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Thematic Analysis of the Challenges and Struggles Faced by Women with Disabilities in Pakistan

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Abstract

The study analyzed the life circumstances of Pakistani women with disabilities (WWDs) in urban and rural areas using focus groups, interviews, and participant observation. The majority had mobility problems, with the remainder being deaf or visually impaired. The average age was 40, and 62% were single. 23% of participants graduated from school after 14 years, while 51% had jobs and earned money. Women with disabilities face physical and psychological barriers, including poverty, difficulty getting married, and limited opportunities for education and social connections. To improve their lives, participants suggested building knowledge, empowering themselves, raising public awareness, changing the built environment, and identifying allies. The study highlights the need for access to communities, education, and equitable opportunities for women worldwide, leading to self-sufficiency, improved health, and economic well-being. The bravery of Pakistani women with disabilities is a great example of the existence of this report.

Keywords: Women with Disabilities, Discrimination, Feminism, Disability Rights, Double Jeopardy, Poverty, Violence and Abuse

Introduction

Feminism and women's rights movements are gaining global attention, allowing women to express grievances and challenge patriarchal systems (Gleadle, 2016). Disability rights movements are also gaining strength, with some jurisdictions enacting laws to prevent discrimination against people with disabilities. However, concerns about women with disabilities have not been addressed, focusing on poverty, limited access to resources, and violence against women. The inclusion of women with disabilities in feminist and women's movements is crucial (Paludi, 2010).

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Poverty affects women and girls with disabilities more than other women in developing countries due to patriarchal property ownership norms. Women with disabilities are marginalized and have less influence in the economy. Aid is less likely to reach them due to their limited resources (Dalal, 2010). Disability often leads to limited access to education and jobs, prolonging poverty and reliance. Programs focusing on limited poverty reduction are often not sensitive or designed to make it easier for them to compete for resources. This results in women and girls with disabilities being significantly more impoverished than other women in most regions, necessitating the urgent need for feminist movements to defend human rights and welfare (Humphrey, 2016).

Women with disabilities face increased abuse due to their reliance on male partners and family members, limited access to education and employment opportunities, and societal shame and animosity towards disability. They are more vulnerable to emotional abuse, sexual assault, and social classification. Ortoleva & Lewis (2012) reported that approximately 5% of children and teenagers with disabilities have access to training and education, while only 3% of young women are literate. Women with disabilities often struggle to access health services and are more prone to sexual assault in intimate relationships and institutional settings (Martin, et al. 2006). Addressing these concerns in feminist and women's rights movements may not be enough to advocate for these vulnerable women (Nixon, 2009).

Sharma & Saxena (2022) explores the challenges faced by women with disabilities in India, focusing on physical and mental disabilities. The study highlights barriers and discrimination at different life stages and age groups and suggests changes in attitudes and successful inclusion of women, including those with disabilities, in all aspects of life. It also highlights the lack of access to maternal health services in low-income countries and traditional gender roles. Mapuranga, Musodza & Gandhi's qualitative study (2015) on Marondera women with disabilities revealed educational, discriminatory, and limited employment opportunities. The study recommends implementing disability and special needs courses in teacher training colleges, in-service training programs for teachers, government commitment to improving education for women with disabilities, and prohibiting discrimination based on disability status.

Wehbi and Lakkis (2010) investigated education and employment in Bekaa, Lebanon, and attempted to discover the function of social work in alleviating the marginalization of women with disabilities. They take a feminist critical-disability theoretical approach, rejecting the notion that women with disabilities are passive victims of repressive situations. Schleiter, Statham & Reinders (2006) examined 178 women in Wisconsin's welfare reform transition, focusing on their poverty and chronic health issues. It found that health problems are linked to education level, and disability type significantly impacts outcomes. Women with less education are more likely to suffer from mental

health issues, depression, and post-traumatic stress, and face difficulties accessing non-work support.

Review of the Literature

Feminist women's rights and disability rights campaigns aim to challenge societal norms and promote social justice (Lloyd, 2001). Both movements emphasize the importance of personal experiences and societal barriers as the cause of disability (Garland-Thomson, 2002). However, women with disabilities face barriers to participation due to mobility, accessibility, and entrenched preconceptions (Gerschick, 2000). Few feminist platforms offer Braille materials or sign language interpretation, limiting their engagement. Additionally, few workshop and conference planners ensure wheelchair accessibility, making them invisible in advocating for disability rights and gender equality (Hammad, Tehmina & Nidhi Singal, 2014). The exclusion of women with disabilities from leadership roles, particularly in women's rights groups, is also significant. Only a small percentage of women's groups have integrated disabled women into leadership roles, and more role models for young women with disabilities are needed to inspire their participation.

