

Does disability necessarily lead to poverty?

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Abstract: *It is well known that the existence of disability can lead a person (or his family) into poverty. More specifically, disability may cause a person to face inequality in education and employment, thus adversely affecting his income; The increase of disability related expenditure has led to the reduction of living standards and poverty of the disabled and their families. Taking India and China as examples, this paper analyzes how disability leads to inequality and poverty. This paper argues that the limitations of the health of the disabled, the socio-cultural prejudice against disability and the lack of government support policies have all contributed to the unequal treatment faced by the disabled in many aspects. These inequalities, in turn, directly or indirectly lead to a decrease in the income of disabled persons compared with non-disabled persons; On the other hand, compared with non-disabled persons, disabled persons face an increase in the cost of living, which together leads to relative poverty, often absolute poverty.*

Keywords: *Disability; Poverty; Inequality; Gender*

1. Introduction

It is a commonly acknowledged fact that the presence of a disability can lead a person (or his or her family) into poverty^{[1][9][10][11][21]}. More specifically, disability can lead to a person facing inequalities in education, employment, which adversely affects their income; and increased disability-related expenditure leading to a lower standard of living and poverty for people with disabilities and their families^[26]. Using India and China as examples, this essay analyses how disability leads to inequality and poverty.

It argues that the limitations of disabled people's own health, sociocultural prejudices against disability, and inadequate government support policies all contribute to the unequal treatment faced by disabled people in many ways. These inequalities in turn lead directly or indirectly to a reduction in the income of disabled people compared to non-disabled people; on the other hand, disabled people face increased living expenses, which together lead to a state of relative, and often also absolute, poverty compared to non-disabled people^[6].

The essay will divide into five parts: first it introduces the key definitions: disability and poverty; then it gives introduction of the empirical research on the relationship between disability and inequality and poverty. This will be followed by the main analysis section of the essay, which will analyze the relationship between disability and inequality, disability and poverty respectively, using India and China as examples. In the analysis of disability and inequality, a “gender” dimension is added, focusing on the double discrimination faced by women with disabilities in India. Finally, the article will draw conclusions and insights.

2. Key definitions

To understand the relationship between disability and poverty, it is important to first define disability^[33]. There are different definitions of disability when analysed from different perspectives, and this essay will adopt the social model that is widely used by international development agencies. According to this model, disability is defined as “the disadvantage or restriction of activity caused by a contemporary social organization which takes no or little account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities”. This concept not only focuses on the needs of individuals for disability prevention and rehabilitation, but also emphasizes the important role of policy makers and service providers in meeting the social needs of people with disabilities^[2], thus

providing the basis for the following analysis of the social barriers faced by people with disabilities and the policy responses made by governments.

Poverty, according to Amartya Sen, is defined as “the freedom to do the things one has reason to value”^[38]. These capabilities, “vary from such elementary physical ones as being well-nourished, being adequately clothed and sheltered, avoiding preventable morbidity, and so forth, to more complex social achievements such as taking part in the life of the community, being able to appear in public without shame, and so on”. He argues that disabled people often face discrimination and limited opportunities (hence limited freedom to live the life that they would choose to live). He thinks that being disabled has a double effect, includes both an “Earning handicap”, which refers to the reduced income-earning ability faced by many disabled people; and a “Conversion Handicap”^[39], which refers to the extra cost faced by disabled people in converting a given level of income into well-being.

3. Empirical research on disability, inequality and poverty

Empirical research have shown that disable people face education inequality and employment inequality. Disabled people disadvantaged in terms of access to education and employment. In LICs, 90% of disabled children do not go to school; Those that do attend school are often far less likely to complete primary school than non-disabled children; Living in poverty increases the likelihood that students with disabilities will experience poor post-school outcomes, including unemployment, underemployment, and limited postsecondary education. When it comes to the relationship between disability and poverty, there are also many evidence. 80% of disabled people living in LICs are unemployed; “the majority of persons with disabilities live in conditions of poverty”; the effects of the intersection of poverty and disability persist into adulthood where the employment rate for adults with disabilities is only one-fourth that of individuals without disabilities^[12].

