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Disability Care: Bangladesh

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রেজিস্টার্ড নং ডি এ-১

বাংলাদেশ



গেজেট

অতিরিক্ত সংখ্যা
কর্তৃপক্ষ কর্তৃক প্রকাশিত

বৃহস্পতিবার, ডিসেম্বর ১, ২০১১

বাংলাদেশ জাতীয় সংসদ

ঢাকা, ১ ডিসেম্বর ২০১১/১৭ অগ্রহায়ণ ১৪১৮

সংসদ কর্তৃক গৃহীত নিম্নলিখিত আইনটি ১ ডিসেম্বর, ২০১১/১৭ অগ্রহায়ণ, ১৪১৮ তারিখে
রাষ্ট্রপতির সম্মতিলাভ করিয়াছে এবং এতদ্বারা এই আইনটি সর্বসাধারণের অবগতির জন্য প্রকাশ করা
যাইতেছেঃ—

২০১১ সনের ১৮ নং আইন

The Lepers Act, 1898 (Act No.III of 1898) রহিতকরণকল্পে প্রণীত আইন

সেহেতু, The Lepers Act, 1898 (Act No.III of 1898) রহিত করা সমীচীন ও
প্রয়োজনীয়;

সেহেতু, এতদ্বারা নিম্নরূপ আইন করা হইলঃ—

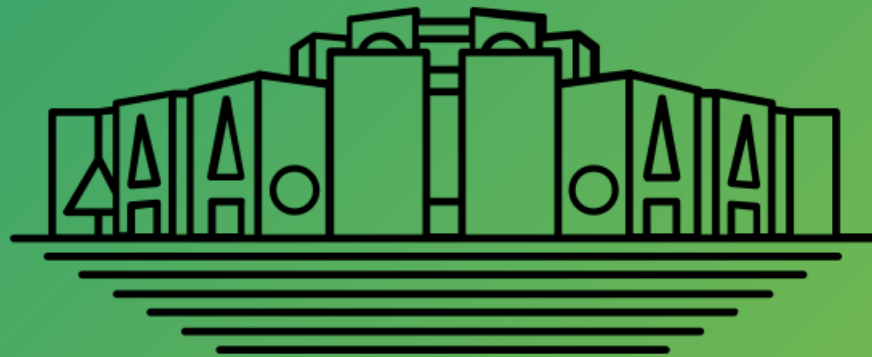
১। সর্বশেষ শিরোনাম ও প্রবর্তন।—(১) এই আইন The Lepers (Repeal) Act, 2011
নামে অভিহিত হইবে।

(২) এই আইন অবিলম্বে কার্যকর হইবে।

(১৫০৭১)
মূল্য : টাকা ২.০০

Repeal of The Lepers Act, 1898

The Parliament Repeal the
discriminatory The Lepers Act,
1898 on November 26, 2011.



Persons with Disabilities’ Rights and the Protection Act 2013.

CLAUSE 16.2:

“ANY PERSON, INSTITUTION, AUTHORITY OR ORGANIZATION THAT SHOWS ANY TYPE OF DISCRIMINATION AGAINST PERSONS WITH DISABILITIES HAVE THE RIGHT TO COMPLAIN AGAINST ANY KIND OF DISCRIMINATION...”

“IF THE COMPLAINT IS ACCEPTED, THEN COMPENSATION FOR PERSONS WITH DISABILITIES WILL BE GIVEN....”



Person affected by Leprosy received Disability Card from Social Welfare Department



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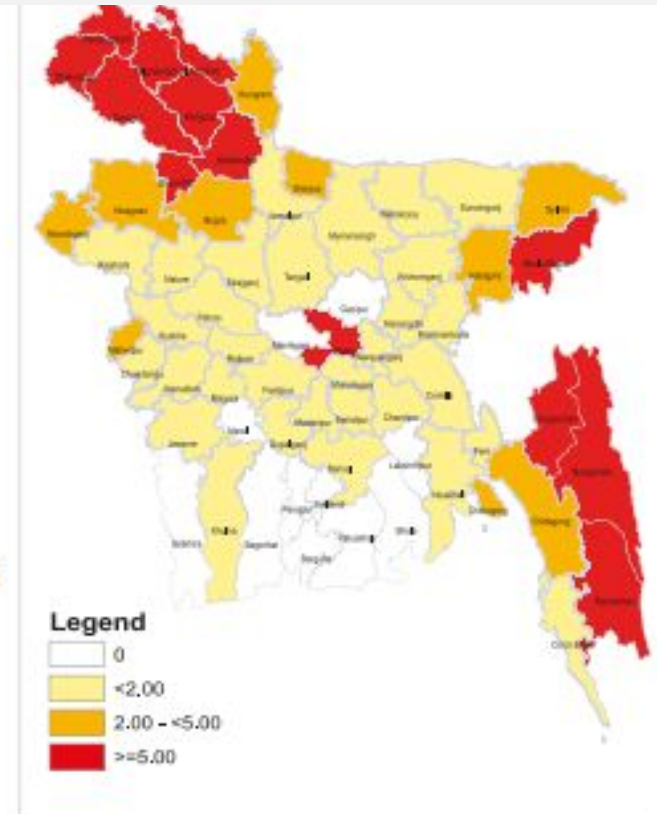
Bangladesh Leprosy Control Strategy 2016-2020

