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A social construction of disability: Women with disabilities and policy problems in Nepal

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Abstract

People with disabilities in Nepal, especially women are hampered by social attitudes and cultural beliefs towards them. Disability intersects with gender and socio-cultural perceptions of disability in Nepal. To understand and analyze the disability, disability policies, and policy problems, a social construction of disability model is required. There are many models to disability introduced, such as medical and social. The former emphasizes the medical diagnosis and the treatment of the disabled, and the later emphasizes the need of recognition of the disabled as human variations (KC, 2018). This paper argues that without a clear understanding of the social construction of disability in Nepali society, it will be difficult to address the problems in policies that have been formed to address the conditions of the disabled, especially women in the context of Nepali society where women are deemed as inferiors to men. Citing Nepali disability policies, this paper discusses the existing Nepali disability policies and the social construction of disability in policymaking. This paper asked the following questions: Do Nepali disability policies address the psychological and social issues of people with disabilities, especially women or not? Or do they merely reflect social perceptions of disability?

Keywords: Disability policies, women with disabilities, social construction, policymaking, gender, sex and marriage, Nepal

Introduction

The Constitution of Nepal (2015)^[19] and Nepal's disability governmental policies guarantee freedom from gender discrimination as well as discrimination based on disabilities. Nepal is also a signatory of the UN Convention on the Rights of Persons with Disabilities (CRPD) that addresses the sexual and marital rights of the disabled, along with other rights (United Nations, 2006)^[62]. However, the New Era for National Planning Commission (2001) showed that there were few effective strategies to implement disability policies in Nepal and in other South Asian countries.

The Constitution of Nepal (2015)^[19] covers fundamental rights. Part 3, Article 18, discusses the rights to equality. This section declares that there should be no discrimination against people based on physical condition, language, marital status, race, color, personal opinions, and disability. Article 39, Clause 9 provides state protection and facilities for people with disabilities. Article 42, Clause 3 emphasizes the rights of the disabled to live a life of self-respect and guarantees equal access to public facilities. The Disabled Protection and Welfare Regulation (1996) and Protection and Welfare of the Disabled Persons Act (1982)^[49] include provisions for different services and facilities for persons with disabilities, such as educational rights, health facilities, employment opportunities, self-employment facilities, tax exemption facilities, travelling facilities, and free legal aid services. Dhungana (2006)^[21] and the New Era for National Planning Commission (2001) highlighted physical impairments and called for improvement of disability-friendly infrastructure and employment services for people with disabilities. However, the policies barely recognize women in the context of marriage and family. Further, research has yet to focus on the personal concerns of the disabled, including the understanding of the disabled women's social lives and the need to develop policies related to gender, sex, marriage, and motherhood.

An underlying problem in developing appropriate policies is disability prejudice in Nepali society. People view disability as the result of a sin committed in a past life as destiny. Those who entertain this attitude assume that people with disabilities are incapable of or unfit for marriage and motherhood. The take away from this is achieving an understanding of social, psychological, and cultural experiences of people with disabilities,

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and reflecting upon these understandings in policymaking, could reduce the problems faced by disabled women in their daily lives.

In Nepal, Different political and historical upheavals bring about changes in policies and agencies' roles in addressing the lives of women, as well as female empowerment and discrimination based on sex and gender (Acharya, S., 2017) [6]. However, there appears to be little progress in ameliorating the conditions of women with disabilities (Acharya, S., 2017) [6]. In this article, I investigated how Nepali disability policies reflected the social construction of disability, therefore failing to address the conditions of the disabled women.

Most of the disability policies in Nepal define "disability," as being physically unable to perform any task or to be physically or mentally "impaired" or "feeble" or "crippled" (Protection and Welfare of the Disabled Persons Act, 1982) [49]. Such definitions may further exacerbates the conditions of the disabled—a point to notice such disability problems. To recognize such disability problems in Nepal, a social construction of disability model is proposed in this paper.

