

Article

## Disability, Religion, and Gender: Exploring Experiences of Exclusion in India Through an Intersectional Lens

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### Abstract

Despite the existence of national and international laws and conventions to avoid discrimination in India, exclusion due to an intersection of disability, gender, and religious identity continues, resulting in marginalisation from society. This article investigates the lived experiences of people by exploring how aspects of their identity intersect to influence their inclusion or exclusion within society. Narrative interviews were undertaken with 25 participants with disabilities in the states of Tamil Nadu and West Bengal. This qualitative methodology was employed to allow the participants to recount their experiences (both positive and negative) in their own words. A thematic analysis of the data provided rich evidence of the complex social structure in India, manifested by the multifaceted intersectional nature of social inclusion and exclusion. Our research found that for our participants disability was the main factor upon which discrimination was based, but that this discrimination is often compounded for people with disabilities due to their minority religious status, or gender. Marginalisation of people with disabilities is shown to be exacerbated when these identities intersect. Action is needed to ensure the human rights of people with disabilities are realised and that discrimination and marginalisation are avoided for those who have different identities compared to the majority of the population.

### Keywords

disability; gender; inclusion; India; intersectionality; marginalization; narrative interviews; religion

### Issue

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### 1. Introduction

Intersectionality is defined as a theoretical framework that considers the impact of heterogeneity across different intersections of social positions on lived experience (Bauer et al., 2021). The concept was first introduced by Crenshaw (1989) to explore experiences of marginalisation of Black women in the United States by drawing on theoretical understandings from Black feminism and critical race theory. Her ideas were further developed by considering how due to the intersection of their identity, Black women (and particularly those from disadvantaged communities) are often excluded

from social movements and advocacy efforts (Crenshaw, 1991). Intersectional approaches have informed current understandings of how multiple and overlapping identities can reinforce deprivation and marginalisation, and may also strengthen divisions that exist between groups, and how these experiences may vary according to context and may change over time (Stewart, 2016). Building on her earlier work, Crenshaw (2015) argues that intersectionality is essentially a way of thinking about identity and its relationship to power.

Williams (1991) was among the first authors to consider how disability might intersect with other identities to shape how disadvantage is caused and

experienced. Despite the clear potential that intersectional approaches have for disability-focused research, a paucity of evidence remains. The importance of intersectionality is reflected in the UN Convention on the Rights of Persons With Disabilities (CRPD), which became the first human rights treaty to acknowledge multiple and intersecting forms of discrimination (Kabir et al., 2022). Intersectionality is therefore increasingly recognised as an important topic in disability-focused research. Grech (2023) urges that more research explores intersectional dimensions to better understand the causes and consequences of people with disabilities experiencing poverty. Such research should consider history, power, inequality, and (geo)politics, as well as the impact of space and place.

India is a country with a rich social and cultural heritage, a complex class system and demography. In April 2023, India became the world's most populous nation, with 1.4 billion people living there. Population growth is in part driven by life expectancy continuing to increase, meaning the number of old people in India will continue to rise ("India poised to become," 2023). While united by their common nationality, the population is not homogenous with various aspects informing and affecting diverse identities. In India, interconnected and overlapping aspects of identity, including those linked to disability, religion, and gender, intersect and combine to affect and determine experiences of both inclusion and exclusion from society (Haq et al., 2020). Caste is intrinsically linked to religion and social class and is clearly influential in how inclusion and exclusion are experienced. There is an evidence gap relating to the complexity that accompanies the intersection of these identities and what this means for experiences of exclusion. This article contributes to what is known about how intersecting identities and the associated link to exclusion in India. We note that other aspects of identity are also likely to play a role, but the focus of the current study is on disability, religion (and caste), and gender. It is necessary to provide a brief background on each of these identities and why they are important before we analyse how these identities intersect.

### 1.1. Disability In India

Disability, as explained by the UN CRPD, is understood as a concept resulting from the interaction between impairment and attitudinal and environmental barriers that may impact their participation in society on an equal basis with others (UN, 2006). As per the social model of disability, it is conceptualised to be the manifestation of the interaction of a person's impairment with the environment they occupy. This might be the physical, cultural, or policy environment, or a mixture of all three (Mont, 2007). The global estimate for disability prevalence is 15% (WHO & World Bank, 2011). With its massive population, the prevalence of disability in India is estimated to be significant, but data remains limited and

inconsistent. Estimates based on the last census held in 2011 reported a 2.2% disability prevalence rate (2.0% for women and 2.4% for men) (Leonard Cheshire, 2018). A systematic review of the prevalence of disability in India found the estimated ratio ranged from 1.6% to 43.3% (Ramadass et al., 2018). An estimated 70% of people with disabilities live in rural areas. More men have disabilities than women. Prevalence is also marginally higher for Scheduled Castes and Scheduled Tribes (Saikia et al., 2016). India signed and ratified the CRPD in 2007 and passed the Disability Rights Law in 2016. However, implementation is still a challenge with progress towards disability inclusion still limited with people with disabilities experiencing marginalisation in multiple spheres of life (Mehrotra, 2013). Negative and discriminatory attitudes towards people with disabilities continue to result in their exclusion from society (Pal, 2010, 2011).