Strategic Pillars 2

“Strengthening all measures aimed at preventing the occurrence and worsening of disabilities by timely detection and effective management of acute complications and promoting oriented self care practices. Care after cure program should be strengthened with promotion of routine ulcer care and minor surgeries may be conducted at districts & sub district hospitals.”

Bangladesh Leprosy Control Strategy 2016-2020

*Accelerating
towards
a leprosy-free
Bangladesh*



Government of the People's Republic of Bangladesh
Ministry of Health and Family Welfare
Health Services Division
Directorate General of Health Services
National Leprosy Programme (NLP)

July 2017

Bangladesh Leprosy Situation



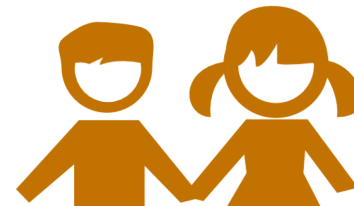
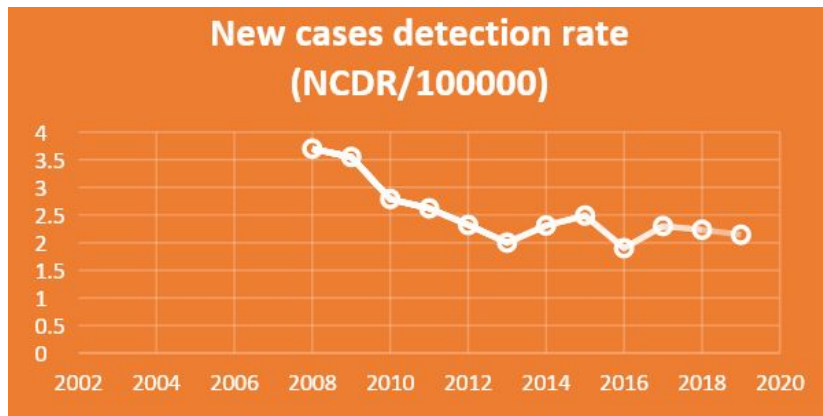
2019

3638

New Leprosy Cases



6.94 % G2D (252)
among New Cases



3 G2D Child Cases

2019



Disability Care In Bangladesh

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Disability Prevention

Active Case Identification through

- Contact Tracing
- Extensive Contact Survey
- Skin Camps
- Self Help Groups (SHGs).

Disability Care in Bangladesh

- Institutional care

- A. 3 Govt. Leprosy Hospital
- B. District Hospital & Upazilla health Complex.
- C. 103 Disability centers countrywide by Social welfare dept.
- D. NLP Partners hospital

- Community Level Care

- A. Early case detection by TLCA
- B. Selfcare by Partners
- C. Self-Help Group approach (more than 2500 Self-help Group formed by person affected by Leprosy)

Institutional Care



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Treatment & Care

1. Protective Footwear

Custom made protective footwear provided by partners

2. Assistive Device

Assistive device provided free of charge to disabled patients from footwear factory specially for leprosy patients.