When Policies fail to recognize how disabled people are to be perceived and are influenced by how they are perceived, the policies seem not only be discriminatory against men and women, but also fail to address their psychological, emotional aspects of life, such as feelings of safety, self-confidence, and love of life etc including socio-economic aspects of them. Do Nepali disability policies address people with disabilities or merely reflect socially constructed beliefs of how people with disabilities are viewed? To answer this question, first of all, a perspective of social constructionism is discussed.

Social constructionism

Berger and Luckmann, (1966) [9] and Schutz (1972) [54] propose that social constructionism is a study and analysis of the traditional social construction that is based on normative values in a society. For example, the idea of a disability has something to do with not able or capable of doing what a normal human being does or physically handicapped, and other images and connotations, and that is how social values/meanings are ascribed to the disabled. The world is commonly understood, and the concepts are historically and culturally specific and in that way they are constructed (Burr, 2003; Berger and Luckmann, 1966; Schutz, 1972) [15, 9, 54].

Burr (2003) [15], Berger and Luckmann (1966) [9] and Schutz (1972) [54] suggest that knowledge is gained through social processes. Social constructionism is different from "traditional psychology," which emphasizes "essentialism." "Essentialism" is seeing someone or something as "having definable and discoverable nature" (Burr, 2003, P. 6) [15]. Social constructionism questions that essentialism. Burr (2003) [15] says that concepts are "not only socially constructed; they are sustained by social practices that often serve the interest of the dominant groups in society" (P. 38). Thus, looking from a lens of social constructionism, one can challenge "oppressive and discriminatory practices" in a society (Burr, 2003, P. 20) [15].

According to Burr (2003) [15], social constructionism is a critical perspective of "our taken-for-granted ways of understanding the world" (p. 2). Researchers have employed the concept social constructionism in their studies to analyze the traditional social roles based on normative values in a

society (Berger & Luckmann, 1966; Schutz, 1972) [9, 54]. Regarding the social construction of reality, Berger and Luckmann (1966) [9] asserted, Different objects present themselves to consciousness as constituents of different spheres of reality. I recognize the fellowmen I must deal with in the course of everyday life as pertaining to a reality quite different from the disembodied figures that appear in my dreams. The two sets of objects introduce quite different tensions into my consciousness and I am attentive to them in quite different ways. My consciousness, then, is capable of moving through different spheres of reality. Put differently, I am conscious of the world as consisting of multiple realities (p. 33).

So what is the relationship between the social constructionism and policies?

Policies and Social Constructionism

Socially constructed realities can inform the law, and the law, at times, fails to represent the social reality of marginalized, poor, and disabled communities (Ingram, Schneider, & deLeon, 2007) [33]. Regarding the policymakers' view, Ingram et al. proposed, "The incorporation of social construction of target populations as part of policy design helps explain why public policy, which can have such a positive effect on society, sometimes—and often deliberately—fails in its nominal purposes, fails to solve important public problems, perpetuates injustice, fails to support democratic institutions, and produces unequal citizenship" (p. 93).

Policymakers sometimes view social constructions as natural phenomena and seldom question them (Ingram, Schneider & deLeon, 2007) [33]. People with resources, such as the rich and educated have access to policymaking agendas, while those deemed marginalized fall behind the policy agendas, meaning fail to receive the government services (Ingram, Schneider & deLeon, 2007) [33]. Ingram et al. asserted, "Widows, orphans, the mentally handicapped, families in poverty, the homeless, and many other categories of unfortunates" lack political power that "sharply curtails their receipt of benefits" (p. 103). Ingram and Schneider (2007) [33] have made the categories of target population that public policies are intended to serve, such as 1. Advantaged 2. Contender 3. Dependent 4. Deviant. Disabled falls under the third category whereas deviants fall under the last category that they hardly benefit from policies. In the context of Nepal, when disability is deemed deviant then it may fall under last categories and, symbolically speaking, lower caste women with disabilities in the context may end up receiving less benefits. These barriers illustrate how policies prevent marginalized individuals from receiving needed benefits.

