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Dalits with Disabilities:
The Neglected Dimension of Social Exclusion

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IIDS Objectives

- To conceptualise and theoretically understand social exclusion and discrimination in contemporary world.
- To develop methods and measuring tools for the study of discrimination and exclusions in social, cultural, political and economic spheres of everyday life and their consequences.
- To undertake empirical researches on measuring forms, magnitude and nature of discrimination in multiple spheres.
- To understand the impact of social exclusion and discriminatory practices on inter-group inequalities, poverty, human right violations, inter-group conflicts and economic development of the marginalised social categories.
- To undertake empirical research on the status of different excluded, marginalised and discriminated groups in Indian society *vis-à-vis* their social, cultural, political, and economic situations.
- To propose policy interventions for building an inclusive society through empowerment of the socially excluded groups in India and elsewhere in the world.
- To provide knowledge support and training to civil society actors.

The views expressed in this paper are those of the author(s) and do not necessarily reflect the views or policies of Indian Institute of Dalit Studies and supporting organisations.

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Foreword

Indian Institute of Dalit Studies (IIDS) has been amongst the first research organisations in India to focus exclusively on development concerns of the marginalised groups and socially excluded communities. Over the last six year, IIDS has carried out several studies on different aspects of social exclusion and discrimination of the historically marginalised social groups, such as the Scheduled Caste, Scheduled Tribes and Religious Minorities in India and other parts of the sub-continent. The Working Paper Series disseminates empirical findings of the ongoing research and conceptual development on issues pertaining to the forms and nature of social exclusion and discrimination. Some of our papers also critically examine inclusive policies for the marginalised social groups.

This working paper “Dalits with Disabilities: The Neglected Dimension of Social Exclusion” studies broader areas of Dalits and Disability in India and explores in-depth consequences of inter-relation between the two. It draws corollary between the two concepts that is physically challenged and caste-based disadvantage, discrimination, and deprivation of opportunities in different spheres of day to day life. The paper has sufficiently drawn on the available data and brings to light the fact how Dalit identity coupled with born disability or acquiring disability after birth means living not only with limitations, higher dependency, social stigma and deprivation of opportunities for self-development but more of a helpless acceptance of exclusion, dissuading essentially basic needs of life. Without underscoring the focus on many socially disadvantaged groups, the paper advocates special consideration for the Dalits with disabilities as they face multiple forms of discrimination. Also there is a need for special provisions for this marginalized group especially to the ones likely to languish on account of lack of familial and other social support.

This study was carried out under the auspices of International NGO Partnership Agreement Programme (IPAP) led by Christian Aid. IIDS gratefully acknowledges the support of Christian Aid and DFID for supporting this study. We hope our working papers will be helpful to academics, students, activists, civil society organisations and policymaking bodies.

Surinder S. Jodhka
Director, IIDS

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Dalits with Disabilities: The Neglected Dimension of Social Exclusion

***Gobinda C. Pal**

1. Introduction

‘Dalits’ and ‘disability’ represent two concepts but carry several common social constructs. To be born into a Dalit family in India is to begin a life with many social handicaps due to caste-based stereotypes and discriminations, and deprivation of opportunities in different spheres of life. Similarly, having born with disability or acquiring disability after birth is to begin a life with limitations, higher dependency, social stigma and deprivation of opportunities for self-development. In both cases, it is more of a helpless acceptance of a variety of exclusion and also non-fulfillment of many of the basic necessities of life.

In the face of crippling social norms of hierarchical caste structure, Dalits have to fight for the right to equality and livelihood in day-to-day life. ‘Dalits with disabilities’ are more likely to be afflicted in a chronic form due to disability coupled with Dalit identity. Such inter-twined problems can cause multiple disadvantages, which become emotionally traumatic and can lead to irrevocable psychological damage. The case of “*a physically disabled person from Dalit community, who could not for a long time use the tricycle presented to him by the government, because the caste Hindu ‘road rules’ could not be violated*” (Viswanathan, 2006) reflects not only discrimination and deprivation but also denial of access to public resources and violation of human rights, leading to a dishonorable living.

Over the years, the disadvantaged positions of the marginalized groups have been highlighted time and again in various social surveys. Various policies have been framed for the empowerment of Dalits as well as persons with disabilities. The interface of ‘caste’ and ‘disability’ on the life of Dalits however remains stubbornly in place. It can strongly reinforce underlying

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disadvantages bearing significant negative consequences on the lives of Dalits with disabilities. The physical limitations coupled with Dalit identity are likely to put them 'at greater risk'. But do the policy frameworks address the problems of the doubly/multiple disadvantaged group in equitable manner? Do the interventions and rehabilitation programs take into account the increased vulnerability of this minority in the process of inclusion? This paper attempts to address these questions by examining the socio-economic status of Dalits with disabilities within the larger framework of 'social exclusion and social justice'.

1.2 Perspectives on Social Exclusion: A Critique

The approach to understand problems of various sections of people, as a rule, is linked to the process of social categorization based on caste, ethnicity, religion, gender, region etc. The hierarchical system in each category places one group at the bottom and margins. The social processes systematically deprive them from rights, opportunities and resources. In Indian society, the caste dynamics, however, continue to predominantly underlie social and economic relations among various sections of the society. The stronghold of 'untouchability' over the minds and lives of many people sharpen the social as well as physical distance between caste groups. This leads to a treatment of Dalits as lesser human beings. They are deprived of many socially valued resources and in turn face exclusion from mainstream society. In terms of deprivation and exclusion, although Scheduled Tribe (ST) population comes closer to Dalits, the underling causes and the nature of deprivation remain different. The former has been subject to deprivation because of the ethnic affiliation and cultural isolation. As Sen (2000) states "they suffer from 'constitutive relevance' of exclusion which arises because of their inability to relate to others and to take part in the life of the community". The problems of STs are thus qualitatively different from Dalits, and demand different solutions.

Like Dalits and STs, Muslims among the religious minorities, exhibit deficits and deprivation in all dimensions of development. The poverty among the Muslims is closer to that of Dalits and STs (TPMS, 2008). Irrespective of the caste, ethnicity and religion of population, greater unevenness in the developmental indicators is also noticed across regions. Rural areas lag behind urban areas in all developmental indicators. Besides higher intensity of discrimination based on caste, religion, ethnicity, regions etc.; the access of rural population to basic civic facilities remains very low. Similarly,

regional variations place some states/regions at the bottom of social development. Irrespective of all the above social aspects of categorization, gender has been the most common component of social exclusion. Because of gender based inequalities, a large section of women remain the most underprivileged and face extreme discrimination and also various forms of exploitation and abuse.

Another insidious form of discrimination and exclusion is marked with the 'persons with disabilities'. They have been subject to negligence, segregation and deprivation because of not only the physical and mental characteristics but also the social attitude that 'they will not be able to perform and contribute to social development'. It is pointed out that low literacy, limited activities and widespread social stigma make persons with disabilities among the most excluded in India (The World Bank Report, 2007).