Treatment & Care

1.Reconstructive Surgery

Restore function and forms as far as possible

2. Post operative Physiotherapy

Physiotherapy provided free of cost at leprosy hospitals

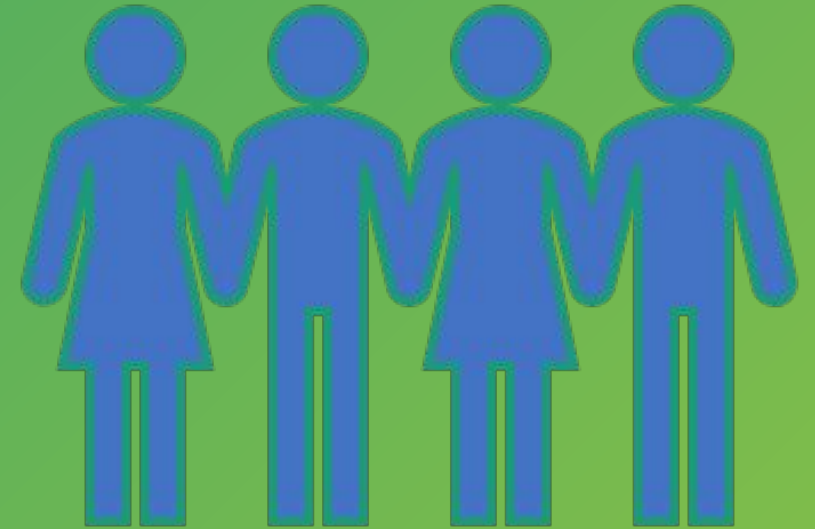




Treatment & Care

- Ulcer Care: Regular ulcer care provided at Upazilla Health Complex, District Hospital & Partner's Hospital for prevention of disability.
- Self care also demonstrated to patients during the session.
- Counselling
 - Various level of psychological counselling provided by leprosy hospital across the country

Community Level Care





TLCA Provided Care

Early case detected by TLCA.

TLCA provides hands, feet & eye care at upazilla & below level.

They also provided various health education on safety, ulcer preventions etc.



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o Self Care at Community level

Self care of foot, hands, eye care taught by TLCA, SHG & NGO workers to prevent disability.



Mental Motivators: Peer Group Support

- Enhanced self-esteem, status, social interaction and inclusion within their immediate community and wider society
- Have equal and easy access to public and private opportunities and services.
- 1-year pilot initiative in 4 Districts

Covid-19 Pandemic Challenges

- Monitoring & Supervision interrupted.
- Shifting of Human Resources to Covid-19 Response.
- Healthcare Providers affected by covid-19.
- Patients refuse to visit health facilities.
- Service delivery interrupted e.g. MDT supply, Suspect identification, contact tracing, disability care, follow-ups.
- IEC & ECS activities were limited.





NLPB responses to Covid-19 pandemic

- DGHS declared all health services are functional.
- NLP issued Advisory notice on during covid-19.
- NLP Circulated MDT supply related order to Districts.
- Consultative meeting with partners & high officials.
- NLP partners distributed PPE to Health Care Providers.

Challenges

- Reluctance of healthcare professionals working with leprosy services/less interested to grow career with leprosy.
- Existing leprosy specialized hospitals are not well equipped.
- limited training for young medical practitioners to sensitization on leprosy.
- NLP has limited budget for early case detection & Health awareness on disability.
- No budget & manpower for provision of Assistive device & footwear production.

Opportunities

- Integration with social welfare dept for disability care, social rehabilitation & SafetyNet accessibility.
- More disability centers may be installed and integration with DGHS.
- Integration with existing health system.
- Skills training for disabled patients to cope up with normal life.
- Engagement of field health workers for awareness, case detection, supervision & reporting.
- communities for early diagnosis & prevention of disability.

Recommendations

- Ownership & integration of leprosy with health services.
- Importance of leprosy in medical graduate college syllabus.
- Peoples organization (SHG groups) & family members needs further training & involvement.
- DSF (Demand Site Financing) program needs to be incorporated for leprosy to early referral, complications management.
- More Research needed.
- Online disability care training for leprosy could be effective.
- Contingency plan for pandemic or emergency.

National Leprosy Conference, 2019



আজ দুপুর ১১ ঘটিকায় ২০১৯ খ্রিস্টাব্দে একটি জ্যেষ্ঠতম National Conference 2019 on Zero Leprosy Initiative by 2030 অনুষ্ঠানে প্রধানমন্ত্রী শ্রীমতী নরেন্দ্রা মোদী ৩ নং স্লোগানকে ধরে একটি স্মারক পত্র প্রদান করেছেন। স্লোগানটি হল: 'শূন্য ২০৩০ / শূন্য লেপ্রসি ইনিশিয়েটিভ'।



- Honorable Prime Minister Inaugurate 'ZERO Leprosy Initiative By 2030' of National Leprosy Program.
- Zero Leprosy Initiative by 2030
 - 1) Zero Disease
 - 2) Zero Disability
 - 3) Zero Discrimination

The image features three elderly women, likely of South Asian descent, wearing vibrant, patterned shawls in shades of pink, red, and yellow. They are positioned against a light-colored, textured wall. The woman in the center is the most prominent, looking slightly to the right with a gentle smile. The women on either side are partially visible, looking towards the camera. The overall composition is framed by a dark, semi-transparent overlay that contains the central text.

**Let's Make the World
Leprosy Free**