

# Discrimination and exclusion of differently able persons from social world (With special reference to Indore District)

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## **Abstract**

Today, there are millions of people living with one or multiple disabilities. In India, the population with disabilities is around 26.8 million, constituting 2.21% of India's total population, if we refer the 2011 population census data. Disability rights activists and academicians working on disability issues, however, say that these numbers in the census are a very small percentage of the actual numbers. World Bank data on the total number of persons with disabilities in India suggests the number is between 40 and 80 million. Whatever the difference between official figures and figures estimated by global institutions, what is clear is that persons with disabilities constitute significant part of the Indian population. Their numbers are more than the total population of many countries in the world, and India has one of the highest numbers of people with disabilities globally.

Despite constituting such a significant proportion of the total population, persons with disabilities live a very challenging life. Many persons often see their 'disability' as their 'inability' and people in general have preconceived notions about their capabilities. There have been many cases where employers have denied a job to a candidate with a disability, citing the usual not found suitable. The main problem lies in the psyche of a significant mass which considers persons with disabilities a liability, and this leads to discrimination and harassment against them and their isolation from the mainstream.

## **Introduction**

While writing the foreword to the World Report on Disability 2011, Professor Stephen Hawking stated: "Disability need not be an obstacle to success. We have a moral duty to remove the barriers to participation, and to invest sufficient funding and expertise to unlock the vast potential of people with disabilities. Governments throughout the world can no longer overlook the hundreds of millions of people with disabilities who are denied access to health, rehabilitation, support, education and employment, and never get the chance to shine."

Disability is a global concern. It affects individuals everywhere in the world and can happen to anyone at any stage of life. Generalizations about "disability" or "people with disabilities"

can be misleading. It is stated in the World Health Organization (WHO), that disability is a term to describe „any restriction or lack (resulting from any impairment) of ability to perform an activity in the manner or within the range considered normal for a human being“ (WHO, 2011). Based on statistics by the United Nation (UN) 2011, the current estimates indicate that 15 per cent of the world's populations are living with some form of disability, or approximately over one billion people. With this result of global trends in population ageing and a global increase in chronic health conditions, the incidence of impairment and disability among the general population is expected to increase. Basically, PWDs have diverse personal factors with differences in gender, age, socioeconomic status, sexuality, ethnicity, or cultural heritage. Each has his or her personal preferences and responses to disability.

### **Disability and other aspects**

Disability is a complex interconnected, biomedical, social, and environmental phenomenon interrelated by a web of issues that transcends the personal lives of individual. Just as one says, the whole is the sum of its parts; disability too is one aspect of life, a reality. It is a term that is variously understood as handicap, disorder, problem, liability to be helped to overcome these are some commonly used words when people discuss disability. The person is never the focus only the disability. This is reinforced in personal interactions at various points (attitudes, behavior and care for the differently able to name a few) mass media images, language, art and crafts and so on. Disability today is much more than just a physical problem. The abilities, capacities of the, irrespective of the disability –visual, hearing, locomotors, deaf blindness, sensory –neural impairments, mental and intellectual, learning are all part of the affected persons.

### **The specific objectives of the study are:**

- i) To understand the type of disabilities, issues and challenges of differently able people in built surrounding environment
- ii) To study the needs of differently able people at different campus
- iii) To promote a barrier-free campus concept at different fields.

**Research Methodology Research design:** Researcher applied **descriptive research design** in this study. Many variables selected and described in the study. Researcher used following key variables –

### **Key variables**

### **Dependent variables:**

- Problems of Differently able persons in education
- Exclusion from education
- Development of differently able persons.

### **Independent variables:**

- Socio -Economic status of differently able persons
- Gender of differently able person,
- Awareness regarding rights of differently able persons,
- Place of residence of differently able persons.

**Area of the study:** Institutes chosen in the study which are running for rehabilitation of differently able persons in rural and urban area of Indore.