Evidently, marginalization has multiple bases in the social structure. The most dismal feature for the marginalized groups happens to be social exclusion. The problem, however, involves number of interrelated issues. It becomes complex due to interplay of more than one social identity where some groups are more likely to become vulnerable to multiple disadvantages. The critical issues in the life of these groups, by and large, are overlooked although numerous policies address the problems of specific marginalized groups. As the most common approach, the problems of groups with multiple disadvantages are understood through cross-cutting of gender dimension with other social factors like caste, ethnicity, religion, location, region etc. But the condition of disability, both as personal and social problem, has been studied in isolation with other social characteristics. The intersection of caste with disability can compound the problems of many Dalits with disabilities. The disadvantages and suffering of being a Dalit, disabled and poor can be more critical for women and rural inhabitants. From the human rights perspective, there is a need to understand the living conditions of Dalits with disabilities to promote their integration to mainstream society.

1.3 The Study

As a cross-cutting issue, this study focuses on the effects of caste and disability on the living conditions of people. It attempts to examine the

status of persons with disabilities across social groups, with a focus on Dalits. In specific terms, this study examines- (i) the magnitude, nature, extent and causes of disabilities; (ii) the educational, occupational and social status of persons with disabilities; and (iii) the accessibility of persons with disabilities to various support services in the process of their rehabilitation and social inclusion across social groups. The study would help for better understanding of living conditions, specific problems, important needs and other critical issues with regard to Dalits with disabilities in particular and a 'minority with double disadvantages' in general. This would have larger policy implications for the capacity building of families, community organizations and local governance; and designing a universal framework of inclusiveness that could create more opportunities for their participation in society.

This study is primarily based on the secondary data drawn mainly from the National Sample Survey (NSS, 2002). Despite the availability of official data on disability from the Census (2001) and the NSS (2002), the latter is considered for the present study mainly because of broad data-base regarding persons with disability and social indicators like 'disability and housing conditions'. The data on various indicators with regard to disability are extracted/generated and further intersected with other classificatory variables with a specific focus on social groups. With the dearth of systematic studies on multiple disadvantaged groups, especially in the domain of disability; the analysis considers information sources comprising of other documents/reports, academic studies and experiential accounts with regard to Dalits and disability.

2. Status of Persons with Disabilities across Social Groups

The findings of the study are broadly organized into four sections dealing with demographic profile, educational status, work/activity pattern and social conditions with regard to persons with disabilities across social groups. Although focus of analysis has been on differences between social groups; the factor of gender, location and types of disability are often considered for examining the variations on various aspects of disability.

2.1 Demographic Profile

This section examines basic profile of persons with disabilities in terms of prevalence rate, age at onset, degree/extent of disability and causes of disability.

Prevalence

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

Onset of Disability and Age Profile

The fact is that some people are born with disability and some acquire it in course of time, commonly attributed to hereditary and environmental factors respectively. But to be born with disability does not always mean the prominence of hereditary factors. It is found that while about one-third of the persons with disabilities are born with disabilities, only about 13 per cent have blood relationships with parents. This scenario, however, varies across types of disability. This suggests that environmental factors play important role in disability even before birth, i.e., during pregnancy. The data on 'age at onset' of disability collected for those who acquired disability after birth reveals higher rate of disability at birth or shortly after birth, and again between the age of 50-60 years. The pattern on the 'age at onset' however varies considerably across types of disability. Unlike other physical disabilities, the higher manifestation of mental retardation (as a severe form of mental disability) is observed since birth or at the early stage of life, especially at the onset of adolescence. But the possibility

of onset of mental illness (as a mild form of mental disability) increases as one becomes older. While the onset of speech disability is both congenital and old-age phenomenon, visual, hearing and locomotor disabilities are more of old age problems.

In view of the impact of living conditions on incidence of disability, it could be expected that the people with poor living conditions would be more prone to disability by birth or at early stage of life. This assumption is found partially true. The incidence of disability at birth although does not show remarkable differences between social groups, it is marginally higher among STs i.e. 38 per cent against the 35 per cent overall incidence. The age-distribution of persons with disabilities (Table-1) reveals that disability is majorly a childhood problem. About 21 per cent of the disabled population is below the age of 9 years and another 22 per cent between 10-19 years. On the other hand, about 11 per cent are above 60 years.

Table 1: Age-wise Distribution of Persons with Disabilities across Social Groups

Age Range	Dalits	ST	OBC	Others	Total
0-4	10.4	10.1	10.0	8.8	9.7
5-9	13.0	12.5	12.0	10.2	11.7
10-14	12.4	12.6	12.1	11.3	12.0
15-19	9.9	10.2	10.1	10.2	10.1
20-29	15.0	15.1	15.5	16.8	15.8
30-39	13.1	12.8	12.7	13.0	12.8
40-49	10.4	10.0	9.9	10.6	10.2
50-59	7.3	6.9	7.0	7.3	7.1
60>	8.5	9.9	10.7	11.7	10.7

This age specific profile of persons with disabilities in India is in contrast to developed countries showing a higher proportion of persons with disabilities in the older age group (Dalal, 2002). The lower proportion of persons with disabilities in the later stage of life in India is perhaps caused by an early death of many persons with disabilities. This is despite the fact that many disability cases appear at old age. The age-specific disability across social groups indicates that the proportion of young disabled persons is relatively higher among Dalits and STs than upper caste groups and reverse is true among older age group.

Degree and Extent of Disability

The degree of disability is commonly determined in terms of its severity. Accordingly, persons with disabilities are classified as profound/severe, moderate and mild. But in the NSS, different 'labelling' is used for different types of disability. While the common category of profound, severe and moderate is used for the hearing disability, for other types of disability the labelling is done in different forms of cognitive and behavioral manifestations.

The data on degree of disability across social groups reveal that a majority of the persons with hearing disability among Dalits and STs have severe to profound disability and their proportion is considerably higher than that of upper caste groups. Similar pattern is observed for visual disability. The percentage of persons with 'no light perceptions', considered as 'blind', is remarkably higher among Dalits and STs than upper caste groups. However, there are no such remarkable differences between social groups in case of speech and locomotor disabilities. The overall data indicates that the proportion of Dalits having severe form of disabilities is higher than upper castes. This would have significant implications for the intervention services for socially disadvantaged groups.

As a corollary to the degree of disability, the extent of disability is considered using the indicator of 'self care and reliance on aid/appliance'. The results (Table 2) indicate that about 14 per cent of the persons with disabilities 'cannot function even with aid/appliance', thus, greatly depend on others in day to day life. On the other hand, about 17 per cent 'can take care of self only with the help of aid/appliance' and about 60 per cent are capable of 'taking care of self without aid/appliance'.

Table 2: Extent of Disability among Persons with Disabilities across Social Groups

Extent of Disability	Dalits	ST	OBC	Others	Total
Cannot take self-care even with aid/appliance	14.1	12.9	14.3	14.4	13.6
Can take self care with only aid/appliance	16.5	16.4	17.1	18.7	17.2
Can take self-care without aid/appliance	60.2	57.7	60.0	58.2	60.2
Aid/appliance not tried/not available	9.3	13.0	8.6	8.7	9.0

No noticeable differences are observed between social groups on the extent of disability. But relatively lower percentage of persons with disabilities among STs than other social groups, cannot take self-care even with aid/appliance. On the other hand, distinctively higher percentage of STs with disabilities have not tried or not availed any aid/appliance.

