

From the Heart to the Bottom: A Study on the Sexual Life of Differently Abled Persons in Sulthan Bathery Taluk, Wayanad District of Kerala

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Abstract

Differently abled people face societal misconceptions and stigmas that hinder their sexual expression and fulfilment. This study explores the sexual lives of differently abled individuals, who suffering with Epilepsy and Locomotor disability, aged between 18-35 years in the Sulthan Bathery Thaluk of Wayanad District in Kerala, which recognizing their unique experiences, challenges, and desires. The main objective of this research is to gain a comprehensive understanding of the diverse perspectives, needs, and aspirations of differently abled individuals regarding their sexual lives, also make an expedition to the stigmas and discriminations. Also, it is analysing the barriers of sexual health education dedicated to the differently abled people. The study also investigates the role of assistive devices, accessible spaces, available resources, and supportive relationships in enhancing the sexual well-being of differently abled individuals. The aim of the study is to shed light on the physical, psychological, and societal factors that influence the sexual experiences of differently abled people. The study also aims to foster a more inclusive society that recognizes and respects the sexual rights and autonomy of all individuals, regardless of their abilities.

Keywords: Differently Abled, Sexual Life, Social Exclusion

Introduction

Addressing social inclusivity in the society is pertinent, however need to assert its challenges, in particular advocating towards the inclusivity of differently abled people. The sexual life of differently abled people is an important and often overlooked aspect of their lives. People with disabilities have the same rights and desires as everyone else and should be empowered to enjoy a fulfilling and satisfying sexual life. For many people with disabilities, sexuality is an important part of their identity and relationships. It is important to recognize that sexuality is a complex issue and can be affected by physical, emotional, and social factors. It is also important to recognize that sexuality is a personal matter and that people with disabilities have the right to make their own decisions about their sexual lives. With the right support and resources, people with disabilities can enjoy a healthy and fulfilling sexual life. Social exclusion has been a part of human history for centuries. One of the earliest examples of social exclusion can be found in ancient Greece, where the concept of ostracism was used to exile

people from the city for a period of ten years. Ostracism was used to protect the city from potential threats by removing people from the city who were deemed to be a danger to the community. In the Middle Ages, social exclusion was often used as a form of punishment for those who violated the laws of the Church or of the state. People were often excluded from participating in communal activities, such as attending church services, and were sometimes even banished from the community entirely. In the early modern period, social exclusion was used to control the lower classes and to prevent them from challenging the power of the elite. This often took the form of laws that prevented certain classes of people from owning property or from participating in certain activities. In the 19th and 20th centuries, social exclusion was used to maintain racial and gender inequalities. Laws were passed that prevented certain elite groups of people from participating in certain activities, such as voting, and that restricted their access to education and employment opportunities. Today, social exclusion is still used to maintain power and control over certain groups of people. This can take the form of laws that restrict access to certain services, such as housing, or that limit access to certain activities (Amartya Sen. 2000). The problem of sexual life among differently abled people, especially in India is an important yet often overlooked issue. Differently abled people often face a variety of challenges when it comes to their sexual lives, such as physical, emotional, and social barriers. Furthermore, there is a lack of research and resources available to support their sexual health and well-being. As a result, an absence of information can lead to a lack of awareness of differently abled people's needs and experiences, as well as a lack of support and tools to assist them in navigating their sexual lives. The objective of this study is to comprehend the sexual lives of persons with disabilities in India and to discover effective measures to enhance their sexual health and well-being. The study includes the sexual life of differently abled persons suffering from locomotor disability and epilepsy aged between 18-35 years in Sulthan Bathery Taluk, Wayanad District, Kerala. Locomotor disability and epilepsy are different from other disabilities due to the specific nature of their impact on an individual's functioning and their underlying causes. Locomotor disability refers to a condition that affects a person's ability to move or control their limbs or body, resulting in difficulties in walking, standing, or performing other physical activities. Epilepsy is a neurological disorder characterized by recurrent seizures, which are sudden and temporary disturbances of the brain's electrical activity. Seizures can cause a variety of physical symptoms, altered sensations, and loss of consciousness. While locomotor disability primarily affects physical mobility and independence, epilepsy primarily affects neurological functioning and can lead to unpredictable seizures. Locomotor disability and epilepsy are both important topics because they have a significant impact on individuals' lives and require attention from various perspectives, including medical, social, and policy aspects. They affect individuals' lives, require specific healthcare and support services, involve social and policy considerations, and drive the need for further research and advancements. By addressing these conditions with empathy, understanding, and proactive measures, we can work towards a more inclusive and supportive society for all.

As per the data, which has been published on the website of Social Security Mission of Kerala Government in October 2015, there are 115 persons in Wayanad district under epilepsy and locomotor disability. Among those, 72 are males and 43 are females. Collected sample is, 25 differently abled people from 8 different panchayats of the concern thaluk among those 13 males and 12 females, 2 programme coordinators from institutions that taking care of the differently abled people in the thaluk, 5 government officials and from the 3 main religious leaders. Total 35 individuals from the Sultan Bathery thaluk of Wayanad district in Kerala. The selection of sample design refers to random sampling method.

Both primary and secondary data has been collected. The field work was conducted during the month of 10th April 2023 to 10th May 2023. Data has been collected through semi-structure questionnaire, focus group discussions as well as government data was undertaken to understand the statistics and state program carried out. Secondary sources like vernacular magazines, published and unpublished materials are extensively used for data collection.

Review of Literature

Sexual life of the differently abled people is an important part of their overall wellbeing. While they are facing certain challenges due to their disability, there are many ways to ensure that they can still enjoy a healthy and fulfilling sex life. This includes understanding their individual needs and finding ways to communicate and engage in activities that are enjoyable for both partners. It is important to provide resources and support for those who are differently abled to help them navigate the complexities of sexual relationships. This could include providing access to sex education and counselling, as well as creating safe and inclusive spaces for them to explore and express their sexuality. Moreover, it is important to understand that everyone, regardless of ability, has the right to experience pleasure, intimacy, and connection.

