

DISABILITY, GENDER AND CASTE INTERSECTIONS IN INDIAN ECONOMY

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ABSTRACT

Purpose – The aim of this chapter is to explore the marginal dimensions of disability, gender and caste in the context of Indian economy in recent globalizing times.

Approach – Using an intersectional approach it is argued that caste, gender and disability implicate and impact the opportunities available to persons as these account for the marginalities in a developing economy. The chapter is based on ethnographic and empirical data and it critically analyses the trends.

Findings – This study shows how social and cultural frames on one hand and the nature of diverse occupational pursuits on the other set the context within which a person with dalit¹ status, with impairments and also a woman is likely to suffer the most. Social contexts are diverse and situation of persons within different groups varies. The chapter also examines state and NGO initiatives in this regard and suggests the

Disability and Intersecting Statuses

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limitations and possibilities of dalits with disabilities having access to resources within neo-liberal economy.

Originality – The findings expand the scope of disability research having policy implications.

Keywords: Caste; gender; disability; Indian economy; development programmes; NGOs

By employing the lens of gender, disability and caste, this chapter opens the debate on participation and marginalization of disabled in Indian economy to arrive at a more nuanced understanding of the issue. There is an ample scope to study and understand marginalities within marginalities when it comes to how we address this issue. In ever growing Dalit literature, issues regarding marginalization and invisibility of women's contribution to economy remain under highlighted, whereas right from 1970s onwards women's studies has paid sufficient attention to poor women's active economic contribution albeit ignoring the caste dynamics. The disability literature on the other hand, still scanty in Indian context, locates it mainly in relation to poverty and rural/urban dichotomies especially with regard to access to education, health care and employment almost ignoring the caste issues. There seems to be little dialogue between Dalit, women and disability rights activists and scholars. I argue that by taking caste and gender as structuring principles of existence of the people with disabilities, we may get a larger picture of their access or inaccessibility to work, jobs and wages in an unequal society. Identity of just being defined a disabled also takes one away from other social identities – caste, religion, age and gender – which lend importance in social interactions.

In Indian society, access to employment is defined not only in terms of education and skills but also cultural and social capital. The stigmatized inequality between mental and manual work owing to caste remains entrenched at the ends of two extremes. On the other hand gender-based division of labour across caste and class also limits access to particular kind of work and compulsion on majority of women to do housework in addition to remunerative work in patriarchal setups. Persons with disabilities (PWDs) especially those with physical and mental impairments also suffer from negative stereotypes and largely seen to be unproductive and dependent. Disability is operationally understood as a cultural and social

construct which often produces disabling implications for persons with impairments. Disability is perceived to be an oppression which all PWDs face.

In India and much of South Asia, disability is largely seen as a product of cultural impediments such as beliefs and stereotypes as well as structural impediments like poverty, lack of development, illiteracy, unemployment and caste, class and gender barriers. PWDs are marginalized in education, employment, mobility and other significant life areas. The meaning of disability in India is embedded in this basic struggle for survival and cultural understanding. Prevention and rehabilitation models continue to be relevant in such circumstances (Mehrotra, 2011).

Disadvantage and inequality of opportunity are the everyday experiences of Dalits in India. Their lack of assets in terms of land holdings, stigma and discrimination of doing lowly jobs and large scale poverty among these groups clearly make them unequal citizens. Disability as has been discussed widely does not differentiate between caste, class, race and religion. Disability is part of human condition (WHO, 2011). Causes of disability are quite often said to lay in impoverishing conditions which lead to poor access to resources and general poor health. Disability, however, is not just caused at birth but they often occur later due other disabling conditions, like lack of basic health facilities, accidents, disasters, conflicts and wars.

Disabled people in most of the contexts are seen to have less functioning bodies or dependents. This is particularly apparent in relation to the labour market, and the physical capital vested in the disabled body. For Stone (1984, p. 90), disability originated in the eyes of the state as an 'administrative category out of a collection of separate conditions understood to be legitimate reasons for not working'. Thus, disabled people are that other which defines who, and what, a normal worker is. For Oliver (1990), the devaluation of the disabled body lies in the changing nature of labour under capitalism, which isolated disabled people, and brought their corporeal differences to the fore. The transformation of work from a 'rural based, co-operative system where individuals contributed what they could to the production process to an urban, factory-based one organised round the individual waged labourer' (Oliver, 1990, pp. 27–28) de-valued the disabled body, and reduced its 'capacity to convert physical capital into other resources' (cf. Edwards & Imrie, 2003, p. 246; Shilling, 1993, p. 13).

Björnsdóttir (2010) suggests using studies on disabled people that social categories such as race, class and gender are interrelated systems of power

relationships where dominant groups hold power over subordinate groups and use that power to secure society's resources, such as wealth, income and education. Thus, social actors struggle for power and resources while dominant groups try to maintain their power and exploit subordinate groups who struggle to gain rights, opportunities and resources. People's life experiences are simultaneously shaped by these complex and interrelated socio-cultural systems of power. In this framework he adds disability to analyse of other social or power systems and argues that disability shapes disabled people's lives and affects their 'access to institutions, power and privileges' and works in a similar manner as gender and race. Other scholars like have also studied the intersection of disability, gender, race and sexuality (cf. Björnsdóttir, 2010; Connor, 2008; Grönvik & Söder, 2008; Meekosha, 2005).

In the Indian context there is much discussion is there on gender and disability (Addlakha, 2008; Ghai, 2003; Hans & Patri, 2002; Mehrotra, 2006, 2008) and also on poverty and disability (Harris-White, 1996; Lang, 2001; Mander, 2008; World Bank, 2007). However, very little work is available on the intersection between caste, gender and disability (Harris-White, 1996; Mehrotra, 2006; Pal, 2010). Much work on poverty and disability is informed through an economic understanding of examining the effects of disability on household and increasing poverty. I argue that women with disabilities from the Dalit communities are at most disadvantage as they suffer multiple marginalities owing not only their caste but also gender and certain nature of disabilities. Nevertheless these marginalities need to be explored as to how this combination actually appears in real life situations.

