Resisting Homogenisation and Recognising Power Dynamics: An Intersectional and Decolonial Approach to Discussing the Marginalisation of Disabled Women in 'Low-Income' Countries

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Within the related fields of international development, sociology and social policy, the contention that disabled women in low-income countries (LICs) are the most marginalised demographic is extremely common and widely accepted. This is with good reason, yet the inclusion of intersectional and decolonial approaches within the related literature is surprisingly sparse. Instead, discussions often overgeneralise disabled women as a homogenous group in LICs, failing to recognise other aspects of identity, differing impairments, and therefore different experiences and barriers. This paper discusses and analyses the nuances behind these discussions, challenging the generalisation of disabled women as a monolith in LICs within the related literature. It also subsequently confronts the questionable use of the term 'low-income' itself, as commonly used in the literature and related debates, due to the power dynamics and history behind it. This paper firstly introduces key context and relevant terminology, before discussing the importance of recognising other aspects of identity, such as socioeconomic status, citizenship status, and sexuality in addressing the marginalisation of disabled women. It also discusses the importance of intersectional and, towards the end of the paper, decolonial approaches when exploring disability, including the contextual history and emergence of countries as low-income. Lastly, considering the above, this paper provides recommendations on how to best address the marginalisation of disabled women in low-income countries.

Introduction

Approximately 80% of the world's disabled population are reported to live within the 'Global South' (World Health Organization, 2023), which is also where most low income countries (LICs) are situated. This is partially explained by a related cyclic link between poverty and impairment, resulting in disablement (See for example, Joseph Rowntree Foundation, 2022). This is also often perpetuated due to social exclusion enforced by conflict and a lack of corresponding funds and services for disabled people, resulting in either a lack of support for existing impairments or the creation of new ones (Parnes et al, 2009; Banks et al., 2017). Three quarters of disabled people within the 'Global South' region are women (United Nations, 2017). Importantly, "disability is not a gender-neutral experience" (CBM, 2019, p. 4), and it is undeniable that empirically and statistically disabled women in LICs are extremely marginalised. Disabled women are consistently reported to be the most disadvantaged - in comparison to disabled men - due to differing experiences of community and health services, law enforcement and employment, gender based violence, and education (Human Rights Watch

(HRW), 2012; CBM, 2018; Naami, 2015). Consequently, international organisations consistently and importantly convey the need to address this two-fold discrimination related to being a woman and disabled via humanitarian programmes, yet often fail to adopt further sufficient intersectional - and decolonial - approaches. At the time of writing - in 2023 - related discussions, perspectives, and literature often generalise disabled women as a homogenous group in LICs, failing to recognise other aspects of identity, differing impairments, and therefore different experiences and barriers. This paper assesses the common contention that 'disabled women in low income countries are one of the most marginalised groups in the world', arguing that nuances and context behind this overly simplified perspective must be discussed and recognised for marginalisation to be sufficiently addressed.

To argue the above points, this paper firstly examines socioeconomic status, sexual identity and citizenship status in relation to disability and marginalisation to highlight the importance of recognising other aspects of identity alongside disability. These aspects of identity are not intended to be an exhaustive list, but are

instead used to highlight the cruciality of an intersectional approach in related discussions. This leads to discussions of the necessity of recognising the range of different impairments and differences in how they are culturally conceptualised as a foundation to tackle the marginalisation of disabled women. This paper then points to a need for intersectionality and decolonial approaches when considering related power dynamics within the international development field, exploring the construction and definition of a 'low-income country' and colonial discourse as stimulants of the enforcement of marginalisation and hierarchical relations. Lastly, considering the above, this paper will outline two recommendations for addressing marginalisation for all disabled women in such countries.