**Sampling design:** Stratified sampling design is applied in the study. Sample size of 68 differently able people were selected for the study with stratified random sampling

### **Status of Differently able persons**

One in every ten children is born with a physical, mental or sensory disability. India is probably home to millions of disabled persons. More than 75% of disabilities are preventable. Although there has been some improvement in the status of children in the areas of health, nutrition and education in general, the situation of the children with disabilities remain deplorable particularly in rural areas and among low-income group community. Among this girl child are more vulnerable than male. Disabilities continue to fall in the area of social welfare. While efforts are on to bring right arena, there is still a long way to go. Disability is the consequence of impairment that may be physical, cognitive, mental, sensory, emotional, developmental or some of the combination of these. A disability may be present from birth or occur during a person's lifetime. National Centre for Promotion of Employment for Disabled People (NCPEDP 2005) conducted a survey on a large scale where it had selected 119 Universities, where 52 universities were able to provide data on the total number of students enrolled with them. Only about 0.1% of the students were found to be those with different disabilities as per the data from 52 respondent universities. 3% seats are reserved for the students with disabilities, this shows that these students are not able to reach the higher levels of education

### **Types of disabilities in built environment**

Differently able people are diverse and heterogeneous, while stereotypical views of disability emphasize wheelchair users and a few other “classic” groups such as blind people and deaf people. Increasing rates of disability in many places are associated with increases in chronic health condition such as diabetes, cardiovascular diseases, mental disorders, cancer, and respiratory illnesses and injuries (WHO, 2011). Global ageing also has a major influence on disability trends because there is higher risk of disability at older ages. The environment has a huge effect on the prevalence and extent of disability, and on the disadvantage faced by persons with disabilities. Disability encompasses five types, namely wheel-chair users, hearing impairment, visual impairment, physical disabilities, and learning disabilities. The levels of disabilities vary where each of level needs different aids and facilities. Below are the categories of the degree of mental disabilities:

- Mild: a person does not need assistance and has no difficulty with core activity tasks, but uses aids or equipment.
- Moderate: a person does not need assistance, but has difficulty with core activity tasks.
- Severe: where a person sometimes needs assistance with core activity tasks, has difficulty understanding or being understood by family or friends, or can Communicate most easily using sign language or other non-spoken forms of communication.
- Profound: where a person is unable to perform self-care, mobility and/or communication tasks, or always needs assistance

The categories of degrees of disabilities are based on limitations to core activities in terms of communication, mobility and self-care. Therefore, this will determine the types of facilities or assistances required by them in order to ease their daily lives

### **Issues and Challenges Faced by differently able people in built environment**

People need facilities and amenities as they enable them to access spaces. Thus, they need them ensure convenience in utilizing outdoor spaces. In the context of built environment, physical features are important criteria that need to be included in the design phase. This will ensure the mobility of people to move around since it is related to the easiness of people’s movement. This can be expressed by a number of indicators referring to the characteristics of walking journeys, such as frequency, purpose, length or duration. A good mobility will ensure continuity of movement since it makes the link with other pedestrian systems as well as can ease people’s movement architectural features can create barriers to differently able people especially. Physical

features in outdoor environment that can be hazardous for differently able people since they do not provide the facilities for them to use or to be aware the hazards.

This will influence the level of accessibility to differently able people since they require mobility aids to help them as well as spaces for them to incorporate within it.

Even in countries with laws on accessibility, compliance in public buildings is often very low. The communication needs of differently able people are often unmet. Information is frequently unavailable in accessible formats, and some differently able people are unable to access basic information and communication technologies, such as telephones and televisions. Besides that, differently able people have a right and freedom to work and get productivity in their lives. Samsiah (2008) states that the employment of differently able people should be based on their abilities not their disabilities.

Therefore, disabilities can be overcome by specialized support service, assistive devices or job modifications and other accommodations in order to help differently able people in working environment.

### **Case studies of differently able persons**

**Mrs. V, Mumbai**, only child a daughter, 19 years diagnosed at 18 months with autism.

“Her main issue was she was delayed in her milestones ; so she walked late ; went to play school also by two and a half years only when all other babies there were just a year and a half . Since she was not giving eye contact, her teacher was not bothered about her; she also learnt to use the toilet in her school slowly. Her irregular sleep patterns prevented her from going to school on time, so I had to reduce her school time for therapy at various points of her life.