Causes of Disability

Normally disability is perceived as a health problem. The medical model of the disability finds strong link between disability and diseases and health conditions. But the World Programme of Action concerning persons with disabilities lists out several factors to be responsible for disability, which include natural disasters, social conflicts, resource constraints, poverty, unhygienic living conditions, accidents, physical and social barriers and psycho-social problems. The NSS data on potential causes of disability with respect to those who acquired disability in the course of life (Table 3) reveals that irrespective of the types of disability, highest percentage of disability is caused by anemia (19 per cent), followed by pneumonia (17 per cent) and malnutrition (10 per cent). Other important factors include defective gene mutation (9 per cent) congenial defects (8 per cent), stunted (3 per cent) and low level of nutrition (3 per cent).

Table 3: Causes of Disability across Social Groups

Major Causes	Dalits	ST	OBC	Others	Total
Moderate or severe Anemia	18.3	15.5	20.8	16.1	18.5
Pneumonia	16.8	11.7	15.5	18.9	16.6
Malnutrition	9.5	13.0	10.9	9.2	10.2
Defective gene mutation	9.5	10.8	9.3	8.5	9.2
Congenial defects	7.3	7.0	7.6	8.7	7.8
Depicting impact of heredity	3.8	3.3	3.3	3.6	3.5
Stunted	2.7	2.4	2.8	3.8	3.1
Low level of nutrition	3.4	3.0	2.9	2.8	3.0
Inappropriate services at the time of delivery	3.0	2.8	2.8	3.2	3.0

The data across social groups do not show a definite pattern. Anemia accounts for higher percentage of disability among OBC and Dalits; whereas pneumonia among upper castes and Dalits. Congenial defects and stunted also cause higher percentage of disability among upper caste. For STs,

malnutrition and defective gene mutation are important factors. The low level of nutrition causes highest percentage of disability among Dalits. It is thus clear that the factors like anemia, pneumonia and low level of nutrition play prominent role in disability of Dalits. However, it may be noted that the major causes of disability widely vary across types of disability. Moreover, substantial percentage of response on the 'unknown factor' suggests major knowledge gaps on the causes of various types of disability.

2.2 Educational Status

Education of children with disabilities has been a priority issue since it minimizes the impact of disability on livelihood to a great extent. The Persons with Disabilities Act, 1995 envisages comprehensive schemes with alternative schooling, flexible curriculum and special resource support for the benefit of these children. The Rehabilitation Council of India undertakes the responsibilities for the rehabilitation of persons with disabilities through programs in education, vocational training and counseling. The collaborative efforts of government and non-government organizations have made a strong move towards the inclusive education. Thus, variety of options are kept open for children with disabilities, which range from special education to general schooling and professional skill development programs. How far have these initiatives been successful in providing appropriate education for the children with disabilities? This section examines the educational status of persons with disabilities across social groups in terms of literacy rate, level of education, pattern and causes of non-enrolment and professional education/training.

Illiteracy and Levels of Education

The data reveals that more than one half of persons with disabilities are not literate (Table 4). The proportion of non-literate persons with disabilities is highest among STs (69 per cent) followed by Dalits (64 per cent). These are distinctively higher than the proportion of non-literates among higher caste groups. Although, it is considerably higher in the rural than urban areas, the rural-urban gap on illiteracy rate is greater for upper caste groups (Graph 1). Moreover, the differences between social groups are relatively smaller in the urban areas. The possible reason may be that upper caste groups in the urban areas perhaps prefer to keep their children with disabilities at home rather than sending them to general schools or other schools run by NGOs as a matter of either 'over protection' of children

or 'self-protection' from social stigma. Families perhaps feel the stigma of having an imperfect child and cut-off themselves from their neighbours and friends as a way of circumvent humiliation. With fewer special schools, parents perhaps do not see much return from general school system for their children. But for the parents of Dalit and ST communities, general schooling facilities can serve a greater purpose by taking care of their children with disabilities and reducing their burden.

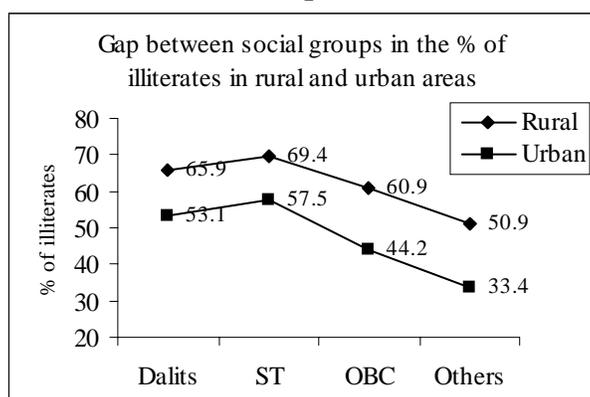
Table 4: Educational Status of Persons with Disabilities across Social Groups

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

Among persons with disabilities, only about 12 per cent complete primary level of education. Less than 5 per cent have secondary education and about 1 per cent are graduates. There are no remarkable differences between social groups on the percentage of children being not able to complete primary level. But relatively higher percentage of children among upper caste completes primary level of education. After the primary education, distinctively higher percentage of children with disabilities among upper caste group completes higher levels of education. The gap between Dalits/STs and other social groups becomes wider as they move on to higher levels of education. Among upper caste group those who complete secondary level are about three times higher than Dalits. Less than 3 per cent persons with disabilities among Dalits are secondary graduates against about 7 per cent and 4 per cent among general and other

backward castes respectively. Less than 1 per cent of persons with disabilities among Dalits and STs are graduates against about 3 per cent among upper castes. Thus, a large proportion of Dalits with disabilities lack basic skills that would help them in realising better livelihood. The situation is more depressing in the rural areas and among women.

Graph 1

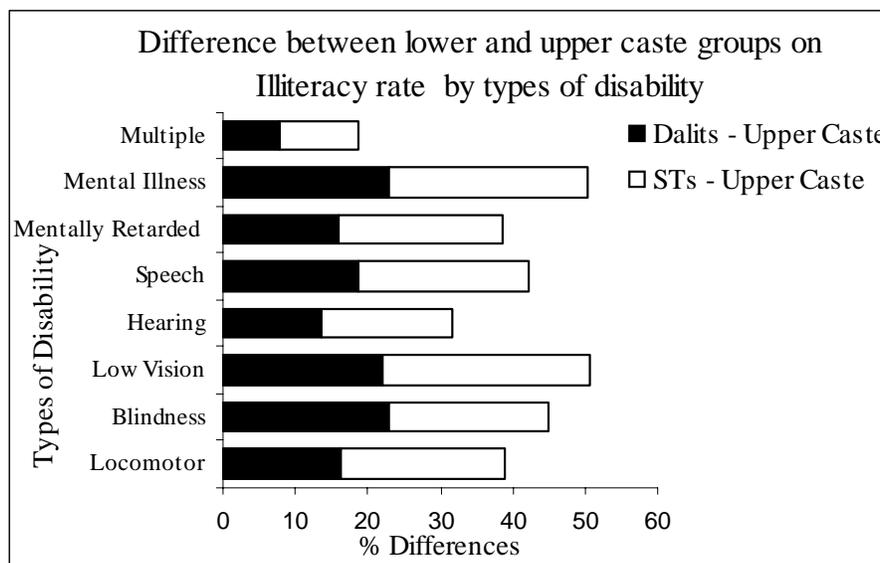


The rural-urban difference on 'education below primary level' is minimal for all social groups (Table A-1, Annexure). But it has a positive relationship with the level of education. This is found highly true for Dalits and STs. The percentage of Dalits with disabilities in the urban areas having secondary education is about two times higher than their counterparts in the rural areas and about three times higher at the levels of higher secondary and graduation. The gender differences on the educational status of the persons with disabilities (Table A-2, Annexure) clearly indicate the disadvantaged position among females across social groups.