All of these are pressing issues that the feminist movement must address. It should be noted that the feminist movement, like the rest of society, still stigmatizes and discriminates against women with disabilities (WWDs). The feminist movement must recognize that, despite their promises to be inclusive, feminists frequently engage in ableism. Women with disabilities cannot fully participate in the women's movement if they perceive they are not treated equally (Habib, 1995).

WWDs have historically been excluded from the women's movement, however, there are significant links that bind all women and encourage sisterhood. According to Howe (1999), the feminist movement must emphasize handicapped women's concerns and involve them in the battle against injustice. However, due to cultural, legal, and institutional hurdles, the disability rights movement has not been as sensitive to the special issues encountered by disabled women (Naidu, Haffejee, Vetten & Hargreaves, 2005). Young disabled women frequently lack access to academic jargon used to describe women's experiences, and young disabled women who use Braille or sign language are unable to read feminist literature (Nosek, Howland & Hughes, 2001). When disability problems are considered secondary concerns, expecting full involvement from disabled women is unrealistic (Curry, Hassouneh-Phillips & Johnston-Silverberg, 2001).

This study examines the concept of gender and disability as social constructions influenced by physical traits and behavior. It argues that the experience of being a woman or having a disability is significantly influenced by social settings and cultural constructs. The prevalence of disability varies depending on factors like ability, gender,

socioeconomic level, employment, and location (Hussain, 2005). The research is set in Pakistani culture, where gender concepts evolved during human rights movements. It aims to understand the cultural representations, social dynamics, and institutions that shape disabilities in common sociocultural practices. The study also aims to shed light on how gender construction gives particular significance to the life experiences of disabled women. In Pakistan, there is limited scholarly writing on disabled women's experiences, with most studies portraying them as the most disadvantaged category.

Research Methodology

Participants

The study aimed to assess the current and ideal life circumstances of Pakistani women with disabilities (WWDs) in urban and rural areas. The researchers used methods such as focus groups, interviews, and participant observation. The study included 111 key informants from eight study locations, with Karachi having the highest participation rate (21%). The majority had mobility problems, with the remainder being deaf or visually impaired (23%). The average age was 40, and 62% were single. The majority of participants were farmers from rural regions, with some being jobless. The study found that incorporating WWDs in the evaluation is the most accurate approach to understanding their requirements.

Table 1
Characteristics of participants of focus group (N = 111)

Characteristics	f	%
1] Study Sites		
Islamabad	12	11
Karachi	23	21
Lahore	18	15
Gujranwala	13	12
Faisalabad	15	14
Peshawar	09	08
Muzaffarabad	09	08
Gilgit	12	11
2] Age Range (years)		
<36	29	26
36 – 45	74	67
>45	08	07
3] Educational Level		
Illiterate	23	21
Lower Secondary	13	12
Matriculation	26	23
Intermediate	15	14

Bachelor's	22	20
Master's	09	07
M. Phil/Ph. D.	03	03
4] Marital Status		
Single	69	62
Married	25	23
Widow/Divorced	17	15
5] Employment Status		
Employed	57	51
Jobless	54	49
6] Disability		
Visual impaired	26	23
Hearing impaired	29	26
Physical handicapped	37	34
Mental Illness	09	08
Others	10	09

Data Collection

Three methods for data collection include interviews, focus groups, and participant observation. Interviews provide detailed information on individual experiences, while focus groups encourage diverse viewpoints and encourage active participation. Focus group participants are not obligated to respond to every question, promoting sincerity and thorough responses. Participant observation offers real-world insights, unlike organized environments, by allowing participants to see people and events in a real-world setting.

Procedure

The study involved interviews and focus groups with participants who were asked to express their approval. The investigator recorded and transcribed the talks, with the help of a sign language interpreter. The three key categories of difficulties in a woman's living conditions were identified, along with solutions to solve these obstacles and stakeholders who must be included. Physical impediments, attitudinal barriers, and lack of opportunity were sub-categories of challenges. The investigator used snowball sampling to identify a small number of individuals and gathered four women from nearby communities. A targeted sample technique was used to gather information on various impairments and demographic factors. Women with disabilities were questioned in their homes or at a formal meeting site set up by the NGO or other groups in the neighborhood. The semi-structured interviews varied in length from 30 to 45 minutes, with open-ended questions on their knowledge, attitudes, and personal experiences.

