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People’s initiatives during pandemic

The prolonged lockdown and the stagnation of social activities due to COVID-19 pandemic are affecting the lives of the vulnerable people. Their problems are often hidden and hard to be addressed during the pandemic.

In this difficult situation we witness the people’s initiatives in different places. We are pleased to share some cases of responding to COVID-19 related issues that the alumni are working on.



Relief distribution by women, Nepal

Engagement of persons with disabilities in COVID-19 response
Ms. Taslima Akter, ILDC2015,
Centre for Disability in Development (CDD)



Ms. T. Akter

Like other countries, COVID-19 spread as a pandemic in Bangladesh. The first case of COVID-19 in Bangladesh was detected on 8 March 2020. Most of the people have been facing social, mental and economic challenges. However, the situation of persons with disabilities (PWDs) is much harder than others.

Centre for Disability in Development (CDD) conducted in-depth interviews with PWDs and communicated with other development organizations working for PWDs. It was revealed that PWDs have been facing several issues. First, most of the PWDs and their family members have lost their sources of income. Therefore, their food intake has significantly reduced. Second, the rehabilitation services from professionals were stopped due to the difficulty to keep physical distance in these services. Many

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PWDs also had to stop medical treatment and taking medicines for diseases like diabetes, blood pressure, etc, due to their limitation for going out. Third, PWDs are facing greater challenges to access the information on COVID-19 prevention measures and receive a relief program if they are not targeted. It is often challenging for them to reach to a distribution point, or compete with others to get services. Though a number of organizations, associations, agencies were extending supports to the poorer people in the society, the opportunity is not always adequately or appropriately provided to PWDs.

Promotion of Human Rights of PWDs in Bangladesh (PHRPBD) is one of the projects implemented by CDD in eight districts of Bangladesh through nine sub-partner NGO. This project aims to improve the quality of life of PWDs through effective local resources ensuring that the PWDs would be empowered and included in the development process. Under the project, there are 90 Self Help Groups (SHG) comprising 1200 persons with all types of disabilities, of which 9 groups consist of only women and other 9 groups include youth.



Persons with disabilities received awareness messages on COVID-19, Cox's bazar

In this pandemic situation, PHRPBD project has created many initiatives. After breaking out of COVID-19, apex (association) body of SHGs distributed IEC (Information, Education and Communication) materials on COVID-19 to each SHG members and local community people of all project locations to create awareness on the safety and security measure. Apex body members kept communication with each SHG members using the phone and sometimes through home visit keeping physical distance.

Leaders of apex body have good relation with local stakeholders. From the beginning of this crisis, they tried to continuously communicate with local government (union parishad) and sub-district council (upazila parishad), different government departments, other NGOs and local elites to collaborate to respond COVID-19. They provided the list of PWDs and other marginalized people of their community, so that these people can be prioritized for getting any services and support from the government.

Considering more significant impacts on the most vulnerable people, PHRPBD projects planned to initiate more activities to respond COVID-19 after several meetings with leaders of SHGs, apex bodies

and partner NGOs. Leaders of SHGs and apex bodies were involved in the whole process of COVID-19 response in all project location to support partner NGOs. After getting budget from CDD, apex body discussed in the meetings on how to process and distribute the support to PWDs. At first, they formed a committee of 5 members who were willing to work voluntarily during the whole period of pandemic situation. They started from quotation collection of relief goods.

Leaders of SHGs and apex body members played a vital role in the identification and selection process. They discussed with other PWDs of their community to select persons who really need support and to identify their needs. They were involved in the whole process of COVID-19 response (from selection, planning, purchasing, and distribution). The goods were distributed door to door of each person's house through apex body members. Partner organizations and CDD supported through empowering their capacities in the whole process.

Project also developed an awareness guideline for partner organizations comprising awareness message like what to do and what not to do, how social distancing can be maintained, what to do during isolation / home quarantine, hotline numbers for emergency, etc. to sensitize PWDs and their families regarding COVID-19.



