

VOICES

Disability Studies Quarterly
Fall 2001, Volume 21, No. 4
pages 5-19 <www.cds.hawaii.edu>
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Disability and the Political Economy of Place: Case Study of a Voluntary Organization in South India

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Introduction

To geographers, space is viewed as a universal feature of all social relations - "a medium through which social life is produced and reproduced" (Rose 1993: 19). This is because geographers have described spatial structures as instrumental in mapping out the dialectical relationship between human beings and the social world they inhabit. Place, another geographical concept, is used to define this critical relationship between the spatial and the social. Place represents not only the geographical coordinates of location but also the hierarchical social relations located within specific spatial structures as well as the subjective meanings that are associated with these same structures (Cresswell 1996). It is this concept of place that I use to map out the social and material relationships that linked the professional and non-professional staff at DOST (a voluntary organization located in a large city in South India) with their clients, children with disabilities.

At DOST I found a persistent irony: the hierarchical boundaries traditionally used to distinguish between "client" and "service provider" were blurred. In voluntary organizations like DOST, it is commonly assumed that an organization's staff generally serves as benefactor to their clients who are portrayed as the beneficiaries of the charitable services offered through the organization. However, this ethnographic study of DOST revealed that contrary to this distinction, many of the non-professional staff - single, poor, lower caste women - spoke of lives of destitution that often seemed to outstrip by far the destitution experienced by many of the children with disabilities with whom they worked. This observation that blurred the hierarchical boundaries between benefactor and beneficiary led me to raise the following question: in what ways did these shifting hierarchical boundaries relate to the role "place" played in the construction of social difference at DOST? Responding to this question, I present an analysis of how and why certain bodies marked oppressively by class, caste, gender, and ability are associated with particular spatial orderings within segregated contexts like DOST.

Background of the Study: Mapping the Distance between "Us" and "Them"

Being a voluntary organization that caters to the needs of one of the most disenfranchised

segments of Indian society (i.e., children with disabilities), DOST is regarded as marginal to the central concerns of the Indian polity. However, Cresswell (1996: 149-50) points out that the margins, despite seeming to appear socially peripheral in relationship to the center, are, in fact, symbolically central to construction of the center and therefore cannot be categorically dismissed. Therefore, in this section of the essay that serves as the background for this study, I will map out the critical relationship between the margin (e.g. DOST) and the center (e.g. mainstream Indian society) using the methodological standpoint of political economy.

Broadly speaking, political economy maps out the complex relationship that exists between the economic interests of the state and the political interests of its citizenry. More specifically, I invoke Marxian political economy that conceives of political forces as originating in the dynamics of the capitalist economic process and as supporting a social division of labor that highlights class antagonisms (Caporaso & Levine 1992). Deploying this analysis, I will examine DOST's location within the broader political economic context of the Indian State and describe the implications this location has for those individuals associated with the organization.

The Voluntary Organization DOST

Started in the 1970s, in a context where services for people with mental disabilities were woefully lacking, DOST is a voluntary organization that offers a comprehensive range of services to children with disabilities living in both urban and rural areas in South India. DOST was the brainchild of Sister Benedict, a member of a religious order that is dedicated to providing charitable services to needy individuals in Third World settings. While Sister Benedict knew very little about disability when she first started this organization, her experiences working in her convent's hospital helped her provide the organizational structure and the vision that has sustained DOST through several difficult decades. Most of the difficulties are financial because DOST is primarily dependent on the Indian State and philanthropic organizations for its economic survival.