Findings

The following six categorically selected themes are used to present the findings:

Theme 1: Physical barriers in the community leading to segregation

Theme 2: Struggles in a woman's personal life

Theme 3: Comparison between urban and rural women's experiences

Theme 4: Comparing the experiences of men with disabilities (MWDs) with women with disabilities (WWDs)

Theme 5: Who should be associated with stakeholders?

Theme 6: Reasons of hope

Theme 1: Physical Barriers in the Community Leading to Segregation

The study examines physical barriers in Pakistan's communities, particularly for women who face difficulties accessing key locations like schools, marketplaces, businesses, and hospitals. Children in rural and urban slum regions often walk to school, affecting their education prospects. Parents often lack funds for transportation, and girls face numerous steps to reach their classrooms. The research also focuses on unmarried, single mothers or widows with limited assistance. The food market at the research sites is inaccessible to wheelchairs, and most women in Pakistan travel on foot or in public transportation. Many women reside on the outskirts or back roads, making it difficult to access these services.

1.1 Subtheme: Attitudes that are Against Women

Many women with disabilities face prejudice in their households, as parents prioritize their siblings' education over their own, ignoring the potential benefits for their development. This prejudice hinders their well-being and leads to a lack of respect for their perspectives and absence from decision-making. Disabled women are often unable to lead their families and their younger siblings are unable to support them.

Women with disabilities face physical and psychological challenges when using public transportation, as drivers often leave their vehicles and lack patience. Some participants believe that WWDs should stay home and not be part of society due to their perceived disturbance. They are irritated by the extra time, demands, and space they take up and drivers often reprimand them for using wheelchairs, crutches, or white canes.

Social marginalization of WWDs is a significant issue, with some sources claiming they are not included in mainstream educational institutions. Misconceptions about WWDs and their children with impairments are also perpetuated.

1.2 Subtheme: The Relationship between Disability and Poverty

Women with disabilities (WWDs) in Pakistan face significant financial burdens, starting in their early years and lasting throughout their lives. Many families struggle to afford medical care for their daughters, leading to difficult financial decisions and a lack of formal education. Many WWDs worry more about money when choosing to have children, as some require cesarean deliveries, which are often out of reach for them. This leads to financial struggles, disease, and poverty. The shame of not having enough money to send their children to college or university is another issue faced by WWDs. To supplement their income, they share clothes, shoes, and other items in their households. An informant from Gilgit claims that WWDs often supplement their income by selling dry fruits, nuts, and candies in front of their homes.

Theme 2: Struggles in a Woman's Personal Life

Close relationships and social bonds are crucial for WWDs, but forming lasting relationships can be challenging. Many feel embarrassed to be seen with a person with a handicap, even within their own family. Informants with impairments report that their friends' interactions with them have changed significantly since their disability began. One disabled individual is unable to leave her house or work, and only one of her friends visits her. In their community, people prefer not to help WWDs due to physical restrictions, as they rarely get the opportunity to repay favors. Overall, forming true friendships and long-lasting partnerships is essential for women with disabilities.

2.1 Subtheme: Difficulties with Marriage and Raising a Family

The informants expressed concerns about finding a compatible marriage partner for women with disabilities, citing the misconception that disability is infectious and cultural standards against working and caring for the home simultaneously. They also reported psychological stress from engaging with a man who only saw their weaknesses rather than their abilities. They also expressed fear of being abandoned by men who appeared devoted but were not, and expressed enjoyment in being single. Unmarried informants expressed fear of being "used" by males, while married mothers reported support from their husbands. Most informants wanted to have one to two children but did not insist on getting married due to the belief that relationships with males were often marred by exploitation and lack of commitment.

2.2 Subtheme: Opportunities are Lacking on Many Levels

WWDs face numerous challenges in reaching their full potential, including physical, psychological, and financial constraints that prevent them from attending school. Parents often neglect their daughters' education, leading to a lack of confidence and self-esteem among them. This discourages them from exploring local educational alternatives for employment and self-efficacy. Organizations often refuse to recruit WWDs due to accessibility modifications, and many companies do not provide opportunities for them to showcase themselves. In Pakistan, legislation mandating 2% of jobs for persons with disabilities is not effective in practice, as they lack the necessary education and skills. WWDs require extra care from their parents, family members, and children, forcing them to prioritize their needs. They become functionally reliant on others due to long stays in rehabilitation institutions and support. Many village informants are unable to leave their homes due to mobility assistance, and their daily necessities are met by their families without pushing them to take a small role in their lives.

