

WOMEN WITH DISABILITIES AND THEIR HEALTH ISSUES: A PRECISE STUDY OF THE RAJOURI DISTRICT.

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ABSTRACT

Health is a basic human right and every person can enjoy it . According to the World Health Organization a condition of perfect physical, mental, and social well being not only absence of disease or infirmity. The health of women with disabilities a great concern and they have too right to access health institutions and can lead a healthy life. But the studies revealed the women with disabilities are facing challenges and disparities like higher rates of chronic diseases, not fulfilled needs and violence. To fulfill the objectives of the research a study has been designed to generate the data on the subject by using the qualitative data collection method. Qualitative research approaches seek to explore, observe and analyze the data . An empirical investigation using an interview schedule will increase theoretical understanding. This research is empirical in nature and depends on both primary as well as secondary sources of data collection. The primary data has been collected through field work and secondary data has been collected through Government Record, data from various Organizations , books, articles, journal published and newspapers articles. Respondents have been selected by using snowball sampling techniques . The researcher has selected 15 women with disabilities Data was collected through face to face interview with the respondents using a structured interview scheduled. The finding of the study are lack of infrastructure, lack of trained professionals, lack of awareness are the main obstacles for women with disabilities.

Key Words: Disability, Health, Issues, Women.

INTRODUCTION

As per an estimate World Health Organization around 1.3 billion persons have considerable disability. Persons with disabilities have to face severe health issues as compared to the non disable population.

Persons with disabilities denotes to as a person who have long term physical, mental, intellectual or sensory impairments which in interaction with barriers , restrict their full and effective participation in society on an equal basis with others.

World Health Organization in 1948 defines health as a phrase which is still applicable in modern time. ‘Health is state of physical, mental and social well being not merely the absence of disease or infirmity’.

World Health Organization in 1986 defines Health as a resource to endorse a person’s role in broader society rather than end in itself a healthful manner of living renders the means to lead a full life with meaning and purpose’.

Lancet [2009] defines health as ‘quality of body to accommodate to new danger and feebleness ‘.

Article 12 of the United Nation convention states that all form of discrimination should be eliminated drafts women’s protection from gender based discrimination when getting health services and women entitlement to specific gender related healthcare facilities.

Article 25 of the United Nation Convention on the Rights of Persons with Disabilities stipulates that’ Persons with Disabilities have the right to the enjoyment of highest attainable standards of the health without discrimination on the basis of disability’.

Women with victim of diseases are vulnerable and disadvantaged section of the society. They are facing various health challenges due to their lack of mobility , accessibility, awareness and lack of health professionals. They can not visit health institutions for their screening and treatment. So most of disable women become victim of diseases.

Review of Literature ;

Angus & et al [2012] states that disable persons have four time more possibility than the non disable because they are refused from medical services including cancer screening.

Saikia et al [2016] carried out a demographic study which analyzed the prevalence of disability among women in India. Their findings highlighted a significance gap in education, employment and health access by using census data. The findings revealed that they are most disadvantaged and living without basic services

Matin et al [2021] The study revealed that different socio economic and educational factors can resist the access of healthcare for the disable women. The study also revealed women with disabilities not merely facing healthcare challenges but too facing discrimination from the health professionals.

Research Methodology

The researcher has carried out a study in the Rajouri district of Jammu and Kashmir to know the about health challenges faced by the disable women. Exploratory research design has been selected for the present study. 15 women has been selected from different age groups and different socio economics background. Snowball sampling technique has been adopted. For gathering responses interview scheduled has been used.

Results and Discussions

This study reveals that women with disabilities experience various health barriers like inaccessibility in health institutions, lack of awareness, lack of trained health professionals, and costly medicines and treatment which not affordable by them. The present study has been conducted from December 2024 to January 2025 from the disable women who visited health institutions for their treatment . Mostly women show their dissatisfaction over health institutions.

Table 01

Age Group	Frequency	Percentage
21-25	3	20 %
26-30	3	20 %

31-35	4	27 %
36-40	5	33 %

33 % women belong to the age group between 36 to 40 years 27 % between 31 to 35 years 26 % between 21 to 25 years and 20 % between 21 to 25 years.

Table 02

Awareness Regarding Health and Hygiene

Number of Disable Women	Awareness	Percentage
6	Yes	40 5
9	No	60 %

The above numerical data shows that 40 % women with disabilities are aware about their health concerns and hygiene and 60 % are un aware This reflect majority of the women with disabilities are not aware due to lack of education and health awareness.

Table no 03

Educational Standard	Frequency	Percentage
Graduate	2	13 %
Twelfth	4	27 %
Tenth	9	60 %

The study revealed that only 13 % women with disabilities are graduate These women have of information and knowledge regarding their sexual and reproductive health. This reflect educational level of disable women impact on their health awareness. 27 % women with disabilities are 12th pass who have limited information regarding their sexual and reproductive health. And 60 % are matriculates who have no information regarding their sexual and reproductive health.

Table 04

Viewpoints	Frequency	percentage
Satisfy	5	33 %
Dissatisfy	10	66 %

This table shows that only 33 percent women with disabilities are satisfy over the treatment infrastructure and attitudes of health professional and 66 percents are dissatisfy. This shows majority of disable women are dissatisfy.

Conclusion and Recommendations

This study is an attempt to explore, analyze and navigate the health concerns of disable women in Rajouri District. While interacting with disable women the researcher has drawn the following conclusions

Disable women have lack of health infrastructure.

Disable women are not aware about the health concerns and hygiene.

Dearth of trained professionals in the health institutions.

Recommendations

Awareness programs should be conducted at grass root levels through anganwadi workers and asha workers to aware the disable women regarding their basic health concerns

Time to time training programs should be organized for the doctors and paramedic how to deal with disable persons specially women.

Infrastructure should be design by considering the needs of disable persons so they can easily access health institutions for their treatment.

Health professionals should nr imparted training to deal with women with disabilities. Increase the efficiency among health professionals.

Rights of persons with Disabilities Act should be properly implemented. The Right of Persons with Disability Act underscored the heath of disable women.

There is need of the hour to build barrier free infrastructure so that the women with disabilities can easily access the health institution.

Awareness should be imparted among the women with disabilities and community for proper medical check up and screening.

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