

Call for Papers
December 2023

Disability and Indian Society



The word 'disability' usually hints at something missing either fiscally, physically, mentally or legally. Yet, disability encompasses a broad range of bodily, cognitive, and sensory differences and capacities. It is more fluid than most other forms of identity in that it can potentially happen to anyone at any time, giving rise to the acronym for the nondisabled, TAB (for temporarily able-bodied). The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) fosters a new understanding of disability: "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others" (article 1). Whereas in the past, the focus was on the disability as an impairment (medical model of disability), this understanding was widened and comprised the barriers persons with disabilities encounter (social model of disability). The barriers include physical, attitudinal and communication barriers that are pervasive in all as ableist foundations on which the society is formed including areas of including infrastructure, water and sanitation, health, education, social protection, employment, economic development and governance. Hence the UNCRPD also extends to advocating a rights-based approach to disability which implies that all people are active subjects with legal claims and that persons with disabilities need to participate in all spheres of society on an equal basis with their non-disabled peers. Core human rights principles to be applied include equality and non-discrimination, participation and empowerment, transparency and accountability. As of December 2021, The UNCRPD has been ratified by more that 184 parties (183 countries and the European Nation) including India.

After India signed and ratified the UNCRPD in 2007, the process of enacting a new legislation in place of the Persons with Disabilities Act, 1995 (PWD Act, 1995) resulted in the Rights of Persons with Disability Act, 2016 (RPWD Act, 2016). The core principles stated to be implemented for empowerment of persons with disabilities (PWD) are respect for inherent dignity, individual autonomy including the freedom to make one's own choices, and independence of persons. The Act lays stress on nondiscrimination, full and effective participation and inclusion in society, respect for difference and acceptance of disabilities as part of human diversity and humanity, equality of opportunity, accessibility, equality between men and women, respect for the evolving capacities of children with disabilities, and respect for the right of children with disabilities to preserve their identities. This reflected a paradigm shift in thinking about disability from a social welfare concern to a human rights issue.

Yet, the RPWD Act 2016, remains inadequate and trapped in the conventional rhetoric of disability as an impairment, generally taken to refer to an objective, trans historical and transcultural entity of which modern bio medicine has acquired knowledge



and which it can adequately represent. Listing of twenty one categories of disabilities of which come are "benchmark disabilities" and some "...having high support needs..." explains the medical model medical model that acts as a mechanism of normalisation facilitated by systematic creation, identification, classification and control of social anomalies by which some subjects came to be divided from others. Further, provisions such as "limited guardianship" are inherently paternalistic and problematic as keep intact all problems of right to autonomy and enjoy dignity. For example, one may have no control of the decisions related to their lives, such as entering into a contract, voting or running for office, consenting to or refusing medical treatment, getting married, or choosing where and with whom to live. Challenges are especially acute for persons with psychosocial and intellectual disabilities, autistic persons, and persons with dementia. Moreover, the intersection between disability and gender results in both aggravated forms of discrimination and specific human rights violations against the right to legal capacity of women with disabilities, particularly in the exercise of sexual and reproductive health and rights. The same can be further complicated with intersectionality of caste, class and religion (to name a few). The United Nations Convention on the Rights of Persons with Disabilities underscores the role of support systems in implementation of right to legal capacity, yet the RPWD 2016 Act makes provision of guardianship. Hence, the law remains limited. While the disability movement in India (spanning over more than 4 decades), has come a long way; from the scattered demands for rights for people suffering from disability it has today developed into an area that is the subject of many academic works. Yet, it's principles requires a close critical examination.

Much of the problems arise from defining disability. Within the Indian cultural ethos, disability is understood as incomplete entity, out of harmony with nature, a sign that someone sinned, a manifestation of God's displeasure. These moral and religious understandings of disability also support a charity based understanding where person with disability is viewed as an individual pathology to be pitied, treated, cured, or taken care. The medical understanding reduces it to a certain clinical and biological framework, making it a problem to be cured and ameliorated by medical and paramedical professionals. The social model recognizes that disability is not the outcome of bodily pathology but is socially produced by systematic patterns of exclusion that are built into the social fabric. This served as an important tool for addressing injustice and facilitating the rights based model that suggested relocating efforts of service providers from individual solutions to removal of barriers to participation of persons with disabilities in the mainstream activities. Yet, as explained by Nandini Ghosh, the medical model remains very powerful in influencing the international and national definitions of disability. Further as explained by Nilka Mehrotra, in understading the disability movements and its resulting definitions and



meanings requires one to examine the rise of other similar movements in postcolonial India, especially the women's movements, environmental movements and Dalit movements. They provided the background and the necessary impetus in meaning construction that explains an important trajectory of points of conjunction and disjunction across contexts. These contextual forces interact and cause deprivations that affect the daily lives of disabled persons. Disability can thus be conceived as being embedded in a particular context and must then be interpreted in terms of oppression, keeping in mind other identity markers such as caste, class, gender, sexuality, religion, ethnicity, etc. Defining disability thus remains a challenging and tenuous task and there needs to emerge a focus on exclusionary societies with ableist foundations and its impact on persons with disabilities in pluralistic and democratic societies.

