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Gender Equality and Disability: An Intersectional Review of Compounded Disadvantage and Pathways to Inclusion

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Abstract: *Women and girls with disabilities stand at an intersection that both gender policy and disability policy have historically overlooked: gender-equality frameworks have tended to assume the non-disabled woman, while disability frameworks have tended to assume the male disabled subject. This conceptual review examines that intersection. Drawing on intersectionality theory and feminist disability studies, it argues that the disadvantage experienced by women and girls with disabilities is not adequately captured by additive models of double discrimination; gender and disability interact to produce distinctive forms of exclusion that neither framework anticipates alone. The review traces the normative architecture that now addresses the intersection, from CEDAW through Article 6 of the Convention on the Rights of Persons with Disabilities and General Comment No. 3 to the gender-specific provisions of India's Rights of Persons with Disabilities Act, 2016, and then surveys the principal domains of compounded disadvantage: education, livelihood, health and reproductive autonomy, exposure to gender-based violence, family life and caregiving expectations, and representation in disability leadership. Indian evidence, statistical and ethnographic, is examined, with attention to the further intersections of rurality and poverty. The review concludes with a twin-track pathway framework, gender-responsive disability policy joined to disability-inclusive gender policy, resting on four supports: intersectionally disaggregated data; educational measures that reach girls with disabilities specifically; violence-protection systems accessible to women with disabilities; and, above all, the participation and leadership of women with disabilities in the design of the policies that concern them. Throughout, the review distinguishes what the evidence establishes from what remains, in the Indian context especially, an urgent research agenda.*

Keywords: *gender and disability; intersectionality; women with disabilities; inclusive education; gender-based violence; CRPD Article 6; RPWD Act 2016; India.*

1. INTRODUCTION

Every axis of social disadvantage generates its own policy machinery, its ministries, its statutes, its indicators, and that machinery, once built, tends to see the world through its own single axis. Gender-equality frameworks have historically imagined their subject as a woman without disability; disability frameworks have historically imagined theirs as a disabled man. Women and girls with disabilities, who belong fully to both constituencies, have too often been served completely by neither, a pattern of intersectional invisibility that scholarship has documented across both the global North and South (Garland-Thomson, 2002; Emmett & Alant, 2006; Ghai, 2003). The consequences are not abstract: across several of the domains reviewed below, education, work, health, safety, family life, and voice, the available evidence indicates substantial disadvantages for women and girls with disabilities, including relative to non-disabled women and, where comparable data exist, relative to men with disabilities.

This review has three aims: (a) to establish the conceptual case for treating the gender–disability intersection as interactive rather than merely additive; (b) to map the normative instruments and the principal domains of compounded disadvantage, with particular attention to India; and (c) to derive a pathway framework for policy and a corresponding research agenda. The method is that of a narrative conceptual review: sources, theoretical works, international instruments, official Indian statistics, and peer-reviewed and ethnographic studies, were selected purposively for their bearing on the intersection; the review is interpretive rather than systematic, and no claim of exhaustive retrieval is made.

2. Conceptual Framework: From Double Discrimination to Intersectionality

The earliest formulations described women with disabilities as facing double discrimination, disadvantaged once as women and again as disabled persons. The formulation was rhetorically effective and directionally correct, but analytically limited, for it treats gender and disability as independent burdens that merely sum. Crenshaw's foundational analysis of intersectionality, developed for the intersection of race and sex, demonstrated why additive models fail: persons at an intersection may experience forms of exclusion that neither single-axis framework recognises, and may fall through the space between remedies designed for one axis at a time (Crenshaw, 1989, 1991). Transposed to gender and disability, the point is that the situation of a woman with a disability is not reducible to the combined experience of a disabled man and a non-disabled woman; it has its own intersectional structure.

Feminist disability studies has specified that structure. Garland-Thomson (2002) argued that disability, like gender, functions as a pervasive system of representation that marks bodies as inferior, and that the two systems interpenetrate: cultural ideals of femininity, of the body, of caregiving and of dependency bear on disabled women in ways they do not bear on disabled men. Morris (1991) documented how disabled women are subject to a distinctive denial of adult roles, as workers, partners, and above all as mothers, that compounds rather than merely repeats the exclusions of gender. In the Indian context, Ghai (2003, 2015) has shown how these dynamics are inflected by local constructions of the female body, marriageability, and family honour, so that a girl's disability is frequently experienced by the family as a crisis of her marriage prospects before it is understood as a question of her education or capabilities, while Mehrotra's (2006) ethnographic work in rural Haryana documents how gendered household economies allocate care, schooling, and opportunity differently to disabled daughters and disabled sons. The conceptual conclusion for policy is direct: single-axis instruments will systematically miss intersectional disadvantage, and remedies must be designed for the intersection itself.