### 1.2. Religion In India

Religion as a complex concept is understood to involve belief, faith, spirituality, institutions, behaviour, and practice (Tadros & Sabates-Wheeler, 2020). From both a historical and a contemporary perspective, religion plays a major role in shaping Indian society, with more than 99% of the population reporting having a religion; 80% of the population are Hindu. Muslims represent the largest minority religion with 14% of the population, with the remainder of people identifying as Christian, Sikh, Buddhist, Jain, or other religions (Ministry of Home Affairs, 2011).

Technically, according to its Constitution, India is a secular nation. Despite this, the links between religious identity and political power have become more pronounced in recent years (Robinson, 2010). The dominance of the Hindu majority is manifested in many aspects of life, including society, culture, and politics. Indian politics and religious affiliation have become increasingly intertwined, and under the leadership of the Hindu Nationalist Prime Minister Narendra Modi, there have been growing reports of discrimination, intolerance, and persecution of religious minorities (Haq et al., 2020; Kim, 2017). As well as the political sphere, religion also influences social experience in India. For example, the concept of Karma (which is grounded in Hinduism, Buddhism, Jainism, and Sikhism) shapes societal perception towards people with disabilities, resulting in their persecution and marginalisation (Ghai, 2015; Gupta, 2011).

Caste is the ancient and entrenched social system in India that provides groupings that are used to order society into a hierarchy (Das & Mehta, 2012). Caste is intertwined with religion—it is of Hindu origins. However, caste-related identity politics also impacts non-Hindus through social norms and practices. Vaid (2012, p. 396) states that even though "no caste has ever been homogeneous with regard to class criteria, congruence between the two has often been highlighted."

The relationship between class and caste is intricate and sensitive. However, it is clear that caste remains an important aspect of identity in India, influencing social and economic relations between social groups (Pal, 2011). Dalits are the lowest stratum in the system and represents 16.6% of the total population of India (Raghavendra, 2020). Caste-based stereotypes and stigma result in Dalits experiencing disadvantage, marginalisation, and exclusion (Pal, 2010). This caste-based discrimination has an impact on multiple factors including land ownership, employment, marriage prospects, and access to justice. Dalits are disproportionately poor, unemployed, and uneducated compared to others (Mehrotra, 2013). The prevalence rate of disability is also higher among Dalits compared with the general population, and they experience lower levels of education, employment, and poverty than people with disabilities from other castes (Pal, 2011).

### 1.3. Gender In India

Gender equality is a central feature of the UN Charter agreed upon in 1945, yet the world remains deeply unequal with women and girls continuing to experience marginalisation due to their gender (UN, 2020). Socio-cultural traditions in India heavily influence how gender intersects with other identities resulting in complexities (Haq, 2013). Gender inequality is deeply entrenched in India's social and cultural fabric with division based on socially constructed predefined roles, which have an impact on various aspects of society including family life, work, and politics (Batra & Reio, 2016). In the Indian context, gender is often constructed heteronormatively, failing to recognise gender identity as diverse and fluid (Kakar et al., 2021). Kumar (2021) explains how women who have intersecting identities, such as caste and religious status, are often denied their social, economic, cultural, and political rights in India. Haq et al. (2020, p. 586) describe how "women are treated as second-class citizens facing multiple intersectional discriminations and limited individual rights within India's highly patriarchal and conservative societal norms." For women with disabilities in India, the situation is exacerbated, as they often experience a wide spectrum of violence including neglect, physical abuse, and denial of traditional duties such as marriage and motherhood on account of their intersecting identities (Jogdand & Narke, 2022). Singh (2017, p. 139) argues: "Traditional patriarchal customs and norms have relegated women to a secondary status within the household and workplace." Gender inequity in India, along with intersecting factors, is marginalising women, limiting their access to resources and opportunities.