The annual operating budget for DOST is about 16 lakhs (1 lakh = 100,000 RS.) and DOST receives only one lakh from state agencies to meet its economic needs. This low contribution from the State is further exacerbated in the current political economic context of neoliberalism where the Indian State has refocused its energies to subsidize the structural adjustment policies of the World Bank and the IMF and has subsequently decreased its involvement in the welfare state (Sheth & Sethi 1991). While other populations dependent on social welfare have not fared as badly, persons with severe disabilities have been negatively affected by these cuts. This is because a market economy is geared towards the profitable extraction of labor from a productive and efficient workforce. In this context, the physical challenges that persons with severe disabilities experience, even after rehabilitation, are seen as impediments to the efficient and profitable extraction of labor geared exclusively to the maximum accumulation of profits (Soder 1984, Nibert 1995). It is, perhaps, because of this logic that the Indian State allocates less than 0.3% of its social welfare budget for services provided to persons with disabilities. As a result, organizations like DOST are encouraged by the State to augment their already scarce financial resources by soliciting philanthropic contributions from private wealthy donors and international aid agencies and by collecting fees from the few clients who can afford to pay for these services.

The majority of the children who receive services at DOST come from economically

destitute urban and rural households with a monthly income of less than RS. 600 (about \$20). However, not all the children who attend DOST are poor. Children from some of the city's wealthiest families also attend DOST, an unusual occurrence in a city that is otherwise clearly segregated on the basis of class. Thus, it appears that for the brief periods when all these children are at DOST, the segregation that is characteristic of a class and caste based Indian society is momentarily suspended. This is because, notwithstanding the differences in their social positions in mainstream society, it is the children's collective marginalization as beneficiaries of the voluntary organization on account of their disability that disrupts an otherwise rigid hierarchical social structure.

Since the organization derives an almost negligible income from the meager fees paid by its clients (most of whom are poor), DOST is forced to market itself in competition with other voluntary organizations for the attention of individuals and organizations committed to philanthropic practices. I use the verb to market deliberately to demonstrate that DOST is still subject to the effects of supply and demand - characteristic features of market economies. But while the working of supply and demand in market economies is geared to the realization of profit, in the non-profit sector supply and demand is subject to the dictates of a moral economy where exchange is not motivated by profit, but by an identification with abstract moral values (e.g. philanthropy). This realization, thus, places the onus on DOST to market its activities in such a way so as to demonstrate the moral advantages gained through any philanthropic interest in the organization.

DOST uses a number of marketing strategies to generate philanthropic interest in the organization. Every year Sister Benedict travels abroad to Europe, America, and Australia and distributes videos and other informational packets to elicit financial donations as well as inspire volunteers who are trained professionals to spend some time at DOST. At the local level, Sister Benedict organizes an annual function where the children perform songs, dances, and plays for an audience that includes wealthy donors, state officials, parents, and other supportive community members. In conjunction with this event, DOST also publishes a publicity brochure that is sold to all guests and is imprinted with a number that is then included in a general raffle drawing. Since both the international and local publicity campaigns are crucial for DOST's financial survival, Sister Benedict and her administrative staff are forced to deploy two competing yet complimentary discourses in order to enhance its marketability. One discourse uses the clinical language of medicine to explain the scientific rationality behind the everyday activities at DOST in an effort to emphasize the critical role the institution plays in the community. The other discourse draws on the ideology of charity to project the aura of need and provide legitimacy to DOST's constant requests for financial support from the community.

These two competing discourses were clearly discernible in the publicity brochure marking the 15th anniversary of the organization. The first 25 pages of this brochure were devoted to reports of DOST's activities, the felicitations of prominent donors, and articles from some parents and professionals extolling DOST's services to the community. For example, one article in the souvenir describes DOST's struggle for survival as enabled by the tireless efforts of its staff members - a unique group of people who possess the laudable characteristics of determination, compassion, dedication, devotion, nurturance, and service mindedness. At the same time, the narrative also describes the beneficiaries of such inspirational qualities - the children and young adults with disabilities - in the following way:

The least of God's children is not the worm or the little crawling insect, for even that has the vital urge to live, to take care of its life and survive within the space created for it in life.... The most extreme cases [of mental defective children] ... are born even without the hereditary instinct to suck. They have to be force-fed.... They may be capable of inarticulate cries but they cannot speak. Nor can they ever be taught.... The tragedy of mental retardation is its near irremediability.