Ward counsellor of Chittagong city corporated to support PWDs and their family

An apex body member Eti Akter shared, “sometimes we faced challenges, for example, public transportation was not available in the pandemic situation. These were double challenges for people like us who have difficulty in movement or communication. However, we continued our communication with different local stakeholders to get support from them. These experiences increased our capacity”.



Engagement of Apex body member during relief distribution

PHRPBD project always aims to work for the rights and empowerment of PWDs and other marginalized people. And now empowered PWDs from SHGs and apex body are dedicating themselves for COVID-19 response activities in collaboration with local government and acted as the resource platform for the other PWDs and other marginalized people of their community. It is also an opportunity to demonstrate that, PWDs can contribute to their community and society if they become empowered through developing their skills and knowledge.

*Voice from a person with disability as well as a development worker
Mr. Mohammad Jahangir Alam, ILDC 2016,
Centre for Disability in Development (CDD), Bangladesh,*



Mr. M. J. Alam

Today the marginalized group, especially persons with disabilities (PWDs) are very much under threat, much more vulnerable than other people. PWDs are losing educational opportunities, employment and personal relationship. They are facing a lot of problems in every aspect of lives.

PWDs do not have enough access to the necessary information on COVID-19. Although there are different types of disability such as visual disability, severe low vision, speech and hearing impairment, learning disability and multisensory impairment, and so on, the existing COVID-19 awareness programs are not fully responded to each of them. The testing centers and quarantine centers do not provide reasonable accommodation, quality of services and accessible information system. The staff at these facilities are not disability friendly and do not show positive behavior towards PWDs.

Most of the PWDs need a guide or a personal assistant depending on the types and level of their impairment. For instance, persons with visual disability need sighted guide, multisensory disabled need care givers, those who are using wheelchair need a personal assistant or other devices supporting their mobility. Social stigma against transmitted persons is another big challenge in our community, so nobody would like to accompany with the PWDs in the testing centers nor quarantine centers for fear of transmission.

Thus, the PWDs and their self-help groups or disabled people's organizations (DPOs) are left behind. Currently, the DPOs and SHGs are mostly living in town houses with their own family. Lockdown and physical distancing policy are big challenges for us to meet with different government authorities. Therefore, we are trying to raise our voices by writing letters to health ministry, by organizing online meeting/seminars/workshops, so that the Covid-19 Pandemic Control and Management Coordination committees in both national and local level would address diverse needs of PWDs and other marginalized group to include us in the coordination process.

I would like to request all of developing actors. Please consider and make efforts to include PWDs in your development programs, considering accessibilities and reasonable accommodation. Please remove the barriers in your behavior, your physical infrastructure, your policy issues, and your communication.

I believe the disability is not only disability issue, it's 100% of every aspect of development actors and sectors.



Ms. B. S. Wagle

Helping each other during lockdown
Ms. Bina Silwal Wagle, ILDC 2004, Kopila Nepal (KN), Nepal

The COVID-19 pandemic has totally changed the daily life of the community people. People experienced rising levels of anxiety and frustration regarding the government’s service on health care, education and economic policy response to the pandemic. They lost their job or cannot work outside. They have difficulties to meet household expenses.

All of men, women and children are suffering in various aspects during staying home. The cases of sexual and gender-based violence and suicide increased after lockdown. Children are feeling more irritation and isolation in the family. Young people go into gambling and alcohol consumption.

Kopila Nepal (KN) has organized self-help groups (SHGs) consisting of the widows, females who have family members with physical or mental disabilities and the victims of violence. Each SHG has representatives to its association, “Kopila Independent Development Society (KIDS) and KIDS has worked on the various issues in collaboration with the local government. (For KIDS, please refer to NL#94)



Counseling for a victim of domestic violence

We have been helping KIDS and member SHGs to develop their self-confidence and support community people who has similar background, such as domestic violence, sexual abuse, cast and gender-based discrimination.