### 1.4. Objective

The above identities are shown to influence experiences of exclusion and marginalisation; the evidence exploring the experiences of people with multiple iden-

ties remains relatively limited. Considering how multiple identities intersect allows researchers to navigate complexity. As Kabir et al. (2022, p. 6) argue: "Applying an intersectional lens helps connect human rights to the multiple forms of discrimination that people experience. It is essential to achieve equal outcomes for all in global efforts to fulfil the pledge to leave no one behind." As such, in this study, we apply an intersectional approach to better understand experiences of marginalisation in India, intending to inform action needed to improve societal inclusion for all, particularly for people with disabilities.

## 2. Method

### 2.1. Methodological Approach

Using a qualitative approach, data was collected between July 2020 and March 2022 via narrative interviews. As this study is concerned with disability and intersecting identities, we used a purposeful sample to ensure that all of our participants had multiple identities that are identified in the existing literature as commonly resulting in marginalisation (Haq et al., 2020). We used purposeful selection here as a mechanism to help *make* meaning, not just *uncover* it. We acknowledge that the results of our study are influenced and constructed through our choice of samples as well as how we interpreted the data (Reybold et al., 2012). The complexity of our study starts with our selection of location for the sample. All the participants came from Tamil Nadu and West Bengal, and a mixture of rural and urban environments. These states were selected because they have relatively high concentrations of minority religious populations—Christians in Tamil Nadu and Muslims in West Bengal (Kramer, 2021). We aimed for a diverse sample of people who, due to different aspects of their identity, belonged to multiple minority groups. In total, 25 participants chose to participate: 15 were from Tamil Nadu and 10 were from West Bengal. All of the participants had disabilities: 14 reported having physical impairments, six had visual impairments, three participants had multiple impairments, one had neurological impairments, and one had intellectual impairments. There were 14 Christians, nine Muslims, and two Jains. In terms of caste, eight participants were Dalit, 10 described themselves as being Backward Caste, two were Scheduled Tribe, and five described themselves as "other." Nine of the participants were women and 16 were men.

Prior to undertaking the narrative interviews, participants were invited to provide an account of their life history however they would be comfortable doing so with some options being provided. Some chose to just describe each significant phase of their life and what that meant for their identity. Others did drawings and others followed a "river of life" style approach (Howard, 2023). This provided some context for each

participant but also acted to build a relationship with the researchers, helping participants “warm up” to participate and improve the subsequent interview (Palm & Hansson, 2018). The life history information provided here was translated, transcribed, and included in the analysis, which is described in the following sections.

A narrative interview approach was selected as its unstructured and depth-seeking format was deemed to be appropriate for gathering highly personal data from a group of marginalised individuals. Narrative interviews have been successfully used when gathering data about people with disabilities in other contexts, since they can ensure full and meaningful inclusion of all participants if they are carefully planned and implemented (Rohwerder et al., 2021; Thompson & Rohwerder, 2023; Thompson et al., 2021; Wickenden et al., 2021). Narrative interviews are subject-led, generating highly personal and individual, situational, emotional, and relational insights in a way that researcher-led interviews may not be able to. According to Jovchelovitch and Bauer (2000, p. 6), “conceptually, the idea of narrative interviewing is motivated by a critique of the question-response schema of most interviews.” This approach allows the subject to select the topic and theme, as well as the order in which they reveal their narrative. Importantly (particularly for some people with disabilities), the participant responds in a way that they are comfortable with. Reasonable adjustments were made to ensure that everyone could participate and that any speech, language, or communication barriers were overcome. The interviews were conducted in the language that the participant was most comfortable with. The narrative interviews were as open-ended and unstructured as possible to minimize researcher influence. This aim was to record authentic accounts of people’s experiences (Holt, 2010). This approach can empower people, as the participants develop agency as the authors of their own narrative (Overcash, 2003; Parker, 2004). The narrative interviews instigated a short introduction about how identity is made up of different aspects and how these can combine and intersect to influence social experiences. Participants were then asked a deliberately open question about how aspects of their identity had combined to influence inclusion or exclusion. After the participants had responded and stopped talking, further probing questions (where appropriate) were asked to prompt additional responses relating broadly to how intersecting elements of their identity had shaped their experiences.

The data were then translated into English, transcribed, and thematically analysed (Braun & Clarke, 2006) using an intersectional lens. The themes were generated purposefully focusing on experiences of exclusion and inclusion relating to different aspects of people’s identities. The narrative interview approach was designed to allow participants to discuss what they felt was important in their lives with regards to identities intersecting, creating data on simultaneously lived experiences (Windsong, 2018).

The data was coded specifically under the following themes and order: (a) the intersection of religion and disability, (b) the intersection of gender and disability, and (c) the intersection of multiple (three or more) identities. As we analysed the data, it became clear that disability was by far the most dominant identity to be linked by participants to exclusion. We created a separate theme to reflect this and went back over all the data to ensure we had analysed it accordingly. We engaged with six disability activists who worked for local organisations of people with disabilities as a validation process. Section 3, on findings, is organised around these themes from the analysis. We recognise that life in India is complex and context is important. As such, our analytical strategy was designed to explore the complexity associated with experiences of multiple dimensions of social life (McCall, 2005).