Sexuality and disability are two topics that are often intertwined and can be difficult to discuss. The Publication Manual of the American Psychological Association, Seventh Edition says that sexuality or sexual orientation is a broad term that encompasses many aspects of an individual's sexual identity, including gender, orientation, and sexual behaviour. In contrast, disability is a term used to indicate a physical or mental impairment that might hinder a person's daily activities. The study of sexuality has been a growing field of research for many years. It has been studied from multiple perspectives, including biological, psychological, and social. Michel Foucault's view on sexuality is that it is a form of power, a way of controlling and disciplining individuals. Foucault argued that sexuality is not something that is naturally given or predetermined, but rather something that is constructed through social and cultural practices. He argued that the power of sexuality is used to create and maintain power structures in society. While coming to the concept of sexuality, Michel Foucault in his book "The History of Sexuality" (1978) argues that the modern notion of sexuality is a product of modern power structures, and that it has been used to regulate and control people in a variety of ways. He examined the concept of sexuality has been used to shape gender roles, sexual identities, and even social norms. Foucault scrutinized the ways in which modern Western societies have sought to understand and control sexuality. Foucault divided his book into three volumes: *The Will to Knowledge*, *The Use of Pleasure*, and *The Care of the Self*. In *The Will to Knowledge*, Foucault examined the ways in which modern Western societies have sought to understand and control sexuality. He argued that the modern concept of sexuality was created by the scientific and medical discourses of the 19th century. He also looked at the ways in which power is used to regulate and control sexual behaviour. In *The Use of Pleasure*, Foucault examined the development of sexual ethics in Greco-Roman antiquity. He argued that the ancient Greeks and Romans had a much more open and accepting attitude towards sex than modern Western societies. He also looked at the ways in which the ancient Greeks and Romans used pleasure for personal growth and development. In *The Care of the Self*, Foucault investigated the individual-society interaction. He contended that the individual is not only a result of social circumstances but is also capable of forming their own identity and making their own decisions. The nutshell of Foucault's

argument is that sexuality was used to control and shape people's behaviour and that it was used to maintain the status quo.

Kaya Das and T Sathendra Rao in their article “A Chronicle of Sexuality in the Indian Subcontinent” (2019) give a comprehensive picture of the region's sexual history, from ancient times to the present. They address how sexuality has been regarded, governed, and expressed in the subcontinent, as well as how these perspectives have evolved through time. The writers begin by exploring how sexuality has been seen on the subcontinent, from the ancient Vedic period to the present day, how sex, marriage, and gender norms were governed and represented in the area, and how sexuality has been portrayed in literature, art, and music. The article is an excellent resource for those interested in learning more about the history of sexuality in the Indian subcontinent. According to Indian culture, sexuality is not something to be ashamed of, but rather something to be embraced and explored. The concept of sexuality in India is based on the idea of Dharma, or duty, which emphasizes the importance of fulfilling one's responsibilities and obligations to society and to oneself. Indian culture also recognizes the importance of pleasure and encourages individuals to find joy and satisfaction in their intimate relationships. Indian culture also emphasizes the importance of consent, respect, and communication in sexual relationships.

The article “Indian Concept on Sexuality” by Kaustav Chakraborty and Rajarshi Guha Thakurata (2013) provides a comprehensive review of the Indian concept of sexuality. The authors explore the various aspects of Indian sexuality, including its historical, religious, and cultural influences, also discussing the current state of Indian sexuality and its implications for contemporary society. The authors begin by exploring the historical roots of Indian sexuality, beginning with the Vedic period and the ancient Hindu texts. They discuss the role of the Upanishads and the Mahabharata in shaping the Indian concept of sexuality. Also mentions the influence of the various Hindu gods and goddesses on Indian sexuality. The authors then move on to the role of religion in Indian sexuality. They analyse the various religious texts, including the Vedas, Upanishads, and the Mahabharata, to understand how they shape the Indian concept of sexuality. They also evaluate the influence of Buddhism, Jainism, and Islam on Indian sexuality. The authors then discuss the cultural influences on Indian sexuality. Analysing the various cultural norms and practices, such as arranged marriages, dowry, and the purdah system, and how they shape Indian sexuality. Finally, the authors discuss the current state of Indian sexuality and its implications for contemporary society. They investigate the different difficulties confronting Indian society, such as the frequency of sexual assault, a lack of sex education, and gender inequality. Overall, this article gives a thorough examination of the Indian idea of sexuality. It examines the numerous historical, theological, and cultural influences on Indian sexuality, as well as the ramifications for modern society. This article adds significantly to the body of knowledge on Indian sexuality and should be of interest to scholars and practitioners in the subject.

The article “Sociology of Disability in India” (2017) by Vikash Kumar and Ketaki Dwivedi is a comprehensive literature on disability in India. It provides a detailed analysis of the various aspects of disability in India, including the social, economic, political, and cultural aspects and an overview of the various policies and programs that have been implemented to address the issue of disability in India. The article begins by discussing the concept of disability and its various definitions. Then it moves on to discuss the various types of disabilities and their prevalence in India. It emphasises the fact that some social groups, such as Scheduled Castes and Scheduled Tribes, have a greater prevalence of handicap. It also investigates the numerous social, economic, political, and cultural aspects that lead to the

marginalisation of disabled persons in India. It discusses how the lack of access to education, employment, and healthcare services further marginalizes disabled people and how the stigma attached to disability further exacerbates the problem. The article then discusses the various policies and programs that have been implemented to address the issue of disability in India. It highlights the role of the National Policy for Persons with Disabilities and the Rights of Persons with Disabilities Act, 2016 in providing legal protection to disabled people. Overall, the article provides a comprehensive review of the literature on disability in India. It provides a detailed analysis of the various aspects of disability in India, including the social, economic, political, and cultural aspects and an overview of the various policies and programs that have been implemented to address the issue of disability in India. Society's views of disability can be both positive and negative. On one hand, some people see disability as a challenge to be overcome and view disabled people as inspirational for their determination and strength. On the other hand, some people may view disability as an obstacle or a burden and may even discriminate against those with disabilities. Overall, it is important to remember that everyone is different, and that disability should be seen as a natural part of life, rather than something to be feared or judged.