The educational status of persons with different types of disability reveals that the illiteracy rate is considerably lower among persons with speech and hearing disabilities. Expectedly, significantly higher percentage of persons with speech and hearing disabilities completes primary education. Among the persons with visual disability those with low vision have higher chances of completing primary education than those who are completely blind. The illiteracy rates of persons with different types of disability are considerably higher among Dalits than upper caste groups. The differences range between 14 per cent and 23 per cent, the highest difference is for

persons with mental (illness) and visual (blindness) disabilities and the lowest for hearing disability. The differences between STs and upper caste on the illiteracy rates of different types of disability are even higher than the differences between Dalits and upper caste group (Graph 2).

Graph 2



The percentage of persons with locomotor, visual and mental disabilities among Dalits completing primary education is about one-half of their disabled counterparts among upper caste group. The notable aspect is that the persons with hearing and speech disabilities across social groups have a comparable educational status with respect to primary education.

Pattern of Non-enrolment

The reasons for non-enrolment among children with disabilities reveal that significantly higher percentage of children do not enroll due to many economic reasons (Table 5). A substantial proportion of children also do not enroll due to 'disability condition' and 'school distance'. About one-third of the respondents, however, report 'other reasons' for non-enrolment. This suggests that many factors coupled with disability condition play significant role in the schooling of children with disabilities. However, the factors like schooling cost, household activities/chores and parents' interest appear to be less important.

Table 5: Reasons for Non-enrolment of persons with Disabilities across Social Groups

Reasons	Dalits	ST	OBC	Others	Total
Due to disability	7.2	12.1	14.1	23.8	15.5
School not known	0.0	0.0	0.1	1.8	0.7
School far away	13.6	38.2	14.8	11.4	14.3
Expensive	1.3	0.0	8.0	5.8	5.0
Parents not interested	3.6	17.2	11.7	7.7	8.4
For participation in household economic activity	0.0	4.0	1.8	2.6	1.7
For other economic reasons	54.3	8.2	5.6	9.7	20.5
For attending domestic chores	1.4	0.0	0.0	0.9	0.7
Other reasons	18.6	20.3	40.2	36.4	32.0

Reasons for non-enrolment across social groups show significant variations. Considerably higher percentage of children with disabilities among Dalits (54 per cent) as compared to other social groups report 'other economic reasons' to be responsible for their non-enrolment. School distance remains a prominent reason (38 per cent) for ST children with disabilities. This is followed by lack of parents' interest (17 per cent), which of course may be interwoven with school distance. For upper caste groups, 'disability condition' itself is held highly responsible for children's non-enrolment. However, 'school distance' appears to be an important reason for the non-enrolment of children with disabilities across all social groups. It is observed that significantly higher percentage of respondents among upper caste groups as against Dalits and STs cannot specify the reasons for non-enrolment. It may be because of social disgrace attached to disability. The disability condition of a member perhaps has a severe mental repercussion for the parents of upper caste groups.

Vocational Education and Training

The importance of vocational courses has increasingly been recognised for the rehabilitation of persons with disabilities. Vocational rehabilitation centres under the guidance of Rehabilitation Council of India have been active in providing vocational training to persons with disabilities and orienting them towards employment in the organized sector. Besides, many non-governmental organisations are also involved in developing knowledge and skills among persons with disabilities for their self-employment.

Despite various initiatives, the percentage of persons with disabilities attending vocational training shows a depressing picture. It ranges from 0.7 per cent to 2.5 per cent for different types of disability, the highest percentage being persons with locomotor disability. Mishra and Gupta (2006) remark that, “the poor utilization of the interventions may be due to the lack of awareness about the facilities”. But the fact is that with about 5 per cent of persons with disabilities having access to secondary education, this is more likely to restrict the opportunity for vocational training. As seen, less than 1 per cent across social groups complete engineering course (Table 6). The proportion of persons with disabilities who continue engineering courses are considerably higher among upper caste groups than Dalits and STs. Majority of them are persons with locomotor, visual and speech disabilities.

Table 6: Percentage of Persons with Disabilities Completing Engineering and Non-Engineering Course by Social Groups and Types of Disability

Social Group	Formal Course completed	Locomotor	Visual	Hearing	Speech	Mental	Total
Dalits	Engineering	0.1	0.0	0.0	0.4	0.0	0.3
	Non-engineering	0.9	1.5	0.9	0.1	0.0	1.2
ST	Engineering	0.0	0.2	0.0	0.0	0.0	0.2
	Non-engineering	0.4	0.3	0.0	0.0	0.2	0.7
OBC	Engineering	0.3	0.6	0.2	0.0	0.0	0.4
	Non-engineering	0.9	1.2	1.5	1.2	0.5	1.4
Others	Engineering	0.5	0.4	0.3	0.8	0.1	0.6
	Non-engineering	1.1	0.6	1.6	0.8	1.3	1.7

The data clearly suggests that professional disciplines are more ‘closed’ to persons with disabilities. Those who receive it, considerably higher proportion of them are from upper caste groups. A range of practical and perceptual barriers may be responsible for the lower participation in vocational and professional disciplines, having larger implications for the policies on vocational training as a potential source of enhancing the living conditions of the persons with disabilities.

2.3 Work Pattern

Engagement of persons with disabilities in economic activities has greater significance for the overall well-being of the household. As discussed in

the context of extent of disability, about 60 per cent of persons with disabilities can take self-care without aid/appliance and about 17 per cent are capable of taking self-care with aid/appliance. Accordingly, given opportunities can enable a larger section of persons with disabilities to do some productive activities. The work status of persons with disabilities does not reveal an encouraging picture (Table 7). Only about one-fourth of the persons with disabilities are engaged in some sort of economic activities. A substantial proportion of them either attend domestic duties or are engaged as unpaid worker in household enterprises. Only 3 per cent work as salaried/wage employees, leaving many others as casual wage labourers.

Table 7: Work/Activity Status of Persons with Disabilities across Social Groups

Work/Activity Status	Dalits	ST	OBC	Others	Total
Work in households enterprise (self-employed): Own account worker	7.2	8.4	10.2	11.2	9.7
Employer	0.1	0.1	0.3	0.5	0.3
Unpaid family worker in households enterprise	2.5	7.0	4.6	4.6	4.3
Work as salaried/wage employee	2.4	1.8	2.7	3.9	2.9
Casual wage labour: in public work	0.2	0.1	0.1	0.0	0.1
Casual wage labour in other work	12.2	11.0	6.6	4.7	7.6
Seeking and/or available for work	0.9	0.3	0.6	0.8	0.7
Attend educational institution	14.8	12.5	14.1	13.5	13.9
Attend domestic duties only	9.0	8.1	10.2	11.0	10.0
Attend domestic duties	2.7	3.2	2.5	2.2	2.5
Rentiers, pensionner etc.	1.4	1.4	1.8	2.5	1.9
Not able to work due to disability	32.1	28.6	31.0	30.6	31.0
Beggars, prostitutes etc	0.8	0.8	0.5	0.5	0.6
Others	13.7	16.7	14.7	13.8	14.4

The work status of the persons with disabilities across social groups reveals that those who are engaged in household enterprises (self-employed), is substantially lower among Dalits and STs as compared to other social groups. While about 5 per cent of persons with disabilities among upper caste groups provide some sort of help in household enterprises (work as

unpaid worker), among Dalits, about one-half of this, do so. Distinctively higher percentage of STs with disabilities are engaged in similar kind of unpaid work. If we consider the proportion of persons with disabilities involved in household enterprises either as self-employed and unpaid worker, it is clear that considerably lower percentage of Dalits with disabilities contribute to family economy. The percentage of persons with disabilities who work as salaried/wage employee is considerably higher among upper caste groups than Dalits and STs. On the other hand, among Dalits and STs with disabilities, considerably higher percentage (about 12 per cent and 11 per cent respectively) work as casual wage labourers as compared to OBC (7 per cent) and upper caste group (5 per cent). Relatively higher percentage of them are also engaged in socially uninvited work like begging and prostitution.

