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Crack in the Mirror : The Social Construction of Disabled Female Figures in Indian Fiction

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Abstract. The depiction of intersecting identity perspectives, inclusive of disability, is a significant though slightly overlooked area within the designated frameworks of Gender, Disability or Postcolonial studies. Postcolonial feminist disability theory and praxis framework make visible some of these intersectional perspectives. These intersectional perspectives challenge the oppositional frameworks of colonial and postcolonial, as well as destabilize the normalizing and homogenizing impulses in imperialistic and nationalistic practices and discourses. Probing identity politics, the transnational and the postcolonial global debates on identity politics have resulted in assertions of the very demise of identity, and scholarship on post-identity is tied to the discourses of global flows and transformations. The paper focuses on selected women's novels to rethink gender and feminist readings of the national and cultural consciousness through inclusion of disability studies perspective.

Keywords : Disability; power relations; mutual dependency; subjectivity.

The depiction of intersecting identity perspectives, inclusive of disability, is a significant though slightly overlooked area within the designated frameworks of Gender, Disability or Postcolonial studies. G. N. Karna (2003) in *Disability Studies in India: Emerging Issues and Trends* advocates the role of academic institutions in effecting transformation of public perception about disability issues and impacting policy changes in India.

Postcolonial feminist disability theory and praxis framework make visible some of these intersectional perspectives. These perspectives, in turn, allow for critical distinctions between practices (sociocultural, bio-medical, humanistic, as well as human rights centred) that empower and those that further oppress women. These intersectional perspectives challenge the oppositional frameworks of colonial and postcolonial, as well as destabilize the normalizing and homogenizing impulses in imperialistic and nationalistic practices and discourses. This study takes into account the expressed, silenced, deferred as well as negotiated subjectivities across the spaces and dynamics of power relations, and

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examines notions and politics of care, mutual dependency, subjectivity, and diverse valences of "marginal and resistance modes and experiences" (Mohanty, 73).

Probing identity politics, the transnational and the postcolonial global debates on identity politics have resulted in assertions of the very demise of identity, and scholarship on post-identity is tied to the discourses of global flows and transformations. However, there are many intersecting areas of study that have found minimal attention or exposure even within the scholarship on Postcolonial Studies. They have often excluded a sustained study of subject formations and socio-political implications of disability while Disability Studies have excluded analysis of the postcolonial-disability nexus.

From a transnational perspective, the edited collection by Dreidger, Feika and Batres (1996) *Across Borders: Women With Disabilities Working Together* (1996), and published by the Council of Canadians with Disabilities, examines the women's disabilities movement from the developed and developing world. The book's focus on disabled women's political activism, personal stories and trans-border collaborations has immense significance for feminist as well as disability rights movements. However, these works by their very important interventions invoke the need for moving beyond the west-centric geo-political terrains. Among those who have taken up the challenge include writers, theorists, activists, cultural artists, performers, filmmakers, and educators.

The paper focuses on selected women's novels (Desai, 1980; Sidhwa, 1991) to rethink gender and feminist readings of the national and cultural consciousness (Menon and Bhasin, 1998; Menon, 2006; Didur, 2006), through inclusion of disability studies perspective. The gendered discourses of Indian nationalism and the emerging category of "the new woman" (Ray, 126) are inextricably linked to the ableist discourses of the "civilized," the "rational," and the "modern." The emergence of the intellectual elite regulated the construction of the upper-class patriarchal Hindu family as iconic of bourgeois morality and the image of Indian manhood in opposition to the colonial construction of the effeminate native male.

As Ashish Nandy (1983) reveals, the elite Indians also functioned as "devious Orientalists" who "even when they seem totally controlled, do retain some indeterminateness and freedom" (77). In

advancing the ethos of self-discipline and self-rule, the proponents of the modern nation invoked a range of gender ideologies and tropes. The "martial races" or Arya aggressor image of self as well as the model of ahimsa advocated by Gandhi framed the new imaginings for gender identity. In this reconstitution of national self, the "new Indian woman" is reconfigured as a cultural complement and a spiritual equal to the West-educated yet East-rooted male. However, these gendered regulations were accompanied by a rescripting of the prevailing philosophical and cultural perceptions of the mind-body unity, with multiple valences, into distinct and separable entities.