Ranjita Dawn, in her book “The social model of disability in India” (2021) explores how the social model of disability has been adopted in India. She examines how this model has been used to inform policy, create services, and empower people with disabilities. She also looks at its implications for disability rights, health care, education, employment, and other areas. The book provides a comprehensive overview of the socialization of disability in India, including its history, principles, and implementation. It also provides an in-depth analysis of how the model has been used to create a more inclusive society. Finally, it outlines the potential of the socialization of disability to transform the lives of differently abled people in India.

When we connect both concepts, the disability and sexuality, together it is one that often overlooked or seen as taboo. People with disabilities are often seen as asexual, or unable to participate in sexual relationships. This is a misconception, as people with disabilities can and do engage in sexual relationships, just like anyone else. It is essential to recognize that the differently abled people have the same rights to sexual expression, intimacy, and autonomy as anyone else. This includes the right to make decisions about their own bodies and to access resources that can help them explore their own sexuality in a safe and affirming way. It is much needed to recognize that the differently abled people may face additional barriers to sexual expression, such as communication difficulties, physical limitations, and access to resources. It is important to provide support and resources to people with disabilities to help them explore their sexuality and make informed decisions about their sexual health.

The book “Introducing the New Sexuality Studies” (2016) edited by Nancy L. Fischer and Steven Seidman, deals with the ideas of sexuality studies. The book is basically a collection of different articles from different authors. In chapter 11, Thomas J. Gerschick says about the concept of disability and sexuality. He believes that disability and sexuality are important aspects of human life that need to be discussed and explored in a respectful and meaningful way. He argues that disability is often seen as a source of shame and stigma, and that it is much needed to recognize that the differently abled people can also experience sexual desire and pleasure. He also believes that disability should not be seen as an obstacle to healthy, meaningful sexual relationships, and that people with disabilities should be provided with the same opportunities to explore and express their sexuality as everyone else. Gerschick also emphasizes the importance of understanding the unique needs and experiences of people with

disabilities, and of providing them with access to appropriate resources and support to ensure that their sexual health and well-being are respected and supported.

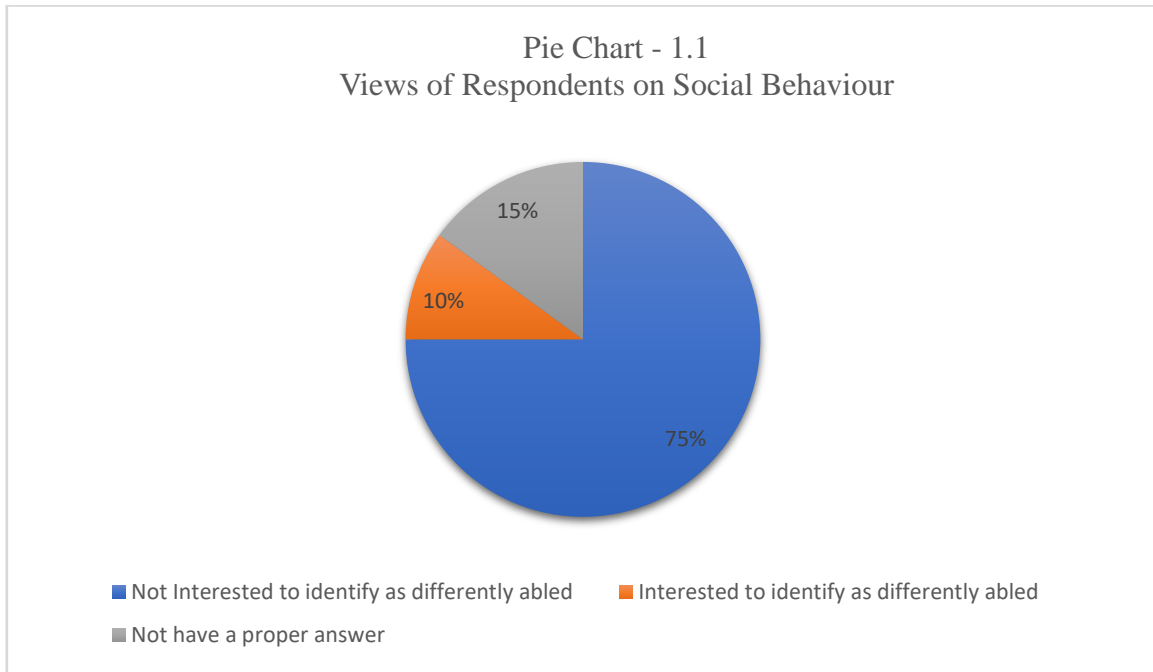
Social Behaviour and Sexual Life of the Differently Abled People

Social behaviour refers to the actions, conduct, and interactions of individuals within a social group or society. It encompasses a wide range of behaviours that occur in various social contexts, including personal relationships, communities, organizations, and cultures. Social behaviour is influenced by a combination of genetic, psychological, and environmental factors. The social behaviour and sexual life of differently abled people can vary widely depend on the individual and his/her disability. It is important to understand that disability does not define a person's identity, and their social and sexual experiences. However, there are certain considerations and challenges that may be more prevalent for differently abled individuals. The study focusses on certain themes that will be used in the following topics. They are:

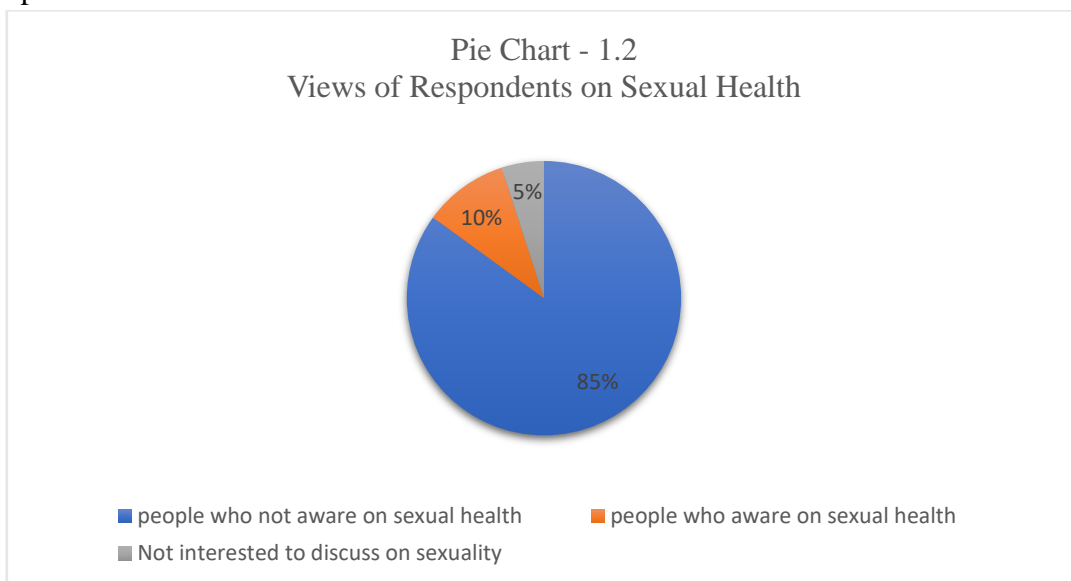
1. **Inclusion and Accessibility:** Differently abled individuals may face barriers to social participation due to physical, sensory, or cognitive limitations. Creating inclusive environments and providing accessibility accommodations can help promote their social inclusion.
2. **Stigma and Discrimination:** Unfortunately, differently abled individuals may encounter stigma, misconceptions, and discrimination in social interactions. This can affect their self-esteem and willingness to engage socially. Promoting acceptance and understanding can help combat such biases.
3. **Support Networks:** Building supportive relationships with family, friends, and community members is important for everyone, including differently abled individuals. Support networks can provide emotional support, companionship, and opportunities for social engagement.
4. **Individual Variations:** Differently abled individuals have diverse sexual orientations, desires, and needs, just like anyone else. It is essential to recognize their autonomy and respect their individual choices and preferences.
5. **Access to Sexual Education:** The study highlights the vulnerability of disabled people, that they are prone to social exclusion. The visibility of exclusion raises a need of comprehensive and inclusive sex education. This may address the issues disabled people encountered and may provide a further inclusive policies.
6. **Physical and Communication Considerations:** In accordance with the nature of the disability, individuals may encounter physical constraints or difficulties in communicative capacities. Mitigation of these impediments and the facilitation of sexual expression and intimacy can be achieved through the implementation of adaptive strategies, utilization of assistive devices, and incorporation of alternative communication methodologies.
7. **Consent and Boundaries:** In the context of sexual relationships, the imperative principles of consent and the acknowledgment of personal boundaries are paramount. It is incumbent upon individuals with varying abilities to possess a comprehensive understanding of their entitlements, articulate their consent effectively, and exercise autonomy within the realm of their sexual interactions.
8. **Support and Resources:** The utilization of supportive resources, encompassing sexual health services, counselling provisions, and peer support groups, can prove advantageous for individuals with diverse abilities as they negotiate their sexual lives. Such resources not only provide valuable

guidance and information but also furnish a secure environment for the deliberation of concerns and the sharing of experiences.

Below diagram shows that, 75% of the respondents are not willing to identify themselves as a differently abled (special categorised) person to the society. They are aware of their disability, however, consider themselves as normal as the others in the society. 10% need special recognition and identification. 15% not have a proper answer about the social behaviour and recognition. Socially they are matured, hardworking and ready to take challenges.



When coming to the sexual life, most of them are not much aware of the concept of sexuality. 85% of the respondent did not get any special trainings or awareness on sex education programmes. 5% get trainings and awareness classes on sexual health. 10% not interested to discuss the sexual health and life. They are aware about sex from their basic internet and general knowledge. There are very few institutions are giving sex education programmes especially for differently abled people, but the criteria are that the person should a member of the institution.