The relationship between disability and poverty is, according to DFID, a 'vicious circle'^[4]. The two are causal and mutually reinforcing. Disability leads to poverty because of social discrimination, disenfranchisement and lack of opportunities to participate in social and economic life; conversely, people living in poverty are often at increased risk of becoming disabled because of poorer nutrition and hygiene, lack of access to essential health care and hazardous living and working conditions.

4. Disability and inequality

This section will use India as an example to argue the relationship between disability and inequality. Firstly, it will give a brief overview of disability in India, and then it will analyze the aspects of inequality they face, with a focus on educational inequality and employment inequality. In addition, the section will include “rural” and 'gender' dimension, analyzing the inequalities faced by disabled people in rural India and disabled women in India, and the reasons behind them.

It is not easy to present a profile of people with disabilities in India, and the basic fact of the number of people with disabilities in India is controversial^[40]. Data on persons with disabilities are mainly collected through the Decennial Population Census and National Sample Survey which is conducted on a regular or occasional basis. However, their results are often very different partly because they adopt different definitions of “disability”^[14]. For example, the 2001 census showed that there were approximately 22 million people with disabilities in India, which is 2.13 per cent of the total population. However, the NSSO survey for the same period stated that the number of people with disabilities was less than 19 million, that is, not more than 2% of the total population^[34]. More controversially, many international organizations have estimated the number of disabled people to have reached 70 million during the same period^[47]. Latest data on persons with disabilities in India from the 2011 census, which puts the number of disabled people at 26.8 million, or 2.21% of the total population.

The perception of disability as a form of stigma is one reason for the gap between official and unofficial disability prevalence estimates^[2]. It is an undisputed fact that people with disabilities are more likely to be treated unequally than people without disabilities. The discrimination and unequal treatment of people with disabilities is closely related to the culture of the society in which they live. Both anthropological and sociological studies have shown that in India, disability is understood as a form of karmic retribution^[41]. Specifically, disability is often seen as a punishment from above, which is the result of the sins of the disabled person themselves or their loved ones, they are always seen as deceit, mischief, incapacity and evil^[7]. Stigmatizing attitudes towards disability are more prevalent in rural areas than in urban areas^[13]. For example, Mehrotra's study in rural Haryana, India, shows that disability is rarely seen

as a medical or social problem, but rather as a result of God's wrath and human superstition^[23].

Within this wider cultural context, the inequalities faced by people with disabilities in India are manifested in many ways, starting with educational inequalities. The 2001 census, for instance, finds that 52% of disabled people are illiterate, as compared with around 35% of the general population, disabled children very rarely progress beyond primary school, the share of disabled children not enrolled in school was over five times the general rate, even in relatively well-off states. Out of the 2.21% disabled population in India, 1.54% is in the age group of 5-9 years and 1.82% in the age group of 10-19 years. Of this only 1.17%, i.e. 25.6 million children, are enrolled in classes I-XII^[22]. The reasons are various, includes includes weak institutional coordination, poor expenditure performance, and a range of issues in delivery of education, poor identification and access of disabled children to the education system, the quality of the education available for students with special needs is limited, ect^[32].

Educational inequality is highly correlated with employment and economic inequality. Children who do not succeed in education almost inevitably become an economic burden on society and their families^[15]. Given that the NSS does not collect information on employment and wages for different types of disability at the characteristic point in time, studies cannot be conducted due to lack of data^[29]. According to the results of the 2002 National Sample Survey, the employment rate of people with disabilities in India was only 37.6%. This figure was only 60% of the all-India working-age population employment rates, and there were significant differences in employment rates by gender, urban/rural sector and state^[28].

