De-colonizing Disability Theory I – Cripping Development September 19-21, 2013 Prague

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Migration is a global phenomenon, as well as disability. This paper explores the ways in which racialized women with disabilities have been excluded from the Canadian landscape. Influenced by the groundbreaking work of Dossa (2009), I argue that the social invisibility of these women stems from two factors: first, Canadian immigration policy and second, academic scholarship. To interrogate structures of exclusion, I employ a critical disability approach to explore the ways in which current immigration policy limits access of racialized women with disabilities to enter Canada as economic classes. For this purpose, I examine the policy and criteria used to define eligibility/ineligibility and admissibility/inadmissibility for immigration. In doing this, I analyze the policy in two sections.

First, the paper begins with an examination of the Immigration and Refugee Protection Act (IRPA) in general. I argue that the Canadian immigration policy; which gives credit for education and employment, produces different outcomes for racialized women with disabilities. While in many countries gender roles have perpetuated the higher education and skill acquisition of men rather than women and this situation can be worse for women with disabilities, I discuss the outcome of the policy; which is shaped by neoliberalism that promotes a market economy (Mitchell, 2001), is exclusion. Furthermore vast numbers of people who have disabilities; directly or indirectly, are the result of the war and violence that is provoked by the North, in the struggle over the control of resources of the South (Meekosha, 2008). Thus, denying entry to people with disabilities from the South by the Canadian immigration selection process, which is mostly concerned with the economic worth, is also an act of neo-colonialism (El-Lahib & Wehbi, 2011).

Second, I explore the contents of Section 38(1) (c) of IRPA in particular. I argue that if these women meet the criteria, then this Section generally excludes them because they can be expected to place an "excessive demand" on publicly funded health care or social services. I also discuss that economic and medical models of disability are the two fundamental models which dominate immigration policy (Mossof, 1998-1999). As a result, Canada admits a very insignificant number of racialized women with disabilities, because they cannot meet the criteria and represent a potential burden to the health and social welfare systems. However, by combining of those who are admitted in the other classes and those who develop disabling conditions after immigration, it is reasonable to assume that there is a sizeable population of racialized women with disabilities living in Canada.

Finally, I discuss that the concerns of these women are not addressed in disability studies and also remain peripheral in antiracist feminist literature. By borrowing Oliver's words, I argue that these women have been put in an "academic disability ghetto" (1996, p.16). Additionally, disability in the Majority world is less documented and the academic literature on disability studies has been framed within the Minor World which privileges Minority World accounts. Therefore, it is crucial to think about disability issues within the bigger picture (Priestley, 2001).