Conceding to the Western ideologies of the rational as the "modern" by the political and social architects of post-independent India meant acceptance of hierarchies of male, female, as well as embodied constitutions. These shifts impacted a new notion of ableism aligned with masculinity that had to reconcile the Hindu philosophical understanding of the undivided self. Therefore, in the context of India, it is untenable that a uniform and unitary notion of race, gender, class, caste, disability or sexuality exists or displaces other currents of thought, philosophical beliefs, patterns of belief and practice, and modes of ideological construction. Thus, in the current analysis of identity categories in India and its diaspora, discussions of masculinist discourses, "pariah" identities, the new rhetoric of the global and forms of neo-orientalism need to be aligned with plural epistemologies, cultural continuities, syncretic traditions, people's movements, and diverse manifestations of agency and resistance.

Postcolonial Indian and Indian diasporic literary works that explore the interlinks among gender, disability, and the postcolonial draw on these multiple strains in Indian history and culture. Partition narratives rewrite communal violence at the sites of national and religious divisions as well as gendered bodies. In many of these narratives, physical and mental disabilities are inextricably linked to violence, whether in the form of rapes, decapitations or injuries. Although these images also dominate Bapsi Sidhwa's *Cracking India*,the narrative told from Lenny's point of view offers a more complex constitution of the different ways in which disabilities are experienced, constructed, and created. Through injecting the sameness and differences of ethnic, religious, and gender identities and bodily constitutions as contested sites of self and community making, Sidhwa challenges us to occupy the cracks and interstices of time and space. Sidhwa in *Cracking India* conceptualized India-Pakistan partition as a physical breaking of both land and the people. This re-mapping of

self across multiple geopolitical boundaries that define and contain national, religious, ethnic, and cultural identities is also a re-marking of the body of dislocation gives her entry into the fluid social system of the lower classes. Changes, both external (colonial politics and national schism) and internal (self, family and community), redraw those zones. The experience of crossing borders, both national and corporeal, are also compounded by simultaneous locations of self in the center and the margins, as well as in the places of intersection.

Sidhwa works with a social and minority model of disability and envisions it as a political, historical, and cultural identity rather than a medical malfunction or a personal tragedy. *Cracking India* is a space of liminality where disability, intersecting with class, race, religious, national, and gender divides is evoked in terms of a "historical politics of negotiation," a "third space" (Bhabha, 35-36). In this contested space, class stratifications (upper class, colonial educated, middle class, the working class, and the labouring poor), patriarchy (male discourses of family and nation), religion (Hindu, Muslim, Sikh, Parsee and Christian), physical (dis)ability (Lenny's polio) appear rigid and definitive. Sidhwa's novel, however, brings into discussion the matrix of privileges and penalties that complicate specific women's lives in colonial contexts. Analyses of the women's locations as well as the structures that politicize those locations are necessary to understand the terrain on which women negotiate their subjectivity. Class (upper class, colonial educated) and religious affiliation (being Parsee) place Lenny in the zones of privilege and mobility. Paradoxically, her physical disability, the zone of penalty, allows Lenny to gain entry into multiple fluid spaces across upper and lower classes, gender and age differences, male and female communities, and more or less abled and disabled bodies. By tracing historic links between specific past events and present cultural, social, political, and economic realities, Sidhwa relates family genealogy, personal experience, colonial and neo-colonial histories through the eyes of "Lame Lenny." The young girl with polio, under Ayah's care, crosses the class and religious lines because of her disability and Ayah's companionship. She and Ayah traverse these lines every day until partition wreaks havoc on bodies of Hindus, Sikhs, and Muslims. Lenny recounts how these events shape her childhood, forged in the multiple cracks in India: British colonial system, the emergence of nationalist leadership, and the violence that divides India along religious lines. But it is the care relationship that allows her to bear the unbearable. The violence of partition is inscribed in women's raped bodies, their decapitated breasts tied up in gunny

sacks, or the abandoned women who are prostituted. Lenny's disability had been a source of pampering in childhood. Her personal choice, not to have the corrective surgery that would make her look like any other person, was also a political choice, resistance to colonial medical discourses that pathologize disability. This confluence of needs and wants takes particular urgency in Lenny's adolescence when she learns that it can also be a site of social erasure.

On Sidhwa's treatment of disability, Martha Stoddard Holmes (2001) notes, Lenny's polio forms a significant early narrative thread (but that) vanishes as a plotline. Lenny's failure to focus on disability during adolescence overturns stereotypes about disabled girls' exclusion from the social/sexual culture of adolescence. Like so much else in this novel, Sidhwa's treatment of polio is emphatically and refreshingly local, focused on the way daily life goes on in its particular, individual ways in the context of large-scale political conflicts and received notions about bodies and identities. It is in adolescence that Lenny recognizes the danger of exclusion and begins to defy convention by claiming the sexuality and beauty of her body at the site where her limp defines her uniqueness.