This portrayal of children with mental retardation as afflicted, helpless, pitiable, innocent, and abnormal and therefore totally dependent on the benevolence of its service providers stands in sharp contrast to the competing discourse of clinical objectivity observed in another article written by a professional staff member at DOST:

The popular philosophy in dealing with the mentally retarded [sic] is normalization. Due to [the children's] mental deficiency and sub-average intelligence, they have not been able to learn in normal schools but have been instructed through special education which is highly individualized and moves towards short and long range goals, giving a child multi-sensory experiences.

I argue here that both these scripts of charity and clinical objectivity intersect strategically to locate children with disabilities and their service providers in the diametrically different positions of beneficiaries and benefactors - locations that are necessarily hierarchical. Ironically, it is through the celebration of this hierarchical relationship that DOST is able to effectively market itself in the arena of social welfare and project itself as most deserving of public philanthropy. To do so, it becomes imperative that DOST support depictions of disabled people as hapless, dependent, and almost inhuman, such that the medical discourses of rehabilitation can be deployed in order to demonstrate the organization's ability to transform their lives. That this strategy is especially successful is apparent when one leafs through the remaining 80 pages of the brochure that contains advertisements from about 123 different private local businesses in the area - numbers indicative of DOST's success in its fund raising attempts.

The Professional Staff

Given its paucity of funds, DOST is also compelled to solicit voluntary assistance from medical personnel, rehabilitation professionals, teachers, and other members of the public who are expected to offer their services for little or no wages. This is especially crucial, since DOST needs trained personnel to staff the various units it supports that include a dormitory unit, a special school, an occupational and physical therapy unit, two sheltered workshops and a manufacturing unit that produces artificial limbs.

The professional staff at DOST included the general practitioner, four medical specialists, three social workers, two occupational therapists (OT), two physical therapists (PT), one speech therapist, and two trained special education teachers who received a modest compensation for their services. However, recognizing that they could have received much better wages if they had worked in the private sector, they were often celebrated for espousing an ethic of service towards children with disabilities.

Additionally, during the six months that I spent at DOST, a dentist, two physiotherapists, and five undergraduate students from England, Australia, and Canada spent six months to one year at DOST offering their highly specialized services for virtually no compensation. This group was the most highly celebrated for their ethic of service and were often touted as role models for the Indian staff with the comment that "We do not do it for our own. We need people from outside to show us what real charity is." Both these groups collectively served to support an ethos of charity and clinical rationality that the institution painstakingly sought to project to the outside world.

The Non-Professional Staff

Finding professional staff to serve in a voluntary capacity at DOST was difficult. Therefore, Sister Benedict was forced to depend on semi-trained workers to provide some of these services. The non-professional staff at DOST included eight teachers, three PT and OT aides, eight dormitory workers and three janitorial staff, almost all of whom had not finished high school, had very little formal training in their areas of expertise, and who had learned their skills while on the job. All of them were also women, mostly from poor working class families. Many of these women were unmarried. Both the married and the unmarried women had taken jobs at DOST because of extreme financial need.

The teachers and the PT and OT aides earned salaries ranging from RS. 500 (about \$12) to RS. 800 (about \$20) a month. The dormitory workers received room and board and a monthly salary of RS. 300 (about \$8). Since these women needed wages to compensate for the services they provided, their presence produced a distorted version of the ethos of charity - a situation that often led to their devaluation as service providers to children with disabilities.

The above discussion that provides the background of this study highlights some important features of DOST's location within the Indian social context and the implications this location may have for all individuals associated with the organization. Firstly, on account of the political economic decisions of the Indian State, DOST's marginal location in the area of social welfare has been further exacerbated because the population it serves is deemed of little economic value for the rapid transformations required for this burgeoning capitalist economy. This location, in turn, necessitates that the institution project itself as an instrument of both charity and clinical rationality in an attempt to entice prospective donors to the institutions. Such representations, though enabling DOST's financial survival, continue to reinforce the aura of marginality that attaches itself firmly to its clients (children with disabilities) - the very population the DOST seeks to empower.