The definition of disability is complex. It not only takes the body but also the social and economic factors into consideration. The interface between the social and cultural constructs of impairment and disability and social structural factors determine how the definition of disability may vary from culture to culture. In the Indian context, Hindu scriptures explain causes of human sufferings through the theory of *Karma*, that is if one has committed misdeeds in the previous births, one has to inevitably bear the consequences. Birth in higher caste is often explained in terms of good deeds in the past birth. Illness and disability are understood to be a punishment for the sins of previous births and one is called upon to accept it as divine retribution. Belief in the theory of *Karma* has very often led to a ready acceptance of disability, with little effort in the direction of improving the life conditions. Good *Karma* or constant efforts, however, are also said to be necessary for making a better living. Thus, cosmological

understanding of caste and disability are interconnected. One's good deeds are also explained in terms of charity and welfare of deprived sections. Disabled are often thus seen in term of charity model, where it is 'others' duty to help them to be rehabilitated (Mehrotra, 2008; Miles, 2002).

In Haryana, a developed state in India, disability in most academic approaches is understood as the deviance from normalcy; however, it is, for theoretical purposes, explained as the 'dependency' of an individual on others in the community, that is *aashrit* (*dependent*). In addition to this, in the neighbouring state of Rajasthan, it is also understood in terms of *kasar* a 'fault' (lack, lag) in the individual. The Hindu idea of disability makes a distinction between *viklang* and an *angheen*. The former is an individual who has organ but without having a use of it, that is like a deaf man has ears. As against *angheen* is one who does not have a certain part like an amputee or one born without ears or eyes. For ritual purpose a *viklang* is not discriminated but *angheen* is considered inauspicious (Mehrotra, 2008).

The Erb and Harriss-White's (1996) study, which employed a self-defined working definition of disability in South India, found that the ability of a person to be engaged in gainful employment determined whether an individual was deemed to be disabled (cf. Lang, 2001). It is commonly believed that PWDs lack the capacity to perform certain tasks. They are dependent on non-disabled persons (friends and/or family members) in many ways. *Bechara* (helpless) is the word often used for them in the local context. Their potential and capabilities are in most cases not known, as they are not questioned. There are many definitions existing of disability of which social and cultural are just one set. Other more important from the point of view of the policy is how the states looks at the issue. United Nations, WHO and other international organizations on one hand and different countries on other hand have adopted different definitions on the other hand in formulating laws to aid and support PWDs.

Disability Rights movements across the globe have ensured that the state definitions now take both medical and social perspectives in articulating this concept. Social oppression in terms of stigma, marginalization and exclusion have been accepted as pushing factors which create barriers in accessing health, education, employment thereby a good life for PWDs especially in developing countries. Disabled, nevertheless, are not a homogenous group. They are clearly stratified in terms of nature and severity of impairment and disability, gender, class, caste, race, religion and locational context.

DALITS AND INDIAN ECONOMY

Dalit is a political identity embraced by Dalit activists to cover a range of social groups who are defined and identified by the Indian constitution as scheduled castes (SCs) and scheduled tribes (STs). SCs are the so called 'ex-untouchable' sections, ranked in caste hierarchy at the lowest level, and often identified with manual and polluting work. STs on the other hand are defined in terms of their isolation from mainstream society, distinct culture, language and customs. STs are far from heterogeneous in terms of size, location and occupational pursuits and ownership of resources. Given the diversity entailed in this definition, we concern here largely with SC population where similarities across the continent are striking. The literature on Dalit communities refers to Dalit existence marked with stigma, discrimination and deprivation. Over the last 60 years, comparative studies have shown that Dalits – a quarter of the Indian population have been shown to have had very little choice and least economic mobility. Most, especially women, are still confined to casual agricultural labour, construction and sanitary work. In 2000, Dalits were roughly twice as likely to be poor, unemployed and illiterate as non-Dalits (NCDHR, 2006, p. 10).

They face serious and pauperising discrimination in parts of the rural economy (NCDHR, 2006, p. 11). The NCDHR (2006) report on Caste, Race, and the World Conference Against Racism (WCAR) shows that out of an estimated 30 million hectares of harvestable surplus land, only 7.5 million acres have been declared surplus, and only a small portion has been given to Dalits. Large tracts of land are being sold well below market value to multinational corporations and the World Bank, which has resulted in the displacement of many Dalits and Adivasis who were living on the land (NCDHR, 2006). A study found that Dalits in 21% of the villages surveyed were denied access to Common Property Resources (CPRs), such as lands and fishing ponds (cf. NCDHR, 2006).

The organized sector in towns and cities has an appalling record of recruitment of SCs and tribes (*ibid.*, p. 12). Dalits are even underrepresented in business in the informal economy. Twelve per cent have businesses as against 41% of the non-Dalit working population and they are overwhelmingly confined to petty production and trade (*ibid.*, p. 13). Despite the achievements of reservations, the Dalits who have entered the professions are a disproportionately small minority both of the Dalit population and of people in the professions (Harris-White, 1999).

Condition of Dalits however, is slowly but surely changing. Various factors account for the changing scenario of Dalit emancipation. Electoral

democracy, reservations and discourse of equality has affected the masses of Dalits in last few decades. Capitalist development, even though sluggish, has weakened traditional functioning of the caste system. Though caste remains, its content and form is different from what prevailed earlier. Today caste may be a determining factor in occupation but it is not a limiting factor. Protective discrimination through reservation in government jobs and education has paved the way for Dalits to enter the middle class. This upward mobility has created hope and given confidence that there is scope for improving their condition and be at par with others. Within the community there is a greater awareness about their rights and thus a greater assertiveness in political and social spheres.

Dalits have historically been migrating in search of employment. Although poor non-Dalits migrate in search of employment, Dalits are much more afflicted by migration. The main cause of this migration is lack of land ownership, exacerbated by droughts. Dalits who largely work as agricultural labourers in rural areas are also indebted in the absence of financial resources and social distress. They often undertake seasonal migration to towns. With decline of *jajmani* system, except those who are engaged in untouchable work like scavenging, Dalits have also entered into blue and white collar jobs through education and their life chances have relatively improved.

Recent Studies, like World Bank report on *People with Disabilities in India: From Commitments to Outcomes?* (2007), shows that in Indian context there more than 18 million PWDs who are mainly concentrated in rural areas. A large number of them belong to poorer SC/ST households because of poor hygiene, living conditions including malnutrition, inaccessibility to health care and dangerous working conditions. Larger number of disabled children has no access to schooling, even more than SC/ST children or they drop out early. World Bank of late has recognized disability as a development issue and has been urging NGOs to take gender and disability perspective in mainstreaming development. State's failure to provide them with basic education and health care are the main hurdles for them in getting access to reservation benefits either through SC/ST or PH reservation criteria. Women with disabilities in this context are further excluded as many studies suggest. Emphasis on women's traditional roles as worker, child bearer and nurturer limit their opportunities for employment.