Roest and Braidotti (2012) [52] theorized disability as socially constructed phenomenon. They discussed how disability is socially constructed and how it shapes ones' understanding of it. The authors characterized contemporary social theory as dominated by "a socially constructivist vision of human embodiment which reduces the body part to inert matter shaped by social, cultural and symbolic codes" (p. 162). In other words, social normative standards practiced in society shape ones' consciousness and knowledge of the subject that the authors recommend to deconstruct to understand the true of disability. The authors defined the disability against the idea of socially constructed views of disability. Roest and Braidotti (2012) [52]

challenged the essentialist perspective of impairment, arguing body and subjects as socially created and opened the unexplored territories of the collective subjectivity, recognizing the experiences of people with disabilities. Goodley (2013) ^[26] analyzed disabling culture and its influence on “subjectivities,” meaning the disabling culture tends to create human consciousness and shape the understanding of a disability in the society differently. The understanding differentiates the so called able-bodied from the disabled ones, influencing the perceptions of oneself and others (Goodley, 2013) ^[26].

Ingram, Schneider, and deLeon (2007) ^[33] further reinforces that socially-constructed knowledge plays a crucial role in shaping policy. Even in the process of defining policy problems and solving them, the normative or societal values guide the actors (Sabatier and Weible, 2017) ^[53]. Coming to a solution about a policy problem requires recognizing the socially-constructed, hegemonic power at play because socially constructed views among actors involved in policy design tend to ignore other dimensions or alternatives that are crucial to recognize for the betterment of the society. Ingram, Schneider, and deLeon (2007) ^[33] suggest to acknowledge the complexity of socially-constructed views that are always inextricable, complex, multiple, and, finally, hegemonic.

According to Burr (2003) ^[15], knowledge is gained through social processes. Understanding the social processes is crucial to explore how things are taken for granted. Taking things for granted creates essentialism, meaning social norms are seldom questioned (Roest and Braidotti, 2012; Ingram and Schneider, 2007) ^[52, 33]. Social constructionism questions the essentialism of seeing things as “having definable and discoverable nature” (Burr, 2003, p. 6) ^[15]. Burr proposed that understandings are “not only socially constructed; they are sustained by social practices that often serve the interest of the dominant groups in society” (p. 38). Meaning is shared; categories are created within the culture, and social constructionism helps one see them clearly. The problem is the categorization of disability shapes the perception of state support and policymakers’ perceptions that probably worsen the situation of disabled women (Lamichhane, 2012, 2014) ^[36, 38]. A clear understanding of these categories or biasness helps one question the normative standards of society. Thus, social constructionism can be considered a challenge to oppressive and discriminatory practices in a society.

The study of women with disabilities through their narratives may help identify and clarify social beliefs and knowledge, which are mostly socially constructed. Regarding social construction of disability, Wendell (1996) ^[66] proposed that different social factors contribute to disability,

Culture makes major contributions to disability. These contributions include not only the omission of experiences of disability from cultural representations of life in a society, but also the cultural stereotyping of people with disabilities, the selective stigmatization of physical and mental limitations and other differences (selective because not all limitations and differences are stigmatized, and different limitations and differences are stigmatized in different societies), the numerous cultural meanings attached to various kinds of disability and illness, and the exclusion of people with disabilities from the cultural meanings of activities they cannot perform or are expected

not to perform (p. 5).

Thus, ignoring the experiences of disabled people and taking the stereotypes of disabled women for granted without the stereotypes being questioned may further worsen the conditions of the disabled women. Therefore, the analysis of narratives of women with disabilities through the social constructionist point of view is important not only to explore the social practices that have been taken for granted, but also to question those practices and make efforts to emancipate disabled women.