Pushkala has been to many special schools till she was 10 years old. After that she stopped to school because of 2 things: the fee structure was high in special schools and family couldn't afford it anymore; secondly Pushkala wasn't benefitting greatly from anywhere. It's like a graph. They found improvements going up and then it was plateau. One more thing was found she was actually learning a lot at home. So started training her at home and whatever training received from attending workshop at her school. But it isn't a matter of just a day to learn something, it takes a lot of effort from both sides, certain skills are mastered easily while some have taken months to learn.

**Mrs. P. aged about 40**, mother of two son in college, daughter at 15 was diagnosed with autism at 18 months, lives in USA. Diagnosed as a child with autism at 18 months we got her into early

intervention took recourse to biomedical treatment dietary changes that were gluten and cases in free ; these are found in wheat products that are impact neurological processes that are crucial in daily functioning like interacting , reflexive and learning skills. It made no difference, took another treatment from a doctor in Austin, Texas. Her immune system became stronger, but the delays were increasing. Fast forward to the present which is all about self care, focusing mainly on feeding herself, taking a shower, folding her clothes and so on. She is now not on any particular diet or treatment, she uses an I-pad to communicate at the private school for special needs kids. She might be able to do the self care but cleaning herself, repeatedly, hoping that she will become more independent. At present, she still cannot care for herself during her monthly periods.

**Ms S,33 multiple sclerosis (MS)**for the past 18 years and a leading disability rights activist, Chennai. MS is a neurological disorder that affects motor, muscular, cognitive or sensory function. It is not a onetime affair, but recurs several times in one's life. I've lived with MS for 18 years with 15 relapses. Change is sudden; this usually causes friends and families to withdraw from interacting with the individual. I've faced this situation from both friends and family. Stigma and discrimination is very evident in the behavior of others with persons with MS. Assuming that persons with MS are incapable of choice and decision making as far as their own needs are concerned is very much prevalent. It is here that power dynamics come into play. My dad, during one of my relapses, met my bank manager and made my account into a joint account with him without my knowledge."

If this is the opportunity and respect that I get for my decisions and consent, you can imagine the scenario of persons with autism, intellectual disabilities or psycho-social disabilities!

My extended family continues to look at me as an incapable person needing help. I just don't care. I have distanced myself from them to some extent. They have done the same."

### **Outdoor spaces of campus planning**

A campus can also be considered as important elements that are highly interdependent. Thus, the paper provide a fundamental understanding on campus planning particularly on the needs of differently able people in outdoor spaces in order to create a barrier free campus environment.

For a disabled child in India overcoming barriers, self imposed or otherwise is an uphill task. Faced with a not so warm environment at school learning, communicating, getting through various task, day in and day out, is never ending process. As care givers or receivers, irrespective

of the individual with any kind of a disability, is a challenging task by itself. This means to say that everything, every decision ranging from finances, health, priorities are geared towards and around that individual. The special individual is a rallying focus for the family. In other words care be it physical care for daily essential needs, safety while travelling or simply moving around revolves around that individual. This may vary depending on the disability and type of care that is necessary. Recalling significant life changing moments that shaped one's beliefs and values and behavior is no mean task. There are moments in one's life especially for one with a disability, when one or may be innumerable people have contributed insignificant ways , inspiring one ,urging them to move ahead , overlooking seemingly insurmountable barriers. Here then some personal insights by both care givers and receivers woven around a summarized tale of giving and receiving care is a vis a disability.

### **Private schools reject children with disabilities**

Candida herself had faced rejection when she tried to enroll her twins with autism in private schools in Bangalore, in 2011. The schools said they had no provision to admit special needs children. "Some 7-8 well-known traditional schools and international schools said the same. I even offered to keep shadow teachers, but they refused. Shadow teachers are people with good communication skills who sit beside the child and guide him," Candida says.