Disability within the religion structure

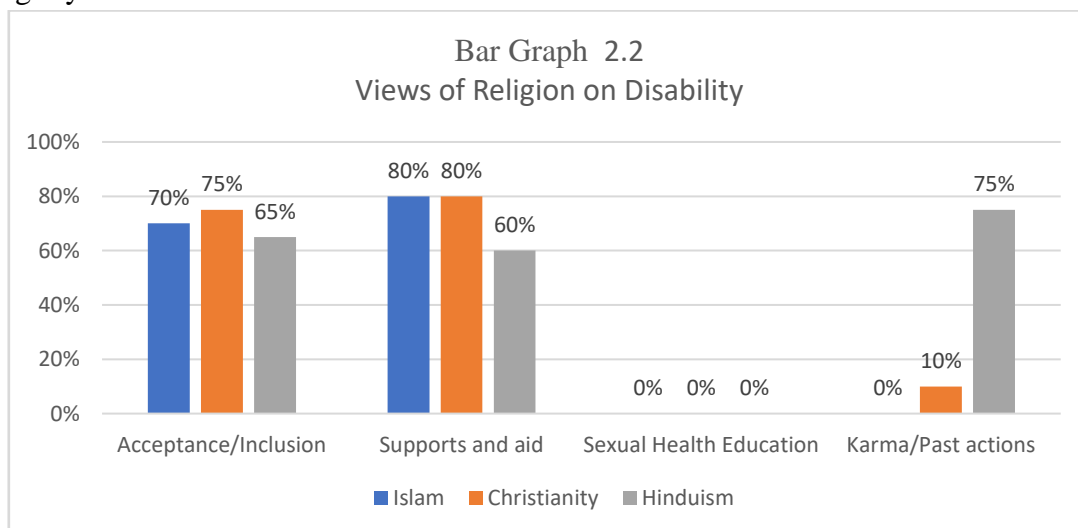
In the context of the Indian milieu, the examination of religious dynamics assumes paramount significance, given its profound impact on the intricate tapestry of history, culture, and social structures. India is known for its diverse religious landscape, with Hinduism, Islam, Christianity, Sikhism, Buddhism, and Jainism being some of the major religions followed. One can see the significant role interplayed by religion in the daily activities like rituals, festivals, in the form of art, music and food. Different religious communities contribute to the vibrant and diverse cultural tapestry of India. Interestingly, religion play a core role in the social, cultural, and political scenario of Kerala. Hinduism, Islam, and Christianity are the major religions in Kerala. Following discussions with representatives from these three religions, it is possible to discern information pertaining to the social behaviour and sexual health of individuals with disabilities.

1) Islam, like many other religions, encompasses a wide range of beliefs and interpretations. While there is no single, monolithic view of disabled people within Islam, the religion encourages its followers to treat all individuals with compassion, respect, and dignity, regardless of their physical or mental abilities. Islam teaches that all human beings are equal in the sight of God, and that disabilities should not be a basis for discrimination or mistreatment. Interpretation and understanding based on Islamic beliefs, disability is seen as a test from God, and individuals with disabilities are considered to have the same potential for spiritual growth and reward as anyone else. Islam emphasizes the inherent dignity and worth of every human being. Muslims are encouraged to treat all individuals, including those with disabilities, with kindness, respect, and fairness. Islam promotes the inclusion of disabled individuals within the community. Muslims are encouraged to support and assist those with disabilities, ensuring their participation in social, religious, and educational activities to the best of their abilities. Islamic teachings encourage Muslims to provide care and support to disabled individuals, including medical treatment, emotional support, and assistance with daily activities. It is considered a virtuous act to help those in need, including individuals with disabilities. Islam emphasizes the importance of patience and acceptance in the face of challenges and adversity. Differently abled individuals are seen as having the opportunity to develop patience and resilience, and their experiences may serve as a means of personal growth and spiritual elevation.

2) Christianity encompasses a wide range of beliefs and interpretations, so views on disabled people can vary among different Christian denominations and individual believers. Christianity teaches that all human beings are made in the image of God and possess inherent worth and dignity. Therefore, disabled individuals are seen as equally valuable members of the human family, deserving of love, respect, and care. Jesus emphasized love, compassion, and care for those who are suffering or marginalized. Many Christians believe in following his example by offering support, assistance, and inclusivity to disabled individuals, both within the church community and society. Christianity teaches that the Church is the "body of Christ," made up of diverse members with different abilities, gifts, and roles. This perspective encourages the inclusion and active participation of disabled individuals within the Church, recognizing their unique contributions and value. Christianity acknowledges the reality of human suffering and recognizes that disability can be a part of that experience. Some Christians believe that through suffering, individuals can find redemption and draw closer to God. However, it is important to note that this perspective does not diminish the importance of addressing the practical needs and rights of disabled individuals. Many Christian communities strive to create inclusive and accessible environments, both physically and spiritually, to ensure that disabled individuals can fully participate in worship,

community activities, and the sacraments. This may involve providing accommodations, adapting spaces, or utilizing assistive technologies. Christians are called to seek justice and stand up for the marginalized. Some Christian organizations like The Christian Council on Persons with Disabilities. They provide education, resources, and advocacy for disability inclusion and individuals advocate for the rights and well-being of disabled individuals, promoting equal access to education, employment, healthcare, and social participation. It's crucial to recognize that within the wide spectrum of Christianity, different interpretations and beliefs can exist, which may lead to variations in attitudes and practices towards disabled people. Additionally, the experiences and perspectives of disabled individuals themselves can vary greatly, it will change time to time and place to place.

3) Hinduism, as a diverse and complex religion, encompasses a wide range of beliefs and perspectives. Hinduism emphasizes the concept of karma, which suggests that an individual's present circumstances, including their physical or mental abilities, are a result of their actions in past lives. According to this belief, a person with a disability may be seen as experiencing the consequences of actions from previous lifetimes. However, it is essential to note that this perspective does not imply blame or judgment, but rather an understanding that everyone is on their unique karmic journey. While some people within the Hindu community may hold traditional beliefs about disabilities, there are also numerous examples of Hindu teachings and texts that emphasize compassion, inclusivity, and the equal worth of all individuals. Hindu scriptures, such as the Vedas and the Upanishads, contain passages that encourage respect and care for all human beings, irrespective of their physical or mental abilities. Hinduism encompasses the concept of *daridra narayana seva* which means serving God in the form of the impoverished or the needy. This principle highlights the importance of serving and supporting those who are marginalized or disadvantaged, including individuals with disabilities. Hinduism encompasses a rich history of acceptance and integration of people with disabilities. Throughout the centuries, Hindu temples and ashrams have provided shelter, care, and support for people with disabilities. There are also numerous stories and legends within Hindu mythology that feature characters with disabilities, highlighting their strengths and virtues. It is worth noting that societal attitudes towards disabilities can vary, and some communities may still hold stigmatizing views. However, Hindu teachings of compassion, empathy, and inclusivity provide a foundation for promoting respect and equality for all individuals, including those with disabilities. Modern interpretations and practices within Hinduism often reflect a more inclusive and supportive approach towards people with disabilities, focusing on their abilities, potential, and inherent dignity.