Many studies today taking a range of non-income indicators, together with the asset and consumption cumulatively suggest that PWD households and individuals are notably worse off than average. World Bank (2007) report shows a greater incidence of PWDs in poorer households.

Communities also perceive that households with disabled members tend to be poorer and more vulnerable.

Studies also show that bulk of PWDs have milder to moderate disabilities which could be managed with assistive appliances and it has significant implications for education policy and implications for the employment potentials and capacities of PWD.

Class as well as caste and gender play an important role in determining the work a disabled person is able to do and in defining incapacity and disability. In the predominantly agrarian society then, it is clear that loss of visual acuity, manual dexterity and physical well-being are particularly economically disabling conditions (Harris-White, 1996; Lang, 2001; Mehrotra, 2008). In agricultural-based societies, majority of the Dalit men and women with disabilities are largely engaged as agricultural labour in unskilled jobs, however, they are generally perceived to dependent. In industrial contexts Finkelstein (1998) maintains that disabled people were effectively excluded from being in paid employment, due to the fact that they were not able to maintain the pace set by the factory system. As a consequence, disabled people were separated and thereby socially excluded from mainstream social and economic activity.

PREVALENCE OF DISABILITY AMONG DALITS

With an estimated figure of 1.8% PWDs among overall population in India, the prevalence of disability among Dalits is found to be remarkably higher (2.4%). About 92% of households with disabled members across social groups are with at least one disabled person. About 7% of Dalits and upper caste households and 5% of ST households are with two disabled persons. It may be noted, there is a positive relationship between the number of disabled persons in households and average size of households across all social groups. The variations across gender reveal higher prevalence of disability among males than females across all social groups. The gender gap is, however, relatively lower among Dalits and STs than other social groups, suggesting equal vulnerability of both males and females belonging to Dalit and ST communities to disability. The gender gap across types of disability shows that among Dalits, the prevalence of locomotor, hearing and speech disabilities and mental retardation is relatively higher among males than females and the reverse is true for visual disability (blindness and low vision). Mental illness, as a mild form of mental

disability, is higher among females across all social groups. The prevalence of locomotor, speech and hearing disabilities is relatively higher among Dalits, whereas the prevalence of mental disability is higher among upper caste groups. Among PWD, higher proportion of disabilities shows in younger age group (Dalal, 2002) also among SCs and STs (Pal, 2010).

STATE INITIATIVES

The Indian Persons with Disability (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 was a landmark in that it was the first major piece of disability legislation based largely on the UN Standard Rules. It provided disabled people, in the second largest population in the world, with constitutional recognition. The main provisions of the Act are: (A) Prevention and early detection of impairment, (B) Integration of disabled students in mainstream state education, (C) Reservation of at least 3% of government and public sector vacancies for disabled people – 1% each for persons with visual impairment, hearing impairment and physical impairment, (D) Identification of jobs which can be held by disabled people, (E) Job protection for people who have become disabled during service, (F) Local authorities should, within their economic limits, make adjustments to the physical environment to take account of the access needs of disabled people (e.g. install sound signals at traffic lights, create curb cuts and slopes in pavements, build ramps in public buildings, install Braille systems in lifts (Coleridge, 1993).

The Act is currently being revised. Indian Government is now trying to adopt a new policy on disability keeping in view United Nations Convention on the Rights of Persons with Disabilities (UNCPRD). This Act was obtained through lobbying by disability activists and NGOs. Initiatives are made to educate and mobilize public opinion as well as to influence government officials. Consultation meetings, protest marches and press conferences continue to be held to increase awareness and encourage enforcement. The International Day of the Disabled is a focal point for this work. In areas where there are active organizations of disabled people, for example, Karnataka, Tamil Nadu and Andhra Pradesh, the legislation has been used to help raise awareness of disabled people's rights. Most importantly, the Act helps to put the responsibility on society to make adjustments to include disabled people. The Act however does not look at intersection between gender, caste and disability.

Although 80% of India's disabled persons live in rural areas, most government and NGO programmes and rehabilitation centres are located in urban areas (D'Costa, 2008; Klasing, 2007). Despite the PWD Act, World Bank's (2007) study shows that the rural disabled have lower access to health care, not only due to the poorly functioning current system of disability identification and certification, but also because of poor awareness about disability issues among providers, as well as community and provider attitudes that act as constraints in the provision of health care for people with disabilities.

Given the decline of the rural economy, nearly 40% of rural households have no land of their own and it is estimated that the rural unemployment is as high as 30% (Dalal, forthcoming; cf. Hirnandani & Sonpal, 2010). FAO (2004) notes that disabled farmers with inadequate access to means of production such as land, water, inputs and improved seeds, appropriate technologies and farm credit are particularly hard-hit (cf. Hirnandani & Sonpal, 2010).

Government schemes for the disabled, whether in education or employment reach rural people with many roadblocks. Ninety per cent of India's children with disabilities (CWD) reside in rural areas where even non-disabled children find access to education difficult. The lack of services, such as accessible transportation, and the distance between home and school in rural areas further push CWD to the margins (D'Costa, 2008; World Bank, 2007).

Studies report that people with disabilities in rural areas are largely excluded from mainstream poverty alleviation programmes due to attitudinal and physical barriers. The PWD Act requires governments to reserve not less than 3% in all poverty alleviation programmes for people with disabilities. However, different poverty alleviation programmes have interpreted the 3% reservation rule differently. As World Bank (2007) noted, the *Sampoorna Grameen Rojgar Yojana* (SGRY) (The Complete Rural Employment Scheme) mentioned parents of CWD rather than adult workers with disabilities, assuming that disabled people are unable to work. Yet, there is no specific quota mentioned for parents of CWD, unlike other groups such as women and other minority groups. The Indira AvasYojana mentions people with disabilities as a priority category among other groups; however, no specific quantitative targets are mentioned. In contrast, the state programme like *Swaranjayanti Gram Swarozgar Yojana* (SGSY) (The Centennial Rural Self-Employment Scheme) provides specific guidelines and requires that 3% of beneficiaries annually must be people with disabilities. However, the World Bank (2007) observes that data

reported by various poverty alleviation programmes do not clarify the share of beneficiaries who are PWDs. Wherever clear data is available, people with disabilities are well below the 3% reservation rule in all schemes. For instance, the share of disabled beneficiaries in SGSY was below 1% between 1999 and 2004. In SGRY, a much bigger programme in total spending than SGSY, data are reported for works completed for the benefit of disabled people rather than the number of days of employment generated for people with disabilities. However, the Comptroller and Auditor General Report (2004) shows the share of disabled beneficiaries in SGRY was below 1.7% during the reporting period 1998–2003 (cited in [World Bank, 2007](#)). More recent data from various states compiled by the World Bank report demonstrates even lower percentages. For instance, in the state of Orissa, people with disabilities accounted for only 0.3% of total employment days generated under SGRY during 2001–2005 ([Hirandani & Sonpal, 2010](#)).