Theme 3: Comparison between Urban and Rural Women's Experiences

Discussions revealed distinct differences in the lives of women born in cities, those who relocated from villages to cities, and those who lived in villages from birth.

3.1 Lower Quality of Service and Limited Access to Healthcare

Rural women face limited healthcare access due to financial constraints and long travel times to urban institutions. Many are unaware of their health issues and local medical personnel struggle to diagnose them. One woman, who couldn't afford a hospital, sought advice from a traditional healer who turned out to be a charlatan who stole her money and disappeared.

3.2 Less Availability of Mobility Aids

Rural women often lack mobility assistance due to limited access to medical clinics, cost constraints, and ignorance about such aids. They lack wheelchairs, tricycles, crutches, and walkers, preventing them from venturing outside their homes and relying on the floor for mobility.

3.3 The Likelihood of Sexual Assault Rises as a Result of Segregation

Rural homes are often distant, and family members often work on farms, leaving informants alone. This increases the risk of sexual abuse. One source reported feeling

profoundly afraid while her sister and mother were gathering crops, leaving her alone at home.

3.4 Few Opportunities to Network with Other WWDs

An informant remarked that rural women's rights faced a lack of networking due to a higher percentage of women in metropolitan areas, the existence of disability groups, and higher education levels, leading to more solidarity and advocacy among WWDs in urban areas.

3.5 Increased Sensitivity of WWDS in Villages

The study found that women with disabilities (WWDs) in rural areas experience more positive interactions with rural people, as they are more cheerful and caring. They also report that their neighbors are more understanding and supportive, compared to the lack of such incidents reported by women in urban areas.

Theme 4: Comparing the Experiences of MWDs with WWDs

The participants reported common difficulties, such as discrimination, accessibility issues, and job struggles, among other issues. However, the specific issues raised by the informants were unique to them and not shared by men with disabilities (MWDs), as listed below.

4.1 WWDs Face Greater Obstacles to Getting Married

The study reveals that MWDs face easier marriage difficulties than WWDs due to societal gender norms. Women are expected to handle all aspects of home life and work outside the home, making WWDs less desirable mates. MWDs can choose to marry a physically fit woman, and at least half of MWDs are married, indicating a higher frequency of married MWDs in study sites.

4.2 Obstacles to Having Children

Informants reported significant differences in their experiences with having children compared to MWDs who typically have able-bodied women. They faced financial concerns about paying for a cesarean operation and also experienced worry about the pregnancy and delivery process, particularly the agony associated with it.

4.3 Marginalization of WWDs among People With Disabilities

Informants claim that men's opinions are more accepted than women's contributions in group meetings. They attribute this to women being reserved and lacking assertiveness

towards male counterparts with difficulties. Another source suggests that women themselves, who are too timid to assume leadership roles, are marginalizing MWDs, not themselves.

Theme 5: Who Should be Associated with Stakeholders?

The study aimed to identify stakeholders who could improve the lives of people with disabilities (WWDs) by assessing their needs. The majority of respondents believed rehabilitation services were crucial for improving their lives through lobbying and financial assistance. Financial constraints make it difficult for parents to take their children to school, causing distress for women. Some informants were aware of the law allowing parents to waive their children's school tuition but found it difficult and unfamiliar. The Ministry of Health was not a crucial player, as WWDs have social service requirements rather than medical needs. Spiritual authorities were identified as important stakeholders, providing emotional support, accessibility, and inclusion in programs. Collaborations with the Ministry of Women's Affairs were suggested to address WWD concerns.

Theme 6: Reasons for Hope

WWD continuously strives for personal and group improvements, tackling challenges head-on to enhance their lives.

6.1 Individual Support

Investigators found that a woman's willpower can lead to positive transformations in her life. One woman, unable to pursue a teaching degree due to institutional constraints, sought help from the provincial ministry of education to complete her degree. Other participants are forming alliances with the community to raise public awareness and dispel misconceptions about people with disabilities. They organized a day for people with disabilities, suggested bench spacing, and wrote a book about their lives in Khyber Pakhtunkhwa.