Even now many private schools don't admit children with disabilities. But as per RTE Act and the Rights of Persons with Disabilities Act, schools are not supposed to turn these children away. CBSE had issued a circular in 2015 mandating schools to appoint special educators to cater to children with disabilities too.

After the rejections, Candida, a psychiatric social worker herself, managed to get her children enrolled in Englewood. She offered to be the shadow teacher for her children and to train teachers in the school on dealing with children with disabilities. "My children used to scream and throw things. Now in fourth standard, my daughter has not had a shadow teacher for the last two years, and my son has a shadow only two hours in a day. Children with learning and intellectual disabilities don't usually need a shadow at all." Going to a regular school has made a huge difference in the twins' social and learning skills, says Candida.

"Inclusion is not just about education. It's about the joy of coming to school. It also shows other children that the children with special needs have the right to sit with them in class," she says. With Candida's initiative through Manna, Englewood is a fully inclusive school now - about



30% of children here are those with disabilities. In addition to having shadow teachers and special educators, the school now allows students to opt for NIOS (National Institute of Open Schooling) curriculum after fourth standard that offers more subjects to choose from, if the students prefer so.

### **Attitude of society towards Person with Disability**

Murphy (1990) explains disability as a 'disease of social relation' and social relations between disabled and the able bodied are tense and problematic. And this situation is known to every person with disabilities. They face a lot of questions from others out of curiosity and unable to answer that. They are facing social hurdles in the form of prejudice, discrimination and avoidance. They become object of pity while they are in a group. They are socially isolated but it is mirrored by physical isolation.

There are many factors that influence and determine inter-personal relationship between the able bodied and the disabled. One of the most significant factors is concerning the extent and nature of disablement. A common man's reactions to gross physical deformities, like cerebral palsy, the victim of which presents a ghastly appearance, with constant jerky movements of the limbs, incoherent speech and saliva dripping down the mouth, are at one's indicative of repulsion apprehension and avoidance. In contrast, a leg amputee wearing an artificial limb may not cause such an embarrassment to the onlooker, for his deformity is not visible to the eye.

An individual is part and product of his social environment and so is a person with disability. His relationship, attitude and behaviour patterns are vitally affected by the nature and extent of the harmony or disharmony of his relationship with the family members, relatives, friends, community members, workplace colleagues etc. Tragically enough, the persons with disabilities are "less handicapped by their own disability than by the social attitude" (Silver, 1957) meted out to them in every occupation (Shrivastava, 1970). More than physical disability, the individual disabled face more problems in the societal attitude and behaviour.

A disabled person, like every other person, is a 'social being' therefore, no different from other able-bodied persons. It is an irony, however, that he is not accepted by the society as he is, for it invariably focuses its attention on his disabilities rather than on his abilities, victims of disease, accident or negligence, they have been further victimized by their peculiar and irrational prejudice of the society. Social Scientists have known for decades that able-bodied people tend



to avoid interacting with people with disabilities, because they are uncertain about how to behave in their presence (Thompson; 1982, Yamamoto; 1971).

### **Parent's attitude**

Parents play an important role in training and socialization of their child. When they identify their child is a person with disability they face problem to cope up with that situation. Dayals of reality, self-pity, guilt feeling, shame, depression, rejection of the child are the common reactive patterns. The presence of the child increases the stress level of the family. Defensive reactions are likely to occur; they think it is because of their sin. At times parents deny the fact that their child is a person with disability. They reject the child because of resentment. So child is also doing the same. But he is not able to express his blame so he becomes prey of guilt, anxiety and self hostility. Some parents started overprotecting their child out of sympathy. This will also spoil child's future. Having a child with disability increases the financial burden of the family. If the parents are economically, stable most of the time it leads to a positive attitude towards the child.