In some of the rural development and other programmes there are some disabled beneficiaries. However, keeping in view the statutory provision of 3% reservation for PWDs in all poverty alleviation schemes, the coverage is negligible. This provision needs to be effectively implemented.

A study made by an NGO [Unnati \(2004\)](#) shows that in the villages studied, the PWDs were trained in limited skills, which included basket making, weaving, embroidery and typing (p. 15). The main source of economic activity in the village being agriculture and dairy, PWDs, particularly women, found employment in this sector. In the absence of special training and opportunity to contribute their full potential, they end up doing manual work for small sums of money. In many cases their employers also exploit them. Only 35% of the PWDs in the age group 45–60 years were earning.

The new National Rural Employment Guarantee Act (MNREGA) of 2005 in principle provides every person who is willing to work with a statutory right to 100 days of guaranteed wage labour at minimum wages. However, [Dalal \(forthcoming\)](#) reports disabled people constituted only 0.1% (167,934 persons) of the 16 million total MNREGA beneficiaries in January 2007.

In some states, state-led Livelihoods and Poverty Reduction Projects like the Velugu Project in Andhra Pradesh and Tamil Nadu Empowerment and Poverty Reduction Project focus on covering the disabled below poverty line (BPL) families and their caretakers. The example of the Rural Entrepreneurship Development Programme in Madhya Pradesh also targets PWDs. These initiatives have seen the active partnership of local and

national NGOs and financial institutions like ActionAid and Central Bank of India. Haryana Government also has been active in announcing pro disabled measures in last one decade.

In the name of specific programmes for the disabled, only disability pension is provided to PWD from poor families. The pension amount is meagre and varies from state to state. Old age pension is given in most states; however, there are no programmes for the disabled, dependent and aged widows who are the most vulnerable group. Mander's (2008) study shows that disabled constitute a sizeable number among the destitutes in rural India. Most often they are very poor with little family and community support. They are unable to find work due to old age and disability and in such a case their dependence on the state pension is the only way to live with some dignity and autonomy. In the times of globalization, security nets are withering away with little effort on part of State. Withdrawal of State from welfare measures and growing reliance on NGOs for development activities has resulted in uneven results. In southern states, where governance is relatively better, one finds more awareness and better programme delivery, whereas northern states lag behind.

Although caste is no longer a system, it still works against Dalits. Dalits still often face exclusion from labour markets, credit, land markets, rental markets, services, agricultural inputs and consumer goods. Thorat (2008) record caste-specific variations in the terms and conditions of contracts, in prices (lower for commodities sold, higher for those bought), slow queue behaviour, 'living-mode exclusion', that is poor quality services in education, housing, health, access to CPRs, to public space and to infrastructure (e.g. decent roads, water, drainage and electricity) (cf. Harris White & Vidyarthi, 2007).

The lack of effective financing for support – or its distribution within a country – is a major obstacle to sustainable services. For example, in India, in 2005–2006, the spending on the welfare of people with disabilities – which focused on support to national disability institutions, NGOs providing services and spending on assistive devices – represented 0.05% of Ministry of Social Justice and Welfare allocations (WHO, 2011).

DISABLED AND ACCESS TO EDUCATION

In India, official developmental programmes and schemes have not reached the disabled people. Lower birth weight, poor nutritional status, higher

illiteracy, lower inoculation and immunization coverage, higher unemployment and underemployment rates, and lower occupational mobility among disabled people are some of the indicators of the systemic failure. Increased effort is needed, not only in strengthening prevention measures such as promoting maternal and child health care, primary health care and immunization programmes, but also in making information on prevention, treatment and rehabilitation more widely available. Much of the literature on policies for disabled people focuses on the inadequacy of existing income support programmes; however, the core issue is that most of them do not even having access to primary education. There is an urgent need for emphasis on integrating disabled people in mainstream education system, whether formal or informal.

Enrolment of Dalit children has increased over the years, reaching an astonishing 92% at the primary level during 1999–2000 (UNICEF Report, 2009). This reveals an increased interest in education and mobility. Tragically, this is offset by extremely high drop-out rates. Table 1 provides information regarding educational status level among Dalit and non-Dalit groups.

Higher rates of illiteracy are noted among the PWD population relative to general, and conversely lower shares of PWD with higher levels of educational attainment. Across all PWD, illiteracy is 52%, versus only 35% in the general population. The share of disabled children who are out of school is dramatically higher than other major social categories. Ninety per cent of India's disabled children – five times the general rate – do not attend school, totalling around 40 million (Chatterjee, 2003; cited in

Table 1. Educational Status of Persons with Disabilities across Social Groups.

General Education	Dalits	ST	OBC	Others	Total
Not literate	63.6	69.0	57.6	45.5	56.1
Literate without formal schooling	1.2	1.6	1.2	1.9	1.4
Literate but below primary	11.3	10.6	12.3	11.5	11.7
Primary	10.8	9.0	11.4	12.8	11.5
Middle	8.3	6.0	9.7	13.4	10.2
Secondary	2.6	2.0	4.1	7.2	4.5
Higher secondary	1.3	1.1	2.1	3.8	2.4
Diploma/certificate course	0.1	0.2	0.3	0.5	0.3
Graduate	0.6	0.5	1.0	2.5	1.3
Post-graduate and above	0.1	0.1	0.3	0.8	0.4

Source: Pal (2010).

Gabel & Chander, 2008; cf. Singal, Jeffery, Jain, & Sood, 2009). Disabled children rarely progress beyond primary school, and only 9% have completed higher secondary education (World Bank, 2007).

As with the general population, there are strong gender differences in educational attainment among PWD, with PWD female illiteracy rates on average 64% (against a male PWD average of 43%), and as high as 73% for the visually disabled. There are also strong locational differences as one would expect, with the total PWD illiteracy rate for rural areas as high as 57%, against a rate of 37% in urban areas.