6.2 Group Initiatives

The Special Needs Women Entrepreneurs (SWE) is a group of women who teach others skills to manage community businesses and integrate into society. They aim to change others' perceptions of themselves by teaching each other and changing their own. The group uses a solution-focused approach to identify gaps and encourage participants to suggest ways to better satisfy their needs, connecting women and promoting independence and empowerment.

6.3 Empowerment

Most informants believe their efforts and goals have led to positive improvements in their lives. Key traits of a successful World Women's Day (WWD) include independence, self-esteem, and assertiveness. To remove preconceived notions, participants need to demonstrate their capabilities and attempt feats considered impossible. Even if a woman can only contribute 10-20% of a work, she should still strive. Assertiveness is crucial in daily conversations, and WWDs should be aware of their self-image and ignore negative comments. Focusing on abilities rather than limitations establishes a good self-image, positively affecting others' perceptions.

6.4 Education

Empowering women is crucial for improving their quality of life and reducing poverty. Informants, who had limited educational options as young girls, understood the importance of change for future generations. Parents should be aware of the benefits of sending their child to school, such as financial independence, reducing poverty risk, and improving love chances. Some informants believe in educating WWDs about reproductive health and rights and seeking sponsorship for procedures or medical care. Employees interested in making money, such as computer use, knitting, needlework, and craft creation, are eager to acquire entrepreneurial skills.

6.5 The Assistance of Family and Friends

Women believe parents play a crucial role in deciding their daughters' opportunities, and they advocate for their informed consent about WWD's initiatives. A woman shared her father's decision to prevent her from finishing secondary school due to her disability, emphasizing the significance of parental support in promoting girls' education and job opportunities.

6.6 Improving the Public's Perception

Informants suggest a paradigm shift for women's groups to empower women through education and desensitization. They suggest WWDs should use public transportation or market interactions to spread awareness and pressure the government to include them in decision-making. They also emphasize that educating the public also involves educating the government, as empowering women requires a shift in mindset.

6.7 Changing the Surroundings Physically

The study highlights the challenges faced by women in their communities, particularly in accessing public spaces. Informants are seeking architects to discuss accessible building

design, and women are advocating for the construction of accessible internet cafés and athletic facilities. The study concludes that for accessibility to be a reality, the entire community must embrace it.

6.8 Making Connections with Regional and Global Partners

WWDs need local and international support to advance as an organization. They have consulted religious leaders and school principals to promote accessibility to educational institutions and raise awareness of WWD concerns. They also have connections with international NGOs offering both material and intellectual assistance.

Discussion

The World Health Organization (WHO) (2011), reports that 80% of the 600 million persons with disabilities worldwide live in low-income countries, with women making up 75% of the population. This raises questions about healthcare access and gender inequality. Women are more likely to become handicapped due to resource allocation issues and lack of preventative treatment. In industrialized nations, the number of women with disabilities (WWD) is larger than men with disabilities (MWD), but fewer women live with impairments in low-income nations due to underreporting and inadequate treatment.

Research in the Philippines found that 80% of women with disabilities (WWDs) were unemployed and reliant on others for basic needs (Vaughan, Gill-Atkinson, Devine, Zayas, Ignacio, Garcia & Marco, 2020). In Nepal, where marriage is the norm, 80% of WWDs are single (Maya, 2006). In Zambia, they are often left out of reproductive health education initiatives (Smith, Murray, Yousafzai & Kasonka, 2004).

Gender is defined as a power dynamic based on perceived sex differences expressed via societal structures and organizations. Gender is seen to influence all aspects of social life due to the unequal distribution of benefits, power, and responsibility (Wendell, 1996). The division of labor, the exercise of power, and cathexis are the fundamental components of any gender order or gender regime in society (Maas & Hasbrook, 2001).

According to Abu-Habib (1997) and Gleeson (1997), disability is a power dynamic between handicapped people and able-bodied people that devalues and excludes them from mainstream society. Disability scholars have also investigated the function of the disabled body in identity development, focusing on its experience in, on, and through the body (Meekosha, 1998 & 2004). Shakespeare (2003) stated that the social environment impacts disability definition and perception by building the physically handicapped body as a sign of weakness and societal worries about control and identity within the culture.