Moreover, I would like to emphasize here that DOST's location within this moral economy has yet another negative implication for all those associated with the institution. By locating DOST within the moral economy, what gets ignored are the social, political, and economic structures that are responsible for the oppressive, hopeless conditions within which children with severe disabilities live. Thus, the "realness" of these conditions, the feelings of despair that the families own up to, and the financial troubles experienced by voluntary organizations are all rendered "natural" by the discourse of charity that is deployed. Additionally, this discourse of charity allows the state administration and wealthy elite to celebrate private philanthropy and the moral courage of those involved in providing services to society's most neglected population without ever having to feel accountable for fostering this neglect or to feel

obliged to get their own hands "dirty" in the actual work of service provision. And it is to this discussion of the social and economic conditions that are often obscured in the above narrative that I now turn to in the essay.

Methodology

This essay is derived from a larger ethnographic case study conducted when I spent six months at DOST. The case study was a detailed examination of one setting - the voluntary organization - where my broader focus was on the cultural constructions of disability at this organization. This essay, however, as mentioned earlier, is specifically focused on exploring the role "place" plays in the construction of social difference at DOST.

Data Collection

I had volunteered at DOST six years prior to this visit and when I asked Sister Benedict's permission to do my research at DOST she willingly gave it to me with the unspoken expectation that I once again serve as a volunteer while conducting my research. As a result, during the six months that I spent at DOST, I was a participant observer in the PT & OT center, the special school, the dormitories, and the sheltered workshops where I offered my assistance whenever it was required. I kept field notes and maintained a weekly field journal documenting my observations. Then in last two months of my stay, I conducted 32 in-depth unstructured interviews with almost all the staff who worked at DOST. Before interviewing each research participant, I obtained their informed consent to use the information they shared with me in this study, assuring them that their responses would remain anonymous because I would use pseudonyms instead of their real names and disguise all other distinguishing information. Most of my interviews were in English, but there were twelve interviews that were in the local language. After returning to the U.S., I transcribed all the interview tapes. I employed a native speaker of the language to check my translations.

Data Analysis

Once I had transcribed all my tapes, I began the complex process of data analysis. Using Glazer and Strauss' (1967) grounded theory approach to qualitative data, I sorted through my extensive field notes and interviews to identify common elements/themes, which were then grouped together into categories/codes. This initial coding strategy generated more than 40 codes which, on further refining, focussed on three major themes. The themes were as follows: how disability was constructed through the organizational structures at DOST; how the everyday experiences of the staff members at DOST produced several conflicting meanings of voluntary work associated with disabled people; and finally how the staff members' varied understandings of the concept of rehabilitation produced alternative and multiple meanings of disability.

Re-examining the themes once again, I began to explore possible connections between the three identified themes. Taken together, these themes exposed the hierarchy, exclusion, and exploitation that shaped the lives of both the staff members and the disabled children with whom they worked and that forged a curious relationship between these two groups. In the specific context of this essay, I argue that this relationship was spatial and appeared to be constituted by specific political, and economic structures that had an impact on all individuals associated with DOST.

To further explore this spatial relationship, I utilized the theoretical perspective of geographical historical materialism (Harvey 1996) to describe how and why disability is spatially represented within the voluntary organization DOST. Historical materialism begins with the presupposition that labor is the central organizing force in history because human beings do not just live, but instead produce their lives within specific historical contexts through their relationship to labor. In other words, historical materialism is able to map out the dialectical relationship of individuals to social structures as determined by their locations along the social divisions of labor. Therefore, in a context where unequal social relations are both expressed and constituted via spatial relations, a geographical historical materialism will describe how and why difference is constituted via spatially ordered (often segregated) social distinctions that separate certain populations from larger society (Harvey 1996). It is this theoretical perspective that I deploy in this essay to foreground how the social division of labor observed at DOST is dependent on the ideological category of disability to justify the spatial arrangements implicated in the production of gender, class, and caste oppression.