## 2.2. Ethics

Ethics approval was granted by the Institute of Development Studies Research Ethics Committee. Careful thought was given to how the research was undertaken given the sensitivities relating to religious minorities. Also, in addition to the usual ethical considerations of undertaking any research with people, particular care was employed to ensure the process was accessible (including the consent process) and did not discriminate against people with disabilities or put them at any additional risk. Ensuring the strict anonymity of the participants formed part of this process.

## 2.3. Limitations

There were some limitations to this research, which we feel are important to reflect on. India is a huge country with a diverse population. While responses included in this study reflect individual and highly personal accounts of lived experience, more research is needed to explore the experiences of others with different intersecting identities in different spaces and states. We note that identity can be fluid and exploration of this is limited. For example, all our participants expressed their gender identity as either male or female, and discussions relating to how gender intersects with other identities were limited (by participants’ choice) to focus on the female experience. We did not impose this as a restriction, but our sample size may have limited the diversity of experiences. Future studies could be more inclusive of people with non-binary gender identities. We recognise that by exploring participant experiences based on a combination of their characteristics, it is possible that we essentialise their experiences, reinforce stereotypes, and potentially exacerbate structures of power. John (2015) states that researching spaces where different identity characteristics intersect can obscure rather than illuminate what is known. This article aims to shine a light on marginalisation in India through an intersectional lens, but we recognise this approach is contested and

welcome further theoretical debate, including a critique of our selected approach.

This research was undertaken as the Covid-19 pandemic was developing, which limited the number and diversity of participants who could be involved. Government restrictions meant reasonable adjustments to the protocol had to be made. Efforts were made to ensure diverse identities were represented, but some groups have greater representation than others. For example, while we included people with a range of impairments (including visual, intellectual, neurological, or multiple impairments), the majority of participants reported having physical impairments—although these varied in type and severity. Also, regarding religion, while Muslims and Jains were included, the majority of the participants were Christians. Sikhs, Buddhists, other minority religions, and people with no religion were not represented in this study, which is a limitation. A more nuanced sampling approach to caste (and class) identities could have been undertaken to ensure participants with a range of identities were included.

#### 2.4. Positionality

In terms of the authors' positionality, the writing team is made up of one man and two women. None of us report having disabilities ourselves. Two of us are European, based in the UK, and are not involved in any organised religion. One of us is from India but does not disclose their religion or caste. Throughout the research process, we were reflective about our own positionality. We aimed to undertake the research from a neutral stance. During the planning phase, we recognised that we needed external advice to achieve this, so we engaged with an expert advisor, who was from India, belonged to a minority religion, identified as someone who had disabilities, and had a wealth of experience working in the field of disability inclusion. They had input into the research design and approach to the analysis. We were assisted with data collection by a researcher from India who identifies as a Dalit and belongs to a minority religion. They also contributed to advising about neutrality regarding the data collection.

### 3. Findings

Our research produced rich accounts of how people with various intersecting identities experience everyday life in contemporary India. As the highly personal responses were analysed, common themes emerged focusing on how aspects of identity intersect to exacerbate societal barriers. Despite the intersectional analysis of the data, it became clear that disability emerged as the perceived main driver of discrimination experienced by the participants. The following section explores the findings emerging from our data with regards to the intersectional nature of social inclusion, but also details how our participants reported disability as the dominant identity char-

acteristic driving experiences of discrimination. Where possible we have used direct quotes from the participants to highlight these themes, intending to bring to the fore the voice of the participants in the research (Wickenden & Franco, 2021). The use of quotes is also in keeping with the philosophy of our methodological approach, as the narrative interview technique we used is designed for the participants to express their experiences in their own way (Holt, 2010). With regards to disability, where possible we have tried to disaggregate responses by impairment category or type, but specific impairment-related experiences were rarely mentioned by participants. This could have been in part due to our research approach, which—following the social model of disability—did not focus exclusively on impairment but rather on the response of society. The following subsections are organised around the main themes from the analysis.

