Spring 2021

Valerie Taylor Trust

Supporting the work of Valerie Taylor in Bangladesh

Chairman's Report

We are delighted that Bangladesh, and CRP, has fared so well during the pandemic, with much lower infection rates than Europe or America. Safety measures within the CRP compounds such as hand washing, social distancing, and mask wearing have enabled outpatient services to be resumed, and the Hospital at Savar has remained open throughout. However, on 5th April the Bangladesh Government imposed a new nationwide lockdown in response to a sudden rise in infections rates, so the future remains challenging.

Shafiq ul-Islam retired in December last year after 10 years of distinguished service at CRP, during which there has been steady development of the range of services offered at Savar and great progress towards fulfilling Valerie's dream of CRP Centres in the other Divisions of Bangladesh. Currently Dr Sohrab Hossain is the Acting Executive Director, and

I hope you will enjoy the account of our Zoom interview with him in this Newsletter. We very much look forward to working with him in the years to come.

Here in the UK, COVID-19 has restricted our fund-raising activities, but fortunately VTT has no paid employees so we have not been hit as hard as many other charities. Indeed, during the 2020/2021 financial year we have transferred £167,000 to CRP. Of this, £61,000 was given by Primark to pay the salaries of two International lecturers in the Prosthetics and Orthotics Department of CRP. But most of the rest came from the donations and Standing Orders of our Supporters. Thank you so much for continuing to subsidise the treatment costs of people with disabilities who cannot afford the full cost of their treatment.

Ben Clackson Chairman, Valerie Taylor Trust

CRP and COVID-19

Bangladesh, like every other country in the world, has been significantly affected by the spread of COVID-19.

On March 26th 2020 Bangladesh started a national lockdown and most services at CRP had to close or operate with significant changes and limitations. As always, CRP rose to the challenge coming up with new and innovative ways to support those with disabilities as well as the wider community. For example, the Special Seating unit, recognising the prohibitive cost of single use face masks, designed and produced thousands of reusable facemasks for those in need. Read on to learn more about the amazing work CRP has been providing during such a challenging year.



Shipi, Sewing Machine Operator making masks

CRP and COVID-19

Helping people stay safe

Hand washing is one of the most important activities to prevent infection but in Bangladesh. people with physical disabilities, specifically wheelchair users, are often unable to access clean water and soap. As well as providing education on the importance of hand washing. the Occupational Therapy department designed an accessible hand washing station using locally available and affordable materials.

CRP has also been involved in several projects distributing dry food packages plus soap and other hygiene items to over 1000 persons with disabilities.



A wheelchair user making use of the hand washing station

As services re-opened, CRP put significant measures in place to reduce infections and keep staff and patients safe. This included frequent temperature checks, clear marking to promote social distancing, ensuring appropriate use of personal protective equipment during face-to-face treatments and expanding their use of technology to allow meetings to take place virtually.

Those with spinal cord injuries (SCI) are at increased risk of complications from COVID-19. On the occasion of World Spinal Cord Injury Day, CRP arranged a webinar on 'COVID-19 and SCI: Staying Well', promoting the importance of appropriate support and services for those with SCI, both during the pandemic and longer term.

Long COVID

The long-term effects of COVID are becoming increasingly recognised and CRP has started providing Post-COVID rehabilitation to those in need. Patients present with a complex variety of physical, respiratory and psychological difficulties and therefore benefit greatly from the Multidisciplinary approach which CRP offers.



Occupational Therapy in Progress

The New World

Long term local volunteer Maliha Hossain volunteered at CRP during the pandemic:

BHPI students hanging out by the pond, wheelchair basketball being practiced, students walking towards the inclusive school and the Reddaway Hall being prepared for the next celebration - this is what CRP has been to me for the past 2 years and more. It has always been a busy and crowded place.

We just had a 3 day long 40th anniversary celebration and people were still in a festive mood when it all came to a staggering halt.

When lockdown started, all sorts of activities apart from the treatment for inpatients were stopped. The always busy CRP became so quiet and gloomy. As a volunteer, I had much difficulty not being able to visit CRP or help them somehow. I knew that the office was running, and that Valerie was still there, so I spoke to the team weekly and offered help where I could. We were worried regarding how long this lockdown would be, how would everything be managed, would the lockdown affect our supporters as well? So many thoughts and so much of uncertainty!

