persons with disabilities were to continue (BD news24, 2020). Allegedly, this has been abused by officials of the local distribution committee, who denied distribution of the 2500 package to persons with disabilities:

I have been told that that if a person with disability is already receiving the 750 taka allowance, he or she will not for the 2500 BDT safety package. Nobody seems to realize that so many persons with disabilities are now out of their regular jobs and a meager 750 BDT (US$9 approx.) is now insufficient sustenance. (Joardar)

Another vulnerable group amongst the most vulnerable are the street beggars in Bangladesh. The blind and people with mobility impairments, often rely on begging to support themselves. With the country wide general holidays (the euphemism for lockdown in Bangladesh) usual places for begging such as market places, traffic signals, and pavements are vacant. Whole blocks of residential areas were locked down, preventing the beggars from entering to seek food or money as many used to daily before the pandemic. These people not only have to fight with their disability to look for sustenance, but also expose themselves to the virus by venturing in new places. In some families, persons with disabilities are the main income earners.
Therefore, with many people now unemployed, not only people with disabilities are affected, but also other family members.

**Social stigma**

COVID-19 positive people in Bangladesh have been facing serious social stigma (Karim, 2020). Parents have been left on the road, dead bodies have been denied proper burial rites, quarantined houses have been pelted and outcast. Persons with disabilities have been shouted at, deprived of relief, denied access by hospitals and suffered from depression (author survey data). Our survey shows that 2 respondents were verbally abused in public, 5 did not receive state relief, 5 were denied treatment by hospitals, and 15 suffered from depression. Pre-existing prejudice against persons with disabilities has further increased (NAWG, 2020, 14):

As an autistic child he doesn’t understand the importance of social distancing, cough and sneezing etiquettes, wearing PPE etc. (Respondent 2)

Moreover, Bangladesh has a strong culture of *mehomandaari* (entertaining guests i.e. any people paying a social visit at one’s home). As such, it was harder for people in villages or small towns to maintain social distancing if guests visited:

Many people visit at home, we try to help them. Village people take offence if we say anything about these issues (social distancing). And it is very difficult to observe these rules in a village. (Respondent 14)

**Gender based violence**

Gender based violence (GBV) is rampant and underreported in Bangladesh, however the pandemic has seen a sharp increase in violence against women and children (MJF, 2020). GBV is a serious social and crime issue in Bangladesh, but victims are often silenced so as to protect social prestige and ‘*ijjot*’ (honor):

In Gazipur city, an 8/9-year-old girl child (with autism spectrum disorder) had been sexually abused by a neighbor during lockdown. Upon discovering, the mother suppressed the issue fearing social backlash. The child has been kept chained to the room now. Upon advising her mother to report the abuse to police, her response was she preferred peace over fruitless loss of energy. (Tanim)

The challenges of access to justice for sexual and gender-based violence have escalated as a result of the pandemic with its lockdown and limited access to services (REF). In fact, the pandemic has made justice seeking a lesser priority where food, financial and health (Covid contagion) consideration get preference (Tithila, 2020).
When the law doesn’t help: the legal consciousness against using the law

Simply having laws is not helpful if the laws are not supported by sociocultural and structural measures (Berry & Nielsen, 2007). Various factors contribute to the legal consciousness of persons with disabilities that discourages them from using the law, and which makes it even harder during the pandemic. From our survey, we tried to understand how people with disabilities perceive the use of the law. Around 80% of the respondents said they didn’t take any action after being mistreated because they don’t trust the system, while 20% said that taking any legal action only increases risks of further harassment or poses safety threats. Many respondents agreed with this statement in the survey:

It is extremely difficult to get help unless you know someone inside the system.

