

Women with Disabilities During COVID-19 Pandemic: A Tripartite Estrangement

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Abstract

The pandemic of COVID-19 has affected all sections of the society, irrespective of gender, wealth, race, geographic demography, etc. However, women with disabilities have been disproportionately impacted during this period. The Social Model of Disability has helped in recognizing the long-standing issues of discrimination in resource allocation, reduced access to healthcare facilities, increase in domestic violence, and other such oppressions suffered by women with disabilities. Women with Intellectual disability need care givers and during the pandemic their abuse heightened. The pandemic also exposed a lack of inclusive workplace structure and how the traditional mode was replaced by work from home but could not be modified earlier for persons with disabilities who face difficulties in commuting to the workplace. Access to online mode of education was also limiting for female students with disability during the lockdown period.

Keywords: Disability, COVID-19, Healthcare challenges, Marginalization, Intellectual Disability, Pandemic.

Introduction

Coronavirus disease or COVID -19 gripped the world in the wake of 2020. Although it emerged in Wuhan, China in November, 2019, it spread globally within few months. Many people succumbed to the disease worldwide. Globally, as of 5:47pm CEST, 22 April 2022, there have been 505,817,953 confirmed cases of COVID-19, including 6,213,876 deaths, reported to WHO. (WHO Coronavirus (COVID-19). Older people and those suffering from any medical conditions are at higher risk of developing serious symptoms from the disease. People with disability are also at higher risk than the able-bodied due to many medical as well as social and cultural factors.

Women with disabilities are doubly subjugated because of gender and impairment. During the COVID 19 pandemic, the lockdown became barrier in accessing healthcare facilities, negatively impacting their mental, physical and reproductive health. Gender based violence, physical, sexual and psychological abuse increased within the walls of homes during lockdown. Women with disabilities are in the marginalized section of the society and during the deadly COVID-19 pandemic, the

discrimination and exclusion was well marked. The pandemic has also brought to the surface the need for sensitization of the healthcare providers towards the needs of people with different types of disabilities. The lockdown hampered the assistance from trained caregivers that further restricted the practice of therapeutic exercises required for persons with disabilities suffering from paralysis, cerebral palsy, stroke, and so on. Inadequate primary care further aggravated the conditions of persons with disabilities. In addition to this, the socio-economic conditions made it difficult for the families to provide for assistance during the times of uncertainty. They are already estranged from the society and during this health crisis, this isolation negatively affected their mental health.

“People with disabilities have been differentially affected by COVID-19 because of three factors: the increased risk of poor outcomes from the disease itself, reduced access to routine health care and rehabilitation, and the adverse social impacts of efforts to mitigate the pandemic”. (Shakespeare, 2021)

Women with disabilities have been hit worse by the pandemic than the able bodied women. They were far removed from the locus of the societal structure. This tripartite estrangement of the women with disabilities is exacerbation of the disparities that were already at play in the shadows before the pandemic arrived. It is a result of all the discriminations endured by disabled women. There has been discrimination in the resource allocation, healthcare facilities and also in the availability of assistive devices. It is important to note that assistive devices require maintenance which is costly, and the closure of government aided rehabilitation centers further complicated the matter. It would not be wrong to state that during any health emergencies, resource allocation follows egalitarian and utilitarian ethics.

“Although it would be an oversimplification to say that healthcare switches completely from a focus on individual patient interests to utilitarianism, there is a shift towards the public health logic of maximizing the good for the greatest number of people, while remaining committed to equality of treatment”. (Scully, 2020)

The estrangement of disabled women from the society is a result of psycho-social factors as well as architectural barriers. The estrangement is also caused due to barriers in various types of accessibilities such as transportation, food and healthcare services. The physical barriers lead to the psycho-social barricades. The emotional well-being of women with disabilities is adversely affected due to these as they become estranged from their own identity. The struggle for identity is imperative due to constant discrimination and differences brought to the forefront during the pandemic.