But after a few months, CRP opened its gates once again, implementing safety measures strictly. As a general volunteer during this pandemic my options were more limited, but I started to spend time with the children living in Marigold hostel. I visited them weekly and spent time helping to entertain them. And might I say, how happy they were as I was the only person apart from their usual caretakers who came to solely spend time with them.

CRP slowly started to pick up its pace and things were turning back normal. New patients were coming in, and with them, I could see life pouring into CRP. Things were back on track and we saw our supporters standing by CRP, as they always did. Limited number of patients, educational institutions being closed and virtual celebrations and zoom calls became the new normal here. But at least, it's busy now and one can hear the



Fun with the children at the hostel

usual bustling of children and patients. I saw CRP gradually recover whatever losses they had during the lockdown, saw it almost return to how it was, and as a volunteer and supporter, there is nothing more I could ask for. I still miss my fellow volunteers who would have been here by now but with the inclusive school operating in a small scale, I finally have work on my hands, to teach the students, to play with them, dance with them.

We are slowly planning things, understanding how to approach this new world. It might be safe to say that we are indeed testing the water.

A Conversation with Sohrab Hossain, Acting Executive Director CRP

Tell us about your experience at CRP

I started as a physiotherapy student at CRP in 1995 and graduated in 1998. After an internship I began working in CRP in 1999 as one of the first group of graduate physiotherapists. We felt honoured to be physiotherapists and taking the lead for the profession.

In 2000 I had to take additional responsibilities as the Head of the Physiotherapy Department. There were only 10 graduate physiotherapists working in the department at that time. I continued as Head of Physiotherapy until 2012, was Chief of Administration for one year (2013), and then for more than 3 years Head of Programs which involved working across 18 different Departments. Then I left CRP at the end of 2016 for my PhD in Australia.

What was your research about?

I went to the University of Sydney with a Postgraduate Research Commonwealth Scholarship. The thesis title was "Civic trial: Community Based intervention to prevent serious complications following Spinal Cord Injury (SCI) in Bangladesh". Before my PhD, I led a cohort study in which we found that 20% of those treated for SCI at CRP die from pressure sores within a year of being discharged. This was very shocking, and I developed a proposal for a randomised control trial with 400 people who had suffered SCI and had recently been discharged from CRP. The Control Group only received the usual care provided by CRP but in the Intervention Group various additional interventions were provided: we rang them every 2 weeks, motivating them to engage with the activities of daily living: their hobbies and employment. We also had some money to help them small things to support them. The trial was for 2 years and was one of the biggest randomised control trials for SCI patients in Asia or anywhere else on the

effectiveness of Community Based Interventions.

Unfortunately, the results showed little difference in outcome between the groups. Perhaps because the patients were very poor so they had other priorities and could not concentrate on our intervention. Maybe our CRP patients need different employment and financing. There are different possible explanations. That is the idea of science: we ask a good question, and the results may be positive or negative, but we did the trial.

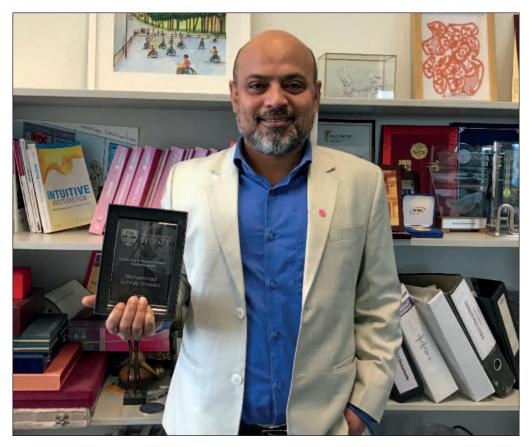
It is really encouraging that you're bringing your skills back to CRP. How do you and your team plan to continue and even improve the high standards of CRP's services?

We are developing a structured follow-up system for patients who are discharged. Our plan is for the frequency of visits by the Community Based Rehabilitation Department to reflect the seriousness of the problems faced by each patient, expressed in three priority levels.