The Rhetoric of Service v. The Politics of Need: Spatial Contradictions

Because DOST espouses an ethic of service, the organization claims to be structured according to a familial ideology that supports mutual reciprocity, voluntary service, and a consensual hierarchy. Such a position was articulated by Mr. Murugan, a middle-aged Brahmin (upper-caste) male who served as the personal assistant to Sister Benedict, the Chief Administrative Officer of DOST, and who enjoyed a great deal of administrative power. He explains his position as follows:

Unlike other institutions [for profit] this one is an institution that creates a family-like atmosphere.... We can't find any difference [hierarchy] at all. We move with every one. We share with each other. I'm the boss.... Like that we won't talk. In this type of institution such relationship we keep here.

Murugan's position invokes the familial ideology that treats the household as if it is an equitable space and therefore refuses to acknowledge the hierarchical structures that exist and that are based on unequal divisions of labor. And just like in the patriarchal household where women's subordinate position is justified because of their devalued locations based on the sexual division of labor, I observed similar hierarchies at DOST. At DOST, these hierarchies were based on the distinction made between professional services like occupational, physical, and speech therapy that were performed by mostly upper class and upper caste staff members. On the other hand, the actual work of teaching and caring for children, performed by lower caste women was often devalued because such work has traditionally been associated with reproductive labor that is not considered "real" work.

It is for this reason that Murugan's assertion was passionately contested by several members of the non-professional staff who were acutely aware of their devalued location along the social hierarchy at DOST. One of the PT aides (non-professional staff) described the constraints she experienced due to her oppressive location at DOST:

Actually, even if you want to do something for the child, we can't because we are treated

as slaves and we are not respected here...Even if we want to express something, we are afraid that the others are watching us. And all, each and every news from here goes to Sister [Benedict]. So we are afraid.

In addition to the dysfunction within the "family" that is described above, the inherent inequalities that attended those staff members who performed some of the most important reproductive labor - the caring for the residents in the dormitory - was also exposed. The general consensus of the professional staff and administrators at DOST was that the dormitory workers, unlike the other staff members, were lazy and reluctant to take on the role of benefactor - another issue that was contested by the workers themselves. I was surprised by such representations because in the course of the interviews one dormitory worker after another dispassionately recited for me the litany of their day's routine.

These dormitory workers were assigned in pairs to care for about eighteen children in each of four dormitory rooms at DOST which served also as the women's living quarters. The regular working day for these women who had to do all the care-giving tasks for the children represented a monotonous routine that extended from early morning to midnight and which continued to make demands even on their personal time. Despite the fact that the day's work for these women officially ended at around 7 p.m., it was often the case that their free time was interrupted to take care of a sick child or to clean up after children who were incontinent. For doing this work, each woman received free room and board and a monthly salary of about RS. 300 (\$8). Given that this job took up the 24-hour day, seven days each week, the salary and benefits they received did not really compensate for their labor. Why was it then, that these women still continued to do this work under circumstances that demanded that they leave their homes and families and commit their lives to the care-giving of children who were not even their own, in return for minimal wages that could barely allow them economic survival?

In addition to the sheer invisibility of their work, the historical "naturalization" of women's roles as care-givers renders the voluntarism associated with this work as a pre-condition for being a "good" woman and which required that these women transform the actual mechanics of performing such labor into a moralistic abstraction by viewing it as "labor of love." However, for most these women this transformation was not possible. It is for this reason that Sister Benedict, in the manner of the householder castigating the disinterested housewife, complains:

But again, I'm up against a wall because I don't know how to do that [motivate them]. ...If a motivation can be put in there...and help them to see that they are service givers, helpers to somebody who requires aid.... There will be less fighting. And they wouldn't care two hoots because they would feel they were needed.

However, it is not the lack of motivation that prevents these women from taking up their "noble" position as benefactors, but the oppressive social, economic, and political structures that constantly displace the mythical romanticism of the familial ideologies. Many of these women who served as dormitory workers and untrained teachers came from contexts where both patriarchy and capitalism colluded to deny them access to education and other resources that, in turn, prevented their access to other work alternatives. Often for many of them, DOST served as an institution that offered a safe haven from the brutal world they lived in. In this context, they

embraced the discourse of the "ethic of service" to obscure their dependence on the organization while at the same time struggling to live up to its ideals.