Advocate Joardar, who has been working for protection and promotion of disability rights for a long time, remarks how people rarely use the law. In 2016, he encouraged and provided legal services in the first case filed before the District Level Committee (mentioned above) in Chattogram under the 2013 Act. Till 2019, there were only 23 cases filed under the Act. While working as the Country Coordinator for the USAID Project on Expanding participation of PWD Programme (EPD)⁶, he noticed that many local government officials were not aware of the disability rights laws, nor of their duties under such law:

… few human rights defenders, rights activists and lawyers knew about the law, but then even they were not aware of its contents, or what sort of remedies a person with disabilities could ask for. When someone did know the law well, they would rarely encourage others to use the law. It is an example of the Bengali proverb: Kazir goru ketabe ache goale nei (the law exists just on paper, not in the real life). So I think the usefulness of the 2013 Act has not been tested sufficiently. (Joardar)

Conclusion

The above discussion shows that the pandemic has pushed persons with disabilities further into the margins of the society. From our interactions with the interviewees, two points have come clear: (1) how persons with disabilities experience their denial of rights, constructs their ideas of life and of their worth as a human being; and that (2) their preexisting deprivation of legally guaranteed needs and entitlements, compounded with the complicated legal framework, lack of rights awareness and access to justice challenges, shape their attitude towards using the law as a means of protecting their rights. The way persons with disabilities have been left invisible, shows that the colonial legal system continues to subjugate the ordinary and the vulnerable sections of society. One might even argue in favour of the law, that the legal framework can’t properly protect their rights partially due to this antagonistic legal consciousness that
encourages people to navigate through the social and procedural barriers connected with their disabilities by actually avoiding the procedure to opt for ad hoc solutions. But whatever view we may take, the truth that persons with disabilities remain without protection and sustenance prevails.

In Bangladesh, even before the pandemic, persons with disabilities (and any ordinary person for that matter) choose to remain passive over seeking legal remedies. Such passivity in a way, reinforces the lack of accountability and the system loss in the disability protection schemes.

The lack of coordination of the state institutions also shows that the social model of disability is non-existent in the administrative discourse. While the social model should redirect and redesign societal attitudes, practices, and perceptions on disability itself rather than the person (with disability), and while the national laws do recognize and acknowledge people with disabilities as equal citizens with guarantees of full participation in all spheres of social life, the social reality in Bangladesh is otherwise. Private individuals and NGOs that operate with empathy are an exception. Social stigma and prejudices have made the pandemic hit harder persons with disabilities. The pandemic has identified how ideas on inclusivity and accessibility need an overhaul in Bangladeshi society, from the grassroots level till the policy making and executive level, so that along with civil and political rights, our legal system and society appreciates the vitality of social and economic rights under the wider international human rights framework.

Declaration of Interest
The Authors declare that there is no conflict of interest involved in this research to the best of their knowledge.

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Notes
1 Bangladesh Cricket Association for the Physically Challenged was founded between 2013-14. The Bangladesh Wheelchair Association has over 200 wheelchair users, both men and women.
2 Shormi Roy is a person with cerebral palsy, an advocate for disability rights and leading the Association of the Persons with Cerebral Palsy
3 Student, Department of English, University of Chittagong. Ali had congenital physical disability and was cured by surgery as a child. During the pandemic he has been conducting humanitarian relief distribution in Cox’s Bazar area.
4 The Neuro-Development Disability Protection Trust Act, 2013, aims at establishing a Trust to socially empower people with neurodisorders.

5 Mohammad Tanim initiated humanitarian intervention in Dhaka city ward where he lives, which has around 400 people with disabilities. He also collaborated with Coca-Cola company for relief distribution. Coca-Cola made a list of 1,100 people but even that didn’t initially include persons with disabilities.

6 USAID's Expanding Participation of People with Disability Program aimed to empower disabled people's organizations (DPOs) in Bangladesh to facilitate district level implementation of the UNCRPD by capacity building and legal advocacy of the local communities. The EPD was implemented by the Rule of Law LLP under the Harvard Law School Disability Program. The project operated in 7 districts of Bangladesh from 2013-2020. BlueLaw, National Grassroots Disability Organization (NGDO), the National Council of Disabled Women (NCDW), and Bangladesh Legal Aid and Services Trust (BLAST) were local partners. See https://disabilitybangladesh.org/

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