#### 3.1. Intersection of Religion and Disability

Involvement in religious communities was found to be desired by many participants and regarded as an important part of life. For some participants, their involvement in religion provided positive interactions and they felt accepted regardless of their impairments. For other participants, the situation was more complicated, with some experiencing exclusion due to a combination of their religion and their impairments. Identities of disability and religious belief intersected, resulting in exclusion from within their own religious community. This was in part found to be due to some religious beliefs commonly linking disability with shame, resulting in judgement from other members of the community and negative experiences for people with disabilities. For example, one Muslim man with physical impairments and diabetes discussed disability in the context of punishment from God/Allah, noting:

If your body is not pious [because of disability] you should not read Namaz/Quran. I don't go to the *masjids* [mosque] very frequently as my body is not pious anymore. How can I go for prayer when my pants are getting wet every now or then [due to involuntary urination due to diabetes]?

Some participants reported excluding themselves from certain spaces due to their previous treatment by others due to a combination of their identities. Such self-imposed exile from religious spaces was reportedly due to links between disability and shame associated with particular religious identities. Such experiences were found to have been experienced across multiple religious settings and multiple impairments. A Christian man with physical disabilities noted:

I avoided participating in social events, say, for instance, at the homes of the members of the church

just for the fear of being a burden to them and so on. If I, in particular, go to any such events with my wife, the embarrassment is more pronounced [and] everyone will look at my wife with sympathy that she has to suffer because of her marrying a disabled person.

For other participants, exclusion from places of worship and religious activities due to aspects of their identity was imposed by others in the form of various barriers (both physical and societal). This was particularly pronounced for those with impairments that could not be hidden. Their religious beliefs were what motivated them to attempt to access religious spaces, but a combination of their disability, and the religious beliefs of others in their religious community resulted in them being excluded. As a result, they missed out on the social and spiritual benefits being part of a religious community can offer, which was found to have a negative effect on how they felt. A Muslim man with visual disabilities mentioned:

I have heard of the Imams visiting the sick and the old in prayers and worship to help them at their homes. I feel they should have come to my home in search of me, [to help me] participate in daily prayers or weekly worships. All these [left] a bitter feeling, not only against the structure but against me as well.

A Christian man with physical disabilities reflected on his isolation:

Since I was not frequenting the church like any other normal children, I did not have any friends there or any serious relationship with the priests or nuns over there.

As the data was gathered during the Covid-19 pandemic and people were subject to varying levels of social distancing rules, it is possible that feelings of isolation were heightened during this time. However, discrimination in minority religious settings appeared to have preceded the pandemic. Some participants mentioned others in their religious community only focusing on their disability rather than their personhood, or people assuming they are there to beg rather than to take part in a religious celebration. For example, a Muslim woman with physical disabilities noted:

When I appear in such an event, they tell me: "Please leave, don't bother us now." They think I've gone there to ask for help, though I just visited them casually or just to have a friendly chat.

Some participants faced direct discrimination due to their impairments in their efforts to attend or be involved in leading religious activities. For example, one Christian man with physical disabilities had their reserved parking place taken away by their new parish priest, who

also turned their face away from them whenever they met. Another Christian woman with visual disabilities reported:

[I] was not allowed to be a part of Sunday Bible classes that will be organised after the main service, just because I am blind.

Another Christian man with a visual impairment reported being driven out of the church they set up "by a few members":

The reason [was] that I was blind and could not run the church, as it was growing. Nobody supported me and everyone was of the same opinion that a blind person cannot run a church independently.

For some people with disabilities, participation in a religious community has brought significant comfort and enjoyment, tinged by the negative experiences of inaccessibility and exclusion. One Christian man with physical disabilities, who feels included by their Pentecostal church noted:

The foremost impact is that I have been given that worthy feeling that I am too a worthy creature of God and I deserve all the dignity to live as a normal human person. This did not happen overnight. All the worship methods, providing me with leadership opportunities and a place in the choir and even small positive gestures over a period of time gave me such a hope.

Other participants who were provided similar opportunities were also happy it made them feel (in their words) "normal." Kindness and inclusion from leaders in their religious communities and community members helped people feel more positive about themselves and their lives. Some participants changed their identity structure by converting to different religions in a quest to feel more included. In these cases, their disability status remained the same, but their religious status changed. Some converted because of the acceptance they felt from particular religious communities. For example, a formally Hindu man with physical disabilities said:

I was amazed by the love and affection showered by the other members of the church on me as a disabled person and I started frequenting that church and was soon formally included as a member.

This presents an interesting finding in terms of fluidity of identity. While a person may not be able to change the status of their impairment, they may be able to choose to change their religion, which impacts how they experience inclusion and exclusion in different settings. Some people with disabilities noted that they felt their religious minority status meant that they experienced additional disadvantages compared to Hindus

with disabilities. For example, a Muslim woman with physical impairment noted:

Everywhere else disabled persons are being well-taken care of but not us. People from nearby Hindu localities are in a more advantageous situation than us.