The above data which has been collected from the local religious leaders, it is evident that the three religions highlighted do not engage in pivoting the sexual wellbeing of the differently abled in their community. Different religions may view certain individuals in distinct ways, assigning them unique roles or statuses within their respective religious frameworks, thereby distinguishing them from the general population. There is discrimination on basis of physical impairment. The detailed response of the religious perspective on disability is mentioned in the above table.

As seen from the data, it is debatable that the individuality and autonomy of differently abled individuals are not acknowledged enough in the society, especially on matter like their social behaviour and sexual lives. Differently abled although are given importance in theory, however, they are marginalised in reality. The daily struggle of seeking social connections, companionship, intimacy, and fulfilment in their relationships endure. Disability does not diminish the importance or legitimacy of these desires. Societal attitudes and barriers can significantly impact the social and sexual lives of differently abled people. Negative stereotypes, misconceptions, and stigmatization can create barriers to forming relationships, accessing sexual health information, and enjoying a fulfilling sexual life. It is crucial for society to promote inclusivity, eliminate discriminatory attitudes, and provide appropriate support and resources to empower differently abled individuals. It is essential to recognize that differently abled individuals have diverse abilities and needs, including those related to their sexual lives. Some individuals may require specific accommodations or support to navigate their sexual experiences. Open and respectful communication, consent, and the provision of accessible sexual health information and services are essential in fostering a healthy and fulfilling sexual life for differently abled individuals.

Impact of Social Stigma and Discrimination on Differently Abled People

Differently abled individuals encompass a diverse group of people who have physical, sensory, intellectual, or mental impairments that may affect their ability to participate fully in society. Examples include individuals with mobility limitations, sensory disabilities, developmental disorders, or mental health conditions. Social stigma refers to negative attitudes, beliefs, and stereotypes held by society towards individuals with disabilities. It involves labelling them as "abnormal," "inferior," or "incapable," which results in their marginalization and exclusion from various aspects of social life.

Erving Goffman in his book "Stigma: Notes on the Management of Spoiled Identity" (1963) explores the concept of stigma and its effects on individuals in society. According to Goffman, stigma refers to a deeply discrediting attribute or characteristic that sets a person apart from others and leads to their devaluation in the eyes of society. Stigmatized individuals are seen as deviating from societal norms or expectations, which results in their being labelled as socially unacceptable or tainted. Goffman emphasizes that the social reactions to stigma, rather than the attributes themselves, are what ultimately define the experience of stigmatized individuals. He introduces the concept of "passing," which refers to individuals' attempts to conceal or downplay their stigmatized attributes to avoid social devaluation. Passing involves managing one's presentation, concealing information, or adopting strategies to fit into the accepted norms of society. Goffman also discusses the notion of "disidentifies," which are attributes or characteristics that individuals use to deflect attention away from their stigmatized identities. For example, a person with a physical disability may try to showcase their intelligence or talents to counterbalance the negative judgments associated with their disability.

Discrimination against differently abled individuals involves treating them unfairly based on their disability. This discrimination can manifest in various forms, including limited access to education,

employment opportunities, healthcare, public facilities, and social interactions. These will pave the way to enhance low self-esteem, experience feelings of shame, guilt, or embarrassment, and internalize the negative perceptions society holds towards them. Such emotional distress can lead to anxiety, depression, and social isolation. Differently abled individuals often face barriers in accessing quality education due to social stigma and discrimination. They may encounter inaccessible learning environments, lack of appropriate accommodations, and prejudiced attitudes from educators and peers. These factors can hinder their educational achievements and limit their future opportunities. Many differently abled individuals face significant obstacles when seeking employment. Prejudices, misconceptions, and stereotypes held by employers often lead to discrimination in the hiring process. Limited accessibility in the workplace and inadequate accommodations further contribute to their exclusion from the workforce, perpetuating economic disparities. The social stigma and discrimination faced by differently abled individuals can result in their exclusion from social activities, relationships, and community participation. Negative attitudes and misconceptions may discourage others from engaging with them, leading to feelings of loneliness, isolation, and a diminished sense of belonging. Social stigma and discrimination have far-reaching consequences on the lives of differently abled individuals. Understanding the impact of these challenges is crucial for fostering a more inclusive and equitable society. By challenging stereotypes, promoting awareness, and implementing supportive policies, we can create an environment that respects and values the abilities and contributions of all individuals, irrespective of their disabilities. The impact of social stigma and discrimination on differently abled people is significant and pervasive. Throughout history, individuals with disabilities have faced various forms of prejudice, stereotypes, and exclusion, leading to profound consequences for their overall well-being and quality of life. The societal attitudes and perceptions surrounding disability contribute to the creation of barriers that hinder the full participation and inclusion of differently abled individuals in various aspects of society. It is important for society to recognize the unique abilities and potential of differently abled individuals and foster an inclusive environment that celebrates diversity. By challenging stereotypes, providing reasonable accommodations, and promoting inclusive education and employment practices, we can create a society that values the contributions and rights of all individuals, regardless of their abilities. Only through collective effort and a commitment to inclusivity can we eliminate the impact of social stigma and discrimination on differently abled people and build a more just and inclusive society for all. The concept of sexuality is little bit complicated and concerned matter in the society. There should be a good sense of health education needed for the wellbeing of the development of a human in the stipulated society. The reality is that there is not adequate support and spread of knowledge on the maintenance of good sexual health.