The reasons why people with disabilities face inequality in employment can be explained in part through the conceptual framework of the 'wall of barriers' proposed by Harris and Enfield^[9]. They divide the barriers to economic empowerment of people with disabilities into three categories: physical, institutional and attitudinal. Rungta further identifies the lack of medical facilities and adaptations faced by people with disabilities in the workplace equipment, and institutional barriers such as inflexible working hours^[35]. Copley summarized the socio-attitudinal barriers faced by people with disabilities in India based on semi-structured interviews with the Indian disability community and found that although society's attitudes towards people with disabilities as a whole are gradually changing, negative societal attitudes towards people with disabilities are still not eradicated, with people with disabilities' perceptions of themselves being seen as a barrier to their economic empowerment^[2].

When paired with those resulting from other axes of social difference, such as gender, the inequalities faced by disabled persons are further exacerbated^[2]. Female with disabilities in India suffer from "double discrimination"^[46] due to sociocultural and traditional gender role expectations of women, and inequality permeates every stage of their lives. As Indian society generally prioritizes the education of boys, women with disabilities are at a distinct disadvantage in terms of access to education^[5] ^[43]^[16]; furthermore, Indian society views women with disabilities as 'incomplete human beings' who are not only unable to fulfil their role as wives and mothers, but also as objects of care and burdens to the family, so that they often marry 'unsuitable' or already married people^[23]. Isolation and physical vulnerability make them vulnerable to divorce, abandonment and domestic violence^[36]. Women with disability are usually confined to home, not allowed to go outside for employment even if they are capable; Disability also affects their social life, as they are often excluded from social events such as family gatherings and religious festivals^[3].

5. Disability and poverty

The above section focuses on the inequalities faced by people with disabilities through the examples of India. Next, the article will analyse the relationship between disability and poverty. It will focus on how disability leads to a decrease in income and an increase in disability expenditure, which ultimately leads to the relative poverty of people with disabilities.

Poverty has traditionally been measured using income or consumption indicators^[45]. The impact of disability on poverty has recently been examined by the Senate Community Affairs References Committee (CARC) during its Inquiry into Poverty and Financial Hardship. The report identified disability as a "close companion" of poverty, resulting from a combination of two factors: the increased cost of living and the reduced incomes of those with a disability.

While the previous section focused on demonstrating the reasons why people with disabilities face inequalities in education and employment, this section focuses on how these inequalities, particularly in employment, lead to reduced earnings for people with disabilities. In terms of employment, both people

with congenital and acquired disabilities are disadvantaged in the job market, but the reasons for this inequality differ. Children or young people with congenital disabilities have limited employment opportunities because they do not have access to good schooling, which limits the accumulation of human resources, whereas for people with acquired disabilities, the disability mainly limits the type and number of jobs available to them^{[6][24][37]}, i.e. they have a smaller job market. There are many reasons for this small job market, including blatant social discrimination and the fear that employing people with disabilities will increase costs. Furthermore, even when they are able to enter the job market, people with disabilities tend to work in low-paying or low-skilled jobs and are unable to compete in a highly competitive market^[34]. These explain why they earn less compared to non-disabled people.

The relationship between reduced income and increased disability is a “vicious circle”. On the one hand, the employment rate and wages of people with disabilities are depressed due to unequal access to opportunities to develop knowledge, skills and occupations^[42]; Because family members of people with disabilities often have to spend a lot of time caring for their disabled members (for example, seeking medical care for them), having disabled family members has significant impacts on the employment behaviour of other adult members, both in terms of whether or not the men in the house work and in how much work all other adults are able to do^[32], this leads to a reduction in the overall income of the disabled household^[25]. In addition, low-income households are unable to support the full participation of their disabled members in economic and social life, leading to an even poorer situation.

Besides decreased income, disability also leads to additional expenditures. Numerous studies have shown that out-of-pocket expenditure on health is consistently higher for people with disabilities compared to people without disabilities^[27]. The causal relationship between disability and poverty has most often been considered in terms of disparities in income or living conditions^[44]. A small set of studies in developed countries have estimated these “extra costs of disability”—that is, the excess income that a household with a disabled person would require to have an equivalent SOL as a household without a disabled person^[48]. Such research has been conducted in England, Australia, and Ireland. The studies concluded that the extra costs of disability are substantial, at least over the short term.