The evidence showed that people with disabilities were struggling to access the social assistance they should be getting, and they believed this was due to their identity characteristics. For example, participants noted their difficulties accessing the disability card which enables their access to the relevant allowances and felt that these difficulties were caused by religious prejudice. A Jain man with a mother with intellectual disabilities noted:

While I applied for the disability card for my mother, the social welfare officer did not want the issue after he came to know that we are Jains. He rejected my application and told me: "You are Jain, then why are you asking for Government support?"

Another Christian woman with visual disabilities also reported intersecting discrimination, saying:

[I am] denied a cooking gas connection meant for the Hindu Dalits who are both abled and disabled. I was denied such a cooking gas connection and was told that, as a blind person, I cannot manage such a dangerous connection. I felt the undercurrent that I was denied because of being a member of a Christian community.

This evidence supports the research of Pal (2010, p. 23), who described marginalisation as having multiple bases in the social structure, involving various inter-related issues: "The situation of persons with disabilities among lower caste groups provides critical dimension to social discrimination, deprivation and exclusion." Marginalisation was found to be exacerbated by the intersection various aspects of social identity, resulting in certain groups (people who are Dalit and have a disability) being more likely to experience multiple disadvantages.

For some, the way that discrimination was experienced was clearly linked to different aspects of identity. For example, a Christian man with visual disabilities was assaulted by someone accusing him of trying to convert Hindus; he shared:

Before I realised what was happening, he [a Hindu man] suddenly removed the belt from my hip and started to assault me using that belt. I was shocked. He, during the assault asked me if I am converting Hindus to Christianity. He started to beat me faster as I remained silent. I was rescued by the others who came across. What I mean here is that but for my disability he would not have had the courage to

assault me.

Here, response to his minority religion instigated the reaction from someone from the majority religion, but then his disability resulted in his assault. Fear among the Hindu population of being converted to another religion well documented (Barua, 2015, for example, explores this issue in detail). However, in this case, while the response was caused by the participant's religious identity, the response was manifested in physical violence due to the participant's impairment.

### 3.2. Intersection of Gender and Disability

Our data produced limited evidence on how gender issues intersect with disability. However, where evidence was forthcoming, it indicated that gender and disability can intersect to impact negatively on all aspects of several of the female of the participants. Despite the majority of our participants being men, none of the male participants had anything to say about gender, with none of them reporting gender as a cause of discrimination, either when intersecting with another characteristic of identity, or on its own. However, many of the female participants were keen to discuss gender as an issue. Discrimination was found to be far more pronounced for women with disabilities than for men with disabilities. This is perhaps unsurprising and in keeping with evidence from the existing literature (Batra & Reio, 2016; Haq et al., 2020). Jogdand and Narke (2022) previously linked the explanation for such experiences to Indian culture and traditions, as well as attitudes and biases, which result in women with disabilities being disproportionately affected. Specific reference was made to the impact of gender issues for access to education for women/girls with disabilities. For example, one Muslim woman with physical disabilities who was taken out of school when she was eight said:

In our Muslim community the way girl children are brought up is far different from the way boys are brought up. My parents would have given up the school education not only because of the accessibility but for the gender issues as well. They would have thought that it is enough for a girl child with disabilities.

This strong reaction to the negative treatment of women due to an intersection of gender and impairment resonates with the work of Jogdand and Narke (2022), who make the clear connection between the isolation of women with disabilities in India and experiences of low self-esteem and negative feelings. The evidence suggests discrimination experienced by women with disabilities was deeply entrenched in the social fabric, resonating strongly with the work of Batra and Reio (2016). Such discrimination based the intersection of gender and disability felt for many so regular and common that it had

almost been accepted as “normal.” The data indicates that women with disabilities face significant marginalization in India.

### 3.3. Intersection of Multiple Identities

The data showed that several participants faced discrimination due to multiple intersecting aspects of their identity. Exclusion was caused due to a combination of their impairment, their religious minority status, and in some situations their lower caste status. Such discrimination based on the intersection of identities appeared to be particularly prominent in the world of work, with participants discussing experiences of discrimination both in terms of getting a job, but also in terms of negative treatment from co-workers once employment was found. For example, a Christian man with a physical disability who is looking for a government job as a qualified teacher noted:

I have to compete with the Hindus with disabilities. My being a Christian Dalit puts me in the Backward Class list and that delays the process of my getting a government job. [It] is a clear disadvantage to be a Dalit and a Christian. Had I been a Hindu with disabilities, then by this time I would have gotten the job.

Another Christian Dalit man with physical disabilities reflected on the discrimination based on multiple aspects of his identity:

In my office I have been discriminated basically based on my disability, then on my being a Christian and then for being a Dalit.