Methodology

The research paper is interdisciplinary as it delves into the Social Model of Disability along with the Feminist Disability studies to analyze public health discourse during the COVID-19 pandemic, 2020 to 2022. The Social Model of Disability explores, as said by Tom Shakespeare:

“While the problems of disabled people have been explained historically in terms of divine punishment, karma or moral failing, and post-Enlightenment in terms of biological deficit, the disability movement has focused attention onto social oppression, cultural discourse and environmental barriers”. (Shakespeare, 2021)

The approach to the impact of COVID 19 on the lives of women with disabilities has been analyzed applying theories from the Feminist Disability Studies and the focus is on exploring the socio-economic, psychological, and architectural disparities that the women with disabilities suffered during the lockdown. Rosemary Garland-Thompson describes Feminist Disability Studies as:

“A feminist disability approach fosters complex understandings of the cultural history of the body. By considering the ability/disability system, feminist disability theory goes beyond

explicit disability topics such as illness, health, beauty, genetics, eugenics, aging, reproductive technologies, prosthetics, and access issues". (Garland-Thomson, 2002)

The aim of this paper is to acknowledge the experiences of women with disabilities during the lockdown. This study also highlights the limitations in opportunities provided to the women with disabilities at workplace which can be modified so that the workplace becomes accessible. The focus of the paper is to understand the tripartite marginalization of the women with disabilities which heightened during the COVID-19 pandemic.

Resilience of Women with Disabilities during the COVID-19 pandemic:

The gendered socialization where bodily differences is stigmatized is another factor causing the estrangement of women with disabilities. The gendered socialization allocates various roles and beauty standards for women. Disabled women fall far below this social ladder and it subsequently scars their self-worth. The confinement for the prevention of the spread of COVID infection, has resulted in increased rate of domestic violence at homes. Women with disabilities have been more at the receiving end of violence at homes. Poverty and lack of assistive devices negatively impacted the movement of women with impairments rendering them dependent on their family members. This created additional responsibilities at home, often resulting in resentment among family members. The pandemic had caused the social care and public utilities to be on hold till the situation became normal again.

"When assistive technology is not prescribed, maintained, or repaired, people with disabilities are rendered dependent. When social care is put on hold, cancelled, or reduced, people with disabilities are thrown back on the support of families if they have them". (Dorfman, 2021)

This dependence has exposed many disabled women to the harsh treatments by their family members. People have the tendency to fear the things they are unfamiliar with, the same was the case with COVID 19. The uncertainty of the outbreak has led to the mental breakdown of many people. Government and various organizations are spreading awareness regarding mental health so that the population can face the pandemic and address any mental issues troubling them.

"While the dust has not yet settled on the COVID-19 pandemic, it is clear that the pandemic has exacerbated or shed new light on myriad social and legal phenomena: from the politicization of public health measures to discussions of triage and the value of life". (Courtenay, 2020)

Disability is an umbrella term as there are so many types of disabilities including physical and cognitive. The experience is different for women with different kinds of impairments. Similarly, the effect of the pandemic is different on women with different disabilities. Women with physical disabilities need assistive devices to help them in their daily movement, whereas women with cognitive disabilities need constant support of their care givers or family members. The lack of proper information regarding the pandemic hindered the support and care of women with cognitive disorders which further lead to their alienation. Many challenges were faced by women with cognitive impairments during quarantine period causing more stress and mental breakdown.

"Cognitive impairments can limit understanding of information to protect them relying on carers to be vigilant on their behalf during quarantine. Restrictions on usual activities are likely to induce mental stress especially among those who are autistic leading to an escalation in challenging behaviours, risk of placement breakdown and increased the use of psychotropic medication". (Grier, 2020)

The resilience of women with disabilities in the face of pandemic, gendered discrimination, societal alienation, emotional isolation, and healthcare challenges needs to be addressed. Their resilience often became a source of exploitation in the able-bodied society. The needs of women with disabilities who were older in age or who had young children were also overlooked during the pandemic. The cultural narratives surrounding disability is oppressive in nature and this adversely

affects the identity of a person with disability. Their experiences at the face of pandemic should be emphasized to curb the disparities, ignorance, trauma, and abuse.