Area-wise variations in the work status of persons with disabilities across social groups (Table A-3, Annexure) indicate some definite pattern. With regard to wage employment and self-employment, Dalits with disabilities especially in the rural areas are in more disadvantaged positions. Persons with disabilities among STs have better opportunities for working in household enterprises in the rural areas than their Dalit counterparts. A majority of persons with disabilities who work as casual wage labourers in public work in the urban areas are Dalits. But in the rural areas, higher percentage of Dalits with disabilities are engaged in casual wage labour in work other than public work. The gender-specific differences on activity status of persons with disabilities reveal that significantly higher percentage of males than females in all social groups are engaged in different forms of economic activities (Table A-4, Annexure). On the other hand, significantly higher percentage of females with disabilities attend household duties. Interestingly, the proportion of females who are engaged in economic activities is relatively higher in the rural than urban areas.

2.4 Social Conditions

As educational and economic status of persons with disabilities across social groups have a direct link with their social status, which in turn have significant implications for many of the welfare programs, an attempt is made to examine the social status of the persons with disabilities across social groups in terms of marital status, living arrangements and living conditions.

Marital Status

Marital status of the individuals happens to be an important condition for the social and psychological well-being. It not only fulfills need for belongingness but also provides support mechanism and in turn, becomes a source of social identity and security. On the other hand, unmarried status of a normal adult is often attached to social stigma. Because of functional limitations, persons with disabilities are very often perceived 'not entitled to marry'. As a result, many get married only under certain circumstances and conditions. This perception corroborates with the data which indicates that a little less than one-half of the adults with disabilities are never married. The gender difference is quite significant. Surprisingly lower percentage of females than males with disabilities are never married (Graph 3). It is reported that women with disabilities are less likely to get married even within the disabled group, because of cultural constructions of attractiveness that go against women with disabilities when they seek partners (Mohit et al, 2006). But this does not hold true for males with disabilities. Considering marriage as a valued role for females, they are likely to suffer the negative emotional consequences.

Graph 3



The marital status of persons with disabilities across social groups however does not show any significant gender differences. But a little higher percentage of males and females with disabilities in upper caste group remain unmarried. Disability-specific findings reveal that highest percentage of males and females with mental disabilities, followed by hearing disability across all social groups are never married.

Although relatively higher percentage of females than males with disabilities get married, the unsettling feature is that about 30 per cent of them are either widowed, divorced or separated as against 8 per cent of their male

counterparts (Graph 3). It is reported that the rate of widowhood is about four times higher for the married disabled females than general females (The World Bank Report, 2007). This may be because many females with disabilities do get married under 'compromised/compensated arrangement' or 'a lucrative matrimonial deal' such as for the sake of economic advantages or 'high offer' (benefits of cash and kind) or any kind of opportunity under specific plan (*Yojna*) with noble intent like the *Mukhya Mantri Kanyadaan Yojna* (Chief Minister's Girls Marriage Scheme) in the State of Madhya Pradesh. Because of this type of conditional marriage, most of them are more likely to be deserted by their husbands later. Disabled girls are usually married to older men, leading to a higher incidence of widowhood (The World Bank Report, 2007).

Living Arrangements

With the fact that substantially higher percentage of persons with disabilities as compared to normal people are vulnerable to a solitary life because of breakdown of marriage and other unfortunate happenings, the living arrangement can be in varied forms for the sake of security and survival. It is found that 3 per cent of persons with disabilities live alone and only 5 per cent live with their spouse (Table 8). Significantly higher percentage of persons with disabilities live with spouse in the rural areas in comparison to the urban areas. While about 30 per cent live with spouse and other family members, considerably higher parentage (41 per cent) live with parents without spouse. Even sizeable proportion (13 per cent) lives with children. This clearly indicates how persons with disabilities even after growing up, still remain a burden for parents. On the other hand, it also reflects the strong family bondage and degree of family support to the persons with disabilities despite living with adversities.

Table 8: Disabled Persons with Living Arrangements across Social Groups

Living Arrangements	Dalits	ST	OBC	Others
Alone	2.9	3.5	3.1	3.0
With Spouse only	6.2	5.5	5.2	4.2
With Spouse and other members	29.6	27.8	30.0	32.3
Without spouse but with parents	40.9	42.1	41.8	39.4
Children	13.3	12.8	12.6	12.0
Other relatives	6.5	7.6	6.7	8.0
Non-relatives	0.6	0.6	0.7	1.1

The living arrangement across social groups reveals that although social groups do not vary significantly, yet relatively higher percentage of Dalits with disabilities live with spouse as compared to other social groups. Similarly, a little higher percentage of Dalits with disabilities live with parents and children as compared to upper caste group, in particular. On the contrary, relatively higher percentage of disabled persons from upper caste group live with spouse and other members, relatives and also non-relatives. It can be ascertained that for Dalits with disabilities, the persons who matter in the 'cycle of caring and support' are spouse and members with blood relationships; although they receive support from other relatives as well.

Living Conditions

As discussed earlier, persons with disabilities constitute a marginalized section in the spheres of education, employment and other basic facilities. The cumulative effect of low education and employment in particular would have larger impact on living standards of households with disabled persons. Moreover, lack of strong public support system would make them feel more helplessness. Inferentially, the situation can worsen when households face various forms of social discrimination and deprivation.

In view of the significantly lower educational and employment status of Dalits with disabilities, it is more likely that Dalit households with disabled member(s) will face poor living conditions. Disability is likely to accentuate poverty when limited family resources are extended to meet extra costs of additional support for member(s) with disabilities. As Amartya Sen uses the term "conversion handicap" whereby persons with disabilities derive a lower level of welfare from a given level of income than the rest of the population, due to additional costs incurred in converting income into well-being. Mohit et al. (2006) report "the direct cost of treatment and aid/appliance in an average involves an income of two months of family". Sometimes, adult members in the households spend time for taking caring of disabled member. Thus, the contribution of persons with disabilities towards the family income often can go in negative direction, having an impact on overall household conditions. Dalits with long run deprivation because of lower rate of ownership of key assets and engagement in low paid activities; the presence of disabled member(s) in household is most likely to put them into poor living conditions. Dalit households with persons

with disabilities are thus more likely to fall into the vicious cycle of 'disability and poverty'.