Gender issues were also found to intersect with disability and religious identity. One Muslim woman who was visually impaired reported she was far more excluded than her brother who was also visually impaired and had an identical religious affiliation. She went on to say that the exclusion was so bad that she previously felt suicidal as a result of her exclusion and experiences:

I feel like ending my life. There is no point in this life. Not a single day has passed where I haven't suffered.

The evidence showed that there was the perception that women with disabilities from religious minorities were found to face more pronounced disadvantages than other women. Exclusion was experienced due to the intersection of disability and minority religious status, but gender was the identity that defined experience.

There were instances where participants mentioned discrimination, but the situation appeared complex, with implicit or explicit motives being cited as the reason for the discrimination. For example, disability was used as an excuse to discriminate on the basis of caste. A Christian man with a physical disability reported:

[I was] asked not to play for the choir, being [told] that it might be difficult for me as a disabled person to get to the church on time for the mass. I was heartbroken as I knew my handicap was not the sole reason, but it was my being a Dalit that resulted in my being expelled from the choir....The fact that I have been playing for the choir for many years did not seem to count for them. All of a sudden, they pretended to take cognisance of my inability.

This illustrates the complexity of social structures in India, as well as the attempt to assess what is happening through an intersectional lens. The nature of implicit discrimination and exclusion makes it particularly hard to analyse.

### 3.4. Dominance of Disability as the Identity Responsible for Most Discrimination

Although experiences reported were highly individual and shaped by varying and intersecting aspects of identity, discrimination based on disability identity emerged as by far the most reported cause of discrimination. Despite our study aiming to explore intersectionality, our analysis suggests that for our participants, the overwhelmingly dominant aspect of identity, which they reported as being the basis for experiencing exclusion by others, was disability. Their status as people with disabilities had far more of an influence than other aspects, including minority religion affiliation, gender, or caste. As shown above, we note that these aspects of their identity can and do intersect, contributing to discrimination, but that disability stigma, which appears to be deeply entrenched in Indian society, is the root cause of much societal exclusion for people with disabilities.

Feelings of exclusion due to disability status were commonly experienced across a range of aspects of life (including education, work, and homelife) and found to be both overt and covert. In some cases, it was made obvious that the discrimination was due to a person's impairment. In other cases, the discrimination was more veiled, but equally toxic. A Christian woman with physical disabilities noted:

I have never felt included. Life has been one long journey of subtle exclusions.

Both overt and covert discrimination was found to be hurtful and had a negative impact on the lives of people with disabilities. Such discrimination based on disability was experienced across by participants across the range of other identities and appeared to take place regardless of religion, gender, or caste. Stigma around disability has resulted in people with disabilities being ignored and isolated by others.

Participants also detail experiencing abuse and mockery/laughter from others when they go out into society, which has led to isolation and some participants

cutting themselves off from society. A Muslim woman with visual disabilities stated:

People would hurl abuses at me due to my disability. That's why I don't go out.

Some people with disabilities responded to the stigma they face and the inaccessibility of their environments by excluding themselves from society. A Christian man with physical disabilities said:

There are many instances when I self-excluded myself from attending to social and family events of church members, obviously because of my poor accessibility and the fear that I would attract sympathies from others.

The overriding perception from the participants was that their disability status was the reason why they were excluded, regardless of other aspects of their identities. While intersecting identities are undoubtedly important in terms of planning how to move towards a more equal society, it would appear that addressing marginalisation due to disability status should form the basis of any action that aims to be truly transformative in India.

#### 4. Discussion

Intersectionality should allow researchers to explore how various identity systems mutually construct and influence one another and influence lived experience. However, as detailed by Erevelles and Minear (2010), there are various theoretical challenges of undertaking intersectional research, highlighted by questions such as whether some differences in identity should have prominence over others, or whether differences can merge to create a more acute form of oppression. Do some combinations of identity and context result in invisibility of certain aspects of identity? In an interview by Berger and Guidroz (2009), Kimberlé Crenshaw, who first coined the term "intersectionality," urges researchers to move beyond using intersectionality to just multiply identity categories, and instead use it as a framework to develop a structural analysis or a political critique. As such, intersectional analysis must consider how particular conditions are located within structures of power (Berger & Guidroz, 2009).