3. The Normative Architecture

International law arrived at the intersection in stages. CEDAW (1979) addressed discrimination against women without reference to disability; early disability instruments addressed disability without sustained reference to gender. The Convention on the Rights of Persons with Disabilities marked the turn: its Article 6 recognises explicitly that women and girls with disabilities are subject to multiple discrimination and obliges States Parties to take measures for their full development, advancement, and empowerment (United Nations, 2006). General Comment No. 3 of the CRPD Committee elaborated the obligation, adopting expressly intersectional language and identifying violence, sexual and reproductive rights, and access to justice as areas of acute concern (UN Committee on the Rights of Persons with Disabilities, 2016). The Sustainable Development Goals bind the strands together, with Goals 4, 5, and 10 jointly requiring inclusive education, gender equality, and reduced inequality, monitored through data disaggregated by both sex and disability.

India's Rights of Persons with Disabilities Act, 2016 carries the recognition into domestic law: it directs appropriate governments to take measures to ensure that women and children with disabilities enjoy their rights equally with others, extends its protective provisions to reproductive rights, and repeatedly identifies women with disabilities as requiring particular attention within schemes, programmes, and protective mechanisms (Government of India, 2016). The normative architecture is thus, at the level of text, considerably ahead of where it stood a generation ago. The analytical question, to which the review now turns, is what the architecture must contend with in social fact.

4. Domains of Compounded Disadvantage

4.1 Education

Education is where compounding begins. Official Indian statistics consistently indicate lower literacy and educational attainment among persons with disabilities than in the general population, and lower attainment among women with disabilities than among men with disabilities (Office of the Registrar General & Census Commissioner, India, 2011; National Statistical Office, 2019). The intersectional reading of that gradient is that the general barriers to disabled children's schooling, distance, accessibility, teacher preparedness, are joined, for girls, by gendered calculations within households about safety, the value of a daughter's education, and competing claims on her labour, so that a girl with disability faces the barriers of disability under the terms of gender. Globally, the Global Education Monitoring

Report's inclusion analysis reaches a congruent conclusion: disadvantages of disability, gender, and poverty interact rather than merely accumulate (UNESCO, 2020).

4.2 Livelihood and Economic Participation

Employment analyses of Indian survey data have long documented low labour-force participation among persons with disabilities, with markedly lower participation among women with disabilities (Mitra & Sambamoorthi, 2006). The pattern reflects the education gradient upstream and discrimination downstream, but also a distinctive intersectional mechanism: where prevailing gender norms already constrain women's work outside the household, disability supplies a further reason, in the household's calculus, why a daughter or wife should not work, while existing disability-employment policies may be less well aligned with the forms of home-based and informal work in which many women participate.

4.3 Health and Reproductive Autonomy

In health, the intersection produces both neglect and intrusion. Neglect, in that general health and rehabilitation services frequently fail to accommodate women with disabilities, and gendered services, maternal health above all, frequently fail to accommodate disability (WHO & World Bank, 2011). Intrusion, in that the reproductive lives of women with disabilities, particularly women with intellectual and psychosocial disabilities, have internationally been documented as sites of control, from presumptions of asexuality to decisions about contraception and sterilisation taken by others, a concern that General Comment No. 3 places at the centre of Article 6 obligations (UN Committee on the Rights of Persons with Disabilities, 2016). This is an international normative concern; the prevalence and forms of such practices in India are not well documented and require country-specific research. The RPWD Act's explicit protection of the reproductive rights of persons with disabilities is nonetheless a direct statutory response to this class of concern (Government of India, 2016).

4.4 Gender-Based Violence

The international evidence indicates that women and girls with disabilities face elevated risk of gender-based violence, in forms both shared with other women and specific to disability, violence by caregivers, denial of assistive devices, abuse within institutions, and that they face disproportionate barriers in reporting and in access to justice: inaccessible complaint mechanisms, credibility discounting, and communication barriers (UNFPA, 2018; UN Committee on the Rights of Persons with Disabilities, 2016). India-specific prevalence research remains limited, itself a finding of consequence. Many of the structural risk factors identified in the international literature, dependency on potential abusers, isolation, and communication barriers, may also be relevant in the Indian context, but their prevalence and specific pathways require further empirical investigation. What can be said with confidence is structural: protective systems that are not disability-accessible are, for this constituency, protective in name only.