Govinda and Bandyopadhyay (2008) report that under the *Sarva Shiksha Abhiyan* (SSA) there is a marked increase in the enrolment of those with disabilities in the education system. After more than a decade of the PWD Act, few PWDs have access to education or training. SSA, a programme formulated under the Education for All – National Plan of Action, has a special section on inclusive education; however, enrolment and retention rates remain poor. Similarly, only 2–3% of PWDs receive vocational training in low-profile stereotyped non-engineering areas likely to deliver low income (Mishra & Gupta, 2006). While the poor utilization of these interventions can be attributed to multiplicity of factors, including low awareness and ritualistic implementation of programmes with discrimination, privatization has not advanced the cause of education for children and youth with disabilities. Spending on inclusive education, although promoted under the SSA, is only 1% nationally (World Bank, 2007).

Under the District Primary Education Programme (DPEP) and the *Sarva Shiksha Abhiyan* (SSA), CWD are being identified so that they can be given aids and assistive devices. But there is little or no focus on inclusiveness in classroom teaching. Even integrated schools under the integrated education of disabled children lack appropriate facilities for resource teachers, resource rooms and adequate budget provisions for them. The deaf, for instance, require teachers conversant in sign language, but schools have no such provisions.

Mehrotra from her case study from Haryana reports that there is very little information about special schools, which are largely concentrated in urban areas. The few schools that exist remain out of reach of the majority of children with intellectual and other disabilities. Since caste, class and gender determine access to resources, male children from higher landowning castes and upwardly mobile middle-class families have greater access to the limited services and facilities available for the disabled in the state (Mehrotra & Vaidya, 2008, p. 330).

Although the PWD Act encouraged equal access in higher education, National Centre for Promotion of Employment for Disabled People's (NCPEDP's) 2005 survey showed, out of the 119 universities that responded, 20% did not follow the 3% reservation rule. Only 15% of the universities reported providing appropriate desks and chairs for students with physical impairments. Only 16 universities provided assistive software to students with visual impairments and only 10 universities provided books in Braille and sign language interpreters (cited in [Gabel & Chander, 2008](#); cf. [Singal et al., 2009](#)).

People with disabilities appear to face different obstacles to employment according to their gender and to whether they live in rural or urban areas. This heterogeneity has important implications for policy and programme design, as one size is unlikely to fit all. For the most part, education has a limited effect on the probability of being employed for people with disabilities.

ACCESS TO WORK

A recent study by ActionAid (2006) revealed that in the labour market, exclusion and discrimination are practised in both hiring and wage payments in a significant number of sample villages. In 36% of the sampled villages (out of 550 villages) the SCs were denied wage employment in agriculture. In 25% of the villages, the SC worker faced discrimination in wage payment. The SC wage labourer thus received daily wages at a rate less than both the market wage rate and the wages paid to non-SC workers. In a sizable number of villages, SCs were forced to carry on their traditional occupations that are considered to be unclean and polluting.

In all countries, the employment rates of PWD are lower than for the non-PWD population. This is true even in high income countries with the most progressive employment practices and strong active labour market programmes. PWDs have lower employment rates than the general population across all main locational and gender cuts. The PWD employment rate in India actually fell from 42.7% in 1991 down to 37.6% in 2002.

The total work participation rate among disabled is 34.49%, 44.81% and 29.55% among males and females respectively. Secondly, work participation rate is low among females as compared to males and in urban areas as compared to rural areas ([Bhanushali, n.d.](#)).

There is a notable gender difference in the employment situation of PWD men and women relative to non-PWD population. The employment

rate of PWD women relative to non-PWD women is significantly higher than for PWD men relative to non-PWD men. A possible explanation is that the gender factor with respect to women's employment is an important additional effect on employment rates, which dilutes the independent effect of disability among women on their employment rates (World Bank, 2007).

High work participation rate in rural areas are due to the fact that agriculture, which is the main occupation in rural areas has a capacity to absorb large chunk of disabled both educated and uneducated. Thirdly, lowest work participation rate is observed among urban disabled females. One reason for this is that employment opportunities in urban area male dominated and favours educated. Low education level among females is main constraint in their employment. Fourthly, among different categories of disabled, work participation rate is lowest.

World Bank report also clearly shows that the relative wages of PWD to non-PWD workers shows substantial variations between the states. The variation in wages across the year is greater for PWD men than for non-PWD but not so for women. When it comes to usual work hours per day and work days per month, there is relatively limited difference between workers with disabilities and those without. Once PWD are working, they are working about the same amount as non-disabled people. To have a member with severe disability is seen to be having a financial impact on the family as one earning member is missing and one more mouth to feed and care for. It affects the household dynamics as well as productivity in the workplace (WHO, 2011; World Bank, 2007).

Among people with mental disabilities, lack of education and employment opportunities along with negative attitude of the employer to employ mentally disabled are reasons for this trend. Having a mental illness has a strong (and statistically highly significant) negative impact on the probability of employment. For those with mental illness, the effect is much stronger in urban than rural areas. Data also suggests that there is more discrimination against men with disabilities as against women in the employment market as in the latter case being married is negatively linked to employment search.

The PWD Act 1995 provisions 3% reservation in jobs in all government and public-sector units for the disabled. This is calculated against identified jobs and not against the total strength of the cadre. Thus even this inadequate 3% is not implemented under the pretext of there not being suitable vacancies. The share of the disabled against the total strength in actual terms is barely 0.44% as against their estimated population of 5–6%.

Despite the existence of job reservations for people with disabilities in Madhya Pradesh, there is a widespread perception that the government has not been serious in implementing these fully. It is also true that relatively few new government jobs have been created since 1991; rather, organized public sector employment declined from 19.0 million to 18.0 million between 1991 and 2005 (Government of India, 2008; cf. Singal et al., 2009, p. 45)

ACCESS

Access to congenial work sphere is one of the biggest restraints. Despite the provisions in PWD Act most places are not easily accessible to PWDs. In Disability Rights movements, access is one of the major demands. Due to resource constraints, courts often restrict the availability of state assistance to a few categories of people with disabilities (Addlakha & Mandal, 2009). Besides, as the PWD Act does not enforce accessibility in the private sector, most multinational and domestic businesses have ignored accessibility requirements in their buildings.

WHO (2011, p. 239) report points out that the 'People with disabilities experience environmental obstacles that make physical access to employment difficult. Some may not be able to afford the daily travel costs to and from work. There may also be physical barriers to job interviews, to the actual work setting, and to attending social events with fellow employees. Access to information can be a further barrier for people with visual impairments'.