Jenny Morris argues that gender identity and disability identification differ for men and women, with masculinity often glorified for power and ideal physique, but being a man doesn't equate to weakness. The message highlights the traditional male heterosexuality and disabled people's needs, presenting opposing roles and identities. Anthropologist Murphy (1988) supports these assumptions, stating that paraplegic men's gender lives represent passivity and reliance, opposing masculine ideals of direction, action, initiative, and control. This supports the stereotypes of disabled individuals.

Oliver (1990) and Morris (1991 & 1998) argue that disability prejudices are reinforced by gender assumptions about women, with dependency, helplessness, and fragility being major patriarchal cultural linkages. This results in unflattering and subservient representations of crippled women. Saxton and Howe (1988) highlight two extreme viewpoints about crippled women: one is highly negative, describing their lives as miserable and tragic, and the other is highly positive. Disabled women are often seen as inspirational creatures, elevated to sainthood by those who believe they have overcome their disabilities.

Oliver (1990) argues that scholarly writings have not adequately explored the experiences of women with disabilities, citing Deegan and Brooks (1985) as supporting this. Despite the focus on disability, women have received little recognition or research, and the disability movement has primarily focused on male experiences. Oliver cites Fine and Asch's (1985) research, which found that while handicapped women cannot fill typical male work positions, they are often denied traditional feminine duties like parenthood, while handicapped men can still desire strong masculine roles in society.

The first attempts to explore the lives of handicapped women proposed the double peril theory, which holds that women endure prejudice because they are both women and disabled. Hannah and Rogovsky (1991), cited by Lloyd (1992), claim that handicapped women experience things in addition to being disabled women. These women face two stigmatized identities, highlighting their precarious gender status. The double jeopardy viewpoint exposes issues they face, but handicapped feminists reject it, believing it portrays them as helpless victims and lacking agency.

Building on the feminist theory of difference, disabled feminists underlined that the experiences of women with disabilities cannot be placed into generic categories of gender or disability experiences (Vernon, 1998). Disabled feminist scholars proposed an alternative understanding of disabled women, a new framework that allows an exchange between disabled theory and feminism (Morris, 1998; Schriempf, 2001).

The study's focus has now shifted to impaired women and their gendered/disabled experiences in the communities in which they live. This shift in emphasis was made feasible by the concept of difference flowing via gender and disability conceptualizations.

Furthermore, handicapped men and women recount their experiences in a gendered manner, with both the content and styles reflecting how the existence of a disability changes gender expectations (Meekosha, 2004). This study has only looked at women since it is believed that looking at both genders will divert attention away from the purpose of shining light on how people deal with gender and disability in their daily lives.

Efforts to improve the lives of women with disabilities (WWDs) include community-based rehabilitation and microcredit efforts. However, these programs often overlook WWDs. Women often acquire prosthetic equipment from male technicians in poor nations, limiting their mobility due to gender and cultural barriers. In India, women with disabilities are trained to work as technicians, but these programs have not yet benefited Pakistani women. This study aims to fill a research deficit on WWDs in Pakistan by creating inclusive programs that address women's interests and concerns.

Recommendations

The investigators are putting the informants' suggestions into action to improve their quality of life.

1. Community-based rehabilitation workers help women with disabilities overcome discrimination and limited opportunities by raising awareness, providing assistance, and setting goals, creating a change model that spreads to other families.

2. Policies should fund hospital accommodations, adapted equipment, cesarean deliveries, and critical pharmaceuticals to expand primary healthcare access for women with disabilities, promoting their participation and decision-making as partners in development.

3. The requirements analysis suggests that numerous participants could mentor young GWDs and their families, providing valuable experience, information, and guidance to the next generation. A project could be initiated to compile a list of interested WWDs in towns and cities, who could then be provided with mentoring by CBR staff or disability support organizations.

4. Informants frequently discuss physical obstacles in the neighborhood, emphasizing the need for architects and the Ministry of Public Works to involve Persons with Disabilities (PWDs) in the design and modification of new structures. There have been discussions about PWDs serving as consultants, but it's unclear if this has been formalized yet.

5. Informants claimed to be acquainted with transport drivers who avoided discrimination by being patient and kind to those with disabilities. It could be useful to suggest labeling 4-5 cabs as "disability-friendly taxis," for example. Disability organizations can work with local drivers' unions to accomplish this.

6. Historically, PWD self-help initiatives and women's movements have not collaborated effectively. WWDs can enhance their societal voice by collaborating with other oppressed groups and those facing similar challenges.

7. The study suggests strategies to tackle socioeconomic determinants of health in women with disabilities, including disparities in education, employment, income, and social support.

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