Terminology & Key Concepts

When considering marginalisation, language can be a powerful stimulant; it is therefore deeply important to define key terms, although definitions of low-income countries are examined in more depth in the final section. When referring to 'disabled women', this paper is referring to women with impairments who are dis-abled by implicit and explicit societal barriers as partially in line with the social model as developed by Oliver (2004; 2013; 1996). However, this paper does not fully accept the social model due to its propensity to ignore discussions of differing impairments and their role in disability. In contrast, this paper defines impairments as relating to "the functional limitation within the individual caused by physical, mental or sensory impairment" (Disabled Peoples International, quoted in Oliver, 2013, p.4). Marginalisation, originally coined by Robert Park (1928), generally refers to individuals who are often excluded in various ways from 'mainstream' society, as their needs are ignored and pushed to the periphery away from the 'centre' (Robards et al, 2020). Intersectionality, as key throughout this paper, was coined by Crenshaw (1991), who stated that the examination of different aspects of identity was necessary in "mediating the tension between assertions of multiple identity and the ongoing necessity of group politics" (p. 1296). Intersectionality therefore recognises that multiple barriers relating to intersecting aspects of identity can result in a combined higher level of experienced discrimination, in comparison to when discrimination is experienced as based on a singular aspect of identity (Crenshaw, 1991). This paper also discusses the importance of a decolonial approach towards the end of this paper. This refers to the need to challenge and dismantle the ongoing effects of colonial processes, including relating to knowledge, institutions and systems tailored to the hegemony of the 'West'. An intersectional and decolonial approach is vital for the exploration of the simplistic perspective that this paper addresses.

The Importance of Recognising Identity as Multifaceted: Socio-economic Status, Sexuality, and Citizenship Status

As powerfully argued by prominent professor Erevelles (2011), disability should be "the ideological linchpin utilized to (re)constitute social difference along the axes of race, gender, and sexuality in a dialectical relationship to the economic/social relations produced within the historical context of transnational capitalism" (p.6). Whilst this paper examines the latter part of the quote in upcoming sections, socio-economic status and class are therefore evidently foundational to explore within intersectional approaches. The quote also portrays that class is imperative to explore regarding discussions of differing economies, as inherently linked to

constructions of disability in societal contexts.

Whilst sufficient intersectional studies on experiences of marginalisation regarding differing socioeconomic status and disability within low-income countries are severely limited, the importance of this is particularly highlighted via other relevant research related to countries such as Uganda. For instance, Vorhölter's (2019) seminal work showed that mental health services in the capital, Kampala, were mainly catered to and accessed by upper middle class individuals, arguably portraying differing levels of ability to provide support based on socioeconomic status. This suggests that multiple aspects of identity alongside gender must be considered when considering how to challenge barriers causing marginalisation, such as access to healthcare, in various societies.

Moreover, Okello (2023) has pointed to the fact that both individual and community based aspects are imperative to consider regarding healthcare use and accessibility, finding that utilisation "was uneven for people of different communities and social class" (p.1). When considering that gender is a key indicator of the likelihood of unemployment and less educational opportunities in Uganda (United Nations Women, c2023b; Odaga, 2020), this must be explored together when assessing levels of marginalisation, as disabled women will not all experience the same level of marginalisation due to differing socioeconomic status. Therefore, intersectional nuances must be highlighted in relation to the overarching contention that this paper addresses.

Analysis of other key aspects of identity, such as sexuality, are also vital to recognise when exploring the different needs of disabled women and related marginalisation. In general, as highlighted by an extensive review from Carew et al (2017), sexuality and disability in the context of low and middle income countries are not extensively studied, perhaps related to the trend of anti-LGBTQIA+ legislation within some of these countries hindering research - a trend which is also worryingly and increasingly present across multiple countries around the world. In contrast, experiences of sexuality and gender based discrimination is more widely researched in middle and upper income countries (Pike et al, 2023). This is despite the fact that levels of economic development and inclusion of LGB individuals have been found to be mutually reinforcing, where higher levels of economic development positively correlate with wider sexuality based inclusion (Badgett et al, 2019), supporting Erevelles' (2011) above quote. Yet, organisations such as Human Rights Watch (2021a) have reported that sexual orientation based marginalisation is deeply common in countries such as Afghanistan, Uganda, Sierra Leone and Sudan. Whilst countries such as Uganda must be recognised in its previous developments in increasing female representation and empowerment in addition to furthering disability protection via policy and legislation (Abimanyi-Ochom & Mannan, 2014), this contrasts with the country also recently upholding further marginalising bills targeted towards those who are not heterosexual. This has included the enforcement and development of the 2023 Anti-Homosexuality Act, which has been linked to human rights violations and extreme violence (HRW, 2021b). In this context, addressing the marginalisation of disabled women whilst ignoring other aspects of identity and subsequent discriminatory barriers has the power to entrench other forms of oppression. Therefore, to generalise that 'disabled women in low income countries are one of the most marginalised groups in the world' without recognition of further nuances within such discussions is deeply misinformed and

damaging.