The pandemic has exacerbated the existing inequality, conflicts, stigma and discrimination against certain groups such as ethnic minority, Dalits, persons with disability and widows. For example,



SHG meeting of direct victims of violences, Myagdi District

some of family members of SHG members were the migrant workers. When the border with India was reopened, thousands of migrant workers returned home, and the COVID-19 infection has been increased. That’s why, they were blamed as a cause of spreading infection and excluded from the awareness information on COVID-19.

During the lockdown, KIDS and member SHGs continued their activities by using phone. The chairperson of the SHG called each member at least twice a month, so that the members can discuss problems and share their pain and sorrow in the group. If a critical issue such as human right violation is found, the chairperson of KIDS contacted the local government officer, human right protection network and local police to ask for support.

For the members with psychosocial and mental health issues, KIDS has developed a support system in their community. For that, KN have provided psychosocial first aid training to the local people and police, so that they can address the issue immediately by their own. KN has Free Phone Call service for community people to ask for counselling from KN staff for psychosocial support. In the difficult cases, they can call KN counselor directly without worrying about phone bill.

We still need to address the basic needs of target group. We expect that KIDS members can identify the problem of their member and work with the concerned individuals, organizations and to minimize the problem in order to create a psychologically healthy environment in their family and community.

Building a bridge between Farmers and Consumers
Mr. Monuj Dutta, ILDC 2019, Surujmukhi, India



Mr. M. Dutta

Due to nation-wide lockdown, all the markets were closed to prevent the infection from spreading. The farmers in Assam also faced with the problem in selling their products or exporting them to the city markets. They have no choice but leave their products rot on the field or dump it on the roadside.

Gurumukhi is one of the NGOs which has worked with local farmers in the rural places of Chowring and Sepon, Dibrugarh district, Assam. We have been considering about direct marketing channel from producer to consumer of the agricultural products for improving farmer's livelihood for a long time. When the local market was suspended, we started our discussion with the farmers on the phone to realize this idea and contacted the district administration. They recognized the worsening farmers' economic situation and showed their concern about the damage and loss of vegetables in the fields and the unavailability of vegetables mainly in city areas. The Department of Food and Civil Supplies and Consumer issued the permission for implementation of our plan.

The farmers brought their products such as pumpkin, tomato, brinjal, okra, carrot, beans, chilli peppers, chokos, cucumber, papaya, lemon, etc to Moran town and nearby places by mini truck and sold door-to-door to the needy people in reasonable prices.

This experience made local farmers confident towards the recovery of rural economy which was damaged by COVID-19 pandemic. The local market reopened and the farmers and the vendors became more active than before the lockdown. We were happy to be able to help both farmers and consumers and take a step towards alternative marketing.



Farmers brought their products to consumers

Youth initiative during COVID-19
Ms. Chan Lay, ILDC2019,
Foundation for International Development/Relief (FIDR), Cambodia



Ms. Chan Lay

Food and Nutrition Security Project (FNSP) is one of the community development project of Foundation for International Development /Relief (FIDR). It aims that the community people get sufficient and nutritious food and live in good health.

In Cambodia, the garbage disposal is a big problem. We can see the garbage of plastic bottles, plastic bags and plastic snack packages everywhere especially along the road and public place. In addition, the household garbage is also not well-managed or properly separated. In order to change this situation, FIDR has encouraged young people to clean the community, especially where the people throw garbage.

In July, FIDR cooperated with local authorities in 5 target communes in Kampong Chhnang province to conduct a training on agriculture and health for the secondary and high school students. The purpose was to raise awareness of the young people aged 15-20 years old on hygiene to help them keep the household and community environment clean and also prevent them from getting infected by coronavirus.



Training on maintaining hygiene

154 students participated in the training. We limited the number of participants, because the COVID-19 risk is still remaining here in Cambodia. In order to ensure the safety of the community people while we operate the project, FIDR created COVID-19 preventive measures based on the guideline set by Ministry of Health. We provided a short session about how to prevent themselves from COVID-19 and maintain hygiene in 3 components; drinking, eating,

and living in a comfortable environment. In this training, we observed that youth were aware of their responsibility in keeping community clean. They would try to become role models in managing their own garbage first.