Role of Institutions, Authorities, Associations towards the Social Discriminations and Stigmas

Institutions and authorities play a crucial role in reducing discrimination and stigma against differently abled individuals. They are responsible for implementing policies, enforcing laws, and creating an inclusive environment that promotes equal rights and opportunities for people with disabilities. It can develop and enforce laws and policies that protect the rights of differently abled individuals. These may include laws against discrimination, accessibility requirements for public spaces, and guidelines for inclusive education and employment practices. It also can organize campaigns and awareness programs to educate the public about disability rights, the capabilities of differently abled individuals, and the importance of inclusivity. They can also collaborate with educational institutions to incorporate

disability awareness into curricula. It also can ensure that public spaces, transportation systems, buildings, and information and communication technologies are accessible to people with disabilities. This includes installing ramps, elevators, accessible toilets, and audio-visual aids, as well as providing alternative formats for written information.

After collecting the responses from the officials who are associated with the particular people, it is learnt that there are many limitations and problems faced by the officials. The first thing is that the lack of funds for the programmes and policies that should enhance and enrich the welfare of the differently abled people. Then it is identified that today the problems of differently abled peoples are outdated and not much focused. Lack of infrastructures are the basic problems for the wellbeing of the life of differently abled people. The government also focus more on the socio-economic-cultural life of the impaired persons rather than the sexual health and the mental wellbeing. Many public buildings are not disability friendly. The structure and the way of construction is entirely discriminative in nature.

Goffman's work on stigma highlights the social construction of identity, the impact of societal reactions on individuals, and the strategies employed by stigmatized individuals to navigate social interactions and reduce the negative consequences of their stigma. His insights continue to be influential in understanding the experiences of individuals facing stigmatization in various contexts. The argumentative point the chapter examined is the social stigma and discrimination faced by differently abled people, it is needed to highlight the need for comprehensive efforts to promote inclusivity, raise awareness, and combat societal biases to create a more equitable and inclusive environment for differently abled individuals.

Barriers of Sexual Health Education for Differently Abled People

Sexual health education is an essential component of comprehensive healthcare, promoting well-being, for decision-making, and prevention of sexually transmitted infections (STIs) and unintended pregnancies. However, when it comes to differently abled individuals, there are various barriers that hinder their access to and engagement with sexual health education. These barriers arise from societal attitudes, limited resources, inadequate support systems, and educational shortcomings, all of which contribute to a significant gap in sexual health knowledge among differently abled people. One of the primary barriers to sexual health education for differently abled individuals is the prevailing societal attitudes and stigma surrounding their sexuality. Many societies tend to perceive differently abled people as asexual or incapable of engaging in sexual relationships. This attitude leads to the exclusion of sexual health discussions, leaving these individuals without the necessary information to make informed choices about their bodies, relationships, and sexual health.

Erving Goffman, (1963) argues that stigmatized individuals are seen as deviating from what is considered normal or acceptable within a given society, resulting in various forms of discrimination and exclusion. When it comes to differently abled individuals, societal perceptions often stigmatize their bodies, capabilities, and identities. One aspect of this stigma is the perception of asexuality or incapability to engage in sexual relationships. This perception arises from common stereotypes and misconceptions about disability, if disability directly translates to a lack of sexual desires, interests, or abilities. Such perceptions contribute to the exclusion of differently abled individuals from discussions about sexual health. The assumption that they are not sexually active or interested can lead to neglecting their sexual and reproductive rights, denying them access to comprehensive sexual education, and limiting their opportunities to make informed decisions about their bodies, relationships, and sexual

health. Goffman's concept of stigma helps us understand how these negative attitudes and beliefs create barriers for differently abled individuals, impacting their overall well-being and autonomy. By stigmatizing their sexuality and assuming their asexuality or lack of sexual agency, society denies them the right to explore their sexual identities, have fulfilling relationships, and access the necessary information and support for sexual health.

Differently abled individuals often face limited access to comprehensive and accessible sexual health information. Educational materials, including books, brochures, websites, and audio-visual resources, are frequently not designed with their specific needs in mind. This lack of accessibility can include physical barriers, such as materials not being available in accessible formats like braille, large print, or easy-to-understand language, as well as digital barriers in terms of inaccessible websites or online content. It is identified that many differently abled individuals face communication and language barriers, which can impede their understanding and participation in sexual health education. Those who are deaf or hard of hearing may struggle to access information that is not presented in sign language or provided with adequate captioning. Similarly, individuals with speech or cognitive disabilities may encounter challenges in expressing their needs or asking questions, resulting in a limited exchange of information and support. Another important barrier is that educators and healthcare providers often lack adequate training on how to address the sexual health needs of differently abled individuals. This lack of knowledge and understanding can result in professionals feeling ill-equipped or uncomfortable discussing sexual topics, further perpetuating the information gap. Without well-trained professionals, the provision of inclusive sexual health education remains a challenge. Cultural and religious beliefs can also act as barriers to sexual health education for differently abled individuals. Some cultures may perceive discussions around sexuality as taboo or inappropriate, making it difficult to provide comprehensive information and support. Religious beliefs may also influence the availability and content of sexual health education, leading to significant gaps in knowledge and understanding. While considering the topic of the barriers of to access the sexual health education, efforts should focus on promoting inclusive and accessible educational materials, providing specialized training for educators and healthcare professionals, challenging societal attitudes and stigma, and fostering an environment that supports open dialogue about sexuality for all individuals, regardless of their abilities. By working towards inclusive sexual health education, we can empower differently abled individuals to make informed decisions, foster healthy relationships, and enhance their overall well-being. The barriers to access sexual health education for differently abled people are significant and demand urgent attention. Throughout this discussion, we have highlighted several key challenges that contribute to the limited access and availability of sexual health education for this marginalized group. These barriers include societal misconceptions and stereotypes, lack of inclusive curriculum and teaching materials, limited resources and training for educators, and the absence of safe and accessible spaces for discussing sexual health.