Rural–urban disparities persist in the accessibility of transportation services. In rural areas, people with stigmatized conditions, such as leprosy-cured, are not allowed to use public transport even if they can afford it (Mander, 2008). PWDs from poor especially SC population in rural areas are not able to access markets, schools, hospitals, NGOs and other public spaces. Rural transport systems are poor in infrastructure and availability. Although, most buses and trains continue to be inaccessible for people in wheelchairs (PACS, 2005), in urban areas, privatization has had a positive impact in a way. For instance, Samarthyam, an organization that advocates accessible environment and universal access for all, was able to convince the New Delhi Municipal Council (NMDC) to make 197 new bus shelters barrier-free and accessible (cf. Hirnandani & Sonpal, 2010).

GENDER, CASTE AND DISABILITY

In Indian context especially in rural areas, access to work is mediated by gender and caste/class and also religious ideologies. In affluent upper caste families, women are expected to be engaged in domestic work and farming work. Whereas in poor largely Dalit families women have always worked outside to sustain their livelihood. Families are expected to take care of the children, disabled and the elderly. Larger kinship structures too work as buffer in times of crisis. Marriage is mandatory and seen as a social support mechanism (Mehrotra, 2006). Number of studies indicates that employment and marriage are interconnected and ensure the well-being of members of any social group. Men with disabilities are more likely to be married than women with disabilities (Lang, 2001; Pal, 2010; World Bank, 2007; WHO, 2011). Although no caste correlations have been found here. Gendered ideology is at work here. Question of marriage, however, varies. In Haryana, Mehrotra found that all women with disabilities in her sample were married due to the fact of their usefulness as an agricultural worker and reproducer of lineage. This was also possible due to extremely skewed sex ratio. Parents nevertheless often have to shell out larger dowries to marry off girls with disabilities. They may also be married to disabled man or a man of 'low' social status (Mehrotra, 2006).

Feminist writers have reshaped the debates on work by highlighting the gendered separation of the public and private spheres. Policies towards work ignored women's exclusion from mainstream paid employment, segregation into specific sectors, and concentration in low-paid, part-time jobs. At the same time, critics have condemned the lack of recognition of domestic labour activities primarily undertaken by women, particularly housework, and personal care. Fawcett (2000a) argues that traditional feminist writings on 'work' have, in the main, disregarded issues regarding disability.

Studies indicate that Dalit women not only work within the household but also have to undertake responsibility of the household and child care with little support. Women with moderate disabilities are no exception here as they continue to work but remain invisible. Their wages are lower than that of men and have fewer opportunities in regular jobs. Their nature of work remains piecemeal, irregular, monotonous and backbreaking. The intersection of gender discrimination with other barriers (e.g. poverty, caste, rural residence etc.) similarly has a multiplicative effect. It produces something unique and distinct from any one form of discrimination standing alone. Dalit women face not just violence inflicted on them

by the dominant castes, but also state violence, violence at homes and outside.

- Erb and Harriss-White (1996, pp. 155–311) found evidence that the severity of disability had to be greater for women than for men before the former were absolved from the responsibility of being economically active. There is an implicit social expectation that women who become disabled will continue to perform domestic duties within their home (cf. Lang, 2001).

Studies also indicate that caring is a gendered activity with the majority of care for a disabled family member being provided by women (Addlakha, 2008; Lang, 2001; Mehrotra, 2006). It is usually the mother, grandmother or other close female relatives provide care.

Lang's (2001) study found that for all intents and purposes, caring for a disabled family member precluded female members of the household from being able to be engaged in paid employment. The average income lost to the household as a result of caring for a disabled family member was equivalent an average monthly agricultural wage. In Mehrotra's (2006) study, having a severely disabled member at home was seen as a burden as it is one working hand less. But the disabled women continued to work at home as a non-disabled woman, though it may not be seen as work as it non-remunerative.

In rural Haryana, the reservation in jobs seem to have benefited only men with disabilities from upper castes from urban areas where as men from SC communities cannot aspire as they lack required education and skills. Women across castes are not culturally expected to work outside (Mehrotra, 2008). In most of the societies masculine status is afforded to disabled men if they are able to find employment. For example in Haryana and South India (Lang, 2001) employment and marriage are seen as crucial markers of masculinity For disabled men especially intellectually disabled both goals are elusive (Mehrotra & Vaidya, 2008).

Disabled women's exclusion from the labour market is determined by factors relating to physical, social and cultural barriers experienced by both women and men with disabilities, while some are particular to disabled women and occur at the intersection of gender and disability (Fawcett, 2000).

According to one estimate the organized sector accounts for approximately 10% of the female labour force. It appears that participation of Dalit women in organized sectors is considerably low or negligible. In urban areas the Dalit women are found concentrated in the unorganized

sector. Dalit women mostly staying in slums or hutment colonies carry on these activities for survival and family support.

In case of India, the literacy rates of SC girls remain abysmally low. In such a case women with disabilities from Dalit communities continue to work as labour in unorganized sector in both urban and rural areas with little opportunities for social mobility. There is still a great deal of resistance to sending girls to residential schools, largely though not solely on account of security reasons. Further, sending them away would deprive the household of their participation in household chores (Mehrotra & Vaidya, 2008, p. 330).

A study made by Nandini Voice (2009) in Chennai reports that in spite of getting some sort of qualification and skill, most visually impaired women from poorer households do not get any jobs and are desperately seeking one. The government provides jobs in schools in teaching position, but the number of candidates far outweighs the job vacancies. Many have been waiting for several years hoping to get job in government schools. At present, it is reported that more than 600 visually impaired women, who are qualified in teaching, are waiting for teaching jobs. They also report that a gender bias towards taking men with disabilities than women.

Fawcett (2000) reports the disadvantage in terms of disabled women's exclusion from mainstream paid employment, segregation into specific sectors, that is stereotypical female occupations including routine clerical and personal service work, and concentration in low-paid, part-time jobs is reflected in the employment situation of disabled women. Women with intellectual disabilities are most liable to be working from home.

NGO EFFORTS

Historically most NGOs and donors have also focused predominantly on the medical or charity models of disability. The emphasis has been on providing medical aids rather than looking at the social and attitudinal causes of chronic poverty among disabled people. Almost no mainstream NGOs had even considered including disabled people in their development work until the late 1990s.

Today many organizations are actively imparting specialized, integrated or inclusive education are Amar Jyoti, OneWorld South Asia and the National Resource Centre for Inclusion (NRCI) under the Spastics Society of India (SSI). The National Thermal Power Corporation Limited

(NTPC), Asia's sixth largest thermal power corporation, also supports the concept of inclusive education by providing scholarships for physically challenged people to pursue higher education.

In two decades especially after the passing of PWD Act, many Disabled People's Organizations (DPOs) and also parents' driven organizations have emerged who are raising issues, participating in decision making and trying to campaign for their rights and inclusion in larger society.