It also requires us to re examine the "models approach to disability" in academic research, which influences policy making, law, services such as rehabilitation, education, employment, in a direct and indirect way. Shilpaa Anand in her work "The Models Approach in Disability Scholarship: An Assessment of its Failings", explains that given the complexities of intersectional contexts in the Indian context, there is a need to develop theoretical and methodological tools that are context-sensitive, as the idea of the individual is conceptualized very differently in different contexts.

Similarly, there is a need to rethink the notion of "inclusion" particularly in the context of multiculturalism and pluralism in the Indian context. The tendency to reduce it to assimilation and restoration of normalcy rather than celebration of differences remains a challenge as long as state policies remain pegged on the medical notions of normality for categorization of persons with disabilities. Tanmoy Bhattacharya in his work "Diversity at Workplace and in Education" points out that inclusion as the notion, where everybody is the same regardless of race, gender, disability or sexual orientation, and recognition is insufficient. Inclusion of persons with disabilities demands a change in the basic norms by which a society is governed. The legal provisions such as RPWD Act 2016, do not question how notions of rationality, normalcy and its opposite (madness, disorder, impairment, abnormality) get constituted in the first place. It does not identify the bio politics (as Foucault explains), that is, constitutive mechanisms of truth and knowledge within scientific and social discourses, policy and medical legal practices that objectify the body and produce mechanisms to regulate/construct it. Hence, all apparatus that cause exclusions of persons with disabilities remain intact. Accessibility and inclusion of persons with disabilities in education, health, employment, participation in public life remains a token gesture. Further, the legal discourses individualize definitions, they mask all concerns of solidarity within the community detrimental to the effectiveness of the disability movement. Nandini Ghosh in her book Interrogating Disability in India: Theory



and Practice reflects on state policies that rely on measurement of disability and allocation of welfare resources are usually decided based on the categories and numbers that correspond to them. Hence, censuses and surveys merely aim at serving administrative purposes and indicating distributive responsibilities of the welfare state. This fails to encompass the political aspects of the problem, hence failing to create attitudinal change and barrier free systems.

There is a need to understand the importance of a subjective understanding of disability as stressed by intersectionality and identity studies has led to redefining of disability as a positive aspect of a person's identity. Persons with disabilities have multiple identities and any "definition" must be sensitive to recognizing disability as a multifaceted phenomenon. It must consider factors that construct notions of body, labour and impairment-related experiences which are determined social, economic, political, cultural factors that determine accessibility to a range of social and material resources. State resource distribution is largely governed by forces of economic globalisation that is primarily driven by profit, deepening the already existing inequalities and inclusion of persons with disabilities. Hence, there is a need for more active political activism and rigorous academic scholarship to construct foundations of society where values and social attributes of personhood such as autonomy, agency, control over one's body and life links up with concepts of difference and interdependence in the lives of persons with disabilities in India.

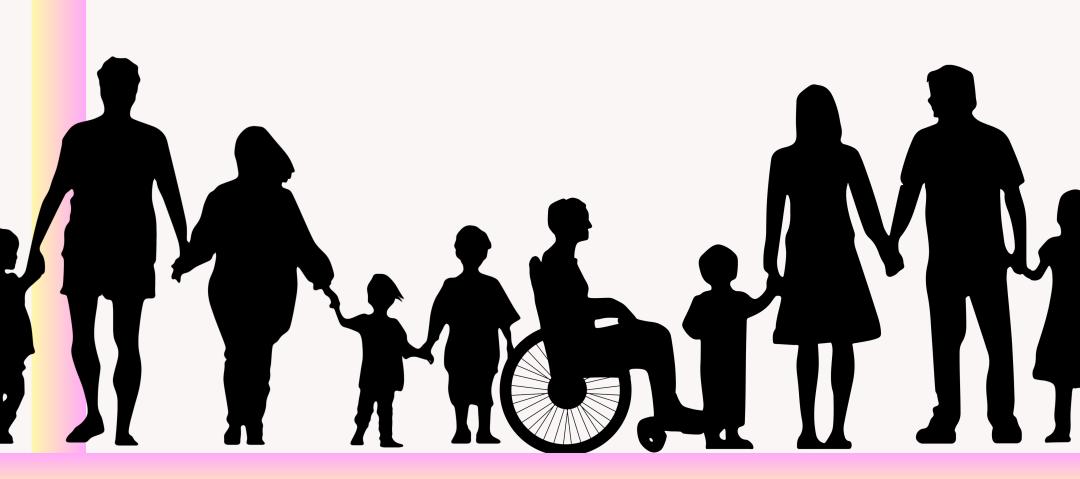
Interventions and deliberations in the form of papers are invited on the mentioned issues as well as extended to topics surrounding following themes-