I have had initial discussions about long-term sustainability and quality assurance with my colleagues here. Rehabilitation Services are becoming more widely available in Bangladesh.

CRP is still a brand, but we need to polish and care for the brand by improving the quality of services. If we do not, then in ten years' time people may find that there are better services available in other places. The plan is to improve the quality of our services in three ways. First, we can build on the multi-disciplinary team approach which currently exists at CRP.

Secondly, we need to retain senior staff in order to continue to offer high quality services at CRP. Thirdly we need more training and development, including refresher courses for senior staff, not only for clinical staff but also for core functions like Human Resources and Finance Department.



Dr Sohrab Hossain

In the past the Mirpur Centre has been an important source of income for CRP, how has it managed during the pandemic?

For 4 months last year most of the services at the Mirpur Centre were closed, but now it has reopened fully, and many patients are coming to receive therapy. Because many of the patients who come to the Mirpur Centre can afford to pay the full costs of the sessions, it helps us to pay for the treatment of the poorer patients at Savar.

How is the transfer of Vocational Training Institute courses to the new Centre at Manikgonj going?

I think all the courses have now been transferred there, not only from Savar but also from the other Centres like Rajshahi. The

trainees like it, because the courses are residential: for people with disabilities it is very difficult to travel for training every day, so they like going where there are residential facilities. We re-opened the Centre two weeks ago with the permission of the Government.

Anything else you would like to add?

One other thing I would like to say: I'm not now thinking of myself as a physiotherapist. I am a manager, I am Acting Executive Director of CRP, and one of the challenges is that CRP has grown so much that there are now nearly 1,200 people working here. My aim is that we should move forward as a CRP family, and we are working on that.

Annual Supporters Meeting 2021 Postponed

The Trustees have decided to postpone our Annual Meeting until Saturday September 11th at 2pm, in the hope that by then Government regulations will allow us to hold the meeting at:

St Paul's Community Centre, 5 Rossmore Road, Marylebone, London NW1 6NJ

In that case, the Doors will open at 12.30pm and there will be a Curry lunch at 1pm.

Valerie is still at CRP but has written: "It would be wonderful if by then the way will have opened up to travel to the UK. I have put the date in my diary with great hope that this is what will materialise."

If Government regulations do not allow a physical meeting, we shall have a Zoom Annual Meeting instead at the same time: 2pm. In that case the change of plan will be posted as a News item on www.valerietaylortrust.org and the Zoom details will be emailed to Supporters for whom we have email addresses.

CRP Moulvibazar Centre

Construction work on the new CRP centre in Moulvibazar is under way. This photo was taken in January. Fund-raising in UK and Bangladesh has now reached 31% of what is required to finish the first phase of the project. You can help at our JustGiving page: justgiving.com/fundraising/moulvibazarcrp or

by cheque to the Administrator. At the same time, Trustees have had preliminary discussions with a representative of Channel-S about working with VTT both to raise funds for this project and more generally to raise awareness of the work of CRP in the British-Bangladeshi community.



Meet the Staff: Halima Akter

I was born in a small village in Bangladesh, a highly wanted daughter after my parents had four sons. When I lost my father at the age of three, my eldest brother took us to Dhaka in search of a livelihood. All my brothers wished to study but they could not afford to, instead they motivated me to continue my studies.

On the 16th April, 2013, while studying for my higher secondary certificate, I fell from a roof. I am not able to remember anything, but I was taken to hospital in a rickshaw and underwent several hours of surgery. After 3 months in hospital, it was suggested I moved to CRP. At that time CRP was very busy due to the Rana Plaza tragedy so there was a wait for my admission. This was a very bad time. I realized my family were spending their income on me and felt that I would be useless. I prayed to Allah to give me death.

After waiting one month I moved to CRP. My condition kept getting worse and I needed further surgery. I lost myself and I decided to give up my study. At that time, I found a friend named Shohiduz Jaman, he encouraged me to smile again and motivated me to continue. Even before completing my rehabilitation, I went back home to take exams. I was successfully selected for my final higher secondary certificate exam. My teachers and friends encouraged and supported me. I took the exam despite a lot of physical barriers at the centre and my physical disabilities. Sadly, I found my family members were not interested in my study but Shohid continued to encourage me.