3. Access of Persons with Disabilities to Support Services

Various programs are initiated by government and non-governmental organizations for early identification, intervention, prevention and rehabilitation of the persons with disabilities. The support services are mainly provided with regard to health and nutrition, education and aid/appliance. How far persons with disabilities belonging to different social groups have access to different aid-help? This section examines the access of persons with disabilities across social groups to various support services in terms of pre-school interventions and receipt of aid-help from different sources.

Pre-school Interventions

As a measure to prepare children with disabilities for formal schooling, pre-school interventions are provided at various non-formal centres. It is seen that this is available to children with disabilities at limited scale. Only about 13 per cent disabled children receive pre-school intervention. Expectedly higher proportion of children with disabilities in the urban (20 per cent) than rural (11 per cent) areas receive such interventions but there is no noticeable gender difference. Considerably higher proportion of children among general caste population (18 per cent) receive such interventions than Dalits (11 per cent) and STs (12 per cent). Among children with different types of disability, highest percentage of children with blindness (23 per cent) attend pre-school intervention, followed by speech (16 per cent), hearing (14 per cent), locomotor (13 per cent) and mental (7 per cent) disabilities.

Access to Aid-Help

According to the NSS data, of the total persons with disabilities, only about 11 per cent receive some sort of aid-help. A little higher percentage of STs with disabilities does not receive benefits. Persons with disabilities across social groups however differ in their access to specific support services. Although only about 1 per cent of disabled persons receive help from government for education (Table 9), the percentage of beneficiaries among Dalits and STs is about one-half of upper caste group. This is despite the special focus on inclusive education, as a major step to an inclusive society.

A negligible percentage of disabled persons from all social groups receive help for vocational training.

Like government assistance for education, the percentage of Dalits with disabilities receiving help in government/semi-government jobs is about one-half of persons with disabilities belonging to upper caste group. Among STs those who receive some kind of aid-help other than government source is significantly lower than other social groups; despite the fact that larger initiatives for the development of tribals are taken through non-governmental mechanisms. The only area where a marginally higher percentage of Dalits with disabilities receive benefits is through receipt of aid/appliance, but STs with disabilities experience more deprivation in this regard. The possible reason may be lack of awareness of and accessibility to such services.

Table 9: Percentage of Persons with Disabilities Receiving Different Types of Aid-Help across Social Groups

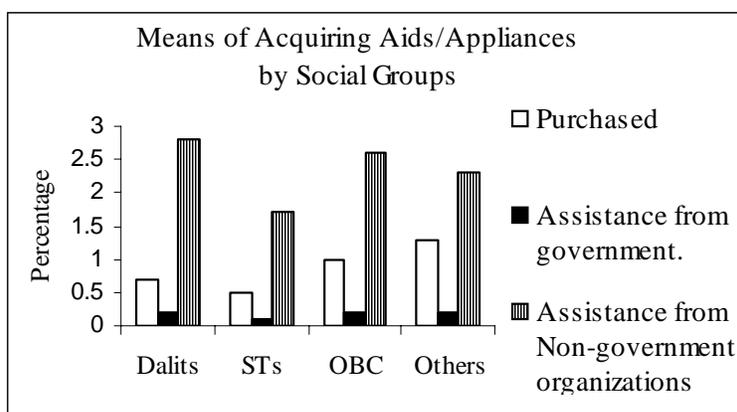
Aid-Help	Dalits	ST	OBC	Others	Total
From government for education	0.7	0.5	1.0	1.3	1.0
Vocational training	0.2	0.1	0.2	0.2	0.2
Aid/Appliance	2.8	1.8	2.6	2.3	2.5
Corrective surgery	0.4	0.4	0.6	0.5	0.5
Government/Semi-govt. job	0.2	0.6	0.3	0.4	0.3
Other Government aid/help	5.1	6.2	5.5	5.1	5.3
Any aid/help other than govt.	1.6	0.6	1.5	1.5	1.4
No (not received)	89.1	89.8	88.4	88.6	88.7

The data clearly suggests that so far aid-help is concerned, in several areas, Dalits with disabilities are in more deprived position than upper caste groups. They have not even received better services from non-governmental agencies. This copiously contradicts the agenda of 'equitable services for the disadvantaged sections'. This is further substantiated by the finding that considerably lower percentage of persons with disabilities in the rural areas receive aid-help especially in the areas of education, vocational training, corrective surgery and jobs (Table A- 5, Annexure). Government assistance for education and jobs is received by relatively higher percentage of STs with disabilities in the rural areas, may be due to tribal-specific plans. The gender-specific findings across social groups

(Table A- 6, Annexure) indicate that higher percentage of females than males with disabilities across all social groups do not receive aid-help, thus, they are doubly disadvantaged and are more vulnerable to live a desolated life.

As aid/appliance for persons with disabilities can be acquired by different means such as self purchasing, government assistance and non-government organizations; the relative importance of these means is examined with regard to social groups. It is found that non-government organizations have been prominent source of aid/appliance for all social groups (Graph 4). About one-third of the total persons with disabilities who are having aid/appliance, acquire it through self-purchasing; and expectedly, higher percentage are among upper caste groups. Although data shows less contribution of government agencies in acquiring aid/appliance, it may be noted that this may not be realistic as many of the aid/appliance provided directly by non-government organizations are government sponsored materials. However, the real concern is that many persons with disabilities even among Dalits and STs are made to purchase their own aid/appliance.

Graph 4



The reasons for not acquiring aid/appliance across social groups (Table-10) indicate that more than one half of persons with disability cannot acquire it due to higher expenses to be incurred. The response that 'aid/appliance have not been available to them' indicates an expectation from government to provide necessary materials. Interestingly, a substantial proportion of persons with disabilities across all social groups feel that aid and appliance may not ensure economic and personal independence.

Table 10: Percentage of Persons with Disabilities Reporting Reasons for not Acquiring Aid/ Appliance across Social Groups

Reasons	Dalits	ST	OBC	Others	Total
Not available	5.2	6.9	5.5	3.9	5.1
Expensive	57.6	48.7	49.9	51.0	51.7
Not necessary for economic independence	9.2	9.9	8.7	6.5	8.2
Not necessary for personal independence	8.8	11.7	12.5	14.0	12.2
Others	19.2	22.8	23.5	24.5	22.9

As a majority of persons with disabilities think of not acquiring aid and appliance because of costs it incurs; they are perhaps not aware of aid-help from government and other sources. This is found consistent with the findings that a substantial proportion of persons with disabilities do not use any aid and appliance for difficulty in maintenance and other unspecified reasons.

An over view of the findings related to socio-economic status of persons with disabilities across social groups may lead to believe that system has failed to maintain social safeguards of persons with disabilities in general and among socially disadvantaged sections like Dalits and STs in particular. With few exceptions, in many developmental indicators, Dalits with disabilities are deprived of opportunities to utilize their capacities to the full extent. The larger question that remains to be explored in further research is 'what factors that govern living conditions of Dalit households in the presence of disabled member?'

4. Conclusion and Policy Implications

The study of status of persons with disabilities across social groups leads to believe that there are definite interactive effects of caste and disability dimensions on the living conditions. The situation of persons with disabilities among lower caste groups provides critical dimension to social discrimination, deprivation and exclusion. The disadvantaged and vulnerable position of Dalits with disabilities suggests that policies and programs for the development of persons with disabilities have not been successful in providing social safeguards to such double disadvantaged group through special measures.