Disabled people around the world are increasingly forming organizations to represent their needs and to lobby for change. The number and effectiveness of these organizations varies within and between countries. They are being recognized and consulted as legitimate representative bodies. Through these organizations, disabled people have, in some cases, gained access to the political power.

Self-help groups of disabled people are beginning to be recognized in a few parts of the country as another institution to be consulted and represented at local events. This is mainly occurring in the south where NGOs are more engaged in social mobilization work, for example in Andhra Pradesh, Tamil Nadu and Karnataka.

The National Association of the Blind is the only national DPO with a presence in almost every state. It is primarily involved in vocational training, employment and job placement. DPI India was formed several years ago and now has regional representation in the north, south, east and west (Coleridge, 1993). Today NGOs working with the disabled largely focus on rehabilitation services, income generation activities, vocational training, confidence and capacity building, skill training, marketing and need based and sometimes context-specific training. For example, The Leprosy Mission in India runs vocational training centres for young people affected by leprosy. Students are taught a wide range of technical skills – including car repairing, tailoring, welding, electronics, radio and television repairing, stenography, silk production, offset printing and computing. The qualifications obtained by those graduating are officially recognized by the government. The schools also teach other types of skills, such as business management and core life skills, The Leprosy Mission's training centres have a job placement rate of more than 95% (cf. WHO, 2011, p. 271).

In India the National Trust Act – created as the result of a campaign for the rights of people with disabilities – has produced collaboration among a range of NGOs. The Act gives individuals with autism, cerebral palsy, intellectual impairment, or multiple impairments, as well as their families, access to government services to enable people with disabilities to

live as independently as possible within their communities. It also encourages NGOs to collaborate, giving support to families who need it, and to facilitate the appointment of a legal guardian. Mechanisms under the Act offer training in personal assistance, to support people with a range of disabilities in the community (cf. WHO, 2011, p. 151).

NCPEDP, a disability rights organization, has been crusading for proper implementation for reservation for the disabled in formal employment. Many disability activists have joined not only government bodies but private sector too who are advocating for the cause of disabled persons' rights to employment. They however belong to upper caste and affluent families and there is very little in agenda for poorer Dalit disabled and especially women. Access to NGO support is also problematic as most of these are based in towns and cities and boys and girls from SCs hailing from rural areas cannot easily reach them (Mehrotra & Vaidya, 2008).

In India NGOs and independent living organizations are often successful in innovating and creating empowering services, but they can rarely scale them up to wider coverage (WHO, 2011). Different NGOs or agencies serve different impairment groups, but the lack of co-ordination between them undermines their effectiveness.

COMMUNITY-BASED REHABILITATION SERVICES

Most disability services in India are under the auspices of the government, but they have a simultaneous strong presence of NGOs (Thomas & Thomas, 2002). In the rural areas, and among urban squatters, NGOs are promoting organizations of disabled people and parents, at local levels. They are also largely engaged in what is known as community rehabilitation programmes generously supported by the Government and international agencies. All these efforts in the last two decades have contributed to popularizing the philosophy of Community-based rehabilitation (CBR) and raising the hopes of millions of people with disabilities. However, as the critics maintain CBR, as practiced in India, clearly reflects biases of the urban, educated social activists and those of the funding agencies. CBR initiators carefully maintained their distance from the religious institutions and other traditional organizations. For them religion becomes an anathema, as they pursue the goals of CBR that fit within a medical and scientific framework. The emphasis is on need survey, advanced planning, budgeting, record keeping, outcome evaluation etc. All these are not only

alien but also incompatible with informal village functioning (Dalal, 2002; also see Mehrotra, 2011; Miles, 2002).

Cultural factors have hardly been considered in these programmes (Mehrotra, 2008). With all non-governmental and governmental support, CBR has failed in bringing about any significant change in the disability scenario in rural areas. One of the advantages though of this grassroots activism is the dissemination of information, awareness and politicization among PWD, who have begun to voice their concerns (Erb & Harriss-White, 1996; Lang, 2001; World Bank, 2007). NGOization of the movement, however, also proves to be depoliticizing in many contexts. Agendas are dictated, cultural issues ignored and a new vocabulary of exclusion and discrimination introduced even in those contexts where it did not exist.

International institutions have gradually recognized disability as one of the most important issues without consideration of which development targets seem impossible to meet. Linking disability to poverty is one of the ways in which this discourse poses impoverishment not only as breeding disability but also in terms of high economic costs for families and communities who have to bear them. High costs incurred due to stigmatizing effects of disability in mainly developing countries are said to result in low literacy rates, widespread unemployment and high cost of health care. World Bank (2007) also emphasizes interlinkage of gender and disability as one of the key concerns in this context.

More recently the distinctions between groups who worked as advocacy groups and those working at the grassroots levels have blurred. Action for Ability Development and Inclusion, AADI (earlier Spastic Society of India), is today not only an advocacy and service organization but it has also started outreach to the villages, implementing CBR initiatives. Even some of the older organizations working in the field have also expanded their canvass to include notions of rights, advocacy, training and CBR initiatives. One of the major point of omission in these efforts is the consideration of caste factors in development practice. Caste and gender discrimination coupled with disability pose a major danger in posing a roadblock for development programmes. Chowdhury and Foley (2006) in the study on disability in Bangladesh reports on one woman who was begging for food on her pair of crutches. When asked what led to her current state as a beggar, she replied, 'I am a woman, a widow, and moreover disabled, how could I not be poor?' One only has to guess about her caste and class status which intersected in crucial ways with her gender and fact of widowhood led her impoverishment.

PRIVATE SECTOR

There has been a shift of emphasis in many parts of the world towards encouraging businesses to increase the employment of disabled people. There is now increased rhetoric of more mainstream inclusive employment policies. These current policies do not generally, however, take account of the institutional discrimination inherent in markets as they now exist. As Barbara Harris-White (1999) writes, 'Market-based provision is largely inappropriate as a response to conditions of disability. This is for three reasons. First, markets respond to purchasing power rather than to need. Second, markets are everywhere deeply embedded in social institutions of prejudice and discrimination. Third, firms comprising markets and competing in them cannot be expected, unaided by the state, voluntarily to add to their cost by adapting workplace sites so as to accommodate disabled workers'. Similarly, current strategies for development through increased trade and economic growth, will do little for disabled people if the discrimination widely excluding disabled people from the labour market is not also addressed (Coleridge, 1993).