Take the example of Marika, a 28-year-old teacher who had been abandoned at birth by her parents and had been brought up in an orphanage that was run by Catholic nuns. She was able to finish high school. However, in a society where young women move from the protection of the parental home to the auspices of the husband's household, Marika found that, as a poor single woman without any means of livelihood and without any familial affiliations to form a support network, she needed to construct such a network for herself. In her search for both financial and social support, Marika found out about DOST. Even though she knew little about teaching children with disabilities, Marika was eager to take up this job because it seemed to provide for her a place of solace from the misery in her own life.

Three years after she joined DOST, Sister Benedict provided a dowry and other wedding funds for her marriage and it appeared that Marika had actually done well as per her social circumstances. However, even though she did not share this with me in the interview, it was common knowledge that her husband sometimes physically abused her. One day she had come to school with a bloodied forehead, where her husband had beaten her with a brick. This indicated that her troubles were not over, and it was here then that her own work with children with disabilities managed to give her life a new meaning. As she explains:

I did not come to do this work because of my sufferings alone. I feel it is my calling. That is what I felt when I first saw these children. I did not come to do this work because of the work conditions.... My salary is very low.... [But] I feel that God is showing me a way here. For the rest of us, there is a lot we can achieve. But these children cannot. In order to help these children become like us, become normal - to show them the way, I want to teach.

By articulating an "ethic of service" directed towards the children with disabilities in her classroom, Marika is able to distance herself from the suffering in her own life. Far removed from the misery in her home, DOST has become a place where she does indeed find solace, where she can visibly see the accomplishments of her most challenging students as a result of her efforts, and where she receives reinforcement for doing work that has a high moral value in a society that otherwise does not value her at all.

In another example, Palani, one of the dormitory workers in a similar situation as Marika, learned that marriage was the only other avenue to pursue in order to get away from the oppressive conditions of her life. However, Palani is astute enough to realize that marriage cannot provide an appropriate solution to her life's problems. Palani explains:

I want to reach a certain position before I settle down. Married life is not very easy. At present, most men seem to...feel that we should be under their control. If we reach a certain position in our life and then get married, then the adjustment process would be so much different. And there would be a lot more understanding. But if we were a little low and he is in a higher position, then it is slightly different. That is why I want to get a good position and then think in terms of marriage.

Given the vulnerable circumstances of her own location, in both the social and the economic sphere, Palani is aware of the inevitability of patriarchal control over her life unless she is able to achieve social and economic independence for herself. Therefore, she realizes that it is important to find work that will give her both social status and economic stability so that she can resist the constraints that patriarchal structures place on her life. However, like many of her co-workers, Palani's lack of education handicaps her and restricts her options of finding respectable waged work outside her family home.

For women from her social class background, one possibility was working as a servant in an upper middle class household. This dead-end option would offer her little beyond the bare minimum in terms of economic survival while placing her in a very vulnerable social position. So, instead, Palani enrolled in a short six-month course sponsored by the government on child care. Upon completion of the course, she was employed as a teacher for a balwadi (rural day care/kindergarten) in a small rural town. However, once again patriarchal restrictions intervened.

Palani, being a young single woman living alone in a strange town, and thereby outside the domain of patriarchal protection particularly in relation to her sexuality, was not allowed to work there for very long. Instead, her family persuaded her to return home and suggested that she take up the residential position of dormitory worker at DOST. Like many parents, hers have entrusted Sister Benedict as Chief Administrative Officer at DOST with the responsibility to monitor these women not only in their work related activities, but also in their private lives.

This was such a common practice that even Sharada, a 40-year old dormitory worker and a parent of a child with a disability, describes the level of institutional control that intruded into her private life:

N: What do you do after the children go to bed?