A week later, youth cooperated with the local authorities to conduct the cleaning activities again in their community on their own initiative. We expect that youth will develop a positive attitude and activities for improving the sanitation and hygiene of the community more and more.



Young people are collecting the garbage

NEWS from AHI

JOURNEY for ILDC 2021 has started!

It is the first experience for AHI to have 1-year preparatory path before ILDC starts and to use the online communication tools to build a relationship among the participants. The Facebook group for ILDC2021 started in the middle of June as a platform for exchanging information. Besides, we will have online meetings regularly for the year.

The first online meeting was held on July 28. Although we often had internet disconnections and other technical problems, we felt connected to one another and successfully achieved our first objective -getting to know each other through self-introduction and sharing their feelings. It was very exciting moment for everyone.



Emotion Assessment work



The second meeting was held on September 3rd with two objectives: 1) to set objective(s) of the preparatory stage of our journey and 2) to find out effective way of our online communication. The participants had direct interactions with others in a small group. Some of them found a difficulty to express their thoughts and opinions because of hesitation in a newly born group, lack of confidence in their English and so on. Some participants tried to encourage other members' participation. In the next meeting to be held on October 8th, we will continue looking for ways which make our online communication effective and efficient and our objectives to build a learning community for ILDC 2021.



*1st row: Yayoi, Yuko, Jack (Mongolia), Kyoko, Pramo&Ama (Sri Lanka)
 2nd row: Hasham&Rehan (Pakistan), Khayam (India), Naoko, Petrick (Indonesia), Bayu & his interpreter (Indonesia)
 3rd row: Leang Houy (Cambodia), Sarna (Bangladesh), Ijas, Laksiri&Kobi (Sri Lanka), Chui (India)*

*Thank you all for the great learning experiences!
Mr. Takahiro NAKASHIMA, former AHI staff*



Mr. Nakashima

I left AHI on 30th of June, 2020.

My 32-year tenure at AHI was filled with great learnings. I was richly blessed with learning from Asian participants and our counterpart organizations. They are treasure in my life because they shared precious experiences and thoughts from their own fields and people.

In the AHI building wall near entrance, there is the black stone plate saying “Whenever you did this for one of the least important of these followers of mine, you did it for me. (Mathew 25:40)”

This passage from the Bible was cherished as stand point by Dr. Hiromi Kawahara, our founder of AHI. I understand “the least important of these” means “the most vulnerable under the structural violence”.

Whenever I facilitated lecture meetings for the Japanese, I asked participants following question, “What does health mean to you?” Most of their answers were related to individual level. I asked the same to Dr. Kawahara in February 2015 three months before his death due to cancer.

He replied “Tomo ni Ikiru”. It means to live together. His answer was totally different. I was convinced the purpose of his work through AHI was condensed in this word. My understanding is “to live together” means “to live together with the most vulnerable people” as equal human being as we are.

When the health rights of the most vulnerable people are protected and promoted, we could say that structural violence is eliminated. In other words, proactive or genuine peace would be prevailed. Under the genuine peace, there would be no disparity in health and economy among all the people in Asia and the world, then everyone could enjoy “the highest attainable standard of health”. I strongly believed that this vision would be achieved through “Live together” process.

Who is promoting the process? It’s you,
AHI alumni and our concerned people in Asia!

Thank you indeed for all the participants of AHI to allow me to be a part of your development in your career, and for making my last 32 years in AHI so colorful and meaningful.



Taka with ILDC participants in 2015

Attention AHI alumni!

CALL FOR ARTICLES!

Please write your articles based on these themes:

- Multi-sectoral collaboration in response to COVID-19 and related issues
- Rights-based Approaches
- Ensuring Civil Society Space
- COVID-19 and Universal Health Coverage
- People Initiatives towards Sustainable Development Goals

If you are interested, please e-mail to: info@ahi-japan.jp