These additional expenses may include additional medical services, assistive devices, increased fuel costs due to longer stays at home or the need to keep warm, support costs, additional transport costs when travelling, etc.^{[30][31]}. A case-control study done in the Thiruvananthapuram district, capital city of Kerala in South India shows that the mean expenditure of the families with a disabled child was \$254 per year, which is significantly higher than the corresponding expenditure of \$181 per year of families with normal child^[17]. Studies also show that despite all their needs not being met, people with disabilities use hospital services significantly more compared to people without a disability in India^[8].

When it comes to disability cost in different areas, there is also a gap between rural areas and urban areas. A survey conducted in China showed that rural households have a smaller additional cost of disability compared to urban households. This is because, compared to urban areas, rural households receive less information on how to adequately care for people with disabilities and do not place enough emphasis on caring for them; in addition, even when they are aware of caring for people with disabilities, they find it difficult to find services to help families care for their disabled members, and if they do find such services they cannot afford to pay for them^[19].

Studies show that improvements in the economic situation of households with disabled members are not always the result of improved employment, and that government grant policies may play an important role in improving the living conditions of people with disabilities^[20]. A study conducted in South Africa showed that the South African government's policy of providing disability grants to people with disabilities played an important role in improving the living conditions of people with disabilities, with the average monthly income of households with disabled family members in the Eastern Cape Province of South Africa not only being no less than that of control households, but also significantly higher than that of control households. But the study also concludes with a reminder that a lasting solution to poverty among people with disabilities is to improve their access to education and employment, among other things^[20].

On the contrary, the lack of implementation of government policies related to people with disabilities also contributes to the lack of improvement in the poverty situation of people with disabilities. For example, in China, research shows that although China has made significant improvements in public policies for people with disabilities over the past few decades, there is still a huge gap between legislation and policy implementation^[18]. Since 2000, the Chinese government has rapidly expanded the coverage of social security programs through reforms, resulting in a significant increase in the level of benefits for families of people with disabilities in recent years, but still insufficient to meet the needs of people with

disabilities and their families^[19].

6. Conclusion

Using the examples of India and China, this essay focuses on the inequalities that disabled people face in social and economic life compared to non-disabled people. Based on this, the paper further analyses how people with disabilities who face inequality become poor. The paper argues that inequalities in education and employment and in participation in social life are caused by the limitations of people with disabilities, social discrimination and inadequate government policies, and that these inequalities lead, to varying degrees, to a reduction in their ability to earn an income, which in turn leads to a reduction in income; in addition, physical disability is often associated with additional costs and is another cause of eventual poverty.

This paper implies that governments and service providers need to be aware of the disadvantageous environment in which people with disabilities live and the reasons for their inequality and poverty, and improve policies and services to provide more support for their social and economic inclusion. There are several limitations to this paper. Firstly, due to a lack of recent research, some of the literature cited in this article is dated and may not be up to date with the current situation of people with disabilities; secondly, this article uses 'reduced income' and 'increased expenditure' as two dimensions of poverty, although in Secondly, the use of 'declining income' and 'increasing expenditure' as two dimensions of poverty, although generally logical, still lacks rigour.