All actors involved in policy design have different views of the world. The way they view the world is socially constructed (Berger and Luckmann, 1966) ^[9] in which subjective meaning is attached. Policy makers are social actors because they come from society. Thus, their perception of the world is shaped by the societal norms and values. Society is bureaucratic (Hummel, 2008). And it is hegemonic that shapes one’s rationality, knowledge, and politics (Ingram, Snider, and deLeon, 2007) ^[33]. We treat the world the way we view it. The perception and treatment of the world are correlated. The way men view women might be different from the way women view men, and so is the perception that exists between the “abled” and “disabled,” “rich” and “poor,” and the “privileged” and the “marginalized.” The role of actors in policy design is shaped by how they view the world. In policy formulation and implementation, the socially constructed hegemonic power plays a crucial role in shaping, forming, and implementing policy. Even in the process of defining policy problems and solving them, the normative/societal values guide the actors, and the social reality multiplies with multiple truths. Coming to a particular solution of the policy problem is possible by recognizing the socially constructed hegemonic power play. The hegemonic power play occurs between the actors involved in policy design. Socially constructed views are inextricable, complex, multiple, and hegemonic. The power play gives the actors involved in policy design a platform to discuss and execute the policy through multiple interventions and many layers of communication (Nakamura, 1980) ^[41]. The focus is how policy actors’ multiple views are socially constructed and how the social construction is hegemonic in policy design from policymaking to implementation, how policy designs is socially constructed and so are the policy problems. Recognition of them is important to better design future policy.

Policy process involves many layers of communication, interaction, and linkages with many groups that consist of advocates, interest groups, bureaucrats, and citizens (Sabatier, 2000; Nakamura, 1980; Peter, 2001) ^[53, 41, 48]. In the policy implementation process, different implementation linkages (Nakamura, 1980) ^[41] come into play, whether the implementation model is top bottom or bottom top. Those who are involved in policy process have certain assumptions and their own worldviews. The way the policy is designed influences policy implementation (Birkland, 2001) ^[13]. Most of the actors who are involved in this process struggle to address their issues resulting in conflict. In the conflict, they define the policy/social problems and interpret them differently (Rocheffort & Cobb, 1993; Tarry, 2001; Weimer, 2006) ^[51, 60, 65]. In the politics of bureaucracy (Peter, 2001) ^[48], power plays a crucial role. Sometimes, the system allows a bottom up approach in policy process. In this approach, marginalized people’s worldviews are reflected in

the policy design, and the policy problems perceived by the marginalized ones are addressed. However, that policy will not reflect all social realities, but one of the realities perceived by the certain group or people. In this regard, all actors involved in policy making and implementation are hegemonic because the way they view the world is socially constructed. The word hegemony in this context is either related to political power or the power of the majority or the interest group that at times become social power. The construction of social reality becomes the law without being questioned, and the law at times fails to represent the social reality of the marginalized, poor, and disabled community. In this context, the disability policies made on behalf of the disabled women might be even more hegemonic.

The way the policymakers view the world is socially constructed, and this is reflected in policy design. Ingram, Schneider, & Deleon (2007)^[33] write:

The incorporation of social construction of target populations as part of policy design helps explain why public policy, which can have such a positive effect on society, sometimes—and often deliberately—fails in its nominal purposes, fails to solve important public problems, perpetuates injustice, fails to support democratic institutions, and produces unequal citizenship (p. 93).

The policies that end up being hegemonic may lead to the marginalization of the disabled in the way they are perceived. The taken for granted issues are never questioned regarding the true conditions of the marginalized people. They are continued to be stereotyped and socially stigmatized.

According to Ingram, Schneider, & Deleon (2007)^[33], these stereotypes and social stigmatizations toward disabled people or women with disability are myths. Schneider and Ingram (1993) write that until these myths are removed, “these myths become inculcated in the culture embodied in policies so that their authenticity is unquestioned, and they are accepted as fact” (p. 107).