As Lenny moves from childhood to adolescence, her disability makes care a significant crucible of security, independence, experience and maturation. Lenny learns to understand that women's bodies are repositories of differentialities, complexities, and invisible strength that generate resistance and solidarity through secret networks. They are her recovered sites of care relationships. While embodying various forms of fracture and dissonance, Lenny experiences ability/disability as a continuum.

Circulating outside the linearity of dominant constructions of colonial histories, gender roles, and violently disabled bodies, Lenny frames her longings and struggles within the community of women's stories. In theorizing feminist disability discourse, Rosemarie Garland Thomson (1997) examines the social constructedness of the "disabled figure." However, she also articulates the need for recognition of "the singularity and perhaps the immutability of the flesh" where pain is located and where her struggle for naming her corporeal difference reflects as well as deflects the cultural norms of the "universal subject" (25). The process of assembling the figures that are located at the gender, disability, and postcolonial nexus is helpful in identifying trajectories for future studies in the area.

These include a need for linking literary representations and historical studies on genealogies of colonial knowledge production about disability and disease. Studies on colonialism and Tropical diseases (Kennedy, 1996; Anderson, 2006; Jennings, 2006), for example, are helpful in delineating how European colonizers othered the colonized spaces and native races, and structured institutional hierarchies and power differentials that marginalized and made invisible the subjects of disability and disease.

Anita Desai's various novels, such as *Voices in the City* (1965), *Clear Light of Day* (1980) and *Fire on the Mountain* (1977), address female psychological trauma at the sites of colonial and postcolonial clashes. Her preoccupation is with the "modern" Indian woman's psyche, and the isolation of the physically ill and the psychiatrically othered through social structures and customs. However, scholarly work on her writings has disregarded disability studies perspectives as viable interpretive tools for analysis. Instead, there are endless conflations of psychiatric disabilities as symbolic of national fissures, cultural crises, states of corruption, internal strife, and ethnic violence.

Anita Desai's upper class Indian women protagonists find themselves contesting as well as re-occupying the colonial women's spaces, such as the European styled grand houses built in tropical hill stations to escape the hot, moist climates that were associated with tropical diseases. In *Fire on the Mountain*, for example, Nanda Kaul occupies Carignano, in the Kasauli hill station, as a retreat away from the burdens of her previous domestic preoccupations as wife and mother. However, this retreat is also a replay of the lives of many colonial occupants of the house and its history of violence (6-9). Poised at these historic junctures, Nanda Kaul's fierce independence is also a form of rejection of communal responsibility, separating her from her typhoid-recovering great granddaughter, Raka. The unusually quiet Raka is like Nanda Kaul; she too seeks to explore the mountain by herself, on her own terms. In their passion for individual space and independence, they can only destroy. Nanda Kaul, through a reductionist rendering of multi-spatial geographics of gendered domesticity into self and others, breaks her links to close friendships and human contact.

Raka ousted out of the possibilities of women's community and of girlhood companionships, as well as isolated in her illness, sets fire to the mountain. These destructions are also forms of hope for what they destroy are old conformities and unnatural compromises. The stark

charred trees and the burnt Pasteur Institute for psychiatric patients (remnant of the colonial bastion of disease control) symbolize a critique of modern India adopting the institutions of the west while the old family ties falter and die.

Among writers in indigenous languages, Mahasweta Devi has explored the nexus of gender, disability, and the postcolonial as a contested site of denied citizenship, exploitative economics and the myth of Indian progress. Devi's narratives of tribal women's lives and struggles in the collection, *Imaginary Maps, and Other Short Stories* such as *"*The Breast-Giver," "Draupadi", "Chaurasi Ma" ("Mother of 1084") explore the harsh realities of neo-colonial violence against the marginalized in the context of territorial expansion, deforestation, and encroachment into the tribal land space. "Doulati the Bountiful," a Bengali short story (Trans, 1995), anthologized in *Imaginary Maps*, addresses the issues of post-independent neo-colonialism and economic exploitation that physically and mentally disable the bodies of the subaltern adivasis (aboriginals) of India. The exploited site of Doulati's syphilitic body remaps India's trajectory of post-independence as failed modernity. Other literary writers do not directly deal with figures of disability as central to their works but present social, cultural, and political circumstances and forces that are crucial for gender and disability inclusive considerations.

Chitra Divakaruni's "Ultrasound" one of the short stories in *Arranged Marriage* (1995), confronts the issue of women's reproductive bodies, infertility and social stigma, and femicide as a modern Indian practice of eugenics against the girl-child, facilitated by the technologies of amniocentesis.