4.5 Family Life, Caregiving, and Voice

Two further domains complete the picture. Within family life, disabled women encounter the double bind that feminist disability scholarship has documented: excluded from the caregiving and marital roles through which their societies define adult womanhood, yet simultaneously expected, where they are able, to perform unpaid care for others (Morris, 1991; Ghai, 2003). And within the disability movement itself, leadership and representation have historically skewed male, so that the priorities of disability advocacy have not automatically been the priorities of its women, an internal replication of the single-axis problem that Article 6 exists to correct (Hans, 2015).

5. The Indian Evidence and Its Limits

The Indian evidence base for the intersection has three strata. The statistical stratum, Census 2011 and the NSS 76th Round, permits sex-disaggregation of headline indicators and consistently shows women with disabilities at a disadvantage in literacy, education, and work participation relative to men with disabilities (Office of the Registrar General & Census Commissioner, India, 2011; National Statistical Office, 2019); it does not, however, reach the mechanisms. The ethnographic and theoretical stratum, Ghai (2003, 2015), Mehrotra (2006), Addlakha (2013), Hans (2015), reaches the mechanisms with depth, marriageability, honour, household allocation, care expectations, but by design not at population scale. Between the two lies a gap: India lacks a developed body of intersectionally designed quantitative research, studies that measure outcomes and mechanisms jointly across gender, disability, and their further

intersections with rurality, poverty, and caste. The gap has policy consequences: schemes for women with disabilities are designed and budgeted largely without evidence on which interventions move which outcomes for whom. Naming that gap precisely is among the more useful contributions a review of this kind can make.

6. Pathways: A Twin-Track Framework

The pathway framework that follows adopts the twin-track approach widely used in international development policy (DFID, 2000): mainstream gender across disability policy and disability across gender policy, while maintaining targeted measures for women and girls with disabilities specifically. Four supports give the twin track content. First, intersectionally disaggregated data: every education, labour, health, and protection indicator that is disaggregated by sex or by disability should be disaggregated by both, a step that is administratively feasible within existing instruments and without which intersectional disadvantage remains statistically invisible. Second, education measures that reach girls with disabilities specifically: safe transport, accessible sanitation, female support personnel, and household engagement address the gendered terms under which disability barriers operate, complementing the general inclusive-education measures the RPWD Act and the National Education Policy 2020 already mandate (Ministry of Education, 2020). Third, violence-protection systems that are accessible by design: complaint mechanisms, one-stop centres, helplines, and legal-aid processes audited for physical, communicational, and attitudinal accessibility, in line with General Comment No. 3. Fourth, and foundationally, participation and leadership: the design, implementation, and monitoring of all such measures should include women with disabilities themselves, in disability advisory bodies, in gender machinery, and in the organisations of the disability movement, both because participation is itself an Article 6 entitlement and because policy designed at a single axis has repeatedly been shown to miss the intersection it aims to serve.

A final clarification concerns the depth of the fourth support. Participation admits of degrees, and the distinctions matter: consultation, in which views are invited on decisions others will take; participation, in which affected persons join the process; co-production, in which policies and services are designed and delivered jointly, with influence shared from problem definition onward; and shared decision-making, in which authority itself is shared, a gradient long recognised in the participation literature (Arnstein, 1969). Representation alone, a seat at the table without influence over what is decided at it, has repeatedly proved insufficient; the standard toward which Article 6 and the twin-track framework point is the upper end of the gradient, in which women with disabilities help to define the problems policies address, not merely to comment on solutions already drafted. Developing and evaluating co-productive mechanisms of this kind, in the Indian policy context specifically, is among the most important items on the research agenda this review proposes.

Stated as a framework, these are commitments whose comparative effectiveness in the Indian context remains to be evaluated; the framework is offered as a structured agenda for policy and research rather than as a set of demonstrated interventions.

7. Conclusion

The intersection of gender and disability is where two of the great equality projects of our time meet, and where each has most often failed the other's constituency. The conceptual case for an intersectional approach is well established: the disadvantage experienced by women and girls with disabilities is interactive, not merely additive, and single-axis policy will not reach it. The normative framework is now substantially established at the level of international and domestic legal instruments, in Article 6, General Comment No. 3, and the gender provisions of the RPWD Act. What remains unfinished is the empirical and institutional work: intersectionally disaggregated data, intersectionally designed research, and, decisively, the presence of women with disabilities in the rooms where the policies that concern them are made. An inclusive society, if the term is to mean anything, will be one in which no one is required to choose which half of her identity a policy is prepared to see.

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