Political organization, ideology, and culture shape knowledge that translates into policy design. Ingstad & Reynolds-Whyte (2007)^[35] found that the development of rehabilitation and intervention by the state has been accompanied by legislation, administrative procedures, welfare institutions, medical diagnoses, professional specializations, and business interests. These legislations and administrative producers might also have not taken the rights of people with disabilities into account or their rights might have been lost in socially constructed bureaucratic practices and policymaking.

Disability Policies and Problems in the context of the Global South and Nepal

Discussing structural and physical barriers in Nepal, women are likely to be more disabled than men (Dhungana, 2006)^[21]. Acharya (1997)^[4] and Dhungana (2006)^[21] mentioned the patriarchal society that limit women’s freedom and the practices besides household chores let alone the freedom of women with disabilities. In addition, women with low income and of lower caste seem to be further marginalized.

The main challenge for policymakers is to understand how disabled people view themselves (Stevens, 2008; Shuttleworth, 2007, 2012)^[58, 55, 56]. More effective policies can be developed by encouraging self-help initiatives to remove barriers and encourage disabled individuals to participate in society (DeJong & Lifchez, 1983)^[20]. They

emphasize to address structural inequality in policies. Although all the problems experienced by women with disabilities cannot be addressed by policies, Schriner and *et al.* (1997) recommend to address gender issues and power relationship in society. Ames and Samowitz (1999)^[8] write against the repressive and arbitrary attitudes and policies that control and deny basic human rights of people with disabilities and suggest to address the sexual needs of people with disabilities in disability policies. These prescriptions might be viable in the context of Nepal.

Dhungana (2006)^[21] found that the stigmatization and stereotypes marginalize the disabled when people view the disabled as someone who committed a sin in the past or is a bad luck or a person with a disease. Heyes (2015)^[31] and Hiranandani (2005)^[32] pointed out attitudinal and environmental barriers to the disabled, questioned the monolithic view of disability as individual inadequacy, and challenged the traditional perspective of disability. Dhungana (2006)^[21] argued that women with disabilities in Nepal hardly questioned how disability is viewed by the general public and rather tried to pass as abled in the community due to the stereotypes and social stigmatizations toward disabled people.

In Nepal, disability policy is based on a medical model of disability emphasizing treatment and rehabilitation (Thapaliya, 2016)^[61]. However, there are other models introduced as well (KC, 2018). The provisions of services for disabled people are discriminatory because they are not gender friendly or effectively applied, and the rights of disabled women are violated (Bhandari, 2013; Acharya, 1994)^[12, 1]. Nepali law, for example, allows a husband to marry another wife if his current wife is mentally insane or retarded, but the law does not address what a wife would do if the husband is mentally impaired (Acharya, 1994)^[1]. The choice of words in law is discriminatory, too, such as crippled, feeble, and helpless.

Emmett and Alant (2006)^[23] observed that female disability is often associated with poverty, race, and ethnicity. The authors also observed similar features in developing countries except that “conditions in the developing countries are likely to be worse and considerably more prejudicial to people with disabilities and especially to women with disabilities” (p. 454). Emmett and Alant proposed,

This is likely to be the case for a variety of reasons, including higher rates of poverty and unemployment, pervasive deficits in services and social security, environmental and social conditions that are not conducive to health and political and cultural limitations on human (and especially women’s) rights. (p. 454)

Emmett and Alant (2006)^[23] touch on the rights of the disabled although they do not clearly express the biological rights of women with disabilities. Most importantly, the authors caution about other environmental and social reasons as disadvantageous to the women with disabilities.