References

- [1] Braithwaite, J., & Mont, D. (2009). *Disability and poverty: a survey of World Bank poverty assessments and implications*. *Alter*, 3(3), 219-232.
- [2] Cobley, D. S. (2012). *Towards economic empowerment for disabled people: exploring the boundaries of the social model of disability in Kenya and India* (Doctoral dissertation, University of Birmingham).
- [3] Daruwalla, N., Chakravarty, S., Chatterji, S., Shah More, N., Alcock, G., Hawkes, S., & Osrin, D. (2013). *Violence against women with disability in Mumbai, India: a qualitative study*. *Sage open*, 3(3), 2158244013499144.
- [4] DFID (2000) 'Disability, Poverty and Development'. Policy Paper. [Internet]. Accessed February 12th, 2008. Available at www.dfid.gov.uk
- [5] Filmer, D. (2000). *The structure of social disparities in education: Gender and wealth*. The World Bank.
- [6] Gertler, P., & Gruber, J. (2002). *Insuring consumption against illness*. *American economic review*, 92(1), 51-70.
- [7] Ghai, A. (2002). *Disabled women: An excluded agenda of Indian feminism*. *Hypatia*, 17(3), 49-66.
- [8] Gudlavalleti, M. V. S., John, N., Allagh, K., Sagar, J., Kamalakannan, S., & Ramachandra, S. S. (2014). *Access to health care and employment status of people with disabilities in South India, the SIDE (South India Disability Evidence) study*. *BMC public health*, 14(1), 1-8.
- [9] Harris, A., & Enfield, S. (2003). *Disability, equality and human rights: A training manual for development and humanitarian organisations*. Oxfam GB.
- [10] Harriss-White, B. (1999). *On to a loser: Disability in India*. B. Harriss-White and S. Subramaniam (eds), 135-59.
- [11] Hoogeveen, J. G. (2005). *Measuring welfare for small but vulnerable groups: Poverty and disability in Uganda*. *Journal of African economies*, 14(4), 603-631.
- [12] Hughes, C. (2013). *Poverty and disability: Addressing the challenge of inequality*. *Career Development and Transition for Exceptional Individuals*, 36(1), 37-42.
- [13] Jadhav, S., Littlewood, R., Ryder, A. G., Chakraborty, A., Jain, S., & Barua, M. (2007). *Stigmatization of severe mental illness in India: Against the simple industrialization hypothesis*. *Indian Journal of Psychiatry*, 49(3), 189.
- [14] Jeffery, R., & Singal, N. (2008). *Measuring disability in India*. *Economic and Political Weekly*, 22-24.
- [15] Jonsson, T., & Wiman, R. (2001). *Education, poverty and disability in developing countries: A technical note prepared for the Poverty Reduction Sourcebook*. Retrieved September, 8, 2008.
- [16] Gandhi Kingdon, G. (2002). *The gender gap in educational attainment in India: How much can be explained?*. *Journal of Development Studies*, 39(2), 25-53.