The argumentative point which we examined is that there is lack of inclusive curriculum: Existing sexual health education programs may not address the specific needs and concerns of differently abled individuals, leading to a lack of appropriate information and support.

There is stigma and societal attitudes: Differently abled individuals may face societal prejudices, marginalisation and stigmatization when it comes to their sexuality. This can create barriers to accessing sexual health education due to fear of judgment or discrimination.

Communication and accessibility challenges: Different disabilities can present unique communication and accessibility challenges. For example, individuals with hearing impairments may struggle to access information that relies heavily on spoken language. Similarly, individuals with visual impairments may face difficulties accessing written materials.

Limited availability of resources: There may be a lack of accessible resources and materials tailored to the needs of differently abled individuals. This can include materials in alternative formats such as braille, sign language, or easy-to-read formats.

Lack of trained professionals: A shortage of healthcare professionals or educators with expertise in addressing the sexual health needs of differently abled individuals.

Availability of Resources and Support

The availability of support and resources refers to the accessibility and provision of assistance and necessary tools or materials to individuals or groups who require them. It implies the presence of various forms of aid and assets that can be accessed or utilized to meet specific needs or achieve desired outcomes. Support can encompass a wide range of assistance, including emotional support, counselling, guidance, or practical help in addressing challenges or achieving goals. It may involve professional services, such as counselling or therapy, or support from friends, family, or community organizations. There are various support and resources available to promote and enhance the sexual lives of differently abled people. Organizations and groups such as National Centre for Promotion of Employment for Disabled People (NCPEDP), Sambhav Foundation, Equals Centre for Promotion of Social Justice, Enable Travel, et cetera. to focus on supporting differently abled individuals in various aspects of their lives, including sexual health and relationships especially in India. They can provide information, guidance, and resources tailored to the specific needs and challenges faced by differently abled people. Organizations and professionals offer sexual education programs and workshops specifically designed for differently abled individuals. These programs aim to provide accurate information, promote positive body image, enhance communication skills, and address specific concerns related to sexuality and disability. Consulting with healthcare professionals who specialize in sexual health and disability can be beneficial. They can provide guidance, answer questions, and offer appropriate interventions or treatments for specific sexual issues or concerns. There are online platforms and communities dedicated to discussing and addressing the sexual lives of differently abled individuals. These platforms provide information, support, and a safe space for individuals to share experiences, ask questions, and seek advice. Various adaptive devices and assistive technologies are available to support sexual activities for differently abled individuals. These can include specialized sex toys, positioning aids, or modifications to existing products to accommodate different needs. Joining or participating in peer support groups can be valuable for connecting with others who have similar experiences. These groups offer a space to share stories, exchange ideas, and provide emotional support. For individuals facing psychological or emotional challenges related to their sexuality, seeking therapy or counselling from qualified professionals can be helpful. These professionals can assist in addressing concerns, improving self-esteem, and enhancing overall well-being.

An interview was held with the district collector of Wayanad. As the data collected from that interview it is ascertained that currently Wayanad district is focussing on the sexual life of the LGBTQ communities. In the concerned district, there are numerous programs aimed at enhancing the social and economic lives

of differently abled individuals, yet there is a lack of active missions or programs specifically addressing the enhancement of their sexual lives in the Wayanad District of Kerala state.

It is evident that people with disabilities are suffering a lot of problems regarding the resources and the support that enhance the sexual health education. Good and effective education, adaptive technology, counselling, advocacy, and legal protections etc. will contribute to empowering individuals with disabilities to enjoy fulfilling and meaningful sexual experiences. It is crucial to continue advancing these efforts, fostering inclusivity, and challenging societal stereotypes to create a world where everyone can fully express their sexuality, regardless of their abilities.

Conclusion and suggestions

This study has intrinsically analysed sexuality and exclusion of the differently abled people. It has shown how differently abled people seek to understand their sexuality, emotional needs, and physical desires like the abled people. However, societal attitudes, misconceptions, and physical barriers significantly impact their sexual experiences, often leading to feelings of isolation, frustration, and discrimination. The study has examined the need for increase the awareness, education, and support systems to address these issues and empower differently abled individuals to explore and enjoy their sexual lives fully.

This study also emphasized the importance of recognizing the diverse nature of disability and avoiding generalizations. Everyone's experience is unique, and it is essential to approach the topic of sexuality with sensitivity, respect, and an open mind. By challenging societal norms and providing a platform for differently abled voices, the study argued the ongoing discourse surrounding sexual rights, inclusivity, and social justice. The findings of this research also emphasize the significance of breaking down societal stigmas surrounding the sexual lives of differently abled people. By promoting open dialogue, challenging stereotypes, and encouraging a more accepting and inclusive attitude, we can foster an environment that respects and celebrates the diversity of human sexuality. It is hoped that the insights gained from this study will serve as a foundation for further research, policy development, and advocacy efforts in the field of sexual health for differently abled individuals. By continuing to explore and address the specific needs and challenges they face, there may be result towards a society that embraces sexual diversity and ensures the right to sexual expression for all, irrespective of ability.

The study finds that there is a need of inclusive spaces, adaptive technologies, and training healthcare professionals, educators, and caregivers to address their specific needs and concerns of the differently abled individuals. Therefore, this study aspires try to understand the ongoing dialogue on sexuality, disability, and human rights. By comprehending the sexual agency and desires of differently abled individuals and advocating for their inclusion, we can foster a more inclusive and equitable society that celebrates the diversity of human sexuality.

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