S: After they go to sleep, we are a little free. Then we sit outside and talk. We just have time pass. Sit outside and if you like anyone, then you talk to that person.

N: Do you go out sometime?

S: No. No. No outside going!!! If we have to go out anywhere we have to get permission before leaving. Only if we have any shopping to do near by, we go and ask [Sister Benedict]. Otherwise we cannot go anywhere. It's like when we are at home, whatever our age, we have to tell our mother and father where we are going. If they say you cannot go anywhere, you will not go. Similarly we have to do the same thing here. We have to tell them. We are mothers to these children and still we have to do this.

Intrusive as this control may be, its justification, as Sharada herself reflects, is based on the patriarchal ideology that upholds the control of women's sexuality within the familial context, a control that is seldom applied to men.

What was consistently reiterated in the different stories of these dormitory workers is the fact that if not for the material conditions of poverty that surrounded their lives, they would not have chosen to work at DOST. Despite the long working hours, the low wages, the devaluation of their labor, and the patriarchal control exerted over all aspects of their lives, most of these women had little choice but to continue to remain at DOST. Moreover, given the long work

hours and the real impossibility of saving any money, there were hardly any opportunities for these workers to acquire skills in more lucrative professions in mainstream society. Thus, these women had little choice but to wait their time out at DOST. The women were, therefore, caught in their own webs of destitution and super-exploitation that exclude them from participating as "productive" workers within mainstream society in a manner very similar to the children with disabilities whom they serve.

Yet at the same time, the situations of these women stand in sharp contrast to the situations of the children with disabilities served at DOST. Many of the children with disabilities, even though they came from very poor families, had access to relatively comfortable living arrangements, round-the-clock availability of medical attention, three basic meals a day, creative educational experiences, physical, occupational, and speech therapy and individualized personal care. Neither their non-disabled family members nor the non-professional staff at DOST had access to these amenities and services because of the conditions of poverty in which they lived. Thus, in a curious way due to their disability, these children enjoyed certain material advantages over their siblings, their parents, their peer groups, and particularly in this context, their caregivers who shared a similar social and economic background. What benefactors and beneficiaries shared a common was their socio-political-economic alienation from mainstream society.

Conclusion: Organizing a World of Imbalance

If, as geographers argue, place is representative of the hierarchical social relations located within specific spatial structures, then it is crucial to examine what role "place" plays in the construction of social difference at DOST. More specifically, using geographical historical materialism, I conclude this paper by examining how the spatial location of DOST related the social divisions of labor (spatial hierarchies) and what discursive implications these locations had for all those associated with the voluntary organization.

DOST being located within the moral economy required that its social division of labor assigned to its service providers/clients the two distinct and hierarchical categories of benefactor/beneficiary. However, the ethnographic data analyzed in this case study indicated that the spatial distances between benefactor/beneficiary and disabled/non-disabled were, in fact, non-existent and/or imaginary. In other words, the data suggested that in a manner similar to the children with disabilities, this group of women, though physically and mentally able, were economically, socially, and politically disabled and as a result of such destitution were collectively rendered unproductive in a struggling economy.

The ethnographic data suggests that this class of people who are generally associated with these organizations (either as clients or as service providers) have personal histories that have constructed them as extremely marginal subjects. The lack of education, restricted access to economic resources, and institutionalized exclusionary practices of racism, sexism, and casteism, render them only marginally useful to the capitalist enterprise since the market has very little use for their labor power. It is here then that institutions organized around the ideological category of disability become the most benign tools that are utilized as effective means of separating the "favorables" from the "unfavorables."

Under the rhetoric of welfare, and in this particular case, "rehabilitation," it appears to be the most useful way of constructing a division of labor that is broader than the divisions that have

historically been described in sociological theory. Such institutions can now become the newest forms of institutionalizing difference under the guise of social welfare. In this context of social welfare, disability becomes the organizing and grounding principle in the spatial organization of difference along the axes of race, class, gender, caste, and sexuality to produce subjects who are bound to live separately from those who are considered productive in the mainstream society.

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