Using this framing, our analysis contributes to the evidence of how identities such as disability, gender, and religious minority status (and caste) intersect to impact lived experience. As explained by Kabir et al. (2022), considering where power lies allows us to explore structural barriers and to understand who is being left behind and why. India is a deeply unequal society, with gender continuing to be a major factor influencing marginalisation. Our findings resonated with existing research in that patriarchy is found to be deeply entrenched in Indian society (Singh, 2017). Women with disabilities are par-

ticularly marginalised and face societal challenges relating to both disability and gender. Saikia et al. (2016) described this as a double burden of discrimination. Marginalisation is further compounded for those who belong to minority religions, and those with lower caste status. In contemporary India, the line between politics and religion is becoming increasingly blurred, with the Hindu majority cementing their power under the governance of the Hindu Nationalist Prime Minister Modi (Haq et al., 2020; Kim, 2017). Despite recent progress towards disability inclusion in India in terms of the signing and ratification of the CRPD in 2007 and passed the Disability Rights Law in 2016, disability discrimination continues. The socially constructed barriers that result in discrimination against people with disabilities are in part shaped by religious beliefs (for example through the concept of Karma). In addition, the ancient caste system stratifies Indian society, with Dalits being the most powerless (Das & Mehta, 2012). As such, if you happen to be a woman with disabilities from an underprivileged minority (religion or caste) community in India, then you are more likely to face multiple forms of discrimination and experience extreme marginalisation and oppression.

Our findings suggest that discrimination due to disability clearly remains a problem in India, but that other factors such as gender, caste and minority religious status (which are arguably more entrenched in societal structures of power) also have an impact on when and where oppression is experienced.

Windsong (2018) urges researchers to engage with methodological challenges of intersectionality to avoid the research process becoming opaque and contribute in a transparent and honest way to how future research can be designed and conducted. Despite our efforts to investigate the intersecting nature of different identities in India, our results show that disability was the identity that resulted in the most significant marginalisation for all of the participants. Other identities were found to intersect to contribute to marginalisation, but disability status took prominence as the identity that resulted in universal marginalisation for our sample population. Despite this finding, our research does illustrate how useful using an intersectional lens can be for interrogating complexity. The interweaving of various aspects of identity is shown to feed into complex power structures and the creation of societal barriers, which if left unaddressed will result in the continued and exacerbated marginalisation of people with disabilities with certain identities, and social justice will remain unachieved.

Our research provides evidence focused on the intersectionality of lived experiences of disability in Tamil Nadu and West Bengal. It highlights the perspectives of underrepresented groups, and through an intersectional lens explores how identity can influence experiences of inclusion and exclusion. It has implications for future intersectional scholarship. While the findings draw on highly personalised experiences, they also have wider implications for addressing intersecting discrimination

in India and beyond. It is clear that more research is needed to explore the complexities of how identities can intersect to exacerbate marginalisation. This is particularly important in a country like India, with its unique social, religious, and cultural history. In addition, there are also methodological implications, as innovative intersectional approaches are clearly needed to explore situations where a particular identity has a more pronounced impact on lived experience than other identities. Our research also has implications for the policy sphere. With disability emerging as the dominant factor that appears to be the root cause of discrimination ahead of other factors, policy makers must ensure that people with disabilities are considered at all stages of policy making. This is particularly important when making policies relating to minority religious status and gender, as our findings show that the marginalisation of people with disabilities is shown to be exacerbated when these identities intersect.

## 5. Conclusions

This study has contributed rich qualitative evidence that focuses on the drivers of marginalisation in Tamil Nadu and West Bengal. Using narrative interview methodology, we provided the people with disabilities who took part the opportunity to express their experiences of inclusion and exclusion in India in their own words. We encouraged them to reflect on how various aspects of their identity influenced their experiences. Our analysis suggests that social exclusion is highly contextual, complex, and influenced by a number of factors. However, for all of our participants, disability was the most prominent aspect of identity that resulted in marginalisation. Other aspects of identity (gender, minority religious affiliation, and caste) intersected to contribute to marginalisation. Despite being asked directly to comment on how various aspects of their identity intersect, most participants focused their responses on marginalisation resulting from disability. Societal attitudes and barriers that were influenced by entrenched power structures relating to religion, gender, and caste impacted the inclusion of people with disabilities in employment, education, and social spaces. In the context of our study, women with disabilities and Dalits with disabilities appeared to be particularly marginalised due to intersecting aspects of their identity. For some participants, their minority religious affiliation also influenced their experience of discrimination, but their impairment made them an “easier target” for abuse. Our study has highlighted that discrimination remains rife in India despite legislation existing to prevent it or respond to it. It is clear that the national law to prevent discrimination due to disability is not being implemented effectively. Different aspects of identity are shown to intersect with disability and result in compounded marginalisation. Action is needed to realise the rights of people with disabilities and ensure that they are

included in all aspects of society, and to address intersecting discrimination due to any other aspect of their identity, including their caste, religion, or gender.

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## Conflict of Interests

The authors declare no conflict of interests.

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