It is observed that the prevalence of disability is noticeably higher among Dalits as compared to upper caste groups. More specifically, the prevalence of physical disabilities (locomotor, visual, hearing and speech) is higher among Dalits, and both males and females are equally vulnerable to such disabilities. The proportion of young disabled persons who have disability either at birth or shortly after birth (i.e. between 0-14 years) is relatively higher among Dalits and STs than upper caste groups. This indicates how childhood period is critical for the occurrence of disability especially among socio-economically disadvantaged groups, thereby having greater implications for the intervention measures at the early stage of life.

Although a sizable proportion of persons with disabilities have blood relationships with parents, but majority acquire disability due to environmental factors. Inferentially, poor living conditions among lower caste groups can make them more vulnerable to disability. This is substantiated by specific causes which are highly responsible for disability across social groups. Among other factors, pneumonia, anemia and low level of nutrition cause higher percentage of disability among Dalits. Malnutrition and defective gene mutation are important factors to cause disabilities among STs. It suggests that although preventive measures to eradicate particular disease thought to be responsible for occurrence of disability has its significance, the recognition of more fundamental causes that perpetuate disability among specific sections of society is critical in planning any strategies. In this regard, it can be suggested that with the relative success of the Community Based Rehabilitation programs for the persons with disabilities in rural areas, these programs can be diversified to focus on group or area specific services to affect visible changes among disadvantaged groups. Moreover, the concerns of major knowledge gaps in the causes of various types of disability can have wider implications for the initiatives by various agencies in raising the awareness about disability.

The findings on the extent of disability clearly indicate that only small percentage of the persons with disabilities cannot function even with aid/appliance, thus, leaving a majority who 'can take care of self with and without aid/appliance.' The latter can perform productive work and manage their livelihood if they are provided with adequate opportunities for the development of skills to perform economic activities. Although there are no remarkable differences between social groups, relatively higher percentage of Dalits with disabilities especially in the rural areas are not

able to take self-care even with aid/appliance. This is corroborated with the finding that relatively higher percentage of persons with disabilities among Dalits than other social groups have severe form of disabilities, especially in case of visual and hearing disabilities. As this will have implications for the household conditions, identification of such Dalit households and providing focused intervention through multiple development programs can enable them to cope with such hardship.

Despite the recognition of importance of education for economic independence of persons with disabilities, a majority of them do not have access to school education. Even those who have access to formal schooling, only a smaller proportion of them complete primary education. Hence, the situation at the secondary and higher education levels becomes worse. Only about 5 per cent complete secondary education and a little higher than 2 per cent and 1 per cent complete higher secondary and graduation levels respectively. Although there are no significant differences between social groups up to primary level, the gap becomes wider at higher levels of education. Despite higher significance of vocational education and training for rehabilitation of persons with disabilities only about 2-3 per cent of persons with different types of disability receive any kind of vocational training, and majority of them are from upper caste groups. Higher education and professional disciplines thus appear to be more 'closed' to persons with disabilities in general and Dalits and STs with disabilities, in particular. Lack of access to secondary education and adequate awareness are likely to effect the utilization of vocational interventions. Moreover, the special facilities for the welfare of persons with disabilities in the form of pre-school intervention, provision of special schools and vocational training centres are largely being urban phenomena; the access to these facilities is restricted to few Dalits and STs with disabilities.

As disability conditions coupled with 'economic factors' and 'school distance' play significant role in the schooling of children with disabilities especially from socially disadvantaged sections, there appear many challenges in integrating these children in mainstream education and skills development programs. It is evident that 'among the persons with disabilities those who have higher education and vocational training have relatively better employment prospects' (World Bank Report, 2005). Hence, enhancing labour potential through education and vocational skills is critical for self-sustained livelihood of persons with disabilities. Consistent

with the lower educational status, the work participation of persons with disabilities appears quite depressing. Persons with disabilities have not been able to avail the minimum 3 per cent reservation in public sector. About three-fourth of the persons with disabilities are even out of economic activities. The benefits of the self-employment facilities have also not reached to a larger section of persons with disabilities. Another concern is that a sizable number of persons with disabilities adopt an easy way of living through deprived or uninvited work like begging and prostitution. The proportion of persons with disabilities among Dalits who are engaged in some sort of household economic activities and also salaried/wage labour are considerably lower than among other social groups. On the other hand, higher percentages of Dalits with disabilities work as casual wage labourers and also are engaged in the uninvited activities. The living conditions of Dalit households with disabled members because of lower work status is accentuated by lower land holdings, lower rates of ownership of key assets, relatively higher family size and additional cost of welfare measures for disabled members. The problem of engagement of Dalits with disabilities in productive work is, thus, complex one. It is not only 'non-working' but also 'working with little earning' and most importantly 'being engaged in uninvited work'.

The economic condition of persons with disabilities is directly or indirectly linked to other social status. A little less than one-half of adults with disabilities are never married. There are no significant differences between social groups but surprisingly, higher percentage of both males and females with disabilities among upper caste groups, remain unmarried. Although marriage rate is higher among females than males with disabilities, the married life of females has not been socially benefiting. About one-third of the married disabled females are widowed and divorced or separated. Living conditions clearly indicate that significantly higher percentage of adults with disabilities are vulnerable to solitary life. A substantial proportion live with parents without spouse and even a sizeable proportion live with their children. Among Dalits with disabilities, considerably higher percentage live with spouse, parents and children as compared to upper caste group. On the one hand, it may suggest how disabled members especially females in Dalit households remain a burden for parents even after growing up and being married off, and on the other hand, it may also reflect how family happens to be a strong support system for disabled persons in case of socially disadvantaged sections.

The issue of concern is that despite various measures for the rehabilitation of people with disabilities, a large majority of the disabled population do not have access to different aid-help. Among the social groups, relatively higher percentages of Dalits and STs with disabilities have not tried any aid/appliance or have not availed it. The reasons for this may be constraints on the affordability, non-availability from other sources and lack of awareness about services and sources. Dalits with disabilities are in more deprived position than upper caste groups so far government aid-help in several areas is concerned. Even, the proportion of STs with disabilities receiving any aid-help from non-governmental sources are significantly lower than other social groups.

Another issue of concern is that the proportion of persons with disabilities who have aid/appliance, about one third of them have it through self-purchasing. As the economic conditions do not allow many Dalits and STs with disabilities to go for self-purchasing, expectedly, the proportion is lower as compared to other social groups. This implies how persons with disabilities from lower caste groups are highly dependant on support mechanisms of government and non-government agencies, which in fact, have not been so effective to fulfill their requirements. Despite various service provisions to facilitate participation in mainstream society, the access to them has been lower among the Dalits and STs. Unless, it is ensured that the provisions benefit 'needy' people, the goal of achieving equitable society may be a distant goal.

Without underscoring the focus on many socially disadvantaged groups, from a humanistic point of view, Dalits with disabilities deserve special consideration as they face different forms of social discrimination and exclusion. Even if the concerns for this type of double disadvantaged groups have not been categorically mentioned in national declaration of 'development for all', with an acknowledgement of the broader concern for inclusion and empowerment, there is need to have special provisions for this marginalized group. Special considerations need to be given to such people who are likely to languish behind because of deprivation at multiple spheres. It could be asserted that with a multi-directional social support system, Dalits with disabilities and other double disadvantaged sections could be integrated within mainstream society.