Until very recently the disabled had severely limited opportunities for employment in urban sector. That is changing slowly as the public and private sector realize the benefits of inclusion of the disabled not just as a token gesture but as a business imperative. Corporate social responsibility measures and desire to do 'good business in global market has led to many corporates to slowly realize the potential of people with disabilities'. Confederation of Indian Industry (CII) has shown the important role industry associations can play in sensitizing industry to explore employment opportunities for the disabled.

Information technology is being seen as a boon for the marginalized sections as newer technologies and new skills are being imparted to them for readying them for newer job opportunities in the IT, manufacturing and hospitality sector.

Privatization has led to mixed outcomes for people with disabilities in the employment sphere. On one hand, technological advances have reduced their job opportunities. ILO (2003) cites the example of jobs earlier available to visually impaired people such as telephone operator, stenographer and typist that have declined due to changes in communication technology and introduction of computers. On the other hand, privatization has opened newer avenues for employment of people with disabilities in highly skilled and service jobs, making them more mobile and competitive in the job market. However, this is limited to those with access to higher

education and adequate training. Most training programmes do not match the demand of the service sector leaving most PWDs unequipped to avail of highly-paid jobs in this transitional phase of the Indian economy (ILO, 2003). Furthermore, the vast population of the rural disabled is deprived of access to technology and jobs that involve its application (Sridhar, 2003; cf. Hirnandani & Sonpal, 2010).

Enable India, an organization totally dedicated to capacity building of disabled not only helps them identify jobs according to their skills but urges them to go beyond stereotyped jobs. It also liaisons with corporate sector in getting PWDs jobs. The IT and ITES industries are well suited to employing PWD at various levels. Since these are primarily desk jobs, PWD can work in their seats with relatively little discomfort.

MphasiS has employed 140 at its Bangalore office. And 90% of the workforce at Vindhya E-Infomedia is disabled. Most of the staff at Vindhya are not only PWD but are also from poor rural backgrounds that lack the higher education and other facilities available to the urban handicapped.

Infosys BPO has introduced a line in its job advertisements that goes: 'Persons with disability (PWD) are encouraged to apply'. Starting with 28 PWD, the company today employs 165 and plans to double the number in future. NIIT has introduced special computer training programmes for the visually impaired. It has also developed a computer-assisted teaching and rehabilitation programme for spastics. Quattro BPO Solutions is partnering with Ability Foundation, Chennai, to organize an employability job fair for differently-abled people, in association with the National HRD Network (NASSCOM and Deloitte in April 2008). The NASSCOM–Deloitte survey indicates that '64% of IT/ITES companies employ persons with disability. Companies are also making efforts to create a suitable working environment for differently-enabled people by making workplaces more accessible, arranging transportation and sensitising employees'. PWD are employed in IT and ITES companies for various types of work including policymaking, development and testing of complex and advanced software, and BPO and KPO services such as data entry and data processing, medical transcription, call centre jobs, web services, and processing claims and application forms.

These trends, however, are more visible in southern states than in northern ones where the attitudes against caste gender and disability are firmly entrenched. These issues also seem to have more relevance for urban Dalit disabled. Friedner (2009) reports from her study of an NGO for Deaf from Bangalore that those from poorer kannada-speaking classes are given

training in welding, electrical work whereas more affluent go for computer training and English language which results in both status and income hierarchies among them.

Although the Act provides incentives to private sector employers for promoting disabled persons' employment, the 3% reservation rule is not mandatory for private employers (Friedner, 2009; Mishra & Gupta, 2006). More than fifteen years after the reforms, disabled people have about 60% lower employment rates than the general population, a gap that has been increasing over the past 15 years (World Bank, 2007). The World Bank report mentions in the late 1990s, employment of people with disabilities in large private firms was only 0.3% of the companies' workforce. In 1999, NCPEDP conducted a research study of the top 100 companies in India to examine employment practices in the corporate sector. Of the 796,363 total employees in 70 of the companies that responded, only 3,160 were disabled persons comprising 0.4% of the workforce. The percentage of employees with disabilities in public sector companies was 0.54, while in private companies only 0.28% employees were disabled (Abidi, 1999). The percentage of employees with disabilities in multinational corporations is only 0.05% (cf. AbidiHirmandani & Sonpal, 2010; World Bank, 2007).

PWDs and households with disabilities experience worse social and economic outcomes compared with persons without disabilities. In all settings, disabled people and their families often incur additional costs to achieve a standard of living equivalent to that of non-disabled people (WHO, 2011).

It is premised upon the notion that disabled people are unable to work because of the way in which society is structured. Clearly, this is not true within India, since the majority of disabled people have the appropriate skills to be engaged in some form of employment. Lang (2001) found that the principal aspirations of disabled people were twofold – employment and marriage. By making an economic contribution to the household, their self-esteem and dignity in the eyes of the local community were enhanced. He strongly advocates CBR initiatives, addressing the whole range of medical, social, economic and cultural needs of disabled individuals (cf. Mehrotra & Vaidya, 2008). In the changing global scenario, however, marriage may not always be a support system especially for women.

There are a small proportion of disabled people who are unable to work, because the severity of their impairment precludes them from engaging in economic activities. Despite the fact that majority of disabled are engaged in some form of economic pursuit, their life conditions seem to be clearly determined by complex intersection of their caste, class, that is social status, gender and disability. All these factors carry fair amount of

disadvantages creating multiple marginalities. In such instances, what is needed is an adequate social welfare system, rather than employment training programmes (Lang, 2001).

We require studies on assessment of job scenario for Dalit disabled in rural settings where people are losing jobs due to shrinking agricultural sector and industrialization. Until we take a more complex view of employment scenario of Dalits, we may inadvertently exclude the marginals within. There is a need to collate the question of caste, disability and gender together in the assertion for rights of the marginalized. Unfortunately caste, class and gender ideologies coupled with notions of incapacity mark their exclusion. But as Staples (2005) argues through his study on people afflicted with Leprosy that they are not be seen as victims. They are also agents as they strategize to manipulate their disability in earning livelihood through begging. Ethnographic studies delineating the variations along this theme may help in understanding the phenomena better. An intersectional approach with context specificity would help in underlining how caste, class disability and gender come together and implicate in the possibilities for PWD in Indian economy.

NOTE

1. Dalit refers to a group of people united by a new consciousness asserting their rights by challenging the historical oppression legitimized by the dominant brahmanical ideology of the Hindu Caste system in India and South Asia. Dalit is a preferred category among the downtrodden and oppressed who are otherwise known as 'scheduled caste' in the constitution of India and who are entitled to positive discrimination policies of the Indian state.

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