Intellectual Disability and Vulnerability:

Both men and women with intellectual disabilities were more vulnerable to the COVID infection than the able-bodied masses. Their ambience is dependent on the positive environment around them which is hard to expect during any global pandemic. Health issues and misinformation regarding their stance during infection are major causes of worry for people with intellectual disability,

“People with ID are at greater risk of infection for a range of reasons that include physical health problems, social circumstances and limitations in understanding”. (Glover, 2017)

Intellectual disability often brings physical ailments too. Women suffering from ID have lower life expectancy than nondisabled people. In such scenario of crisis, the pandemic poses greater risk for women with ID further causing their alienation from their family members or care givers so as to protect them from infection.

“The prevalence of comorbid physical disorders is higher among people with ID, and their life expectancy is lower than that of the general population with a standardised mortality ratio of 3.18”. (Goggin, 2020)

The pandemic turned the world upside down. The quarantine measures made the able-bodied population experience about life behind closed doors. This time the alienation was faced by everyone, irrespective of their ability or disability. Awareness was raised on large scale regarding the mental health of people in general as the alienation affected the mental health of everyone. In such adverse conditions, it was challenging for the nondisabled who were also on the precipice of mental breakdown, to care for the persons with Intellectual Disability, without any help from outside world. The closure of rehabilitation centers meant that the persons with ID had no other place to go. Women with ID became symbol of burden during the lockdown due to additional gendered norms. As such, women with ID were often at the receiving ends of verbal abuse at the hands of their family members. Degrading behaviour of family members towards women with ID during the lockdown was attributed to the mental pressure caused by the lockdown, however, it was a reflection of the resentment towards the persons with ID.

The Social Model of Disability focuses on how disability is different from impairment and that the lack of adequate means and inaccessibility rather results in disability. Women with disabilities have been estranged from the stereotypical society that focuses on their disabilities. The personality of a person with disability seems to be intertwined with his or her impairment. It hampers the full-fledged growth of disabled women and alienates them from their surroundings. The socialization of women again prescribes various duties for women and subjugates any woman who falls short of these expectations. The challenges during the pandemic further stratified women with disabilities. Various COVID norms such as wearing of masks and social distancing were difficult for disabled person to follow since a person with hearing impairment cannot understand what another person is saying if the said person is wearing mask as it makes it impossible for him or her to read the lips. Similarly, many times disabled people need assistance during their daily tasks and the pandemic resulted in quarantine and social distancing.

“Disabled people not able to wear masks were turned away from stores and shouted at, and there were even reports of violent confrontations over this issue”. (Dobrinsky, 2021)

Women with intellectual disability were at higher risk of sexual exploitation during the lockdown period. The isolation and deprivation further increased the risk of assault. Their sexual rights and bodily rights were compromised during the lockdown period as support groups became

unreachable. Addressing the healthcare needs and protection of women with intellectual disability against sexual, physical and emotional abuse is imperative.

Impact of Digitalization on Women with Disabilities during the COVID 19 pandemic

Digital accessibility opened new doors for persons with disabilities as education could be accessed online, and work from home culture was adopted by everyone. The shift in the approach towards education and workplace during the lockdown period assisted persons with disabilities by eliminating the barriers of travelling. The architectural barriers makes it difficult for a disabled person to commute to the workplace or university or school. The transportation system is not disability friendly thereby making journeys to and from the workplace or educational institutes has been challenging for the persons with disabilities. The technological advancements introduced new opportunities during the times of uncertainty. Women with disabilities too have been able to reconnect to the world with the help of social media and internet. Work from home opened new opportunities for disabled women too. Work from home became the new norm during the pandemic in order to decrease the rate of infection among people. This opened new horizons no one had previously imagined. It was found that there are many high paying jobs with positive career advancement opportunities that can be done from the confines of home. It is not surprising to say that this came to light only when the locomotion of the able-bodied population was hampered. The lack of these opportunities in the past signifies how the decision making is handled by the able-bodied who are in majority. It was difficult for women with disabilities to take care of home, family and kids, and move to their workplace on a day to day basis. The pandemic showed us how various things can function differently but it was not rendered necessary until it affected the population in majority.