- a. Theoretical Frameworks of Disability Studies in India
- b. Disability Movement in India: Local and International Contexts
- c. Disability Rights and Legal Discourses in India
- d. Post-colonial theory and Emergence of Disability Studies in India
- e. Disability, Family and ethics of Care Practices
- f. Constructions of Intellectual Disabilities and personhood
- g. Rethinking notions of body, corporeality and care work
- h. Participation, Inclusion and Social Work practices in India
- i. Gender/Caste/Religion/Class and Disability
- j. Strategies for contesting marginality at micro and macro levels
- k. Employment policies and inclusions of persons with disabilities (Indian context).
- l. Education policies and inclusions of persons with disabilities (Indian context).
- m. Rights and entitlements of Persons with Disabilities: Critical readings
- n. Assertion of difference through art and communication



- o. Disability, Art and Identity formation: thinking beyond identity politics
- p. Ethics of Care, Responsibility and Inclusion of persons
- q. Understanding empowerment: The politics of power and leveraging in disability context
- r. Disability inclusive health care systems
- s. Accessibility India Campaign
- t. Persons with Disability and the Indian Labour Market: Rethinking meaning and value of labour
- u. Deconstructing stereotypes and biases: intervention strategies and rights based advocacy

The December 2023 issue of Sambhasan will be on the above themes. Last date for the submission of article is November 30, 2023. The style of Writing the article is given on the website: https://mu.ac.in/sambhashan Kindly follow the instructions given on the website. Submit your article through a word file on the following email id: coeditor.sambhashan@mu.ac.in



Guidelines to follow for writing a research paper in Sambhashan:

- Original, scholarly, creative and critical papers with adequate references and empirical work (if applicable).
- All references to the author should be removed from the submission to enable the anonymous review process.
- There should be a limit from 4000-6000 words (for papers), 1500-2000 words (for commentaries) and 1000 words (for book reviews).
- Essays should follow the Times New Roman font in size 12 with double space and be submitted as a word document.
- All contributions should follow the author-date referencing system detailed in chapter 15 of The Chicago Manual of Style (17th Edition). The style guidelines are given below and can also be consulted on the journal webpages for quick reference.
- Authors should submit a statement that their contribution is original without any plagiarism. They can also, in addition, submit a plagiarism check certificate.



A) BOOKS

- Book references should be listed at the end of the paper as "Works Cited" in alphabetical order.

Single Author:

Carson, Rachel. 2002. Silent Spring. New York: HMH Books.

Dual Authors:

Adorno, Theodor, and Max Horkheimer. 1997. Dialectic of Enlightenment. London: Verso.

Multiple Authors:

Berkman, Alexander, Henry Bauer, and Carl Nold. 2011. *Prison Blossoms: Anarchist Voices from the American Past*. Cambridge: Harvard University Press.

B) JOURNAL ARTICLE

- List should follow alphabetical order and mention the page range of the published article.
- The URL or name of the database should be included for online articles referenced.

Anheier, Helmut K., Jurgen Gerhards, and Frank P. Romo. 1995. "Forms of Capital and

Social Structure in Cultural Fields: Examining Bourdieu's Social Topography." *American Journal of Sociology* 100, no. 4 (January): 859–903.

Ayers, Lewis. 2000. "John Caputo and the 'Faith' of Soft-Postmodernism." *Irish Theological Quarterly* 65, no. 1 (March): 13–31. https://doi.org/10.1177/002114000006500102

Dawson, Doyne. 2002. "The Marriage of Marx and Darwin?" *History and Theory* 41, no. 1 (February): 43–59.



C) NEWS OR MAGAZINE ARTICLE

- List should follow alphabetical order and need not mention the page numbers or range.
- The URL or name of the database should be included for online articles referenced.

Hitchens, Christopher. 1996. "Steal This Article." Vanity Fair, May 13, 1996 https://www.vanityfair.com/culture/1996/05/christopher-htichens-plagiarism-musings

Khan, Saeed. 2020. "1918 Spanish Flu cure ordered by doctors was contraindicated in

Gandhiji's Principles". Times of India, April 14, 2020. http://timesofindia.indiatimes.com/articleshow/75130706.cms? utm_source=contentofinterest&utm_medium=text&utm_campaign=cppst

Klein, Ezra. 2020. "Elizabeth Warren has a plan for this too." Vox, April 6, 2020.

https://www.vox.com/policy-and-politics/2020/4/6/21207338/elizabeth-warrencoronavirus-covid-19-recession-depression-presidency-trump.

D) WEBSITE CONTENT

- Website content can be restricted to in-text citation as follows: "As of May 1, 2017, Yale's home page listed . . .". But it can also be listed in the reference list alphabetically as follows. The date of access can be mentioned if the date of publication is not available.

Anthony Appiah, Kwame. 2014. "Is Religion Good or Bad?" Filmed May 2014 at

TEDSalon, New York.

https://www.ted.com/talks/kwame_anthony_appiah_is_religion_good_or_bad_this_is_a

_trick_question

Yale University. n.d. "About Yale: Yale Facts." Accessed May 1, 2017. https://www.yale.edu/about-yale/yale-facts.