Bharati Mukherjee's *Wife* (1975) and Anjana Appachana's *Incantations* (1991) address the contradictions that undergird the seemingly "success" stories of contemporary urban, middle class Indian and Indian diasporic lives by illuminating the locations of gender, mental trauma, and sexual violence and the borderlines of the normal and the abnormal. These literary depictions span the range of disability conceptions and misconceptions, as much as reinscribe as well as reimagine the figures of disability as reflections of individual loss, as shaped and undermined by social construction, and as agents of change. Postcolonial diasporic writers are also addressing a dichotomy that is dominant in the pathologized models of disease and disability: the doctor/patient distancing in increasingly technologized practice of medicine. Joanne Rendell (2003) examines "the biomedical AIDS imaginary" in Rafael

Campo's work, *The Desire to Heal: A Doctor's Education in Empathy, Identity, and Poetry* (1997). Rendell interprets this imagery as a form of troubling the "crucial self/other binary that is so consistently maintained in biomedical AIDS discourses." (205).

In Chitra Divakaruni's short story "Ultrasound," the narrator's friend Runu, pregnant with a girl-child in India, confronts the medical paradox of new technology, ultrasound and amniocentesis, that revives the old social practice of female infanticide. Within the oppressive socio-cultural constructions, the female girl child, further stigmatized if physically or mentally impaired, is a figure circulating between the normative figures, the male and the married, male-bearing woman.

The traffic between subaltern identity categories in the context of India underscores the fluidity of the concepts surrounding them, as well as opens up space for competing, complementing, and conflicting relationships. In India, transgender and intersex people, the *hijras* have a communal identity and though feared for their mysterious powers, they are also sought out for certain festive occasions, especially birth of a son, in the Punjab region particularly. Widows, on the other hand, are often ritualistically made to wear only white clothes, in extreme cases until recently made to shave their head and discard all jewellery. Like the disabled and the outcaste, the widow is one such figure who is ritually made visible/invisible; she is present as a spectacle and absent as a social being. The socio-economic dynamics in the making of widows because of the inability or unwillingness of families to care for them rewrites the moral and religious grounds of this practice in terms of its economics. Solidarities and competitions among the disabled, widowed, and gender, caste, and age differentiated constituencies are predicated upon these economic systems of exchange. The local and global dimensions of minority subjectivities reveal different ways in which disability is configured within institutions and discourses.

Disabilities, whether by birth or acquired, low caste status, widowhood, as well as gender destiny are often conceived of as karmic payments for past sins, as trials and tribulations that one must bear in this life. In this context, minority communities function as visible signs of the religio-philosophical system as well as subjects of state custody. In the context of transnational movements, subjects of disability have for years been denied immigration to the U.S. Often lumped as a homogenous group, people with mental and physical disabilities have been perceived as unfavourable candidates for immigration to the U.S.

Within U.S. Immigration history, the bodies of immigrants have been coded as material for labour, therefore to be admitted within the "golden doors" only if seen as a productive force enhancing the lives of the once immigrant, now mainstreamed Americans (Baynton, 2005). In the context of ethnic America, Ahmad's *Ethnicity, Disability and Chronic Illness* examines intersections of ethnicity, race, disability, health and social care, and minority identities. He distinguishes between impairments ("loss of function of an organ or limb") and disabilities ("stigma…and consequent marginalization and discrimination experienced by people with impairments"), and qualifies the social model of disability (1-2).

Ahmad emphasizes that form and severity of disability define one's citizenship, access to resources, and voice regarding care decisions. He calls for cultural location of concepts such as "normality," "loss of control, or "independence." In Asian Indian cultures, he observes, "interdependence, mutual support and reciprocity are the hallmarks of social and family relationships" (2). Ahmad's study is an important intervention in the study of ethnicity and disability intersections. His focus on symbiotic relationship between carers and disabled people challenges essentialist definitions that define care as "labour" or "burden" in western feminist critiques (3). As members of minority groups, disabled individuals often experience racism; therefore, their alliances within their families and communities are important resources.

This challenge forwards the discussion of disability as central to women's development issues and goes beyond the imperialist paradigms of problems and solutions, them and us, global and local. It also calls for identification of specific gender and disability locations as well as problematizes social and bio-medical constructions of identity. Women's activism and movements in India and South Asia are historically located in ant-colonial and independence struggles. Writers and activists such as Sarojini Naidu (first woman President of National Congress), Durgabai Deshmukh (founder of Central Social Welfare Board), Kamala Devi Chattopadhyay (member of Sewa Dal and participant in Salt Satyagraha), Vimla Farooqi (formed the National Federation of Indian Women) have influenced present day movements and activists such as PromilaLumba, Deviki Jain, who view the future of women's movement in building alliances with other struggles against exploitation and power hierarchies.