In the general context of defining disability and policy implication, Hahn (1985) suggested that an understanding of disability policy issues is very important. The author argued that the concept of disability in policy does not “seek to specify whether the problem is in the individual or in the environment” (p. 294). The policy rarely identifies the rationale for measures that are taken in reaction to the perceived advantage. Such policies also represent “an official belief that a disability constitutes disadvantageous circumstances that oblige a public or private agency to offer

some type of response” (Hahn, 1985, p. 294) ^[29]. Despite perceived responsibility, government policy makers have “failed to exercise that obligation in a logical or consistent manner (Hahn, 1985, p. 295) ^[29]. Hahn (1985) ^[29] asserted, “The bureaucratic drive toward parsimony, let alone the desire for effectiveness, is likely to produce an effort to reduce or eliminate the contradictions and inconsistencies within present disability policy; and decision makers are apt to expect assistance from policy analysts in this task” (p. 295). Both the social structure and built environment are fundamentally shaped by public policy, laws, and regulation (Hahn, 1985) ^[29]. In addition, Hahn proposed, “The recognition that disability is a product of the interaction between individual and environment characteristics is not only an important contribution of investigators of disability policy but also a significant theoretical foundation for future research” (p. 296).

In Nepal, people with disabilities are denied many forms of expression that are supposed to be essential for all citizens (Bhandari, 2013; Dhungana, 2006) ^[12, 21]. Bhandari (2013) ^[12] and Dhungana (2006) ^[21] suggest that the many forms of expressions could be their rights to biological and other emotional needs. In the context of Nepal, so-called able people hardly recognize the disabled ones as capable humans of both biological and emotional needs and who can perform the societal tasks of normative standards (Bhandari, 2013; Dhungana, 2006) ^[12, 21]. These thoughts toward the disabled may create doubts on the ability of the disabled and the appropriateness of sex and marriage in their lives, thus most possibly preventing them from receiving their rights and governmental services.

Groce (1997) ^[28] argued that poverty and negative attitudes towards women have made being a woman with disabilities even more painful. In the context of developing countries, more specifically India and Nepal, the author asserted, “A woman’s social and economic class, her marital status, her family’s social networks, her level of education, and her specific types of disability will make a dramatic difference in her quality of life and her ability to make choices” (Groce, 1997, p. 179) ^[28]. Groce further suggested, “Those women who are born with a disability or acquire a disability early in life are often segregated from broader society from early childhood on, routinely confined within their homes or institutionalized against their will by families who fear public disgrace or physical or psychological harm to their daughter, should their disability status become known” (p. 180). This plight is usually overlooked, both by groups that advocate for women’s rights and those that defend disability rights (Groce, 1997) ^[28].

Over the years, many disability advocacy groups and rehabilitation initiatives have tended to concentrate on and be run by men (Groce, 1997) ^[28]. Programs that advocate women’s educational, economic, and social equality pay little or no attention to the needs of women with disabilities (Groce, 1997; Bhambani, 2003) ^[28]. In addition, there is a lack of women advocacy groups in policy making. Groce (1997) ^[28] argued that low pay vocational opportunities are less effective. The vocational opportunities and other programs for women with disabilities discussed notwithstanding, no sufficient records are kept on disabilities in the Global South, and there are no strong laws that protect disabled women (Dhungana, 2006; Ghai, 2002; Wehbi & Lakkis, 2010) ^[21, 24, 64]. These problems and weaknesses can be reflected on the ineffectiveness of

policies that failed to look at people with disabilities from the social constructionist point of view.

Discussion of some Disability policies in Nepal

There are different policies formulated to address the conditions of people with disabilities in Nepal. Some of the policies are discussed here. The Protection and Welfare of the Disabled Persons Act (1982) ^[49] used terms such as “disabled person,” and “helpless disabled person” (p. 1). The law writes:

Disabled person means a Nepalese citizen who is physically or mentally unable or handicapped to do normal daily life-works. This expression also includes a blind, one-eyed, deaf dumb, dull, crippled, limb, lame, handicapped with one leg broken, handicapped with one hand broken, or a feeble-minded person. (The Protection and Welfare of the Disabled Persons Act, 1982, Article 1.a.) ^[49].