However, there is digital divide that needs to be approached as although technology brought inclusion of persons with disabilities in education and professional front, there is discrimination in accessibility of the required devices for women with disabilities. The digital inclusion of women with disabilities is challenged by preconceived gender norms. Women with disabilities face exclusion as it is arduous for them to get hold of devices needed to access online education or remote jobs. Women with disabilities are the marginalized community in our society and this digital exclusion negatively affected their education, employment and civic engagement during the COVID pandemic. If the gender and economic barriers are overturned, it would not be exaggeration say that digital inclusion of persons with disabilities will foster educational and professional growth promoting inclusion in digital economy.

“As social media and other digital platforms have become more accessible, PWD have been increasingly able to make use of them for tasks and interactions, both general and disability specific, that enhance their lives. In fighting to have these options available and making use of them for video chatting, working remotely, and activism, for instance, PWD likely paved the way for millions of those who were scrambling to put them to use during the social upheavals of the pandemic”. (Barnartt, 2010)

The access to social media platforms has been helpful in the inclusion of women with disabilities in social participation. Social cohesion during the times of uncertainties is significant in cultivating solidarity. A sense of belonging, and recognition in this diverse community is helpful in emotional well-being of a person. COVID 19 pandemic adversely affected the mental health of people and the digital inclusion was beneficial in navigating through psychosocial barriers. The workplace became accessible for women with physical impairments as it reduced the daily challenge of physically commuting to the workplace. The socio-economic barrier also affected the female students with disability as they were not the first to be given access to devices for joining online classes. In a way, online learning platform was available only to those with access to laptops, mobiles, and internet. Male students are often

prioritized at home for providing education and female students with disabilities are on many occasions ignored.

“Tactile communication and navigation is inevitable, making self-isolation more challenging. This digital divide impacts not only access to apt information but, more critically, access to education. Though technology can be a boon for the disabled, the required infrastructure is absent”. (Barnartt, 2010)

The lack of support of the family is another challenge that women with disability face on everyday basis. They are often not visualized as a future earning member of the family and the idea that they would always be economically dependent hampers their access to education and learning. The socio-economic discourse has always been ushered by male, able-bodied mass where the opportunities for persons with disabilities, especially women, are scarce. The economic burden adds to the social stigma associated with women with disabilities.

Conclusion

The pandemic might have brought women with disabilities closer to the world outside their closed caskets, it also isolated them in their own household. Women with disabilities are the invisible victims of violence at home and such cases skyrocketed during quarantine period. The government and the local authorities couldn't help them in relocation or even in safeguarding their survival, as the pandemic curbed all sorts of assistance. Helpline numbers were circulated by the Government authorities but the success rate of actual help provided to the victims of violence, was very low. Women with disabilities suffered the tripartite estrangement during the pandemic as they suffered prejudice against their gender, disability and poverty. The sudden collapse of the previously assumed normal ways of life, also put weight on the pocket. It was costly to follow the new norms, buy masks and sanitizers, and afford the medications required during the infection. The maintenance of assistive devices and medications for any health conditions stressed the monetary stance of disabled women or people with disability in general. Poverty and disability are interconnected and the role of wealth during any pandemic can't be overstressed. Therefore, the lack of adequate means isolated the women with disabilities who found it challenging to take care of themselves and their family during such difficult times. Disability is a *fluid state* (Ghai,2021) and women with impairments suffer from the burden of standardization and simultaneous exclusion. The COVID situation has brought to the surface many never before asked questions.

“The inclusion of people with disabilities in the COVID-19 response should be remembered throughout all post-recovery stages by assessing their needs and ensuring that they are consulted and can participate in policy development, programme design, and implementation. A better future has to grow from learning the lessons, listening to the life experiences of people with disabilities, and making meaningful investments that improve the wellbeing and socioeconomic conditions of people with disabilities”. (Shakespeare, 2021)

The new norms are mocking the established and previously unchallenged assumptions of the workplace culture. Quarantine measures have exposed the unsafe status of women with disabilities at their own homes. The stigma and stereotyping further marginalizes the disabled women. It can be said that the pandemic has truly revealed the tripartite estrangement of women with disabilities, that is, isolation from the society, alienation from their family and lastly, isolation from their own personality. Therefore, it is important to challenge the way discourses around the COVID pandemic is constructed. The epistemology towards pandemic studies should be inclusive in nature focusing on the disparities brought by patriarchal and ableist approach.

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