Another key intersection relates to forced displacement and citizenship status, as low - and middle income - countries hold 74% of the world's refugees (UNHCR, 2022). At the time of writing, discussions around the marginalisation of disabled women in LICs often fail to recognise that disabled women in low income countries do not experience the same levels of protection and social inclusion, as these also differ depending on citizenship status. As highlighted by the foundational work of Morris (2005), participation in civil society for disabled citizens is already limited via social exclusion; research conducted in countries such as Sierra Leone have corroborated this, stating that lack of assistive technology is a key barrier (Austin et al, 2021). This also includes limited labour market access, which is relatively more extreme in low-income countries for disabled people and women (International Labour Organisation (ILO), 2019; ILO, 2023). This is evidently magnified, and three-fold for disabled people who have been forcibly displaced, and who do not have citizenship status in the relevant country, yet research on this in relation to low-income countries is currently limited.

Differing Impairments & and the Influence of Culture

An intersectional approach highlighting the importance of recognising different aspects of identity also relates to the necessity of recognising different impairments and their effects on the marginalisation of disabled women. Within the common perspective that this paper explores and provides nuance to, the implication is arguably that all disabled women in low income countries have the same impairments, or that differing impairments are not important. As powerfully asserted by Anastasiou & Kauffman (2013) on the homogenisation of impairments, "not all differences are created equal, and social justice is not found in responding to all differences as if they were equal, as if the remedy for one were surely the remedy for the other" (p. 446). In relation to low-income countries such as Sierra Leone, different impairments involve varying levels of stigma. For instance, mental health impairments are deeply stigmatised with poor governmental funding for treatment (Harris et al, 2020), whilst physical impairments such as amputation can involve complex notions of empowerment, symbolic history, and therefore relatively more support (Berghs, 2007). This is also particularly important to explore contextually regarding overlapping identities, which is exemplified by recent research relating to Afghanistan, where the United Nations have declared grave concerns for women's rights since the Taliban takeover in 2021 (OHCHR, 2023). Nasiri et al 's (2023) research has shown that certain demographics were more likely to experience impairments, such as those who were non-Pashtun, had lower levels of formal education, or were living in rural areas. Whilst surprising that Nasiri et al (2023) does not discuss the intersections between these and gender, they found that those with impairments related to cognition and communication experienced more difficulties or social barriers to political participation compared to those with other types of impairments. They also found that those with impairments relating to 'self care and life activities' experienced barriers to hospital care the most. Whilst Nasiri et al. (2023) do not define the specific impairments, instead categorising them into general themes, their research highlights the importance of an intersectional approach and recognition of differing experiences of marginalisation in relation to different impairments in low income countries.

When considering impairment, it is also necessary to examine culture as a factor in its conceptualisation, which can have a further impact on experienced marginalisation. An intersectional approach involving attention to cultural identity, which often overlaps with perceptions of the family (Rohwerder, 2018), is paramount to address marginalisation of disabled women in low-income countries effectively. Whilst there is a tendency to overgeneralise and suggest all impairments result in disability and thus marginalisation and stigma, it is important to emphasise culturally varying (and individual) attitudes to impairment. This was highlighted by Rohwerder's (2018) extensive review on attitudes and stigma of disability. For instance, she points out that in Tanzania, which at the time of their research was a low income country, the Chagga people view those with physical impairments as alleviators from harmful spirits (Mostert, 2016). As prolific filmmaker and photographer Phil Borges (2013) has also alluded to, the perception that all 'non-Western' countries have a damaging view of impairment is misinformed as this is often linked to different perceptions of spirituality, and this type of discourse must thus contain more nuance. Therefore, when analysing who is most marginalised in low-income countries as a foundation to challenging marginalisation, culturally differing perceptions must be explored. Moreover, when tackling the marginalisation of disabled women in low-income countries it is imperative to adopt an intersectional approach in relation to both spirituality or religious identity, in addition to recognising beliefs within the culture itself.