I started to communicate with CRP through S.M Masum Iqbal (Assistant Officer, Social Welfare Unit), Farida Akter Asma (Peer Counselor) and Abdul Zabbar (Senior Counselor). With the support Valerie Taylor, I successfully applied for nursing collage, starting my studies in January 2015. I faced practical and clinical barriers but all my classmates and teachers, specially Runu Chowdhury (Principal, CRPNC) always helped me when I needed them.



Hard at work in the Paediatric Department

In 2019 I graduated with a BSc in Nursing under University of Dhaka. I am the first registered nurse who is a wheelchair user. I completed an internship then worked at CRP's Paediatric unit and as an Assistant Researcher for BRAC James P Grant School of Public Health. Now I am working as a lecturer at CRP Nursing College. You will be happy to know that I started my family life journey with my ever-best friend Shohiduz Jaman.

I plan to continue my higher education and be involved in the Research Sector. Keep me in your Prayers.

Community Spirit at CRP

Physiotherapy Student Imogen Clowes tells of how COVID-19 disrupted her trip, but the spirit of CRP shone through.

I feel very lucky to say that me and my friend Aaliyah, have been to CRP for our physiotherapy placement training. We didn't know what to expect but now I look back and know it couldn't have been any better!

I chose to work in Spinal Cord Injury and I met so many new and interesting people that I couldn't have chosen better. Waking in the morning I would head down to the office to start a morning of rehabilitation with great patients who always wanted to chat and help out. Then the peace and calm over lunchtime was refreshing enough to prepare for an afternoon of sports and fun. The sports at CRP, I think, are what makes it special. From the inter-department cricket which creates crowds and noise that can be heard from women's basketball miles around to competitions and everyday games. I fell in love with the afternoons spent playing sports with the patients and I became great friends with some of the patients as well as the staff that I worked with. It soon became a daily

ritual to play in an afternoon, that is until COVID-19 arrived on our doorstep.

Visitations stopped, half the staff could not come in and many departments closed. The great hubbub of CRP spirit quietened down to its basics. I was delighted we were able to continue working as I had such good friendships with the patients that I didn't want to stop now! Whilst we waited for our repatriation flight home we still worked everyday to help on the wards with the huge caseloads that now only had half the number of staff to manage them. Never have I worked with such helpful and friendly people. They worked with me to learn basic Bengali to get me by and develop my skills in physiotherapy. Their trust in my abilities made me more confident and happier to be there.

I couldn't have been more disappointed to cut my time at CRP early by 3 weeks, but I am at least grateful that we got to stay as long as we did! I'm now working towards one day returning to meet everyone again and be able to have the full CRP experience with the big celebrations, excitement and sense of community that I saw in my first weeks.



The Basketball Team

Ongoing Support for Rohingya refugees

In 2018 1.1 million Rohingya refugees, mostly referred to as Forcibly Displaced Myanmar Nations (FDMNS) poured over the Eastern Bangladesh border and were accepted by the Bangladesh Government, even though the country is one of the most populated countries in the world. They were settled into large camps set up near the city of Chittagong.

Last year the International Committee of the Red Cross (ICRC) helped CRP provide prosthesis or orthotics to about 250 Disabled FDMNS. The ICRC identified those in need, sometimes with the help of Prosthetic/Orthotics staff from CRP. These people were seen at CRP Chittagong and fitted with a Prosthesis/Orthoses to help them in walking and with daily actives. These FDMNS are the poorest of the poor people. ICRC has worked with CRP Prosthetic/Orthotics department and School for many years now.

Motorised wheelchairs now produced at CRP

Motorised wheelchairs are becoming very popular day by day among the people with disabilities as it is very tiresome to move with the manual wheelchairs for a long time. However, imported motorized wheelchairs are very expensive and most of the people cannot afford them. After many years of planning, CRP's metal workshop has started producing motorized wheelchairs with locally available parts and equipment. Many of CRP's patients and staff are now buying these wheelchairs at an affordable cost.