The definition represents disabled people as crippled, lame, handicapped, or feeble minded. A *cripple* is someone who is unable to move or walk properly, and the word fits as an adverb for a disease, such as “a crippling disease.” Metaphorically and symbolically speaking, these words imply that to be disabled is to suffer from a disease. Similarly, *feeble-minded* is used to describe someone who is unable to think or act intelligently. These words tend to reinforce social stigmas that people with disabilities face.

These words set certain social norms for disabled people. Thus, such word choices, instead of acknowledging the disabling sociocultural structure under which disabled people must operate, tend to reinforce social biases and structural problems between the so-called abled and the disabled. These policies consciously or unconsciously encourage disability not as a difference, but as a disease. After some amendments, the Protection and Welfare of Disabled Persons Rules (1994) was enacted. This law created a few more services for people with disabilities, but it did not significantly improve the definition of disability.

Similarly, National Policy and Action Plan on Disability (2006) was enacted as the most recent disability policy in action, and the policy also contained some ideas that are found within the CRPD (Conventions on the Rights of Persons with Disabilities, 2006) that Nepali is a signatory of. However, the policy did not define the concept of disability very clearly. The policy addressed many areas such as health and empowerment of the disabled, including a specific topic on women and disability that discusses health and safe motherhood, but it did not clarify how disability is defined or viewed. In other words, the policy has succeeded in creating new strategies to address the needs of people with disabilities, but failed to communicate what disability really is in the Nepali sociocultural context. Not being able to define what disability means in Nepal may cause the government to fail to protect and promote the rights of persons with disabilities and to address other social and psychological issues of disabled people, especially women in the context of patriarchal society.

Disability policies seem to include some specific policies aimed at addressing the conditions of the disabled. However, the themes generated out of existing disability policies above do not include the emotional dimensions of women, and these issues need to be addressed in disability policies. Disability policies seem to be the result of multiple social and cultural beliefs. One may discover the loopholes in policies if they are seen through the lens of a social construction of disability.

Conclusion: Reflection of Social Constructionism in Nepal's disability policies

In the context of Nepal, the Hindu religion features a male-based hierarchy and is foundational to patriarchy (Acharya, 1994) ^[1]. In laws of Manu, the position of women is contradictory. It says that as a girl, she should obey and seek protection of her father, as a young woman her husband, and as a widow her son although the laws emphasize the reverence of women (Olivelle, 2005) ^[44]. In the context of Nepal, Subedi (1993) ^[59] writes that the growth and development of the child, both male and female are shaped by social values and other societal norms informed by patriarchal traditions. It is a society where a very high preference for sons is given as the sons are considered protectors and providers for the family (Acharya, 1994; Dhungana, 2006; Cameron, 1998) ^[1, 21, 16]. From the birth of a daughter, her economic value is restricted and is considered as an unwanted addition to the family as they can be married off. Since these patriarchal norms and values are center to the society, there is a high possibility of gender discrimination. In this cultural context, the lives of women with disabilities are likely made even more problematic (Dhungana, 2006) ^[21].

The situation of many disabled women in Nepal tends to be exacerbated by traditional gender roles guided by religious principles and values. The majority of men and women seem to be accepting of traditional gender roles as strengths of their culture (Acharya and Bennett, 1981; Watkins, 1996) ^[5, 63]. Cameron (1998) ^[16] observed, "The daughter's birth is marked by sadness and fear—sadness that a son was not born and that the life of the daughter will be difficult, and fear because she is a potential threat to the honor of her father's patriline" (p. 297). Acharya (1997) ^[4], Acharya (2017) ^[6], and Greene (2015) ^[27] suggest the deeply rooted patriarchy in Nepali society that controls most of the areas of women's lives, obliging societal anticipations of marriage, prescribing social roles for them, and inculcating in them social value systems surrounding a families' and a woman's honor that constrain women's mobility. Ghai (2002) ^[24] argued that in "poor families with hand to mouth existence, the birth of a disabled child or the onset of a significant impairment in childhood is a fate worse than death" (p. 51). In a study of women with disabilities in Bangladesh, which is more close to the conditions of women with disabilities in Nepal, Rahman (1993) ^[50] asserted,