Marginalisation & 'Low-Income'

When discussing dominant and overly generalised perceptions of the marginalisation of disabled women in LICs, underlying discourses must also be examined. Here, comprehensive and contextual intersectional and decolonial approaches must be applied to recognise power dynamics involved in such marginalisation. As previously critiqued by Grech & Soldatic (2017), intersectional and postcolonial approaches often fail to include discussions of disability as a potential aspect of identity. However, the need to examine related contexts was partially highlighted by the work of Erevelles (2011) within disability studies, as also referred to above, who stated that intersectional processes often function within "[...] a dialectical relationship to the economic/social relations produced within the historical context of transnational capitalism" (p.6). Transnational capitalism refers to "the sum of all the relations between economic agents" (Southerton, 2011, no pagination), which operates in a global economy that is underpinned by colonialism (Bhambra, 2020). Writing within the post structuralist tradition, Erevelles (2011) also highlighted the powerful effect of language and history. Regarding the contention that this paper explores, the use of the classification and terminology of 'low-income' - in addition to the discourse that surrounds it - is deeply harmful when considering means to address the marginalisation of disabled women. It enforces perceptions of hierarchy and asymmetrical power relations. Using the words of Khan et al. (2022), "the practice and vocabulary of global health and global development today have their origins in racism and colonialism, which has created a false hierarchy among nations" (p.1). Khan et al (2022) also rightly point out that organisations such as the World Bank, who created the classification of 'low-income' countries based on Gross National Income per capita, have perpetuated this hierarchy by enforcing loans such as the Structural Adjustment Programmes in conjunction with the

International Monetary Fund. Moreover, as stimulated by these underlying power dynamics, utilising 'low income countries' as a blanket term also fails to recognise differing experiences of marginalisation in each individual country, enforcing both implicit and explicit overgeneralizations. Terminology such as 'low-income country' in addition to other terminology such as 'Global North' and 'Global South' are stimulated by colonialist beliefs as perpetuated by the perceptions that Edward Said (1985) warned against, creating a perceived underdeveloped 'other'. An intersectional approach, emphasising a dissection of both micro and macro power dynamics and different layers of oppression, in conjunction with a decolonial approach, must therefore be adopted. The above effects and discourse must be recognised and challenged when exploring the marginalisation and oppression of disabled women in low income countries.

Conforming to the above type of discourse also upholds the hegemony of the 'Global North' whilst decreasing the accountability of related countries (Grech & Soldatic, 2017), instead portraying 'Global North' countries as primary and foundational agents in enforcing means of reducing marginalisation for disabled women. This potentially adds to the general theme of continued control over 'Global South' bodies as highlighted by Grech & Soldatic (2017). Empirically, this is emphasised by Haqpana & Tsouroufli (2023), who have critiqued some INGOs for a lack of consideration in the roll out of some educational programmes in Afghanistan, arguing that they implicitly reproduce colonial discourses, and thus potentially enforce forms of marginalisation. Means to address marginalisation of disabled women within low income countries must therefore examine the roots of marginalisation and existing means used in order to tackle it.

This type of discourse rooted in colonial history continues to enforce the marginalisation of specific groups of disabled women, again enforcing the need for intersectional approaches in multiple contexts. This again relates to citizenship as an aspect of identity, as also mentioned in previous sections. This is exemplified by Ferris (2007), who has highlighted how food insecurity - often an ongoing consequence of colonial history (Bjornlund et al, 2022) - has been a factor in the abuse of power by some humanitarian organisations in refugee camps. More recent research has shown that this has continued, and can include sexual exchanges for food, in addition to sexual assault (Rohwerder, 2022). Considering disabled people are sexually assaulted "at nearly three times the rate of people without disabilities" (Disability Justice, c2023, no pagination), not examining and challenging hierarchical power dynamics in an intersectional manner when tackling and exploring marginalisation of disabled women is deeply misinformed and damaging.