### **Relative and sibling's attitude**

In every family, sibling has an important role in the personality development of the child. Brothers and sisters influence each other and play important roles in each other's lives. Indeed, sibling relationships make up a child's first social network and are the basis for his or her interactions with people outside the family (Powell & Ogle, 1985). Each child's personality and temperament play an important role in their response toward a sibling, including one with a disability. Although both positive and negative feelings exist in all sibling relationships, McHale and Gamble (1987) states "for school-age children and young adolescents, these relationships tend to be more positive than negative in their feeling tone. Furthermore, children with disabled siblings appear to have more positive and fewer negative behavioral interactions than do those with non-disabled siblings". These positive aspects include higher levels of empathy and altruism, increased tolerance for differences, increased sense of maturity and responsibility, and pride in the sibling's accomplishments (Powell & Ogle, 1985). However, the attitudes of siblings is influenced by the attitude of parents. Relatives generally have positive attitudes towards the child with a disability and display deep concern and pity towards the family.

### **Neighbors and peer group attitude**

Peer groups are an important influence throughout one's life; Peer groups offer children and adults alike the opportunity to develop various social skills, such as leadership, sharing or teamwork, and empathy. But most of the time locomotor disabled children lack this because of mobility problems. Friends are usually very active and they took part in playing which needs physical support. However, friends and neighbors are very helpful, they play with them but sometimes they also start misbehaving and pass harsh and rude remarks whenever they commit any mistakes.

### **Institutions attitude**

#### **School/Educational institution**

Education enhances the overall development of a person. So schools are having an important role in a disabled person's life. But most of the time because of various reasons they are not able to complete their studies on time. Architectural barriers, teasing from friends, health related problems are various reasons. The nature of student's disability creates a stigma and it impacts the attitude of teachers. Most of the time they are not able to give much care for the student with disability. Sarva Shiksha Abhiyan (Education for All) has made a concerted effort to promote the inclusion of children with special needs to mainstream the society.

#### **Religion**

Much of the literature on disability in India has pointed to the importance of the concept of karma in attitudes to disability, with disability perceived either as punishment for misdeed in the past lives of the person with disability or the wrongdoing of their parents. In Bible it is mentioned that the sins of the parents will be visited upon their children up to the third or even further generation. Manusmriti mentions that a disabled person reaps in this life the seeds of misdeeds that he had sown in the former life. Even today similar kind of belief seems to be prevailing in rural India.

### **Discussion: Towards a barrier-free campus landscape for PWDs**

The concept of universal design (UD) has been used widely in a variety of design fields such as landscape design, architecture, engineering, and product design, since its conception and development by Mace in 1985 (Afacan, 2011). In general, universal design emphasizes the proactive integration of accessibility and usability to products and environments as fundamental constructs of design itself. Iwarsson and Stahl (2003) state that the term UD implies that the design of buildings, vehicles, or the environment, for example, takes into account that needs of a

diverse population rather than just an able-bodied one, and includes the interests of not just those with physical and/or intellectual impairments but also those of the elderly, children as well as adults, and people of diverse ethnic and national backgrounds. According to Saito (2006), there are two concepts of accessible designs and barrier-free design, which are often used as virtually synonymous terms. However, since these two concepts are usually focused on older people and people with physical disabilities, they are more parochial and considered inappropriate as similar concepts to universal design. UD's targeted users are not focused on specific people, but instead broadly on the inclusion of all types of people in the environment. The built environment includes all external campus areas, such as sidewalks, routes, parking lots, buildings and campus signages. During the implementation stage, it is very important to implement the principal of universal design in order to create an accessible campus environment especially for differently able people which, at the end, it can determine the level of accessibility through the universal design index.

## **Conclusion**

It can be reveal from the study that differently able people are discriminated and excluded from the social system as they are not getting barrier free environment and not getting proper equipment and resources. There is unavailability of trained persons to guide them. It is important to understand the needs of differently able people before making any decision.

Good campus physical environments can be understood better and improved through greater sensitivity to their nonverbal communications, by increasing designs and spaces that give a sense of comfort and security and by giving closer attention to the campus's way finding features. It can be achieved by increasing the focus on the place-making aspects of campus design. The paper also provides a platform to explore the need of differently able people especially in the campus environment based on the type of disabilities that include physical impaired, visual impaired, hearing impaired, wheelchair user and learning disability.

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