- [17] Kandamuthan, M., & Kandamuthan, S. (2004). *The economic burden of disabled children on families in Kerala in South India*. In *iHEA 2007 6th World Congress: Explorations in Health Economics Paper, Centre for Development Studies Discussion Paper (No. 91)*.
- [18] Kwok, S. M., Tam, D., & Hanes, R. (2018). *An exploratory study into social welfare policies and social service delivery models for people with disabilities in China*. *Global Social Welfare*, 5(3), 155-165.
- [19] Loyalka, P., Liu, L., Chen, G., & Zheng, X. (2014). *The cost of disability in China*. *Demography*, 51(1), 97-118.
- [20] Loeb, M., Eide, A. H., Jelsma, J., Toni, M. K., & Maart, S. (2008). *Poverty and disability in eastern and western cape provinces, South Africa*. *Disability & Society*, 23(4), 311-321.
- [21] Lwanga-Ntale, C., & McClean, K. (2004). *The face of chronic poverty in Uganda from the poor's perspective: constraints and opportunities*. *Journal of Human Development*, 5(2), 177-194.
- [22] Mehta, C. Arun (2013-15). *Elementary education in India: Progress towards UEE*. *Analytical tables. NUEPA 2010-11 (PP-95), 2011-12 (PP-95), 2012-13 (PP-, 83&102), 2013-14 (PP100), 2014-15 (PP-95)*.
- [23] Mehrotra, N. (2004). *Women, disability and social support in rural Haryana*. *Economic and political weekly*, 5640-5644.
- [24] Meyer, B. D., & Mok, W. K. C. (2008). *Disability, earnings, income, and consumption (Harris School of Public Policy Studies Working Paper Series No. 06.10)*. Chicago, IL: University of Chicago.
- [25] Metts, R. (2004, November). *Disability and development*. In *background paper prepared for the Disability and Development Research Agenda Meeting*.
- [26] Mitra, S., Posarac, A., & Vick, B. (2013). *Disability and poverty in developing countries: a multidimensional study*. *World Development*, 41, 1-18.
- [27] Mitra, S., Findley, P. A., & Sambamoorthi, U. (2009). *Health care expenditures of living with a disability: total expenditures, out-of-pocket expenses, and burden, 1996 to 2004*. *Archives of physical medicine and rehabilitation*, 90(9), 1532-1540.
- [28] Mitra, S., & Sambamoorthi, U. (2006). *Employment of persons with disabilities: Evidence from the National Sample Survey*. *Economic and Political Weekly*, 199-203.
- [29] Mitra, S., & Sambamoorthi, U. (2008). *Disability and the rural labor market in India: evidence for males in Tamil Nadu*. *World Development*, 36(5), 934-952.
- [30] Mont, D., & Cuong, N. V. (2011). *Disability and poverty in Vietnam*. *The World Bank Economic Review*, 25(2), 323-359.
- [31] Morris, Z. A., & Zaidi, A. (2020). *Estimating the extra costs of disability in European countries: Implications for poverty measurement and disability-related decommodification*. *Journal of European Social Policy*, 30(3), 339-354.
- [32] O'Keefe, P. B. (2007). *People with disabilities in India: From commitments to outcomes (No. 41585, pp. 1-186)*. The World Bank.
- [33] Pinilla-Roncancio, M. (2015). *Disability and poverty: two related conditions. A review of the literature*. *Revista de la Facultad de Medicina*, 63, 113-123.
- [34] Rao, A. N. (2009). *Poverty and disability in India*. *Social Change*, 39(1), 29-45.
- [35] Rungta (2002) *Training and Employment of People with Disabilities*. *ILO Country Study*. [Internet]. Accessed 20th September 2010. Available at www.ilo.org/public/english/region/asro/bangkok/ability/download/indiafinal.pdf
- [36] Santosa, A., Schröders, J., Vaezghasemi, M., & Ng, N. (2016). *Inequality in disability-free life expectancies among older men and women in six countries with developing economies*. *J Epidemiol Community Health*, 70(9), 855-861.
- [37] Schultz, T. P., & Tansel, A. (1997). *Wage and labor supply effects of illness in Cote d'Ivoire and Ghana: Instrumental variable estimates for days disabled*. *Journal of development economics*, 53(2), 251-286.
- [38] Sen A. (1999) *Development as Freedom*. Oxford: Oxford University Press.
- [39] Sen, A. (2004) *Disability and Justice*. Keynote Speech. 2nd International Disability Conference, World Bank. [Internet] Accessed December 12th 2010. Available at <http://info.worldbank.org/etools/bSPAN/PresentationView.asp?PID=1355&EID=667>
- [40] Singal, N. (2010). *Education of children with disabilities in India*. *Education for All global monitoring report*.
- [41] Singh, P. (2014). *Persons with Disabilities and Economic Inequalities in India*. *Indian Anthropologist*, 65-80.
- [42] Stern, S. (1989). *Measuring the effect of disability on labor force participation*. *Journal of human Resources*, 361-395.
- [43] Tilak, J. B. (2002). *Determinants of household expenditure on education in rural India (Vol. 88)*.

New Delhi: National Council of Applied Economic Research.

[44] Trani, J. F., Bakhshi, P., Myers Tlapek, S., Lopez, D., & Gall, F. (2015). *Disability and poverty in Morocco and Tunisia: A multidimensional approach*. *Journal of Human Development and Capabilities*, 16(4), 518-548.

[45] Trani, J. F., & Loeb, M. (2012). *Poverty and disability: A vicious circle? Evidence from Afghanistan and Zambia*. *Journal of International Development*, 24, S19-S52.

[46] Thomas, M., & Thomas, M. J. (2002). *Status of women with disabilities in South Asia. Selected readings in community-based rehabilitation, series, 2*.

[47] Thomas, P. (2005). *Mainstreaming disability in development: India country report*. *Disability Knowledge and Research*.

[48] Zaidi, A., & Burchardt, T. (2005). *Comparing incomes when needs differ: equalization for the extra costs of disability in the UK*. *Review of income and wealth*, 51(1), 89-114.