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Annexure

Table A-1: Educational Status of Persons with Disabilities by Social Groups & Area

General Education	Dalits		ST		OBC		Others		Total	
	R	U	R	U	R	U	R	U	R	U
Not literate	65.9	53.1	69.4	57.5	60.9	44.2	50.9	33.4	60.2	41.7
Literate without formal schooling	1.2	1.4	1.7	.6	1.1	1.7	1.8	2.1	1.4	1.8
Literate but below primary	11.1	12.0	10.9	10.2	11.9	13.8	11.1	12.3	11.4	12.8
Primary	10.4	12.6	8.7	12.5	10.7	14.3	12.6	13.2	11.0	13.5
Middle	7.6	11.9	5.9	8.6	9.1	12.4	12.8	15.0	9.4	13.3
Secondary	2.2	4.2	1.8	4.1	3.6	6.5	5.9	10.2	3.7	7.5
Higher secondary	.9	3.0	1.0	2.6	1.7	3.6	2.9	5.8	1.8	4.4
Diploma /certificate course	.1	.2	.1	1.0	.2	.6	.4	.8	.2	.6
Graduate	.5	1.3	.3	2.6	.7	2.2	1.3	5.4	.7	3.4
Post graduate and above	.1	.3	.1	.3	.2	.7	.3	1.8	.2	1.1

Table A-2: Educational Status of Persons with Disabilities by Social Groups & Gender

General Education	Dalits		ST		OBC		Others		Total	
	M	F	M	F	M	F	M	F	M	F
Not literate	54.6	76.3	60.1	79.8	47.4	72.2	35.8	59.9	46.2	70.1
Literate without schooling	1.4	.9	1.9	1.2	1.5	.8	1.9	1.9	1.7	1.1
Literate but below primary	13.4	8.3	12.6	8.2	14.4	9.3	12.3	10.3	13.5	9.2
Primary	13.6	6.8	11.3	6.1	13.8	8.0	14.3	10.6	13.8	8.4
Middle	10.5	5.2	8.3	3.1	12.5	5.7	16.8	8.4	13.1	6.2
Secondary	3.5	1.2	2.9	.8	5.5	2.2	8.9	4.8	5.9	2.6
Higher secondary	1.7	.8	1.7	.5	2.7	1.1	5.0	2.0	3.1	1.3
Diploma /certificate course	.2	.1	.3	.0	.4	.2	.7	.3	.4	.2
Graduate	.8	.3	.7	.3	1.3	.5	3.3	1.4	1.8	.7
Post graduate and above	.2	.1	.1	.1	.4	.2	1.0	.4	.5	.2

Table A-3: Work/Activity Status of Persons with Disabilities by Social Groups & Area

Work/ Activity Status	Dalits		ST		OBC		Others		Total	
	R	U	R	U	R	U	R	U	R	U
Worked in households Enterprise (self-employed)	6.7	7.5	8.1	4.6	9.8	8.5	11.5	8.3	10.0	8.9
Worked as helper in households Enterprise (Unpaid Worker)	2.8	1.1	7.9	0.6	5.2	2.7	5.7	1.9	5.0	2.1
Salaried/wage employee	1.2	6.7	1.4	5.3	1.7	6.0	2.1	7.2	1.8	7.1
Worked as casual wage labour in public work	0.1	0.7	0.1	0.0	0.1	0.0	0.0	0.1	0.1	0.1
In other types of work	13.2	6.6	11.0	9.0	6.9	4.8	5.4	2.8	8.4	4.6
Attended domestic duties only	8.3	10.6	7.6	10.7	9.5	12.0	10.3	11.4	9.6	12.0
Domestic duties and engaged in free collection	3.0	1.3	3.1	0.8	2.9	1.2	2.7	1.0	2.9	1.2
Unable to work due to disability	33.6	30.9	28.8	35.0	32.9	30.6	32.5	31.4	31.4	29.6
Beggars, prostitutes etc	0.5	1.9	0.7	1.3	0.4	1.3	0.4	0.7	0.5	.90

Table A-4: Work/Activity Status of Persons with Disabilities by Social Groups & Gender

Work/ Activity Status	Dalits		ST		OBC		Others		Total	
	M	F	M	F	M	F	M	F	M	F
Worked in households Enterprise (self-employed)	11.1	1.7	12.7	3.0	15.7	2.2	17.3	2.3	15.0	2.20
Worked as helper in households enterprise (Unpaid Worker)	3.3	1.3	7.5	6.3	6.0	2.6	6.2	2.2	5.6	2.5
Salaried/wage employee	3.5	0.7	2.9	0.5	3.7	1.4	5.6	1.5	4.2	1.2
Worked as casual wage labour in public work	0.2	0.1	0.2	0.1	0.1	0.0	0.1	0.0	0.1	0.0
In other types of work	16.2	6.3	13.0	8.5	8.7	3.5	6.6	2.0	9.9	4.1
Attended domestic duties only	1.0	20.5	0.8	17.1	0.6	24.1	0.7	26.3	0.7	23.5
Domestic duties and engaged in free collection	0.5	6.0	0.9	6.1	0.6	5.3	0.4	5.0	0.5	5.4
Unable to work due to disability	32.2	31.9	28.2	29.1	31.3	30.7	30.9	30.1	31.2	30.7
Beggars, prostitutes etc	0.8	0.7	0.9	0.7	0.6	0.4	0.6	0.3	0.7	0.4

Table A-5: Percentage of Persons with Disabilities Who Receive Different Types of Aid-Help by Social Groups & Area

Aid-Help	Dalits		ST		OBC		Others	
	R	U	R	U	R	U	R	U
From government for education	0.5	1.7	0.5	0.2	0.7	1.7	0.8	2.8
Vocational training	0.1	0.5	0.1	0.0	0.1	0.4	0.2	0.4
Aid/Appliance	2.8	2.6	1.7	1.4	2.6	2.7	2.2	2.3
Corrective surgery	0.3	0.6	0.3	0.5	0.5	0.9	0.4	0.8
Govt./Semi-govt. job	0.2	0.3	0.6	0.1	0.2	0.6	0.3	0.6
Other govt. aid/help	5.2	5.3	6.1	10.5	5.6	6.3	5.4	5.3
Any aid/help other than govt.	1.1	4.1	0.6	1.4	1.2	2.8	1.1	2.7
No (not received)	89.8	84.9	90.1	85.8	89.1	84.5	89.7	85.1

Table A-6: Percentage of Persons with Disabilities Who Receive Different Types of Aid-Help by Social Groups & Gender

Aid-Help	SC		ST		OBC		Others	
	M	F	M	F	M	F	M	F
From government for education	0.7	0.8	0.7	0.2	1.1	0.7	1.1	1.6
Vocational training	0.2	0.1	0.1	0.0	0.2	0.2	0.2	0.3
Aid/Appliance	2.8	2.8	2.1	1.4	2.8	2.4	2.5	1.9
Corrective surgery	0.4	0.4	0.4	0.4	0.6	0.6	0.5	0.6
Govt./Semi-govt. job	0.3	0.1	0.8	0.4	0.3	0.3	0.6	0.2
Other govt. aid/help	4.9	5.2	7.4	4.8	5.5	5.6	5.3	4.9
Any aid/help other than govt.	1.7	1.3	0.6	0.7	1.6	1.3	1.7	1.3
No (not received)	88.9	89.5	87.9	92.2	88.0	89.0	88.1	89.3

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