Recommendations

As highlighted by the above sections, any methods to target the marginalisation of disabled women in low-income countries must adopt an intersectional and decolonial approach. Alongside general recommendations made regarding approaches throughout this paper, this section highlights two specific measures.

Firstly, NGOs and INGOs can sometimes be a barrier to preventing marginalisation, as seen in previous sections. To prevent issues outlined by those such as Haqpana & Tsouroufli (2023) in the previous points, any interventions or programmes must be organised and run either with or ideally by the local community where possible. They should also at the very least involve local disabled

women in programme delivery and during decision-making processes. As highlighted by Niewohner et al (2020), a key obstacle to tackling the marginalisation of disabled people for organisations is the lack of representation of staff who are also disabled. Employment processes must therefore adopt an intersectional approach for this to translate to effective, intersectional change. However, this must be cautious around positive discrimination methods, as its adoption is highly debated and may still enforce marginalisation. Importantly, Niewohner et al (2020) highlights four key themes that NGOs should focus on to overcome issues in preventing marginalisation: lack of awareness, lack of intersectionality thus placing disability as a separate focus, preconceived ideas that inclusion costs are too high and lastly the perception that responsibility should be devolved to others outside of the NGO, such as governments. These should be considered specifically in each differing local context, to prevent overgeneralized methods to tackle marginalisation. Any consequent funding in place by 'Global North' organisations to support local organisations must have zero conditions, and must not be in the form of a loan, to avoid entrenching existing power dynamics. Overall, these methods could begin to help the marginalisation of disabled women in low income countries more effectively.

Secondly, the above must be strengthened by international law and policy, which protects all disabled women in all countries. Currently, despite its many positives, the Convention on the Rights of Persons with Disabilities (CRPD) does not adequately provide protection for all disabled women. At the time of writing, there is an ongoing debate regarding whether the CRPD is applicable or intended for disabled asylum seekers (European Database of Asylum Law, 2017). It is also difficult to enforce internationally in some cases (Stolman, 2019). To bolster policy and legislation, Mijatović (2022) points out that, again, disabled women themselves must be more included in decision making processes, not only at NGO policy level but also regarding international legislation to prevent social invisibility. To fully target the marginalisation of disabled women in LICs, in conjunction with the previous recommendation, international and domestic law and policy must be strengthened and explicit articles protecting different groups of disabled women must also be incorporated, therefore recognising the importance of intersectionality. This must occur via the inclusion of, and collaboration with, local disabled women to interrupt any existing power dynamics.

Conclusion

Overall, this paper has explored the contention that disabled women in low-income countries are one of the most marginalised groups in the world, highlighting the need to discuss further nuances and context behind this often overly simplified perspective. In particular, it argued that related discussions often generalise disabled women as a homogenous group in LICs, failing to recognise other aspects of identity, differing impairments, and therefore different experiences and barriers. This paper has argued that the recognition of these aspects, historical context, and power dynamics within related discussions using an intersectional and decolonial approach is imperative for such marginalisation to be sufficiently addressed. It has argued that overall, whilst it is evident that disabled women in low-income countries experience extremely high levels of marginalisation, experiences of marginalisation are not the same across individuals and countries. This paper initially emphasised the need to examine and recognise the multifaceted nature of identity,

pointing to analysis of socioeconomic status, sexuality and citizenship status to examine varying experiences of marginalisation. It then highlighted the importance of analysis of differing types of impairment as also relating to different cultural attitudes, before emphasising the colonialist aspect and power dynamics behind terminology such as 'low-income countries' and 'Global South'. Lastly, although general recommendations and approaches on how to tackle marginalisation were made throughout, this paper highlighted two specific recommendations to further address marginalisation of disabled women in low-income countries whilst incorporating intersectional and decolonial approaches.

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