In a country where it can be a curse to be born a woman, the problems of a woman with a disability are fourfold: she is a woman; she has a disability; she lives in poverty; she is a victim of illiteracy and superstition. The extent to which a woman with a disability is accepted is determined by the social position of her family. (p. 40)

Among people with disabilities, the situation of women with disabilities in Nepal is different from their male counterparts. Men with disabilities have more opportunities than women with disabilities. A disabled man can marry a non-disabled woman, but the vast majority of disabled women are forced to remain unmarried, making them a burden to family members (Addlakha, 2007; Dhungana, 2006; Ghai, 2002) ^[7, 21, 24]. The exception to this is that of a rich disabled woman. If her family provides an exorbitant dowry to a groom, then it might be possible for her to marry (Addlakha, 2007; Dhungana, 2006; Ghai, 2002; Rahman, 1993) ^[7, 21, 24, 50]. For example, In Nepal, a society where

marriage is the norm for women, 80% of disabled women are unmarried (Dhungana, 2006) ^[21]. Groce (1997) ^[28] writes that this lack of formal marriage compounds links between poverty and disability through lack of "dowry, bridewealth, or right to inherit property or resources generated jointly over the course of the relationship" (p.1560). Women face double discrimination because of their disability and their gender when it comes to marriage. In this context, Ghai (2002) ^[24] proposed,

Within the Indian cultural context, disability implies a "lack" or "flaw" leading to a significantly diminished capability; images of the disabled are associated with deceit, mischief, and devilry. Disabled people are sometimes depicted as suffering the wrath of God, and being punished for misdeeds. Yet another strand of this cultural construction conceives of disability as eternal childhood, where survival is contingent upon constant care and protection (p. 51).

Religions and religious texts have "such a compelling hold on deep psyches of so many" (Christ, 2003, p. 211). Religions legitimate patriarchy (Daly, 1993). This patriarchal model of Nepali society further disables "disabled" women. They are deemed disabled because they are considered to have performed wrong actions in their past lives, also considered their Karma. This is how gender identities are made and they are deeply embedded in culture and socialized and they are rarely been questioned. Thus, the social construction becomes hegemonic (Ingram and Schneider, 2007) ^[33]. Thus, they are usually excluded as marginalized from the policy and other social benefits. Malhotra and Rowe (2013) ^[40] write, "The process of exclusion inherent within gender roles has strong effects on those, like disabled people, already find themselves excluded by society" (p.153). These social expectations created by society in a socialization process fail to incorporate the personal life stories of the disabled that carry their experiences and identity in the policy formation and rather generates stereotypical and negative behaviors against the disabled, especially disabled women. Thus, disabled women face challenges for not being able to meet dual expectations, one is not being able to perform a female gender role (it is because they are feminine not masculine) and another is being the disabled as their karma, doing something bad in their past.

Thus, in the policy formulation, according to Ingram and Schneider' (2007) ^[33] categories of target population that public policies are intended to serve, disabled (especially disabled women) come very low on the priority list of target populations. Such social prejudices and beliefs tend to reflect on policies that will further exacerbate the conditions of people with disabilities.

In this context, changing negative attitudes/images towards/of disability and changing meaning of disability might help formulate better and positive policies for people, especially women with disabilities in Nepal. A research on disability through the lens of social construction may help explore the biases disability policies hold on to. Thus, the future research may help policymakers address those biased issues in policies to ameliorate the conditions of disabled people and especially women with disabilities in patriarchal societies like Nepal.

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