Travelling in Style

VTT has 3 beautiful books celebrating the work of CRP. All books were compiled by Liz Timms and printed by CRP's own Printing Section.

Journeys - profiles of patients treated at CRP

Reaching Higher - the story of CRP

Journeys 2 - profiles of Prosthetic and Orthotic Patients at CRP

All books available for a donation of £10.00 + £5.00 p&p. per order.

Please order through The VTT Administrator,

4, Wilberforce Road, Coxheath, Maidstone, ME17 4HA at admin@valerietaylortrust.org followed by a cheque made payable to Valerie Taylor Trust for the full amount.

Obituaries

It is with great sadness that VTT informs you of the death of three long standing supporters of CRP

Sir Colin Henry Imray, KBE, CMG, KStJ

Sir Colin, died on 20th December 2020. He was High Commissioner in Bangladesh in 1989 and it was whilst in Bangladesh that he was introduced to Valerie and the work at CRP, when they were still in Farmgate. He played a very supportive role in the move to Savar, becoming Patron. Since then, he had continued to be a strong and much appreciated supporter of CRP and Valerie Taylor Trust. Our sincere condolences are extended to Sir Colin's wife, Shirley and all his family.

Daphne Woolnough writes: About halfway through our own posting with BMAT(British Military Advisory Team) at the Bangladesh Military Staff College Colin and Shirley Imray arrived in Dhaka to take up his appointment as British High Commissioner.

Those at CRP knew him as a consistent supporter who retained his interest even after leaving Dhaka. His help with Shirley was often of a very practical kind. Valerie remembers when the Imrays offered that the BHC kitchen would supply all the patients and staff meals on the day of the move from White Lion House in Farmgate to the new Centre in Savar. Such a wonderful help.

Sir Colin was knighted for his work in Bangladesh. He was a very special man who has left the world a better place than he found it.

Margaret Whitty

Many of you will remember Margaret Whitty's warm and smiling presence with her husband Bryan at our Annual Supporters Meetings. Bryan writes:

"Evacuated with 3 young children from Chandraghona Christian Hospital East Pakistan with Valerie Taylor in 1971 at the onset of the civil Independence and subsequent Indo-- Pakistan War, they travelled part of the way home on a military aircraft just before the runway at Dacca airport was bombed.

After we returned in 1973 Margaret subsequently became the Health Visitor for children with special needs for the whole of north Glasgow. Vascular dementia and marked immobility challenged her last 3 years and she passed peacefully in January this year."

May she rest in peace

John Morrell

Also in January, John Morrell passed away peacefully after a short illness, aged 93. The notice in the paper said "Now reunited with his beloved wife, Anna. Survived by his sons CJ, Rupert and Marcus, and six grandchildren whom he adored."

John, with Edward Guinness, started Friends of CRP (FCRP) in about 1970, and as he reminded us in the letter printed in our Autumn Newsletter, FCRP was Valerie's main supporter in the early years of CRP. All of us who now support CRP are indebted to him.

Valerie writes: John was the Chairman of the FCRP for 20 years. His and Edward Guinness's combined work and financial backing, in partnership with the work on the ground in Bangladesh, enabled CRP to run and grow. All at CRP will remain most grateful for his time, effort and generous support.

WAYS YOU CAN HELP

The disabled poor in Bangladesh continue to need help. The Valerie Taylor Trust supports the Centre for the Rehabilitation of the Paralysed. This is the only place in the country where the paralysed are given specialist treatment – free of charge for the very poorest.

Support our work by:

- Regular donations by completing the back page of this newsletter our preferred method.
- Donate on-line to our bank, details overleaf, or via www.valerietaylortrust.org, www.paypal.co.uk or www.justgiving.com.
- Please register your donations for Gift Aid if this is applicable.

I am hanny to receive routine correspondence by email

- Use a VTT Collection Box in the home and outdoors obtained from the Administrator.
- Make a legacy. All sizes of donations are valuable and are tax-free.
 Please ask for our leaflet.

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Helping the Disabled Poor and their Families

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Tel: 01622 743011 Email: admin@valerietaylortrust.org Web: www.valerietaylortrust.org

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