Anita Ghai (2002), in *Disability in the Indian Context: Post-Colonial Perspectives*, points out the elitist and masculinist leadership

of disability rights activism in India. Ghai critiques the practice of borrowing the west-imported packages of "nothing for us without us" which seem to be "universal solutions that ignore the specifics of the Indian dilemma" (94). She cites the examples of sign language programs and augmentative communication aids that are available only for the English language speakers, ignoring "the multilingual character of society in India." (94). Remarking on the rehabilitation, "special needs" model as the dominant approach in India, Ghai points to the nascent emergence of the social model of disability in the areas of activism and service leading to re-alignments in the Indian context. The discourses of health risks and concerns in "development" activist agenda subsume disability subjectivities and are reflective of "third world" economics and politics. Ghai points to "the deconstructive capacity of post-colonial theories" in challenging "the assumptions underlying the cultural constructions of destiny and medicalization" (94-95).

Judith Butler (1990) writes in *Gender Trouble*, "Identity is performatively constituted by the very 'expressions' that are said to be its results" (25). Also, writings on disability experiences, inclusive of multiple and diverse intersections with race, ethnicity, gender, sexuality and class, need to be collected and anthologized. Analysis of pluralistic models of disability subjectivity, as well as impact of shifts in socio-economic, political and cultural climate are important to assess access to resources, human rights, citizenship, as well as inclusion in the realm of the human. Challenges to certain disciplinary representations of and preoccupations with disability need to clarify the dangers of such ideologies and practices not only within specific but also across disciplines. Deployed at various stages and in diverse cultures as embodiments of moral evil, wilful destiny, the supernatural or the monstrous, disabled people have been feared, ridiculed, and exoticized. With prominence of medical disciplines and discourses, subjects of disability gained attention as "cases" to be acted upon, remedied, and treated. Scholars, activists and disabled constituents must engage in dialogue and exchange. They must explore how historical shifts in perception of and ideology surrounding disability get translated in postcolonial moments of resistance to oppression and in the processes of nation formation.

Today, dominance of medical approaches to disease and disability in developing countries often find governmental sanction as well as international support through emphasis on social policy, and proliferation of institutions of health care and rehabilitation. Activists,

on the other hand, are voicing the human rights issues, while academic institutions are beginning to grapple with the inclusion of disability studies as an area of intellectual as well as scholarly interest. However, engagement with theory and praxis of disability identities, experiences, and discourses in challenging victim/superhero binary is still an emerging process in India. I have focused on some of the tensions that exist in the lived experience of multi-faceted disability identities related to women. In initiating this discussion of postcolonial Indian cultural production, expression, and activism, I intend to havecomplicated as well as made visible the linkages and slippages.

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Works Cited

Ahmad, W. I. U. (Ed.). *Ethnicity, Disability and Chronic Illness*. London: Open University Press, 2000.

Appachana, A. *Incantations*. London and New York: Rutgers University Press: Virago, 1991.

Butler, J. *Bodies That Matter: On the Discursive Limits of "Sex."* New York: Routledge, 1993.

Butler, J. *Gender Trouble: Feminism and the Subversion of Identity*. New York: Routledge, 1990.

Desai, Anita. *Clear Light of Day*. New York: Penguin,1980.

_____. *Voices in the City*. Delhi: Orient, 1965.

_____. *Fire on the Mountain*. New York: Penguin,1977.

Devi, Mahasweta, *Doulati the Bountiful. Imaginary Maps: Three Stories.* Gayatri Chakravorty Spivak, *(Trans*.). New York: Routledge, 1995.

Divakaruni, Chitra Banerjee. "Ultrasound". *Arranged Marriage*. New York: Anchor, 1995.

Ghai, A. *Disability in the Indian Context: Post-Colonial Perspectives*. In Marian Corker and Tom Shakespeare (Eds.). Disability/Postmodernity: Embodying Disability Theory (88-100). London and New York: Continuum, 2002.

Mohanty, C. T. *Under Western Eyes. In Third World Women and the Politics of Feminism.* Eds. Mohanty, Chandra Talpade, Ann Russo, and Lourdes Torres (51-80). Bloomington: Indiana University Press, 1991.

Mukherjee, B. *Wife*. New York: Ballantine, 1975.

Nandy, A. *The Intimate Enemy: Loss and Recovery of Self Under Colonialism*. Oxford: Oxford UP, 1988.

Ray, S. *En-Gendering India: Woman and Nation in Colonial and Postcolonial Narratives*. Durham: Duke University Press, 2000.